Koppers Inc

General Information

ID	Branch	SIC	County	Basin	Start	End
876	Energy and Transportation	2491	Grenada	Yazoo River	11/09/1981	

Address

Physical Address (Primary)	Mailing Address
1 Koppers Drive Tie Plant, MS 38960	PO Box 160 Tie Plant, MS 38960

Telecommunications

Type	Address or Phone
Work phone number	(662) 226-4584, Ext. 11

Alternate / Historic AI Identifiers

Alt ID	Alt Name	Alt Type	Start Date	End Date
2804300012	Koppers Industries, Inc.	Air-AIRS AFS	10/12/2000	
096000012	Koppers Industries, Inc.	Air-Title V Fee Customer	03/11/1997	
096000012	Koppers Industries, Inc.	Air-Title V Operating	03/11/1997	03/01/2002
096000012	Koppers Industries, Inc.	Air-Title V Operating	01/13/2004	01/01/2009
MSR220005	Koppers Industries, Inc.	GP-Wood Treating	09/25/1992	
MSD007027543	Koppers Industries, Inc.	Hazardous Waste-EPA ID	08/27/1999	
HW8854301	Koppers Industries, Inc.	Hazardous Waste-TSD	06/28/1988	06/28/1998
HW8854301	Koppers Industries, Inc.	Hazardous Waste-TSD	11/10/1999	09/30/2009
876	Koppers Industries, Inc.	Historic Site Name	11/09/1981	12/11/2006
876	Koppers, Inc.	Official Site Name	12/11/2006	
MSP090300	Koppers Industries, Inc.	Water-Pretreatment	11/14/1995	11/13/2000
MSP090300	Koppers Industries, Inc.	Water-Pretreatment	09/18/2001	08/31/2006
MSU081080	Koppers Industries, Inc.	Water-SOP	11/09/1981	11/30/1985

Regulatory Programs

Program	SubProgram	Start Date	End Date
Air	Title V - major	06/01/1900	
Hazardous Waste	Large Quantity Generator	08/27/1999	
Hazardous Waste	TSD - Not Classified	06/28/1988	
Water	Baseline Stormwater	01/01/1900	
Water	PT CIU	11/14/1995	
	PT CIU - Timber Products		

Water	Processing (Subpart 429)	11/14/1995	
Water	PT SIU	11/14/1995	

Locational Data

Latitude	Longitude	Metadata	S / T / R	Map Links
33 ° 44 ' 3 .00 (033.734167)	89 ° 47 ' 8 .06 (089.785572)	**Point Desc:** PG- Plant Entrance (General). Data collected by Mike Hardy on 11/8/2005. Elevation 223 feet. Just inside entrance gate. **Method:** GPS Code (Psuedo Range) Standard Position (SA Off) **Datum:** NAD83 **Type:** MDEQ	Section: Township: Range:	SWIMS TerraServer Map It

12/20/2006 12:16:40 PM

Koppers Industries Inc

General Information

ID	Branch	SIC	County	Basin	Start	End
876	Energy and Transportation	2491	Grenada	Yazoo River	11/09/1981	

Address

Physical Address (Primary)	Mailing Address
1 Koppers Drive Tie Plant, MS 38960	PO Box 160 Tie Plant, MS 38960

Telecommunications

Type	Address or Phone
Work phone number	(662) 226-4584, Ext. 11

Alternate / Historic AI Identifiers

Alt ID	Alt Name	Alt Type	Start Date	End Date
04300012	Koppers Industries, Inc.	Air-AIRS AFS	10/12/2000	
096000012	Koppers Industries, Inc.	Air-Title V Operating	03/11/1997	03/01/2002
096000012	Koppers Industries, Inc.	Air-Title V Operating	01/13/2004	01/01/2009
MSR220005	Koppers Industries, Inc.	GP-Wood Treating	09/25/1992	
MSD007027543	Koppers Industries, Inc.	Hazardous Waste-EPA ID	10/12/2000	
HW8854301	Koppers Industries, Inc.	Hazardous Waste-TSD	06/28/1988	06/28/1998
HW8854301	Koppers Industries, Inc.	Hazardous Waste-TSD	11/10/1999	09/30/2009
876	Koppers Industries, Inc.	Official Site Name	11/09/1981	
MSP090300	Koppers Industries, Inc.	Water-Pretreatment	11/14/1995	11/13/2000
MSP090300	Koppers Industries, Inc.	Water-Pretreatment	09/18/2001	08/31/2006
MSU081080	Koppers Industries, Inc.	Water-SOP	11/09/1981	11/30/1985

Regulatory Programs

Program	SubProgram
Air	Title V - major
Hazardous Waste	TSD - Not Classified
Water	Baseline Stormwater
Water	PT CIU
Water	PT CIU - Timber Products Processing (Subpart 429)
Water	PT SIU

Locational Data

Latitude	Longitude	Method	Datum	S / T / R	Map Links

Report Date: 3/3/2005 2:27:24 PM

Koppers Industries Inc

Master AI ID: 876

Agency Interest Type: Energy and Transportation Branch

SIC 1: 2491

County: Grenada

AI Basin: Yazoo River Basin

Start Date: 11/9/1981

End Date:

File Copy

Alternate/Historic AI Identifiers

Alt/Hist ID	Alternate/Historic Name	User Group	Start	End
876	Koppers Industries, Inc.	Official Site Name	11/9/1981	
04300012	Koppers Industries, Inc.	Air-AIRS AFS	10/12/2000	
MSD007027543	Koppers Industries, Inc.	Hazardous Waste-EPA ID	10/12/2000	
096000012	Koppers Industries, Inc.	Air-Title V Operating	3/11/1997	3/1/2002
HW8854301	Koppers Industries, Inc.	Hazardous Waste-TSD	11/10/1999	9/30/2009
HW8854301	Koppers Industries, Inc.	Hazardous Waste-TSD	6/28/1988	6/28/1998
MSP090300	Koppers Industries, Inc.	Water-Pretreatment	11/14/1995	11/13/2000
MSU081080	Koppers Industries, Inc.	Water-SOP	11/9/1981	11/30/1985
MSP090300	Koppers Industries, Inc.	Water-Pretreatment	9/18/2001	8/31/2006

Regulatory Programs

Program	Sub-Program
Air	Title V - major
Hazardous Waste	TSD - Not Classified
Water	PT CIU
Water	PT CIU - Timber Products Processing (Subpart 429)
Water	PT SIU

AI Location and Mailing Information

Physical Address (Primary)

Mailing Address

1 Koppers Drive
Tie Plant, MS 38960

PO Box 160
Tie Plant, MS 38960

Location Information

Section - Township - Range: - -

Telecommunications

Type	Address or Phone
Work phone number	(662) 226-4584

Staff to AI Assignments

Person Name	Assignment
Lee, David	Compliance, Management
Collier, Melissa	Compliance, Staff
Collier, Melissa	Enforcement
Rao, Maya	Permitting, Branch Manager
Rao, Maya	Permitting, Permit Writer
Whittington, Darryail	Regional Office, Management

Related People

Person	Relationship	Start	End
Henderson, Thomas	Is Contact For	1/1/1980	
Henderson, Thomas	Is Water Permit Contact For	5/28/2001	
Basilone, Timothy	Is Title V Fee Assessment Contact For	7/1/2001	
Henderson, Thomas	Is Air Permit Contact For	10/12/2001	
Basilone, Timothy	Is Contact For	10/12/2001	
Collins, Randall	Is Application Signatory for	3/28/2002	
Biddy, Haley	Is Air Permit Contact For	5/22/2002	

Related Organizations

Organization	Relationship	Start	End

Mississippi Department of Environmental Quality
Office of Pollution Control

I-sys 2000 Master Site Detail Report

Site Name: Koppers Industries Inc

PHYSICAL ADDRESS

LINE 1:	Tie Plant Road
LINE 2:	
LINE 3:	
MUNICIPALITY:	Tie Plant
STATE CODE:	MS
ZIP CODE:	38960-

MAILING ADDRESS

LINE 1:	PO Box 160
LINE 2:	
LINE 3:	
MUNICIPALITY:	Tie Plant
STATE CODE:	MS
ZIP CODE:	38960-

OTHER INFORMATION

MASTER ID:	000876
COUNTY:	Grenada
REGION	NRO
SIC 1:	2491
AIR TYPE:	TITLE V
HW TYPE:	TSD
SOLID TYPE:	
WATER TYPE:	INDUSTRIAL
BRANCH:	Energy
ECED CONTACT:	Collier, Melissa
BASIN:	

AIR PROGRAMS ☑ SIP ☐ PSD ☐ NSPS ☐ NESHAPS ☐ MACT

Mississippi Department of Environmental Quality
Office of Pollution Control

Pemits

PROGRAM	PERMIT TYPE	PERMIT #	MDEQ PERMIT CONTACT	ACTIVE
AIR	TITLE V	096000012	Burchfield, David	YES
WATER	PRE-TREATMENT	MSP090300	Collins, Bryan	YES
HAZ. WASTE	TSD	HW8854301		NO
HAZ. WASTE	EPA ID	MSD007027543		NO
HAZ. WASTE	TSD	HW8854301	Stover, Wayne	YES
GENERAL	BASELINE	MSR22005		NO
WATER	SOP	MSU081080		NO

Compliance Actions

MEDIA	ACTIVITY TYPE	SCHEDULED	COMPLETED	INSPECTED BY
HAZ WASTE	Financial Record Review	1/18/2000	1/18/2000	Twitty, Russ
WATER	CMI - PRETREATMENT			Whittington, Darryail
WATER	CEI - PRETREATMENT	9/30/2000		Twitty, Russ
WATER	CEI - NA	9/30/2000		Twitty, Russ
HAZ WASTE	Compliance Evaluation Inspection	9/30/2000		Twitty, Russ
AIR	State Compliance Inspection	9/30/2000		Twitty, Russ
WATER	CEI - NA	3/2/1999	3/2/1999	Twitty, Russ
HAZ WASTE	Compliance Evaluation Inspection	3/2/1999	3/2/1999	Twitty, Russ
AIR	State Compliance Inspection	3/2/1999	3/2/1999	Twitty, Russ

FILE COPY

INTAKE SHEET FOR REQUEST FOR ACCESS TO PUBLIC RECORDS

DATE: July 19, 1996

NAME: Dale Lanear TELEPHONE #: 704-845-2000

COMPANY: Cooper Environmental

ADDRESS: 2300 Sardis Rd., Suite Q
Charlotte NC 28227

FILES BEING REVIEWED

1. FACILITY: Koppers Tie Plant

   COUNTY: Grenada DIVISION: Air (0960-00012)

2. FACILITY: Koppers Tie Plant

   COUNTY: Grenada DIVISION: Water-MSR220005, MS0000604, MSP090300) All Files

   we do not have this

3. FACILITY: Koppers Tie Plant

   COUNTY: Grenada DIVISION: Hazardous Waste (MSD007027543) RCRA, CERCLA/UNC, SUPERFUND

4. FACILITY:

   COUNTY: DIVISION:

5. FACILITY:

   COUNTY: DIVISION:

APPOINTMENT DATE AND TIME: July 22, 1996 @ 1:00 p.m.

*****THIS IS NOT A BILL, INVOICE WILL FOLLOW WITHIN 10 DAYS*****

BILLING INFORMATION

NO. OF COPIES MADE: @ $.25 =

NOTE: NO CHARGE FOR COPIES UNDER 50

DISKETTE:

TOTAL AMOUNT DUE: $

COMMENTS:

PUBLIC RECORDS ADMINISTRATOR:
BETTY SMITH

Betty Smith

BILL ORGANIZATION:
PERSON REVIEWING FILES:

Dale Lanier

MDEQ OPC Locational Data Entry Form

MSR 220005

Page 1 of ___

Site Name: KOPPERS INDUSTRIES INC

Address: 1 KOPPERS DRIVE, TIE PLANT
City: TIE PLANT State: MS Zip: _____
County: GRENADA

Site Unique Identifier: JUST INSIDE ENTRANCE GATE
Site Unique Identifier Description: _____
(Permit#, EPA ID, Monitoring Station #, etc…)

Latitude: 33 Degrees 44 Minutes 03.0 Seconds

Longitude: 89 Degrees 47 Minutes 08.6 Seconds

Elevation: 223 ft.

Method of Collection: ___G3 - Differential
✓ G5 - Automonous/SA Off

Point Description: ✓ PG - Plant Entrance (General)
___NE - NE Corner of Land Parcel
___SE - SE Corner of Land Parcel
___NW - NW Corner of Land Parcel
___SW - SW Corner of Land Parcel
___CE - Center of Facility
___WL - Well*
___WM - Ambient Water Mon. Station
___AM - Ambient Air Mon. Station

J.H. 11/16/05

Comments: _____

*This point should be used only for wells in cases where there is no other identifiable facility.

Collected By: MIKE HARDY Date Collected: 11/8/2005

Marcus C. Smith
Plant Manager

KOPPERS

Grenada Co RECEIVED
JAN 28 2011
Dept of Environmental Quality

Koppers Inc.
Utility Poles and Piling
P. O. Box 160
Tie Plant, MS 38960
Tel 662 226 4584
Fax 662 226 4588
Smithmc@koppers.com
www.koppers.com

January 26, 2011

Mississippi Department of Environmental Quality
Chief, Industrial Waste Water Branch
Office of Pollution Control
P.O. Box 2261
Jackson, MS 39225-2261

CERTIFIED MAIL: 7008 1140 0001 0768 8533

Subject: Koppers Inc. – Grenada, MS Facility
NPDES Permit No.: MSR220005
2010 Annual Storm Water Sampling Results

Dear Sir or Madam:

Enclosed you will find information relevant to the 2010 Storm Water Sampling activities at Koppers Inc. – Grenada Plant as required by Part IV.D of NPDES Permit No. MSR220005. The sampling of storm water was conducted at Outfalls 003, 005, 006, 007, 008 and 009. The balance of the site's outfalls, Outfalls 001, 002 and 004, was not sampled pursuant to exemptions allowed under Part IV.C.4 of the permit.

Per Part IV.B of the permit a visual inspection and evaluation of all industrial areas contributing to storm water discharge was conducted. Accordingly, a completed "Inspection Report and Certification Form" as well as supplemental information is attached.

I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Sincerely,

Marcus C. Smith

Marcus C. Smith

CC: John Irvine – KI CSG
MDEQ – Data Integration Division

NTDC

Part VII.

Inspection Report and Certification Form
For Storm Water Pollution Prevention Plan Evaluation

Wood Treater Storm Water General NPDES Permit No. MSR22 0005
(Fill in your Certificate of Coverage Number)

(Please Print)

Owner and/or Operator: Koppers, Inc.

Facility Name: Koppers, Inc. - Grenada Plant

Facility Location: One Koppers Drive, Tie Plant, MS 38960

Date and Time: December 17, 2010 at approximately 2:00 PM

Inspector(s): Marcus C. Smith and Blair R. Simpson

Date of Last Rainfall: December 15 and 17, 2010 **Estimated Amount:** 0.50" and 0.50" respectively

Deficiencies Noted During the Inspection (attach additional sheets if necessary):

See Attachment.

Corrective Action Needed (attach additional sheets if necessary):

See Attachment.

Corrective Action Compliance Schedule:

See Attachment.

Based upon this inspection which I or personnel under my direct supervision conducted, I certify that all pollution control measures are adequate and have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan filed with the Office of Pollution Control and good engineering practices as required by the above referenced permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons 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 fines and imprisonment for knowing violations.

I further certify that the Mississippi Office of Pollution Control has been notified of any changes pertinent to our storm water permit as required in Part II.C.

Marcus C. Smith	Marcus C. Smith	01/26/2011
Authorized Name (Print)	**Signature**	**Date**

These reports shall be submitted annually, as required in the permit, to:

Chief, Industrial Branch
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385

NPDES Permit No.: MSR220005
KOPPERS INC. – Grenada Plant
Coverage Year: 2010
Inspection Date – December 17, 2010
Inspectors – Marcus C. Smith / Blair R. Simpson

ANNUAL COMPREHENSIVE SITE INSPECTION AND SWPPP EVALUATION

Drainage Site Map

The Facility's Integrated Contingency Plan (ICP) contains six maps of the site providing various information. Specifically, Figure 3, of the ICP contains a map of the site's surface water drainage patterns and areas providing information including the watershed areas of the site as well as the location of their respective Outfalls. The information contained in these maps is accurate.

Potential Pollutant Sources and Pollutant Controls

Exposed Inventory Sources

Significant materials stored at the facility which are exposed to rainfall include untreated and treated wood, untreated wood waste fuel for the boiler, and general yard waste materials (wood debris, culls, metal banding, and municipal trash). Pollutants that may potentially be detected in storm water and their potential sources are described as follows:
Wood preservative constituents. Wood treating operations have been conducted on the property since the early 1900s. Residual preservative materials may be present due to historical waste disposal practices employed at the facility and former wood preserving practices. The facility is currently undergoing remediation by the former owner under RCRA corrective action. Other potential sources of pollutants in storm water include storm water runoff from treated wood storage on the yard. In addition to exposed inventory, another potential source of pollutant to storm water may be organic material, generally from raw wood material brought to the facility. These materials may enter runoff from the stacks of untreated wood and the boiler fuel storage area.
In addition to exposed inventory are significant materials stored such as treating solutions. Treating solutions are delivered by rail or by truck. All treating solutions are managed in tanks within secondary containment, within the pressure treating cylinders within secondary containment, or on the 40 CFR 265, Subpart W drip pad and ancillary contained wastewater treatment system. Daily yard inspections are completed to inspect for any release of treating solution off of the drip pad in accordance with Contingency Plans. There are special requirements for facilities which store, process, or otherwise handle Section 313 listed chemicals. This plant uses pentachlorophenol and creosote, which are such chemicals, and reports releases of these annually on the Form R reports. These materials are stored in tanks and used in the process area where full secondary containment is provided. Thus, all storm water which could come in contact with the chemicals is contained. All liquids, including storm water, from the containment areas is processed in the wastewater treatment system and discharged to the POTW. No water from process or tank secondary containment is discharged with storm water runoff.

Exposed Inventory Pollutant Controls/BMPs

Untreated Wood, Untreated Wood Waste Fuel, Untreated Wood debris/culls, and Organic Material
Controls/BMPs instituted and maintained include:

- The ditches in and around the plant's untreated storage area's do not appear to be eroding. As a precaution rye grass is periodically sowed at applicable areas of the site.
- Bark generated at the operation is periodically removed from the area to reduce the risk of it impacting storm water.
- Ongoing efforts to maintain the plant's storage yard. This is an ongoing item requiring routine maintenance. In 2010, clay gravel and stone was purchased on a periodic basis to help maintain the

yard.

- A catch basin installed adjacent the wood fuel handing area serves to capture silt and debris transferred via storm water toward Outfall 004 is maintained by operating personnel in this area. Maintaining the basin helps to reduce the organic loading placed on all areas downstream from this basin.
- The plant's storage yard has been oriented so as to allow for storm water to be diverted around key stored product. Culverts are installed and maintained as required. These yards are maintained as needed.
- Debris is removed from the yard as required. Blocks and cut-offs from framing operations are cleaned on a routine basis.
- Rip rap and hay bales have been used at the head of some ditches and around culvert inlets and outlets. This has particularly been the case for Outfalls 006 and 007 in previous years.
- Provide defined paths of storm water flow from loading and unloading areas enhancing vegetation in these areas to serve to filter and capture suspended solids.
- Divert storm water around storage area.
- Position storage areas on stable, well-drained soils; conduct routine maintenance.
- Keep the area free of debris.
- Use silt fence, hay bales, and/or rip rap check dams in drainage ways.
- Utilize and maintain catch basins near weirs at outfalls.
- Maintain all ditch banks; sewing vegetation where applicable and beneficial. Utilize mixed vegetation ensuring its presence during each season of the year.
- Do not drive loaders or other equipment through ditches or on banks. Stay on established roadways.
- Ensure that stored bark does not fall into the north ditch.
- Work to maintain the roadways and ditches around the peeling operation
- Outlet structures to prevent offsite deposition
- Employee SWPPP Training

Treated Wood, Treated Wood Storage, Treated Wood debris/culls
Controls/BMPs instituted and maintained include:

- Efforts to continue to lower the treated wood foot print at the site continued to be an area of discussion in the 2010 Pollution Prevention Plan Team (P3 Team) initiatives. Additionally, emphasis was placed on isolating treated inventory to a minimum number of outfall watersheds to further the progress made in 2009 with this effort.
- The plant's Drip Pad Operating Procedure and Treated Wood Storage Yard Inspection Procedure continue to be employed to control the impact of treated wood on storm water. This is evidenced by the associated records.
- Drippage ceased procedures have been monitored. A log is completed and maintained accordingly. Operators work to keep treated material on the drip pad as long as feasibly possible. If charges continue to drip they are placed back in the cylinders for additional steaming/cleaning cycles. Evidence of these activities are available on plant records.
- Cylinders are periodically cleaned when evidence of sludge is observed and believed linked to dirty cylinders. Limpid points are monitored weekly and maintained at acceptable levels thus reducing the accumulation of solids on treated products.
- Treated wood poles are clean and free of solids subsequent to treating cycles. Steam flash cycles are used to help further ensure treated products are clean
- Effort is employed to ensure all treated poles are stored in elevated bins, thus minimizing their contact with storm water running during storm events.
- Effort to manage pole reclass reduces the overall volume of treated wood waste generated at the site.
- Skids are used to help keep untreated products off of the ground and reduce the accumulation of dust and mud on products as they are placed into the treating cylinders. Inevitably this reduces the level of solids on the surface of wood products as well as the volume of waste generated in the plant's process equipment.
- The plant continues to monitor preservative usage for environmental and economic reasons.

- Manage treating preservatives to ensure acceptable levels thus ensuring clean surfaces on treated wood products.
- Work to minimize the need to cut treated wood. However, when it is necessary, manage the saw dust associated with the cutting appropriately.
- Maintain the condition of the untreated wood yard thus reducing the likelihood of mud and debris from accumulating on products prior to treatment and thus increasing the opportunity for storm water impact subsequent to the treating process.
- Maintain the cleanliness of treating cylinders. Clean them on a routine schedule.
- Adjust preservative cycles as necessary working to ensure that the quantity of preservative placed in wood products is minimized yet compliant to AWPA retention and penetration requirements.
- When feasible apply post-treatment processes such as steam flashing and expansion baths.
- Work to minimize the quantity of treated wood stored on the site.
- Ensure the appropriate implementation of yard drippage inspection programs
- Outlet structures to prevent offsite deposition
- Employee SWPPP Training

Treating Solutions Management in Tanks, Unloading, and Drip Pad
Controls/BMPs instituted and maintained include:

- Integrity testing of tanks utilizing API 653 guidelines for tanks occurred in 2010
- A professional engineer reviewed the facility's secondary containments and certified its revised ICP accordingly in March 2009. Secondary containments are adequate to meet RCRA capacity requirements.
- High level alarms are installed in tank numbers 6,7,8,9,10, 13, 34 as well as in each blow-down tank, oil/water separators 48A and 50 as well as the final wastewater discharge tank.
- Preservative unloading areas are routinely inspected
- The curtain installed at the back of Cylinders 1 – 5 remains intact and is kept closed as a containment tool. Concrete walkways are installed along the perimeter of the back of the cylinder basement to offer better walking and working surfaces. These are also sealed. An added benefit of this concrete has been the reduced risk of the ground being contacted by preservative in the instance of a gasket failure.
- In the event that temporary hosing is used, caution is exercised to ensure that spills do not occur. Lines are tied off to the receiving vessel securely. Additional containment is placed beneath the hoses in the event that a line should leak. These operations are rare and, whenever they are used, they are monitored by plant personnel. An SOP was developed in 2009 and revised in 2010 for proper transfer of hazardous materials when using temporary hosing.
- New process lines were installed at various areas of the Treating Department to help further reduce the risk of spills from this source. The splash curtains installed along the eastern perimeter of the cylinder basement containment area are kept closed to further reduce the risk of spills.
- The curbing around the perimeter of the creosote tank car unloading station was raised to further reduce the risk of a spill in 2008 as a result of the P3 Teams efforts. This curbing remains intact in 2010.
- In 2007 a roof was installed over the drip pad to offer added protection at the transition points. The roof measuring approximately 410' x 95' covers a large portion of the drip pad and reduces the volume of process water being treated in the plant's WWTS as well as the risk of spills at these transition points. These points are dammed during non-operational days to reduce the risks of spills.
- Traffic on the drip pad remains limited to standard traffic required for the operation of the plant. Dedicated equipment is used on the pad. Tires are washed prior to entry and exit from the pad.
- Containments are inspected on a routine basis. Various work has been conducted to better improve the plant's containment and control abilities.
- Standard Operating Procedures have been written and/or revised as needed, and relayed to plant employees. These procedures are reviewed periodically for accuracy and thoroughness. Annual training on the plant's various Best Management Practices is conducted.
- Level gauges are provided for various tanks. The installation of additional gauges occurred in 2009 and remains intact in 2010.

- Ensure that containments are adequate and allow no run-on or run-off of preservative. Evaluate and minimize the risks of spills in these areas.
- Ensure that employees involved in this function of the plant's operations are adequately trained.
- Outlet structures to prevent offsite deposition
- Employee SWPPP Training

Wastewater Treatment System
Controls/BMPs instituted and maintained include:

- The plant's discharge line connecting the WWTS to the POTW was replaced with a double-walled line in 2007 to reduce the potential for a release of wastewater. Weekly inspections of this line have continued in 2010.
- Tank farm and WWTS (Biological Treatment Area) containments are routinely inspected and maintained as necessary.
- Outlet structures to prevent offsite deposition
- Employee SWPPP Training

Metal Scrap, Municipal Trash
Controls/BMPs instituted and maintained include:

- Scrap metal is washed (as necessary) and placed in a hopper provided by the recycler. The quantities of scrap generated on the plant are tracked.
- Recycle scrap metal as it is generated. Do not allow it to accumulate on the ground.
- Trash collection hoppers are provided around the site to allow all employees to properly dispose of municipal trash thus minimizing its migration into storm water
- Outlet structures to prevent offsite deposition
- Employee SWPPP Training

Fuels, Oils, and Lubricants Sources

Fuels are delivered by tank truck and transferred into aboveground storage tanks located within a concrete secondary containment with a roof. This fuel is dispensed by electrical fuel pumps. A spill kit is located on the western edge of the fuel storage containment area. Care is taken to prevent spillage during dispensing of fuel into vehicles and equipment. Oils and hydraulic fluid are typically delivered in 55-gallon drums, although some are transferred from the delivery truck to tanks. A drum pump is then used for dispensing the fluid to equipment or the equipment is placed near to the tank for filling. Care is taken to prevent spillage during loading and dispensing of oils and hydraulic fluid to equipment and containers.

Fuels, Oils, and Lubricants Pollutant Controls/BMPs
Controls/BMPs instituted and maintained include:

- Ensure that all oils and waste generated during maintenance and servicing activities in the plant are managed in a timely and appropriate fashion.
- Park all mobile equipment on concrete or paved surfaces.
- Ensure that all equipment washing activities are conducted on the wash pad.
- The refueling area is cleaned and maintained on a routine basis. The concrete surrounding this area was coated with a sealant in 2008.
- Various lubricants continue to be stored inside of a building equipped with a curb and a concrete staging ramp leading into the building that was installed in 2006. This ramp was likewise coated with a sealant in 2008.
- Both mobile and stationary equipment is inspected each day of operation for leaks that could impact storm water. Documentation of these inspections as well as maintenance work orders is kept at the site.
- Maintenance activities of leaks that may impact storm water are managed through a computer program that was adopted in 2008. The program is referred to as C-Works.

- Modifications were made to the sumps and curbing servicing the shop pad.
- The containments for the diesel, gasoline, creosote, and pentachlorophenol unloading/loading stations are inspected and maintained. Employees who operate in these areas have been trained on SPCC issues as well as storm water pollution prevention measures.
- A spill kit is maintained at the refueling area and an Standard Operating Procedure addressing environmental issues at this area is maintained.
- An outside party continues to manage used oil and lubricants. The containments around the refueling area and lubricants building were sealed in 2008.
- Outlet structures to prevent offsite deposition
- Employee SWPPP Training

Ancillary, Boiler, and Wastewater Treatment Chemicals Sources

Acids, Caustics, and other ancillary boiler and wastewater treatment chemicals are delivered in 55-gallons drums, or other containers from the vendor.

Ancillary, Boiler, and Wastewater Treatment Chemicals Pollutant Controls/BMPs
Controls/BMPs instituted and maintained include:

- Chemicals related to the operations of the WWTS are enclosed and placed over secondary containment bins where necessary.
- The containers are within concrete containment.
- Care is taken to prevent spillage during dispensing.
- Ensure that all secondary containment is adequate and intact.
- Provide level gauges thus reducing the risk of spills.
- Outlet structures to prevent offsite deposition
- Employee SWPPP Training

Ancillary Operations/Areas Sources

Tie Management operations/areas and Pole Management operations/areas pose potential pollutants to storm water runoff from oil drips or hydraulic hose/equipment leaks.

Ancillary Operations/Areas Pollutant Controls/BMPs
Controls/BMPs instituted and maintained include:

- Concrete floors and/or roofs and/or regularly scheduled inspections with passive containment or active attended equipment response as controls measures.
- A product used to hamper the growth of fungi on poles is used at the Peeling Operation. This product, "Stabrite", is received in 55 gallon drums. These drums are placed in secondary containments. The product is diluted with water into a tank that is staged over secondary containment. This tank was fitted with a larger roof and larger containment in 2009. The concentrate for this dilute solution was placed in a over pack drum and moved to a storage building with concrete flooring.
- The Tie Sorter and A&B Mill pose a risk due to the hydraulic equipment utilized in processing cross ties. Various measures have been implemented to minimize this risk including concrete containment underneath the Tie Stacker and Tie Gangnailer equipment, installation of a roof over the Tie Stacker as well as the employing of routine inspections. In 2009, efforts were made to protect hydraulic lines on key equipment from rupture by wrapping friction points with protective materials.
- Outlet structures to prevent offsite deposition
- Employee SWPPP Training

List of Significant Historical Spills and Leaks Sources and Controls Implemented

All historical spill areas were inspected for evidence of residuals/preservatives as well as the continued presence and effectiveness of controls and countermeasures.

South End Of Cylinders 1 -5
There was no evidence of preservative on the ground outside of containment at the south end of the cylinders. The curtain installed at the back of Cylinders 1 – 5 remains intact and is kept closed as a containment tool. Concrete walkways are installed along the perimeter of the back of the cylinder basement to offer better walking and working surfaces. These are also sealed. An added benefit of this concrete has been the reduced risk of the ground being contacted by preservative in the instance of a gasket failure.

East of Door to Cylinder No. 5
An examination of the area east of Cylinder No. 5 revealed no evidence of preservative residual being on the ground. Additional concrete was added along the cylinder basement near the north end of Cylinder No. 5. While the focus of this effort was improved walking and working surfaces at the site and added benefit has been the reduced risk of soil being contacted by preservative in the instance of a gasket failure.

West of Tank Farm Containment Area
There is no presence of residual along the west side of the containment area of the tank farm. The containments remain intact. The containment wall in this area is routinely inspected for cracks and leaks with sealant applied as necessary.

West of Boiler Building
An examination of the area revealed no evidence of preservative residual being on the ground. No additional recognized risk was identified during the inspection. Improvements implemented in past years and reflected on past evaluations remain intact.

Temporary Hosing
In the event that temporary hosing is used, caution is exercised to ensure that spills do not occur. Lines are tied off to the receiving vessel securely. Additional containment is placed beneath the hoses in the event that a line should leak. These operations are rare and, whenever they are used, they are monitored by plant personnel. An SOP was developed in 2009 and revised in 2010 for proper transfer of hazardous materials when using temporary hosing.

Sump Pump Behind Shop
An examination of the area revealed no evidence of preservative residual being on the ground. Modifications were made to the sumps and curbing servicing the shop pad. The shop pad was equipped with two sumps that worked in series. Storm and wash water captured by the first sump situated on the shop pad gravity fed to a second sump that was equipped with a pump that transferred it to the cylinder basement. This water was subsequently transferred to the plant's waste water treatment system (WWTS).
In 2008 the plant's Pollution Prevention Plan Team (P3 Team) implemented a plan to reduce the risk of spills at this area. The secondary sump was taken out of service. The sump on the shop pad was equipped with a pump. The lines servicing the sump were piped to Drip Pad Sump No. 1 and fully contained via the use of a double-wall pipe and existing containments. Water captured at Drip Pad Sump No. 1 is automatically transferred to the plant's WWTS. Additionally, a contractor was hired to install curbing around the perimeter of the shop pad to a height adequate enough to hold a 24 hour, 25 year storm event. These modifications remain intact in 2010.

Hazardous Waste Boxes
An examination of the area revealed no evidence of preservative residual being on the ground. Two hazardous waste boxes are used at the site. One serves to hold K001 waste and the other serves to hold FO32/FO34 waste. Both are kept on concrete pads. They are inspected on a weekly basis.

Process Lines In Treating Department

An examination of the area revealed no evidence of preservative residual being on the ground. New process lines were installed at various areas of the Treating Department to help further reduce the risk of spills from this source. The splash curtains installed along the eastern perimeter of the cylinder basement containment area are kept closed to further reduce the risk of spills.

POTW Discharge Lines
No evidence of spillage or leakage was identified during this inspection. The plant's discharge line connecting the WWTS to the POTW was replaced with a double-walled line in 2007. Weekly inspections of this line have continued in 2010.

Creosote Unloading Station
This curbing remains intact in 2010 and no signs of spillage or leakage outside of containment was identified during this inspection. The curbing around the perimeter of the creosote tank car unloading station was previously raised to further reduce the risk of a spill as a result of the P3 Teams efforts.

Drip Pad Transition Points
An examination of the area revealed no evidence of preservative residual being on the ground. In 2007 a roof was installed over the drip pad to offer added protection at the transition points. The roof measuring approximately 410' x 95' covers a large portion of the drip pad and reduces the volume of process water being treated in the plant's WWTS as well as the risk of spills at these transition points. These points are dammed during non-operational days to reduce the risks of spills.

Pollution Prevention Manager/Committee

The Pollution Prevention Team is responsible for developing the pollution prevention plan and assisting in its implementation, maintenance, and revision. The members of the team are listed in the Facility's ICP plan by job title. In January 2010, the team met and discussed measures to improve the Plant's storm water runoff.

Outlet Structures (Outfalls) Inspection and Evaluation

Ensure drains are open as applicable; detail status of soil stability around the outfall; status of banks and inlets: storm water discharges "shall be free from...debris, oil, scum, and other floating materials other than trace amounts...eroded soils and other materials that will settle to form objectionable deposits in receiving waters...suspended solids, turbidity and color at levels inconsistent with the receiving waters...chemicals in concentrations that would cause violation of State Water Quality Criteria in the receiving waters..."

Outfall 001

Outfall 001 is located at the southern end of the plant. The area surrounding the outfall is grassy. No solids have settled in the outfall. The appearance of oils, scum, or solids deposited by storm events is not present. No objectionable deposit of material has been observed below the outfall. Vegetation is well established in the general area of the outfall. Sheens, oils and chemicals were not evident during the inspection or prior inspections in 2010. No significant changes observed in this outfall.

Outfall 002

Outfall 002's watershed services the Switch Tie Mill Operation as well as a storage barn area. No objectionable deposits of material have been observed below this outfall. The clarity of the water discharged from the outfall was clearer than that of the receiving waters. There was no evidence of oils or chemicals in the discharge at this Outfall. Soil in the area of the Outfall appears stable. Sheens, oils and chemicals were not evident during inspections. The valve and riser assembly servicing this outfall remains operable. No significant changes observed in this outfall.

Outfall 003

Outfall 003's watershed encompasses the Maintenance Department. Vegetation around Outfall 003, particularly along the bank near the Central Ditch, remained well established. Inspections revealed no evidence of sheens, scum, oils or floating materials. There was no evidence of objectionable deposits in or around the receiving waters. The water discharge at this Outfall has a tendency to be turbid; however, is typically consistent with the receiving waters in the Central Ditch. Rip rap around the discharge remains intact as well as silt fencing applied adjacent to this outfall. A load of sand is maintained near Outfall 003 as a precautionary measure to stop the flow of a spill from the shop and/or treating areas if needed. No significant changes observed in this outfall.

Outfall 004

The water discharged from this area was somewhat turbid however was consistent with receiving waters and no adverse deposits have been observed at the discharge point where the flow feeds to the Central Ditch. There has been no evidence of oils, chemicals or scum during this inspection or previous inspections. Effort was employed to ensure vegetation was maintained around the slopes of the detention pond. Concrete erosion control materials were applied to the weir area of this outfall during 2009. More erosion control materials should be applied to this outfall near the discharge side of the outfall to prevent further erosion. A load of sand has been staged at the western side of the dam of the detention pond serving Outfall 004 as an emergency response measure in the instance of a spill of oils or chemicals from the treating area.

Outfall 005

Inspections revealed that the storm water discharges from this area was free of scum and oils. There are no receiving waters immediately below this outfall. Rather, the storm water runs through several acres of forested bottomland prior to reaching any receiving waters. Its travel route is winding and predominately indistinguishable. There is no evidence of objectionable deposits associated with the discharge of this Outfall. This particular outfall is surrounded by trees and vegetation. Floating twigs and leaves were periodically observed in the detention pond side of this outfall. By design of the slow flow riser, solids such as leaves and twigs will not pass through into the discharge. Vegetation in the area of the Outfall is well established. Soil in the area of the Outfall appears stable. The valve and riser assembly remains operable. During the 2010 sampling event, care was taken to sample when there was no active flow of stormwater entering the discharge of this outfall from neighboring property. No significant changes were observed in this outfall.

Outfall 006

Inspections revealed that the discharge was free of oils, debris and scum. The detention basin servicing this outfall is situated in close proximity to standing trees and vegetation. Twigs and leaves were periodically observed in the waters of the detention pond side of the outfall. By design of the floating skimmer, solids such as leaves and twigs will not pass through into the discharge. The discharge from the pond feeds to a drainage culvert. There was no evidence of objectionable deposits associated with the discharge from this watershed observed. Improvements made to this detention pond in recent years, such as the ditches and drainage ways being cleaned and improved, slopes graded, ditches sloped, and rip rap installed to slow storm water flow remained intact. Hay bales were installed in different areas of this watershed to slow the flow into this outfall in 2010.

Outfall 007

Inspections noted that the discharge from the pond was free of signs of scum and oil. Some floating solids from the operations south of the outfall were observed in the discharge drainage way near rip-rap and vegetation. However, these were captured in the drainage way adjacent and below the weir. No evidence of these items reaching the receiving waters was observed. This outfall utilizes a floating skimmer. Improvements made to this detention pond in recent years, such as the ditches and drainage ways being cleaned and improved, slopes graded, ditches sloped, and rip rap installed to slow storm water flow remained

intact. Vegetation is well established in the areas around the outfall. Hay bales were installed in different areas of this watershed to slow the flow into this outfall in 2010.

Outfall 008

Ground vegetation remained intact and soil in the area of the Outfall remained stable. Inspections showed that no objectionable deposits resulted from storm water discharge from this watershed. Discharged storm water was clearer than receiving waters and free of oil, floating materials, debris and scum. The valve and riser assembly in this Outfall remains operable. No significant changes observed in this outfall.

Outfall 009

Inspections revealed that discharge from the watershed of Outfall 009 was free of oil, debris, scum and other floating solids. The clarity of the water discharged from the outfall was generally better than the receiving waters. The outfall drains directly into the plant's Central Ditch through a slow flow riser pipe. No objectionable deposit of material has been observed below the outfall. Vegetation around the Outfall remained intact. Little evidence of erosion was observed at the discharge area and soil in the area of the Outfall appears stable. The valve and riser assembly in this Outfall remains operable.

Per Part III.C.6 of the facility's NPDES Permit the Storm Water Pollution Prevention Plan (SWPPP) requires amending whenever it proves to be ineffective in controlling storm water pollutants. This document represents an extension of the SWPPP. While the 2010 storm water analytical results reveal no excursions of the criteria set forth in the "State of Mississippi Water Criteria For Intrastate, Interstate and Costal Waters", the items listed below represent tentative actions to be employed in 2011 in an effort to improve storm water discharge quality.

Potential improvements suggested for outfall 003 may include:

- Heavy equipment parking relocations
- Improve tram storage location
- Disc and sow the old parking area behind the maintenance shop no longer used for automobile and equipment movement
- Install rip-rap areas within drainage way
- Shorten drainage pipe coming from north side of maintenance shop
- Modify the sampling point of this outfall to a more permanent feature such as a V-notch outlet or other appropriate structure

Potential improvements suggested for outfall 005 may include:

- Placing hay bales in strategic areas of drainages leading to this outfall
- Sow grass where appropriate
- Install silt fencing where appropriate
- Remove treated material from the watershed of this outfall
- Install culverts where appropriate to shorten distances and reduce length of travel for heavy equipment around the watershed of this outfall
- Raise the outlet pipe of this outfall for better access to sampling point

Potential improvements suggested for outfall 007 may include:

- Install more hay bales in strategic areas in drainages leading to this outfall

Potential improvements suggested for all other outfalls may include:

- Sediment and erosion controls measures in strategic areas where appropriate

General Site Improvements / Spill Risk Mitigation Measures may include:

- Double-wall the 4-foot POTW discharge piping that exists at the WWTP wall just prior to the underground double-walled pipe.
- Continue to install additional high level alarms to tankage where needed
- Investigate additional concrete surfacing around the rail car unloading area
- Re-directing pipe and/or fittings on drip pad sump pumps 2, 3, and 4 that have potential for off containment sprays as appropriate. Further protect the filter press housing with appropriate splash guarding
- Periodically perform maintenance to spill/splash guarding for cylinders 1-5
- Install spill/splash guarding in the area of the penta mixing tankage
- Protect exposed piping/valves with potential for off-containment sprays/splash with freeze protection measures

This inspection is responsive to Part III.7. (c) and Part IV.B of NPDES Permit No.: MSR220005. It reflects an evaluation of the activities that took place during the year 2010 and previous years to better improve and/or ensure that storm water was not contaminated by plant activities.

Signature Marcus C. Smith 01/26/2011

PERMITTEE NAME/ADDRESS (nclude Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38760

FACILITY LOCATION GRENADA COUNTY
TIE PLANT MS 38760
ATTN: ~~PLANT MANAGER~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

MSR220005	001 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIME

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		NODI-9	******	NODI-9	(12)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	********	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR. IR METH)TOT,R 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS 32730 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 28 2011

PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith/Plant Mgr.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith 1/26/11

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		A		
662	226-4584	2011	01	26
AREA CODE	NUMBER	YEAR	MO	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (eference all attachments here)

REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)

Exempt per Permit MSR 220005 Part IV.C.4

PA Form 3320 1 (Rev. 3/99) Previous editions may be used.

Form Approved.
OMB No. 2040-0004

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: ~~JANICE HAWKINS~~ Marcus Smith

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	001 B

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 28 2011

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith / Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith 1/26/11	662	226-4584	2011	01	26
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Exempt per Permit MSR 220005 Part IV.C.4

Form Approved.
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY

LOCATION TIE PLANT MS 38960

ATTN: ~~VANCE WASKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	002 A

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER GRAB SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		NODI-9	******	NODI-9	(12)	NODI-9	NODI-9	NODI-9
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
[illegible] 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 28 2011

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith / Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith 1/26/11	662	226-4584	2011	01	26
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORMS DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES); TOTAL DISCHARGE (GALLONS).

Exempt per Permit MSR 220005 Part IV.C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY

LOCATION TIE PLANT MS 38960

ATTN: ~~VANCE HASKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	002 B

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 28 2011

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith / Plant Mgr
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith 1/26/11
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	2011	01	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Exempt per Permit MSR 220005 Part IV.C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY LOCATION GRENADA COUNTY
TIE PLANT MS 38960

ATTN: ~~[illegible]~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	003 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMBI

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		6.7	******	6.7	(12)	0	Annual	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	248	(19)	0	Annual	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT.RE	SAMPLE MEASUREMENT	******	******		******	******	5.4	(19)	0	Annual	Grab
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.094	(19)	0	Annual	Grab
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0.0069	(19)	0	Annual	Grab
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 28 2011

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith/Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	2011	01	27

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)

Storm Date: November 15, 2010/Duration: estimated 24 hrs/Rainfall: 1.10" (Inches)/Total Discharge: 0.03276 (MGD)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: ~~JANE PACKING~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	003 B
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL TIMBI
STORMWATER COMPOSITE SAMPLING

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	102	(19)	0	Annual	Compos
	PERMIT REQUIREMENT	******	******	***** *****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.073	(19)	0	Annual	Compos
	PERMIT REQUIREMENT	******	******	***** *****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Compos
	PERMIT REQUIREMENT	******	******	***** *****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 28 2011

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith / Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662	226-4584	2011	01	27
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Storm Date: November 15, 2010 / Duration: estimated 24hrs / Rainfall: 1.10" (Inches) / Total Discharge: 0.03276 (MGD)

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

PAGE OF

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: ~~[illegible]~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	004 A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMBF

*** NO DISCHARGE [ ] ***

Form Approved.
OMB No. 2040-0004

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		NODI-9	******	NODI-9	(12)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHE [illegible] E FLU N [illegible]	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	E IT REQUIRE ENT										

RECEIVED
JAN 28 2011

E/T PRIN I AL EXECU V OFFICER

Marcus C. Smith/Plant Mgr
TYP D R PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marc C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
662	226-4584	2011	01	26
AREA CODE	NUMBER	YEAR	MO	DAY

COMM NTS AND EXPLANATION O ANY IOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) OTAL DISCHARGE (GALLONS).

Exempt per Permit MSR 220005 Part IV.C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

PAG

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: ~~[illegible]~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	004 B
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL
TIMBE
STORMWATER COMPOSITE SAMPLING
*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 28 2011

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith/Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662	226-4584	2011	01	26
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Exempt per Permit MSR 22005 Part IV.C.4

Form Approved.
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME ROPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: ~~[illegible]~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	005 A

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER GRAB SAMPLING

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		6.6	******	6.6	(12)	0	Annual	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	********	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	17.2	(19)	0	Annual	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RO	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.079	(19)	0	Annual	Grab
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0.016	(19)	0	Annual	Grab
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 28 2011

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith/Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662	226-4584	2011	01	26
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS), ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

Storm Date: November 25, 2010 / Duration: estimated 9.3 hrs / Rainfall: 0.60" (Inches) / Total Discharge: 0.08384 (MGD)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY

LOCATION TIE PLANT MS 38960

ATTN: ~~VANCE HASKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	005 B

MINOR
(SUBR NO)
F - FINAL TIMBF
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 28 2011

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith / Plant Mgr
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	2011	01	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Storm Date: November 25, 2010 / Duration: estimated 9.3 hrs / Rainfall 0.60" (Inches) / Total Discharge: 0.08384 (MGD)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY

LOCATION TIE PLANT MS 38960

ATTN: ~~[illegible]~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	006 A

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER GRAB SAMPLING

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		6.7	******	6.7	(12)	0	Annual	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	19.2	(19)	0	Annual	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.057	(19)	0	Annual	Grab
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0.030	(19)	0	Annual	Grab
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 28 2011

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith/Plant Mgr.

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	2011	01	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

Storm Date: November 25, 2010/Duration: estimated 9.3 hrs/Rainfall 0.60" (Inches)/Total Discharge: 0.0304 (MGD)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY LOCATION GRENADA COUNTY
TIE PLANT MS 38960

ATTN: ~~VERGE HASKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	006 B
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

*** NO DISCHARGE |__| ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 28 2011

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith / Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662	226-4584	2011	01	26
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Storm Date: November 25, 2010 / Duration: estimated 9.3 hrs / Rainfall 0.60" (Inches) / Total Discharge: 0.0304 (MGD)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY

LOCATION TIE PLANT MS 38960

ATTN: ~~VANCE HASKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	007 A

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER GRAB SAMPLING

*** NO DISCHARGE [ ] ***

Form Approved.
OMB No. 2040-0004

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		6.7	******	6.7	(12)	0	Annual	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	71.6	(19)	0	Annual	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.27	(19)	0	Annual	Grab
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0.019	(19)	0	Annual	Grab
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 28 2011

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith / Plant Mgr.

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	2011	01	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

Storm Date: November 25, 2010 / Duration: estimated 9.3 hrs / Rainfall 0.60" (inches) / Total Discharge: 0.04224 (MGD)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY LOCATION GRENADA COUNTY
TIE PLANT MS 38960
ATTN: ~~NANCY HARKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005 — PERMIT NUMBER
007 B — DISCHARGE NUMBER

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
10	01	01	10	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL TIMBF
STORMWATER COMPOSITE SAMPLING

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 28 2011

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith/Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662	226-4584	2011	01	26
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Storm Date: November 25, 2010 / Duration: estimated 9.3 hrs / Rainfall 0.60" (Inches) / Total Discharge: 0.046224 (MGD)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY

LOCATION TIE PLANT MS 38960

ATTN: ~~VANCE HASKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	008 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMBE

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		6.6	******	6.6	(12)	0	Annual	Grab
00400 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
EFFLUENT GROSS VALUE											
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	64.4	(19)	0	Annual	Grab
00530 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
EFFLUENT GROSS VALUE											
OIL & GREASE (FREON EXTR -IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
00550 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******		REPORT X	MG/L		ANNUAL	GRAB
EFFLUENT GROSS VALUE											
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.00025	(19)	0	Annual	Grab
[illegible] 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
EFFLUENT GROSS VALUE											
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0.0074	(19)	0	Annual	Grab
46200 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
F [illegible]											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 28 2011

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith / Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	2011	01	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)

Storm Date: November 25, 2010/Duration: estimated 9.3 hrs/Rainfall: 0.60"(Inches)/Total Discharge: 0.00768 (MGD)

PA Form 3320-1 (Rev. 3/99) Previous editions may be used.
PAGE OF

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY LOCATION GRENADA COUNTY
TIE PLANT MS 38960

ATTN: ~~[illegible]~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	008 B
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

TIMBI

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	10.8	(19)	0	Annual	Compos
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.00057	(19)	0	Annual	Compos
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.014	(19)	0	Annual	Compos
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 28 2011

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith/Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
662 226-4584		2011	01	26
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Storm Date: November 25, 2010 / Duration: estimated 9.3 hrs / Rainfall: 0.60" (Inches) / Total Discharge: 0.00768 (MGD)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY

LOCATION TIE PLANT MS 38960

ATTN: ~~VANCE HASKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	009 A

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER GRAB SAMPLING

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		6.6	******	6.6	(12)	0	Annual	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	12.0	(19)	0	Annual	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.0011	(19)	0	Annual	Grab
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0.019	(19)	0	Annual	Grab
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 28 2011

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith / Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	2011	01	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

Storm Date: November 25, 2010 / Duration: estimated 9.3 hrs / Rainfall 0.60" (Inches) / Total Discharge 0.03424 (MGD)

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form. PAGE OF

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160

TIE PLANT MS 38760

FACILITY GRENADA COUNTY

LOCATION TIE PLANT MS 38760

ATTN: ~~[illegible]~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*

DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	009 R

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

*** NO DISCHARGE [ ] ***

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	03	01	TO	10	12	31

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

JAN 28 2011

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith / Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662	226-4584	2011	01	26
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Storm Date: November 25, 2010 / Duration: estimated 9.3 hrs / Rainfall 0.60" (Inches) / Total Discharge: 0.03424

Marcus C. Smith
Plant Manager

KOPPERS

Koppers Inc.
Utility Poles and Piling
P. O. Box 160
Tie Plant, MS 38960
Tel 662 226 4584
Fax 662 226 4588
Smithmc@koppers.com
www.koppers.com

January 26, 2011

Mississippi Department of Environmental Quality
Office of Pollution Control
Data Integration Division
P.O. Box 2261
Jackson, MS 39225-2261

RECEIVED
JAN 28 2011

CERTIFIED MAIL: 7008 1140 0001 0768 8540

Subject: Koppers Inc. – Grenada, MS Facility
NPDES Permit No.: MSR220005
2010 Annual Storm Water Sampling Results

Dear Sir or Madam:

Enclosed you will find information relevant to the 2010 Storm Water Sampling activities at Koppers Inc. – Grenada Plant as required by Part IV.D of NPDES Permit No. MSR220005. The sampling of storm water was conducted at Outfalls 003, 005, 006, 007, 008 and 009. The balance of the site's outfalls, Outfalls 001, 002 and 004, was not sampled pursuant to exemptions allowed under Part IV.C.4 of the permit.

Per Part IV.B of the permit a visual inspection and evaluation of all industrial areas contributing to storm water discharge was conducted. Accordingly, a completed "Inspection Report and Certification Form" as well as supplemental information is attached.

I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Sincerely,

Marcus C. Smith

Marcus C. Smith

CC: John Irvine – KI CSG
Chief, Industrial Wastewater Branch

Part VII.

Inspection Report and Certification Form For Storm Water Pollution Prevention Plan Evaluation

Wood Treater Storm Water General NPDES Permit No. MSR22 0005
(Fill in your Certificate of Coverage Number)

(Please Print)

Owner and/or Operator: Koppers, Inc.

Facility Name: Koppers, Inc - Grenada Plant

Facility Location: One Koppers Drive, Tie Plant, MS 38960

Date and Time: December 17, 2010 at approximately 2:00 PM

Inspector(s): Marcus C. Smith and Blair R. Simpson

Date of Last Rainfall: December 15 and 17, 2010 **Estimated Amount:** 0.50" and 0.50" respectively

Deficiencies Noted During the Inspection (attach additional sheets if necessary):

See Attachment.

Corrective Action Needed (attach additional sheets if necessary):

See Attachment.

Corrective Action Compliance Schedule:

See Attachment.

Based upon this inspection which I or personnel under my direct supervision conducted, I certify that all pollution control measures are adequate and have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan filed with the Office of Pollution Control and good engineering practices as required by the above referenced permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons 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 fines and imprisonment for knowing violations.

I further certify that the Mississippi Office of Pollution Control has been notified of any changes pertinent to our storm water permit as required in Part II.C.

Marcus C. Smith	Marcus C. Smith	01/26/2011
Authorized Name (Print)	**Signature**	**Date**

These reports shall be submitted annually, as required in the permit, to:

Chief, Industrial Branch
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385

NPDES Permit No.: MSR220005
KOPPERS INC. – Grenada Plant
Coverage Year: 2010
Inspection Date – December 17, 2010
Inspectors – Marcus C. Smith / Blair R. Simpson

ANNUAL COMPREHENSIVE SITE INSPECTION AND SWPPP EVALUATION

Drainage Site Map

The Facility's Integrated Contingency Plan (ICP) contains six maps of the site providing various information. Specifically, Figure 3, of the ICP contains a map of the site's surface water drainage patterns and areas providing information including the watershed areas of the site as well as the location of their respective Outfalls. The information contained in these maps is accurate.

Potential Pollutant Sources and Pollutant Controls

Exposed Inventory Sources

Significant materials stored at the facility which are exposed to rainfall include untreated and treated wood, untreated wood waste fuel for the boiler, and general yard waste materials (wood debris, culls, metal banding, and municipal trash). Pollutants that may potentially be detected in storm water and their potential sources are described as follows:
Wood preservative constituents. Wood treating operations have been conducted on the property since the early 1900s. Residual preservative materials may be present due to historical waste disposal practices employed at the facility and former wood preserving practices. The facility is currently undergoing remediation by the former owner under RCRA corrective action. Other potential sources of pollutants in storm water include storm water runoff from treated wood storage on the yard. In addition to exposed inventory, another potential source of pollutant to storm water may be organic material, generally from raw wood material brought to the facility. These materials may enter runoff from the stacks of untreated wood and the boiler fuel storage area.
In addition to exposed inventory are significant materials stored such as treating solutions. Treating solutions are delivered by rail or by truck. All treating solutions are managed in tanks within secondary containment, within the pressure treating cylinders within secondary containment, or on the 40 CFR 265, Subpart W drip pad and ancillary contained wastewater treatment system. Daily yard inspections are completed to inspect for any release of treating solution off of the drip pad in accordance with Contingency Plans. There are special requirements for facilities which store, process, or otherwise handle Section 313 listed chemicals. This plant uses pentachlorophenol and creosote, which are such chemicals, and reports releases of these annually on the Form R reports. These materials are stored in tanks and used in the process area where full secondary containment is provided. Thus, all storm water which could come in contact with the chemicals is contained. All liquids, including storm water, from the containment areas is processed in the wastewater treatment system and discharged to the POTW. No water from process or tank secondary containment is discharged with storm water runoff.

Exposed Inventory Pollutant Controls/BMPs

Untreated Wood, Untreated Wood Waste Fuel, Untreated Wood debris/culls, and Organic Material
Controls/BMPs instituted and maintained include:

- The ditches in and around the plant's untreated storage area's do not appear to be eroding. As a precaution rye grass is periodically sowed at applicable areas of the site.
- Bark generated at the operation is periodically removed from the area to reduce the risk of it impacting storm water.
- Ongoing efforts to maintain the plant's storage yard. This is an ongoing item requiring routine maintenance. In 2010, clay gravel and stone was purchased on a periodic basis to help maintain the

yard.

- A catch basin installed adjacent the wood fuel handing area serves to capture silt and debris transferred via storm water toward Outfall 004 is maintained by operating personnel in this area. Maintaining the basin helps to reduce the organic loading placed on all areas downstream from this basin.
- The plant's storage yard has been oriented so as to allow for storm water to be diverted around key stored product. Culverts are installed and maintained as required. These yards are maintained as needed.
- Debris is removed from the yard as required. Blocks and cut-offs from framing operations are cleaned on a routine basis.
- Rip rap and hay bales have been used at the head of some ditches and around culvert inlets and outlets. This has particularly been the case for Outfalls 006 and 007 in previous years.
- Provide defined paths of storm water flow from loading and unloading areas enhancing vegetation in these areas to serve to filter and capture suspended solids.
- Divert storm water around storage area.
- Position storage areas on stable, well-drained soils; conduct routine maintenance.
- Keep the area free of debris.
- Use silt fence, hay bales, and/or rip rap check dams in drainage ways.
- Utilize and maintain catch basins near weirs at outfalls.
- Maintain all ditch banks; sewing vegetation where applicable and beneficial. Utilize mixed vegetation ensuring its presence during each season of the year.
- Do not drive loaders or other equipment through ditches or on banks. Stay on established roadways.
- Ensure that stored bark does not fall into the north ditch.
- Work to maintain the roadways and ditches around the peeling operation
- Outlet structures to prevent offsite deposition
- Employee SWPPP Training

Treated Wood, Treated Wood Storage, Treated Wood debris/culls
Controls/BMPs instituted and maintained include:

RECEIVED
JAN 28 2011

- Efforts to continue to lower the treated wood foot print at the site continued to be an area of discussion in the 2010 Pollution Prevention Plan Team (P3 Team) initiatives. Additionally, emphasis was placed on isolating treated inventory to a minimum number of outfall watersheds to further the progress made in 2009 with this effort.
- The plant's Drip Pad Operating Procedure and Treated Wood Storage Yard Inspection Procedure continue to be employed to control the impact of treated wood on storm water. This is evidenced by the associated records.
- Drippage ceased procedures have been monitored. A log is completed and maintained accordingly. Operators work to keep treated material on the drip pad as long as feasibly possible. If charges continue to drip they are placed back in the cylinders for additional steaming/cleaning cycles. Evidence of these activities are available on plant records.
- Cylinders are periodically cleaned when evidence of sludge is observed and believed linked to dirty cylinders. Limpid points are monitored weekly and maintained at acceptable levels thus reducing the accumulation of solids on treated products.
- Treated wood poles are clean and free of solids subsequent to treating cycles. Steam flash cycles are used to help further ensure treated products are clean
- Effort is employed to ensure all treated poles are stored in elevated bins, thus minimizing their contact with storm water running during storm events.
- Effort to manage pole reclass reduces the overall volume of treated wood waste generated at the site.
- Skids are used to help keep untreated products off of the ground and reduce the accumulation of dust and mud on products as they are placed into the treating cylinders. Inevitably this reduces the level of solids on the surface of wood products as well as the volume of waste generated in the plant's process equipment.
- The plant continues to monitor preservative usage for environmental and economic reasons.

- Manage treating preservatives to ensure acceptable levels thus ensuring clean surfaces on treated wood products.
- Work to minimize the need to cut treated wood. However, when it is necessary, manage the saw dust associated with the cutting appropriately.
- Maintain the condition of the untreated wood yard thus reducing the likelihood of mud and debris from accumulating on products prior to treatment and thus increasing the opportunity for storm water impact subsequent to the treating process.
- Maintain the cleanliness of treating cylinders. Clean them on a routine schedule.
- Adjust preservative cycles as necessary working to ensure that the quantity of preservative placed in wood products is minimized yet compliant to AWPA retention and penetration requirements.
- When feasible apply post-treatment processes such as steam flashing and expansion baths.
- Work to minimize the quantity of treated wood stored on the site.
- Ensure the appropriate implementation of yard drippage inspection programs
- Outlet structures to prevent offsite deposition
- Employee SWPPP Training

Treating Solutions Management in Tanks, Unloading, and Drip Pad
Controls/BMPs instituted and maintained include:

- Integrity testing of tanks utilizing API 653 guidelines for tanks occurred in 2010
- A professional engineer reviewed the facility's secondary containments and certified its revised ICP accordingly in March 2009. Secondary containments are adequate to meet RCRA capacity requirements.
- High level alarms are installed in tank numbers 6,7,8,9,10, 13, 34 as well as in each blow-down tank, oil/water separators 48A and 50 as well as the final wastewater discharge tank.
- Preservative unloading areas are routinely inspected
- The curtain installed at the back of Cylinders 1 – 5 remains intact and is kept closed as a containment tool. Concrete walkways are installed along the perimeter of the back of the cylinder basement to offer better walking and working surfaces. These are also sealed. An added benefit of this concrete has been the reduced risk of the ground being contacted by preservative in the instance of a gasket failure.
- In the event that temporary hosing is used, caution is exercised to ensure that spills do not occur. Lines are tied off to the receiving vessel securely. Additional containment is placed beneath the hoses in the event that a line should leak. These operations are rare and, whenever they are used, they are monitored by plant personnel. An SOP was developed in 2009 and revised in 2010 for proper transfer of hazardous materials when using temporary hosing.
- New process lines were installed at various areas of the Treating Department to help further reduce the risk of spills from this source. The splash curtains installed along the eastern perimeter of the cylinder basement containment area are kept closed to further reduce the risk of spills.
- The curbing around the perimeter of the creosote tank car unloading station was raised to further reduce the risk of a spill in 2008 as a result of the P3 Teams efforts. This curbing remains intact in 2010.
- In 2007 a roof was installed over the drip pad to offer added protection at the transition points. The roof measuring approximately 410' x 95' covers a large portion of the drip pad and reduces the volume of process water being treated in the plant's WWTS as well as the risk of spills at these transition points. These points are dammed during non-operational days to reduce the risks of spills.
- Traffic on the drip pad remains limited to standard traffic required for the operation of the plant. Dedicated equipment is used on the pad. Tires are washed prior to entry and exit from the pad.
- Containments are inspected on a routine basis. Various work has been conducted to better improve the plant's containment and control abilities.
- Standard Operating Procedures have been written and/or revised as needed, and relayed to plant employees. These procedures are reviewed periodically for accuracy and thoroughness. Annual training on the plant's various Best Management Practices is conducted.
- Level gauges are provided for various tanks. The installation of additional gauges occurred in 2009 and remains intact in 2010.

- Ensure that containments are adequate and allow no run-on or run-off of preservative. Evaluate and minimize the risks of spills in these areas.
- Ensure that employees involved in this function of the plant's operations are adequately trained.
- Outlet structures to prevent offsite deposition
- Employee SWPPP Training

Wastewater Treatment System
Controls/BMPs instituted and maintained include:

- The plant's discharge line connecting the WWTS to the POTW was replaced with a double-walled line in 2007 to reduce the potential for a release of wastewater. Weekly inspections of this line have continued in 2010.
- Tank farm and WWTS (Biological Treatment Area) containments are routinely inspected and maintained as necessary.
- Outlet structures to prevent offsite deposition
- Employee SWPPP Training

Metal Scrap, Municipal Trash
Controls/BMPs instituted and maintained include:

- Scrap metal is washed (as necessary) and placed in a hopper provided by the recycler. The quantities of scrap generated on the plant are tracked.
- Recycle scrap metal as it is generated. Do not allow it to accumulate on the ground.
- Trash collection hoppers are provided around the site to allow all employees to properly dispose of municipal trash thus minimizing its migration into storm water
- Outlet structures to prevent offsite deposition
- Employee SWPPP Training

Fuels, Oils, and Lubricants Sources

Fuels are delivered by tank truck and transferred into aboveground storage tanks located within a concrete secondary containment with a roof. This fuel is dispensed by electrical fuel pumps. A spill kit is located on the western edge of the fuel storage containment area. Care is taken to prevent spillage during dispensing of fuel into vehicles and equipment. Oils and hydraulic fluid are typically delivered in 55-gallon drums, although some are transferred from the delivery truck to tanks. A drum pump is then used for dispensing the fluid to equipment or the equipment is placed near to the tank for filling. Care is taken to prevent spillage during loading and dispensing of oils and hydraulic fluid to equipment and containers.

Fuels, Oils, and Lubricants Pollutant Controls/BMPs
Controls/BMPs instituted and maintained include:

- Ensure that all oils and waste generated during maintenance and servicing activities in the plant are managed in a timely and appropriate fashion.
- Park all mobile equipment on concrete or paved surfaces.
- Ensure that all equipment washing activities are conducted on the wash pad.
- The refueling area is cleaned and maintained on a routine basis. The concrete surrounding this area was coated with a sealant in 2008.
- Various lubricants continue to be stored inside of a building equipped with a curb and a concrete staging ramp leading into the building that was installed in 2006. This ramp was likewise coated with a sealant in 2008.
- Both mobile and stationary equipment is inspected each day of operation for leaks that could impact storm water. Documentation of these inspections as well as maintenance work orders is kept at the site.
- Maintenance activities of leaks that may impact storm water are managed through a computer program that was adopted in 2008. The program is referred to as C-Works.

- Modifications were made to the sumps and curbing servicing the shop pad.
- The containments for the diesel, gasoline, creosote, and pentachlorophenol unloading/loading stations are inspected and maintained. Employees who operate in these areas have been trained on SPCC issues as well as storm water pollution prevention measures.
- A spill kit is maintained at the refueling area and an Standard Operating Procedure addressing environmental issues at this area is maintained.
- An outside party continues to manage used oil and lubricants. The containments around the refueling area and lubricants building were sealed in 2008.
- Outlet structures to prevent offsite deposition
- Employee SWPPP Training

Ancillary, Boiler, and Wastewater Treatment Chemicals Sources

Acids, Caustics, and other ancillary boiler and wastewater treatment chemicals are delivered in 55-gallons drums, or other containers from the vendor.

Ancillary, Boiler, and Wastewater Treatment Chemicals Pollutant Controls/BMPs
Controls/BMPs instituted and maintained include:

- Chemicals related to the operations of the WWTS are enclosed and placed over secondary containment bins where necessary.
- The containers are within concrete containment.
- Care is taken to prevent spillage during dispensing.
- Ensure that all secondary containment is adequate and intact.
- Provide level gauges thus reducing the risk of spills.
- Outlet structures to prevent offsite deposition
- Employee SWPPP Training

Ancillary Operations/Areas Sources

Tie Management operations/areas and Pole Management operations/areas pose potential pollutants to storm water runoff from oil drips or hydraulic hose/equipment leaks.

Ancillary Operations/Areas Pollutant Controls/BMPs
Controls/BMPs instituted and maintained include:

- Concrete floors and/or roofs and/or regularly scheduled inspections with passive containment or active attended equipment response as controls measures.
- A product used to hamper the growth of fungi on poles is used at the Peeling Operation. This product, "Stabrite", is received in 55 gallon drums. These drums are placed in secondary containments. The product is diluted with water into a tank that is staged over secondary containment. This tank was fitted with a larger roof and larger containment in 2009. The concentrate for this dilute solution was placed in a over pack drum and moved to a storage building with concrete flooring.
- The Tie Sorter and A&B Mill pose a risk due to the hydraulic equipment utilized in processing cross ties. Various measures have been implemented to minimize this risk including concrete containment underneath the Tie Stacker and Tie Gangnailer equipment, installation of a roof over the Tie Stacker as well as the employing of routine inspections. In 2009, efforts were made to protect hydraulic lines on key equipment from rupture by wrapping friction points with protective materials.
- Outlet structures to prevent offsite deposition
- Employee SWPPP Training

List of Significant Historical Spills and Leaks Sources and Controls Implemented

All historical spill areas were inspected for evidence of residuals/preservatives as well as the continued presence and effectiveness of controls and countermeasures.

South End Of Cylinders 1 -5
There was no evidence of preservative on the ground outside of containment at the south end of the cylinders. The curtain installed at the back of Cylinders 1 – 5 remains intact and is kept closed as a containment tool. Concrete walkways are installed along the perimeter of the back of the cylinder basement to offer better walking and working surfaces. These are also sealed. An added benefit of this concrete has been the reduced risk of the ground being contacted by preservative in the instance of a gasket failure.

East of Door to Cylinder No. 5
An examination of the area east of Cylinder No. 5 revealed no evidence of preservative residual being on the ground. Additional concrete was added along the cylinder basement near the north end of Cylinder No. 5. While the focus of this effort was improved walking and working surfaces at the site and added benefit has been the reduced risk of soil being contacted by preservative in the instance of a gasket failure.

West of Tank Farm Containment Area
There is no presence of residual along the west side of the containment area of the tank farm. The containments remain intact. The containment wall in this area is routinely inspected for cracks and leaks with sealant applied as necessary.

West of Boiler Building
An examination of the area revealed no evidence of preservative residual being on the ground. No additional recognized risk was identified during the inspection. Improvements implemented in past years and reflected on past evaluations remain intact.

Temporary Hosing
In the event that temporary hosing is used, caution is exercised to ensure that spills do not occur. Lines are tied off to the receiving vessel securely. Additional containment is placed beneath the hoses in the event that a line should leak. These operations are rare and, whenever they are used, they are monitored by plant personnel. An SOP was developed in 2009 and revised in 2010 for proper transfer of hazardous materials when using temporary hosing.

JAN 2 8 2011

Sump Pump Behind Shop
An examination of the area revealed no evidence of preservative residual being on the ground. Modifications were made to the sumps and curbing servicing the shop pad. The shop pad was equipped with two sumps that worked in series. Storm and wash water captured by the first sump situated on the shop pad gravity fed to a second sump that was equipped with a pump that transferred it to the cylinder basement. This water was subsequently transferred to the plant's waste water treatment system (WWTS).
In 2008 the plant's Pollution Prevention Plan Team (P3 Team) implemented a plan to reduce the risk of spills at this area. The secondary sump was taken out of service. The sump on the shop pad was equipped with a pump. The lines servicing the sump were piped to Drip Pad Sump No. 1 and fully contained via the use of a double-wall pipe and existing containments. Water captured at Drip Pad Sump No. 1 is automatically transferred to the plant's WWTS. Additionally, a contractor was hired to install curbing around the perimeter of the shop pad to a height adequate enough to hold a 24 hour, 25 year storm event. These modifications remain intact in 2010.

Hazardous Waste Boxes
An examination of the area revealed no evidence of preservative residual being on the ground. Two hazardous waste boxes are used at the site. One serves to hold K001 waste and the other serves to hold FO32/FO34 waste. Both are kept on concrete pads. They are inspected on a weekly basis.

Process Lines In Treating Department

An examination of the area revealed no evidence of preservative residual being on the ground. New process lines were installed at various areas of the Treating Department to help further reduce the risk of spills from this source. The splash curtains installed along the eastern perimeter of the cylinder basement containment area are kept closed to further reduce the risk of spills.

POTW Discharge Lines
No evidence of spillage or leakage was identified during this inspection. The plant's discharge line connecting the WWTS to the POTW was replaced with a double-walled line in 2007. Weekly inspections of this line have continued in 2010.

Creosote Unloading Station
This curbing remains intact in 2010 and no signs of spillage or leakage outside of containment was identified during this inspection. The curbing around the perimeter of the creosote tank car unloading station was previously raised to further reduce the risk of a spill as a result of the P3 Teams efforts.

Drip Pad Transition Points
An examination of the area revealed no evidence of preservative residual being on the ground. In 2007 a roof was installed over the drip pad to offer added protection at the transition points. The roof measuring approximately 410' x 95' covers a large portion of the drip pad and reduces the volume of process water being treated in the plant's WWTS as well as the risk of spills at these transition points. These points are dammed during non-operational days to reduce the risks of spills.

Pollution Prevention Manager/Committee

The Pollution Prevention Team is responsible for developing the pollution prevention plan and assisting in its implementation, maintenance, and revision. The members of the team are listed in the Facility's ICP plan by job title. In January 2010, the team met and discussed measures to improve the Plant's storm water runoff.

Outlet Structures (Outfalls) Inspection and Evaluation

Ensure drains are open as applicable; detail status of soil stability around the outfall; status of banks and inlets: storm water discharges "shall be free from…debris, oil, scum, and other floating materials other than trace amounts…eroded soils and other materials that will settle to form objectionable deposits in receiving waters…suspended solids, turbidity and color at levels inconsistent with the receiving waters…chemicals in concentrations that would cause violation of State Water Quality Criteria in the receiving waters…"

Outfall 001

Outfall 001 is located at the southern end of the plant. The area surrounding the outfall is grassy. No solids have settled in the outfall. The appearance of oils, scum, or solids deposited by storm events is not present. No objectionable deposit of material has been observed below the outfall. Vegetation is well established in the general area of the outfall. Sheens, oils and chemicals were not evident during the inspection or prior inspections in 2010. No significant changes observed in this outfall.

Outfall 002

Outfall 002's watershed services the Switch Tie Mill Operation as well as a storage barn area. No objectionable deposits of material have been observed below this outfall. The clarity of the water discharged from the outfall was clearer than that of the receiving waters. There was no evidence of oils or chemicals in the discharge at this Outfall. Soil in the area of the Outfall appears stable. Sheens, oils and chemicals were not evident during inspections. The valve and riser assembly servicing this outfall remains operable. No significant changes observed in this outfall.

Outfall 003

Outfall 003's watershed encompasses the Maintenance Department. Vegetation around Outfall 003, particularly along the bank near the Central Ditch, remained well established. Inspections revealed no evidence of sheens, scum, oils or floating materials. There was no evidence of objectionable deposits in or around the receiving waters. The water discharge at this Outfall has a tendency to be turbid; however, is typically consistent with the receiving waters in the Central Ditch. Rip rap around the discharge remains intact as well as silt fencing applied adjacent to this outfall. A load of sand is maintained near Outfall 003 as a precautionary measure to stop the flow of a spill from the shop and/or treating areas if needed. No significant changes observed in this outfall.

Outfall 004

The water discharged from this area was somewhat turbid however was consistent with receiving waters and no adverse deposits have been observed at the discharge point where the flow feeds to the Central Ditch. There has been no evidence of oils, chemicals or scum during this inspection or previous inspections. Effort was employed to ensure vegetation was maintained around the slopes of the detention pond. Concrete erosion control materials were applied to the weir area of this outfall during 2009. More erosion control materials should be applied to this outfall near the discharge side of the outfall to prevent further erosion. A load of sand has been staged at the western side of the dam of the detention pond serving Outfall 004 as an emergency response measure in the instance of a spill of oils or chemicals from the treating area.

Outfall 005

Inspections revealed that the storm water discharges from this area was free of scum and oils. There are no receiving waters immediately below this outfall. Rather, the storm water runs through several acres of forested bottomland prior to reaching any receiving waters. Its travel route is winding and predominately indistinguishable. There is no evidence of objectionable deposits associated with the discharge of this Outfall. This particular outfall is surrounded by trees and vegetation. Floating twigs and leaves were periodically observed in the detention pond side of this outfall. By design of the slow flow riser, solids such as leaves and twigs will not pass through into the discharge. Vegetation in the area of the Outfall is well established. Soil in the area of the Outfall appears stable. The valve and riser assembly remains operable. During the 2010 sampling event, care was taken to sample when there was no active flow of stormwater entering the discharge of this outfall from neighboring property. No significant changes were observed in this outfall.

Outfall 006

Inspections revealed that the discharge was free of oils, debris and scum. The detention basin servicing this outfall is situated in close proximity to standing trees and vegetation. Twigs and leaves were periodically observed in the waters of the detention pond side of the outfall. By design of the floating skimmer, solids such as leaves and twigs will not pass through into the discharge. The discharge from the pond feeds to a drainage culvert. There was no evidence of objectionable deposits associated with the discharge from this watershed observed. Improvements made to this detention pond in recent years, such as the ditches and drainage ways being cleaned and improved, slopes graded, ditches sloped, and rip rap installed to slow storm water flow remained intact. Hay bales were installed in different areas of this watershed to slow the flow into this outfall in 2010.

Outfall 007

Inspections noted that the discharge from the pond was free of signs of scum and oil. Some floating solids from the operations south of the outfall were observed in the discharge drainage way near rip-rap and vegetation. However, these were captured in the drainage way adjacent and below the weir. No evidence of these items reaching the receiving waters was observed. This outfall utilizes a floating skimmer. Improvements made to this detention pond in recent years, such as the ditches and drainage ways being cleaned and improved, slopes graded, ditches sloped, and rip rap installed to slow storm water flow remained

intact. Vegetation is well established in the areas around the outfall. Hay bales were installed in different areas of this watershed to slow the flow into this outfall in 2010.

Outfall 008

Ground vegetation remained intact and soil in the area of the Outfall remained stable. Inspections showed that no objectionable deposits resulted from storm water discharge from this watershed. Discharged storm water was clearer than receiving waters and free of oil, floating materials, debris and scum. The valve and riser assembly in this Outfall remains operable. No significant changes observed in this outfall.

Outfall 009

Inspections revealed that discharge from the watershed of Outfall 009 was free of oil, debris, scum and other floating solids. The clarity of the water discharged from the outfall was generally better than the receiving waters. The outfall drains directly into the plant's Central Ditch through a slow flow riser pipe. No objectionable deposit of material has been observed below the outfall. Vegetation around the Outfall remained intact. Little evidence of erosion was observed at the discharge area and soil in the area of the Outfall appears stable. The valve and riser assembly in this Outfall remains operable.

Per Part III.C.6 of the facility's NPDES Permit the Storm Water Pollution Prevention Plan (SWPPP) requires amending whenever it proves to be ineffective in controlling storm water pollutants. This document represents an extension of the SWPPP. While the 2010 storm water analytical results reveal no excursions of the criteria set forth in the "State of Mississippi Water Criteria For Intrastate, Interstate and Costal Waters", the items listed below represent tentative actions to be employed in 2011 in an effort to improve storm water discharge quality.

Potential improvements suggested for outfall 003 may include:

- Heavy equipment parking relocations
- Improve tram storage location
- Disc and sow the old parking area behind the maintenance shop no longer used for automobile and equipment movement
- Install rip-rap areas within drainage way
- Shorten drainage pipe coming from north side of maintenance shop
- Modify the sampling point of this outfall to a more permanent feature such as a V-notch outlet or other appropriate structure

Potential improvements suggested for outfall 005 may include:

- Placing hay bales in strategic areas of drainages leading to this outfall
- Sow grass where appropriate
- Install silt fencing where appropriate
- Remove treated material from the watershed of this outfall
- Install culverts where appropriate to shorten distances and reduce length of travel for heavy equipment around the watershed of this outfall
- Raise the outlet pipe of this outfall for better access to sampling point

Potential improvements suggested for outfall 007 may include:

- Install more hay bales in strategic areas in drainages leading to this outfall

Potential improvements suggested for all other outfalls may include:

- Sediment and erosion controls measures in strategic areas where appropriate

General Site Improvements / Spill Risk Mitigation Measures may include:

- Double-wall the 4-foot POTW discharge piping that exists at the WWTP wall just prior to the underground double-walled pipe.
- Continue to install additional high level alarms to tankage where needed
- Investigate additional concrete surfacing around the rail car unloading area
- Re-directing pipe and/or fittings on drip pad sump pumps 2, 3, and 4 that have potential for off containment sprays as appropriate. Further protect the filter press housing with appropriate splash guarding
- Periodically perform maintenance to spill/splash guarding for cylinders 1-5
- Install spill/splash guarding in the area of the penta mixing tankage
- Protect exposed piping/valves with potential for off-containment sprays/splash with freeze protection measures

.

This inspection is responsive to Part III.7. (c) and Part IV.B of NPDES Permit No.: MSR220005. It reflects an evaluation of the activities that took place during the year 2010 and previous years to better improve and/or ensure that storm water was not contaminated by plant activities.

Signature Marcus C. Smith 01/26/2011

Form Approved.
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME: KOPPERS INDUSTRIES INC

ADDRESS: P O BOX 160
TIE PLANT MS 38960

FACILITY: GRENADA COUNTY
LOCATION: TIE PLANT MS 38960

ATTN: ~~VANCE HASKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	001 A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO.	DAY
FROM	10	01	01	TO	10	12	31

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMBR

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		NODI-9	******	NODI-9	(12)	NODI-9	NODI-9	NODI-9
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	******	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	******	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	******	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	******	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
34000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	******	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 28 2011

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith/Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith 1/26/11
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	2011	01	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES); AND TOTAL DISCHARGE (GALLONS).

Exempt per Permit MSR 220005 Part IV.C.4

Form Approved.
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY LOCATION GRENADA COUNTY
TIE PLANT MS 38960

ATTN: ~~WANCL HINSKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	001 B
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith / Plant Mgr.

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith 1/26/11

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	2011	01	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Exempt per Permit MSR 220005 Part IV.C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY

LOCATION TIE PLANT MS 38960

ATTN: ~~VANCE HASKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	002 A

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER GRAB SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		NODI-9	******	NODI-9	(12)	NODI-9	NODI-9	NODI-9
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith / Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith 1/26/11
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	2011	01	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORMS DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES); TOTAL DISCHARGE (GALLONS).

Exempt per Permit MSR 220005 Part IV.C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. 00408/0[illegible] This is a 4-part form. PAGE 1 OF

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY

LOCATION TIE PLANT MS 38960

ATTN: ~~VANCE HASKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

MSR220005	002 B
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

*** NO DISCHARGE [ ] ***

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	31	TO	10	12	31

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS: TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith / Plant Mgr	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith 1/26/11	662	226-4584	2011	01	26
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Exempt per Permit MSR 220005 Part IV.C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME ROGERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: ~~WANCE HOSKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
MSN220005	003 A

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL
TIMBR
STORMWATER GRAB SAMPLING
*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		6.7	******	6.7	(12)	0	Annual	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	248	(19)	0	Annual	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT, RC	SAMPLE MEASUREMENT	******	******		******	******	5.4	(19)	0	Annual	Grab
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.094	(19)	0	Annual	Grab
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0.0069	(19)	0	Annual	Grab
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Marcus C. Smith/Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226 4584	2011	01	27

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
REPORT STORM DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)
Storm Date: November 15, 2010/Duration: estimated 24 hrs/Rainfall: 1.10" (Inches)/Total Discharge: 0.03276 (MGD)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY

LOCATION TIE PLANT MS 38960

ATTN: ~~VANCE HASKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	003 B

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	102	(19)	0	Annual	Compos
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.073	(19)	0	Annual	Compos
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Compos
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith / Plant Mgr.

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	2011	~~27~~ 01 (MCS)	27

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Storm Date: November 15, 2010 / Duration: estimated 24hrs / Rainfall: 1.10" (Inches) / Total Discharge: 0.03276 (MGD)

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

00411/0[illegible]

This is a 4-part form.

PAGE 1 OF

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: ~~WANCE HOSKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	004 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING
TIMBR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		NODI-9	******	NODI-9	(12)	NODI-9	NODI-9	NODI-9
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Marcus C. Smith/Plant Mgr
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	2011	01	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
REPORT STORM DATE AND DURATION (HOURS), ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

Exempt per Permit MSR 220005 Part IV.C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: ~~VANCE HOPKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

MSR220005	004 B
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	09	01	TO	10	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith/Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662	226-4584	2011	01	26
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Exempt per Permit MSR 220005 Part IV.C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KORPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY

LOCATION TIE PLANT MS 38960

ATTN: ~~VANCE HASKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	005 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMBR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		6.6	******	6.6	(12)	0	Annual	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	17.2	(19)	0	Annual	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.079	(19)	0	Annual	Grab
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0.016	(19)	0	Annual	Grab
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith/Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	2011	01	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)

Storm Date: November 25, 2010 / Duration: estimated 9.3 hrs / Rainfall: 0.60" (Inches) / Total Discharge: 0.08384 (MGD)

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

00414/ This is a 4-part form.

PAGE 1 OF

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: ~~VENSE HASKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

MSR220005	005 B
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO.	DAY
FROM	10	01	01	TO	10	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith/Plant Mgr	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662	226-4584	2011	01	26
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Storm Date: November 25, 2010 / Duration: estimated 9.3 hrs / Rainfall 0.60" (Inches) / Total Discharge: 0.08384 (MGD)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: ~~WANCE HASKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	006 A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMBR

*** NO DISCHARGE [ ] ***

Form Approved.
OMB No. 2040-0004

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		6.7	******	6.7	(12)	0	Annual	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	19.2	(19)	0	Annual	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.057	(19)	0	Annual	Grab
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0.030	(19)	0	Annual	Grab
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith/Plant Mgr.

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4581	2011	01	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)

Storm Date: November 25, 2010/Duration: estimated 9.3 hrs/Rainfall 0.60" (Inches)/Total Discharge: 0.0304 (MGD)

Form Approved.
OMB No. 2040-0004

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38760

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: ~~VANCE HASKINS~~ Marcus Smith

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	006 B

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
34000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Marcus C. Smith / Plant Mgr
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	2011	01	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Form Date: November 25, 2010 / Duration: estimated 9.3 hrs / Rainfall 0.60" (Inches) / Total Discharge: 0.0304 (MGD)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME POPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: ~~VANCE HASKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	007 A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO.	DAY
FROM	10	01	01	TO	10	12	31

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING
*** NO DISCHARGE [ ] ***

Form Approved.
OMB No. 2040-0004

TIMBR

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		6.7	******	6.7	(12)	0	Annual	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	71.6	(19)	0	Annual	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.27	(19)	0	Annual	Grab
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0.019	(19)	0	Annual	Grab
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Marcus C. Smith/Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4581	2011	01	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
REPORT STORM DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).
Storm Date: November 25, 2010 / Duration: estimated 9.3 hrs / Rainfall 0.60" (inches) / Total Discharge: 0.04224 (MGD)

Form Approved.
OMB No. 2040-0004

ERMITTEE NAME/ADDRESS (*Include Facility Name/Location if Different*)
AME KOPPERS INDUSTRIES INC
DDRESS P O BOX 160
TIE PLANT MS 38960

ACILITY GRENADA COUNTY
OCATION TIE PLANT MS 38960
ATTN: ~~VANCE HASKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (*NPDES*)
DISCHARGE MONITORING REPORT (*DMR*)

MSR220005	007 B
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith / Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662	226-4584	2011	01	26
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (*Reference all attachments here*)

Storm Date: November 25, 2010 / Duration: estimated 9.3 hrs / Rainfall 0.60" (Inches) / Total Discharge: 0.04224 (MGD)

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

00419/0[illegible] This is a 4-part form.

PAGE 1 OF

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if Different*)

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY

LOCATION TIE PLANT MS 38960

ATTN: ~~VANCE HACKING~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (*NPDES*)
DISCHARGE MONITORING REPORT (*DMR*)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	008 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMBR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		6.6	******	6.6	(12)	0	Annual	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	64.4	(19)	0	Annual	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR. -IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.00025	(19)	0	Annual	Grab
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0.0074	(19)	0	Annual	Grab
96000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith / Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	2011	01	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (*Reference all attachments here*)

REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)

Storm Date: November 25, 2010/Duration: estimated 9.3 hrs/Rainfall: 0.60" (Inches)/Total Discharge: 0.00768 (MGD)

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

00420/0[illegible]

This is a 4-part form.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: ~~WANCE HASKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	005 B

MINOR
(SUBR NO)
F - FINAL TIMER
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	31

*** NO DISCHARGE ! ___ ! ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	10.8	(19)	0	Annual	Compos
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.00057	(19)	0	Annual	Compos
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0.014	(19)	0	Annual	Compos
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Marcus C. Smith/Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	2011	01	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Storm Date: November 25, 2010 / Duration: estimated 9.3 hrs / Rainfall: 0.60" (Inches) / Total Discharge: 0.00768 (MGD)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY

LOCATION TIE PLANT MS 38960

ATTN: ~~VANCE HASKINS~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	009 A

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER GRAB SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	10	01	01	TO	10	12	01

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		6.6	******	6.6	(12)	0	Annual	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	12.0	(19)	0	Annual	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR. -IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.0011	(19)	0	Annual	Grab
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0.019	(19)	0	Annual	Grab
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith / Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	2011	01	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

Storm Date: November 25, 2010 / Duration: estimated 9.3 hrs / Rainfall 0.60" (Inches) / Total Discharge 0.03424 (MGD)

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

00422/[illegible]

This is a 4-part form.

PAGE 1 OF

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: ~~WANCE HARMING~~ Marcus Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	009 B

MINOR
(SUBR NO)
F - FINAL
TIMBR
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO.	DAY
FROM	10	01	01	TO	10	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	UG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
34000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith / Plant Mgr.

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	2011	01	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Storm Date: November 25, 2010 / Duration: estimated 9.3 hrs / Rainfall 0.60" (Inches) / Total Discharge: 0.03424

Joyce M. Fankulewski
Environmental Manager

KOPPERS

876
Grenada

RECEIVED
DEC 28 2009
Dept of Environmental Quality
Office of Pollution Control

Koppers Inc.
436 Seventh Avenue
Pittsburgh, PA 15219-1800
Tel 412 227 2114
Fax 412 227 2423
FankulewskiJ@koppers.com
www.koppers.com

December 23, 2009

Mr. Tommy Wall
Timber and Wood Products Branch
Environmental Permits Division
Mississippi Department of Environmental Quality
PO Box 2261
Jackson, Mississippi 39225-2261

FILE COPY

Subject: NPDES Individual Permit Application (MSR220005)
Certified Mail: 7009 2250 0001 6258 6906

Enclosed please find an original NPDES Individual Permit Application for the Koppers, Inc. facility located in Grenada, MS. Please note that due to the short turnaround time requested, results for several parameters are not included. All currently available analytical data is included. Results for the additional parameters will be submitted under separate cover as soon as a qualifying sampling event occurs and results are received.

Should you have any questions please feel free to contact me.

Sincerely,

Joyce M. Fankulewski

Joyce M. Fankulewski

cc: M.Smith (Koppers)
S. Hodges (MSDEQ)
Plant File

Marcus C. Smith
Plant Manager

Grenada

KOPPERS

Koppers Inc.
Utility Poles and Piling
P.O. Box 160
Tie Plant, MS 38960
Tel 662 226 4584
Fax 662 226 4588
Smithmc@koppers.com
www.koppers.com

January 25, 2010

Mississippi Department of Environmental Quality
Office of Pollution Control
Data Integration Division
P.O. Box 2261
Jackson, MS 39225-2261

CERTIFIED MAIL: 7008 1140 0001 0773 4469

Subject: **Koppers Inc. – Grenada, MS Facility**
NPDES Permit No.: MSR220005
2009 Annual Storm Water Sampling Results

Dear Sir or Madam:

Enclosed you will find information relevant to the 2009 Storm Water Sampling activities at Koppers Inc. – Grenada Plant as required by Part IV.D of NPDES Permit No. MSR220005. The sampling of storm water was conducted at Outfalls 003, 005, 006, 007, 008 and 009. The balance of the site's outfalls, Outfalls 001, 002 and 004, was not sampled pursuant to exemptions allowed under Part IV.C.4 of the permit.

Per Part IV.B of the permit a visual inspection and evaluation of all industrial areas contributing to storm water discharge was conducted. Accordingly, a completed "Inspection Report and Certification Form" as well as supplemental information is attached.

I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Sincerely,

Marcus C. Smith

Marcus C. Smith

CC: Joyce Fankulewski – KI CSG
Chief, Industrial Wastewater Branch

RECEIVED
JAN 27 2010

Part VII.

Inspection Report and Certification Form For Storm Water Pollution Prevention Plan Evaluation

Wood Treater Storm Water General NPDES Permit No. MSR22 _ _ _ _
(Fill in your Certificate of Coverage Number)

(Please Print)

Owner and/or Operator: Koppers, Inc

Facility Name: Koppers Inc - Grenada Plant

Facility Location: One Koppers Drive, Tie Plant, MS 38960

Date and Time: December 28, 2009 at approximately 1:30 PM

Inspector(s): Blair R. Simpson and Kevin B. Coker

Date of Last Rainfall: December 24, 25, and 26, 2009 **Estimated Amount:** 0.75", 1.20", and 0.10" respectively

Deficiencies Noted During the Inspection (attach additional sheets if necessary):

See attachment

Corrective Action Needed (attach additional sheets if necessary):

See attachment

RECEIVED JAN 27 2010

Corrective Action Compliance Schedule:

See attachment

Based upon this inspection which I or personnel under my direct supervision conducted, I certify that all pollution control measures are adequate and have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan filed with the Office of Pollution Control and good engineering practices as required by the above referenced permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons 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 fines and imprisonment for knowing violations.

I further certify that the Mississippi Office of Pollution Control has been notified of any changes pertinent to our storm water permit as required in Part II.C.

Marcus C. Smith	Marcus C. Smith	1/25/2010
Authorized Name (Print)	**Signature**	**Date**

These reports shall be submitted annually, as required in the permit, to:

Chief, Industrial Branch
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385

Visual Site Inspection & Evaluation
NPDES Permit No.: MSR220005
Coverage Year: 2009
KOPPERS INC. – Grenada Plant

Area/Activity/BMP	Possible Contaminants	Observation & Corrective Action
Drainage Site Map	N/A	*Note any potential changes in storm water flow* The facility's Integrated Contingency Plan (ICP) was revised and recertified in March 2009. The "Figures" portion of the ICP contains six (6 ea.) maps of the site providing various information including the watershed areas of the site as well as the location of their respective Outfalls.
Exposed Inventory Quantities / Status / Potential Sources	Permit Parameters	*Quantities (Section 5.4.2);* The Company continues to monitor and attempts to minimize slow moving inventory at the site. Slow moving inventory volumes are communicated to the corporate office on a quarterly basis. The plant's focus is to procure and produce treated inventory only to the extent needed to fully service its customer base as determined by the corporate sales department. The customer base does, however, require that a contingency be maintained. Approximate average inventories for 2009 were as follows: • creosote treated poles and piling 285 pcs • pentachlorophenol treated poles 5,138 pcs • creosote treated cross and switch ties 29,731 pcs • creosote treated lumber 2,837 pcs Approximate average inventories for 2008 were as follows: • creosote treated poles and piling 442 pcs • pentachlorophenol treated poles 4,728 pcs • creosote treated cross and switch ties 47,881 pcs • creosote treated lumber 1,933 pcs The average volume of creosote treated poles, piling, cross ties, and switch ties declined. These declines were largely driven by sales in the square stock volume as well as continued emphasis on the sale of slow moving inventories. Efforts to continue to lower the treated wood foot print at the site will continue to be an area of discussion in the 2010 Pollution Prevention Plan Team (P3 Team) initiatives. Additionally emphasis will be placed on isolating treated inventory to a minimum number of outfall watersheds to further the progress made in 2009 with this effort. The plant's Drip Pad Operating Procedure and Treated Wood Storage Yard Inspection Procedure continue to be employed to control the impact of treated wood on storm water. This is evidenced by the associated records. The refueling area is cleaned and maintained on a routine basis. The concrete surrounding this area was coated with a sealant in 2008. Various lubricants continue to be stored inside of a building equipped with a

RECEIVED JAN 27 2010

		curb and a concrete staging ramp leading into the building that was installed in 2006. This ramp was likewise coated with a sealant in 2008. Both mobile and stationary equipment is inspected each day of operation for leaks that could impact storm water. Documentation of these inspection as well as maintenance work orders is kept at the site. Maintenance activities of leaks that may impact storm water are managed through a new computer program that was adopted in 2008. The program is referred to as C-Works. Ten (10) API 653 Tank inspections were conducted in 2008. Seven (7) API 653 Tank inspections were conducted in 2009. Those tanks posting the greatest potential threat to storm water in the event of failure were inspected first. This cycle will continue as the Integrated Contingency Plan dictates.
Previous Spill Areas	ALL	*All historical spill areas were inspected for evidence of residuals/preservatives as well as the continued presence and effectiveness of control and countermeasures.* *South End Of Cylinders 1 -5* The curtain installed at the back of Cylinders 1 – 5 remains intact and is kept closed as a containment tool. There was no evidence of preservative on the ground outside of containment at the south end of the cylinders. Concrete walkways are installed along the perimeter of the back of the cylinder basement to offer better walking and working surfaces. These are also sealed. An added benefit of this concrete has been the reduced risk of the ground being contacted by preservative in the instance of a gasket failure.
		East of Door to Cylinder No. 5 An examination of the area east of Cylinder No. 5 revealed no evidence of preservative residual being on the ground. Additional concrete was added along the cylinder basement near the north end of Cylinder No. 5. While the focus of this effort was improved walking and working surfaces at the site and added benefit has been the reduced risk of soil being contacted by preservative in the instance of a gasket failure.
		West of Tank Farm Containment Area There is no presence of residual along the west side of the containment area of the tank farm. The containments remain intact. The containment wall in this area is routinely inspected for cracks and leaks.
		West of Boiler Building An examination of the area revealed no evidence of preservative residual being on the ground. No additional recognized risk was identified during the inspection. Improvements implemented in past years and reflected on past evaluations remain intact.
		Temporary Hosing In the event that temporary hosing is used, caution is exercised to ensure that spills do not occur. Lines are tied off to the receiving vessel securely. Additional containment is placed beneath the hoses in the event that a line should leak. These operations are rare and, whenever they are used, they are monitored by plant personnel. An SOP was developed in 2009 for proper transfer of hazardous materials when using temporary hosing.

		Sump Pump Behind Shop Modifications were made to the sumps and curbing servicing the shop pad. The shop pad was equipped with two sumps that worked in series. Storm and wash water captured by the first sump situated on the shop pad gravity fed to a second sump that was equipped with a pump that transferred it to the cylinder basement. This water was subsequently transferred to the plant's waste water treatment system (WWTS). In 2008 the plant's Pollution Prevention Plan Team (P3 Team) implemented a plan to reduce the risk of spills at this area. The secondary sump was taken out of service. The sump on the shop pad was equipped with a pump. The lines servicing the sump were piped to Drip Pad Sump No. 1 and fully contained via the use of a double-wall pipe and existing containments. Water captured at Drip Pad Sump No. 1 is automatically transferred to the plant's WWTS. Additionally, a contractor was hired to install curbing around the perimeter of the shop pad to a height adequate enough to hold a 24 hour, 25 year storm event.
		Hazardous Waste Boxes Two hazardous waste boxes are used at the site. One serves to hold K001 waste and the other serves to hold FO32/FO34 waste. Both are kept on concrete pads. They are inspected on a weekly basis.
		Process Lines In Treating Department New process lines were installed at various areas of the Treating Department to help further reduce the risk of spills from this source. The splash curtains installed along the eastern perimeter of the cylinder basement containment area kept closed to further reduce the risk of spills.
		POTW Discharge Lines The plant's discharge line connecting the WWTS to the POTW was replaced with a double-walled line in 2007. In 2009, a reportable spill occurred that was a result of the inner pipe separating at a slip joint coupling and an outer wall fracture. The inner pipe separation was a result of possible installation error combined with the vibration of nearby truck and powered industrial truck traffic. The fracture of the outer wall was a result of it being stressed at a point where it crossed over and rested on a metal stormwater drainage culvert. This created a stress focused on one point of the outer line. For corrective action the Plant repaired the inner and outer pipes and restored operation of the line. The line was protected from truck and powered industrial truck traffic by concrete barriers, quarter inch steel plating was placed over the line and stone was applied above the line and on the roadway for added stability. For preventative action, the Plant removed the drainage culvert at the point where the two lines intersected. By removing the culvert the stress point in the POTW line was relieved. In addition, concrete barricades were placed in the area to prevent vehicular traffic from compromising the strength of the outer pipe and dye is added to the discharged wastewater at intervals and the line is checked for leaks. No signs of further leakage was seen.
		Creosote Unloading Station The curbing around the perimeter of the creosote tank car unloading station was raised to further reduce the risk of a spill in 2008 as a result of the P3 Teams efforts.
		Drip Pad Transition Points In 2007 a roof was installed over the drip pad to offer added protection at the transition points. The roof measuring approximately 410' x 95' covers a large

		portion of the drip pad and reduces the volume of process water being treated in the plant's WWTS as well as the risk of spills at these transition points. These points are dammed during non-operational days to reduce the risks of spills.
Process Areas / Wood Treating & Storage Areas / WWTS Containments – Aeration, Clarifier & Discharge Tanks.	ALL	*Tank Farm Containments , WWTS Containments, Rail Car Unloading Area, Treated Tie Storage, Treated Pole Storage, Yard Drippage Inspection, Drip Pad, Yard Storage Efficiency, Yard Status, Ditches/Erosion, Etc.* Tank farm and WWTS (Biological Treatment Area) containments are periodically inspected and maintained as necessary. The plants storage areas and roadways continue to be maintained. Aggregate and clay gravel was purchased as needed in 2009. Money and energy was likewise expended to ensure adequate vegetation on slopes and exposed areas of the plant. Effort will continue to ensure erosion is not an issue for the facility.
Loading & Unloading Material Handling Areas	ALL	*Creosote, pentachlorophenol and diesel unloading station practices and containments, tie unloading station at north drip pad, south yard banding areas, etc.* The containments for the diesel, gasoline, creosote, and pentachlorophenol unloading/loading stations are inspected and maintained. These have been referenced at other instances in this report. Employees who operate in these areas have been trained on SPCC issues as well as storm water pollution prevention measures. The Tie Sorter and A&B Mill pose a risk due to the hydraulic equipment utilized in processing cross ties. Various measures have been implemented to minimize this risk including the installation of a roof over the Tie Stacker as well as the employing of routine inspections. In 2009, efforts were made to protect hydraulic lines on key equipment from rupture by wrapping friction points with protective materials.
Chemical Storage Areas	ALL	*Tank farm secondary containments, WWTS chemical containments, boiler chemical containments, high level alarms, etc.* A professional engineer reviewed the facility's secondary containments and certified its revised ICP accordingly in March 2009. Secondary containments are adequate to meet RCRA capacity requirements. WWTS chemicals stored in 55 gallon drums have been placed over containment bins. High level alarms are installed in work tank numbers 6,7,8,9, and 10 as well as in each blow-down tank, oil/water seperators 48A and 50 as well as the final wastewater discharge tank.
Untreated Product Storage Area	TSS	*Verify that ditch banks are intact, that erosion is no occurring.* The ditches in and around the plant's untreated storage area's do not appear to be eroding. As a precaution rye grass is periodically sowed at applicable areas of the site.
Peeler Site	Hydraulic Oil, TSS	*Oil migration from peeler, erosion, road status, etc.* A product used to hamper the growth of fungi on poles is used at the Peeling Operation. This product, "Stabrite", is received in 55 gallon drums. These

		drums are placed in secondary containments. The product is diluted with water into a tank that is staged over secondary containment. This tank was fitted with a larger roof and larger containment in 2009. The concentrate for this dilute solution was placed in a over pack drum and moved to a storage building with concrete flooring. Bark generated at the operation is periodically removed from the area to reduce the risk of it impacting storm water. Additional improvements at this area included the installation of a culvert and additional aggregate to improve equipment movement and storm water flow.
Maintenance Area	ALL	*Scrap yard area, wash pad, sump pumps, drain way to the west of the wash pad.* Scrap is washed prior to being stored in and around the shop to eliminate the risk of storm water contamination. The shop pad and its respective sumps were addressed above under "Previous Spill Areas". As referenced elsewhere in this report, the refueling area was sealed and is maintained.
Outfall 001	ALL	*Ensure drains are open as applicable; detail status of soil stability around the outfall; status of banks and inlets: storm water discharges "shall be free from... debris, oil, scum, and other floating materials other than trace amounts... eroded soils and other materials that will settle to form objectionable deposits in receiving waters... suspended solids, turbidity and color at levels inconsistent with the receiving waters... chemicals in concentrations that would cause violation of State Water Quality Criteria in the receiving waters... "* Outfall 001 is located at the southern end of the plant. The area surrounding the outfall is grassy. No solids have settled in the outfall. The appearance of oils, scum, or solids deposited by storm events is not present. No objectionable deposit of material has been observed below the outfall. Vegetation is well established in the general area of the outfall. Sheens, oils and chemicals were not evident during inspections. No significant changes observed in this outfall.
Outfall 002	ALL	Outfall 002's watershed services the Switch Tie Mill Operation as well as a storage barn area. No objectionable deposits of material have been observed below this outfall. The clarity of the water discharged from the outfall was clearer than that of the receiving waters. There was no evidence of oils or chemicals in the discharge at this Outfall. Repairs conducted to the weir in 2006 remain intact. Soil in the area of the Outfall appears stable. Sheens, oils and chemicals were not evident during inspections. In 2008 the valve and riser assembly servicing this outfall was reworked. No significant changes observed in this outfall.
Outfall 003	ALL	Outfall 003's watershed encompasses the Maintenance Department. Vegetation around Outfall 003, particularly along the bank near the Central Ditch, remained well established. Inspections revealed no evidence of sheens, scum, oils or floating materials. There was no evidence of objectionable deposits in or around the receiving waters. The water discharge at this Outfall has a tendency to be turbid; however, is typically consistent with the receiving waters in the Central Ditch. At the time of the annual inspection the clarity of the discharge water was of good visual clarity. Additional rip rap around the discharge, installed during the previous year, remains intact. A defined sampling point was made during 2009. A load of sand is maintained near Outfall 003 as a precautionary measure to stop the flow of a spill from the shop and/or treating areas if needed.

Outfall 004	ALL	The water discharged from this area was somewhat turbid however was consistent with receiving waters and no adverse deposits have been observed at the discharge point where the flow feeds to the Central Ditch. There has been no evidence of oils, chemicals or scum during the inspections. Effort was employed to ensure vegetation was maintained around the slopes of the detention pond. Additional concrete erosion control materials were applied to the weir area of this outfall during 2009. A load of sand has been staged at the western side of the dam of the detention pond serving Outfall 004 as an emergency response measure in the instance of a spill of oils or chemicals from the treating area.
Outfall 005	ALL	Inspections revealed that the storm water discharges from this area was free of scum and oils. There are no receiving waters immediately below this outfall. Rather, the storm water runs through several acres of forested bottomland prior to every reaching any receiving waters. Its travel route is winding and predominately indistinguishable. There is no evidence of objectionable deposits associated with the discharge of this Outfall. This particular outfall is surrounded by trees and vegetation. Floating twigs and leaves were periodically observed in the detention pond side of this outfall. By design of the slow flow riser, solids such as leaves and twigs will not pass through into the discharge. Vegetation in the area of the Outfall is well established. Soil in the area of the Outfall appears stable. The valve and riser assembly was reworked in 2008. During the 2009 sampling event, care was taken to sample when there was no active flow of stormwater entering the discharge of this outfall from neighboring property. No significant changes were observed in this outfall.
Outfall 006	ALL	Inspections revealed that the discharge was free of oils, debris and scum. The detention basin servicing this outfall is situated in close proximity to standing tress and vegetation. Twigs and leaves were periodically observed in the waters of the detention pond side of the outfall. By design of the floating skimmer, solids such as leaves and twigs will not pass through into the discharge. The discharge from the pond feeds to a drainage culvert. There was no evidence of objectionable deposits associated with the discharge from this watershed observed. The valve and drain system for this outfall was modified to incorporate the use of a skimmer. The detention pond, ditches and drainage ways servicing this outfall were cleaned and improved in 2008. Slopes were graded, ditches were sloped, rip rap was installed to slow storm water flow. Hay bales were installed in different areas of this watershed to slow the flow into this outfall in 2009.
Outfall 007	ALL	Inspections noted that the discharge from the pond was free of signs of scum and oil. Some floating solids from the operations south of the outfall were observed in the discharge drainage way near rip-rap and vegetation. However, these were captured in the drainage way adjacent and below the weir. No evidence of these items reaching the receiving waters was observed. The valve and drain system for this outfall was modified to incorporate the use of a skimmer. The detention pond, ditches and drainage ways servicing this outfall were cleaned and improved in 2008. Slopes were graded, ditches were sloped, rip rap was installed to slow storm water flow. Vegetation is well established in the areas around the outfall. Hay bales were installed in different areas of this watershed to slow the flow into this outfall in 2009.

Outfall 008	ALL	Ground vegetation remained intact and soil in the area of the Outfall remained stable. Inspections showed that no objectionable deposits resulted from storm water discharge from this watershed. Discharged storm water was clearer than receiving waters and free of oil, floating materials, debris and scum. The valve and riser assembly in this Outfall was reworked in 2008. No significant changes observed in this outfall.
Outfall 009	ALL	Inspections revealed that discharge from the watershed of Outfall 009 was free of oil, debris, scum and other floating solids. The clarity of the water discharged from the outfall was consistent with the receiving waters and typically better in clarity. The outfall drains directly into the plant's Central Ditch through a slow flow riser pipe. No objectionable deposit of material has been observed below the outfall. Vegetation around the Outfall remained intact. No evidence of erosion was observed at the discharge area and soil in the area of the Outfall appears stable. The valve and riser assembly in this Outfall was reworked in 2008.
Best Management Practices	ALL	*Process Area/Active Wood Treating and Storage Area* Drippage ceased procedures have been monitored. A log is completed and maintained accordingly. Operators work to keep treated material on the drip pad as long as feasibly possible. If charges continue to drip they are placed back in the cylinders for additional steaming/cleaning cycles. Evidence of these activities are available on plant records. Cylinders are periodically cleaned when evidence of sludge is observed and believed linked to dirty cylinders. Limpid points are monitored weekly and maintained at acceptable levels thus reducing the accumulation of solids on treated products. Treated wood poles are clean and free of solids subsequent to treating cycles. Steam flash cycles are used to help further ensure treated products are clean. Traffic on the drip pad remains limited to standard traffic required for the operation of the plant. Dedicated equipment is used on the pad. Tires are washed prior to entry and exit from the pad. Reorganization/minimization of the treated wood storage yard has been and will continue to be a focus for the P3 Team. Effort is employed to ensure all treated poles are stored in elevated bins, thus minimizing their contact with storm water running during storm events. Effort to manage pole reclass reduces the overall volume of treated wood waste generated at the site. Ongoing efforts to maintain the plant's storage yard. This is an ongoing item requiring routine maintenance. In 2009 clay gravel and stone was purchased on a periodic basis to help maintain the yard. Skids are used to help keep untreated products off of the ground and reduce the accumulation of dust and mud on products as they are placed into the treating cylinders. Inevitably this reduces the level of solids on the surface of wood products as well as the volume of waste generated in the plant's process equipment. Cylinders are cleaned as needed. Containments were inspected on a routine basis. Various work was conducted to better improve the plant's containment and control abilities as previously

RECEIVED
JAN 27 2010

		referenced in this report. The plant continues to monitor preservative usage for environmental and economic reasons. The plant has worked to monitor and ensure the establishment of vegetation on slopes at the site. *Loading & Unloading Material Handling Areas –* The plant's P3 Team conducted an evaluation of the five most hazardous spill risk in 2008. An action plan addressing these items was generated and implemented as a result of their assessment. Various proactive and preventative measures were implemented to further reduce the risk of spills around the plant's tank farm and loading and unloading areas. Standard Operating Procedures have been written and or revised as needed, and relayed to plant employees. These procedures are reviewed periodically for accuracy and thoroughness. Annual training on the plant's various Best Management Practices is conducted. A catch basin installed adjacent the wood fuel handing area serves to capture silt and debris transferred via storm water toward Outfall 004 is maintained by operating personnel in this area. Maintaining the basin helps to reduce the organic loading placed on all areas downstream from this basin. *Chemical Storage Areas –* Secondary containment has been inspected on a routine basis and enhanced as described earlier in this evaluation. Level gauges are provided for various tanks. The installation of additional gauges occurred in 2009. Chemicals related to the operations of the WWTS are enclosed and placed over secondary containment bins where necessary. *Untreated Product Storage Areas –* The plant's storage yard has been oriented so as to allow for storm water to be diverted around key stored product. Culverts are installed and maintained as required. These yards are maintained as needed. Debris is removed from the yard as required. Blocks and cut-offs from framing operations are cleaned on a routine basis. Rip rap and hay bales have been used at the head of some ditches and around culvert inlets and outlets. This has particularly been the case for Outfalls 006 and 007 in 2008 and 2009. Vegetation at various areas of the plant has been addressed in earlier text. *Peeler Site –* Facility personnel work to prevent and/or maintain hydraulic leaks as required. This area represents a high traffic area as material is processed and transferred to the appropriate storage bins. Effort is expended to ensure that it is maintained and well drained. A secondary containment unit was purchased for the Sta-Brite P chemical stored in 55 gallon drums and placed in covered storage building with concrete flooring in 2009.

		Maintenance – An outside party continues to manage used oil and lubricants. The plant's parts washer is an environmentally friendly unit using an organic degreaser. The containments around the refueling area and lubricants building were sealed in 2008. A spill kit is maintained at the refueling area and an Standard Operating Procedure addressing environmental issues at this area is maintained. Scrap metal is washed (as necessary) and placed in a hopper provided by the vendor. The quantities of scrap generated on the plant are tracked. A local vendor disposes of the waste. A wash pad is provided near the shop. This area was improved as described earlier in this evaluation. Trams are staged on a concrete pad situated to the east of the maintenance area after being steamed cleaned on the shop pad. Installation of a roof over this area could potentially further reduce risk of storm water exposure to chemicals.

Per Part III.C.6 of the facility's NPDES Permit the Storm Water Pollution Prevention Plan (SWPPP) requires amending whenever it proves to be ineffective in controlling storm water pollutants. This document represents an extension of the SWPPP. While the 2009 storm water analytical results reveal no excursions of the criteria set forth in the "State of Mississippi Water Criteria For Intrastate, Interstate and Costal Waters", the items listed below represent tentative actions to be employed in 2010 in an effort to improve storm water discharge quality.

1. Install hay bails and silt fencing methodically along the drainage ways of ditches servicing watersheds used for the storage of treated wood.

2. Install culverts in appropriate yard areas in order to define paths of travel for powered industrial trucks.

3. Improve vegetative cover in appropriate yard areas in order to slow the path of stormwater through the Plant's watersheds.

4. Improve and maintain facility housekeeping efforts by utilizing 5S Visual Management System.

The on-going and continual Grenada Plant Best Management Practices are listed below for review and comparison to the inspection listed above.

Area or Activity	Best Management Practice
Process Area/Active Wood Treating and Storage Area	• Assure drippage has ceased prior to removal of treated wood products from drip pad. • Manage treating preservatives to ensure acceptable levels thus ensuring clean surfaces on treated wood products. • Eliminate non-process traffic on drip pad; ensure that all equipment tires are washed before entering and departing from the drip pad.

	• Minimize the footprint of treated inventory, limiting the potential area of effect on storm water runoff. • Work to minimize the need to cut treated wood. However, when it is necessary, manage the saw dust associated with the cutting appropriately. • Maintain the condition of the untreated wood yard thus reducing the likelihood of mud and debris from accumulating on products prior to treatment and thus increasing the opportunity for storm water impact subsequent to the treating process. • Maintain the cleanliness of treating cylinders. Clean them on a routine schedule. • Inspect and ensure that all containments are adequate and intact. • Adjust preservative cycles as necessary working to ensure that the quantity of preservative placed in wood products is minimized yet compliant to AWPA retention and penetration requirements. • When feasible apply post-treatment processes such as steam flashing and expansion baths. • Work to minimize the quantity of treated wood stored on the site. • Ensure the appropriate implementation of yard drippage inspection programs.
Loading and Unloading Material Handling Areas	• Provide defined paths of storm water flow from loading and unloading areas enhancing vegetation in these areas to serve to filter and capture suspended solids. • Ensure that containments are adequate and allow no run-on or run-off of preservative. Evaluate and minimize the risks of spills in these areas. • Ensure that employees involved in this function of the plant's operations are adequately trained.
Chemical Storage Area	• Ensure that all secondary containment is adequate and intact. • Provide level gauges thus reducing the risk of spills. • Enclose chemical storage areas where possible.
Untreated Product Storage Area	• Divert storm water around storage area. • Position storage areas on stable, well-drained soils; conduct routine maintenance. • Keep the area free of debris. • Use silt fence, hay bales, and/or rip rap check dams in drainage ways. • Utilize and maintain catch basins near weirs at outfalls. • Maintain all ditch banks; sewing vegetation where applicable and beneficial. Utilize mixed vegetation ensuring its presence during each season of the year. • Do not drive loaders or other equipment through ditches or on banks. Stay on established roadways.
Peeler Site	• Conduct maintenance ensuring that hydraulic leaks are eliminated. • Ensure that stored bark does not fall into the north ditch. • Work to maintain the roadways and ditches around the peeling operation.
Maintenance	• Ensure that all oils and waste generated during maintenance and servicing activities in the plant are managed in a timely and appropriate fashion.

RECEIVED
JAN

	• Park all mobile equipment on concrete or paved surfaces. • Recycle scrape metal as it is generated. Do not allow it to accumulate on the ground. • Ensure that all equipment washing activities are conducted on the wash pad.

This inspection is responsive to Part III.7. (c) and Part IV.B of NPDES Permit No.: MSR220005. It reflects an evaluation of the activities that took place during the year 2009 and previous years to better improve and/or ensure that storm water was not contaminated by plant activities.

Signature Marvin C. Smith

RECEIVED
JAN 27 2013

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC

LOCATION TIE PLANT MS 38960

ATTN: ~~VANCE HASKINS~~ Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	001 A

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	09	01	01	TO	09	12	31

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMBE

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		NODI-9	******	NODI-9	(12)	NODI-9	NODI-9	NODI-9
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
34000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 27 2010

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith / Plant Mgr	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662	226-4584	2010	01	21
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES); AND TOTAL DISCHARGE (GALLONS).

Exempt per Permit MSR 220005 Part IV. C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

00891/0

This is a 4-part form.

PAGE OF

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC

LOCATION TIE PLANT MS 38960

ATTN: ~~VANCE HAWKINS~~ Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	001 B

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

*** NO DISCHARGE [ ] ***

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	09	01	01	TO	09	12	31

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 27 2010

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith / Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662	226-4584	2010	01	21
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Exempt per Permit MSR 220005 Part IV.C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

00893/0 This is a 4-part form.

PAGE 1 OF

ERMITTEE NAME/ADDRESS *(Include Facility Name Location if Different*

AME KOPPERS INDUSTRIES INC

DDRESS P O BOX 10

TIE PLANT MS 38[illegible]

ACILITY KOPPERS INDUSTRIES INC

OCATION E PLAN MS 38760

ATTN: ~~VANCE HASKINS~~ Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*

DISCHARGE MONITORING REPORT *(DMR)*

OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	002

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	[illegible]	01	01	TO	[illegible]	12	31

[illegible]NER

[illegible] NO

[illegible] - F.I.A

STORMWATER GRAB SAMPLING

*** NO DISCHARGE [illegible] ***

TIMBR

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
[illegible]	SAMPLE MEASUREMENT	******	******		NODI-9	******	NODI-9	(12)	NODI-9	NODI-9	NODI-9
[illegible] 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	REPORT MINIMUM	******	REPORT MAXIMUM	EV		ANNUAL	GRAB
[illegible] TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
[illegible] 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR -IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
[illegible] 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
[illegible]	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
[illegible] 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
[illegible]	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
[illegible] 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 27 2010

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE		
Marcus C. Smith/Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662 226-4584	2010	01	21
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORMS DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES): TOTAL DISCHARGE (GALLONS).

Exempt per Permit MSR220005 Part IV.C.4

This is a 4-part form.

PAGE OF

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38760

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38760
ATTN: ~~[illegible]~~ Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

MSR220005	002 E
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
TIMOR
STORMWATER COMPOSITE SAMPLING
*** NO DISCHARGE [ ] ***

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
34000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 27 2010

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith / Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662	226-4584	2010	01	21
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Exempt per Permit MSR220005 Part IV.C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KEMPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KEMPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~[illegible]~~ Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	003 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING
TIMER
*** NO DISCHARGE [ ] ***

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	[illegible]	[illegible]	[illegible]	TO	[illegible]	[illegible]	[illegible]

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		7.53	******	7.53	(12)	0	Annual	Grab
00400 1 0	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	S.U.		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	931		0	Annual	Grab
00530 1 0 0	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT. RC	SAMPLE MEASUREMENT	******	******		******	******	5.1	(19)	0	Annual	Grab
00560 1 0 0	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.015		0	Annual	Grab
39032 1 0 0	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
[illegible]	SAMPLE MEASUREMENT	******	******		******	******	0.0082	(19)	0	Annual	Grab
50000 1 0 0	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 27 2010

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Marcus C. Smith / Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	662-226-4584		2010	01	21
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)

DATE: November 29, 2009 / Duration: Est. 21 hrs / Rainfall: 1.70 inches / Total Discharge: 0.06888

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME ROGERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY ROGERS INDUSTRIES INC

LOCATION TIE PLANT MS 38960

ATTN: ~~VONNIE PARKING~~ Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR270005	003 B

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	09	01	01	TO	09	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	236	(19)	0	Annual	Compos
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.014	(19)	0	Annual	Compos
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.0085	(19)	0	Annual	Compos
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 27 2010

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE		
Marcus C. Smith / Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662	226-4584	2010	01	21
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

DATE: November 29, 2009 / Duration: Est 21 hrs / Rainfall: 1.70 Inches / Total Discharge: 0.06888

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160

TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC

LOCATION TIE PLANT MS 38960

ATTN: ~~[illegible]~~ Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*

DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

MSR220005	004 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER GRAB SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	09	01	01	TO	09	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		N001-9	******	N001-9	(12)	N001-9	N001-9	N001-9
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	N001-9	(19)	N001-9	N001-9	N001-9
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC	SAMPLE MEASUREMENT	******	******		******	******	N001-9	(19)	N001-9	N001-9	N001-9
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLORO, PHENOL	SAMPLE MEASUREMENT	******	******		******	******	N001-9	(19)	N001-9	N001-9	N001-9
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	N001-9	(19)	N001-9	N001-9	N001-9
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 27 2010

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith / Plant Mgr

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
662	226 4584	2010	01	21
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) TOTA DISCHARGE (24 LINES)

Exempt per Permit MSR220005 Part IV.C 4

PA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form

PAGE OF

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC

LOCATION TIE PLANT MS 38960

ATTN ~~[illegible]~~ Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	004 B

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	09	01	01	TO	09	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL TIMBE
STORMWATER COMPOSITE SAMPLING

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	NODI-9	NODI-9
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 27 2010

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith / Plant Mgr
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	2010	01	21

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Exempt per Permit MSR 220005

PA Form 3320-1 (Rev. 3/99) Previous editions may be used.

00905/0 This is a 4-part form PAGE OF

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~DANCE HASKINS~~ Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	005 A

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	09	01	01	TO	09	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING
TIMER

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		7.36	******	7.36	(12)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	*** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	72	(19)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	5.8	(19)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.11	(19)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.011	(19)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	*** ****			REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 27 2010

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith / Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	2010	01	21

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS), ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

DATE: November 29, 2009 / Duration: Est 21 hrs / Rainfall: 1.70 inches / Total Discharge: 0.64452

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~[illegible]~~ Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	005 B

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	09	01	01	TO	09	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING
*** NO DISCHARGE ! __ ! ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	N001-9	(19)	N001-9	N001-9	N001-9
70530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	N001-9	(19)	N001-9	N001-9	N001-9
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	N001-9	(19)	N001-9	N001-9	N001-9
34000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 27 2010

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith / Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	2010	01	21

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

DATE: November 29, 2009 / Duration: Est 21 hrs / Rainfall: 1.70 inches / Total Discharge: 0.64452

Form Approved.
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC

LOCATION TIE PLANT MS 38960

ATTN: ~~[illegible]~~ Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	006 A

MINOR
(SUBR NO)
F - FINAL TIMBE
STORMWATER GRAB SAMPLING

*** NO DISCHARGE [ ] ***

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	09	01	01	TO	09	12	31

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		7.72	******	7.72	(12)	0	Annual	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	86.4	(19)	0	Annual	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR. TP METH)TOT, RC	SAMPLE MEASUREMENT	******	******		******	******	7.0	(19)	0	Annual	Grab
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT		******	**** ****		******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.51	(19)	0	Annual	Grab
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0.019	(19)	0	Annual	Grab
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 27 2010

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith / Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662	226-4584	2010	01	21
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION [illegible] RAINFALL INCH(S) TOTAL DISCHARGE [illegible]

DATE: November 29, 2009 / Duration: Est 21 hrs / Rainfall: 1.70 nches / Total Discharge: 0.2337

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~VANCE HASKINS~~ Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	006 B

MINOR
(SUBP NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO.	DAY		YEAR	MO.	DAY
FROM	09	01	01	TO	09	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	N001-9	(19)	N001-9	N001-9	N001-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	N001-9	(19)	N001-9	N001-9	N001-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	N001-9	(19)	N001-9	N001-9	N001-9
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 27 2010

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Marcus C. Smith / Plant Mgr
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	2010	01	21

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

DATE: November 29, 2009 / Duration: Est. 21 hrs / Rainfall: 1.70 inches / Total Discharge: 0.2337

Form Approved.
OMB No. 2040-0004

ERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
IAME ROPPERS INDUSTRIES INC
DDRESS P O BOX 160
TIE PLANT MS 38960

ACILITY ROPPERS INDUSTRIES INC
OCATION TIE PLANT MS 38960
ATTN: ~~VANCE HASKINS~~ Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	007 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING
TIMBR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	09	01	01	TO	09	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		7.32	******	7.32	(12)	0	Annual	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	89.6	(19)	0	Annual	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	5.4	(19)	0	Annual	Grab
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.53	(19)	0	Annual	Grab
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0.041	(19)	0	Annual	Grab
34000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 27 2010

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C Smith / Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662	226-4584	2010	01	21
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

DATE: November 29, 2009 / Duration: Est 21 hrs / Rainfall: 1.70 inches / Total Discharge: 0.32472

This is a 4-part form.

PAGE OF

EPA Form 3320-1 (Rev. 2/00) Previous editions may be used.

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME HOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY HOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~HENRY HARKINS~~ Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	007 B
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	09	01	01	TO	09	12	31

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING TIMER

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	N001-9	(19)	N001-9	N001-9	N001-9
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	N001-9	(19)	N001-9	N001-9	N001-9
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	N001-9	(19)	N001-9	N001-9	N001-9
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 27 2010

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C Smith / Plant Mgr	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662	226-4584	2010	01	21
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

DATE: November 29, 2009 / Duration: Est 21 hrs / Rainfall 1.70 inches / Total Discharge: 0.32472

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~MARK HAWKINS~~ Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
MSR820005	008 A

MONITORING PERIOD	YEAR	MO.	DAY		YEAR	MO.	DAY
FROM	09	01	01	TO	09	12	31

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMBR

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		7.40	******	7.40	(12)	0	Annual	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	37.6	(19)	0	Annual	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR - IR METH) TOT, RC	SAMPLE MEASUREMENT	******	******		******	******	5.0	(19)	0	Annual	Grab
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.0018	(19)	0	Annual	Grab
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0.0076	(19)	0	Annual	Grab
34000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 27 2010

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE		
Marcus C. Smith / Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662 226-4584	2010	01	21
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)

DATE: November 29, 2009 / Duration: Est 21 hrs / Rainfall: 1.70 inches / Total Discharge: 0.05904

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38760

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38760
SIGN: ~~[illegible]~~ Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	005 B
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	09	01	01	TO	09	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	21.6	(19)	0	Annual	Compos
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.00094	(19)	0	Annual	Compos
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.0068	(19)	0	Annual	Compos
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 27 2010

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith / Plant Mgr	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662	226 4584	2010	01	21
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

DATE: November 29, 2009 / Duration: Est 21 hrs / Rainfall: 1.70 inches / Total Discharge: 0.05904

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC

LOCATION TIE PLANT MS 38960

ATTN: ~~[illegible]~~ Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	009 A

MINOR
(SUBR NU)
F - FINAL
STORMWATER GRAB SAMPLING

TIMO

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	09	01	01	TO	09	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		7.01	******	7.01	(19)	0	Annual	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	13.6	(19)	0	Annual	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT, RE	SAMPLE MEASUREMENT	******	******		******	******	5.2	(19)	0	Annual	Grab
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.00050	(19)	0	Annual	Grab
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0.0075	(19)	0	Annual	Grab
34000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 27 2010

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith / Plant Mgr.	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Mann C. Smith	(662)	226 4584	2010	01	21
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

DATE: November 29, 2009 / Duration: Est 21 hrs / Rainfall: 1.70 inches / Total Discharge: 0.26322

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KIPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38760

FACILITY KIPPERS INDUSTRIES INC

LOCATION TIE PLANT MS 38760

ATTN: ~~[illegible]~~ Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

MSR220005	009 B	MINOR
PERMIT NUMBER	DISCHARGE NUMBER	(SUBR NO)

F - FINAL TIME

STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	09	01	01	TO	09	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	N001-9	(19)	N001-9	N001-9	N001-9
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 8 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	N001-9	(19)	N001-9	N001-9	N001-9
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 32000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	N001-9	(19)	N001-9	N001-9	N001-9
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 27 2010

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith / Plant Mgr	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith	662	226-4584	2010	01	21
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

DATE: November 29, 2009 / Duration: Est 21 hrs / Rainfall: 1.70 inches / Total Discharge 0.26322

Marcus C. Smith
Plant Manager

KOPPERS

Koppers Inc.
Utility Poles and Piling
P. O. Box 160
Tie Plant, MS 38960
Tel 662 226 4584
Fax 662 226 4582
Smithmc@koppers.com
www.koppers.com

January 25, 2010

Mississippi Department of Environmental Quality
Chief, Industrial Waste Water Branch
Office of Pollution Control
P.O. Box 2261
Jackson, MS 39225-2261

CERTIFIED MAIL: 7008 1140 0001 0773 4476

Subject: Koppers Inc. – Grenada, MS Facility
NPDES Permit No.: MSR220005
2009 Annual Storm Water Sampling Results

Dear Sir or Madam:

Enclosed you will find information relevant to the 2009 Storm Water Sampling activities at Koppers Inc. – Grenada Plant as required by Part IV.D of NPDES Permit No. MSR220005. The sampling of storm water was conducted at Outfalls 003, 005, 006, 007, 008 and 009. The balance of the site's outfalls, Outfalls 001, 002 and 004, was not sampled pursuant to exemptions allowed under Part IV.C.4 of the permit.

Per Part IV.B of the permit a visual inspection and evaluation of all industrial areas contributing to storm water discharge was conducted. Accordingly, a completed "Inspection Report and Certification Form" as well as supplemental information is attached.

I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Sincerely,

Marcus C. Smith

Marcus C. Smith

CC: Joyce Fankulewski – KI CSG
MDEQ – Data Integration Division

RECEIVED
JAN 27 2010
BY:

Part VII.

Inspection Report and Certification Form For Storm Water Pollution Prevention Plan Evaluation

Wood Treater Storm Water General NPDES Permit No. MSR22 _ _ _ _
(Fill in your Certificate of Coverage Number)

(Please Print)

Owner and/or Operator: Koppers, Inc

Facility Name: Koppers Inc. - Grenada Plant

Facility Location: One Koppers Drive, Tie Plant, MS 38960

Date and Time: December 28, 2009 at approximately 1:30 PM

Inspector(s): Blair R. Simpson and Kevin B. Coker

Date of Last Rainfall: December 24, 25, and 26, 2009 **Estimated Amount:** 0.75", 1.20", and 0.10" respectively

Deficiencies Noted During the Inspection (attach additional sheets if necessary):

See attachment

Corrective Action Needed (attach additional sheets if necessary):

See attachment

Corrective Action Compliance Schedule:

See attachment

Based upon this inspection which I or personnel under my direct supervision conducted, I certify that all pollution control measures are adequate and have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan filed with the Office of Pollution Control and good engineering practices as required by the above referenced permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons 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 fines and imprisonment for knowing violations.

I further certify that the Mississippi Office of Pollution Control has been notified of any changes pertinent to our storm water permit as required in Part II.C.

Marcus C. Smith	Marcus C. Smith	1/25/2010
Authorized Name (Print)	Signature	Date

These reports shall be submitted annually, as required in the permit, to:

Chief, Industrial Branch
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385

Visual Site Inspection & Evaluation
NPDES Permit No.: MSR220005
Coverage Year: 2009
KOPPERS INC. – Grenada Plant

Area/Activity/BMP	Possible Contaminants	Observation & Corrective Action
Drainage Site Map	N/A	*Note any potential changes in storm water flow* The facility's Integrated Contingency Plan (ICP) was revised and recertified in March 2009. The "Figures" portion of the ICP contains six (6 ea.) maps of the site providing various information including the watershed areas of the site as well as the location of their respective Outfalls.
Exposed Inventory Quantities / Status / Potential Sources	Permit Parameters	*Quantities (Section 5.4.2);* The Company continues to monitor and attempts to minimize slow moving inventory at the site. Slow moving inventory volumes are communicated to the corporate office on a quarterly basis. The plant's focus is to procure and produce treated inventory only to the extent needed to fully service its customer base as determined by the corporate sales department. The customer base does, however, require that a contingency be maintained. Approximate average inventories for 2009 were as follows: • creosote treated poles and piling 285 pcs • pentachlorophenol treated poles 5,138 pcs • creosote treated cross and switch ties 29,731 pcs • creosote treated lumber 2,837 pcs Approximate average inventories for 2008 were as follows: • creosote treated poles and piling 442 pcs • pentachlorophenol treated poles 4,728 pcs • creosote treated cross and switch ties 47,881 pcs • creosote treated lumber 1,933 pcs The average volume of creosote treated poles, piling, cross ties, and switch ties declined. These declines were largely driven by sales in the square stock volume as well as continued emphasis on the sale of slow moving inventories. Efforts to continue to lower the treated wood foot print at the site will continue to be an area of discussion in the 2010 Pollution Prevention Plan Team (P3 Team) initiatives. Additionally emphasis will be placed on isolating treated inventory to a minimum number of outfall watersheds to further the progress made in 2009 with this effort. The plant's Drip Pad Operating Procedure and Treated Wood Storage Yard Inspection Procedure continue to be employed to control the impact of treated wood on storm water. This is evidenced by the associated records. The refueling area is cleaned and maintained on a routine basis. The concrete surrounding this area was coated with a sealant in 2008. Various lubricants continue to be stored inside of a building equipped with a

		curb and a concrete staging ramp leading into the building that was installed in 2006. This ramp was likewise coated with a sealant in 2008. Both mobile and stationary equipment is inspected each day of operation for leaks that could impact storm water. Documentation of these inspection as well as maintenance work orders is kept at the site. Maintenance activities of leaks that may impact storm water are managed through a new computer program that was adopted in 2008. The program is referred to as C-Works. Ten (10) API 653 Tank inspections were conducted in 2008. Seven (7) API 653 Tank inspections were conducted in 2009. Those tanks posting the greatest potential threat to storm water in the event of failure were inspected first. This cycle will continue as the Integrated Contingency Plan dictates.
Previous Spill Areas	ALL	*All historical spill areas were inspected for evidence of residuals/preservatives as well as the continued presence and effectiveness of control and countermeasures.* *South End Of Cylinders 1 -5* The curtain installed at the back of Cylinders 1 – 5 remains intact and is kept closed as a containment tool. There was no evidence of preservative on the ground outside of containment at the south end of the cylinders. Concrete walkways are installed along the perimeter of the back of the cylinder basement to offer better walking and working surfaces. These are also sealed. An added benefit of this concrete has been the reduced risk of the ground being contacted by preservative in the instance of a gasket failure.
		East of Door to Cylinder No. 5 An examination of the area east of Cylinder No. 5 revealed no evidence of preservative residual being on the ground. Additional concrete was added along the cylinder basement near the north end of Cylinder No. 5. While the focus of this effort was improved walking and working surfaces at the site and added benefit has been the reduced risk of soil being contacted by preservative in the instance of a gasket failure.
		West of Tank Farm Containment Area There is no presence of residual along the west side of the containment area of the tank farm. The containments remain intact. The containment wall in this area is routinely inspected for cracks and leaks.
		West of Boiler Building An examination of the area revealed no evidence of preservative residual being on the ground. No additional recognized risk was identified during the inspection. Improvements implemented in past years and reflected on past evaluations remain intact.
		Temporary Hosing In the event that temporary hosing is used, caution is exercised to ensure that spills do not occur. Lines are tied off to the receiving vessel securely. Additional containment is placed beneath the hoses in the event that a line should leak. These operations are rare and, whenever they are used, they are monitored by plant personnel. An SOP was developed in 2009 for proper transfer of hazardous materials when using temporary hosing.

		Sump Pump Behind Shop Modifications were made to the sumps and curbing servicing the shop pad. The shop pad was equipped with two sumps that worked in series. Storm and wash water captured by the first sump situated on the shop pad gravity fed to a second sump that was equipped with a pump that transferred it to the cylinder basement. This water was subsequently transferred to the plant's waste water treatment system (WWTS). In 2008 the plant's Pollution Prevention Plan Team (P3 Team) implemented a plan to reduce the risk of spills at this area. The secondary sump was taken out of service. The sump on the shop pad was equipped with a pump. The lines servicing the sump were piped to Drip Pad Sump No. 1 and fully contained via the use of a double-wall pipe and existing containments. Water captured at Drip Pad Sump No. 1 is automatically transferred to the plant's WWTS. Additionally, a contractor was hired to install curbing around the perimeter of the shop pad to a height adequate enough to hold a 24 hour, 25 year storm event.
		Hazardous Waste Boxes Two hazardous waste boxes are used at the site. One serves to hold K001 waste and the other serves to hold FO32/FO34 waste. Both are kept on concrete pads. They are inspected on a weekly basis.
		Process Lines In Treating Department New process lines were installed at various areas of the Treating Department to help further reduce the risk of spills from this source. The splash curtains installed along the eastern perimeter of the cylinder basement containment area kept closed to further reduce the risk of spills.
		POTW Discharge Lines The plant's discharge line connecting the WWTS to the POTW was replaced with a double-walled line in 2007. In 2009, a reportable spill occurred that was a result of the inner pipe separating at a slip joint coupling and an outer wall fracture. The inner pipe separation was a result of possible installation error combined with the vibration of nearby truck and powered industrial truck traffic. The fracture of the outer wall was a result of it being stressed at a point where it crossed over and rested on a metal stormwater drainage culvert. This created a stress focused on one point of the outer line. For corrective action the Plant repaired the inner and outer pipes and restored operation of the line. The line was protected from truck and powered industrial truck traffic by concrete barriers, quarter inch steel plating was placed over the line and stone was applied above the line and on the roadway for added stability. For preventative action, the Plant removed the drainage culvert at the point where the two lines intersected. By removing the culvert the stress point in the POTW line was relieved. In addition, concrete barricades were placed in the area to prevent vehicular traffic from compromising the strength of the outer pipe and dye is added to the discharged wastewater at intervals and the line is checked for leaks. No signs of further leakage was seen.
		Creosote Unloading Station The curbing around the perimeter of the creosote tank car unloading station was raised to further reduce the risk of a spill in 2008 as a result of the P3 Teams efforts.
		Drip Pad Transition Points In 2007 a roof was installed over the drip pad to offer added protection at the transition points. The roof measuring approximately 410' x 95' covers a large

		portion of the drip pad and reduces the volume of process water being treated in the plant's WWTS as well as the risk of spills at these transition points. These points are dammed during non-operational days to reduce the risks of spills.
Process Areas / Wood Treating & Storage Areas / WWTS Containments – Aeration, Clarifier & Discharge Tanks.	ALL	*Tank Farm Containments , WWTS Containments, Rail Car Unloading Area, Treated Tie Storage, Treated Pole Storage, Yard Drippage Inspection, Drip Pad, Yard Storage Efficiency, Yard Status, Ditches/Erosion, Etc.* Tank farm and WWTS (Biological Treatment Area) containments are periodically inspected and maintained as necessary. The plants storage areas and roadways continue to be maintained. Aggregate and clay gravel was purchased as needed in 2009. Money and energy was likewise expended to ensure adequate vegetation on slopes and exposed areas of the plant. Effort will continue to ensure erosion is not an issue for the facility.
Loading & Unloading Material Handling Areas	ALL	*Creosote, pentachlorophenol and diesel unloading station practices and containments, tie unloading station at north drip pad, south yard banding areas, etc.* The containments for the diesel, gasoline, creosote, and pentachlorophenol unloading/loading stations are inspected and maintained. These have been referenced at other instances in this report. Employees who operate in these areas have been trained on SPCC issues as well as storm water pollution prevention measures. The Tie Sorter and A&B Mill pose a risk due to the hydraulic equipment utilized in processing cross ties. Various measures have been implemented to minimize this risk including the installation of a roof over the Tie Stacker as well as the employing of routine inspections. In 2009, efforts were made to protect hydraulic lines on key equipment from rupture by wrapping friction points with protective materials.
Chemical Storage Areas	ALL	*Tank farm secondary containments, WWTS chemical containments, boiler chemical containments, high level alarms, etc.* A professional engineer reviewed the facility's secondary containments and certified its revised ICP accordingly in March 2009. Secondary containments are adequate to meet RCRA capacity requirements. WWTS chemicals stored in 55 gallon drums have been placed over containment bins. High level alarms are installed in work tank numbers 6,7,8,9, and 10 as well as in each blow-down tank, oil/water seperators 48A and 50 as well as the final wastewater discharge tank.
Untreated Product Storage Area	TSS	*Verify that ditch banks are intact, that erosion is no occurring.* The ditches in and around the plant's untreated storage area's do not appear to be eroding. As a precaution rye grass is periodically sowed at applicable areas of the site.
Peeler Site	Hydraulic Oil, TSS	*Oil migration from peeler, erosion, road status, etc.* A product used to hamper the growth of fungi on poles is used at the Peeling Operation. This product, "Stabrite", is received in 55 gallon drums. These

		drums are placed in secondary containments. The product is diluted with water into a tank that is staged over secondary containment. This tank was fitted with a larger roof and larger containment in 2009. The concentrate for this dilute solution was placed in a over pack drum and moved to a storage building with concrete flooring. Bark generated at the operation is periodically removed from the area to reduce the risk of it impacting storm water. Additional improvements at this area included the installation of a culvert and additional aggregate to improve equipment movement and storm water flow.
Maintenance Area	ALL	*Scrap yard area, wash pad, sump pumps, drain way to the west of the wash pad.* Scrap is washed prior to being stored in and around the shop to eliminate the risk of storm water contamination. The shop pad and its respective sumps were addressed above under "Previous Spill Areas". As referenced elsewhere in this report, the refueling area was sealed and is maintained.
Outfall 001	ALL	*Ensure drains are open as applicable; detail status of soil stability around the outfall; status of banks and inlets: storm water discharges "shall be free from... debris, oil, scum, and other floating materials other than trace amounts... eroded soils and other materials that will settle to form objectionable deposits in receiving waters... suspended solids, turbidity and color at levels inconsistent with the receiving waters... chemicals in concentrations that would cause violation of State Water Quality Criteria in the receiving waters... "* Outfall 001 is located at the southern end of the plant. The area surrounding the outfall is grassy. No solids have settled in the outfall. The appearance of oils, scum, or solids deposited by storm events is not present. No objectionable deposit of material has been observed below the outfall. Vegetation is well established in the general area of the outfall. Sheens, oils and chemicals were not evident during inspections. No significant changes observed in this outfall.
Outfall 002	ALL	Outfall 002's watershed services the Switch Tie Mill Operation as well as a storage barn area. No objectionable deposits of material have been observed below this outfall. The clarity of the water discharged from the outfall was clearer than that of the receiving waters. There was no evidence of oils or chemicals in the discharge at this Outfall. Repairs conducted to the weir in 2006 remain intact. Soil in the area of the Outfall appears stable. Sheens, oils and chemicals were not evident during inspections. In 2008 the valve and riser assembly servicing this outfall was reworked. No significant changes observed in this outfall.
Outfall 003	ALL	Outfall 003's watershed encompasses the Maintenance Department. Vegetation around Outfall 003, particularly along the bank near the Central Ditch, remained well established. Inspections revealed no evidence of sheens, scum, oils or floating materials. There was no evidence of objectionable deposits in or around the receiving waters. The water discharge at this Outfall has a tendency to be turbid; however, is typically consistent with the receiving waters in the Central Ditch. At the time of the annual inspection the clarity of the discharge water was of good visual clarity. Additional rip rap around the discharge, installed during the previous year, remains intact. A defined sampling point was made during 2009. A load of sand is maintained near Outfall 003 as a precautionary measure to stop the flow of a spill from the shop and/or treating areas if needed.

Outfall 004	ALL	The water discharged from this area was somewhat turbid however was consistent with receiving waters and no adverse deposits have been observed at the discharge point where the flow feeds to the Central Ditch. There has been no evidence of oils, chemicals or scum during the inspections. Effort was employed to ensure vegetation was maintained around the slopes of the detention pond. Additional concrete erosion control materials were applied to the weir area of this outfall during 2009. A load of sand has been staged at the western side of the dam of the detention pond serving Outfall 004 as an emergency response measure in the instance of a spill of oils or chemicals from the treating area.
Outfall 005	ALL	Inspections revealed that the storm water discharges from this area was free of scum and oils. There are no receiving waters immediately below this outfall. Rather, the storm water runs through several acres of forested bottomland prior to every reaching any receiving waters. Its travel route is winding and predominately indistinguishable. There is no evidence of objectionable deposits associated with the discharge of this Outfall. This particular outfall is surrounded by trees and vegetation. Floating twigs and leaves were periodically observed in the detention pond side of this outfall. By design of the slow flow riser, solids such as leaves and twigs will not pass through into the discharge. Vegetation in the area of the Outfall is well established. Soil in the area of the Outfall appears stable. The valve and riser assembly was reworked in 2008. During the 2009 sampling event, care was taken to sample when there was no active flow of stormwater entering the discharge of this outfall from neighboring property. No significant changes were observed in this outfall.
Outfall 006	ALL	Inspections revealed that the discharge was free of oils, debris and scum. The detention basin servicing this outfall is situated in close proximity to standing tress and vegetation. Twigs and leaves were periodically observed in the waters of the detention pond side of the outfall. By design of the floating skimmer, solids such as leaves and twigs will not pass through into the discharge. The discharge from the pond feeds to a drainage culvert. There was no evidence of objectionable deposits associated with the discharge from this watershed observed. The valve and drain system for this outfall was modified to incorporate the use of a skimmer. The detention pond, ditches and drainage ways servicing this outfall were cleaned and improved in 2008. Slopes were graded, ditches were sloped, rip rap was installed to slow storm water flow. Hay bales were installed in different areas of this watershed to slow the flow into this outfall in 2009.
Outfall 007	ALL	Inspections noted that the discharge from the pond was free of signs of scum and oil. Some floating solids from the operations south of the outfall were observed in the discharge drainage way near rip-rap and vegetation. However, these were captured in the drainage way adjacent and below the weir. No evidence of these items reaching the receiving waters was observed. The valve and drain system for this outfall was modified to incorporate the use of a skimmer. The detention pond, ditches and drainage ways servicing this outfall were cleaned and improved in 2008. Slopes were graded, ditches were sloped, rip rap was installed to slow storm water flow. Vegetation is well established in the areas around the outfall. Hay bales were installed in different areas of this watershed to slow the flow into this outfall in 2009.

Outfall 008	ALL	Ground vegetation remained intact and soil in the area of the Outfall remained stable. Inspections showed that no objectionable deposits resulted from storm water discharge from this watershed. Discharged storm water was clearer than receiving waters and free of oil, floating materials, debris and scum. The valve and riser assembly in this Outfall was reworked in 2008. No significant changes observed in this outfall.
Outfall 009	ALL	Inspections revealed that discharge from the watershed of Outfall 009 was free of oil, debris, scum and other floating solids. The clarity of the water discharged from the outfall was consistent with the receiving waters and typically better in clarity. The outfall drains directly into the plant's Central Ditch through a slow flow riser pipe. No objectionable deposit of material has been observed below the outfall. Vegetation around the Outfall remained intact. No evidence of erosion was observed at the discharge area and soil in the area of the Outfall appears stable. The valve and riser assembly in this Outfall was reworked in 2008.
Best Management Practices	ALL	*Process Area/Active Wood Treating and Storage Area* Drippage ceased procedures have been monitored. A log is completed and maintained accordingly. Operators work to keep treated material on the drip pad as long as feasibly possible. If charges continue to drip they are placed back in the cylinders for additional steaming/cleaning cycles. Evidence of these activities are available on plant records. Cylinders are periodically cleaned when evidence of sludge is observed and believed linked to dirty cylinders. Limpid points are monitored weekly and maintained at acceptable levels thus reducing the accumulation of solids on treated products. Treated wood poles are clean and free of solids subsequent to treating cycles. Steam flash cycles are used to help further ensure treated products are clean. Traffic on the drip pad remains limited to standard traffic required for the operation of the plant. Dedicated equipment is used on the pad. Tires are washed prior to entry and exit from the pad. Reorganization/minimization of the treated wood storage yard has been and will continue to be a focus for the P3 Team. Effort is employed to ensure all treated poles are stored in elevated bins, thus minimizing their contact with storm water running during storm events. Effort to manage pole reclass reduces the overall volume of treated wood waste generated at the site. Ongoing efforts to maintain the plant's storage yard. This is an ongoing item requiring routine maintenance. In 2009 clay gravel and stone was purchased on a periodic basis to help maintain the yard. Skids are used to help keep untreated products off of the ground and reduce the accumulation of dust and mud on products as they are placed into the treating cylinders. Inevitably this reduces the level of solids on the surface of wood products as well as the volume of waste generated in the plant's process equipment. Cylinders are cleaned as needed. Containments were inspected on a routine basis. Various work was conducted to better improve the plant's containment and control abilities as previously

		referenced in this report. The plant continues to monitor preservative usage for environmental and economic reasons. The plant has worked to monitor and ensure the establishment of vegetation on slopes at the site. *Loading & Unloading Material Handling Areas –* The plant's P3 Team conducted an evaluation of the five most hazardous spill risk in 2008. An action plan addressing these items was generated and implemented as a result of their assessment. Various proactive and preventative measures were implemented to further reduce the risk of spills around the plant's tank farm and loading and unloading areas. Standard Operating Procedures have been written and or revised as needed, and relayed to plant employees. These procedures are reviewed periodically for accuracy and thoroughness. Annual training on the plant's various Best Management Practices is conducted. A catch basin installed adjacent the wood fuel handing area serves to capture silt and debris transferred via storm water toward Outfall 004 is maintained by operating personnel in this area. Maintaining the basin helps to reduce the organic loading placed on all areas downstream from this basin. *Chemical Storage Areas –* Secondary containment has been inspected on a routine basis and enhanced as described earlier in this evaluation. Level gauges are provided for various tanks. The installation of additional gauges occurred in 2009. Chemicals related to the operations of the WWTS are enclosed and placed over secondary containment bins where necessary. *Untreated Product Storage Areas –* The plant's storage yard has been oriented so as to allow for storm water to be diverted around key stored product. Culverts are installed and maintained as required. These yards are maintained as needed. Debris is removed from the yard as required. Blocks and cut-offs from framing operations are cleaned on a routine basis. Rip rap and hay bales have been used at the head of some ditches and around culvert inlets and outlets. This has particularly been the case for Outfalls 006 and 007 in 2008 and 2009. Vegetation at various areas of the plant has been addressed in earlier text. *Peeler Site –* Facility personnel work to prevent and/or maintain hydraulic leaks as required. This area represents a high traffic area as material is processed and transferred to the appropriate storage bins. Effort is expended to ensure that it is maintained and well drained. A secondary containment unit was purchased for the Sta-Brite P chemical stored in 55 gallon drums and placed in covered storage building with concrete flooring in 2009.

		Maintenance – An outside party continues to manage used oil and lubricants. The plant's parts washer is an environmentally friendly unit using an organic degreaser. The containments around the refueling area and lubricants building were sealed in 2008. A spill kit is maintained at the refueling area and an Standard Operating Procedure addressing environmental issues at this area is maintained. Scrap metal is washed (as necessary) and placed in a hopper provided by the vendor. The quantities of scrap generated on the plant are tracked. A local vendor disposes of the waste. A wash pad is provided near the shop. This area was improved as described earlier in this evaluation. Trams are staged on a concrete pad situated to the east of the maintenance area after being steamed cleaned on the shop pad. Installation of a roof over this area could potentially further reduce risk of storm water exposure to chemicals.

Per Part III.C.6 of the facility's NPDES Permit the Storm Water Pollution Prevention Plan (SWPPP) requires amending whenever it proves to be ineffective in controlling storm water pollutants. This document represents an extension of the SWPPP. While the 2009 storm water analytical results reveal no excursions of the criteria set forth in the "State of Mississippi Water Criteria For Intrastate, Interstate and Costal Waters", the items listed below represent tentative actions to be employed in 2010 in an effort to improve storm water discharge quality.

1. Install hay bails and silt fencing methodically along the drainage ways of ditches servicing watersheds used for the storage of treated wood.

2. Install culverts in appropriate yard areas in order to define paths of travel for powered industrial trucks.

3. Improve vegetative cover in appropriate yard areas in order to slow the path of stormwater through the Plant's watersheds.

4. Improve and maintain facility housekeeping efforts by utilizing 5S Visual Management System.

.

The on-going and continual Grenada Plant Best Management Practices are listed below for review and comparison to the inspection listed above.

Area or Activity	Best Management Practice
Process Area/Active Wood Treating and Storage Area	• Assure drippage has ceased prior to removal of treated wood products from drip pad. • Manage treating preservatives to ensure acceptable levels thus ensuring clean surfaces on treated wood products. • Eliminate non-process traffic on drip pad; ensure that all equipment tires are washed before entering and departing from the drip pad.

	• Minimize the footprint of treated inventory, limiting the potential area of effect on storm water runoff. • Work to minimize the need to cut treated wood. However, when it is necessary, manage the saw dust associated with the cutting appropriately. • Maintain the condition of the untreated wood yard thus reducing the likelihood of mud and debris from accumulating on products prior to treatment and thus increasing the opportunity for storm water impact subsequent to the treating process. • Maintain the cleanliness of treating cylinders. Clean them on a routine schedule. • Inspect and ensure that all containments are adequate and intact. • Adjust preservative cycles as necessary working to ensure that the quantity of preservative placed in wood products is minimized yet compliant to AWPA retention and penetration requirements. • When feasible apply post-treatment processes such as steam flashing and expansion baths. • Work to minimize the quantity of treated wood stored on the site. • Ensure the appropriate implementation of yard drippage inspection programs.
Loading and Unloading Material Handling Areas	• Provide defined paths of storm water flow from loading and unloading areas enhancing vegetation in these areas to serve to filter and capture suspended solids. • Ensure that containments are adequate and allow no run-on or run-off of preservative. Evaluate and minimize the risks of spills in these areas. • Ensure that employees involved in this function of the plant's operations are adequately trained.
Chemical Storage Area	• Ensure that all secondary containment is adequate and intact. • Provide level gauges thus reducing the risk of spills. • Enclose chemical storage areas where possible.
Untreated Product Storage Area	• Divert storm water around storage area. • Position storage areas on stable, well-drained soils; conduct routine maintenance. • Keep the area free of debris. • Use silt fence, hay bales, and/or rip rap check dams in drainage ways. • Utilize and maintain catch basins near weirs at outfalls. • Maintain all ditch banks; sewing vegetation where applicable and beneficial. Utilize mixed vegetation ensuring its presence during each season of the year. • Do not drive loaders or other equipment through ditches or on banks. Stay on established roadways.
Peeler Site	• Conduct maintenance ensuring that hydraulic leaks are eliminated. • Ensure that stored bark does not fall into the north ditch. • Work to maintain the roadways and ditches around the peeling operation.
Maintenance	• Ensure that all oils and waste generated during maintenance and servicing activities in the plant are managed in a timely and appropriate fashion.

	• Park all mobile equipment on concrete or paved surfaces. • Recycle scrape metal as it is generated. Do not allow it to accumulate on the ground. • Ensure that all equipment washing activities are conducted on the wash pad.

This inspection is responsive to Part III.7. (c) and Part IV.B of NPDES Permit No.: MSR220005. It reflects an evaluation of the activities that took place during the year 2009 and previous years to better improve and/or ensure that storm water was not contaminated by plant activities.

Signature Marvin C. Smith

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME

ADDRESS

FACILITY

LOCATION

MARCUS C. SMITH

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*

DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

Grenada

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				NODI-9		NODI-9		NODI, A	NODI-9	NODI-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9		NODI, A	NODI-9	NODI-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9		NODI, A	NODI-9	NODI-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9		NODI, A	NODI-9	NODI-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9		NODI, A	NODI-9	NODI-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2009

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
MARCUS C. SMITH PLANT MANAGER TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662	226-4584	09	01	21
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT PER PERMIT No. MSR22005 PART IV.C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME

ADDRESS

FACILITY
LOCATION MARCUS C. SMITH

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						N001-9		N001,9	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						N001-9		N001,9	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						N001-9		N001,9	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2009

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
MARCUS C. SMITH PLANT MANAGER TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662 AREA CODE	226-4584 NUMBER	09 YEAR	01 MO	21 DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXCEPT PER PERMIT NO. MSL 22005 PART IV.C.4.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME
ADDRESS

FACILITY
LOCATION MARCUS C. SMITH

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				N001-9		N001-9		N001,9	N001-9	N001-9
	PERMIT REQUIREMENT				REPORT		REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						N001-9		N001,9	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						N001-9		N001,9	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						N001-9		N001,9	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						N001-9		N001,9	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2009

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Marcus C. Smith
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
662	226-4584	09	01	21

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

EXEMPT PER PERMIT NO. MSR22005 PART II.C.4.

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME

ADDRESS

FACILITY
LOCATION MARCUS C. SMITH

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						N001-9		N001-9	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						N001-9		N001-9	N001-9	N001-9
	PERMIT REQUIREMENT									ANNUAL	COMPOS
	SAMPLE MEASUREMENT						N001-9		N001-9	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2009

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
MARCUS C. SMITH PLANT MANAGER TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662 AREA CODE	226-4584 NUMBER	09 YEAR	01 MO	21 DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT PER PERMIT NO. NSR 22005 PART IV. C. 4.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS

FACILITY
LOCATION Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT (*DMR*)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				8.18		8.18		0	Annual	Grab
	PERMIT REQUIREMENT				REPORT		REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						291		0	Annual	Grab
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT						NODI-B		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						0.011		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-B		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2009

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith Plant Manager TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662	226-4584	09	01	21
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Storm Date: November 24, 2008 / Duration: Est. 6 Hours / Rainfall: 0.75 Inches / Total Discharge: 0.01512

PERMITTEE NAME/ADDRESS *Include Facility Name Location if Different*
NAME
ADDRESS
FACILITY
LOCATION Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE. Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						409		0	Annual	Composite
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						0.024		0	Annual	Composite
	PERMIT REQUIREMENT						REPORT			ANNUAL	
	SAMPLE MEASUREMENT						NODI-B		0	Annual	Composite
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2009

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith Plant Manager TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662 AREA CODE	226-4884 NUMBER	09 YEAR	01 MO	21 DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Storm Date: November 24, 2008 / Duration: Est. 6 Hours / Rainfall: 0.75 Inches / Total Discharge: 0.0512

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS

FACILITY
LOCATION Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				NODI-9		NODI-9		NODI/A	NODI-9	NODI-9
	PERMIT REQUIREMENT				REPORT		REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9		NODI/A	NODI-9	NODI-9
	PERMIT REQUIREMENT									ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9		NODI/A	NODI-9	NODI-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9		NODI/A	NODI-9	NODI-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9		NODI/A	NODI-9	NODI-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2009

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Marcus C. Smith Plant Manager TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662 AREA CODE	226-4584 NUMBER	09 YEAR	01 MO	21 DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT PER PERMIT NO. MSR 22005 PART V.C.4.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS

FACILITY
LOCATION Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						N001-9		N001,9	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						N001-9		N001,9	N001-9	N001-9
	PERMIT REQUIREMENT									ANNU. L	COMP
	SAMPLE MEASUREMENT						N001-9		N001,9	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2009

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662	226-4584	09	01	21
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Exempt Per Permit No. MSC 22005 Part IV.C.4.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS

FACILITY
LOCATION MARCUS C. SMITH

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				7.61		7.61		0	ANNUAL	GRAB
	PERMIT REQUIREMENT				REPORT MINIMUM		REPORT MAXIMUM			ANNUAL	GRAB
	SAMPLE MEASUREMENT						41		0	ANNUAL	GRAB
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT						NODI-B		0	ANNUAL	GRAB
	PERMIT REQUIREMENT									ANNUAL	GRAB
	SAMPLE MEASUREMENT						0.150		0	ANNUAL	GRAB
	PERMIT REQUIREMENT									ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-B		0	ANNUAL	GRAB
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2009

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
MARCUS C. SMITH PLANT MANAGER TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662 AREA CODE	226-4584 NUMBER	09 YEAR	01 MO	21 DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

STORM DATE: OCTOBER 23, 2008 / DURATION: EST. 24 HOURS / RAINFALL: 1.45 INCHES / TOTAL DISCHARGE: 0.4978

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS

FACILITY
LOCATION Marcus C Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

Form Approved.
OMB No. 2040-0004

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						N001-9		N001,9	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						N001-9		N001,9	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						N001-9		N001,9	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2009

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662 AREA CODE	226-4504 NUMBER	09 YEAR	01 MO	21 DAY
TYPED OR PRINTED							

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Storm Date: October 23, 2008 / Duration: Est. 24 Hours / Rainfall: 1.45 inches / Total Discharge: 0.4978 mgd

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS

FACILITY
LOCATION Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

Form Approved.
OMB No. 2040-0004

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						N001-9		N001/A	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						N001-9		N001/A	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						N001-9		N001/A	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2009

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith Plant Manager TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662 AREA CODE	226-4584 NUMBER	09 YEAR	01 MO	21 DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Storm Date: October 7, 2008 / Duration: Est. 18 Hours / Rainfall: 0.80 Inches / Total Discharge: 0.0589 MG

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME
ADDRESS
FACILITY
LOCATION Marcus L. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				7.47		7.47		0	Annual	Grab
	PERMIT REQUIREMENT				REPORT		REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						295		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						N001-B		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						0.286		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						N001-B		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2009

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Marcus L. Smith Plant Manager TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662	226 4584	09	01	21
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Storm Date: October 7, 2008 / Duration: Est. 18 hours / Rainfall: 0.80 inches / Total Discharge: 0.0589 MG

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
N[redacted]
ADDRESS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

FACILITY
LOCATION MARCUS C. SMITH

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				7.20		7.20		0	ANNUAL	GRAB
	PERMIT REQUIREMENT				REPORT		REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						264		0	ANNUAL	GRAB
	PERMIT REQUIREMENT									ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-B		0	ANNUAL	GRAB
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						0.147		0	ANNUAL	GRAB
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-B		0	ANNUAL	GRAB
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2009

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
MARCUS C. SMITH PLANT MANAGER TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662 AREA CODE	226-4584 NUMBER	09 YEAR	01 MO	21 DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

STORM DATE: OCTOBER 7, 2008 / DURATION: EST. 18 HOURS / RAINFALL: 0.80 INCHES / TOTAL DISCHARGE: 0.08184 MG

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						N001-9		N001/A	N001-9 Average	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						N001-9		N001/A	N001-9 Average	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						N001-9		N001/A	N001-9 Average	N001-9
	PERMIT REQUIREMENT									ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2009

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith Plant Manager TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662 AREA CODE	226 4584 NUMBER	09 YEAR	01 MO	21 DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Storm Date: October 7, 2008 / Duration: Est. 18 Hours / Rainfall: 0.80 inches / Total Discharge: 0.08184 MG

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				7.78		7.78		0	Annual	Grab
	PERMIT REQUIREMENT				REPORT		REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						89		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						N001-B		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						N001-B		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						N001-B		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2009

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662 226-4584		09	01	21
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Storm Date: November 24, 2008 / Duration: Est. 6 Hours / Rainfall: 0.38 Inches / Total Discharge: 0.01296

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS

FACILITY
LOCATION Marcus C Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						84		0	Annual	Composite
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						N001-B		0	Annual	Composite
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT						N001-B		0	Annual	Composite
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2009

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith Plant Manager TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662 AREA CODE	226-4584 NUMBER	09 YEAR	01 MO	21 DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Storm Date: November 24, 2008 / Duration: Est. 6 Hours / Rainfall: 0.75 inches / Total Discharge: 0.01296

PERMITTEE NAME / ADDRESS (Include Facility Name/Location if Different)

ADDRESS

FACILITY LOCATION Marcus C. Smith

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				6.62		6.62		0	Annual	Grab
	PERMIT REQUIREMENT				REPORT		REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						56		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						N001-B		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						N001-B		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT						N001-B		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2009

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith Plant Manager TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662 AREA CODE	221 4584 NUMBER	09 YEAR	01 MO	21 DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

STORM DATE: OCTOBER 7, 2008 / DURATION: EST. 18 HOURS / RAINFALL: 0.80 INCHES / TOTAL DISCHARGE: 0.06634 MG

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME

ADDRESS

FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approve
OMB No. 2040

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						N001-9		N001,A	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						N001-9		N001,A	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT				
	SAMPLE MEASUREMENT						N001-9		N001,A	N001-9	N001-9
	PERMIT REQUIREMENT						REPORT			ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2009

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Marcus C. Smith Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Marcus C. Smith SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662	226-4584	09	01	21
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

STORM DATE: OCTOBER 7, 2008 / DURATION: EST. 18 HOURS / RAINFALL: 0.80 INCHES / TOTAL DISCHARGE: 0.06634 MG

Marcus C. Smith
Plant Manager

KOPPERS

Koppers Inc.
Utility Poles and Piling
P. O. Box 160
Tie Plant, MS 38960
Tel 662 226 4584
Fax 662 226 4588
Smithmc@koppers.com
www.koppers.com

January 21, 2009

Mississippi Department of Environmental Quality
Office of Pollution Control
Data Integration Division
P.O. Box 2261
Jackson, MS 39225-2261

CERTIFIED MAIL: 7008 1140 0001 0773 4575

Subject: Koppers Inc. – Grenada, MS Facility
NPDES Permit No.: MSR220005
2008 Annual Storm Water Sampling Results

Dear Sir or Madam:

Enclosed you will find information relevant to the 2008 Storm Water Sampling activities at Koppers Inc. – Grenada Plant as required by Part IV.D of NPDES Permit No. MSR220005. The sampling of storm water was conducted at Outfalls 003, 005, 006, 007, 008 and 009. The balance of the site's outfalls, Outfalls 001, 002 and 004, was not sampled pursuant to exemptions allowed under Part IV.C.4 of the permit.

Per Part IV.B of the permit a visual inspection and evaluation of all industrial areas contributing to storm water discharge was conducted. Accordingly, a completed "Inspection Report and Certification Form" as well as supplemental information is attached.

I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Sincerely,

Marcus C. Smith

Marcus C. Smith

CC: Joyce Fankulewski – KI CSG
Chief, Industrial Wastewater Branch

RECEIVED
JAN 2009

Part VII.

Inspection Report and Certification Form
For Storm Water Pollution Prevention Plan Evaluation

Wood Treater Storm Water General NPDES Permit No. MSR220005

(Please Print)

Owner and/or Operator: Koppers Inc.

Facility Name: Koppers Inc. - Grenada Plant

Facility Location: One Koppers Drive; Tie Plant, MS 38960

Date and Time: December 10, 2008 @ Approximately 2:00 PM

Inspector(s): Kevin Coker & Ron Rutledge

Date of Last Rainfall: December 8, 9 & 10, 2008 **Estimated Amount:** 0.20, 3.50, & 0.87, respectively

Deficiencies Noted During the Inspection (attach additional sheets if necessary):

See Attached

Corrective Action Needed (attach additional sheets if necessary):

See Attached

Corrective Action Compliance Schedule:

See Attached

Based upon this inspection which I or personnel under my direct supervision conducted, I certify that all pollution control measures are adequate and have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan filed with the Office of Pollution Control and good engineering practices as required by the above referenced permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons 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 fines and imprisonment for knowing violations.

I further certify that the Mississippi Office of Pollution Control has been notified of any changes pertinent to our storm water permit as required in Part II.C.

Marcus C. Smith	Marcus C. Smith	January 21, 2009
Authorized Name (Print)	Signature	Date

These reports shall be submitted annually, as required in the permit, to:

Chief, Industrial Branch
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385

Visual Site Inspection & Evaluation
NPDES Permit No.: MSR220005
Coverage Year: 2008
KOPPERS INC. – Grenada Plant

Area/Activity/BMP	Possible Contaminants	Observation & Corrective Action
Drainage Site Map	N/A	*Note any potential changes in storm water flow* The facility's Integrated Contingency Plan (ICP) was revised and recertified in March 2008. The "Figures" portion of the ICP contains six (6 ea.) maps of the site providing various information including the watershed areas of the site as well as the location of their respective Outfalls.
Exposed Inventory Quantities / Status / Potential Sources	Permit Parameters	*Quantities (Section 5.4.2);* The Company continues to monitor and attempts to minimize slow moving inventory at the site. Slow moving inventory volumes are communicated to the corporate office on a quarterly basis. The plant's focus is to procure and produce treated inventory only to the extent needed to fully service its customer base as determined by the corporate sales department. The customer base does, however, require that a contingency be maintained. Approximate average inventories for 2008 were as follows: • creosote treated poles and piling 442 pcs • pentachlorophenol treated poles 4,728 pcs • creosote treated cross and switch ties 47,881 pcs • creosote treated lumber 1,933 pcs Approximate average inventories for 2007 were as follows: • creosote treated poles and piling 532 pcs • pentachlorophenol treated poles 4,961 pcs • creosote treated cross and switch ties 91,225 pcs • creosote treated lumber 5,674 pcs The average volume of creosote treated poles, piling, cross ties, switch ties, and treated lumber declined. The average volume of pentachlorophenol treated poles likewise declined slightly. These declines were largely driven by solid sales in the square stock volume as well as continued emphasis on the sale of slow moving bridge lumber inventories. Efforts to continue to lower the treated wood foot print at the site will continue to be an area of discussion in the 2009 Pollution Prevention Plan Team (P3 Team) initiatives. Additionally emphasis will be placed on isolating treated inventory to a minimum number of outfall watersheds. The plant's Drip Pad Operating Procedure and Treated Wood Storage Yard Inspection Procedure continue to be employed to control the impact of treated wood on storm water. This is evidenced by the associated records. The refueling area is cleaned and maintained on a routine basis. The concrete surrounding this area was coated with a sealant in 2008.

		Various lubricants continue to be stored inside of a building equipped with a curb and a concrete staging ramp leading into the building that was installed in 2006. This ramp was likewise coated with a sealant in 2008. Both mobile and stationary equipment is inspected each day of operation for leaks that could impact storm water. Documentation of these inspection as well as maintenance work orders is kept at the site. Maintenance activities of leaks that may impact storm water are managed through a new computer program that was adopted in 2008. The program is referred to as C-Works. API 653 Tank inspections were conducted periodically throughout 2008 on ten (10 ea.) tanks. Those tanks posting the greatest potential threat to storm water in the event of failure were inspected first. This cycle will continue until all applicable tanks are inspected.
Previous Spill Areas	ALL	*All historical spill areas were inspected for evidence of residuals/preservatives as well as the continued presence and effectiveness of control and countermeasures.* *South End Of Cylinders 1 -5* The curtain installed at the back of Cylinders 1 – 5 remains intact and is kept closed as a containment tool. Employees were trained once again on February 28, 2008 to ensure this requirement is monitored. There was no evidence of preservative on the ground outside of containment at the south end of the cylinders. New concrete walkways were installed along the perimeter of the back of the cylinder basement to offer better walking and working surfaces. These were also sealed. An added benefit of this action has been the reduced risk of the ground being contacted by preservative in the instance of a gasket failure.
		East of Door to Cylinder No. 5 An examination of the area east of Cylinder No. 5 revealed no evidence of preservative residual being on the ground. Additional concrete was added along the cylinder basement near the north end of Cylinder No. 5. While the focus of this effort was improved walking and working surfaces at the site and added benefit has been the reduced risk of soil being contacted by preservative in the instance of a gasket failure.
		West of Tank Farm Containment Area There is no presence of residual along the west side of the containment area of the tank farm. The containments remain intact. The containment wall in this area is routinely inspected for cracks and leaks.
		West of Boiler Building An examination of the area revealed no evidence of preservative residual being on the ground. No additional recognized risk was identified during the inspection. Improvements implemented in past years and reflected on past evaluations remain intact.
		Temporary Hosing In the event that temporary hosing is used, caution is exercised to ensure that spills do not occur. Lines are tied off to the receiving vessel securely. Additional containment is placed beneath the hoses in the event that a line should leak. These operations are rare and, whenever they are used, they are

		monitored by plant personnel.
		Sump Pump Behind Shop Modifications were made to the sumps and curbing servicing the shop pad. The shop pad was equipped with two sumps that worked in series. Storm and wash water captured by the first sump situated on the shop pad gravity fed to a second sump that was equipped with a pump that transferred it to the cylinder basement. This water was subsequently transferred to the plant's waste water treatment system (WWTS). On April 10, 2008 the plant's Pollution Prevention Plan Team (P3 Team) assessed the potential for spills at this area. Accordingly, a plan was devised and inevitably implemented to reduce the risk of spills at this area. The secondary sump was taken out of service. The sump on the shop pad was equipped with a pump. The lines servicing the sump were piped to Drip Pad Sump No. 1 and fully contained via the use of a double-wall pipe and existing containments. Water captured at Drip Pad Sump No. 1 is automatically transferred to the plant's WWTS. Additionally, a contractor was hired to install curbing around the perimeter of the shop pad to a height adequate enough to hold a 24 hour, 25 year storm event.
		Hazardous Waste Boxes Two hazardous waste boxes are used at the site. One serves to hold K001 waste and the other serves to hold FO32/FO34 waste. Both are kept on concrete pads. They are inspected on a weekly basis.
		Process Lines In Treating Department New process lines were installed at various areas of the Treating Department to help further reduce the risk of spills from this source. The splash curtains installed along the eastern perimeter of the cylinder basement containment area kept closed to further reduce the risk of spills.
		POTW Discharge Lines The plant's discharge line connecting the WWTS was replaced with a double-walled line in 2007. The line is on a grade such that in the event that of a leak the water would inevitably flow to the POTW. No apparent leaks have been evident since the new line was installed.
		Creosote Unloading Station The curbing around the perimeter of the creosote tank car unloading station was raised to further reduce the risk of a spill in 2008 as a result of the P3 Teams April 10th assessment.
		Drip Pad Transition Points In 2007 a roof was installed over the drip pad to offer added protection at the transition points. The roof measuring approximately 410' x 95' covers a large portion of the drip pad and reduces the volume of process water being treated in the plant's WWTS as well as the risk of spills at these transition points.

Process Areas / Wood Treating & Storage Areas / WWTS Containments – Aeration, Clarifier & Discharge Tanks.	ALL	*Tank Farm Containments ,WWTS Containments, Rail Car Unloading Area, Treated Tie Storage, Treated Pole Storage, Yard Drippage Inspection, Drip Pad, Yard Storage Efficiency, Yard Status, Ditches/Erosion, Etc.* Tank farm and WWTS (Biological Treatment Area) containments are periodically inspected and maintained as necessary. The plants storage areas and roadways continue to be maintained. Aggregate and clay gravel is purchased as needed. This will represent a continual preventative maintenance item in 2009. Money and energy was likewise expended to ensure adequate vegetation on slopes and exposed areas of the plant. Effort will continue to ensure erosion is not an issue for the facility.
Loading & Unloading Material Handling Areas	ALL	*Creosote, pentachlorophenol and diesel unloading station practices and containments, tie unloading station at north drip pad, south yard banding areas, etc.* The containments for the diesel, gasoline, creosote, and pentachlorophenol unloading/loading stations are inspected and maintained. These have been referenced at other instances in this report. Employees who operate in these areas have been trained on SPCC issues as well as storm water pollution prevention measures. The Tie Sorter and A&B Mill pose a risk due to the hydraulic equipment utilized in processing cross ties. Various measures have been implemented to minimize this risk including the installation of a roof over the Tie Stacker as well as the employing of routine inspections.
Chemical Storage Areas	ALL	*Tank farm secondary containments, WWTS chemical containments, boiler chemical containments, high level alarms, etc.* A professional engineer reviewed the facility's secondary containments and certified its revised ICP accordingly in March 2008. Secondary containments are adequate to meet RCRA capacity requirements. WWTS chemicals stored in 55 gallon drums have been placed over containment bins. High level alarms are installed in work tank's number 3 and 4 as well as in each blow-down tank. The installation of additional high level alarms on six tanks was submitted as a part of the plant's 2009 capital program.
Untreated Product Storage Area	TSS	*Verify that ditch banks are intact, that erosion is no occurring.* The ditches in and around the plant's untreated storage area's do not appear to be eroding. As a precaution rye grass is periodically sowed at applicable areas of the site.
Peeler Site	Hydraulic Oil, TSS	*Oil migration from peeler, erosion, road status, etc.* A product used to hamper the growth of fungi on poles is used at the Peeling Operation. This product, "Stabrite", is received in 55 gallon drums. These drums are placed in secondary containments. The product is diluted with water into a tank that is staged over secondary containment. This tank and its containment is scheduled to be fitted with a roof. Bark generated at the operation is periodically removed from the area to reduce the risk of it impacting storm water.

		Additional improvements at this area included the installation of a culvert and additional aggregate to improve equipment movement and storm water flow.
Maintenance Area	ALL	*Scrap yard area, wash pad, sump pumps, drain way to the west of the wash pad.* Scrap is washed prior to being stored in and around the shop to eliminate the risk of storm water contamination. The shop pad and its respective sumps were addressed above under "Previous Spill Areas". As referenced elsewhere in this report, the refueling area was sealed and is maintained.
Outfall 001	ALL	*Ensure drains are open as applicable; detail status of soil stability around the outfall; status of banks and inlets: storm water discharges "shall be free from...debris, oil, scum, and other floating materials other than trace amounts...eroded soils and other materials that will settle to form objectionable deposits in receiving waters...suspended solids, turbidity and color at levels inconsistent with the receiving waters...chemicals in concentrations that would cause violation of State Water Quality Criteria in the receiving waters..."* Outfall 001 is located at the southern end of the plant. The area surrounding the outfall is grassy. No solids have settled in the outfall. The appearance of oils, scum, or solids deposited by storm events is not present. No objectionable deposit of material has been observed below the outfall. Vegetation is well established in the general area of the outfall. Sheens, oils and chemicals were not evident during inspections.
Outfall 002	ALL	Outfall 002's watershed services the Switch Tie Mill Operation as well as a storage barn area. No objectionable deposits of material have been observed below this outfall. The clarity of the water discharged from the outfall was clearer than that of the receiving waters. There was no evidence of oils or chemicals in the discharge at this Outfall. Repairs conducted to the weir in 2006 remain intact. Soil in the area of the Outfall appears stable. Sheens, oils and chemicals were not evident during inspections. The valve and riser assembly servicing this outfall was reworked in 2008.
Outfall 003	ALL	Outfall 003's watershed encompasses the Maintenance Department. Vegetation around Outfall 003, particularly along the bank near the Central Ditch, remained well established. Inspections revealed no evidence of sheens, scum, oils or floating materials. There was no evidence of objectionable deposits in or around the receiving waters. The water discharge at this Outfall has a tendency to be turbid; however, is typically consistent with the receiving waters in the Central Ditch. Additional rip rap around the discharge was installed during the year. A load of sand is maintained near Outfall 003 as a precautionary measure to stop the flow of a spill from the shop and/or treating areas if needed.
Outfall 004	ALL	The water discharged from this area was somewhat turbid however was consistent with receiving waters and no adverse deposits have been observed at the discharge point where the flow feeds to the Central Ditch. There has been no evidence of oils, chemicals or scum during the inspections. Effort was employed to ensure vegetation was maintained around the slopes of the detention pond. The valve and riser assembly in this Outfall will be reworked in 2008. A load of sand has been staged at the western side of the dam of the detention

		pond serving Outfall 004 as an emergency response measure in the instance of a spill of oils or chemicals from the treating area.
Outfall 005	ALL	Inspections revealed that the storm water discharges from this area was free of scum and oils. There are no receiving waters immediately below this outfall. Rather, the storm water runs through several acres of forested bottomland prior to every reaching any receiving waters. Its travel route is winding and predominately indistinguishable. There is no evidence of objectionable deposits associated with the discharge of this Outfall. This particular outfall is surrounded by trees and vegetation. Floating twigs and leaves were periodically observed in the pond. Vegetation in the area of the Outfall is well established. Soil in the area of the Outfall appears stable. The valve and riser assembly was reworked in 2008.
Outfall 006	ALL	Inspections revealed that the discharge was free of oils, debris and scum. The detention basin servicing this outfall is situated in close proximity to standing tress and vegetation. Twigs and leaves were periodically observed in the waters of the pond. The discharge from the pond feeds to a drainage ditch. There was no evidence of objectionable deposits associated with the discharge from this watershed observed. The valve and drain system for this outfall was modified to incorporate the use of a skimmer. The detention pond, ditches and drainage ways servicing this outfall were cleaned and improved in 2008. Slopes were graded, ditches were sloped, rip rap was installed to slow storm water flow.
Outfall 007	ALL	Inspections also noted that the discharge from the pond was free of signs of scum and oil. Some floating solids from the operations south of the outfall were observed in the discharge drainage way near rip-rap and vegetation. However, these were captured in the drainage way adjacent and below the weir. No evidence of these items reaching the receiving waters was observed. The valve and drain system for this outfall was modified to incorporate the use of a skimmer. The detention pond, ditches and drainage ways servicing this outfall were cleaned and improved in 2008. Slopes were graded, ditches were sloped, rip rap was installed to slow storm water flow. Vegetation became more established subsequent to these improvements as the year progressed.
Outfall 008	ALL	Ground vegetation remained intact and soil in the area of the Outfall remained stable. Inspections showed that no objectionable deposits resulted from storm water discharge from this watershed. Discharged storm water was clearer than receiving waters and free of oil, floating materials, debris and scum. The valve and riser assembly in this Outfall was reworked in 2008.
Outfall 009	ALL	Inspections revealed that discharge from the watershed of Outfall 009 was free of oil, debris, scum and other floating solids. The clarity of the water discharged from the outfall was consistent with the receiving waters and typically better in clarity. The outfall drains directly into the plant's Central Ditch. No objectionable deposit of material has been observed below the outfall. Vegetation around the Outfall remained intact. No evidence of erosion was observed and soil in the area of the Outfall appears stable. The valve and riser assembly in this Outfall was reworked in 2008.
Best Management Practices	ALL	*Process Area/Active Wood Treating and Storage Area*

		Drippage ceased procedures have been monitored. A log is completed and maintained accordingly. Operators work to keep treated material on the drip pad as long as feasibly possible. If charges continue to drip they are placed back in the cylinders for additional steaming/cleaning cycles. Evidence of these activities are available on plant records. Cylinders are periodically cleaned when evidence of sludge is observed and believed linked to dirty cylinders. Limpid points are monitored weekly and maintained at acceptable levels thus reducing the accumulation of solids on treated products. Treated wood poles are clean and free of solids subsequent to treating cycles. Steam flash cycles are used to help further ensure treated products are clean. Traffic on the drip pad remains limited to standard traffic required for the operation of the plant. Dedicated equipment is used on the pad. Tires are washed prior to entry and exit from the pad. Reorganization/minimization of the treated wood storage yard will continue to be a focus for the P3 Team. Effort is employed to ensure all treated poles are stored in elevated bins, thus minimizing their contact with storm water running during storm events. Effort to manage pole reclass thus reduces the overall volume of treated wood waste generated at the site. This initiative is supported by its inclusion in the plant's incentive program. Ongoing efforts to maintain the plant's storage yard. This is an ongoing item requiring routine maintenance. In 2008 clay gravel and stone was purchased on a periodic basis to help maintain the yard. Skids are used to help keep untreated products off of the ground and reduce the accumulation of dust and mud on products as they are placed into the treating cylinders. Inevitably this reduces the level of solids on the surface of wood products as well as the volume of waste generated in the plant's process equipment. Cylinders are cleaned as needed. Containments were inspected on a routine basis. Various work was conducted to better improve the plant's containment and control abilities as previously referenced in this report. The plant continues to monitor preservative usage for environmental and economic reasons. The plant has worked to monitor and ensure the establishment of vegetation on slopes at the site. *Loading & Unloading Material Handling Areas –* The plant's P3 Team conducted an evaluation of the five most hazardous spill risk in April 2008. An action plan addressing these items was generated and implemented as a result of their assessment. Various proactive and preventative measures were implemented to further reduce the risk of spills around the plant's tank farm and loading and unloading areas. Standard Operating Procedures have been written and or revised as needed, and relayed to plant employees. These procedures are reviewed periodically for accuracy and thoroughness. Annual training on the plant's various Best Management Practices is conducted.

		A catch basin installed adjacent the wood fuel handing area serves to capture silt and debris transferred via storm water toward Outfall 004 is maintained by operating personnel in this area. Maintaining the basin helps to reduce the organic loading placed on all areas downstream from this basin. *Chemical Storage Areas –* Secondary containment has been inspected on a routine basis and enhanced as described earlier in this evaluation. Level gauges are provided for various tanks. The installation of additional gauges is scheduled for 2009. Chemicals related to the operations of the WWTS are enclosed and placed over secondary containment bins. *Untreated Product Storage Areas –* The plant's storage yard has been oriented so as to allow for storm water to be diverted around key stored product. Culverts are installed and maintained as required. These yards are maintained as needed. Debris is removed from the yard as required. Blocks and cut-offs from framing operations are cleaned on a routine basis. Rip rap has been used at the head of some ditches and around culvert inlets and outlets. This has particularly been the case for Outfalls 006 and 007 in 2008. Vegetation at various areas of the plant has been addressed in earlier text. *Peeler Site –* Facility personnel work to prevent and/or maintain hydraulic leaks as required. This area represents a high traffic area as material is processed and transferred to the appropriate storage bins. Effort is expended to ensure that it is maintained and well drained. A secondary containment unit was purchased for the Sta-Brite P chemical stored in 55 gallon drums. Additional containment improvements are scheduled for 2009 as referenced above. *Maintenance –* An outside party continues to manage used oil and lubricants. The plant's parts washer is an environmentally friendly unit using an organic degreaser. The containments around the refueling area and lubricants building were sealed in 2008. A spill kit is maintained at the refueling area and an Standard Operating Procedure addressing environmental issues at this area is maintained. Scrap metal is washed (as necessary) and placed in a hopper provided by the vendor. The quantities of scrap generated on the plant are tracked. A local vendor disposes of the waste. A wash pad is provided near the shop. This area was improved as described earlier in this evaluation. Trams are staged on a concrete pad situated to the east of the maintenance area after being steamed cleaned on the shop pad. Installation of a roof over this area

		could potentially further reduce risk of storm water exposure to chemicals.

Per Part III.C.6 of the facility's NPDES Permit the Storm Water Pollution Prevention Plan (SWPPP) requires amending whenever it proves to be ineffective in controlling storm water pollutants. This document represents an extension of the SWPPP. While the 2008 storm water analytical results reveal no excursions of the criteria set forth in the "State of Mississippi Water Criteria For Intrastate, Interstate and Costal Waters", the items listed below represent tentative actions to be employed in 2009 in an effort to improve storm water discharge quality.

1. Take action to further limit the number of watersheds by reorganizing the treated wood storage yard. Furthermore, orient the inventory in applicable watersheds at the most distant point from respective outfalls. Specifically, move all treated poles from the watersheds of Outfall 005 and Outfall 006 to that of Outfall 007.

2. Continue current processes of managing wood byproducts such as bark at the Peeler Operation.

3. Evaluate the process of keeping valves servicing the site's detention ponds closed to reduce the volume of water being discharged particularly during dry weather to reduce flow from the site. Maintain records of this activity to track potential flow reductions.

4. Install hay bails and silt fencing methodically along the drainage ways of ditches servicing watersheds used for the storage of treated wood.

5. Modify the sampling points of Outfall 003 and 005.

The on-going and continual Grenada Plant Best Management Practices are listed below for review and comparison to the inspection listed above.

Area or Activity	Best Management Practice
Process Area/Active Wood Treating and Storage Area	• Assure drippage has ceased prior to removal of treated wood products from drip pad. • Manage treating preservatives to ensure acceptable levels thus ensuring clean surfaces on treated wood products. • Eliminate non-process traffic on drip pad; ensure that all equipment tires are washed before entering and departing from the drip pad. • Minimize the footprint of treated inventory, limiting the potential area of effect on storm water runoff. • Work to minimize the need to cut treated wood. However, when it is necessary, manage the saw dust associated with the cutting appropriately. • Maintain the condition of the untreated wood yard thus reducing the likelihood of mud and debris from accumulating on products prior to treatment and thus increasing the opportunity for storm water impact subsequent to the treating process. • Maintain the cleanliness of treating cylinders. Clean them on a routine schedule. • Inspect and ensure that all containments are adequate and intact. • Adjust preservative cycles as necessary working to ensure that the quantity

	of preservative placed in wood products is minimized yet compliant to AWPA retention and penetration requirements. • When feasible apply post-treatment processes such as steam flashing and expansion baths. • Work to minimize the quantity of treated wood stored on the site. • Ensure the appropriate implementation of yard drippage inspection programs.
Loading and Unloading Material Handling Areas	• Provide defined paths of storm water flow from loading and unloading areas enhancing vegetation in these areas to serve to filter and capture suspended solids. • Ensure that containments are adequate and allow no run-on or run-off of preservative. Evaluate and minimize the risks of spills in these areas. • Ensure that employees involved in this function of the plant's operations are adequately trained.
Chemical Storage Area	• Ensure that all secondary containment is adequate and intact. • Provide level gauges thus reducing the risk of spills. • Enclose chemical storage areas where possible.
Untreated Product Storage Area	• Divert storm water around storage area. • Position storage areas on stable, well-drained soils; conduct routine maintenance. • Keep the area free of debris. • Use silt fence and/or rip rap check dams in drainage ways. • Utilize and maintain catch basins near weirs at outfalls. • Maintain all ditch banks; sewing vegetation where applicable and beneficial. Utilize mixed vegetation ensuring its presence during each season of the year. • Do not drive loaders or other equipment through ditches or on banks. Stay on established roadways.
Peeler Site	• Conduct maintenance ensuring that hydraulic leaks are eliminated. • Ensure that stored bark does not fall into the north ditch. • Work to maintain the roadways and ditches around the peeling operation.
Maintenance	• Ensure that all oils and waste generated during maintenance and servicing activities in the plant are managed in a timely and appropriate fashion. • Park all mobile equipment on concrete or paved surfaces. • Recycle scrape metal as it is generated. Do not allow it to accumulate on the ground. • Ensure that all equipment washing activities are conducted on the wash pad.

This inspection is responsive to Part III.7. (c) and Part IV.B of NPDES Permit No.: MSR220005. It reflects an evaluation of the activities that took place during the year 2008 to better improve and/or ensure that storm water was not contaminated by plant activities.

Signature _____

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 12/12/08
Date Received: 11/25/08
Date/Time Sampled: 11/24/08 10:28
Sampled by: T. Jones

Project Number:

Project ID/Location: Outfall 003
Grab Sample

Sample Description: Stormwater
Sample Matrix: WATER

Sample Number: CC39705
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	7.88		units	4500-H+B	MWS	11/25/08	17:00
Oil & Grease	ND	2.9	mg/L	1664A	CRM	12/11/08	10:25
Residue, non-filterable (TSS)	291	1.0	mg/L	2540D	RAH	11/25/08	17:40
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	MF	12/08/08	13:13
2-Chlorophenol	ND	0.002	mg/L	625	MF	12/08/08	13:13
2,4-Dichlorophenol	ND	0.002	mg/L	625	MF	12/08/08	13:13
2,4-Dimethylphenol	ND	0.002	mg/L	625	MF	12/08/08	13:13
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	MF	12/08/08	13:13
2,4-Dinitrophenol	ND	0.006	mg/L	625	MF	12/08/08	13:13
2-Nitrophenol	ND	0.002	mg/L	625	MF	12/08/08	13:13
4-Nitrophenol	ND	0.006	mg/L	625	MF	12/08/08	13:13
Pentachlorophenol	0.011	0.001	mg/L	625	MF	12/08/08	13:13
Phenol	ND	0.002	mg/L	625	MF	12/08/08	13:13
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	MF	12/08/08	13:13
PAHs							
Acenaphthene	ND	0.002	mg/L	8270C	MF	12/08/08	13:13
Acenaphthylene	ND	0.002	mg/L	8270C	MF	12/08/08	13:13
Anthracene	ND	0.002	mg/L	8270C	MF	12/08/08	13:13
Benzo(a)anthracene	ND	0.002	mg/L	8270C	MF	12/08/08	13:13
Benzo(a)pyrene	ND	0.002	mg/L	8270C	MF	12/08/08	13:13
Benzo(b)fluoranthene	0.002	0.005	mg/L	8270C	MF	12/08/08	13:13
Benzo(g,h,i)perylene	ND	0.005	mg/L	8270C	MF	12/08/08	13:13
Benzo(k)fluoranthene	ND	0.005	mg/L	8270C	MF	12/08/08	13:13
Chrysene	0.003	0.002	mg/L	8270C	MF	12/08/08	13:13
Dibenzo(a,h)anthracene	ND	0.005	mg/L	8270C	MF	12/08/08	13:13
Fluoranthene	0.004	0.002	mg/L	8270C	MF	12/08/08	13:13
Fluorene	ND	0.002	mg/L	8270C	MF	12/08/08	13:13
Indeno(1,2,3-cd)pyrene	ND	0.005	mg/L	8270C	MF	12/08/08	13:13
2-Methylnaphthalene	ND	0.002	mg/L	8270C	MF	12/08/08	13:13
Naphthalene	ND	0.002	mg/L	8270C	MF	12/08/08	13:13
Phenanthrene	ND	0.002	mg/L	8270C	MF	12/08/08	13:13
Pyrene	0.003	0.002	mg/L	8270C	MF	12/08/08	13:13

QA/QC Technical Director

* See supplementary information, attached.

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 12/01/08
Date Received: 11/25/08
Date/Time Sampled: 11/24/08 13:35
Sampled by: T. Jones

Project ID/Location: Outfall 003
Composite Sample

Project Number:

Sample Description: Stormwater
Sample Matrix: WATER

Sample Number: CC39706
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Residue, non-filterable (TSS)	409	1.0	mg/L	2540D	RAH	11/25/08	17:40
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	MF	11/26/08	17:57
2-Chlorophenol	ND	0.002	mg/L	625	MF	11/26/08	17:57
2,4-Dichlorophenol	ND	0.002	mg/L	625	MF	11/26/08	17:57
2,4-Dimethylphenol	ND	0.002	mg/L	625	MF	11/26/08	17:57
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	MF	11/26/08	17:57
2,4-Dinitrophenol	ND	0.005	mg/L	625	MF	11/26/08	17:57
2-Nitrophenol	ND	0.002	mg/L	625	MF	11/26/08	17:57
4-Nitrophenol	ND	0.005	mg/L	625	MF	11/26/08	17:57
Pentachlorophenol	0.024	0.001	mg/L	625	MF	11/26/08	17:57
Phenol	ND	0.002	mg/L	625	MF	11/26/08	17:57
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	MF	11/26/08	17:57

QA/QC Technical Director

* See supplementary information, attached.

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Ron Rutledge

Date Reported: 11/10/08
Date Received: 10/28/08
Date/Time Sampled: 10/27/08 15:32
Sampled by: K. Coker

Project Number:

Project ID/Location: Outfall 005

Sample Description: Stormwater
Sample Matrix: WATER

Sample Number: CC38533
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Residue, non-filterable (TSS)	41	1.0	mg/L	2540D	RAH	10/29/08	14:30
pH	7.54		units	4500-H+B	RAH	10/28/08	16:45
Oil & Grease	ND	2.0	mg/L	1664A	CRM	11/07/08	08:25
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	MF	10/29/08	21:32
2-Chlorophenol	ND	0.002	mg/L	625	MF	10/29/08	21:32
2,4-Dichlorophenol	ND	0.002	mg/L	625	MF	10/29/08	21:32
2,4-Dimethylphenol	ND	0.002	mg/L	625	MF	10/29/08	21:32
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	MF	10/29/08	21:32
2,4-Dinitrophenol	ND	0.005	mg/L	625	MF	10/29/08	21:32
2-Nitrophenol	ND	0.002	mg/L	625	MF	10/29/08	21:32
4-Nitrophenol	ND	0.005	mg/L	625	MF	10/29/08	21:32
Pentachlorophenol	0.150	0.001	mg/L	625	MF	10/29/08	21:32
Phenol	ND	0.002	mg/L	625	MF	10/29/08	21:32
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	MF	10/29/08	21:32
PAHs							
Acenaphthene	ND	0.002	mg/L	8270C	MF	10/29/08	21:32
Acenaphthylene	ND	0.002	mg/L	8270C	MF	10/29/08	21:32
Anthracene	ND	0.002	mg/L	8270C	MF	10/29/08	21:32
Benzo(a)anthracene	ND	0.002	mg/L	8270C	MF	10/29/08	21:32
Benzo(a)pyrene	ND	0.002	mg/L	8270C	MF	10/29/08	21:32
Benzo(b)fluoranthene	ND	0.005	mg/L	8270C	MF	10/29/08	21:32
Benzo(g,h,i)perylene	ND	0.005	mg/L	8270C	MF	10/29/08	21:32
Benzo(k)fluoranthene	ND	0.005	mg/L	8270C	MF	10/29/08	21:32
Chrysene	ND	0.002	mg/L	8270C	MF	10/29/08	21:32
Dibenzo(a,h)anthracene	ND	0.005	mg/L	8270C	MF	10/29/08	21:32
Fluoranthene	0.003	0.002	mg/L	8270C	MF	10/29/08	21:32
Fluorene	ND	0.002	mg/L	8270C	MF	10/29/08	21:32
Indeno(1,2,3-cd)pyrene	ND	0.005	mg/L	8270C	MF	10/29/08	21:32
2-Methylnaphthalene	ND	0.002	mg/L	8270C	MF	10/29/08	21:32
Naphthalene	ND	0.002	mg/L	8270C	MF	10/29/08	21:32
Phenanthrene	ND	0.002	mg/L	8270C	MF	10/29/08	21:32
Pyrene	0.002	0.002	mg/L	8270C	MF	10/29/08	21:32

Sample Description: Stormwater

Sample Number: CC38533

Page Number: 2

QA/QC Technical Director

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 10/23/08
Date Received: 10/09/08
Date/Time Sampled: 10/09/08 12:28
Sampled by: K. Coker

Project ID/Location: Stormwater Analysis

Project Number:

Sample Description: Outfall 006
Sample Matrix: WATER

Sample Number: CC37816
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	7.72		units	4500-H+B	VCB	10/09/08	13:25
Residue, non-filterable (TSS)	295	1.0	mg/L	2540D	RAH	10/10/08	15:50
Oil & Grease	ND	2.4	mg/L	1664A	CRM	10/22/08	14:25
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	MF	10/15/08	12:51
2-Chlorophenol	ND	0.002	mg/L	625	MF	10/15/08	12:51
2,4-Dichlorophenol	ND	0.002	mg/L	625	MF	10/15/08	12:51
2,4-Dimethylphenol	ND	0.002	mg/L	625	MF	10/15/08	12:51
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	MF	10/15/08	12:51
2,4-Dinitrophenol	ND	0.006	mg/L	625	MF	10/15/08	12:51
2-Nitrophenol	ND	0.002	mg/L	625	MF	10/15/08	12:51
4-Nitrophenol	ND	0.006	mg/L	625	MF	10/15/08	12:51
Pentachlorophenol	0.286	0.002	mg/L	625	MF	10/15/08	12:51
Phenol	ND	0.002	mg/L	625	MF	10/15/08	12:51
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	MF	10/15/08	12:51
PAHs							
Acenaphthene	ND	0.002	mg/L	8270C	MF	10/15/08	16:06
Acenaphthylene	ND	0.002	mg/L	8270C	MF	10/15/08	16:06
Anthracene	ND	0.002	mg/L	8270C	MF	10/15/08	16:06
Benzo(a)anthracene	ND	0.002	mg/L	8270C	MF	10/15/08	16:06
Benzo(a)pyrene	ND	0.002	mg/L	8270C	MF	10/15/08	16:06
Benzo(b)fluoranthene	ND	0.005	mg/L	8270C	MF	10/15/08	16:06
Benzo(g,h,i)perylene	ND	0.005	mg/L	8270C	MF	10/15/08	16:06
Benzo(k)fluoranthene	ND	0.005	mg/L	8270C	MF	10/15/08	16:06
Chrysene	ND	0.002	mg/L	8270C	MF	10/15/08	16:06
Dibenzo(a,h)anthracene	ND	0.005	mg/L	8270C	MF	10/15/08	16:06
Fluoranthene	ND	0.002	mg/L	8270C	MF	10/15/08	16:06
Fluorene	ND	0.002	mg/L	8270C	MF	10/15/08	16:06
Indeno(1,2,3-cd)pyrene	ND	0.005	mg/L	8270C	MF	10/15/08	16:06
2-Methylnaphthalene	ND	0.002	mg/L	8270C	MF	10/15/08	16:06
Naphthalene	ND	0.002	mg/L	8270C	MF	10/15/08	16:06
Phenanthrene	ND	0.002	mg/L	8270C	MF	10/15/08	16:06
Pyrene	ND	0.002	mg/L	8270C	MF	10/15/08	16:06

B. G. Giessner, Ph.D.

* See supplementary information, attached.

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 10/23/08
Date Received: 10/09/08
Date/Time Sampled: 10/09/08 11:53
Sampled by: K. Coker

Project ID/Location: Stormwater Analysis

Project Number:

Sample Description: Outfall 007
Sample Matrix: WATER

Sample Number: CC37815
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	7.85		units	4500-H+B	VCB	10/09/08	13:25
Residue, non-filterable (TSS)	264	1.0	mg/L	2540D	RAH	10/10/08	15:50
Oil & Grease	ND	2.4	mg/L	1664A	CRM	10/22/08	14:25
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	MF	10/15/08	12:17
2-Chlorophenol	ND	0.002	mg/L	625	MF	10/15/08	12:17
2,4-Dichlorophenol	ND	0.002	mg/L	625	MF	10/15/08	12:17
2,4-Dimethylphenol	ND	0.002	mg/L	625	MF	10/15/08	12:17
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	MF	10/15/08	12:17
2,4-Dinitrophenol	ND	0.005	mg/L	625	MF	10/15/08	12:17
2-Nitrophenol	ND	0.002	mg/L	625	MF	10/15/08	12:17
4-Nitrophenol	ND	0.005	mg/L	625	MF	10/15/08	12:17
Pentachlorophenol	0.147	0.001	mg/L	625	MF	10/15/08	12:17
Phenol	ND	0.002	mg/L	625	MF	10/15/08	12:17
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	MF	10/15/08	12:17
PAHs							
Acenaphthene	ND	0.002	mg/L	8270C	MF	10/15/08	14:33
Acenaphthylene	ND	0.002	mg/L	8270C	MF	10/15/08	14:33
Anthracene	ND	0.002	mg/L	8270C	MF	10/15/08	14:33
Benzo(a)anthracene	ND	0.002	mg/L	8270C	MF	10/15/08	14:33
Benzo(a)pyrene	ND	0.002	mg/L	8270C	MF	10/15/08	14:33
Benzo(b)fluoranthene	ND	0.006	mg/L	8270C	MF	10/15/08	14:33
Benzo(g,h,i)perylene	ND	0.006	mg/L	8270C	MF	10/15/08	14:33
Benzo(k)fluoranthene	ND	0.006	mg/L	8270C	MF	10/15/08	14:33
Chrysene	ND	0.002	mg/L	8270C	MF	10/15/08	14:33
Dibenzo(a,h)anthracene	ND	0.006	mg/L	8270C	MF	10/15/08	14:33
Fluoranthene	ND	0.002	mg/L	8270C	MF	10/15/08	14:33
Fluorene	ND	0.002	mg/L	8270C	MF	10/15/08	14:33
Indeno(1,2,3-cd)pyrene	ND	0.006	mg/L	8270C	MF	10/15/08	14:33
2-Methylnaphthalene	ND	0.002	mg/L	8270C	MF	10/15/08	14:33
Naphthalene	ND	0.002	mg/L	8270C	MF	10/15/08	14:33
Phenanthrene	ND	0.002	mg/L	8270C	MF	10/15/08	14:33
Pyrene	ND	0.002	mg/L	8270C	MF	10/15/08	14:33

B. G. Giessner, Ph.D.

* See supplementary information, attached.

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 12/12/08
Date Received: 11/25/08
Date/Time Sampled: 11/24/08 11:44
Sampled by: T. Jones

Project ID/Location: Outfall 008
Grab Sample

Project Number:

Sample Description: Stormwater
Sample Matrix: WATER

Sample Number: CC39707
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	7.99		units	4500-H+B	MWS	11/25/08	17:00
Oil & Grease	ND	2.0	mg/L	1664A	CRM	12/12/08	08:20
Residue, non-filterable (TSS)	89	1.0	mg/L	2540D	RAH	11/25/08	17:40
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	MF	12/08/08	13:47
2-Chlorophenol	ND	0.002	mg/L	625	MF	12/08/08	13:47
2,4-Dichlorophenol	ND	0.002	mg/L	625	MF	12/08/08	13:47
2,4-Dimethylphenol	ND	0.002	mg/L	625	MF	12/08/08	13:47
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	MF	12/08/08	13:47
2,4-Dinitrophenol	ND	0.005	mg/L	625	MF	12/08/08	13:47
2-Nitrophenol	ND	0.002	mg/L	625	MF	12/08/08	13:47
4-Nitrophenol	ND	0.005	mg/L	625	MF	12/08/08	13:47
Pentachlorophenol	ND	0.001	mg/L	625	MF	12/08/08	13:47
Phenol	ND	0.002	mg/L	625	MF	12/08/08	13:47
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	MF	12/08/08	13:47
PAHs							
Acenaphthene	ND	0.002	mg/L	8270C	MF	12/08/08	13:47
Acenaphthylene	ND	0.002	mg/L	8270C	MF	12/08/08	13:47
Anthracene	ND	0.002	mg/L	8270C	MF	12/08/08	13:47
Benzo(a)anthracene	ND	0.002	mg/L	8270C	MF	12/08/08	13:47
Benzo(a)pyrene	ND	0.002	mg/L	8270C	MF	12/08/08	13:47
Benzo(b)fluoranthene	ND	0.005	mg/L	8270C	MF	12/08/08	13:47
Benzo(g,h,i)perylene	ND	0.005	mg/L	8270C	MF	12/08/08	13:47
Benzo(k)fluoranthene	ND	0.005	mg/L	8270C	MF	12/08/08	13:47
Chrysene	ND	0.002	mg/L	8270C	MF	12/08/08	13:47
Dibenzo(a,h)anthracene	ND	0.005	mg/L	8270C	MF	12/08/08	13:47
Fluoranthene	ND	0.002	mg/L	8270C	MF	12/08/08	13:47
Fluorene	ND	0.002	mg/L	8270C	MF	12/08/08	13:47
Indeno(1,2,3-cd)pyrene	ND	0.005	mg/L	8270C	MF	12/08/08	13:47
2-Methylnaphthalene	ND	0.002	mg/L	8270C	MF	12/08/08	13:47
Naphthalene	ND	0.002	mg/L	8270C	MF	12/08/08	13:47
Phenanthrene	ND	0.002	mg/L	8270C	MF	12/08/08	13:47
Pyrene	ND	0.002	mg/L	8270C	MF	12/08/08	13:47

QA/QC Technical Director

* See supplementary information, attached.

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 12/01/08
Date Received: 11/25/08
Date/Time Sampled: 11/24/08 14:48
Sampled by: T. Jones

Project ID/Location: Outfall 008
Compsoite Sample

Project Number:

Sample Description: Stormwater
Sample Matrix: WATER

Sample Number: CC39708
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Residue, non-filterable (TSS)	84	1.0	mg/L	2540D	RAH	11/25/08	17:40
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	MF	11/26/08	18:31
2-Chlorophenol	ND	0.002	mg/L	625	MF	11/26/08	18:31
2,4-Dichlorophenol	ND	0.002	mg/L	625	MF	11/26/08	18:31
2,4-Dimethylphenol	ND	0.002	mg/L	625	MF	11/26/08	18:31
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	MF	11/26/08	18:31
2,4-Dinitrophenol	ND	0.005	mg/L	625	MF	11/26/08	18:31
2-Nitrophenol	ND	0.002	mg/L	625	MF	11/26/08	18:31
4-Nitrophenol	ND	0.005	mg/L	625	MF	11/26/08	18:31
Pentachlorophenol	ND	0.001	mg/L	625	MF	11/26/08	18:31
Phenol	ND	0.002	mg/L	625	MF	11/26/08	18:31
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	MF	11/26/08	18:31

QA/QC Technical Director

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 10/23/08
Date Received: 10/09/08
Date/Time Sampled: 10/09/08 11:19
Sampled by: K. Coker

Project ID/Location: Stormwater Analysis
Project Number:

Sample Description: Outfall 009
Sample Matrix: WATER
Sample Number: CC37814
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	7.08		units	4500-H+B	VCB	10/09/08	13:25
Residue, non-filterable (TSS)	56	1.0	mg/L	2540D	RAH	10/10/08	15:50
Oil & Grease	ND	2.0	mg/L	1664A	CRM	10/22/08	08:15
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	MF	10/15/08	11:44
2-Chlorophenol	ND	0.002	mg/L	625	MF	10/15/08	11:44
2,4-Dichlorophenol	ND	0.002	mg/L	625	MF	10/15/08	11:44
2,4-Dimethylphenol	ND	0.002	mg/L	625	MF	10/15/08	11:44
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	MF	10/15/08	11:44
2,4-Dinitrophenol	ND	0.005	mg/L	625	MF	10/15/08	11:44
2-Nitrophenol	ND	0.002	mg/L	625	MF	10/15/08	11:44
4-Nitrophenol	ND	0.005	mg/L	625	MF	10/15/08	11:44
Pentachlorophenol	ND	0.001	mg/L	625	MF	10/15/08	11:44
Phenol	ND	0.002	mg/L	625	MF	10/15/08	11:44
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	MF	10/15/08	11:44
PAHs							
Acenaphthene	ND	0.002	mg/L	8270C	MF	10/15/08	13:24
Acenaphthylene	ND	0.002	mg/L	8270C	MF	10/15/08	13:24
Anthracene	ND	0.002	mg/L	8270C	MF	10/15/08	13:24
Benzo(a)anthracene	ND	0.002	mg/L	8270C	MF	10/15/08	13:24
Benzo(a)pyrene	ND	0.002	mg/L	8270C	MF	10/15/08	13:24
Benzo(b)fluoranthene	ND	0.005	mg/L	8270C	MF	10/15/08	13:24
Benzo(g,h,i)perylene	ND	0.005	mg/L	8270C	MF	10/15/08	13:24
Benzo(k)fluoranthene	ND	0.005	mg/L	8270C	MF	10/15/08	13:24
Chrysene	ND	0.002	mg/L	8270C	MF	10/15/08	13:24
Dibenzo(a,h)anthracene	ND	0.005	mg/L	8270C	MF	10/15/08	13:24
Fluoranthene	ND	0.002	mg/L	8270C	MF	10/15/08	13:24
Fluorene	ND	0.002	mg/L	8270C	MF	10/15/08	13:24
Indeno(1,2,3-cd)pyrene	ND	0.005	mg/L	8270C	MF	10/15/08	13:24
2-Methylnaphthalene	ND	0.002	mg/L	8270C	MF	10/15/08	13:24
Naphthalene	ND	0.002	mg/L	8270C	MF	10/15/08	13:24
Phenanthrene	ND	0.002	mg/L	8270C	MF	10/15/08	13:24
Pyrene	ND	0.002	mg/L	8270C	MF	10/15/08	13:24

B. G. Giessner, Ph.D.

* See supplementary information, attached.

AF #876

Kevin B. Coker
SH&E Supervisor

RECEIVED
JUN 23 2008
Dept of Environmental Quality
Office of Pollution Control

KOPPERS

Koppers Inc.
Utility Poles and Piling
P. O. Box 160
Tie Plant, MS 38960
Tel 662 226 4584
Fax 662 226 4588
Cokerkb@koppers.com
www.koppers.com

June 18, 2008

Mississippi Department of Environmental Quality
Chief, Industrial Wastewater Branch
Office of Pollution Control
P.O. Box 10385
Jackson, MS 39289-0385

CERTIFIED MAIL: 7006 3450 0000 5965 0268

Subject: Koppers Inc. – Tie Plant, MS Facility
NPDES Permit No. MSR22
Wood Treater Notice of Intent

grenada county

Dear Sir or Madam:

Enclosed is an updated copy of the Notice of Intent for the Koppers Inc. facility located in Tie Plant, MS. This revision is being submitted pursuant to Part II.C of the facility's NPDES Permit No. MSR22 and is warranted due to a new facility contact person, Mr. Vance Haskin, being at the facility. There have been no other substantial changes at the facility. The Company has granted Mr. Haskin authorization to sign various documents required by environmental regulations as evidenced by the attached correspondence. If you have any questions please call.

Sincerely,

Kevin B. Coker

CC: Joyce Fankulewski – KI CSG

RECEIVED
JUN 23 2008
MDEQ

WOOD TREATER NOTICE OF INTENT (WNOI)
FOR COVERAGE UNDER WOOD TREATER STORM WATER
GENERAL NPDES PERMIT MSR22 _ _ _ _
(Number to be assigned by State)

(file at least 60 days prior to the commencement
of regulated industrial activity)

NAME OF FACILITY: Koppers Inc.

FACILITY OWNER: Koppers Inc.

FACILITY OPERATOR (if different than owner):

(OPERATOR IS RESPONSIBLE FOR PERMIT COMPLIANCE)

OWNER-OPERATOR RELATIONSHIP:

IS THIS NOTICE FOR A FACILITY THAT WILL NEED ANY OTHER PERMITS? N/A
If so, check which one(s): ☐ AIR, ☐ HAZARDOUS WASTE, ☐ NPDES (for process wastewater), ☐ PRETREATMENT, ☐ STATE OPERATING, ☐ CORPS OF ENGINEERS 404/401, other(s):

FACILITY CONTACT PERSON: Vance R. Haskin

TELEPHONE NUMBER (INCLUDE AREA CODE): 662-226-4584

FACILITY MAILING ADDRESS:

NUMBER AND STREET (P. O. BOX): P.O. Box 160

CITY: Tie Plant STATE: MS ZIP: 38960

FACILITY LOCATION:

STREET, ROUTE OR OTHER 1 Koppers Drive

CITY: Tie Plant STATE: MS ZIP: 38960

WOOD PRESERVATIVES THAT HAVE BEEN USED Creosote, Creosote Petroleum Solution, Creosote Coal Tar Solution, Pentacholorophenol

ATTACH A USGS QUAD MAP SHOWING SITE LOCATION AND STORM WATER OUTFALLS.
Maps can be obtained from the Office of Geology: 601-961-5523

SIC CODE FOR WOOD PRESERVING IS **2491**. LIST ANY OTHER APPLICABLE SIC CODES: NA

TOTAL ACREAGE USED TO STORE TREATED LUMBER: 85 Acres

IS TREATMENT PROVIDED AT ANY OUTFALL? No
IF SO, DESCRIBE:

ATTACH A STORM WATER POLLUTION PREVENTION PLAN (SWPPP). SEE PERMIT FOR REQUIREMENTS.

IF USING AN ASSOCIATION OR GENERIC SWPPP ALREADY SUBMITTED, GIVE NAME:

ATTACH A COPY OF ANY QUANTITATIVE LABORATORY DATA YOU HAVE FOR EACH STORM WATER OUTFALL. IF MULTIPLE SAMPLING HAS BEEN PERFORMED, PROVIDE A SUMMARY FOR EACH PARAMETER, INCLUDING SAMPLING DATES AND THE MINIMUM, AVERAGE AND MAXIMUM VALUES.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated 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.

Signature[1] (Must be signed by operator when different than owner) Vance R Hask-

Date Signed 6/18/08

Printed Name Vance Haskin

Title Plant Manager

[1]This application shall be signed according to the General Permit, Part V.E., as follows:

- For a corporation, by a responsible corporate officer.
- For a partnership, by a general partner.
- For a sole proprietorship, by the proprietor.
- For a municipal, state or other public facility, by either a principal executive officer, the mayor, or ranking elected official.
- Duly Authorized Representative

6/25/96

Leslie S. Hyde
Vice President, Safety & Environmental Affairs

KOPPERS

Koppers Inc.
436 Seventh Avenue
Suite 1800
Pittsburgh, PA 15219
T 412 227 2237
F 412 227 2434
HydeLS@koppers.com
www.koppers.com

May 12, 2008

To Whom It May Concern:

In accordance with the policies of Koppers Inc. (Koppers), US Plant Managers are authorized to sign Permit Applications, Permits and Reports as required under the Federal Clean Water Act, Resource Conservation and Recovery Act (RCRA), Comprehensive Environmental Response, Compensation and Liability Act (CERCLA), and applicable related state laws for their facilities. Such reports include, but not limited to, Discharge Monitoring reports, Pretreatment Monitoring reports, Hazardous Waste Generator and Facility reports, Air Pollution Control Monitoring reports and Hazardous Materials reports.

Sincerely,

Leslie Hyde

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160 Grenada

TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC

LOCATION TIE PLANT MS 38960

ATTN: ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*

DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	001 A

MINOR (SUBR NO) F - FINAL STORMWATER GRAB ~~SAMPLING~~ TIMBR

rec'd 1-24-08

Form Approved. OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
07	01	01	07	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		NODI-9	******	NODI-9	(12)	NODI-9	—	
	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOL,DS, TOTAL SUSPENDED 00530 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	—	
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR. -IR METH)TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	—	
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
ENT CHLOROPHENOL 9032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	—	
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
HENOLS 5000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	—	
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

VANCE HASKIN

PLANT MANAGE

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Vance R Haskin

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	08	01	18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE (*) DURATION (HOURS); ESTIMATED RAINFALL (INCHES) AND TOTAL DISCHARGE (GALLONS).

EXEMPT PER PERMIT NO. MSR 22005 PART IV. C. 4

Form 3320-1 (Rev. 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P[redacted]OX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	001-B
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

Form Approved.
OMB No. 2040-0004

TIMBR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	07	01	01	TO	07	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9		-
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9		-
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9		-
34000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Van R Hask
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	08	01	18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT PER PERMIT NO. MSR 22005 PART IV.C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	002 A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	07	01	01	TO	07	12	31

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING
TIMBR

*** NO DISCHARGE [ ] ***

Form Approved.
OMB No. 2040-0004

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		NODI-9	******	NODI-9	(12)		NODI-9	—
00400 1 0 0	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
00530 1 0 0	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
00560 1 0 0	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
39032 1 0 0	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
34000 1 0 0	PERMIT REQUIREMENT	******	******	*****		******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Van R Haskin
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
662	226-4554	08	01	18
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
REPORT SIZE, DATE AND DURATION (HOURS), ESTIMATED RAINFALL (INCHES), TOTAL DISCHARGE (GALLONS).
EXEMPT PER PERMIT NO. MSR220005 PART IV.C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~THOMAS E HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	002 D
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

TIMBR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	07	01	01	TO	07	12	31

*** NO DISCHARGE [ ] ***

Form Approved.
OMB No. 2040-0004

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

V. L. Hask
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	08	01	08

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT PER PERMIT NO. MSR220005 PART IV.C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME: KOPPERS INDUSTRIES INC
ADDRESS: [illegible] BOX 160
TIE PLANT MS 38960

FACILITY: KOPPERS INDUSTRIES INC
LOCATION: TIE PLANT MS 38960
ATTN: ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	003 A

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER GRAB SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	07	01	01	TO	07	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		7.71	******	7.71	(12)	0	ANNUAL	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	373	(19)	0	ANNUAL	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	ANNUAL	GRAB
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.014	(19)	0	ANNUAL	GRAB
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****			REPORT	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	ANNUAL	GRAB
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Vance R. Haskin
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
1062	226-4884	08	01	18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
REPORT STORM DATE AND [illegible] ESTIMATED RAINFALL (INCHES TOTAL DISCHARGE ALL NS)
STORM DATE: DECEMBER 15, 2007 / DURATION: 8HR 28MIN / EST. RAINFALL: 0.85 INCHES / TOTAL DISCHARGE 0.01988 MG

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	003 B
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	07	01	01	TO	07	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	128	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.009	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	N081-B	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Van R Hask.
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	08	01	18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

STORM DATE: DECEMBER 15, 2007 / DURATION: 8 HR 28 MIN / EST. RAINFALL: 0.85 INCHES / TOT. DISCHARGE: 0.01988 MG

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	004 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING
TIMBR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	07	01	01	TO	07	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		NODI-9	******	NODI-9	(12)		NODI-9	—
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR. IR MFTH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	**	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENT.CHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
39032 1 0 0 EFFLUEN GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PH NOLD	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
16000 1 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

[signature]
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	08	1	18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
REPORT STORM DATE AND DURATION (OUR. ESTIMATED RAINFALL (INCH.) TOTAL DISCHARGE (GALLON).
EXEMPT PER PERMIT NO. MSR22005 PART IV.C.4

PA Form 3320-1 (Rev. 3/99) Previous editions may be used

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	004 B
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	07	01	01	TO	07	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING
TIMBR

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	—	
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	—	
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	NODI-9	—	
34000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Vance L Haskin
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
662	226-4584	08	1	18
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT PER PERMIT NO. MSR 22005 PART IV. C. 4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN. ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	005 A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	07	01	01	TO	07	12	31

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING
TIMBR

*** NO DISCHARGE [ ] ***

Form Approved.
OMB No. 2040-0004

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		7.97	******	7.97	(12)	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	121	(19)	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.242	(19)	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Van R Hash
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
662	226-4584	08	01	18
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
REPORT STORM DATE AND DURATION (HOURS), ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).
STORM DATE: DECEMBER 15, 2004 / DURATION: 8 HR 28 MIN / EST. RAINFALL: 0.85 INCHES / TOT. DISCHARGE: 0.13602 MG

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	005 B
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO.	DAY
FROM	07	01	01	TO	07	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

V. R. Hask.
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	08	01	18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

STORM DATE: DECEMBER 15, 2007 / DURATION: 8HR 28 MIN / EST. RAINFALL: 0.85 INCHES / TOT. DISCHARGE: 0.18602 MG

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	006 A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	07	01	01	TO	07	12	31

Form Approved
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING
TIMBR

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		8.11	******	8.11	(12)	0	ANNUAL	GRAB
00400 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	114	(19)	0	ANNUAL	GRAB
00530 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT, RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	ANNUAL	GRAB
00560 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.216	(19)	0	ANNUAL	GRAB
39032 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	ANNUAL	GRAB
34000 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Vance Haskin
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	08	01	18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).
STORM DATE: DECEMBER 15, 2007 / DURATION: 8 HR. 28 MIN / EST. RAINFALL: 0.85 INCHES / TOT. DISCHARGE: 0.06745 mg

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC

LOCATION TIE PLANT MS 38960

ATTN: ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	006 B

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	07	01	01	TO	07	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Van R Hask.
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	08	01	18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

STORM DATE: DECEMBER 15, 2007 / DURATION: 8HR 28MIN / EST. RUNFALL: 0.85 INCHES / TOT. DISCHARGE: 0.06745 MG

EPA Form 3320-1 (Rev. 8/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN. ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	007 A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	07	01	01	TO	07	12	31

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMBR

*** NO DISCHARGE [ ] ***

Form Approved.
OMB No. 2040-0004

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		7.47	******	7.47	(12)	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	95	(19)	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.262	(19)	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	*****	**	*****	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Vance R Hask
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
(662)	226-4584	08	01	18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
REPORT ETC I ATE N URA O D 3 A ES TOT GE G LL S
STORM DATE: DECEMBER 15, 2017 / DURATION: 8 HR 28 MIN / EST. RAINFALL: 0.85 INCHES / TOT. DISCHARGE: 0.09372 MG

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	007 B
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	07	01	01	TO	07	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING
TIMBR

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOD1-9	(19)	NOD1-9	—	
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOD1-9	(19)	NOD1-9	—	
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOD1-9	(19)	NOD1-9	—	
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Van R Hask
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	256-4584	08	01	18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

STORM DATE: DECEMBER 15, 2007 / DURATION: 8 HR 28 MIN / EST. RAINFALL: 0.85 INCHES / TOT. DISCHARGE: 0.09372 MG

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38760

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38760
ATTN. ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	008 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMBR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	07	01	01	TO	07	12	31

*** NO DISCHARGE [ ] ***

Form Approved.
OMB No. 2040-0004

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		7.47	******	7.47	(12) SU	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM			ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	52	(19) MG/L	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX			ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19) MG/L	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX			ANNUAL	GRAB
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19) MG/L	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX			ANNUAL	GRAB
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19) MG/L	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
VANCE HASKIN PLANT MANAGER TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Vance Haskin	662	226-4884	08	01	18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
STORM EVENT DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGED (GALLONS)
DATE: DECEMBER 20, 2007 / DURATION: 2 HR 10 MINS / EST. RAINFALL: 0.30 INCHES / TOT. DISCHARGE: 0.00072 MGD

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~THOMAS L. HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	008 P
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	~~07~~	~~01~~	~~01~~	TO	~~07~~	~~12~~	~~31~~

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL
TIMBR
STORMWATER COMPOSITE SAMPLING

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	22	(19)	0	ANNUAL	Comp.
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L			
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	N001-B	(19)	0	ANNUAL	Comp.
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L			
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	N001-B	(19)	0	ANNUAL	Comp.
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Van R Hask.
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	2264554	08	01	18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

STORM DATE: DECEMBER 20, 2007 / DURATION: 24 HR 10 MIN / EST. RAINFALL: 0.30 INCHES / TOT. DISCHARGE: 0.0072 MG

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38760

FACILITY KOPPERS INDUSTRIES INC

LOCATION TIE PLANT MS 38760

ATTN: ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	009 A

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER GRAB SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	07	01	01	TO	07	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		7.13	******	7.13	(12)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	13	(19)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT	MG/L		ANNUAL	GRAB
P-NTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT MAX	MG/L		ANNUAL	GRAB
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

VANCE HASKIN
PLANT MANAGER

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

[signature]

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	08	01	18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE NE U T N OURS) STIM E R NFA (N H T L S GE A S.

STORM DATE: DECEMBER 15, 2007 / DURATION: 8HR 28MIN / EST. RAINFALL: 0.85 INCHES / TOT. DISCHARGE: 0.07597 MG

PA Form 3320-1 (Rev 3/99) Previous editions may be used

Form Approved.
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	009 B
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
TIMBR
STORMWATER COMPOSITE SAMPLING

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~THOMAS L HENDERSON~~ VANCE HASKIN

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	07	01	01	TO	07	12	31

*** NO DISCHARGE [ ] ***
NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
VANCE HASKIN PLANT MANAGER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Van R Hask.	662 226-4584		08	01	18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

STORM DATE: DECEMBER 15, 2007 / DURATION: 8 HR 28 MIN / EST. RAINFALL: 0.85 INCHES / TOT. DISCHARGE: 0.07592 m

Vance R. Haskin
Plant Manager

KOPPERS

Koppers Inc.
Utility Poles and Piling
P. O. Box 160
Tie Plant, MS 38960
Tel 662 226 4584
Fax 662 226 4588
Haskinvr@koppers.com
www.koppers.com

January 22, 2008

Mississippi Department of Environmental Quality
Office of Pollution Control
Data Integration Division
P.O. Box 10385
Jackson, MS 39289-0385

CERTIFIED MAIL: 7006 3450 0000 5965 0107

Subject: Koppers Inc. – Grenada, MS Facility
NPDES Permit No.: MSR220005
2007 Annual Storm Water Sampling Results

Dear Sir or Madam:

Enclosed you will find information relevant to the 2007 Storm Water Sampling activities at Koppers Inc. – Grenada Plant as required by Part IV.D of NPDES Permit No. MSR220005. The sampling of storm water was conducted at Outfalls 003, 005, 006, 007, 008 and 009. The balance of the site's outfalls, Outfalls 001, 002 and 004, was not sampled pursuant to exemptions allowed under Part IV.C.4 of the permit.

Per Part IV.B of the permit a visual inspection and evaluation of all industrial areas contributing to storm water discharge was conducted. Accordingly, a completed "Inspection Report and Certification Form" as well as supplemental information is attached.

I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Sincerely,

Vance R. Haskin

Vance R. Haskin

CC: Joyce Fankulewski – KI CSG
Chief, Industrial Wastewater Branch

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 01/10/08
Date Received: 12/17/07
Date/Time Sampled: 12/15/07 11:27
Sampled by: K. Coker

Project ID/Location: NPDES Stormwater Analysis
Project Number:

Sample Description: Outfall 003 (Grab)
Sample Matrix: WATER
Sample Number: CC25087
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.55		units	4500-H+B	MEW	12/18/07	15:15
Oil & Grease	ND	2.0	mg/L	1664A	CRM	12/27/07	08:15
Residue, non-filterable (TSS)	373	1.0	mg/L	2540D	RAH	12/20/07	11:30
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RM	12/20/07	11:26
2-Chlorophenol	ND	0.002	mg/L	625	RM	12/20/07	11:26
2,4-Dichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	11:26
2,4-Dimethylphenol	ND	0.002	mg/L	625	RM	12/20/07	11:26
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RM	12/20/07	11:26
2,4-Dinitrophenol	ND	0.005	mg/L	625	RM	12/20/07	11:26
2-Nitrophenol	ND	0.002	mg/L	625	RM	12/20/07	11:26
4-Nitrophenol	ND	0.005	mg/L	625	RM	12/20/07	11:26
Pentachlorophenol	0.014	0.001	mg/L	625	RM	12/20/07	11:26
Phenol	ND	0.002	mg/L	625	RM	12/20/07	11:26
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	11:26

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 12/26/07
Date Received: 12/17/07
Date/Time Sampled: 12/15/07 14:36
Sampled by: K. Coker

Project ID/Location: NPDES Stormwater Analysis
Project Number:

Sample Description: Outfall 003 (Composite)
Sample Matrix: WATER
Sample Number: CC25088
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Residue, non-filterable (TSS)	128	1.0	mg/L	2540D	RAH	12/20/07	11:30
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RM	12/20/07	14:46
2-Chlorophenol	ND	0.002	mg/L	625	RM	12/20/07	14:46
2,4-Dichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	14:46
2,4-Dimethylphenol	ND	0.002	mg/L	625	RM	12/20/07	14:46
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RM	12/20/07	14:46
2,4-Dinitrophenol	ND	0.005	mg/L	625	RM	12/20/07	14:46
2-Nitrophenol	ND	0.002	mg/L	625	RM	12/20/07	14:46
4-Nitrophenol	ND	0.005	mg/L	625	RM	12/20/07	14:46
Pentachlorophenol	0.009	0.001	mg/L	625	RM	12/20/07	14:46
Phenol	ND	0.002	mg/L	625	RM	12/20/07	14:46
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	14:46

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Argus Cooler # 1532

Sampler (print/signature): Kevin B. Cooper [signature]

Report to: Koppers Inc
Address: One Koppers Drive
Tie Plant, MS 38960

Invoice to: Koppers Inc.
Address: P.O. Box 160
Tie Plant, MS 38960

Project Name/Number:

Project Manager:

MGPTF# (if applicable)

Comments/priority:

Item #	Field Number	Sample Description	Collection Date	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	003-1A	— NPDES — Storm Water Sample	Dec. 15 2007	11:23am	KC	G			PAH's	CC25087
2	003-1B			11:24am	KC	G			PAH's	
3	003-2			11:25am	KC	G			Pentachlorophenol	
4	003-3			11:25am	KC	G			Total Phenols	
5	003-4			11:26am	KC	G		✓	Oil & Grease	
6	003-5			11:27am	KC	G			Total Suspendid Solids & pH	
7	003-6			2:36pm	KC	C			Pentachlorophenol (7.71 SU @ 11:29am)	CC25088
8	003-7			2:36pm	KC	C			Total Phenols	
9	003-8	✓	✓	2:36pm	KC	C			Total Suspendid Solids	

Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time
[signature]	12/17/07 10:14am						
[signature]	12-17-07 16:20	[signature]	12-17-07 16:30			Erick Hunt 12-17-07	10:15

Issued: 03/03/06 Effective: 03/03/06 Last Reviewed and Approved: BGG 03/03/06

F022 COC Argus.R11.xls

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 01/10/08
Date Received: 12/17/07
Date/Time Sampled: 12/15/07 16:07
Sampled by: K. Coker

Project ID/Location: NPDES Stormwater Analysis
Project Number:

Sample Description: Outfall 005 (Grab)
Sample Matrix: WATER
Sample Number: CC25089
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	7.97		units	4500-H+B	MEW	12/18/07	15:15
Oil & Grease	ND	2.0	mg/L	1664A	CRM	12/27/07	08:15
Residue, non-filterable (TSS)	121	1.0	mg/L	2540D	RAH	12/20/07	11:30
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RM	12/20/07	15:19
2-Chlorophenol	ND	0.002	mg/L	625	RM	12/20/07	15:19
2,4-Dichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	15:19
2,4-Dimethylphenol	ND	0.002	mg/L	625	RM	12/20/07	15:19
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RM	12/20/07	15:19
2,4-Dinitrophenol	ND	0.005	mg/L	625	RM	12/20/07	15:19
2-Nitrophenol	ND	0.002	mg/L	625	RM	12/20/07	15:19
4-Nitrophenol	ND	0.005	mg/L	625	RM	12/20/07	15:19
Pentachlorophenol	0.242	0.005	mg/L	625	RM	12/20/07	15:19
Phenol	ND	0.002	mg/L	625	RM	12/20/07	15:19
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	15:19

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Argus Cooler # 1530

Sampler (print/signature): Kevin B. Coker

Report to: Koppers Inc.
Address: One Koppers Drive, Tie Plant, MS 38660

Invoice to: Koppers Inc.
Address: P.O. Box 160, Tie Plant MS 38660

Project Name/Number:

Project Manager:

MGPTF# (If applicable)

Comments/priority:

Item #	Field Number	Sample Description	Collection Date	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	005-1A	– NADES – Storm Water Sample	Dec 18 2007	4:03p	KC	G			PAH's	CC25089
2	005-1B			4:04p	KC	G			PAH's	
3	005-2			4:04p	KC	G			Pentachlorophenol	
4	005-3			4:05p	KC	G			Total Phenols	
5	005-4			4:06p	KC	G		✓	Oil & Grease	
6	005-5	✓	✓	4:07p	KC	G			Total Suspended Solids & pH	
									pH 7.97 SU @ 4:08p	

Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time
[signature]	[illegible]						
[signature]	12-17-07 16:30	[signature]	12-17-07 16:30			[signature]	12/19/07 10:16

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 01/10/08
Date Received: 12/17/07
Date/Time Sampled: 12/16/07 15:46
Sampled by: K. Coker

Project ID/Location: NPDES Stormwater Analysis
Project Number:

Sample Description: Outfall 006 (Grab)
Sample Matrix: WATER
Sample Number: CC25085
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.17		units	4500-H+B	MEW	12/18/07	15:15
Oil & Grease	ND	2.0	mg/L	1664A	CRM	12/26/07	08:50
Residue, non-filterable (TSS)	114	1.0	mg/L	2540D	RAH	12/20/07	11:30
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RM	12/20/07	10:20
2-Chlorophenol	ND	0.002	mg/L	625	RM	12/20/07	10:20
2,4-Dichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	10:20
2,4-Dimethylphenol	ND	0.002	mg/L	625	RM	12/20/07	10:20
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RM	12/20/07	10:20
2,4-Dinitrophenol	ND	0.006	mg/L	625	RM	12/20/07	10:20
2-Nitrophenol	ND	0.002	mg/L	625	RM	12/20/07	10:20
4-Nitrophenol	ND	0.006	mg/L	625	RM	12/20/07	10:20
Pentachlorophenol	0.216	0.001	mg/L	625	RM	12/20/07	10:20
Phenol	ND	0.002	mg/L	625	RM	12/20/07	10:20
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	10:20

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Argus Cooler # 1007

Sampler (print/signature): Kevin B. Cooper

Report to: Koppers Inc.
Address: One Koppers Drive
Tie Plant, MS 38960

Invoice to: Koppers Inc.
Address: P.O. Box 160
Tie Plant, MS 38960

Project Name/Number:

Project Manager:

MGPTF# (if applicable)

Comments/priority:

Item #	Field Number	Sample Description	Collection Date	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	006-1A	- NPDES - Storm Water Sample	Dec 16 12/07	3:43 pm	KC	G			PAHs	CC25085
2	006-1B			3:43 pm	KC	G			PAHs	
3	006-2			3:43 pm	KC	G			Pentachlorophenol	
4	006-3			3:44 pm	KC	G			Total Phenols	
5	006-4			3:45 pm	KC	G		✓	Oil & Grease	
6	006-5			3:46 pm	KC	G			Total Suspended Solids & pH	
									pH 8.11 SU @ 3:49 pm	

Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time
[signature]	12/17/07 [illegible]						
[signature]	12-17-07 16:30	[signature]	12-17-07 16:30			[signature] 12-17-07	10:15

Issued: 03/03/06 Effective: 03/03/06 Last Reviewed and Approved: BGG 03/03/06

F022 COC Argus.R11.xls

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 01/10/08
Date Received: 12/17/07
Date/Time Sampled: 12/16/07 15:30
Sampled by: K. Coker

Project ID/Location: NPDES Stormwater Analysis
Project Number:

Sample Description: Outfall 007 (Grab)
Sample Matrix: WATER
Sample Number: CC25086
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	7.41		units	4500-H+B	MEW	12/18/07	15:15
Oil & Grease	ND	2.0	mg/L	1664A	CRM	12/27/07	08:15
Residue, non-filterable (TSS)	95	1.0	mg/L	2540D	RAH	12/20/07	11:30
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RM	12/20/07	10:53
2-Chlorophenol	ND	0.002	mg/L	625	RM	12/20/07	10:53
2,4-Dichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	10:53
2,4-Dimethylphenol	ND	0.002	mg/L	625	RM	12/20/07	10:53
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RM	12/20/07	10:53
2,4-Dinitrophenol	ND	0.005	mg/L	625	RM	12/20/07	10:53
2-Nitrophenol	ND	0.002	mg/L	625	RM	12/20/07	10:53
4-Nitrophenol	ND	0.005	mg/L	625	RM	12/20/07	10:53
Pentachlorophenol	0.262	0.001	mg/L	625	RM	12/20/07	10:53
Phenol	ND	0.002	mg/L	625	RM	12/20/07	10:53
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	10:53

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Argus Cooler #: 1529

Sampler (print/signature): Kevin B. Cooper

Project Name/Number:

Project Manager:

MGPTF# (if applicable)

Report to: Koppers, Inc
Address: One Koppers Drive, Tie Plant, MS 38960

Invoice to: Koppers, Inc
Address: P.O. Box 160, Tie Plant, MS 38960

Comments/priority:

Item #	Field Number	Sample Description	Collection Date	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	007-1A	-NPDES- Storm Water Sample	Dec 16 2007	3:27p	KC	G			PAHs	LC25086
2	007-1B			3:28p	KC	G			PAHs	
3	007-2			3:29p	KC	G			Pentachlorophenol	
4	007-3			3:29p	KC	G			Total Phenols	
5	007-4			3:30p	KC	G		✓	Oil & Grease	
6	007-5			3:30p	KC	G			Total Suspended Solids ½ pH	
									pH @ 7:47	
									@ 3:32p	

Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time
KCB	12/17/07 10:14a						
DCD	12-17-07 16:30	[signature]	12-17-07 16:30			[signature] 12-17-07	10:16

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 01/10/08
Date Received: 12/21/07
Date/Time Sampled: 12/20/07 10:09
Sampled by: K. Coker

Project ID/Location: NPDES Stormwater Analysis
Project Number:

Sample Description: Outfall 008 (Grab)
Sample Matrix: WATER
Sample Number: CC25430
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	7.91		units	4500-H+B	MWS	12/21/07	16:55
Oil & Grease	ND	2.0	mg/L	1664A	CRM	01/04/08	08:30
Residue, non-filterable (TSS)	52	1.0	mg/L	2540D	RAH	12/26/07	11:30
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RM	12/31/07	15:11
2-Chlorophenol	ND	0.002	mg/L	625	RM	12/31/07	15:11
2,4-Dichlorophenol	ND	0.002	mg/L	625	RM	12/31/07	15:11
2,4-Dimethylphenol	ND	0.002	mg/L	625	RM	12/31/07	15:11
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RM	12/31/07	15:11
2,4-Dinitrophenol	ND	0.005	mg/L	625	RM	12/31/07	15:11
2-Nitrophenol	ND	0.002	mg/L	625	RM	12/31/07	15:11
4-Nitrophenol	ND	0.005	mg/L	625	RM	12/31/07	15:11
Pentachlorophenol	ND	0.001	mg/L	625	RM	12/31/07	15:11
Phenol	ND	0.002	mg/L	625	RM	12/31/07	15:11
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RM	12/31/07	15:11

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 01/02/08
Date Received: 12/21/07
Date/Time Sampled: 12/20/07 13:52
Sampled by: K. Coker

Project ID/Location: NPDES Stormwater Analysis
Project Number:

Sample Description: Outfall 008 (Composite)
Sample Matrix: WATER
Sample Number: CC25431
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Residue, non-filterable (TSS)	22	1.0	mg/L	2540D	RAH	12/26/07	11:30
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RM	12/31/07	15:45
2-Chlorophenol	ND	0.002	mg/L	625	RM	12/31/07	15:45
2,4-Dichlorophenol	ND	0.002	mg/L	625	RM	12/31/07	15:45
2,4-Dimethylphenol	ND	0.002	mg/L	625	RM	12/31/07	15:45
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RM	12/31/07	15:45
2,4-Dinitrophenol	ND	0.005	mg/L	625	RM	12/31/07	15:45
2-Nitrophenol	ND	0.002	mg/L	625	RM	12/31/07	15:45
4-Nitrophenol	ND	0.005	mg/L	625	RM	12/31/07	15:45
Pentachlorophenol	ND	0.001	mg/L	625	RM	12/31/07	15:45
Phenol	ND	0.002	mg/L	625	RM	12/31/07	15:45
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RM	12/31/07	15:45

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Argus Code: 1534

Sampler (print/signature): Kevin B. Cox

Report to: Koppers Inc.
Address: One Koppers Drive, Tie Plant, MS 38960

Invoice to: Koppers Inc.
Address: P.O. Box 160, Tie Plant, MS 38960

Project Name/Number:

Project Manager:

MGPTF# (if applicable)

Comments/priority:

Item #	Field Number	Sample Description	Collection Date	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	008-1a	- NPDES - Storm Water Sample	Dec 20 2007	10:06	KC	G			Paris	CC25430
2	008-1b			10:07	KC	G			Paris	
3	008-2			10:04	KC	G			Pentachlorophenol	
4	008-3			10:08	KC	G			Total Phenols	
5	008-4			10:07	KC	G		✓	Oil & Grease	pH @ 7:47 10:12
6	008-5			10:09	KC	G			Total Suspended Solids, pH	
7	008-6			1:52	KC	C			Pentachlorophenol	CC25431
8	008-7			1:52	KC	C			Total Phenols	
9	008-8			1:52	KC	C			Total Suspended Solids	

Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time
[signature]							
DSD	12-21-07 16:20	[signature]	12-21-07 16:20			E Hunt	12-21-07 9:35

Issued: 03/03/06 Effective: 03/03/06 Last Reviewed and Approved: BGG 03/03/06

F022 COC Argus.R11.xls

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 01/10/08
Date Received: 12/17/07
Date/Time Sampled: 12/16/07 15:12
Sampled by: K. Coker

Project ID/Location: NPDES Stormwater Analysis
Project Number:

Sample Description: Outfall 009 (Grab)
Sample Matrix: WATER
Sample Number: CC25084
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	7.21		units	4500-H+B	MEW	12/18/07	15:15
Oil & Grease	ND	2.0	mg/L	1664A	CRM	12/26/07	08:50
Residue, non-filterable (TSS)	13	1.0	mg/L	2540D	RAH	12/20/07	11:30
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RM	12/20/07	09:46
2-Chlorophenol	ND	0.002	mg/L	625	RM	12/20/07	09:46
2,4-Dichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	09:46
2,4-Dimethylphenol	ND	0.002	mg/L	625	RM	12/20/07	09:46
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RM	12/20/07	09:46
2,4-Dinitrophenol	ND	0.005	mg/L	625	RM	12/20/07	09:46
2-Nitrophenol	ND	0.002	mg/L	625	RM	12/20/07	09:46
4-Nitrophenol	ND	0.005	mg/L	625	RM	12/20/07	09:46
Pentachlorophenol	ND	0.001	mg/L	625	RM	12/20/07	09:46
Phenol	ND	0.002	mg/L	625	RM	12/20/07	09:46
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	09:46

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Argus Cooler # 1531

Sampler (print/signature): Kevin B. Cooper

Project Name/Number:

Project Manager:

MGPTF# (if applicable)

Report to: Koppers Inc.
Address: One Koppers Drive
Tie Plant, MS 38960

Invoice to: Koppers Inc.
Address: P.O. Box 100
Tie Plant, MS 38960

Comments/priority:

Item #	Field Number	Sample Description	Collection Date	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	009-1A	-NPDES- Storm Water Sample	Dec. 16 2007	3:07pm	KC	G			PAH's	CC25084
2	009-1B			3:08pm	KC	G			PAH's	
3	009-2			3:09pm	KC	G			Pentachlorophenol	
4	009-3			3:09pm	KC	G			Total Phenols	
5	009-4			3:10pm	KC	G		✓	Oil & Grease	
6	009-5			3:12pm	KC	G			Total Suspended Solids & pH	
									3:16pm pH @ 7.13 SU	

Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time
[signature]	12/17/07 10:14am						
[signature]	12-17-07 16:30	[signature]	12-17-07 16:30			Eric Hunt 12-17-07	10:17

Issued: 03/03/06 Effective: 03/03/06 Last Reviewed and Approved: BGG 03/03/06

F022 COC Argus.R11.xls

Part VII.

Inspection Report and Certification Form For Storm Water Pollution Prevention Plan Evaluation

Wood Treater Storm Water General NPDES Permit No. MSR220005

(Please Print)

Owner and/or Operator: Koppers Inc.

Facility Name: Koppers Inc. - Grenada Plant

Facility Location: One Koppers Drive; Tie Plant, MS 38960

Date and Time: December 28, 2007 @ Approximately 2:00 PM

Inspector(s): Kevin Coker & John Cummings

Date of Last Rainfall: December 27 & 28, 2007 **Estimated Amount:** 0.25 & 0.20, respectively.

Deficiencies Noted During the Inspection (attach additional sheets if necessary):

See Attachment

Corrective Action Needed (attach additional sheets if necessary):

See Attachment

Corrective Action Compliance Schedule:

See Attachment

Based upon this inspection which I or personnel under my direct supervision conducted, I certify that all pollution control measures are adequate and have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan filed with the Office of Pollution Control and good engineering practices as required by the above referenced permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons 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 fines and imprisonment for knowing violations.

I further certify that the Mississippi Office of Pollution Control has been notified of any changes pertinent to our storm water permit as required in Part II.C.

Vance R. Haskin	Vance R. Hask	1/21/08
Authorized Name (Print)	Signature	Date

These reports shall be submitted annually, as required in the permit, to:

Chief, Industrial Branch
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385

Visual Site Inspection & Evaluation
NPDES Permit No.: MSR220005
Coverage Year: 2007
KOPPERS INC. – Grenada Plant

Area/Activity/BMP	Possible Contaminants	Observation & Corrective Action
Drainage Site Map	N/A	*Note any potential changes in storm water flow* The general flow path of the plant's drainage ways remains unchanged. Improvements were made to certain areas of the flow in the watershed of Outfall 004. New culverts were installed, the elevation of the road servicing the western boundary of the detention pond at Outfall 004 was raised, and drainage ditches were cleaned. We continue to sow grass in areas were soil is exposed. Much of this activity was conducted in conjunction with the clearing of the property boundary as the new security fence was installed.
Exposed Inventory Quantities / Status / Potential Sources	Permit Parameters	*Quantities (Section 5.4.2):* The Company continues to monitor and attempts to minimize slow moving inventory at the site. Slow moving inventory volumes are communicated to the corporate office on a quarterly basis. The plant's focus is to procure and produce treated inventory only to the extent needed to fully service its customer base as determined by the corporate sales department. The customer base does, however, require that a contingency be maintained. Approximate average inventories for 2007 were as follows: • creosote treated poles and piling 532 pcs • pentachlorophenol treated poles 4,961 pcs • creosote treated cross and switch ties 91,225 pcs • creosote treated lumber 5,674 pcs Approximate average inventories for 2006 were as follows: • creosote treated poles and piling 1,018 pcs • pentachlorophenol treated poles 4,122 pcs • creosote treated cross and switch ties 43,171 pcs • creosote treated lumber 9,100 pcs The average volume of creosote treated poles inventoried at the site declined over this time period due to a core customer's shift to the use of pentachlorophenol as their preservative. This shift was unforeseen; however, it is likely that other customers will be changing preservatives in 2008. The average volume of pentachlorophenol treated poles increased due to a surge in business driven by increased customer demand and aggressive sales by the KI Corporate Services Group (CSG). Another factor of course was the customer shift mentioned above. The average volume of creosote treated cross ties increased substantially due to aggressive production cycles at the site. The same is not predicted for 2008. Lumber volumes declined as effort to lower the volume of slow moving inventory at the site continues. Efforts to continue to lower the treated wood foot print at the site will continue to be an area of discussion in the 2008 Pollution Prevention Plan Team (P3 Team) initiatives.

		The plant's Drip Pad Operating Procedure and Treated Wood Storage Yard Inspection Procedure continue to be employed to control the impact of treated wood on storm water. This is evidenced by the associated records. Improvements were made at the plant's refueling area in an effort to reduce the risk of gasoline and diesel spills. These improvements included the addition of a concrete equipment staging pad for refueling activities, the staging of a spill kit near the refueling area, and training to reinforce the use of caution whenever refueling equipment. Various acids and flocculants are stored in the southern WWTS control room. A non-reportable spill of ferric chloride occurred in this area in 2007. In response additional containment was added and the configuration of the pumping process was changed. The area was cleaned subsequent to the spill. The residual was shipped off site to a TSD. Various lubricants continue to be stored inside of a building equipped with a curb and a concrete staging ramp leading into the building that was installed in 2006. Both mobile and stationary equipment is inspected each day of operation for leaks that could impact storm water. Documentation of these inspection as well as maintenance work orders are kept at the site.
Previous Spill Areas	ALL	*All historical spill areas were inspected for evidence of residuals/preservatives as well as the continued presence and effectiveness of control and countermeasures.* *South End Of Cylinders 1 -5* The curtain installed at the back of Cylinders 1 – 5 remains intact and is kept closed as a containment tool. Employees are trained to ensure the curtain is kept closed. There was no evidence of preservative on the ground outside of containment at the south end of the cylinders. Water was observed to be puddling in the drive area south of the treating cylinders. This area is being drained by use of aggregate.
		East of Door to Cylinder No. 5 An examination of the area east of Cylinder No. 5 revealed no evidence of preservative residual being on the ground. It was observed, however, that the flange guard on the front of Cylinder No. 5 had been bent forming a gap in the guard. Consequently there exist the potential for spay to exit out of the guard in the instance of a door gasket rupture. Repair of the flange will help reduce the risk of a release to the environment. However, if the curtain is closed to its northern most point then adequate protection exists.
		West of Tank Farm Containment Area There is no presence of residual along the west side of the containment area of the tank farm. The containments remain intact. Additional splash guards were installed in 2007 at strategic areas along the perimeter to protect process piping to minimize the risk of a spill. Overhead lines transferring process water to Tank No. 50 situated in the western containment area were double lined to also reduce the risk of a spill. The containment wall in this area is routinely inspected for cracks and leaks.
		West of Boiler Building In 2005 five (5) drains/old process lines located at the south west corner of the boiler building that fed to the pond near the plant entrance were capped and an old concrete ramp positioned to the west of the boiler building that had at one

		time resulted in a diesel spill was removed to reduce the risk of spills and their being transferred to the waters of the US. In 2007 additional work was conducted on the feed water pumps situated in the South West corner of the boiler building to help prevent leaks. A sump pump was placed in this area to manage any water that should leak. The condensate return systems and boiler operation is equipped with safety eyes to automatically shut these operations down in the event that a hole in a steam coil or a check valves fails and commences to transfer preservative to these systems.
		Temporary Hosing In the event that temporary hosing is used, caution is exercised to ensure that spills do not occur. Lines are tied off to the receiving vessel securely. Additional containment is placed beneath the hoses in the event that a line should leak. These operations are rare and, whenever they are used, they are monitored by plant personnel.
		Sump Pump Behind Shop A new sump was installed at the shop's transfer pump to ensure that the rate of storm water transfer from the shop pad was adequate. The existing sump was working however it was replaced as a precautionary measure as it was an old unit..
		Hazardous Waste Boxes Two hazardous waste boxes are used at the site. One serves to hold K001 waste and the other serves to hold FO32/FO34 waste. Both are kept on concrete pads and their doors and gaskets are inspected.
		Process Lines In Treating Department New process lines are being installed in the treating area to help further reduce the risk of spills from this source. Additionally, splash curtains have been installed along the eastern perimeter of the cylinder basement containment area to further reduce the risk of spills.
		POTW Discharge Lines The plant's discharge line connecting the Waste Water Treatment System (WWTS) to the City Of Grenada POTW has been a source of historic spills. This line was replaced with a double-walled line in 2008. The line is fitted with pull boxes that serve as inspection points for leaks. The line is on a grade such that in the event that of a leak the water would inevitably flow to the POTW. No apparent leaks have been evident since the new line was installed.
		Creosote Unloading Station New containments were added to the creosote rail car tanker unloading station around 2003. Additional containments were added and/or modified to further reduce the risk of a release from this area in 2005. Still more were added in 2007 to include a drainage way connecting the rail car unloading area to the containments below the pentachlorophenol mixing station. In 2005 the pentachlorophenol and diesel unloading station was located adjacent the oil/water separators and was subsequently moved to a more secure area. The original area had no containments at that time. Inevitably an additional pump and lines were installed to give the plant the capability to unload Pentachlorophenol and diesel at the existing P1 Creosote preservative unloading

		station. This area is concrete and was designed for the purpose of unloading tanker trucks. Relocation of this station served to reduce the risk of a spill. Spills have occurred in this area in the past due to discharges from the blow down tanks. Additional safety controls were engineered and installed in 2007 to ensure that the risk of these types of spills occurring in the future is eliminated.
		Drip Pad Transition Points In 2007 a roof was installed over the drip pad to offer added protection at the transition points. The roof measuring 480' x 95' covers a large portion of the drip pad and reducing the volume of process water being treated in the plant's WWTS as well as the risk of spills at these transition points.
Process Areas / Wood Treating & Storage Areas / WWTS Containments – Aeration, Clarifier & Discharge Tanks.	ALL	*Tank Farm Containments , WWTS Containments, Rail Car Unloading Area, Treated Tie Storage, Treated Pole Storage, Yard Drippage Inspection, Drip Pad, Yard Storage Efficiency, Yard Status, Ditches/Erosion, Etc.* Tank farm and WWTS (Biological Treatment Area) containments are periodically inspected and maintained as necessary. Various other measures were taken to further reduce spill risk from plant process areas as mentioned elsewhere in this report (i.e., drip pad roof, safety controls for treating operation, splash guards, splash curtains, double walled lines, additional curbing, etc.). The plants storage areas and roadways continue to be maintained. Aggregate and clay gravel is purchased as needed. This will represent a continual preventative maintenance item in 2008. Money and energy was likewise expended to ensure adequate vegetation on slopes and exposed areas of the plant. Effort will continue to ensure erosion is not an issue for the facility.
Loading & Unloading Material Handling Areas	ALL	*Creosote, pentachlorophenol and diesel unloading station practices and containments, tie unloading station at north drip pad, south yard banding areas, etc.* The containments for the diesel, gasoline, creosote, pentachlorophenol, and creosote handling station has been addressed at other instances in this report. Employees who operate in these areas have been trained on SPCC issues as well as storm water pollution prevention measures. The Tie Sorter and A&B Mill pose a risk due to the hydraulic equipment utilized in processing cross ties. Various measures have been implemented to minimize this risk including the installation of a roof over the Tie Stacker as well as the employing of routine inspections.
Chemical Storage Areas	ALL	*Tank farm secondary containments, WWTS chemical containments, boiler chemical containments, high level alarms, etc.* All secondary containments are adequate to meet RCRA capacity requirements. WWTS chemicals stored in 55 gallon drums have been placed over containment bins. High level alarms are installed in work tank's number 3 and 4 as well as in each blowdown tank. The installation of additional high level alarms was submitted as a part of the plant's 2008 capital program.

Untreated Product Storage Area	TSS	*Verify that ditch banks are intact, that erosion is no occurring.* The ditches in and around the plant's untreated storage area's do not appear to be eroding. Recent work conducted on the primary south yard access road warrants monitoring as much new dirt is exposed. Rye grass has been sowed but will continue to be monitored. As a precaution additional rye grass will be sowed at other locations of the yard. In 2007 a new culvert was installed near the framing skids near Outfall 006. The primary ditch transferring storm water from the untreated tie storage yard to the south to Outfall 004 and to the north to Outfall 007 was cleaned and sowed in conjunction with the installation of a new security fence. This activity also resulted in the moving of untreated poles further away from said ditch near the peeling operation.
Peeler Site	Hydraulic Oil, TSS	*Oil migration from peeler, erosion, road status, etc.* A drum of Sta-Brite P is staged near the peeling operation. The drum is plastic. The procurement of secondary containment for the drum is warranted. The security fencing referenced earlier skirts along the western side of the peeler. Consequently, drainage in this area was improved. Vegetation was sowed as needed. Bark and cut-offs generated at the peeling site was removed over the course of 2007. Effort to ensure that these items remain away from the peeling area and surrounding ditches will continue.
Maintenance Area	ALL	*Scrap yard area, wash pad, sump pumps, drain way to the west of the wash pad.* Scrap is washed prior to being stored in and around the shop to eliminate the risk of storm water contamination. The wash pad and its respective sumps were addressed above under "Previous Spill Areas". During the December 2007 plant wide safety/training meeting reinforced the need to ensure that equipment is washed on the curbed pad. As referenced elsewhere in this inspection report, the refueling area was enhanced as new concrete was installed and a spill kit was staged there as a countermeasure. Various used equipment that was staged at the shop was sold reducing the opportunity for leaks impacting storm water.
Outfall 001	ALL	*Ensure drains are open as applicable; detail status of soil stability around the outfall; status of banks and inlets: storm water discharges "shall be free from...debris, oil, scum, and other floating materials other than trace amounts...eroded soils and other materials that will settle to form objectionable deposits in receiving waters...suspended solids, turbidity and color at levels inconsistent with the receiving waters...chemicals in concentrations that would cause violation of State Water Quality Criteria in the receiving waters..."* Monthly inspections of this outfall were conducted. Outfall 001 is located at the southern end of the plant. The area surrounding the outfall is grassy. No solids have settled in the outfall. The appearance of oils, scum, or solids deposited by storm events is not present. No objectionable deposit of material has been observed below the outfall. Vegetation is well established in the general area of the outfall. Sheens, oils and chemicals were not evident during inspections.

		Concerns of untreated wood cut-offs staged in the watershed of Outfall 001 had been expressed in times past. Throughout 2007 effort was made to ensure that this wood pile was ground for use as wood fuel in the plant's boiler. This task was completed in the Fall. The area was sowed and vegetation is becoming well established. Soil in the area of the Outfall appears stable. Additionally old equipment that had been staged in this area (i.e., an old rail car, old equipment such as trailers and an old boiler) was removed. The volume of slow moving inventory (i.e., lumber) in the area of the Outfall was also reduced.
Outfall 002	ALL	Monthly inspections of this Outfall were conducted. The item of opportunity noted in Outfall 002 has been the elimination of Kudzu in the area. In 2007 the Kudzu in the area was deadened and subsequently sowed with rye grass. The rye grass became established and there is good soil stabilization in the area of the Outfall. Effort to this end will continue throughout 2008. No objectionable deposit of material had been observed below this outfall. The clarity of the water received at the ditch from the outfall was clearer than that of the receiving water. There was no evidence of oils or chemicals in the discharge at this Outfall. Repairs conducted to the weir in 2006 remain intact. Soil in the area of the Outfal appears stable. The valve and riser assembly in this Outfall will be reworked in 2008.
Outfall 003	ALL	Monthly inspections of this Outfall were conducted. Vegetation around Outfall 003, particularly along the bank near the Central Ditch, remained well established. Inspections revealed no evidence of sheens, scum, oils or floating materials. There is no evidence of objectionable deposits in or around the receiving waters. The water discharge at this Outfall has a tendency to be turbid; however, is typically consistent with the receiving waters in the Central Ditch. Vegetation is well established around this outfall. A load of sand is maintained near Outfall 003 as a precautionary measure to stop the flow of a spill from the shop and/or treating areas if needed.
Outfall 004	ALL	Monthly inspections of this Outfall were conducted. In 2007 effort was expended to clean around the drain at this Outfall to ensure that storm water flowed per design. Repairs were also made to a washed area approximately 3' x 3' in size near the eastern portion of this weir. Clay gravel was packed into place and the area was sowed to establish vegetation. The repairs remain in place. Grass was also sowed in the bottom of the detention pond. Vegetation around the Outfall has otherwise remained intact. The water discharged from this area was somewhat turbid however was consistent with receiving waters and no adverse deposits have been observed at the discharge point where the flow feeds to the central ditch. There has been no evidence of oils, chemicals or scum during the inspections. A load of sand has been staged at the western side of the dam of the detention pond serving Outfall 004 as an emergency response measure in the instance of a spill of oils or chemicals from the treating area. In the Fall of 2007 the levy at this Outfall was raised in conjunction with the ditch improvements referenced earlier. The installation of the drip pad resulted in a larger volume of water draining to this particular Outfall for given rain events. The upgrades to the pond levy and to the road skirting the western

		boundary of the pond were done as precautionary to ensure that Outfall 004 could properly handle the additional flow of storm water associated with the drip pad roof project. The valve and riser assembly in this Outfall will be reworked in 2008.
Outfall 005	ALL	Monthly inspections of this Outfall were conducted. Vegetation around the lower portion of the weir was cut in the Fall of 2007. Inspections revealed that the storm water discharge from this area was free of scum and oils. There are no receiving waters immediately below this outfall. Rather, the storm water runs through several acres of forested bottomland prior to every reaching any receiving waters. Its travel route is winding and predominately indistinguishable. There is no evidence of objectionable deposits associated with the discharge of this Outfall. This particular outfall is surrounded by trees and vegetation. Floating twigs and leaves were observed in the pond. The drain servicing this Outfall was unstopped at one point during 2007. Vegetation in the area of the Outfall is well established. Soil in the area of the Outfall appears stable. The valve and riser assembly in this Outfall will be reworked in 2008.
Outfall 006	ALL	Monthly inspections of this Outfall were conducted. At one point in 2007 repairs were made to the drain pipe servicing this Outfall. Clearing activities on the north west side of the detention pond were conducted in 2007. These were associated with the installation of a security fence. Vegetation was sowed, mowed and maintained subsequent to the clearing activities. Soil in the area of the Outfall appears stable. Inspections revealed that the discharge was free of oils, debris and scum. The detention basin servicing this outfall is situated in close proximity to standing tress and vegetation. Twigs and leaves were observed in the waters of the pond. The discharge from the pond feeds to a drainage ditch. There was no evidence of objectionable deposits associated with the discharge from this watershed observed.
Outfall 007	ALL	Monthly inspections were conducted. In 2007 the detention pond drain became stopped at one point and was subsequently repaired. Work to maintain vegetation around the pond was conducted as the area was sowed and cut as needed. Effort to ensure adequate vegetation in the area will continue. Soil in the area of the Outfall appears stable. Inspections noted that the water clarity exiting the detention pond drain was somewhat consistent to that of the receiving waters in the ditch at the northern end of the property. No objectionable deposits of material were observed below the outfall. Inspections also noted that the discharge from the pond was free of signs of scum and oil. Some floating solids from the operations south of the outfall were observed in the discharge drainage way near rip-rap and vegetation. However, these were captured in the drainage way adjacent and below the weir. No evidence of these items reaching the receiving waters was observed.
Outfall 008	ALL	Monthly inspections of this Outfall were conducted. Effort was expended in 2007 to maintain the slopes around Outfall 008. Grass was sowed as needed. Ground vegetation remained intact and soil in the area of the Outfall appears stable. Inspections showed that no objectionable deposits resulted from storm water discharge from this watershed. Discharged storm water was clearer than receiving waters and free of oil, floating materials, debris

		and scum. The valve and riser assembly in this Outfall will be reworked in 2008.
Outfall 009	ALL	Monthly inspections of this Outfall were conducted. Inspections revealed that discharge from the watershed of Outfall 009 was free of oil, debris, scum and other floating solids. The clarity of the water discharged from the outfall was consistent with the receiving waters and typically better in clarity. The outfall drains directly into the plant's central ditch. No objectionable deposit of material has been observed below the outfall. Repairs conducted to the weir in 2006 remain intact. Vegetation around the Outfall remained intact. No evidence of erosion was observed and soil in the area of the Outfall appears stable. The valve and riser assembly in this Outfall will be reworked in 2008.
Best Management Practices	ALL	*Process Area/Active Wood Treating and Storage Area* Drippage ceased procedures have been reiterated to plant personnel. A log is completed and maintained accordingly. Operators work to keep treated material on the drip pad as long as feasibly possible. If charges continue to drip they are placed back in to the cylinder for additional steaming/cleaning cycles. Cylinders are periodically cleaned when evidence of sludge is observed and believed linked to dirty cylinders. Limpid points are monitored and maintained at acceptable levels thus reducing the accumulation of solids on treated products. Treated wood poles are clean and free of solids subsequent to treating cycles. Steam flash cycles are used to help further ensure treated products are clean. Traffic on the drip pad remains limited to standard traffic required for the operation of the plant. Dedicated equipment is used on the pad. Tires are washed prior to entry and exit from the pad. Reorganization/minimization of the treated wood storage yard will continue to be a focus for the P3 Team. All treated poles are stored in elevated bins, thus minimizing their contact with storm water running during storm events. New metal bins were procured in 2007 and installed at the northern end of the pole storage area in close proximity to Outfall 007. Effort to manage pole reclass thus reduces the overall volume of treated wood dust generated at the site. This initiative is supported by its inclusion in the plant's incentive program. Ongoing efforts to maintain the plant's storage yard. This is an ongoing item requiring routine maintenance. In 2007 clay gravel and stone was purchased on a periodic basis to help maintain the yard. Skids are used to help keep untreated products off of the ground and reduce the accumulation of dust and mud on products as they are placed into the treating cylinders. Inevitably this reduces the level of solids on the surface of wood products as well as the volume of waste generated in the plant's process equipment. In the instance that sludge is identified on treated products the respective cylinder is inspected to ensure that it is not in need of cleaning. Cylinders No. 2, 3, and 4 were cleaned during 2007. Containments were inspected on a routine basis. Various work was conducted to better improve the plant's containment and control abilities. This included the

		enhancement of curbing near the K001 sludge box, the installation of a new drainage way at the rail car unloading area, the installation of a new drip pad roof, the installation of splash guards at pertinent areas around the perimeter of the tank farm, the enhancement of containments around overhead piping near Tank No. 15 and the installation of curtains around the perimeter of the treating cylinders. The plant continues to monitor preservative usage for environmental and economic reasons. Training on the issue of treatment and preservative usage was conducted earlier in the year by a third party. The plant has worked at various stages of the year to ensure that vegetation was in place to control erosion. This is evidenced by grass established around key areas of the perimeter of the plant that was cleared as a function of the installation of fencing. Additional areas sowed include the banks of the roadway leading to the south yard as well as in various portion of the watershed of Outfall 001. *Loading & Unloading Material Handling Areas* – Large portions of the plant's primary ditches skirting around loading and unloading areas were cleaned and reworked in 2007 in conjunction with the installation of security fencing. Vegetation was sowed and fertilized in the process. Additional effort to maintain well established vegetation will continue. The plant's P3 Team conducted an evaluation of historical spills as well as a spill risk assessment during 2007. Accordingly, various proactive and preventative measures were implemented to further reduce the risk of spills around the plant's tank farm and loading and unloading areas. These included the installation of splash guards along the western perimeter of the tank farm, splash curtains along the eastern perimeter of the treating cylinders, the installation of additional concrete near the eastern perimeter of the rail car unloading area and curbing enhancements near the staging area of the K001 Hazardous Waste Box. Standard Operating Procedures have been written and or revised as needed, and relayed to plant employees. These procedures are reviewed periodically for accuracy and thoroughness. Annual training on the plant's various Best Management Practices is conducted. A catch basin installed adjacent the wood fuel handing area serves to capture silt and debris transferred via storm water toward Outfall 004 is maintained by operating personnel in this area. Maintaining the basin helps to reduce the organic loading placed on all areas downstream from this basin. *Chemical Storage Areas* – Secondary containment has been inspected on a weekly basis and enhanced as described above. Level gauges are provided for various tanks. The installation of additional gauges will be completed in 2008. Chemicals related to the operations of the WWTS are enclosed and placed over secondary containment bins. *Untreated Product Storage Areas* – The plant's storage yard has been oriented so as to allow for storm water to be diverted around key stored product. Culverts are installed and maintained as required. These yards are maintained as needed. Debris is removed from the yard as required. Blocks and cut-offs from framing

		operations are cleaned on a routine basis. Rip rap has been used at the head of some ditches and around culvert inlets and outlets. Maintenance was conducted in 2007 on various catch basins ensuring drains were accessible. These included Outfall 004, 005, 006, and 007. Vegetation at various areas of the plant has been addressed in earlier text. Effort was expended on several occasions to ensure that the risk of erosion was minimized in areas of risk. Equipment operators have been trained on the plant's BMP's including the specific requirement not to drive through ditches. *Peeler Site –* Prevent and/or maintain hydraulic leaks as required. This area represents a high traffic area as material is processed and transferred to the appropriate storage bins. Effort is expended to ensure that it is maintained and well drained. In 2007 much effort and money was spent to ensure that bark and debris did not build up around the ditches servicing the peeler area. A contractor was hired to haul the debris off-site. A secondary containment unit will be purchased for the Sta-Brite P chemical used as a fungicide at this operation. *Maintenance –* An outside party continues to manage used oil and lubricants. The plant's parts washer is an environmentally friendly unit using an organic degreaser. Additional curbing was installed at the lubricants storage house in 2006 and a concrete pad was installed around the equipment refueling area in 2007. A spill kit is maintained at the refueling area and an Standard Operating Procedure addressing environmental issues at this area is maintained. Scrap metal is washed (as necessary) and placed in a hopper provided by the vendor. The quantities of scrap generated on the plant are tracked. A local vendor disposes of the waste. A wash pad is provided near the shop. This area is designated for the washing of equipment and contaminated metals removed from the production area. Trams are staged on a concrete pad situated to the east of the maintenance area after being steamed cleaned on the shop pad.

The on-going and continual Grenada Plant Best Management Practices are listed below for review and comparison to the inspection listed above.

KOPPERS INC. – GRENADA PLANT
BEST MANAGEMENT PRACTICES

Area or Activity	Best Management Practice
Process Area/active wood treating and storage area	• Assure drippage has ceased prior to removal of treated wood products from drip pad. • Manage treating preservatives to ensure xylene insolubles are at acceptable levels thus ensuring clean surfaces on treated wood products that are free of

	excrement. • Eliminate non-process traffic on drip pad; ensure that all equipment tires are washed before entering and departing from the drip pad. • Minimize the treated foot-print of inventory. • Work to minimize the need to cut treated wood and, when necessary, manage resultant saw dust appropriately • Maintain the condition of the untreated wood by reducing accumulation of mud and debris on products prior to treatment. This will minimize the opportunity for storm water impact following treatment. • Maintain the cleanliness of treating cylinders via routine cleaning. • Inspect and ensure that all containments are adequate and intact. • Adjust preservative cycles (as necessary) to minimize preservative used while complying with AWPA retention and penetration requirements. • When feasible apply post treatment processes such as steam flashing and expansion baths. • Minimize the quantity of treated wood stored on the site. • Ensure the appropriate implementation of yard drippage inspection programs.
Loading and Unloading Material Handling Areas	• Provide defined paths of storm water flow from loading and unloading areas enhancing vegetation in these areas to serve to filter and capture suspended solids. • Ensure that containments are adequate and allow no run-on or run-off of preservative. Evaluate and minimize the risks of spills in these areas. • Ensure that employees involved in this function of the plant's operations are adequately trained.
Chemical Storage Area	• Ensure that all secondary containment is adequate and intact • Provide level gauges thus reducing the risk of spills • Enclose chemical storage areas where possible
Untreated Product Storage Area	• Divert storm water around storage area • Position storage areas on stable, well-drained soils; conduct routine maintenance • Keep the area free of debris • Use silt fence and/or rip rap check dams in drainage ways • Utilize and maintain catch basins near weirs at outfalls. • Maintain all ditch banks; sowing vegetation where applicable and beneficial. Utilize mixed vegetation ensuring its presence during each season of the year. • Do not drive loaders or other equipment through ditches or on banks. Stay on established roadways.
Peeler Site	• Conduct maintenance ensuring that hydraulic leaks are eliminated. • Ensure that stored bark does not fall into the north ditch. • Work to maintain the roadways and ditches around the peeling operation.
Maintenance	• Ensure that all oils and waste generated during maintenance and servicing activities in the plant are managed in a timely and appropriate fashion. • Park all mobile equipment on concrete or paved surfaces. • Recycle scrape metal as it is generated. Do not allow it to accumulate on the ground. • Ensure that all equipment washing activities are conducted on the wash pad.

This inspection is responsive to Part III.7. (c) and Part IV.B of NPDES Permit No.: MSR220005. It reflects an evaluation of the activities that took place during the year 2007 to better improve and/or ensure that storm water was not contaminated by plant activities.

Signature _____

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC

LOCATION TIE PLANT MS 38960

ATTN. ~~THOMAS L HENDERSON~~ VANCE HASKIN

Grenada

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	001 A

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

Form Approv
OMB No. 204

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		NOV1-9	******	NOV1-9	(19)	NOV1-9	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	****	REPORT MINIMUM	******	REPORT MAXIMUM	SU			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOV1-9	(19)	NOV1-9	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L			
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOV1-9	(19)	NOV1-9	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L			
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOV1-9	(19)	NOV1-9	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L			
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOV1-9	(19)	NOV1-9	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2008

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE		
VANCE HASKIN PLANT MANAGER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Van R Hask	662 226 4584	08	01	18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES); AND TOTAL DISCHARGE (GALLONS)

EXEMPT PER PERMIT NO. MSR 22005 PART IV. C. 4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960
FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~THOMAS E MONTGOMERY~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved
OMB No. 2040-

PERMIT NUMBER	DISCHARGE NUMBER
MSR 22605	001

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

MWATER COMPOSITE SAMPLING
*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS	SAMPLE MEASUREMENT	******	******		******	******	NON-9	(-19)		NON-9	—
	PERMIT REQUIREMENT	******	******	***	******	******	REPORT ANNL MAX				
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NON-9			NON-9	—
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L			
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NON-9	(-19)		NON-9	—
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2008

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
VANCE HASKIN PLANT MANAGER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Van R. Hask.	662	226-4584	08	01	18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT PER PERMIT NO. MSR 22605 PART IV.C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 15
TIE PLANT

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38611
ATTN: ~~THOMAS~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
R[illegible]0005	002 A

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

Form Approved
OMB No. 2040-

STORMWATER GRAB SAMPLING
*** NO DISCHARGE ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		NOV1-9	******	NOV1-9	(19)	NOV1-9		—
	PERMIT REQUIREMENT	**		*** ****	REPORT MINIM	******	REPORT I M	SU		ANNUAL	
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOV1-9	(19)	NOV1-9		—
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL GRAB	
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOV1-9	(19)	NOV1-9		—
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL GRAB	
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOV1-9	(19)	NOV1-9		—
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL GRAB	
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOV1-9	(19)	NOV1-9		—
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL GRAB	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2008

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
VANCE HASKIN PLANT MANAGER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Van R Hask.	662	226-4584	08	01	18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
REPORT STORMS DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES); TOTAL DISCHARGE (GALLONS)

EXEMPT PER PERMIT NO. MSR22005 PART IV.A.4

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC

LOCATION TIE PLANT MS 38960

ATTN: ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	002 B

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING TIMBR

MONITORING PERIOD						
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOV1-9	(19)	NOV1-9	ANNUAL	COMPOS
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L			
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOV1-9	(19)	NOV1-9	ANNUAL	COMPOS
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L			
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOV1-9	(19)	NOV1-9	ANNUAL	COMPOS
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2008

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

VANCE HASKIN
PLANT MANAGER

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

V. R Hask.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
662	276-4554	08	01	08

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

EXEMPT PER PERMIT NO. MSR220005 PART IV.C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38760

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~THOMAS L HENDERSON~~ VANCE HASELL

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	003 A

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	07	01	01	TO	07	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		7.71	******	7.71	(12) SU	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	****	REPORT MINIMUM	******	REPORT MAXIMUM			ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	373	(17) MG/L	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX			ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT. RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOD1-B	(17) MG/L	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX			ANNUAL	GRAB
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.014	(17) MG/L	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX			ANNUAL	GRAB
[illegible] 34500 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOD1-B	(17) MG/L	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2008

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
VANCE HASELL PLANT MANAGER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Vance R. Hasell	662	226-4554	08	01	18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)

STORM DATE: DECEMBER 15, 2007 / DURATION: 8HR 28MIN / EST. RAINFALL: 0.95 INCHES / TOTAL DISCHARGE 0.01988 MG

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC

LOCATION TIE PLANT MS 38960

ATTN: ~~[illegible]~~ VANCE HASKINS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MS0026000	003 B

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

TIMEF

*** NO DISCHARGE [ ] ***

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	128	(19) MG/L	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX			ANNUAL	GRAB
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.009	(19) MG/L	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX			ANNUAL	GRAB
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOVI-B	(19) MG/L	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2008

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Vance Haskins Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Vance Haskins	662	726-4554	08	01	18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

STORM DATE: DECEMBER 15, 2007 / DURATION: 0 HR 28 MIN / EST. RAINFALL: 0.85 INCHES / TOT. DISCHARGE: 0.01788 MG

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38760

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38760
ATTN: ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR22005	
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

Form Approved.
OMB No. 2040-0004

M NUL
(SUBR NF
F INAL
STORMWATER GRAB SAMPLING
*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		NOV1-9	******	NOV1-9	(12)		NOV1-9	—
	PERMIT REQUIREMENT	******	******	****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOV1-9	(17)		NOV1-9	—
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT. RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOV1-9	(19)		NOV1-9	—
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOV1-9	(19)		NOV1-9	—
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOV1-9	(17)		NOV1-9	—
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2008

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
VANCE HASKIN PLANT MANAGER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	662 226-4584	08	1	18
TYPED OR PRINTED		AREA CODE / NUMBER	YEAR	MO	DAY

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)

EXEMPT PER PERMIT NO. MSR22005 PART IV.C.4

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if Different*)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (*NPDES*)
DISCHARGE MONITORING REPORT (*DMR*)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	004 B

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOD1-9	(17)		NOD1-9	—
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOD1-9	(17)		NOD1-9	—
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOD1-9	(17)		NOD1-9	—
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2008

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE	DATE		
VANCE HASKIN PLANT MANAGER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	V. L. Hask	662	2724534	08 / 1 / 18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR / MO / DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (*Reference all attachments here*)

EXEMPT PER PERMIT NO. MSR220005 PART IV. A.4

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	005 A

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	07	01	01	TO	07	01	

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER GRAB SAMPLING
*** NO DISCHARGE [ ] ***

Form Approved.
OMB No. 2040-0004

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		7.97	******	7.97	(12)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	*** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	121	(19)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR. - IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.242	(19)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS 36000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2008

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
VANCE HASKIN PLANT MANAGER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Van R Hask.	662 226-4554	08 01 18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE NUMBER	YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)

Storm Date: December 15, 2007 / Duration: 8 hr 28 min / Est. Rainfall: 0.85 inches / Tot. Discharge: 0.49602 MG

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

00877/0[illegible]

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC

LOCATION TIE PLANT MS 38960

ATTN: ~~THOMAS L HENDERSON~~ Vance Hasker

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MER220005	005 6

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING TIME

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
	PERMIT REQUIREMENT	******	******	*** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2008

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Vance Hasker
Plant Manager

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

V. R Hasker

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
662	226 4584	08	01	18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

STORM DATE: DECEMBER 15, 2007 / DURATION: 8HR 28MIN / EST. RAINFALL: 0.85 INCHES / TOT. DISCHARGE: 0.18602 MG

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960
FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~[illegible]~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	006 A

MINOR
(SUBR NO.
F - FINAL
STORMWATER GRAB SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		8.11	******	8.11	(12)	0	Annual	Grab
00400 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	114	(19)	0	Annual	Grab
00530 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
00560 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.216	(19)	0	Annual	Grab
39032 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
46000 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2008

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
VANCE HASKIN PLANT MANAGER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Van R Hask.	662	226-4584	08	01	18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)
STORM DATE: DECEMBER 15, 2007 / DURATION: 8 HR 28 MIN / EST. RAINFALL: 0.85 INCHES / TOT. DISCHARGE: 0.06145 M

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

00879/0[illegible]205 1136

This is a 4-part form.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC

LOCATION TIE PLANT MS 38960

ATTN: ~~THOMAS L HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	006 B

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

*** NO DISCHARGE [ ] ***

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)		NODI-9	—
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2008

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Van R Hask
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	2264554	08	01	18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

STORM DATE: DECEMBER 15, 2007 / DURATION: 8hr 28min / EST. RAINFALL: 0.85 inches / TOT. DISCHARGE: 0.06745 MG

EPA Form 3320-1 (Rev. 8/99) Previous editions may be used.

02880/04/205-1137

This is a 4-part form.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC

LOCATION ~~TIE PLANT~~ MS 38960

ATTN: THOMAS L HENDERSON VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	007

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMBER

MONITORING PERIOD						
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY

*** NO DISCHARGE | | ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		7.47	******	7.47	(12)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	95	(19)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.262	(19)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2008

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Vance Haskin
Plant Manager

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Van R Hask

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
662	226-4554	08	01	18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

STORM DATE: DECEMBER 15, 2007 / DURATION: 8 HR 28 MIN / EST. RAINFALL: 0.85 INCHES / TOT. DISCHARGE: 0.09312 MG

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

00381/061205-1136

This is a 4-part form.

NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	007 8

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING TIMBE

MONITORING PERIOD						
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY

*** NO DISCHARGE ( ) ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(17)		NODI-9	—
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(17)		NODI-9	—
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(17)		NODI-9	—
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2008

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Van R Hask
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
662	220-4584	08	01	18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

STORM DATE: DECEMBER 15, 2007 / DURATION: 8 HR 28 MIN / EST. RUNOFF: 0.85 INCHES / TOT. DISCHARGE: 0.09372 MG

PA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS [illegible]

ADDRESS P O BOX [illegible]
TIE PLAN MS 38960

FACILITY KOPPERS [illegible] INC

LOCATION TIE PLAN MS 38960

ATTN. THOMAS L HENDERSON [illegible]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR22000[illegible]	[illegible]

MINOR
(SUB NO)
F FINAL
STORMWATER GRAB SAMPLING

*** NO DISCHARGE [ ] ***

MONITORING PERIOD							
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		7.47	******	7.47	(-12)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	52	(-17)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR - IR METH)TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(-17)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(-17)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(-17)	0	Annual	Grab
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2008

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Vance Haskin Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Va R Hask	662	226-4584	08	01	18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)

STORM DATE: DECEMBER 20, 2007 / DURATION: 2 HR 10 MIN / EST. RAINFALL: 0.30 INCHES / TOT. DISCHARGE: 0.0072 MG

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form. 00883/641205-1136 PAGE 15 OF 18

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS
ADDRESS P O BOX
TIE PLA

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR[illegible]	[illegible]

FACILITY KOPPERS
LOCATION TIE PLA
ATTN ~~THOMAS~~ VANCE HASKIN

MONITORING PERIOD						
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS TOTAL SUSPENDED [illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	22		0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
[illegible] 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B		0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B		0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2008

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Van R Hask
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
662	2264584	08	01	18

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

STORM DATE: DECEMBER 20, 2007 / DURATION: 2 HR 10 MIN / 1ST. PAIRFALL: 0.30 INCHES / TOT. DISCHARGE: 0.0072 MG

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: ~~THOMAS HENDERSON~~ VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	007 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING
*** NO DISCHARGE [ ] ***

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	07	12	15	TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH 00400 1 C 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		7.13	******	7.13	(12)	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 C 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	13	(19)	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT.RC 00560 1 C 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL 39032 1 C 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
ARSENIC 46000 1 C 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-B	(19)	0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2008

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
VANCE HASKIN PLANT MANAGER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	662	226-4554	08	01	18
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).
STORM DATE: DECEMBER 15, 2007 / DURATION: 8HR 28MIN / EST. RAINFALL: 0.85 INCHES / TOT. DISCHARGE: 0.07577 MG

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if Different*)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960
FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: [illegible] VANCE HASKIN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (*NPDES*)
DISCHARGE MONITORING REPORT (*DMR*)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MS [illegible]	[illegible]

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

MENDR
ISSUE NO.
F - 2 NO.
STORMWATER CO[illegible] PA PERMIT
TIMBER
NO DISCHARGE [ ] [illegible]

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
[illegible] TOTAL MENDEE 500 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOD1-9	MG/L	NON1 1	ANNUAL	—
	PERMIT REQUIREMENT	*	******	****	******	*	REPORT ANNL MAX				
05038 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOD1-9	MG/L	NON1-9	ANNUAL	—
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX				
MENDEE 16000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NOD1-9	MG/L	NON1-9	ANNUAL	—
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2008

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE		
VANCE HASKIN PLANT MANAGER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Van R Hask	662 [illegible]-4534	08	01	18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE / NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (*Reference all attachments here*)

STORM DATE: DECEMBER 15, 2007 / DURATION: 8 HR. 38 MIN / 1ST. RAINFALL: 0.85 INCHES / TOT. DISCHARGE: 0.0159 MG

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 01/10/08
Date Received: 12/17/07
Date/Time Sampled: 12/15/07 11:27
Sampled by: K. Coker

Project ID/Location: NPDES Stormwater Analysis
Project Number:

Sample Description: Outfall 003 (Grab)
Sample Matrix: WATER

Sample Number: CC25087
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.55		units	4500-H+B	MEW	12/18/07	15:15
Oil & Grease	ND	2.0	mg/L	1664A	CRM	12/27/07	08:15
Residue, non-filterable (TSS)	373	1.0	mg/L	2540D	RAH	12/20/07	11:30
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RM	12/20/07	11:26
2-Chlorophenol	ND	0.002	mg/L	625	RM	12/20/07	11:26
2,4-Dichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	11:26
2,4-Dimethylphenol	ND	0.002	mg/L	625	RM	12/20/07	11:26
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RM	12/20/07	11:26
2,4-Dinitrophenol	ND	0.005	mg/L	625	RM	12/20/07	11:26
2-Nitrophenol	ND	0.002	mg/L	625	RM	12/20/07	11:26
4-Nitrophenol	ND	0.005	mg/L	625	RM	12/20/07	11:26
Pentachlorophenol	0.014	0.001	mg/L	625	RM	12/20/07	11:26
Phenol	ND	0.002	mg/L	625	RM	12/20/07	11:26
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	11:26

RECEIVED JAN 2008

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.

235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 12/26/07
Date Received: 12/17/07
Date/Time Sampled: 12/15/07 14:36
Sampled by: K. Coker

Project ID/Location: NPDES Stormwater Analysis
Project Number:

Sample Description: Outfall 003 (Composite)
Sample Matrix: WATER
Sample Number: CC25088
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Residue, non-filterable (TSS)	128	1.0	mg/L	2540D	RAH	12/20/07	11:30
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RM	12/20/07	14:46
2-Chlorophenol	ND	0.002	mg/L	625	RM	12/20/07	14:46
2,4-Dichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	14:46
2,4-Dimethylphenol	ND	0.002	mg/L	625	RM	12/20/07	14:46
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RM	12/20/07	14:46
2,4-Dinitrophenol	ND	0.005	mg/L	625	RM	12/20/07	14:46
2-Nitrophenol	ND	0.002	mg/L	625	RM	12/20/07	14:46
4-Nitrophenol	ND	0.005	mg/L	625	RM	12/20/07	14:46
Pentachlorophenol	0.009	0.001	mg/L	625	RM	12/20/07	14:46
Phenol	ND	0.002	mg/L	625	RM	12/20/07	14:46
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	14:46

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Argus Cooler # 1532

Sampler (print/signature): Kevin B. Pogan

Report to: Koppers Inc
Address: One Koppers Drive
Tie Plant, MS 38960

Invoice to: Koppers Inc.
Address: P.O. Box 160
Tie Plant, MS 38960

Project Name/Number:

Project Manager:

MGPTF# (if applicable)

Comments/priority:

Item #	Field Number	Sample Description	Collection Date	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	003-1A	— NPDES — Storm Water Sample	Dec. 15 2007	11:23am	KC	G			PAH's	CC25087
2	003-1B			11:24am	KC	G			PAH's	
3	003-2			11:25am	KC	G			Pentachlorophenol	
4	003-3			11:25am	KC	G			Total Phenols	
5	003-4			11:26am	KC	G		✓	Oil & Grease	
6	003-5			11:27am	KC	G			Total Suspendid Solids & pH	
7	003-6			2:36pm	KC	C			Pentachlorophenol (7.71 SU @ 11:29am)	CC25088
8	003-7			2:36pm	KC	C			Total Phenols	
9	003-8	✓	✓	2:36pm	KC	C			Total Suspendid Solids	

Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time
[signature]	12/17/07 10:14am						
[signature]	12-17-07 16:30	[signature]	12-17-07 16:30			Erick Hunt 12-17-07 10:15	

Issued: 03/03/06 Effective: 03/03/06 Last Reviewed and Approved: BGG 03/03/06

F022 COC Argus R11.xls

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 01/10/08
Date Received: 12/17/07
Date/Time Sampled: 12/15/07 16:07
Sampled by: K. Coker

Project ID/Location: NPDES Stormwater Analysis
Project Number:

Sample Description: Outfall 005 (Grab)
Sample Matrix: WATER
Sample Number: CC25089
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	7.97		units	4500-H+B	MEW	12/18/07	15:15
Oil & Grease	ND	2.0	mg/L	1664A	CRM	12/27/07	08:15
Residue, non-filterable (TSS)	121	1.0	mg/L	2540D	RAH	12/20/07	11:30
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RM	12/20/07	15:19
2-Chlorophenol	ND	0.002	mg/L	625	RM	12/20/07	15:19
2,4-Dichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	15:19
2,4-Dimethylphenol	ND	0.002	mg/L	625	RM	12/20/07	15:19
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RM	12/20/07	15:19
2,4-Dinitrophenol	ND	0.005	mg/L	625	RM	12/20/07	15:19
2-Nitrophenol	ND	0.002	mg/L	625	RM	12/20/07	15:19
4-Nitrophenol	ND	0.005	mg/L	625	RM	12/20/07	15:19
Pentachlorophenol	0.242	0.005	mg/L	625	RM	12/20/07	15:19
Phenol	ND	0.002	mg/L	625	RM	12/20/07	15:19
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	15:19

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Argus Cooler# 1530

Sampler (print/signature): Kevin B. Coker

Report to: Koppers Inc.
Address: One Koppers Drive
Tie Plant, MS 38960

Invoice to: Koppers Inc.
Address: P.O. Box 160
Tie Plant MS 38960

Project Name/Number:

Project Manager:

MGPTF# (if applicable)

Comments/priority:

Item #	Field Number	Sample Description	Collection Date	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	005-1A	- NADES - Storm Water Sample	Dec 18 2007	4:03pm	KC	G			PAH's	CC25089
2	005-1B			4:04pm	KC	G			PAH's	
3	005-2			4:04pm	KC	G			Pentachlorophenol	
4	005-3			4:05pm	KC	G			Total Phenols	
5	005-4			4:06pm	KC	G		✓	Oil & Grease	
6	005-5			4:07pm	KC	G			Total Suspended Solids & pH	
									pH 7.97 SU @ 4:08pm	

Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time
[signature]	[illegible]						
Relinquished by: DED	Date/time: 12-17-07 16:30	Accepted by: [signature]	Date/time 12-17-07 16:30	Relinquished by:	Date/time:	Accepted by: Erick [signature]	Date/time 12/19/07 10:16

Issued: 03/03/06 Effective: 03/03/06 Last Reviewed and Approved: BGG 03/03/06

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 01/10/08
Date Received: 12/17/07
Date/Time Sampled: 12/16/07 15:46
Sampled by: K. Coker

Project ID/Location: NPDES Stormwater Analysis
Project Number:

Sample Description: Outfall 006 (Grab)
Sample Matrix: WATER
Sample Number: CC25085
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.17		units	4500-H+B	MEW	12/18/07	15:15
Oil & Grease	ND	2.0	mg/L	1664A	CRM	12/26/07	08:50
Residue, non-filterable (TSS)	114	1.0	mg/L	2540D	RAH	12/20/07	11:30
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RM	12/20/07	10:20
2-Chlorophenol	ND	0.002	mg/L	625	RM	12/20/07	10:20
2,4-Dichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	10:20
2,4-Dimethylphenol	ND	0.002	mg/L	625	RM	12/20/07	10:20
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RM	12/20/07	10:20
2,4-Dinitrophenol	ND	0.006	mg/L	625	RM	12/20/07	10:20
2-Nitrophenol	ND	0.002	mg/L	625	RM	12/20/07	10:20
4-Nitrophenol	ND	0.006	mg/L	625	RM	12/20/07	10:20
Pentachlorophenol	0.216	0.001	mg/L	625	RM	12/20/07	10:20
Phenol	ND	0.002	mg/L	625	RM	12/20/07	10:20
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	10:20

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Argus Cooler # 1007

Report to: Koppers Inc.
Address: One Koppers Drive, Tie Plant, MS 38960

Invoice to: Koppers Inc.
Address: P.O. Box 160, Tie Plant, MS 38960

Comments/priority:

Sampler (print/signature): Kevin B. Rowe

Project Name/Number:

Project Manager:

MGPTF# (If applicable)

Item #	Field Number	Sample Description	Collection Date	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	006-1a	NPDES Storm Water Sample	Dec-16 2007	3:43pm	KC	G			PAHs	CC25085
2	006-1b			3:43pm	KC	G			PAHs	
3	006-2			3:43pm	KC	G			Pentachlorophenol	
4	006-3			3:44pm	KC	G			Total Phenols	
5	006-4			3:45pm	KC	G		✓	Oil & Grease	
6	006-5			3:46pm	KC	G			Total Suspended Solids & pH	
									pH 8.11 SU @ 3:49pm	

Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time
[signature]	12/17/07 [illegible]						
[signature]	12-17-07 16:30	[signature]	12-17-07 16:30			[signature]	12-17-07 10:15

Issued: 03/03/06 Effective: 03/03/06 Last Reviewed and Approved: BGG 03/03/06

F022 COC Argus R11 xls

ARGUS ANALYTICAL, INC.

235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 01/10/08
Date Received: 12/17/07
Date/Time Sampled: 12/16/07 15:30
Sampled by: K. Coker

Project ID/Location: NPDES Stormwater Analysis
Project Number:

Sample Description: Outfall 007 (Grab)
Sample Matrix: WATER

Sample Number: CC25086
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	7.41		units	4500-H+B	MEW	12/18/07	15:15
Oil & Grease	ND	2.0	mg/L	1664A	CRM	12/27/07	08:15
Residue, non-filterable (TSS)	95	1.0	mg/L	2540D	RAH	12/20/07	11:30
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RM	12/20/07	10:53
2-Chlorophenol	ND	0.002	mg/L	625	RM	12/20/07	10:53
2,4-Dichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	10:53
2,4-Dimethylphenol	ND	0.002	mg/L	625	RM	12/20/07	10:53
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RM	12/20/07	10:53
2,4-Dinitrophenol	ND	0.005	mg/L	625	RM	12/20/07	10:53
2-Nitrophenol	ND	0.002	mg/L	625	RM	12/20/07	10:53
4-Nitrophenol	ND	0.005	mg/L	625	RM	12/20/07	10:53
Pentachlorophenol	0.262	0.001	mg/L	625	RM	12/20/07	10:53
Phenol	ND	0.002	mg/L	625	RM	12/20/07	10:53
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	10:53

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Argus Cooler # 1529

Report to: Koppers. Com
Address: One Koppers Drive
Tie Plant, MS 38960

Invoice to: Koppers. Com
Address: P.O. Box 160
Tie Plant, MS 38960

Sampler (print/signature): Kevin B. Cooper

Project Name/Number:

Project Manager:

MGPTF# (If applicable)

Comments/priority:

Item #	Field Number	Sample Description	Collection Date	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	007-1A	- NPDES - Storm Water Sample	Dec 16 2007	3:27	KC	G			PAHs	LC25086
2	007-1B			3:28	KC	G			PAHs	
3	007-2			3:29	KC	G			Pentachlorophenol	
4	007-3			3:29	KC	G			Total Phenols	
5	007-4			3:30	KC	G		✓	Oil & Grease	
6	007-5			3:30	KC	G			Total Suspended Solids & pH	
									pH @ 7:47	
									@ 3:32	

Relinquished by:	Date/time:	Accepted by:	Date/time
[signature]	12/17/07 10:14		
DCD	12-17-07 16:30	[signature]	12-17-07 16:30

Relinquished by:	Date/time:	Accepted by:	Date/time
		[signature]	12-17-07 10:16

Issued: 03/03/06 Effective: 03/03/06 Last Reviewed and Approved: BGG 03/03/06

F022 COC

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 01/10/08
Date Received: 12/21/07
Date/Time Sampled: 12/20/07 10:09
Sampled by: K. Coker

Project ID/Location: NPDES Stormwater Analysis
Project Number:

Sample Description: Outfall 008 (Grab)
Sample Matrix: WATER
Sample Number: CC25430
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	7.91		units	4500-H+B	MWS	12/21/07	16:55
Oil & Grease	ND	2.0	mg/L	1664A	CRM	01/04/08	08:30
Residue, non-filterable (TSS)	52	1.0	mg/L	2540D	RAH	12/26/07	11:30
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RM	12/31/07	15:11
2-Chlorophenol	ND	0.002	mg/L	625	RM	12/31/07	15:11
2,4-Dichlorophenol	ND	0.002	mg/L	625	RM	12/31/07	15:11
2,4-Dimethylphenol	ND	0.002	mg/L	625	RM	12/31/07	15:11
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RM	12/31/07	15:11
2,4-Dinitrophenol	ND	0.005	mg/L	625	RM	12/31/07	15:11
2-Nitrophenol	ND	0.002	mg/L	625	RM	12/31/07	15:11
4-Nitrophenol	ND	0.005	mg/L	625	RM	12/31/07	15:11
Pentachlorophenol	ND	0.001	mg/L	625	RM	12/31/07	15:11
Phenol	ND	0.002	mg/L	625	RM	12/31/07	15:11
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RM	12/31/07	15:11

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 01/02/08
Date Received: 12/21/07
Date/Time Sampled: 12/20/07 13:52
Sampled by: K. Coker

Project ID/Location: NPDES Stormwater Analysis
Project Number:

Sample Description: Outfall 008 (Composite)
Sample Matrix: WATER
Sample Number: CC25431
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Residue, non-filterable (TSS)	22	1.0	mg/L	2540D	RAH	12/26/07	11:30
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RM	12/31/07	15:45
2-Chlorophenol	ND	0.002	mg/L	625	RM	12/31/07	15:45
2,4-Dichlorophenol	ND	0.002	mg/L	625	RM	12/31/07	15:45
2,4-Dimethylphenol	ND	0.002	mg/L	625	RM	12/31/07	15:45
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RM	12/31/07	15:45
2,4-Dinitrophenol	ND	0.005	mg/L	625	RM	12/31/07	15:45
2-Nitrophenol	ND	0.002	mg/L	625	RM	12/31/07	15:45
4-Nitrophenol	ND	0.005	mg/L	625	RM	12/31/07	15:45
Pentachlorophenol	ND	0.001	mg/L	625	RM	12/31/07	15:45
Phenol	ND	0.002	mg/L	625	RM	12/31/07	15:45
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RM	12/31/07	15:45

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Argus Code: 1534

Report to: Koppers Inc.
Address: One Koppers Drive, Tie Plant, MS 38660

Invoice to: Koppers Inc.
Address: P.O. Box 160, Tie Plant, MS 38660

Sampler (print/signature): Kevin B. Cline

Project Name/Number:

Project Manager:

MGPTF# (If applicable)

Comments/priority:

Item #	Field Number	Sample Description	Collection Date	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	008-1a	- NPDES - Storm Water Sample	Dec 20 2007	10:06	KC	G			PAHs	CC25430
2	008-1b			10:07	KC	G			PAHs	
3	008-2			10:04	KC	G			Pentachlorophenol	
4	008-3			10:08	KC	G			Total Phenols	
5	008-4			10:07	KC	G		✓	Oil & Grease	pH @ 10:47
6	008-5			10:09	KC	G			Total Suspended Solids & pH	
7	008-6			1:52	KC	C			Pentachlorophenol	CC25431
8	008-7			1:52	KC	C			Total Phenols	
9	008-8			1:52	KC	C			Total Suspended Solids	

Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time
Kevin B. Cline							
DSD	12-21-07 16:20	[illegible]	12-21-07 16:20			E Hunt	12-21-07 5:35

Issued: 03/03/06 Effective: 03/03/06 Last Reviewed and Approved: BGG 03/03/06

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
P.O. Box 160
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 01/10/08
Date Received: 12/17/07
Date/Time Sampled: 12/16/07 15:12
Sampled by: K. Coker

Project ID/Location: NPDES Stormwater Analysis
Project Number:

Sample Description: Outfall 009 (Grab)
Sample Matrix: WATER
Sample Number: CC25084
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	7.21		units	4500-H+B	MEW	12/18/07	15:15
Oil & Grease	ND	2.0	mg/L	1664A	CRM	12/26/07	08:50
Residue, non-filterable (TSS)	13	1.0	mg/L	2540D	RAH	12/20/07	11:30
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RM	12/20/07	09:46
2-Chlorophenol	ND	0.002	mg/L	625	RM	12/20/07	09:46
2,4-Dichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	09:46
2,4-Dimethylphenol	ND	0.002	mg/L	625	RM	12/20/07	09:46
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RM	12/20/07	09:46
2,4-Dinitrophenol	ND	0.005	mg/L	625	RM	12/20/07	09:46
2-Nitrophenol	ND	0.002	mg/L	625	RM	12/20/07	09:46
4-Nitrophenol	ND	0.005	mg/L	625	RM	12/20/07	09:46
Pentachlorophenol	ND	0.001	mg/L	625	RM	12/20/07	09:46
Phenol	ND	0.002	mg/L	625	RM	12/20/07	09:46
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RM	12/20/07	09:46

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Argus Cooler # 1531

Report to: Koppers Inc.
Address: Dove Koppers Drive
Tie Plant, MS 38960

Invoice to: Koppers Inc.
Address: P.O. Box 100
Tie Plant, MS 38960

Sampler (print/signature): Kevin B. Cooper

Project Name/Number:

Project Manager:

MGPTF# (if applicable)

Comments/priority:

Item #	Field Number	Sample Description	Collection Date	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	009-1A	- NPDES - Storm Water Sample	Dec. 16 2007	3:07pm	KC	G			PAHs	CC25084
2	009-1B			3:08pm	KC	G			PAHs	
3	009-2			3:09pm	KC	G			Pentachlorophenol	
4	009-3			3:09pm	KC	G			Total Phenols	
5	009-4			3:10pm	KC	G		✓	Oil & Grease	
6	009-5			3:12pm	KC	G			Total Suspended Solids & pH	
									3:16pm pH @ 7.13 SU	

Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time
[signature]	12/17/07 10:14am						
[signature]	12-17-07 16:30	[signature]	12-17-07 16:30			Erick Hunt 12-17-07	10:17

Issued: 03/03/06 Effective: 03/03/06 Last Reviewed and Approved: BGG 03/03/06

Part VII.

Inspection Report and Certification Form For Storm Water Pollution Prevention Plan Evaluation

Wood Treater Storm Water General NPDES Permit No. MSR220005

(Please Print)

Owner and/or Operator: Koppers Inc.

Facility Name: Koppers Inc. - Grenada Plant

Facility Location: One Koppers Drive; Tie Plant, MS 38960

Date and Time: December 28, 2007 @ Approximately 2:00 PM

Inspector(s): Kevin Coker & John Cummings

Date of Last Rainfall: December 27 & 28, 2007 **Estimated Amount:** 0.25 & 0.20, respectively.

Deficiencies Noted During the Inspection (attach additional sheets if necessary):

See Attachment

Corrective Action Needed (attach additional sheets if necessary):

See Attachment

Corrective Action Compliance Schedule:

See Attachment

Based upon this inspection which I or personnel under my direct supervision conducted, I certify that all pollution control measures are adequate and have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan filed with the Office of Pollution Control and good engineering practices as required by the above referenced permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons 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 fines and imprisonment for knowing violations.

I further certify that the Mississippi Office of Pollution Control has been notified of any changes pertinent to our storm water permit as required in Part II.C.

Vance R. Haskin	Vance R. Hask	1/21/08
Authorized Name (Print)	Signature	Date

These reports shall be submitted annually, as required in the permit, to:

Chief, Industrial Branch
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385

Visual Site Inspection & Evaluation
NPDES Permit No.: MSR220005
Coverage Year: 2007
KOPPERS INC. – Grenada Plant

Area/Activity/BMP	Possible Contaminants	Observation & Corrective Action
Drainage Site Map	N/A	*Note any potential changes in storm water flow* The general flow path of the plant's drainage ways remains unchanged. Improvements were made to certain areas of the flow in the watershed of Outfall 004. New culverts were installed, the elevation of the road servicing the western boundary of the detention pond at Outfall 004 was raised, and drainage ditches were cleaned. We continue to sow grass in areas were soil is exposed. Much of this activity was conducted in conjunction with the clearing of the property boundary as the new security fence was installed.
Exposed Inventory Quantities / Status / Potential Sources	Permit Parameters	*Quantities (Section 5.4.2);* The Company continues to monitor and attempts to minimize slow moving inventory at the site. Slow moving inventory volumes are communicated to the corporate office on a quarterly basis. The plant's focus is to procure and produce treated inventory only to the extent needed to fully service its customer base as determined by the corporate sales department. The customer base does, however, require that a contingency be maintained. Approximate average inventories for 2007 were as follows: • creosote treated poles and piling 532 pcs • pentachlorophenol treated poles 4,961 pcs • creosote treated cross and switch ties 91,225 pcs • creosote treated lumber 5,674 pcs Approximate average inventories for 2006 were as follows: • creosote treated poles and piling 1,018 pcs • pentachlorophenol treated poles 4,122 pcs • creosote treated cross and switch ties 43,171 pcs • creosote treated lumber 9,100 pcs The average volume of creosote treated poles inventoried at the site declined over this time period due to a core customer's shift to the use of pentachlorophenol as their preservative. This shift was unforeseen; however, it is likely that other customers will be changing preservatives in 2008. The average volume of pentachlorophenol treated poles increased due to a surge in business driven by increased customer demand and aggressive sales by the KI Corporate Services Group (CSG). Another factor of course was the customer shift mentioned above. The average volume of creosote treated cross ties increased substantially due to aggressive production cycles at the site. The same is not predicted for 2008. Lumber volumes declined as effort to lower the volume of slow moving inventory at the site continues. Efforts to continue to lower the treated wood foot print at the site will continue to be an area of discussion in the 2008 Pollution Prevention Plan Team (P3 Team) initiatives.

		The plant's Drip Pad Operating Procedure and Treated Wood Storage Yard Inspection Procedure continue to be employed to control the impact of treated wood on storm water. This is evidenced by the associated records. Improvements were made at the plant's refueling area in an effort to reduce the risk of gasoline and diesel spills. These improvements included the addition of a concrete equipment staging pad for refueling activities, the staging of a spill kit near the refueling area, and training to reinforce the use of caution whenever refueling equipment. Various acids and flocculants are stored in the southern WWTS control room. A non-reportable spill of ferric chloride occurred in this area in 2007. In response additional containment was added and the configuration of the pumping process was changed. The area was cleaned subsequent to the spill. The residual was shipped off site to a TSD. Various lubricants continue to be stored inside of a building equipped with a curb and a concrete staging ramp leading into the building that was installed in 2006. Both mobile and stationary equipment is inspected each day of operation for leaks that could impact storm water. Documentation of these inspection as well as maintenance work orders are kept at the site.
Previous Spill Areas	ALL	*All historical spill areas were inspected for evidence of residuals/preservatives as well as the continued presence and effectiveness of control and countermeasures.* *South End Of Cylinders 1 -5* The curtain installed at the back of Cylinders 1 – 5 remains intact and is kept closed as a containment tool. Employees are trained to ensure the curtain is kept closed. There was no evidence of preservative on the ground outside of containment at the south end of the cylinders. Water was observed to be puddling in the drive area south of the treating cylinders. This area is being drained by use of aggregate.
		East of Door to Cylinder No. 5 An examination of the area east of Cylinder No. 5 revealed no evidence of preservative residual being on the ground. It was observed, however, that the flange guard on the front of Cylinder No. 5 had been bent forming a gap in the guard. Consequently there exist the potential for spay to exit out of the guard in the instance of a door gasket rupture. Repair of the flange will help reduce the risk of a release to the environment. However, if the curtain is closed to its northern most point then adequate protection exists.
		West of Tank Farm Containment Area There is no presence of residual along the west side of the containment area of the tank farm. The containments remain intact. Additional splash guards were installed in 2007 at strategic areas along the perimeter to protect process piping to minimize the risk of a spill. Overhead lines transferring process water to Tank No. 50 situated in the western containment area were double lined to also reduce the risk of a spill. The containment wall in this area is routinely inspected for cracks and leaks.
		West of Boiler Building In 2005 five (5) drains/old process lines located at the south west corner of the boiler building that fed to the pond near the plant entrance were capped and an old concrete ramp positioned to the west of the boiler building that had at one

		time resulted in a diesel spill was removed to reduce the risk of spills and their being transferred to the waters of the US. In 2007 additional work was conducted on the feed water pumps situated in the South West corner of the boiler building to help prevent leaks. A sump pump was placed in this area to manage any water that should leak. The condensate return systems and boiler operation is equipped with safety eyes to automatically shut these operations down in the event that a hole in a steam coil or a check valves fails and commences to transfer preservative to these systems.
		Temporary Hosing In the event that temporary hosing is used, caution is exercised to ensure that spills do not occur. Lines are tied off to the receiving vessel securely. Additional containment is placed beneath the hoses in the event that a line should leak. These operations are rare and, whenever they are used, they are monitored by plant personnel.
		Sump Pump Behind Shop A new sump was installed at the shop's transfer pump to ensure that the rate of storm water transfer from the shop pad was adequate. The existing sump was working however it was replaced as a precautionary measure as it was an old unit..
		Hazardous Waste Boxes Two hazardous waste boxes are used at the site. One serves to hold K001 waste and the other serves to hold FO32/FO34 waste. Both are kept on concrete pads and their doors and gaskets are inspected.
		Process Lines In Treating Department New process lines are being installed in the treating area to help further reduce the risk of spills from this source. Additionally, splash curtains have been installed along the eastern perimeter of the cylinder basement containment area to further reduce the risk of spills.
		POTW Discharge Lines The plant's discharge line connecting the Waste Water Treatment System (WWTS) to the City Of Grenada POTW has been a source of historic spills. This line was replaced with a double-walled line in 2008. The line is fitted with pull boxes that serve as inspection points for leaks. The line is on a grade such that in the event that of a leak the water would inevitably flow to the POTW. No apparent leaks have been evident since the new line was installed.
		Creosote Unloading Station New containments were added to the creosote rail car tanker unloading station around 2003. Additional containments were added and/or modified to further reduce the risk of a release from this area in 2005. Still more were added in 2007 to include a drainage way connecting the rail car unloading area to the containments below the pentachlorophenol mixing station. In 2005 the pentachlorophenol and diesel unloading station was located adjacent the oil/water separators and was subsequently moved to a more secure area. The original area had no containments at that time. Inevitably an additional pump and lines were installed to give the plant the capability to unload Pentachlorophenol and diesel at the existing P1 Creosote preservative unloading

		station. This area is concrete and was designed for the purpose of unloading tanker trucks. Relocation of this station served to reduce the risk of a spill. Spills have occurred in this area in the past due to discharges from the blow down tanks. Additional safety controls were engineered and installed in 2007 to ensure that the risk of these types of spills occurring in the future is eliminated.
		Drip Pad Transition Points In 2007 a roof was installed over the drip pad to offer added protection at the transition points. The roof measuring 480' x 95' covers a large portion of the drip pad and reducing the volume of process water being treated in the plant's WWTS as well as the risk of spills at these transition points.
Process Areas / Wood Treating & Storage Areas / WWTS Containments – Aeration, Clarifier & Discharge Tanks.	ALL	*Tank Farm Containments , WWTS Containments, Rail Car Unloading Area, Treated Tie Storage, Treated Pole Storage, Yard Drippage Inspection, Drip Pad, Yard Storage Efficiency, Yard Status, Ditches/Erosion, Etc.* Tank farm and WWTS (Biological Treatment Area) containments are periodically inspected and maintained as necessary. Various other measures were taken to further reduce spill risk from plant process areas as mentioned elsewhere in this report (i.e., drip pad roof, safety controls for treating operation, splash guards, splash curtains, double walled lines, additional curbing, etc.). The plants storage areas and roadways continue to be maintained. Aggregate and clay gravel is purchased as needed. This will represent a continual preventative maintenance item in 2008. Money and energy was likewise expended to ensure adequate vegetation on slopes and exposed areas of the plant. Effort will continue to ensure erosion is not an issue for the facility.
Loading & Unloading Material Handling Areas	ALL	*Creosote, pentachlorophenol and diesel unloading station practices and containments, tie unloading station at north drip pad, south yard banding areas, etc.* The containments for the diesel, gasoline, creosote, pentachlorophenol, and creosote handling station has been addressed at other instances in this report. Employees who operate in these areas have been trained on SPCC issues as well as storm water pollution prevention measures. The Tie Sorter and A&B Mill pose a risk due to the hydraulic equipment utilized in processing cross ties. Various measures have been implemented to minimize this risk including the installation of a roof over the Tie Stacker as well as the employing of routine inspections.
Chemical Storage Areas	ALL	*Tank farm secondary containments, WWTS chemical containments, boiler chemical containments, high level alarms, etc.* All secondary containments are adequate to meet RCRA capacity requirements. WWTS chemicals stored in 55 gallon drums have been placed over containment bins. High level alarms are installed in work tank's number 3 and 4 as well as in each blowdown tank. The installation of additional high level alarms was submitted as a part of the plant's 2008 capital program.

Untreated Product Storage Area	TSS	*Verify that ditch banks are intact, that erosion is no occurring.* The ditches in and around the plant's untreated storage area's do not appear to be eroding. Recent work conducted on the primary south yard access road warrants monitoring as much new dirt is exposed. Rye grass has been sowed but will continue to be monitored. As a precaution additional rye grass will be sowed at other locations of the yard. In 2007 a new culvert was installed near the framing skids near Outfall 006. The primary ditch transferring storm water from the untreated tie storage yard to the south to Outfall 004 and to the north to Outfall 007 was cleaned and sowed in conjunction with the installation of a new security fence. This activity also resulted in the moving of untreated poles further away from said ditch near the peeling operation.
Peeler Site	Hydraulic Oil, TSS	*Oil migration from peeler, erosion, road status, etc.* A drum of Sta-Brite P is staged near the peeling operation. The drum is plastic. The procurement of secondary containment for the drum is warranted. The security fencing referenced earlier skirts along the western side of the peeler. Consequently, drainage in this area was improved. Vegetation was sowed as needed. Bark and cut-offs generated at the peeling site was removed over the course of 2007. Effort to ensure that these items remain away from the peeling area and surrounding ditches will continue.
Maintenance Area	ALL	*Scrap yard area, wash pad, sump pumps, drain way to the west of the wash pad.* Scrap is washed prior to being stored in and around the shop to eliminate the risk of storm water contamination. The wash pad and its respective sumps were addressed above under "Previous Spill Areas". During the December 2007 plant wide safety/training meeting reinforced the need to ensure that equipment is washed on the curbed pad. As referenced elsewhere in this inspection report, the refueling area was enhanced as new concrete was installed and a spill kit was staged there as a countermeasure. Various used equipment that was staged at the shop was sold reducing the opportunity for leaks impacting storm water.
Outfall 001	ALL	*Ensure drains are open as applicable; detail status of soil stability around the outfall; status of banks and inlets: storm water discharges "shall be free from...debris, oil, scum, and other floating materials other than trace amounts...eroded soils and other materials that will settle to form objectionable deposits in receiving waters...suspended solids, turbidity and color at levels inconsistent with the receiving waters...chemicals in concentrations that would cause violation of State Water Quality Criteria in the receiving waters..."* Monthly inspections of this outfall were conducted. Outfall 001 is located at the southern end of the plant. The area surrounding the outfall is grassy. No solids have settled in the outfall. The appearance of oils, scum, or solids deposited by storm events is not present. No objectionable deposit of material has been observed below the outfall. Vegetation is well established in the general area of the outfall. Sheens, oils and chemicals were not evident during inspections.

		Concerns of untreated wood cut-offs staged in the watershed of Outfall 001 had been expressed in times past. Throughout 2007 effort was made to ensure that this wood pile was ground for use as wood fuel in the plant's boiler. This task was completed in the Fall. The area was sowed and vegetation is becoming well established. Soil in the area of the Outfall appears stable. Additionally old equipment that had been staged in this area (i.e., an old rail car, old equipment such as trailers and an old boiler) was removed. The volume of slow moving inventory (i.e., lumber) in the area of the Outfall was also reduced.
Outfall 002	ALL	Monthly inspections of this Outfall were conducted. The item of opportunity noted in Outfall 002 has been the elimination of Kudzu in the area. In 2007 the Kudzu in the area was deadened and subsequently sowed with rye grass. The rye grass became established and there is good soil stabilization in the area of the Outfall. Effort to this end will continue throughout 2008. No objectionable deposit of material had been observed below this outfall. The clarity of the water received at the ditch from the outfall was clearer than that of the receiving water. There was no evidence of oils or chemicals in the discharge at this Outfall. Repairs conducted to the weir in 2006 remain intact. Soil in the area of the Outfal appears stable. The valve and riser assembly in this Outfall will be reworked in 2008.
Outfall 003	ALL	Monthly inspections of this Outfall were conducted. Vegetation around Outfall 003, particularly along the bank near the Central Ditch, remained well established. Inspections revealed no evidence of sheens, scum, oils or floating materials. There is no evidence of objectionable deposits in or around the receiving waters. The water discharge at this Outfall has a tendency to be turbid; however, is typically consistent with the receiving waters in the Central Ditch. Vegetation is well established around this outfall. A load of sand is maintained near Outfall 003 as a precautionary measure to stop the flow of a spill from the shop and/or treating areas if needed.
Outfall 004	ALL	Monthly inspections of this Outfall were conducted. In 2007 effort was expended to clean around the drain at this Outfall to ensure that storm water flowed per design. Repairs were also made to a washed area approximately 3' x 3' in size near the eastern portion of this weir. Clay gravel was packed into place and the area was sowed to establish vegetation. The repairs remain in place. Grass was also sowed in the bottom of the detention pond. Vegetation around the Outfall has otherwise remained intact. The water discharged from this area was somewhat turbid however was consistent with receiving waters and no adverse deposits have been observed at the discharge point where the flow feeds to the central ditch. There has been no evidence of oils, chemicals or scum during the inspections. A load of sand has been staged at the western side of the dam of the detention pond serving Outfall 004 as an emergency response measure in the instance of a spill of oils or chemicals from the treating area. In the Fall of 2007 the levy at this Outfall was raised in conjunction with the ditch improvements referenced earlier. The installation of the drip pad resulted in a larger volume of water draining to this particular Outfall for given rain events. The upgrades to the pond levy and to the road skirting the western

		boundary of the pond were done as precautionary to ensure that Outfall 004 could properly handle the additional flow of storm water associated with the drip pad roof project. The valve and riser assembly in this Outfall will be reworked in 2008.
Outfall 005	ALL	Monthly inspections of this Outfall were conducted. Vegetation around the lower portion of the weir was cut in the Fall of 2007. Inspections revealed that the storm water discharge from this area was free of scum and oils. There are no receiving waters immediately below this outfall. Rather, the storm water runs through several acres of forested bottomland prior to every reaching any receiving waters. Its travel route is winding and predominately indistinguishable. There is no evidence of objectionable deposits associated with the discharge of this Outfall. This particular outfall is surrounded by trees and vegetation. Floating twigs and leaves were observed in the pond. The drain servicing this Outfall was unstopped at one point during 2007. Vegetation in the area of the Outfall is well established. Soil in the area of the Outfall appears stable. The valve and riser assembly in this Outfall will be reworked in 2008.
Outfall 006	ALL	Monthly inspections of this Outfall were conducted. At one point in 2007 repairs were made to the drain pipe servicing this Outfall. Clearing activities on the north west side of the detention pond were conducted in 2007. These were associated with the installation of a security fence. Vegetation was sowed, mowed and maintained subsequent to the clearing activities. Soil in the area of the Outfall appears stable. Inspections revealed that the discharge was free of oils, debris and scum. The detention basin servicing this outfall is situated in close proximity to standing tress and vegetation. Twigs and leaves were observed in the waters of the pond. The discharge from the pond feeds to a drainage ditch. There was no evidence of objectionable deposits associated with the discharge from this watershed observed.
Outfall 007	ALL	Monthly inspections were conducted. In 2007 the detention pond drain became stopped at one point and was subsequently repaired. Work to maintain vegetation around the pond was conducted as the area was sowed and cut as needed. Effort to ensure adequate vegetation in the area will continue. Soil in the area of the Outfall appears stable. Inspections noted that the water clarity exiting the detention pond drain was somewhat consistent to that of the receiving waters in the ditch at the northern end of the property. No objectionable deposits of material were observed below the outfall. Inspections also noted that the discharge from the pond was free of signs of scum and oil. Some floating solids from the operations south of the outfall were observed in the discharge drainage way near rip-rap and vegetation. However, these were captured in the drainage way adjacent and below the weir. No evidence of these items reaching the receiving waters was observed.
Outfall 008	ALL	Monthly inspections of this Outfall were conducted. Effort was expended in 2007 to maintain the slopes around Outfall 008. Grass was sowed as needed. Ground vegetation remained intact and soil in the area of the Outfall appears stable. Inspections showed that no objectionable deposits resulted from storm water discharge from this watershed. Discharged storm water was clearer than receiving waters and free of oil, floating materials, debris

		and scum. The valve and riser assembly in this Outfall will be reworked in 2008.
Outfall 009	ALL	Monthly inspections of this Outfall were conducted. Inspections revealed that discharge from the watershed of Outfall 009 was free of oil, debris, scum and other floating solids. The clarity of the water discharged from the outfall was consistent with the receiving waters and typically better in clarity. The outfall drains directly into the plant's central ditch. No objectionable deposit of material has been observed below the outfall. Repairs conducted to the weir in 2006 remain intact. Vegetation around the Outfall remained intact. No evidence of erosion was observed and soil in the area of the Outfall appears stable. The valve and riser assembly in this Outfall will be reworked in 2008.
Best Management Practices	ALL	*Process Area/Active Wood Treating and Storage Area* Drippage ceased procedures have been reiterated to plant personnel. A log is completed and maintained accordingly. Operators work to keep treated material on the drip pad as long as feasibly possible. If charges continue to drip they are placed back in to the cylinder for additional steaming/cleaning cycles. Cylinders are periodically cleaned when evidence of sludge is observed and believed linked to dirty cylinders. Limpid points are monitored and maintained at acceptable levels thus reducing the accumulation of solids on treated products. Treated wood poles are clean and free of solids subsequent to treating cycles. Steam flash cycles are used to help further ensure treated products are clean. Traffic on the drip pad remains limited to standard traffic required for the operation of the plant. Dedicated equipment is used on the pad. Tires are washed prior to entry and exit from the pad. Reorganization/minimization of the treated wood storage yard will continue to be a focus for the P3 Team. All treated poles are stored in elevated bins, thus minimizing their contact with storm water running during storm events. New metal bins were procured in 2007 and installed at the northern end of the pole storage area in close proximity to Outfall 007. Effort to manage pole reclass thus reduces the overall volume of treated wood dust generated at the site. This initiative is supported by its inclusion in the plant's incentive program. Ongoing efforts to maintain the plant's storage yard. This is an ongoing item requiring routine maintenance. In 2007 clay gravel and stone was purchased on a periodic basis to help maintain the yard. Skids are used to help keep untreated products off of the ground and reduce the accumulation of dust and mud on products as they are placed into the treating cylinders. Inevitably this reduces the level of solids on the surface of wood products as well as the volume of waste generated in the plant's process equipment. In the instance that sludge is identified on treated products the respective cylinder is inspected to ensure that it is not in need of cleaning. Cylinders No. 2, 3, and 4 were cleaned during 2007. Containments were inspected on a routine basis. Various work was conducted to better improve the plant's containment and control abilities. This included the

		enhancement of curbing near the K001 sludge box, the installation of a new drainage way at the rail car unloading area, the installation of a new drip pad roof, the installation of splash guards at pertinent areas around the perimeter of the tank farm, the enhancement of containments around overhead piping near Tank No. 15 and the installation of curtains around the perimeter of the treating cylinders. The plant continues to monitor preservative usage for environmental and economic reasons. Training on the issue of treatment and preservative usage was conducted earlier in the year by a third party. The plant has worked at various stages of the year to ensure that vegetation was in place to control erosion. This is evidenced by grass established around key areas of the perimeter of the plant that was cleared as a function of the installation of fencing. Additional areas sowed include the banks of the roadway leading to the south yard as well as in various portion of the watershed of Outfall 001. *Loading & Unloading Material Handling Areas –* Large portions of the plant's primary ditches skirting around loading and unloading areas were cleaned and reworked in 2007 in conjunction with the installation of security fencing. Vegetation was sowed and fertilized in the process. Additional effort to maintain well established vegetation will continue. The plant's P3 Team conducted an evaluation of historical spills as well as a spill risk assessment during 2007. Accordingly, various proactive and preventative measures were implemented to further reduce the risk of spills around the plant's tank farm and loading and unloading areas. These included the installation of splash guards along the western perimeter of the tank farm, splash curtains along the eastern perimeter of the treating cylinders, the installation of additional concrete near the eastern perimeter of the rail car unloading area and curbing enhancements near the staging area of the K001 Hazardous Waste Box. Standard Operating Procedures have been written and or revised as needed, and relayed to plant employees. These procedures are reviewed periodically for accuracy and thoroughness. Annual training on the plant's various Best Management Practices is conducted. A catch basin installed adjacent the wood fuel handing area serves to capture silt and debris transferred via storm water toward Outfall 004 is maintained by operating personnel in this area. Maintaining the basin helps to reduce the organic loading placed on all areas downstream from this basin. *Chemical Storage Areas –* Secondary containment has been inspected on a weekly basis and enhanced as described above. Level gauges are provided for various tanks. The installation of additional gauges will be completed in 2008. Chemicals related to the operations of the WWTS are enclosed and placed over secondary containment bins. *Untreated Product Storage Areas –* The plant's storage yard has been oriented so as to allow for storm water to be diverted around key stored product. Culverts are installed and maintained as required. These yards are maintained as needed. Debris is removed from the yard as required. Blocks and cut-offs from framing

		operations are cleaned on a routine basis. Rip rap has been used at the head of some ditches and around culvert inlets and outlets. Maintenance was conducted in 2007 on various catch basins ensuring drains were accessible. These included Outfall 004, 005, 006, and 007. Vegetation at various areas of the plant has been addressed in earlier text. Effort was expended on several occasions to ensure that the risk of erosion was minimized in areas of risk. Equipment operators have been trained on the plant's BMP's including the specific requirement not to drive through ditches. *Peeler Site –* Prevent and/or maintain hydraulic leaks as required. This area represents a high traffic area as material is processed and transferred to the appropriate storage bins. Effort is expended to ensure that it is maintained and well drained. In 2007 much effort and money was spent to ensure that bark and debris did not build up around the ditches servicing the peeler area. A contractor was hired to haul the debris off-site. A secondary containment unit will be purchased for the Sta-Brite P chemical used as a fungicide at this operation. *Maintenance –* An outside party continues to manage used oil and lubricants. The plant's parts washer is an environmentally friendly unit using an organic degreaser. Additional curbing was installed at the lubricants storage house in 2006 and a concrete pad was installed around the equipment refueling area in 2007. A spill kit is maintained at the refueling area and an Standard Operating Procedure addressing environmental issues at this area is maintained. Scrap metal is washed (as necessary) and placed in a hopper provided by the vendor. The quantities of scrap generated on the plant are tracked. A local vendor disposes of the waste. A wash pad is provided near the shop. This area is designated for the washing of equipment and contaminated metals removed from the production area. Trams are staged on a concrete pad situated to the east of the maintenance area after being steamed cleaned on the shop pad.

The on-going and continual Grenada Plant Best Management Practices are listed below for review and comparison to the inspection listed above.

KOPPERS INC. – GRENADA PLANT
BEST MANAGEMENT PRACTICES

Area or Activity	Best Management Practice
Process Area/active wood treating and storage area	• Assure drippage has ceased prior to removal of treated wood products from drip pad. • Manage treating preservatives to ensure xylene insolubles are at acceptable levels thus ensuring clean surfaces on treated wood products that are free of

	excrement. • Eliminate non-process traffic on drip pad; ensure that all equipment tires are washed before entering and departing from the drip pad. • Minimize the treated foot-print of inventory. • Work to minimize the need to cut treated wood and, when necessary, manage resultant saw dust appropriately • Maintain the condition of the untreated wood by reducing accumulation of mud and debris on products prior to treatment. This will minimize the opportunity for storm water impact following treatment. • Maintain the cleanliness of treating cylinders via routine cleaning. • Inspect and ensure that all containments are adequate and intact. • Adjust preservative cycles (as necessary) to minimize preservative used while complying with AWPA retention and penetration requirements. • When feasible apply post treatment processes such as steam flashing and expansion baths. • Minimize the quantity of treated wood stored on the site. • Ensure the appropriate implementation of yard drippage inspection programs.
Loading and Unloading Material Handling Areas	• Provide defined paths of storm water flow from loading and unloading areas enhancing vegetation in these areas to serve to filter and capture suspended solids. • Ensure that containments are adequate and allow no run-on or run-off of preservative. Evaluate and minimize the risks of spills in these areas. • Ensure that employees involved in this function of the plant's operations are adequately trained.
Chemical Storage Area	• Ensure that all secondary containment is adequate and intact • Provide level gauges thus reducing the risk of spills • Enclose chemical storage areas where possible
Untreated Product Storage Area	• Divert storm water around storage area • Position storage areas on stable, well-drained soils; conduct routine maintenance • Keep the area free of debris • Use silt fence and/or rip rap check dams in drainage ways • Utilize and maintain catch basins near weirs at outfalls. • Maintain all ditch banks; sowing vegetation where applicable and beneficial. Utilize mixed vegetation ensuring its presence during each season of the year. • Do not drive loaders or other equipment through ditches or on banks. Stay on established roadways.
Peeler Site	• Conduct maintenance ensuring that hydraulic leaks are eliminated. • Ensure that stored bark does not fall into the north ditch. • Work to maintain the roadways and ditches around the peeling operation.
Maintenance	• Ensure that all oils and waste generated during maintenance and servicing activities in the plant are managed in a timely and appropriate fashion. • Park all mobile equipment on concrete or paved surfaces. • Recycle scrape metal as it is generated. Do not allow it to accumulate on the ground. • Ensure that all equipment washing activities are conducted on the wash pad.

This inspection is responsive to Part III.7. (c) and Part IV.B of NPDES Permit No.: MSR220005. It reflects an evaluation of the activities that took place during the year 2007 to better improve and/or ensure that storm water was not contaminated by plant activities.

Signature _____

Vance R. Haskin
Plant Manager

KOPPERS

Koppers Inc.
Utility Poles and Piling
P. O. Box 160
Tie Plant, MS 38960
Tel 662 226 4584
Fax 662 226 4588
Haskinvr@koppers.com
www.koppers.com

January 22, 2008

Chief, Industrial Wastewater Branch
Office of Pollution Control
Department of Environmental Quality
P.O. Box 10385
Jackson, MS 39289-0385

CERTIFIED MAIL: 7006 3450 0000 5965 0091

Subject: Koppers Inc. – Grenada, MS Facility
NPDES Permit No.: MSR220005
2007 Annual Storm Water Sampling Results

Dear Sir or Madam:

Enclosed you will find information relevant to the 2007 Storm Water Sampling activities at Koppers Inc. – Grenada Plant as required by Part IV.D of NPDES Permit No. MSR220005. The sampling of storm water was conducted at Outfalls 003, 005, 006, 007, 008 and 009. The balance of the site's outfalls, Outfalls 001, 002 and 004, was not sampled pursuant to exemptions allowed under Part IV.C.4 of the permit.

Per Part IV.B of the permit a visual inspection and evaluation of all industrial areas contributing to storm water discharge was conducted. Accordingly, a completed "Inspection Report and Certification Form" as well as supplemental information is attached.

I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Sincerely,

Vance R. Haskin

Vance R. Haskin

CC: Joyce Fankulewski – KI CSG
MDEQ – Data Integration Division

STATE OF MISSISSIPPI
HALEY BARBOUR
GOVERNOR
MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY
CHARLES H. CHISOLM, EXECUTIVE DIRECTOR

May 10, 2007

Mr. Vance Haskin
Koppers Inc
PO Box 160
Tie Plant, Mississippi 38960

Dear Mr. Haskin:

Re: Inspection Report
Koppers Inc
Tie Plant, Grenada County
Water-Pretreatment MSP090300
GP-Wood Treating MSR220005
Hazardous Waste-EPA ID MSD007027543

Enclosed are our inspection reports that were completed as a result of a multimedia Compliance Evaluation Inspection (CEI) at Koppers Inc on 4/5/07. The reports should be used by you as a guide for complying with requirements and limitations stated in your permits.

If you have any questions concerning this matter, please contact me at (601) 961-5050.

Sincerely,

Azzam Abu-Mirshid, P.E., BCEE
Timber and Wood Products Branch
Environmental Compliance and Enforcement Division

Agency Interest No. 876
INS20070001

Bark waste from the debarking of logs is sold. Used oil is collected in a steel tank. The tank is stored on a roofed concrete pad and was labeled "used oil".

There were several piles of wood waste on-site. Facility needs to properly dispose of unwanted wood waste. No violations were noted.

Signature: Aman Abdi

Date: 5-10-07

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location if Different)*
NAME [illegible] INDUSTRIES INC
ADDRESS P O BOX 160
[illegible] MS 39560

FACILITY [illegible] INDUSTRIES INC
LOCATION [illegible] PLANT MS 39560
[illegible] HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	001 B
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

TIMBR

*** NO DISCHARGE ( ) ***

Form Approved.
OMB No. 2040-0004

NOTE: Read instructions before completing this form.

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	06	01	01	TO	06	12	31

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI=9	(19)		NODI=9	
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
NITROGEN, AMMONIA	SAMPLE MEASUREMENT	******	******		******	******	NODI=9	(19)		NODI=9	
00610 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
[illegible]	SAMPLE MEASUREMENT	******	******		******	******	NODI=9	(19)		NODI=9	
00680 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JUL 2007

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Vance Haskin Plant Manager TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	662 AREA CODE	226-4584 NUMBER	07 YEAR	01 MO	25 DAY
	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT PER PERMIT NO. MSR22005 PART IV.C.4

PA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form.

01375/051207-1029

PAGE 1 OF 1

PERMITTEE NAME/ADDRESS *(Includes Facility Name/Location if Different)*
NAME HOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY HOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	002 B

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

TIMI

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	06	01	01	TO	06	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI=9	(19)		NODI=9	
	PERMIT REQUIREMENT	******	******	***** *****	*****	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
2,4,6-TRICHLOROPHENOL 34086 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI=9	(19)		NODI=9	
	PERMIT REQUIREMENT	******	******	***** *****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 32730 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI=9	(19)		NODI=9	
	PERMIT REQUIREMENT	******	******	***** *****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JUL 2007

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Vance Haskin Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	662	226-8534	07	01	25
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

Vance R. Haskin
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXCEPT PER PERMIT NO. MSR220005 PART IV. C. 4

This is a 4-part form

PAGE OF

Form Approved.
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME COOPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY COOPERS INDUSTRIES INC

LOCATION TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MS0020005	003 B
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	06	01	01	TO	06	12	31

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

TIME

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	227	(19)	0	ANNUAL	COMP.
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS, TOTAL 32730 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.053	(19)	0	ANNUAL	COMP.
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI=B	(19)	0	ANNUAL	COMP.
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

VANCE HASKIN
PLANT MANAGER

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-1584	07	01	25

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

NODI=B REPRESENTS INSTANCES WHERE PARAMETER CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE

STORM DATE: OCTOBER 16, 2006; DURATION: 31 HRS & 35 min; ESTIMATED RAINFALL: 4.65 INCHES; DISCHARGE 0.1344 MG

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

01379/051207 P024

Form Approved.
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME PUPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY PUPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
MSR222005	004 B

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING
TIMB

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	06	01	01	TO	06	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI=9	(19)		NODI=9	
	PERMIT REQUIREMENT	******	******	***** *****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI=9	(19)		NODI=9	
	PERMIT REQUIREMENT	******	******	***** *****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI=9	(19)		NODI=9	
	PERMIT REQUIREMENT	******	******	***** *****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JUL 2007

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
VANCE HASKIN PLANT MANAGER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	662	226-4504	07	01	25
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT PER PERMIT NO. MSR 22005 PART IV. C. 4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form.

01381/051207-1027

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	005 B
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	06	01	01	TO	06	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL TIMI
STORMWATER COMPOSITE SAMPLING

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	323	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.364	(19)	0	Annual	Comp
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	N001-B	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JUL 2007

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
VANCE HASKIN PLANT MANAGER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Vance R. Haskin	662	226-4584	07	01	25
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
N001-B REPRESENTS INSTANCES WERE PARAMETER CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE
STORM DATE: OCTOBER 16, 2006; DURATION: 31 HRS & 35 MIN; ESTIMATED RAINFALL: 4.65 INCHES; DISCHARGE: 1.258 MG

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form. PAGE 1 OF

01383/051207-1027

Form Approved.
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
MS0020005	006 B

MINOR
(SUBR NO)
F - FINAL
TIMB
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	05	01	01	TO	05	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	144	(19)	0	ANNUAL	COMPOS
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L			
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.172	(19)	0	ANNUAL	COMPOS
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L			
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI=B	(19)	0	ANNUAL	COMPOS
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASSIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	326-4584	07	01	25

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
NODI=B REPRESENTS INSTANCES WHERE PARAMETER CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE
STORM DATE: OCTOBER 16, 2006; DURATION: 31 HRS & 35 MIN; ESTIMATED RAINFALL: 4.65 INCHES; DURATION DISCHARGE: 0.45

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	007 B

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	06	01	01	TO	06	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	184	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.136	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.007	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Vance Haskin
Plant Manager
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Vance R. Haskin
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	07	01	25

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

STORM DATE: OCTOBER 26, 2006 ; DURATION: 42 HRS & 30 MIN ; ESTIMATED RAINFALL: 0.90 INCHES DISCHARGE: 0.000132 MG

PA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

01387/051207-1029

PAGE 1 OF

Form Approved.
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38760

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38760
ATTN THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

MSR220005	008 B
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

TIMB

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	01	01	TO	06	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	89	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
ANTHRACENE 34030 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.003	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI=B	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JUL 2007

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
VANCE HASKIN PLANT MANAGER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Vance R. Haskin	662	226-4584	07	01	25
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

NODI=B REPRESENTS INSTANCES WHERE PARAMETER CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE.
STORM DATE: OCTOBER 16, 2006 ; DURATION: 31 HRS & 35 MIN ; ESTIMATED RAINFALL: 4.65 INCHES ; DISCHARGE: 0.115 M

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location if Different)*

NAME [illegible] INDUSTRIES INC

ADDRESS P O BOX 160

[illegible] MS 38960

FACILITY [illegible] INDUSTRIES INC

LOCATION TIE PLANT MS 38960

[illegible] THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*

DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
MS[illegible]0005	009 B

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	06	01	01	TO	06	12	31

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL TIMBI
STORMWATER COMPOSITE SAMPLING

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
[illegible] SUSPENDED [illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	260	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	**** ****	*****	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
[illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI = B	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
[illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI = B	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	[signature]	662	226-4584	07	01	25
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

NODI=B REPRESENTS INSTANCES WHERE CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE.

STORM DATE: OCTOBER 16, 2006; DURATION: 31 HRS & 35 MIN; ESTIMATED RAINFALL: 4.65 INCHES; DISCHARGE: 0.51

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

07/09/2007 13:01 KUPPERS INC. → GRENADA

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KUPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960
FACILITY KUPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER	DISCHARGE NUMBER
MSR22005	001 A

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING
*** NO DISCHARGE [ ] ***

Form Approved.
OMB No. 2040-0004

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
DC400 1 0 0 EFFLUENT GROSS VALUE POLYCYCLIC	SAMPLE MEASUREMENT				NODI = 9		NODI = 9			NODI = 9	
	PERMIT REQUIREMENT						REPORT MAXIMUM	SU			
SUSPENDED DC520 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						NODI = 9			NODI = 9	
	PERMIT REQUIREMENT						REPORT ANNL MAX	MG/L			
EXTR. -IR METH/TOT. RC DC560 1 0 0 EFFLUENT GROSS VALUE PENTACHLOROPHENOL	SAMPLE MEASUREMENT						NODI = 9			NODI = 9	
	PERMIT REQUIREMENT						REPORT ANNL MAX	MG/L			
39032 1 0 0 EFFLUENT GROSS VALUE PHENOLS	SAMPLE MEASUREMENT						NODI = 9			NODI = 9	
	PERMIT REQUIREMENT						REPORT ANNL MAX	MG/L			
46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						NODI = 9			NODI = 9	
	PERMIT REQUIREMENT						REPORT ANNL MAX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Vance Haskin
Plant Manager
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Vance A Haskin
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4581	07	01	25

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
REPORT STORM DATE AND DURATION (HOURS), ESTIMATED RAINFALL (INCHES) AND TOTAL DISCHARGE (GALLONS).
EXEMPT PER PERMIT NO. MSR 22005 PART IV.C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

01374/0 This is a 4-part form.

PAGE 1 OF

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960
FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER	DISCHARGE NUMBER
MS[illegible]	[illegible]

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

Form Approved.
OMB No. 2040-0004

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
00400 1 0 0 EFFLUENT GROSS VALUE SOLIDS TOTAL SUSPENDED	SAMPLE MEASUREMENT				NODI = 9		NODI = 9			NODI = 9	
	PERMIT REQUIREMENT			***			REPORT ANNL MAX	SU			
00530 1 0 0 EFFLUENT GROSS VALUE OIL & GREASE (FREON EXTR. -IR METHOD)	SAMPLE MEASUREMENT						NODI = 9			NODI = 9	
	PERMIT REQUIREMENT			***			REPORT ANNL MAX	MG/L			
00560 1 0 0 EFFLUENT GROSS VALUE [illegible]	SAMPLE MEASUREMENT						NODI = 9			NODI = 9	
	PERMIT REQUIREMENT			***			REPORT ANNL MAX	MG/L			
00032 1 0 0 EFFLUENT GROSS VALUE [illegible]	SAMPLE MEASUREMENT						NODI = 9			NODI = 9	
	PERMIT REQUIREMENT			***			REPORT ANNL MAX	MG/L			
46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						NODI = 9			NODI = 9	
	PERMIT REQUIREMENT			***			REPORT ANNL MAX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Vance R. Hoskin
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
662	226-4584	07	01	25

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
REPORT STORMS DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES); TOTAL DISCHARGE (GALLONS).
EXEMPT PER PERMIT NO. MSR22005 PART IV.C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

01376/0 This is a 4-part form. PAGE OF

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN. THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER	DISCHARGE NUMBER
MS[illegible]	005 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING
*** NO DISCHARGE ( ) ***

Form Approved.
OMB No. 2040-0004

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
00400 1 0 0 EFFLUENT GROSS VALUE SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT				8.24		8.24		0	ANNUAL	GRAB
	PERMIT REQUIREMENT				REPORT MINIMUM		REPORT MAXIMUM	SU			
00520 1 0 0 EFFLUENT GROSS VALUE OIL & GREASE (FREON EXTR.-IR METH) TOT. RC	SAMPLE MEASUREMENT						271		0	ANNUAL	GRAB
	PERMIT REQUIREMENT						REPORT ANNL MAX	MG/L			
00560 1 0 0 EFFLUENT GROSS VALUE [illegible]	SAMPLE MEASUREMENT						NODI = B		0	ANNUAL	GRAB
	PERMIT REQUIREMENT						REPORT ANNL MAX	MG/L			
39032 1 0 0 EFFLUENT GROSS VALUE PHENOLS	SAMPLE MEASUREMENT						0.057		0	ANNUAL	GRAB
	PERMIT REQUIREMENT						REPORT ANNL MAX	MG/L			
46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						NODI = B		0	ANNUAL	GRAB
	PERMIT REQUIREMENT						REPORT ANNL MAX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HARRIS
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

[signature]
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4581	07	01	25

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) NODI = B REPRESENTS INSTANCES WHERE PARAMETERS WERE NOT DETECTABLE OR BELOW PCB LIMIT.
REPORT DIURN DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)
STORM DATE: OCTOBER 16, 2006; DURATION: 31 HRS & 35 MIN; ESTIMATED RAINFALL: 4.65" INCHES; DISCHARGE: 0.1344 MG

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form. PAGE OF

07/09/2007 13:01 KOPPERS INC. → GRENADA NO.135 P004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960
FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER	DISCHARGE NUMBER
MSR22005	004 A

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING
*** NO DISCHARGE [ ] ***

Form Approved.
OMB No. 2040-0004

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
00400 1 0 0 EFFLUENT GROSS VALUE SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT				NODI=9		NODI=9	(12)		NODI=9	
	PERMIT REQUIREMENT			***	REPORT MINIMUM		REPORT MAXIMUM	SU		ANNUAL	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE OIL & GREASE (FREON EXTR.-IR METH)TOT/RC	SAMPLE MEASUREMENT						NODI=9	(19)		NODI=9	
	PERMIT REQUIREMENT			***			REPORT ANNL MAX	MG/L		ANNUAL	GRAB
00560 1 0 0 EFFLUENT GROSS VALUE PENTACHLOROPHENOL	SAMPLE MEASUREMENT						NODI=9	(19)		NODI=9	
	PERMIT REQUIREMENT			***			REPORT ANNL MAX	MG/L		ANNUAL	GRAB
39032 1 0 0 EFFLUENT GROSS VALUE PHENOLS	SAMPLE MEASUREMENT						NODI=9	(19)		NODI=9	
	PERMIT REQUIREMENT			***			REPORT ANNL MAX	MG/L		ANNUAL	GRAB
46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						NODI=9	(19)		NODI=9	
	PERMIT REQUIREMENT			***			REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Vance Haskill
Plant Manager
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Vance R. Haskill
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	07	01	25

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES); TOTAL DISCHARGE (GALLONS)
EXEMPT PER PERMIT NO. MSR 22005 PART IV. C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. 01380 This is a 4-part form. PAGE OF

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER	DISCHARGE NUMBER
[illegible]	005 A

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING
*** NO DISCHARGE [illegible] ***

Form Approved.
OMB No. 2040-0004

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX.	FREQUENCY OF ANALYSIS	SAMPLE TYPE
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				8.40		8.40		0	Annual	Grab
	PERMIT REQUIREMENT							SU			
SOLIDS TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						498		0	Annual	Grab
	PERMIT REQUIREMENT						ANNL MAX	MG/L			
OIL & GREASE (FREON EXTR -IR METH) TOT RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						NODI-B		0	Annual	Grab
	PERMIT REQUIREMENT						ANNL MAX	MG/L			
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						0.264		0	Annual	Grab
	PERMIT REQUIREMENT						ANNL MAX	MG/L			
PHENOLS 46300 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						NODI-B		0	Annual	Grab
	PERMIT REQUIREMENT						ANNL MAX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JUL 2007

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Vance Haskin
Plant Manager
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Vance R Haskin
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	07	01	25

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) NODI: B REPRESENTS INSTANCES WERE PARAMETER CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE.
REPORT STORM DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES): TOTAL DISCHARGE
STORM DATE: OCTOBER 16, 2006; DURATION: 31 HRS & 35 MIN; ESTIMATED RAINFALL: 4.65 INCHES; DISCHARGE: 1.258 MG

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form. PAGE OF

07/09/2007 13:01 KOPPERS INC. → GRENADA NO.135 P000

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER	DISCHARGE NUMBER
MS0020005	006 A

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING
*** NO DISCHARGE ( ) ***

Form Approved.
OMB No. 2040-0004

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
00400 1 0 0 EFFLUENT GROSS VALUE SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT				8.58		8.58		0	Annual	Grab
	PERMIT REQUIREMENT				MINIMUM		MAXIMUM	SU			
00520 1 0 0 EFFLUENT GROSS VALUE OIL & GREASE (FREON EXTR.-IR METH) TOT. RC	SAMPLE MEASUREMENT						152		0	Annual	Grab
	PERMIT REQUIREMENT						ANNL MAX	MG/L			
00560 1 0 0 EFFLUENT GROSS VALUE PENTACHLOROPHENOL	SAMPLE MEASUREMENT						NODI=B		0	Annual	Grab
	PERMIT REQUIREMENT						ANNL MAX	MG/L			
34032 1 0 0 EFFLUENT GROSS VALUE PHENOLS	SAMPLE MEASUREMENT						0.157		0	Annual	Grab
	PERMIT REQUIREMENT						ANNL MAX	MG/L			
45000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						NODI=B		0	Annual	Grab
	PERMIT REQUIREMENT						ANNL MAX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

[signature]
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	276-4584	07	01	25

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) NODI-B REPRESENTS INSTANCES WHERE PARAMETER CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE.
REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL DISCHARGE
STORM DATE: OCTOBER 16, 2006; DURATION: 31 HRS & 35 MIN; ESTIMATED RAINFALL: 4.65 INCHES; DISCHARGE: 0.456 MG

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form. PAGE OF

07/09/2007 13:01 KOPPERS INC. → GRENADA NO.133

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME: KOPPERS INDUSTRIES INC
ADDRESS: P O BOX 160
TIE PLANT MS 39960

FACILITY: KOPPERS INDUSTRIES INC
LOCATION: TIE PLANT MS 39960
ATTN: THOMAS L. HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER	DISCHARGE NUMBER
MS[illegible]	007 A

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

*** NO DISCHARGE ( ) ***

Form Approved.
OMB No. 2040-0004

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				7.75		7.75		0	Annual	Grab
	PERMIT REQUIREMENT			*** ****	REPORT MINIMUM		REPORT MAXIMUM	SU			
SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						184		0	Annual	Grab
	PERMIT REQUIREMENT			*** ****			REPORT ANNL MAX	MG/L			
OIL & GREASE (FREON EXTR.-IR METHOTOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						N001-B		0	Annual	Grab
	PERMIT REQUIREMENT			*** ****			REPORT ANNL MAX	MG/L			
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						0.056		0	Annual	Grab
	PERMIT REQUIREMENT			*** ****			REPORT ANNL MAX	MG/L			
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						0.003		0	Annual	Grab
	PERMIT REQUIREMENT			*** ****			REPORT ANNL MAX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Vance R. Haal
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	07	01	25

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) N001-B REPRESENTS INSTANCES WHERE PARAMETER CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE
REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) DISCHARGE (GALLONS)
STORM DATE: OCTOBER 26, 2006; DURATION: 42 HRS & 30 MIN ESTIMATED RAINFALL: 0.90 INCHES DISCHARGE: 0.000132

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form. PAGE OF

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY KOPPERS INDUSTRIES INC
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER	DISCHARGE NUMBER
[illegible]	008 A

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

MINOR
(SUBP NO)
1 - FINAL
STORMWATER GRAB SAMPLING
*** NO DISCHARGE [illegible] ***

Form Approved.
OMB No. 2040-0004

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
[illegible] 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				8.18		8.18		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT MAXIMUM	SU			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						332		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT ANNL MAX	MG/L			
OIL & GREASE (FREON EXTR. - IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						NODI=B		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT ANNL MAX	MG/L			
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						0.003		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT ANNL MAX	MG/L			
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						NODI=B		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT ANNL MAX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Vance Haskin
Plant Manager
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Vance R. Hask
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
662	226-4584	07	01	25

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) NODI=B REPRESENTS INSTANCES WHERE PARAMETER CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE.
REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (MILLIONS)
STORM DATE: OCTOBER 16, 2006 ; DURATION: 31 HRS & 35 MIN ; ESTIMATED RAINFALL: 4.65 INCHES ; DURATION DISCHARGE: 0.115

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME [illegible]
ADDRESS P O BOX 160 [illegible] MS 39562
FACILITY [illegible] ENGINEERING CRG
LOCATION [illegible] PLANT MS 39562
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER: [illegible]
DISCHARGE NUMBER: 001 A

MINOR
ISSUER NO
F - FINAL
STORMWATER GRAB SAMPLING
*** NO DISCHARGE [ ] ***

Form Approved.
OMB No. 2040-0004

MONITORING PERIOD
FROM YEAR MO DAY TO YEAR MO DAY

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
[illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				8.11		8.11		0	Annual	Grab
	PERMIT REQUIREMENT				REPORT		REPORT	SU			
SUSPENDED [illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						462		0	Annual	Grab
	PERMIT REQUIREMENT						DAILY MAX	MG/L			
[illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						NODI=B		0	Annual	Grab
	PERMIT REQUIREMENT						DAILY MAX	MG/L			
[illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						NODI=B		0	Annual	Grab
	PERMIT REQUIREMENT						DAILY MAX	MG/L			
[illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						NODI=B		0	Annual	Grab
	PERMIT REQUIREMENT						DAILY MAX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
[illegible]
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 662 NUMBER 226-4434
DATE: YEAR 07 MO 01 DAY 30

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) NODI=B REPRESENTS INSTANCES WHEN SAMPLE RESULTS WERE BELOW DETECTED LIMITS OR NOT DETECTABLE.
(REPORT START DATE AND DURATION ONLY WHEN SAMPLING WAS NOT CONDUCTED DURING THE REPORTING PERIOD)
STORM DATE: 07/29/2010; DURATION: 31 HRS 55 MIN; ESTIMATED RAINFALL: 4.65 INCHES; DISCHARGE: 0.514 MGD

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.
This is a 4-part form.
PAGE OF

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/14/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 15:18
Sampled by: K. Coker

Project ID/Location: Stormwater Annual Requirements

Project Number:

Sample Description: Outfall 003 (Grab)
Sample Matrix: WATER

Sample Number: CC07974
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.24		units	150.1	SMB	10/17/06	15:10
Oil & Grease	ND	2.0	mg/L	1664A	SMB	10/27/06	08:00
Total Suspended Solids	271	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30
2-Chlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	JWH	10/22/06	02:30
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	JWH	10/22/06	02:30
2-Nitrophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30
4-Nitrophenol	ND	0.005	mg/L	8270C	JWH	10/22/06	02:30
Pentachlorophenol	0.057	0.001	mg/L	8270C	JWH	10/22/06	02:30
Phenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30

Note: per the client's request, the results for this sample, which were previously reported on 10/27/06, have been reprinted on 12/14/06 on two separate reports. One report lists the results for pH, O&G, TSS and Phenols, and the other report lists the PAH results.

RECEIVED JUL 2007

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 10/25/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 06:16
Sampled by: TJ

Project Number:

Project ID/Location: Stormwater
Annual Requirements

Sample Description: Outfall 003 (Composite)
Sample Matrix: WATER

Sample Number: CC07975
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	227	1.0	mg/L	160.2	SMB	10/19/06	14:00
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05
2-Chlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	JWH	10/22/06	03:05
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	JWH	10/22/06	03:05
2-Nitrophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05
4-Nitrophenol	ND	0.005	mg/L	8270C	JWH	10/22/06	03:05
Pentachlorophenol	0.053	0.001	mg/L	8270C	JWH	10/22/06	03:05
Phenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/14/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 08:25
Sampled by: TJ

Project ID/Location: Stormwater Annual Requirements

Project Number:

Sample Description: Outfall 005 (Grab)
Sample Matrix: WATER

Sample Number: CC07968
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.40		units	150.1	SMB	10/17/06	15:10
Oil & Grease	ND	2.2	mg/L	1664A	SMB	10/27/06	08:00
Total Suspended Solids	498	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenols							
4-Chloro-3-methylphenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34
2-Chlorophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34
2,4-Dichlorophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34
2,4-Dimethylphenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34
4,6-Dinitro-2-methylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	22:34
2,4-Dinitrophenol	ND	0.010	mg/L	8270C	JWH	10/21/06	22:34
2-Nitrophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34
4-Nitrophenol	ND	0.010	mg/L	8270C	JWH	10/21/06	22:34
Pentachlorophenol	0.264	0.002	mg/L	8270C	JWH	10/21/06	22:34
Phenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34
2,4,6-Trichlorophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34

Note: per the client's request, the results for this sample, which were previously reported on 10/27/06, have been reprinted on 12/14/06 on two separate reports. One report lists the results for pH, O&G, TSS and Phenols, and the other report lists the PAH results.

Robert Thompson
Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 10/25/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 11:35
Sampled by: K. Coker

Project Number:

Project ID/Location: Stormwater
Annual Requirements

Sample Description: Outfall 005 (Composite)
Sample Matrix: WATER

Sample Number: CC07969
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	323	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09
2-Chlorophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09
2,4-Dichlorophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09
2,4-Dimethylphenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09
4,6-Dinitro-2-methylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:09
2,4-Dinitrophenol	ND	0.010	mg/L	8270C	JWH	10/21/06	23:09
2-Nitrophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09
4-Nitrophenol	ND	0.010	mg/L	8270C	JWH	10/21/06	23:09
Pentachlorophenol	0.364	0.002	mg/L	8270C	JWH	10/21/06	23:09
Phenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09
2,4,6-Trichlorophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/14/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 10:18
Sampled by: K. Coker

Project ID/Location: Stormwater Annual Requirements

Project Number:

Sample Description: Outfall 006 (Grab)
Sample Matrix: WATER

Sample Number: CC07972
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.58		units	150.1	SMB	10/17/06	15:10
Oil & Grease	ND	6.7	mg/L	1664A	SMB	10/27/06	08:00
Total Suspended Solids	152	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenols							
4-Chloro-3-methylphenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18
2-Chlorophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18
2,4-Dichlorophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18
2,4-Dimethylphenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18
4,6-Dinitro-2-methylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	01:18
2,4-Dinitrophenol	ND	0.010	mg/L	8270C	JWH	10/22/06	01:18
2-Nitrophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18
4-Nitrophenol	ND	0.010	mg/L	8270C	JWH	10/22/06	01:18
Pentachlorophenol	0.157	0.002	mg/L	8270C	JWH	10/22/06	01:18
Phenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18
2,4,6-Trichlorophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18

Note: per the client's request, the results for this sample, which were previously reported on 10/27/06, have been reprinted on 12/14/06 on two separate reports. One report lists the results for pH, O&G, TSS and Phenols, and the other report lists the PAH results.

Robert Thompson
Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 10/25/06
Date Received: 10/17/06
Date/Time Sampled: 10/17/06 01:25
Sampled by: K. Coker

Project Number:

Project ID/Location: Stormwater Annual Requirements
Sample Description: Outfall 006 (Composite)
Sample Matrix: WATER

Sample Number: CC07973
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	144	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54
2-Chlorophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54
2,4-Dichlorophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54
2,4-Dimethylphenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54
4,6-Dinitro-2-methylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	01:54
2,4-Dinitrophenol	ND	0.010	mg/L	8270C	JWH	10/22/06	01:54
2-Nitrophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54
4-Nitrophenol	ND	0.010	mg/L	8270C	JWH	10/22/06	01:54
Pentachlorophenol	0.172	0.002	mg/L	8270C	JWH	10/22/06	01:54
Phenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54
2,4,6-Trichlorophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54

RECEIVED JUL 2007

Robert Thompson
Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/14/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 17:04
Sampled by: TJ

Project ID/Location: Stormwater Annual Requirements

Project Number:

Sample Description: Outfall 008

Sample Matrix: WATER

Sample Number: CC07970

Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.18		units	150.1	SMB	10/17/06	15:10
Oil & Grease	ND	2.0	mg/L	1664A	SMB	10/27/06	08:00
Total Suspended Solids	332	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45
2-Chlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	JWH	10/21/06	23:45
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	JWH	10/21/06	23:45
2-Nitrophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45
4-Nitrophenol	ND	0.005	mg/L	8270C	JWH	10/21/06	23:45
Pentachlorophenol	0.003	0.001	mg/L	8270C	JWH	10/21/06	23:45
Phenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45

Note: per the client's request, the results for this sample, which were previously reported on 10/27/06, have been reprinted on 12/14/06 on two separate reports. One report lists the results for pH, O&G, TSS and Phenols, and the other report lists the PAH results.

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 10/25/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 08:15
Sampled by: K. Coker

Project Number:

Project ID/Location: Stormwater
Annual Requirements

Sample Description: Outfall 008
Sample Matrix: WATER

Sample Number: CC07971
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	89	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20
2-Chlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	JWH	10/22/06	00:20
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	JWH	10/22/06	00:20
2-Nitrophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20
4-Nitrophenol	ND	0.005	mg/L	8270C	JWH	10/22/06	00:20
Pentachlorophenol	0.003	0.001	mg/L	8270C	JWH	10/22/06	00:20
Phenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20

Robert Thompson
Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/14/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 14:51
Sampled by: K. Coker

Project ID/Location: Stormwater Annual Requirements

Project Number:

Sample Description: Outfall 009 (Grab)
Sample Matrix: WATER

Sample Number: CC07966
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.11		units	150.1	SMB	10/17/06	15:10
Oil & Grease	ND	2.1	mg/L	1664A	SMB	10/27/06	08:00
Total Suspended Solids	402	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11
2-Chlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	JWH	10/21/06	20:11
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	JWH	10/21/06	20:11
2-Nitrophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11
4-Nitrophenol	ND	0.005	mg/L	8270C	JWH	10/21/06	20:11
Pentachlorophenol	ND	0.001	mg/L	8270C	JWH	10/21/06	20:11
Phenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11

Note: per the client's request, the results for this sample, which were previously reported on 10/27/06, have been reprinted on 12/14/06 on two separate reports. One report lists the results for pH, O&G, TSS and Phenols, and the other report lists the PAH results.

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 10/25/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 17:52
Sampled by: TJ

Project Number:

Project ID/Location: Stormwater
Annual Requirements

Sample Description: Outfall 009 (Composite)
Sample Matrix: WATER

Sample Number: CC07967
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	260	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58
2-Chlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	JWH	10/21/06	21:58
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	JWH	10/21/06	21:58
2-Nitrophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58
4-Nitrophenol	ND	0.005	mg/L	8270C	JWH	10/21/06	21:58
Pentachlorophenol	ND	0.001	mg/L	8270C	JWH	10/21/06	21:58
Phenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

Supplementary Report Information

Argus Analytical, Inc.

General

The Chain-of-Custody and the Cooler Receipt Check List are considered part of the final report; also, if included, the Notification of Deviation and the Narrative are part of the final report.

The reported test results relate only to the items tested or to the samples as received by the laboratory. Reports shall not be reproduced except in full without the written approval of the laboratory.

Any referenced accreditation or certification is not an endorsement by any accrediting authority.

Common Reporting Symbols

ND - Not Detected. This indicates that the measured result is below Argus' "Det Limit". The term "Det Limit" is equivalent to the Limit of Quantitation (LOQ), which represents the lowest value that can be reliably reported.

J Qualifier. This indicates that the result is estimated. It is used to report a value that is below the LOQ but above the Limit of Detection (LOD). The LOD is the lowest value that can be reported for any measurement.

mg - milligrams (0.001 g)	> - greater than	kg - kilograms
ug - micrograms (0.000 001 g)	< - less than	L - Liters
ng - nanograms (0.000 000 001 g)	TNTC - Too numerous to count	

For other definitions and technical information, such as TCLP Regulatory Limits, please visit Argus' Web Site at ArgusAnalytical.com.

Reporting Basis. Unless otherwise noted, all results are reported on the as received basis. Results reported under the heading "Dry Weight Basis" have been adjusted for moisture content

Subcontracted Parameters. A three digit numerical entry for the analysts initials indicates the parameter was subcontracted. Where possible, Argus uses NELAP certified laboratories.

NELAP. Unless otherwise noted in an attached narrative, the test results meet all NELAP requirements for the methods listed in Argus' Scope of Accreditation. The parameters or methods listed below are typically <u>not</u> included in Argus' NELAP Scope of Accreditation. These are <u>not</u> included in Argus' scope because NELAP certification is either not available or Argus may not have applied for certification. For example, although drinking water methods are covered by Argus' Drinking Water Certification, NELAP does not offer accreditation for the Drinking Water matrix. The non-NELAP certified items include:

ASTM methods	NIOSH methods
Drinking Water methods	Method citations with an "M" suffix
Parameters with a ' * ' suffix	

Modified methods, indicated by an "M" suffix, are described in an attached narrative. Although Argus is typically not NELAP certified for the modified method, Argus is usually certified for the unmodified reference method.

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Argus Cooler # 288

Sampler (print/signature): Kevin Pelon / [illegible]

Report to: Kellogs, Inc.
Address: One Kellogs Drive
Tupelo, MS 38960

Invoice to: Kellogs Inc.
Address: PO Box 100
Tupelo, MS 38960

Project Name/Number:

Project Manager:

MGPTF# (If applicable)

Comments/priority:

Item #	Field Number	Sample Description	Collection Date (2006)	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	003-1	Storm Water 003	10/16	3:16p	KC	G		N	PAH	CC07974
2	003-2	Storm Water 003	10/16	3:16p	KC	G		Y	Oil & Grease	↓
3	003-3	Storm Water 003	10/16	3:17p	KC	G		N	Total Phenols & Pentachlorophenol	↓
4	003-4	Storm Water 003	10/16	3:18p	KC	G		N	pH & TSS pH-7.[illegible] @ 3:30p	↓
5	003-5	Storm Water 003	10/16	6:16	TJ	C		N	Total Phenols & Pentachlorophenol	CC07975
6	003-6	Storm Water 003	10/16	6:16	TJ	C		N	TSS	↓

Relinquished by:	Date/time:	Accepted by:	Date/time
Kevin Pelon	10/17/06 9:56a	Pat Maxwell	9:55 10/17/06
Relinquished by:	Date/time:	Accepted by:	Date/time

Relinquished by:	Date/time:	Accepted by:	Date/time
Pat Maxwell	10/17/06 12:55	b Moss	10-17-06 13:15
Relinquished by:	Date/time:	Accepted by:	Date/time

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Argus Cooler # 125

Sampler (print/signature): Kevin Cover / [signature]

Report to: Koppers Inc.
Address: One Koppers Drive
Tie Plant, MS 38960

Invoice to: Koppers Inc.
Address: P.O. Box 160
Tie Plant, MS 38960

Project Name/Number:

Project Manager:

MGPTF# (if applicable)

Comments/priority:

Item #	Field Number	Sample Description	Collection Date	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	005-1	Storm Water 005	10/16	8:23	KC/TJ	G		N	PAH	CC07968
2	005-2	Storm Water 005	10/16	8:24	KC/TJ	G		N	PH & TSS Note: PH - 8.01 SU @ 7 8:55	
3	005-3	Storm Water 005	10/16	8:24	KC/TJ	G		N	Total Phenols & PCP	
4	005-4	Storm Water 005	10/16	8:24	KC/TJ	G		N	PAH	
5	005-5	Storm Water 005	10/16	8:25	KC/TJ	G		Y	Oil & Grease	
6	005-6	Storm Water 005	10/16	11:35	KC	C		N	Total Phenols & PCP	CC07969
7	005-7	Storm Water 005	10/16	11:35	KC	C		N	TSS	

Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time
Kevin Cover [signature]	10/17/06 9:55 am	Pat Maxwell	9:55 10/17/06	Pat Maxwell	12:55 10/17/06	[signature]	10-17-06 13:15
Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Argus Cooler # 291

Sampler (print/signature): Kevin Cover / [signature]

Report to: Koppers Inc.
Address: One Koppers Drive
Tie Plant, MS 38960

Invoice to: Koppers Inc.
Address: P.O. Box 160
Tie Plant, MS 38961

Project Name/Number:

Project Manager:

MGPTF# (if applicable)

Comments/priority:

Item #	Field Number	Sample Description	Collection Date	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	006-1	Storm Water 006	10/16	10:14p	KC	G		N	PAH	CC 07972
2	006-2	Storm Water 006	10/16	10:15p	KC	G		Y	Oil & Grease	
3	006-3	Storm Water 006	10/16	10:16p	KC	G		N	PAH	
4	006-4	Storm Water 006	10/16	10:16p	KC	G		N	Total Phenols & PCP	
5	006-5	Storm Water 006	10/16	10:18p	KC	G		N	TSS & pH note: pH - @ 4 - 10:25p	
6	006-6	Storm Water 006	10/17	1:25a	KC	C		N	Total Phenols & PCP	CC07973
7	006-7	Storm Water 006	10/17	1:25a	KC	C		N	~~TSS & pH~~ @ TSS	

Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time
Kevin Cover [signature]	9:57pm 10/17/06	Pat Maxwell	9:55 10/17/06	Pat Maxwell	12:55 10/17/06	[signature]	10-17-06 13:15
Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time

295

Argus Cooler [redacted]

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Sampler (print/signature): Kevin Cooper

Project Name/Number:

Project Manager:

MGPTF# (if applicable)

Report to: Koppers Inc
Address: One Koppers Drive, Tie Plant, MS 38660

Invoice to: Koppers Inc
Address: P.O. Box 160, Tie Plant, MS 38660

Comments/priority:

Item #	Field Number	Sample Description	Collection Date	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	008-1	Storm Water 008	10/16	5:00 pm	TJ	G			Total Phenols & Pentachlorophenol	CC07970
2	008-2	Storm Water 008	10/16	5:01 pm	TJ	G		Y	Oil & Grease	
3	008-3A	Storm Water 008	10/16	5:02	TJ	G			PAH	
4	008-3B	Storm Water 008	10/16	5:04	TJ	G			PAH	
5	008-4	Storm Water 008	10/16	5:04	TJ	G			pH & Total Suspended Solids Note: pH - 7.22 @ 5:09 pm	
6	008-5	Storm Water 008	10/16	8:15	KC	C			Total Phenols & Pentachlorophenol	CC07971
7	008-6	Storm Water 008	10/16	8:15	KC	C			TSS	

Relinquished by:	Date/time:	Accepted by:	Date/time
Kevin Cooper	10/17/06 9:55A	Pat Maxwell	9:55 10/17/06
Relinquished by:	Date/time:	Accepted by:	Date/time

Relinquished by:	Date/time:	Accepted by:	Date/time
Pat Maxwell	10/17/06 12:55	Jo Moss	10-17-06 13:15
Relinquished by:	Date/time:	Accepted by:	Date/time

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Argus Cooler # 296

Sampler (print/signature): Kevin Cohen / [signature]

Report to: Koppers Inc.
Address: One Koppers Drive
Tie Plant, MS 38960

Invoice to: Koppers Inc.
Address: P.O. Box 160
Tie Plant, MS 38960

Project Name/Number:

Project Manager:

MGPTF# (if applicable)

Comments/priority:

Item #	Field Number	Sample Description	Collection 2006 Date	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	009-1A	PAH Storm Water 009	10/16	2:45p	KC	G			PAH	CC07966
2	009-1B	PAH Storm Water 009	10/16	2:46p	KC	G			PAH	
3	009-1C	PAH Storm Water 009	10/16	2:46p	KC	G			PAH	
4	009-2	Oil & Grease Storm Water 009	10/16	2:46p	KC	G		Y	Oil & Grease	
5	009-3	Total Phenols & Pentachlorophenol Storm Water 009	10/16	2:48p	KC	G			Total Phenols & Pentachlorophenols	
6	009-4	pH & TSS Storm Water 009	10/16	2:51p	KC	G			pH & TSS NOTE: pH-7.28 SU @ 3:05pm	
7	009-5	Total Phenols & Pentachlorophenol Storm Water 009	10/16	5:52	KC/TJ	C			Total Phenols & Pentachlorophenol	CC07967
8	009-6	TSS Storm Water 009	10/16	5:52	KC/TJ	C			TSS	

Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time
[signature] Kevin Cohen	10/17/06 9:56 am	Pat Maxwell	9:55 10/17/06	Pat Maxwell	12:55 10/17/06	J Mood	10-17-06 13:15
Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time

Issued: 03/03/06 Effective: 03/03/06 Last Reviewed and Approved: BGG 03/03/06

F022 COC Argus B11.xls

Cooler Receipt Check List

Argus Analytical, Inc.

Sample Number(s): CC07966-75

Date Opened: 10/17/06

Opened by: JM

Client: Koppers

	If checked, refer to the "Sample Receipt - Notification of Deviation" (Form F008, attached).
	Per previous discussion with the client, thermal preservation not required, and Deviation Notification **not** required.

Login Checked by: JM

Temperature when opened: (4°(ice)) Ambient Measured (1): _____

Type of wrapping material: None Peanuts (Bubblewrap) Paper Other

(1) Not required if hand delivered the day sampled and if at least 50% ice is present.

Cooler **custody seals** intact? (n/a) Y/N Signed & dated? Y/N

Container custody seals intact? (n/a) Y/N

COC papers received? (Y)/N Receipt properly noted on COC? (Y)/N

COC papers properly filled in (signed in ink)? (Y)/N Container labels correspond to the COC? (Y)/N

All **containers** intact (not broken)? (Y)/N

Correct containers/preservatives used? (Y)/N

Container labels filled in? (Y)/N

Samples received within **holding times**? (Y)/N

Short HT tests: BOD Br Color Cr6 DissMet DO Fecal

MBAS Nitrate or Nitrite OrP (pH) SS Sulfite

TCB/TPC TRC Turb

Lab Notified: @ 13:40

Were Trip Blanks rec'd with VOAs? Y/N

VOA vials - headspace detected? (n/a) Y/N

If headspace detected, < 0.25" dia? Y/N

VOA soils - 5035 compliance criteria met? (n/a) Y/N (if met, circle the applicable method, below)

High concentration jar (48 hr)

High concentration pre-weighed vial (methanol - 14 d)

Low conc EnCor samplers (48 hr)

Low conc pre-weighed vials (sodium bisulfate - 14 d)

Lab Notified (date, time, initials): _____

For further information concerning this project, refer to the following attachments which are considered part of the final report. These attachments provide additional information on topics such as method modifications or NELAP accreditation.

Cooler Receipt Check List (always attached)

Sample Receipt - Notification of Deviation (optional)

Supplementary Report Information (always attached)

Case Narrative (optional)

Comments: _____

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/14/06
Date Received: 10/31/06
Date/Time Sampled: 10/27/06 11:37
Sampled by: TJ/KC

Project ID/Location: Stormwater Annual Requirements

Project Number:

Sample Description: Outfall 007 (Grab)
Sample Matrix: WATER

Sample Number: CC08590
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	7.75		units	150.1	JWH	11/01/06	09:50
Oil & Grease	ND	2.1	mg/L	1664A	CRM	11/08/06	15:35
Total Suspended Solids	184	1.0	mg/L	160.2	RAH	11/01/06	12:00
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50
2-Chlorophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50
4,6-Dinitro-2-methylphenol	0.003	0.001	mg/L	8270C	RLT	11/02/06	15:50
2,4-Dinitrophenol	ND	0.006	mg/L	8270C	RLT	11/02/06	15:50
2-Nitrophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50
4-Nitrophenol	ND	0.006	mg/L	8270C	RLT	11/02/06	15:50
Pentachlorophenol	0.056	0.001	mg/L	8270C	RLT	11/02/06	15:50
Phenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50

Note: per the client's request, the results for this sample, which were previously reported on 11/09/06, have been reprinted on 12/14/06 on two separate reports. One report lists the results for pH, O&G, TSS and Phenols, and the other report lists the PAH results.

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Haley Biddy

Date Reported: 11/03/06
Date Received: 10/31/06
Date/Time Sampled: 10/27/06 14:45
Sampled by: TJ/KC

Project Number:

Project ID/Location: Stormwater Annual Requirements

Sample Description: Outfall 007 (Composite)

Sample Matrix: WATER

Sample Number: CC08591

Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	184	1.0	mg/L	160.2	RAH	11/01/06	12:00
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	RLT	11/02/06	16:25
2-Chlorophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	16:25
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	16:25
2,4-Dimethylphenol	0.002	0.002	mg/L	8270C	RLT	11/02/06	16:25
4,6-Dinitro-2-methylphenol	0.005	0.001	mg/L	8270C	RLT	11/02/06	16:25
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	RLT	11/02/06	16:25
2-Nitrophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	16:25
4-Nitrophenol	ND	0.005	mg/L	8270C	RLT	11/02/06	16:25
Pentachlorophenol	0.136	0.001	mg/L	8270C	RLT	11/02/06	16:25
Phenol	ND	0.002	mg/L	8270C	RLT	11/02/06	16:25
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	16:25

Robert Thompson
Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

General

The Chain-of-Custody and the Cooler Receipt Check List are considered part of the final report; also, if included, the Notification of Deviation and the Narrative are part of the final report.

The reported test results relate only to the items tested or to the samples as received by the laboratory. Reports shall not be reproduced except in full without the written approval of the laboratory.

Any referenced accreditation or certification is not an endorsement by any accrediting authority.

Common Reporting Symbols

ND - Not Detected. This indicates that the measured result is below Argus' "Det Limit". The term "Det Limit" is equivalent to the Limit of Quantitation (LOQ), which represents the lowest value that can be reliably reported.

J Qualifier. This indicates that the result is estimated. It is used to report a value that is below the LOQ but above the Limit of Detection (LOD). The LOD is the lowest value that can be reported for any measurement.

mg - milligrams (0.001 g)	> - greater than	kg - kilograms
ug - micrograms (0.000 001 g)	< - less than	L - Liters
ng - nanograms (0.000 000 001 g)	TNTC - Too numerous to count	

For other definitions and technical information, such as TCLP Regulatory Limits, please visit Argus' Web Site at ArgusAnalytical.com.

Reporting Basis. Unless otherwise noted, all results are reported on the as received basis. Results reported under the heading "Dry Weight Basis" have been adjusted for moisture content

Subcontracted Parameters. A three digit numerical entry for the analysts initials indicates the parameter was subcontracted. Where possible, Argus uses NELAP certified laboratories.

NELAP. Unless otherwise noted in an attached narrative, the test results meet all NELAP requirements for the methods listed in Argus' Scope of Accreditation. The parameters or methods listed below are typically <u>not</u> included in Argus' NELAP Scope of Accreditation. These are <u>not</u> included in Argus' scope because NELAP certification is either not available or Argus may not have applied for certification. For example, although drinking water methods are covered by Argus' Drinking Water Certification, NELAP does not offer accreditation for the Drinking Water matrix. The non-NELAP certified items include:

ASTM methods	NIOSH methods
Drinking Water methods	Method citations with an "M" suffix
Parameters with a ' * ' suffix	

Modified methods, indicated by an "M" suffix, are described in an attached narrative. Although Argus is typically not NELAP certified for the modified method, Argus is usually certified for the unmodified reference method.

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Argus Cooler 174

Sampler (print/signature): Kevin B. Poke / K. B. [illegible]

Report to: Koppers Inc.
Address: One Koppers Drive; P.O. Box 160
Tie Plant, MS 38960

Invoice to: Same
Address: ?

Project Name/Number:

Project Manager:

MGPTF# (if applicable)

Comments/priority:

Item #	Field Number	Sample Description	Collection Date	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	007-1	Storm Water 007	10/27/06	11:24A	T.J. KC	G			Total Phenols & Pentachlorophenol	CC08590
2	007-2	Storm Water 007	10/27/06	11:26A	T.J. KC	G			PAH	A
3	007-3	Storm Water 007	10/27/06	11:28A	T.J. KC	G		Y	Oil & Grease	
4	007-4	Storm Water 007	10/27/06	11:32A	T.J. KC	G			PAH	B
5	007-5	Storm Water 007	10/27/06	11:37A	T.J. KC	G			TSS & pH	
6	007-6	Storm Water 007	10/27/06	2:45P	T.J. KC	C			TSS	CC08591
7	007-7	Storm Water 007	10/27/06	2:44P	T.J. KC	C			Total Phenols & Pentachlorophenol	

Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time
[signature]	10/31/06	Pat Maxwell	10:40 10/31/06	Pat Maxwell	10:40 10/31/06	[signature]	10-31-06 12:40
Relinquished by:	Date/time:	Accepted by:	Date/time	Relinquished by:	Date/time:	Accepted by:	Date/time

Cooler Receipt Check List

Argus Analytical, Inc.

Sample Number(s): CC08590-91 R+B

Date Opened: 10-31-06

Opened by: P.M.

Client: Koppers, Inc.

	If checked, refer to the "Sample Receipt - Notification of Deviation" (Form F008, attached).
	Per previous discussion with the client, thermal preservation not required, and Deviation Notification **not** required.

Login Checked by: JM

Temperature when opened: 4°(ice) Ambient Measured (1) _____

Wrapping material type: None Peanuts Bubblewrap Paper Other

(1) always required; acceptable if hand delivered the day sampled and if there is evidence the chilling process has begun.

Cooler **custody seals** intact? n/a Y/N Signed & dated? Y/N

Container custody seals intact? n/a Y/N

COC papers received? Y/N Receipt properly noted on COC? Y/N

COC papers properly filled in (signed in ink)? Y/N Container labels correspond to the COC? Y/N

All **containers** intact (not broken)? Y/N

Correct containers/preservatives used? Y/N

Container labels filled in? Y/N

Samples received within **holding times**? Y/N

Short HT tests: BOD Br Color Cr6 DissMet DO Fecal

MBAS Nitrate or Nitrite OrP pH SS Sulfite

TCB/TPC TRC Turb

Lab Notified: @13:00

Were Trip Blanks rec'd with VOAs? Y/N

VOA vials - headspace detected? n/a Y/N

If headspace detected, < 0.25" dia? Y/N

VOA soils - 5035 compliance criteria met? n/a Y/N (if met, circle the applicable method, below)

High concentration jar (48 hr)

High concentration pre-weighed vial (methanol - 14 d)

Low conc EnCore samplers (48 hr)

Low conc pre-weighed vials (sodium bisulfate - 14 d)

Lab Notified (date, time, initials): _____

For further information concerning this project, refer to the following attachments which are considered part of the final report. These attachments provide additional information on topics such as method modifications or NELAP accreditation.

Cooler Receipt Check List (always attached)

Sample Receipt - Notification of Deviation (optional)

Supplementary Report Information (always attached)

Case Narrative (optional)

Comments: _____

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

Brenda

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						NODI=9			NODI=9	
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						NODI=9			NODI=9	
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						NODI=9			NODI=9	
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

JUL 2007

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Vance Haskin Plant Manager TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	662 AREA CODE	226-4584 NUMBER	07 YEAR	01 MO	25 DAY

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT PSD PERMIT NO. MSR22005 PART IV.C.4

This is a 4-part form. PAGE OF

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT *(DMR)*

OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
	002 D

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						NODI=9		NODI=9		
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						NODI=9		NODI=9		
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						NODI=9		NODI=9		
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Vance Haskin Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Vance R. Haskin	662 226-8584		07	01	25
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Exempt Per Permit No. MS0022005 Part IV. C. 4

This is a 4-part form.

PAGE OF

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						227		0	ANNUAL	Comp.
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						0.053		0	ANNUAL	Comp.
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						NODI=B		0	ANNUAL	Comp.
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Vance Haskin Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	662 226-1584		07	01	25
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
NODI=B REPRESENTS INSTANCES WHERE PARAMETER CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE.
STORM DATE: OCTOBER 16, 2006; DURATION: 31 HRS & 35 MIN; ESTIMATED RAINFALL: 4.65 INCHES; DISCHARGE 0.1344 MG

This is a 4-part form.

PAGE OF

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS *(Includes Facility Name/Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

MINOR
(SUBR NO)
T — FINAL
STORMWATER COMPOSITE SAMPLING
*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NODI=9	(19)		NODI=9	
PERMIT DOES NOT EXIST EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
[illegible]	SAMPLE MEASUREMENT	******	******		******	******	NODI=9	(19)		NODI=9	
PERMIT DOES NOT EXIST EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
[illegible]	SAMPLE MEASUREMENT	******	******		******	******	NODI=9	(19)		NODI=9	
PERMIT DOES NOT EXIST EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JUL 2007

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
VANCE HASKIN PLANT MANAGER TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Vance R. Haskin SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662 AREA CODE	226-4584 NUMBER	07 YEAR	01 MO	25 DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT PER PERMIT NO. NSR 22005 PART IV.C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME [illegible]
ADDRESS P O BOX 160 [illegible]
[illegible] PLANT MS 38760
FACILITY [illegible]
LOCATION [illegible] PLANT MS 38760
[illegible]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
[illegible]	005 B

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	[illegible]	[illegible]	[illegible]	TO	[illegible]	[illegible]	[illegible]

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
[illegible] SUSPENDED [illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	323	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
[illegible] SUSPENDED [illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.364	(19)	0	Annual	Comp
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
[illegible] [illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	N001-B	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Vance Haskin
Plant Manager
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Vance R. Haskin
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	07	01	25

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
N001-B REPRESENTS INSTANCES WERE PARAMETER CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE
STORM DATE: OCTOBER 16, 2006; DURATION: 31 HRS & 35 MIN; ESTIMATED RAINFALL: 4.65 INCHES; DISCHARGE: 1.258 MG

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used

This is a 4-part form.

PAGE OF

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	SAMPLE MEASUREMENT						144		0	Annual	Comp.
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	mg/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT						0.172		0	Annual	Comp.
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	mg/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT						NODI=B		0	Annual	Comp.
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	mg/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Vance Hassid, Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	662	226-4584	07	01	25
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NODI=B REPRESENTS INSTANCES WHERE PARAMETER CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE
STORM DATE: OCTOBER 16, 2006; DURATION: 31 HRS & 35 MIN; ESTIMATED RAINFALL: 4.65 INCHES; DURATION DISCHARGE: 0.45

NAME [illegible]

ADDRESS [illegible] BOX 160

[illegible] PLANT [illegible]

FACILITY [illegible] INDUSTRIES INC

LOCATION [illegible] PLANT [illegible]

ATTN: [illegible]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
[illegible]	007 B

MINOR
ISSUE NO
7 - FINAL
STORMWATER COMPOSITE SAMPLING

*** NO DISCHARGE [illegible] ***

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	[illegible]	01	[illegible]	TO	[illegible]	12	31

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
[illegible] SUSPENDED [illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	184	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	(MG/L)		ANNUAL	COMPOS
[illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.136	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	(MG/L)		ANNUAL	COMPOS
[illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.007	(19)	0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	(MG/L)		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE		
Vance Haskin Plant Manager TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(662) 226-4584 AREA CODE NUMBER	07 YEAR	01 MO	25 DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

STORM DATE: OCTOBER 21, 2006 ; DURATION: 42 HRS & 30 MIN ; ESTIMATED RAINFALL: 0.90 INCHES DISCHARGE: 0.000132 MG

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form. PAGE OF

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						89		0	Annual	Comp.
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						0.003		0	Annual	Comp.
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						NODI=B		0	Annual	Comp.
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Vance Haskin Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	662	226-4584	07	01	25
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
NODI=B REPRESENTS INSTANCES WHERE PARAMETER CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE.
STORM DATE: OCTOBER 16, 2006 ; DURATION: 31 HRS & 35 MIN ; ESTIMATED RAINFALL: 4.65 INCHES ; DISCHARGE: 0.115 MG

NAME

ADDRESS

FACILITY

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						260		0	ANNUAL	Comp.
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						N001 = B		0	ANNUAL	Comp.
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						N001 = B		0	ANNUAL	Comp.
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	662	226-4584	07	01	25
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

N001=B REPRESENTS INSTANCES WHERE CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE.
STORM DATE: OCTOBER 16, 2006; DURATION: 3 HRS & 35 MIN; ESTIMATED RAINFALL: 4.65 INCHES; DISCHARGE: 0.514

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/14/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 15:18
Sampled by: K. Coker

Project Number:

Project ID/Location: Stormwater Annual Requirements
Sample Description: Outfall 003 (Grab)
Sample Matrix: WATER

Sample Number: CC07974
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.24		units	150.1	SMB	10/17/06	15:10
Oil & Grease	ND	2.0	mg/L	1664A	SMB	10/27/06	08:00
Total Suspended Solids	271	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30
2-Chlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	JWH	10/22/06	02:30
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	JWH	10/22/06	02:30
2-Nitrophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30
4-Nitrophenol	ND	0.005	mg/L	8270C	JWH	10/22/06	02:30
Pentachlorophenol	0.057	0.001	mg/L	8270C	JWH	10/22/06	02:30
Phenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30

Note: per the client's request, the results for this sample, which were previously reported on 10/27/06, have been reprinted on 12/14/06 on two separate reports. One report lists the results for pH, O&G, TSS and Phenols, and the other report lists the PAH results.

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 10/25/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 06:16
Sampled by: TJ

Project Number:

Project ID/Location: Stormwater Annual Requirements

Sample Description: Outfall 003 (Composite)

Sample Matrix: WATER

Sample Number: CC07975

Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	227	1.0	mg/L	160.2	SMB	10/19/06	14:00
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05
2-Chlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	JWH	10/22/06	03:05
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	JWH	10/22/06	03:05
2-Nitrophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05
4-Nitrophenol	ND	0.005	mg/L	8270C	JWH	10/22/06	03:05
Pentachlorophenol	0.053	0.001	mg/L	8270C	JWH	10/22/06	03:05
Phenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/14/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 08:25
Sampled by: TJ

Project ID/Location: Stormwater Annual Requirements
Project Number:
Sample Description: Outfall 005 (Grab)
Sample Matrix: WATER
Sample Number: CC07968
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.40		units	150.1	SMB	10/17/06	15:10
Oil & Grease	ND	2.2	mg/L	1664A	SMB	10/27/06	08:00
Total Suspended Solids	498	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenols							
4-Chloro-3-methylphenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34
2-Chlorophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34
2,4-Dichlorophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34
2,4-Dimethylphenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34
4,6-Dinitro-2-methylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	22:34
2,4-Dinitrophenol	ND	0.010	mg/L	8270C	JWH	10/21/06	22:34
2-Nitrophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34
4-Nitrophenol	ND	0.010	mg/L	8270C	JWH	10/21/06	22:34
Pentachlorophenol	0.264	0.002	mg/L	8270C	JWH	10/21/06	22:34
Phenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34
2,4,6-Trichlorophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34

RECEIVED JUL 2007

Note: per the client's request, the results for this sample, which were previously reported on 10/27/06, have been reprinted on 12/14/06 on two separate reports. One report lists the results for pH, O&G, TSS and Phenols, and the other report lists the PAH results.

Robert Thompson
Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 10/25/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 11:35
Sampled by: K. Coker

Project Number:

Project ID/Location: Stormwater Annual Requirements

Sample Description: Outfall 005 (Composite)
Sample Matrix: WATER

Sample Number: CC07969
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	323	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09
2-Chlorophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09
2,4-Dichlorophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09
2,4-Dimethylphenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09
4,6-Dinitro-2-methylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:09
2,4-Dinitrophenol	ND	0.010	mg/L	8270C	JWH	10/21/06	23:09
2-Nitrophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09
4-Nitrophenol	ND	0.010	mg/L	8270C	JWH	10/21/06	23:09
Pentachlorophenol	0.364	0.002	mg/L	8270C	JWH	10/21/06	23:09
Phenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09
2,4,6-Trichlorophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09

RECEIVED JUL 2007

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/14/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 10:18
Sampled by: K. Coker

Project Number:

Project ID/Location: Stormwater Annual Requirements

Sample Description: Outfall 006 (Grab)
Sample Matrix: WATER

Sample Number: CC07972
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.58		units	150.1	SMB	10/17/06	15:10
Oil & Grease	ND	6.7	mg/L	1664A	SMB	10/27/06	08:00
Total Suspended Solids	152	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenols							
4-Chloro-3-methylphenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18
2-Chlorophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18
2,4-Dichlorophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18
2,4-Dimethylphenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18
4,6-Dinitro-2-methylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	01:18
2,4-Dinitrophenol	ND	0.010	mg/L	8270C	JWH	10/22/06	01:18
2-Nitrophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18
4-Nitrophenol	ND	0.010	mg/L	8270C	JWH	10/22/06	01:18
Pentachlorophenol	0.157	0.002	mg/L	8270C	JWH	10/22/06	01:18
Phenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18
2,4,6-Trichlorophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18

Note: per the client's request, the results for this sample, which were previously reported on 10/27/06, have been reprinted on 12/14/06 on two separate reports. One report lists the results for pH, O&G, TSS and Phenols, and the other report lists the PAH results.

RECEIVED JUL 2007

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.

235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 10/25/06
Date Received: 10/17/06
Date/Time Sampled: 10/17/06 01:25
Sampled by: K. Coker

Project Number:

Project ID/Location: Stormwater Annual Requirements

Sample Description: Outfall 006 (Composite)

Sample Matrix: WATER

Sample Number: CC07973

Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	144	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54
2-Chlorophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54
2,4-Dichlorophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54
2,4-Dimethylphenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54
4,6-Dinitro-2-methylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	01:54
2,4-Dinitrophenol	ND	0.010	mg/L	8270C	JWH	10/22/06	01:54
2-Nitrophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54
4-Nitrophenol	ND	0.010	mg/L	8270C	JWH	10/22/06	01:54
Pentachlorophenol	0.172	0.002	mg/L	8270C	JWH	10/22/06	01:54
Phenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54
2,4,6-Trichlorophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54

RECEIVED JUL 2007

Robert Thompson
Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/14/06
Date Received: 10/31/06
Date/Time Sampled: 10/27/06 11:37
Sampled by: TJ/KC

Project Number:

Project ID/Location: Stormwater Annual Requirements

Sample Description: Outfall 007 (Grab)

Sample Matrix: WATER

Sample Number: CC08590

Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	7.75		units	150.1	JWH	11/01/06	09:50
Oil & Grease	ND	2.1	mg/L	1664A	CRM	11/08/06	15:35
Total Suspended Solids	184	1.0	mg/L	160.2	RAH	11/01/06	12:00
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50
2-Chlorophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50
4,6-Dinitro-2-methylphenol	0.003	0.001	mg/L	8270C	RLT	11/02/06	15:50
2,4-Dinitrophenol	ND	0.006	mg/L	8270C	RLT	11/02/06	15:50
2-Nitrophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50
4-Nitrophenol	ND	0.006	mg/L	8270C	RLT	11/02/06	15:50
Pentachlorophenol	0.056	0.001	mg/L	8270C	RLT	11/02/06	15:50
Phenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50

Note: per the client's request, the results for this sample, which were previously reported on 11/09/06, have been reprinted on 12/14/06 on two separate reports. One report lists the results for pH, O&G, TSS and Phenols, and the other report lists the PAH results.

RECEIVED JUL 2007

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Haley Biddy

Date Reported: 11/03/06
Date Received: 10/31/06
Date/Time Sampled: 10/27/06 14:45
Sampled by: TJ/KC

Project ID/Location: Stormwater Annual Requirements
Project Number:

Sample Description: Outfall 007 (Composite)
Sample Matrix: WATER
Sample Number: CC08591
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	184	1.0	mg/L	160.2	RAH	11/01/06	12:00
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	RLT	11/02/06	16:25
2-Chlorophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	16:25
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	16:25
2,4-Dimethylphenol	0.002	0.002	mg/L	8270C	RLT	11/02/06	16:25
4,6-Dinitro-2-methylphenol	0.005	0.001	mg/L	8270C	RLT	11/02/06	16:25
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	RLT	11/02/06	16:25
2-Nitrophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	16:25
4-Nitrophenol	ND	0.005	mg/L	8270C	RLT	11/02/06	16:25
Pentachlorophenol	0.136	0.001	mg/L	8270C	RLT	11/02/06	16:25
Phenol	ND	0.002	mg/L	8270C	RLT	11/02/06	16:25
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	16:25

RECEIVED JUL 2007

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/14/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 17:04
Sampled by: TJ

Project ID/Location: Stormwater Annual Requirements

Project Number:

Sample Description: Outfall 008

Sample Matrix: WATER

Sample Number: CC07970

Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.18		units	150.1	SMB	10/17/06	15:10
Oil & Grease	ND	2.0	mg/L	1664A	SMB	10/27/06	08:00
Total Suspended Solids	332	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45
2-Chlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	JWH	10/21/06	23:45
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	JWH	10/21/06	23:45
2-Nitrophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45
4-Nitrophenol	ND	0.005	mg/L	8270C	JWH	10/21/06	23:45
Pentachlorophenol	0.003	0.001	mg/L	8270C	JWH	10/21/06	23:45
Phenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45

Note: per the client's request, the results for this sample, which were previously reported on 10/27/06, have been reprinted on 12/14/06 on two separate reports. One report lists the results for pH, O&G, TSS and Phenols, and the other report lists the PAH results.

JUL 2007

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 10/25/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 08:15
Sampled by: K. Coker

Project Number:

Project ID/Location: Stormwater Annual Requirements

Sample Description: Outfall 008

Sample Matrix: WATER

Sample Number: CC07971

Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	89	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20
2-Chlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	JWH	10/22/06	00:20
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	JWH	10/22/06	00:20
2-Nitrophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20
4-Nitrophenol	ND	0.005	mg/L	8270C	JWH	10/22/06	00:20
Pentachlorophenol	0.003	0.001	mg/L	8270C	JWH	10/22/06	00:20
Phenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/14/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 14:51
Sampled by: K. Coker

Project Number:

Project ID/Location: Stormwater Annual Requirements
Sample Description: Outfall 009 (Grab)
Sample Matrix: WATER

Sample Number: CC07966
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.11		units	150.1	SMB	10/17/06	15:10
Oil & Grease	ND	2.1	mg/L	1664A	SMB	10/27/06	08:00
Total Suspended Solids	402	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11
2-Chlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	JWH	10/21/06	20:11
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	JWH	10/21/06	20:11
2-Nitrophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11
4-Nitrophenol	ND	0.005	mg/L	8270C	JWH	10/21/06	20:11
Pentachlorophenol	ND	0.001	mg/L	8270C	JWH	10/21/06	20:11
Phenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11

Note: per the client's request, the results for this sample, which were previously reported on 10/27/06, have been reprinted on 12/14/06 on two separate reports. One report lists the results for pH, O&G, TSS and Phenols, and the other report lists the PAH results.

RECEIVED JUL 2007

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 10/25/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 17:52
Sampled by: TJ

Project Number:

Project ID/Location: Stormwater Annual Requirements

Sample Description: Outfall 009 (Composite)
Sample Matrix: WATER

Sample Number: CC07967
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	260	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58
2-Chlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	JWH	10/21/06	21:58
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	JWH	10/21/06	21:58
2-Nitrophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58
4-Nitrophenol	ND	0.005	mg/L	8270C	JWH	10/21/06	21:58
Pentachlorophenol	ND	0.001	mg/L	8270C	JWH	10/21/06	21:58
Phenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

Vance R. Haskin
Plant Manager

KOPPERS

Koppers Inc.
Utility Poles and Piling
P. O. Box 160
Tie Plant, MS 38960
Tel 662 226 4584 X11
Fax 662 226 4588
HaskinVR@koppers.com
www.koppers.com

January 25, 2007

Chief, Industrial Wastewater Branch
Office of Pollution Control
Department of Environmental Quality
P.O. Box 10385
Jackson, MS 39289-0385

CERTIFIED MAIL: 7006 0810 0004 3593 0219

Subject: Koppers Inc. – Tie Plant, Mississippi
NPDES Permit No.: MSR220005
2006 Annual Storm Water Sampling Results

Enclosed you will find information relevant to the 2006 Storm Water Sampling activities at Koppers Inc. – Grenada Plant as required by Part IV.D of NPDES Permit No. MSR220005. The sampling of storm water was conducted at Outfalls 003, 005, 006, 007, 008, and 009. The balance of the sites outfalls, Outfall 001, 002, and 004, was not sampled pursuant to exemptions allowed under Part IV.C.4 of the permit.

Per Part IV.B of the permit a visual inspection and evaluation of all industrial areas contributing to storm water discharge was conducted. Accordingly, a completed "Inspection Report and Certification Form" as well as supplemental Information is attached.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated 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.

Sincerely,

Vance R. Haskin

Vance R. Haskin

Enclosures

cc: Ms. Joyce Fankulewski, Koppers Inc.

RECEIVED JAN 2007

Part VII.

Inspection Report and Certification Form For Storm Water Pollution Prevention Plan Evaluation

Wood Treater Storm Water General NPDES Permit No. MSR220005

(Please Print)

Owner and/or Operator: Koppers Inc.

Facility Name: Koppers Inc. - Grenada Plant

Facility Location: One Koppers Drive; Tie Plant, MS 38960

Date and Time: July 20, 2006 @ Approximatley 10:00 AM

Inspector(s): Kevin Coker & Consultant (EHS Support, Inc.)

Date of Last Rainfall: July 11, 2006 **Estimated Amount:** 0.35 inches

Deficiencies Noted During the Inspection (attach additional sheets if necessary):

See Attached

Corrective Action Needed (attach additional sheets if necessary):

See Attached

Corrective Action Compliance Schedule:

See Attached

Based upon this inspection which I or personnel under my direct supervision conducted, I certify that all pollution control measures are adequate and have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan filed with the Office of Pollution Control and good engineering practices as required by the above referenced permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons 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 fines and imprisonment for knowing violations.

I further certify that the Mississippi Office of Pollution Control has been notified of any changes pertinent to our storm water permit as required in Part II.C.

Vance R. Haskin	Vance R. Haskin	01-25-07
Authorized Name (Print)	Signature	Date

These reports shall be submitted annually, as required in the permit, to:

Chief, Industrial Branch
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385

Visual Site Inspection & Evaluation
NPDES Permit No.: MSR220005
Coverage Year: 2006
KOPPERS INC. – Grenada Plant

Area/Activity/BMP	Possible Contaminants	Observation & Corrective Action
Exposed Inventory Status	Monitoring Parameters	The foot print of the plant's treated storage yards was altered during 2006 to minimize any potential impact that on-site treated wood storage might have on storm water quality. These efforts focused predominately on the watersheds of Outfall 005, 006 and 009. The volume of treated wood products stored in the acreage draining to both Outfalls 005 and 009 was reduced by approximately 50% whereas that within the Outfall 006 watershed was reduced by approximately 95%.
Storm Water Management Controls & Best Management Practices.	Monitoring Parameters	The effectiveness of various controls required by Part III.7.b was assessed. Many of the plant's outfalls are equipped with weirs and drain valves, all of which were inspected and maintained in 2006. Signage identifying and locating each outfall was also installed. Excessive vegetation around the detention ponds and weirs was cleared when needed. Vegetation around Outfall 008 was sowed and maintained. Housekeeping activities were conducted throughout the year. Wood debris and bark around Outfall 007 was removed to minimize the risk of the transfer of solids to storm water. Wood blocks stored in the footprint of Outfall 001 have been mechanically reduced to wood fuel by a third party throughout the year. The installation of additional wood grinding equipment is scheduled for 2007 and should eliminate any future need to storing said blocks in this area. Existing spill prevention controls were assessed and enhanced in 2006. The containments servicing portions the plant's tank farm were enhanced. A third party ensured that containment wall joints were adequately maintained. A portion of the containment curb near the tank car unloading station was enhanced to further reduce the risk of overflow. Additional curbing was also installed near the plant's lubricants storage building. The staging area for some of the plant's mobile equipment was also relocated away from a stormwater outfall so as to further reduce the riks of storm water contamination.
Outfalls 001 - 009	Monitoring Parameters	At a minimum, monthly inspections of the plant's outfalls were conducted and documented during 2006.

RECEIVED JUL 2007

This inspection is responsive to Part III.7. (c) and Part IV.B of NPDES Permit No.: MSR220005. It serves as a supplement to the "Inspection Report and Certification Form For Storm Water Pollution Prevention Plan Evaluation".

7006 0810 0004 3593 0219

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	$ 00.00
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

7960 $ 00.00 0 JAN 25 2007
7923 MAILED FROM ZIP CODE 38901

Postmark Here

Sent To: Chief - Industrial Wastewater Branch
Street, Apt. No.; or PO Box No.: Office of Pollution Control
City, State, ZIP+4: P.O. Box 10385
Jackson, MS 39289-0385

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
CHIEF, INDUSTRIAL WASTEWATER BRANCH
OFFICE OF POLLUTION CONTROL
DEPARTMENT OF ENVIRONMENTAL QUALITY
P.O. Box 10385
JACKSON, MS 39289-0385

COMPLETE THIS SECTION ON DELIVERY

A. Signature: Rayford C. Robinson ☐ Agent ☐ Addressee

B. Received by (Printed Name): Rayford C. Robinson — C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

JAN 30 2006
JACKSON, MS 39205

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service): 7006 0810 0004 3593 0219

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

RECEIVED JUL 2007

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-00

ADDRESS Grenada

FACILITY

LOCATION

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPL TYPE
	SAMPLE MEASUREMENT				8.11		8.11		0	Annual	Grab
	PERMIT REQUIREMENT				REPORT MINIMUM		REPORT MAXIMUM	SU			
	SAMPLE MEASUREMENT						402		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT ANNL MAX	MG/L			
	SAMPLE MEASUREMENT						NOD1=B		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT ANNL MAX	MG/L			
	SAMPLE MEASUREMENT						NOD1=B		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT ANNL MAX	MG/L			
	SAMPLE MEASUREMENT						NOD1=B		0	Annual	Grab
	PERMIT REQUIREMENT						REPORT ANNL MAX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JUL 2007

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Vance Hasel
Plant Manager

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Vance R Hasel

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4504	07	01	25

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) NOD1=B REPRESENTS INSTANCES WHERE CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE.

STORM DATE: OCTOBER 16, 2006; DURATION: 31 HRS & 35 MIN; ESTIMATED RAINFALL: 4.65 INCHES; DISCHARGE: 0.514 MG

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

PAGE OF

Vance R. Haskin
Plant Manager

KOPPERS

Koppers Inc.
Utility Poles and Piling
P. O. Box 160
Tie Plant, MS 38960
Tel 662 226 4584 X11
Fax 662 226 4588
HaskinVR@koppers.com
www.koppers.com

January 25, 2007

Chief, Industrial Wastewater Branch
Office of Pollution Control
Department of Environmental Quality
P.O. Box 10385
Jackson, MS 39289-0385

CERTIFIED MAIL: 7006 0810 0004 3593 0219 Grenada CR

Subject: Koppers Inc. – Tie Plant, Mississippi
NPDES Permit No.: MSR220005
2006 Annual Storm Water Sampling Results

Enclosed you will find information relevant to the 2006 Storm Water Sampling activities at Koppers Inc. – Grenada Plant as required by Part IV.D of NPDES Permit No. MSR220005. The sampling of storm water was conducted at Outfalls 003, 005, 006, 007, 008, and 009. The balance of the sites outfalls, Outfall 001, 002, and 004, was not sampled pursuant to exemptions allowed under Part IV.C.4 of the permit.

Per Part IV.B of the permit a visual inspection and evaluation of all industrial areas contributing to storm water discharge was conducted. Accordingly, a completed "Inspection Report and Certification Form" as well as supplemental Information is attached.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated 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.

Sincerely,

Vance R. Haskin

Vance R. Haskin

Enclosures

cc: Ms. Joyce Fankulewski, Koppers Inc.

FILE COPY

STATE OF MISSISSIPPI
HALEY BARBOUR
GOVERNOR
MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY
CHARLES H. CHISOLM, EXECUTIVE DIRECTOR

April 10, 2006

Kevin B. Coker
Koppers Industries, Inc
PO Box 160
Tie Plant, Mississippi 38960

Dear Mr. Coker:

Re: Kopper Industries Inc.
Grenada County
Storm Water Coverage No MSR220005

The Mississippi Department of Environmental Quality received a Baseline Storm Water General Permit Re-Coverage Form for Kopper Industries on November 28, 2005. However, Kopper Industries is currently covered under the Wood Treater General Permit. Koppers shall continue to comply with the requirements of the Wood Treater General Permit under coverage number MSR22005. MDEQ will notify Kopper Industries once the Wood Treater General Permit is reissued. Information on how to obtain recoverage will be provided at that time. If there are any questions please do not hesitate to contact me.

Respectfully,

Kenneth LaFleur
General Permits Branch

AI #876

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

BASELINE STORM WATER GENERAL PERMIT RE-COVERAGE FORM

The submittal of this form is required to continue coverage under Mississippi's Reissued Baseline Storm Water General Permit MSR00

COVERAGE NUMBER: MSR00 2 2 0 0 0 5 **This coverage number must be completed for your specific project or this form will be considered incomplete and returned. The coverage number can be found at the bottom left corner of the Certificate of Coverage and at the top right corner of the Letter of Instruction for Re-Coverage.**

INSTRUCTIONS

The submittal of this form is required to receive coverage under the reissued Baseline General Permit. This form must be completed and returned to the address printed at the bottom of page 2 within 30 days of the date of the Letter of Instruction for Re-Coverage.

Amendments are required to be attached to this form if the Storm Water Pollution Prevention Plan (SWPPP) is not current or is ineffective in controlling storm water pollutants.

The applicant must be the owner or operator (legal entity that controls the facility's operation, rather than the plant/site manager or environmental consultant). The owner or operator that receives coverage is responsible for permit compliance.

Do not submit this form if submitting a "No Exposure Certification".

Do not submit this form if submitting a "Request for Termination" (RFT).

ALL INFORMATION MUST BE COMPLETED (Enter "NA" if not applicable).

The Certificate of Coverage should be mailed to: ☐ **owner/operator** ☒ **facility (please check one)**

☐ **OWNER** ☒ **OPERATOR INFORMATION (PLEASE CHECK ONE OR BOTH)**

CONTACT NAME & POSITION: Kevin B.Coker, Plant Manager

COMPANY NAME: Koppers Inc.

STREET OR P.O. BOX: P.O. Box 160

CITY: Tie Plant **STATE:** MS **ZIP:** 38960

PHONE NUMBER (INCLUDE AREA CODE): (662) 226 - 4584 (ext. 11)

FACILITY INFORMATION

FACILITY NAME: Koppers Inc. - Grenada Plant

CONTACT NAME & POSITION: Kevin B. Coker, Plant Manager

CONTACT PHONE NUMBER (INCLUDE AREA CODE): (662) 226 - 4584 (ext. 11)

PRIMARY STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE & DESCRIPTION OF INDUSTRIAL ACTIVITY:

2 4 9 1 Wood Preservation

PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE NEAREST NAMED ROAD):

STREET: One Koppers Drive

CITY: Tie Plant COUNTY: Grenada ZIP: 38960

NEAREST NAMED WATERBODY THAT THE STORM WATER LEAVING THE SITE WILL ENTER:

Batupan Bogue

STORM WATER POLLUTION PREVENTION PLAN (SWPPP)

1. IS A COPY OF THE SWPPP AT THE PERMITTED SITE? [X] YES [ ] NO

2. IS THE SWPPP UP-TO-DATE AND EFFECTIVE IN CONTROLLING STORM WATER POLLUTANTS? [X] YES [ ] NO
   IF NO, PLEASE ATTACH REQUIRED SWPPP AMENDMENTS.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated 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.~~

I further certify that I understand when coverage is terminated the facility is no longer authorized to discharge storm water associated with industrial activity under this general permit. I understand that discharging pollutants in storm water associated with industrial activity to waters of the state without NPDES coverage is in violation of state law.

Signature[1] Date 11/23/05

LESLIE S. HYDE Title VP Safety & Environmental Affairs

Printed Name

[1]This form shall be signed according to the General Permit, ACT13, T-4, page 26, as follows:
- For a corporation, by a responsible corporate officer.
- For a partnership, by a general partner.
- For a sole proprietorship, by the proprietor.
- For a municipal, state or other public facility, by principal executive officer, mayor, or ranking elected official.

After signing please mail to:

Environmental Permits Division
Office of Pollution Control
P.O. Box 10385
Jackson, MS 39289-0385

STATE OF MISSISSIPPI
HALEY BARBOUR
GOVERNOR
MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY
CHARLES H. CHISOLM, EXECUTIVE DIRECTOR

October 4, 2006

Mr. Kevin Coker
Koppers Industries Inc
PO Box 160
Tie Plant, Mississippi 38960

Dear Mr. Coker:

Re: Inspection Report
Koppers Industries Inc
Tie Plant, Grenada County

Air-Title V Operating	096000012
GP-Wood Treating	MSR220005

Enclosed is a copy of the multimedia inspection reports completed as a result of this office's inspection at Koppers Industries Inc on 6/28/06. The reports should be used by you as a guide for complying with requirements and limitations stated in your permits.

If you have any questions concerning this matter, please contact me at (601) 961-5050.

Sincerely,

Azzam Abu-Mirshid
Energy and Transportation Branch
Environmental Compliance and Enforcement Division

Agency Interest No. 876
INS20060001

Mississippi Department of Environmental Quality
Office of Pollution Control
Water Inspection Report

Site Name: Koppers Industries Inc

Permit Number: GP-Wood Treating MSR220005

Physical Address
1 Koppers Drive
Tie Plant, MS 38960
Grenada County

Mailing Address
PO Box 160
Tie Plant, Mississippi 38960

Transaction code: ----------N - new

Completed date: ----------6/28/06

Compliance activity & pcs codes: ----CEI-Stormwater

Facility type: ----------Industrial - 2

Investigator: ----------Azzam Abu-Mirshid

Areas Evaluated

S PERMIT	S FACILITY SITE REVIEW
N LABORATORY	N PRETREATMENT
N SELF-MONITORING PROGRAM	N EFFLUENT/RECEIVING WATERS
S RECORDS/REPORTS	N FLOW MEASUREMENT
N SLUDGE DISPOSAL	S OPERATIONS & MAINTENANCE
N COMPLIANCE SCHEDULES	

S-Satisfactory **M-Marginal** **U-Unsatisfactory** **N-Not Evaluated**

COMMENTS: Stormwater falling inside the fuel and raw material storage tanks, on the maintenance shop pad and on the hazardous waste drip pad is treated in an onsite biological treatment system and then discharged to the city sewer system. Spill Prevention and Counter Measure (SPCC) and a pollution prevention plan were kept on file. Required monitoring records and reports were also kept.

Signature: Azzam Abu-Mirshid

Date: 10-4-06

cc: Data Integration Division

Agency Interest No. 876
INS20040001

Part VII.

Inspection Report and Certification Form
For Storm Water Pollution Prevention Plan Evaluation

Wood Treater Storm Water General NPDES Permit No. MSR220005

(Please Print)

Owner and/or Operator: Koppers Inc.

Facility Name: Koppers Inc. - Grenada Plant

Facility Location: One Koppers Drive; Tie Plant, MS 38960

Date and Time: July 20, 2006 @ Approximatley 10:00 AM

Inspector(s): Kevin Coker & Consultant (EHS Support, Inc.)

Date of Last Rainfall: July 11, 2006 **Estimated Amount:** 0.35 inches

Deficiencies Noted During the Inspection (attach additional sheets if necessary):

See Attached

Corrective Action Needed (attach additional sheets if necessary):

See Attached

Corrective Action Compliance Schedule:

See Attached

Based upon this inspection which I or personnel under my direct supervision conducted, I certify that all pollution control measures are adequate and have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan filed with the Office of Pollution Control and good engineering practices as required by the above referenced permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons 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 fines and imprisonment for knowing violations.

I further certify that the Mississippi Office of Pollution Control has been notified of any changes pertinent to our storm water permit as required in Part II.C.

Vance R. Haskin	Vance R. Haskin	01-25-07
Authorized Name (Print)	Signature	Date

These reports shall be submitted annually, as required in the permit, to:

Chief, Industrial Branch
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385

Visual Site Inspection & Evaluation
NPDES Permit No.: MSR220005
Coverage Year: 2006
KOPPERS INC. – Grenada Plant

Area/Activity/BMP	Possible Contaminants	Observation & Corrective Action
Exposed Inventory Status	Monitoring Parameters	The foot print of the plant's treated storage yards was altered during 2006 to minimize any potential impact that on-site treated wood storage might have on storm water quality. These efforts focused predominately on the watersheds of Outfall 005, 006 and 009. The volume of treated wood products stored in the acreage draining to both Outfalls 005 and 009 was reduced by approximately 50% whereas that within the Outfall 006 watershed was reduced by approximately 95%.
Storm Water Management Controls & Best Management Practices.	Monitoring Parameters	The effectiveness of various controls required by Part III.7.b was assessed. Many of the plant's outfalls are equipped with weirs and drain valves, all of which were inspected and maintained in 2006. Signage identifying and locating each outfall was also installed. Excessive vegetation around the detention ponds and weirs was cleared when needed. Vegetation around Outfall 008 was sowed and maintained. Housekeeping activities were conducted throughout the year. Wood debris and bark around Outfall 007 was removed to minimize the risk of the transfer of solids to storm water. Wood blocks stored in the footprint of Outfall 001 have been mechanically reduced to wood fuel by a third party throughout the year. The installation of additional wood grinding equipment is scheduled for 2007 and should eliminate any future need to storing said blocks in this area. Existing spill prevention controls were assessed and enhanced in 2006. The containments servicing portions the plant's tank farm were enhanced. A third party ensured that containment wall joints were adequately maintained. A portion of the containment curb near the tank car unloading station was enhanced to further reduce the risk of overflow. Additional curbing was also installed near the plant's lubricants storage building. The staging area for some of the plant's mobile equipment was also relocated away from a stormwater outfall so as to further reduce the riks of storm water contamination.
Outfalls 001 - 009	Monitoring Parameters	At a minimum, monthly inspections of the plant's outfalls were conducted and documented during 2006.

JAN 2007

This inspection is responsive to Part III.7. (c) and Part IV.B of NPDES Permit No.: MSR220005. It serves as a supplement to the "Inspection Report and Certification Form For Storm Water Pollution Prevention Plan Evaluation".

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME
ADDRESS
Grenada
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

PERMIT NUMBER

DISCHARGE NUMBER 001 ✓

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	SAMPLE MEASUREMENT				NODI=9		NODI=9			NODI=9	
	PERMIT REQUIREMENT				REPORT MINIMUM		REPORT MAXIMUM			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=9			NODI=9	
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=9			NODI=9	
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=9			NODI=9	
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=9			NODI=9	
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2007

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Vance Haskin Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Vance R. Haskin SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662 (AREA CODE)	226-4584 (NUMBER)	07 (YEAR)	01 (MO)	25 (DAY)
TYPED OR PRINTED						

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

EXEMPT PER PERMIT NO. MSR 22005 PART IV.C.4

This is a 4-part form. PAGE OF

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME
ADDRESS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

FACILITY
LOCATION

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				NODI=9		NODI=9			NODI=9	
	PERMIT REQUIREMENT	******	******		REPORT MINIMUM	******	REPORT MAXIMUM			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=9			NODI=9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=9			NODI=9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=9			NODI=9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=9			NODI=9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2007

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
VANCE HASKIN PLANT MANAGER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	662	226-4584	07	01	25
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

EXEMPT PER PERMIT NO. MSR22005 PART IV.C.4

This is a 4-part form. PAGE OF

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME
ADDRESS

FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				8.24		8.24		0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******		REPORT MINIMUM	******	REPORT MAXIMUM			ANNUAL	GRAB
	SAMPLE MEASUREMENT						271		0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=B		0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						0.057		0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=B		0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 2007

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
VANCE HASKIN
PLANT MANAGER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Vance L. Haskin
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
662	226-4584	07	01	25
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) NODI=B REPRESENTS INSTANCES WHERE PARAMETERS WERE NOT DETECTABLE OR BELOW REPORTING LIMITS.

STORM DATE: OCTOBER 16, 2006; DURATION: 31 HRS & 35 MIN; ESTIMATED RAINFALL: 4.65" INCHES; DISCHARGE: 0.1344 MG

This is a 4-part form.

PAGE OF

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
[illegible]	004 A

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	[illegible]	[illegible]	[illegible]	TO	[illegible]	12	[illegible]

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	SAMPLE MEASUREMENT				NODI=9		NODI=9			NODI=9	
	PERMIT REQUIREMENT	******	******		REPORT MINIMUM	******	REPORT MAXIMUM			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=9			NODI=9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=9			NODI=9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=9			NODI=9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=9			NODI=9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2007

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Vance Haskin Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	1402 226-4584		07	01	25
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

EXEMPT PER PERMIT NO. NSR 22005 PART IV. C.4

This is a 4-part form. PAGE OF

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
	001 A

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				8.40		8.40		0	ANNUAL	GRAB
	PERMIT REQUIREMENT				REPORT MINIMUM		REPORT MAXIMUM			ANNUAL	GRAB
	SAMPLE MEASUREMENT						498		0	ANNUAL	GRAB
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-B		0	ANNUAL	GRAB
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						0.264		0	ANNUAL	GRAB
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-B		0	ANNUAL	GRAB
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2007

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Vance Haslin Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	662	226-4504	07	01	25
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)* NODI: B REPRESENTS INSTANCES WHERE PARAMETER CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE.

STORM DATE: OCTOBER 16, 2006; DURATION: 31 HRS & 35 MIN; ESTIMATED RAINFALL: 4.65 INCHES; DISCHARGE: 1.258 MG

This is a 4-part form.

PAGE OF

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different)

NAME [illegible]

ADDRESS [illegible]

FACILITY [illegible]

LOCATION [illegible]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
[illegible]	006 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

*** NO DISCHARGE [ ] ***

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	[illegible]	[illegible]	[illegible]	TO	[illegible]	[illegible]	[illegible]

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
[illegible]	SAMPLE MEASUREMENT	******	******		8.58	******	8.58	(12)	0	Annual	Grab
[illegible]	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
[illegible]	SAMPLE MEASUREMENT	******	******		******	******	152	(19)	0	Annual	Grab
[illegible]	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
[illegible]	SAMPLE MEASUREMENT	******	******		******	******	NODI=B	(19)	0	Annual	Grab
[illegible]	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
[illegible]	SAMPLE MEASUREMENT	******	******		******	******	0.157	(19)	0	Annual	Grab
[illegible]	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
[illegible]	SAMPLE MEASUREMENT	******	******		******	******	NODI=B	(19)	0	Annual	Grab
[illegible]	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2007

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
VANCE HASKIN PLANT MANAGER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	[signature]	662	226-4584	07	01	25
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) NODI=B REPRESENTS INSTANCES WHERE PARAMETER CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE.

STORM DATE: OCTOBER 16, 2006 ; DURATION: 31 HRS & 35 MIN ; ESTIMATED RAINFALL: 4.65 INCHES ; ~~DURATION~~ DISCHARGE: 0.456 MG

This is a 4-part form.

PAGE OF

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location If Different)
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	SAMPLE MEASUREMENT				7.75		7.75		0	ANNUAL	GRAB
	PERMIT REQUIREMENT				REPORT MINIMUM		REPORT MAXIMUM				
	SAMPLE MEASUREMENT						184		0	ANNUAL	GRAB
	PERMIT REQUIREMENT						REPORT ANNL MAX				
	SAMPLE MEASUREMENT						NODI=B		0	ANNUAL	GRAB
	PERMIT REQUIREMENT						REPORT ANNL MAX				
	SAMPLE MEASUREMENT						0.056		0	ANNUAL	GRAB
	PERMIT REQUIREMENT						REPORT ANNL MAX				
	SAMPLE MEASUREMENT						0.003		0	ANNUAL	GRAB
	PERMIT REQUIREMENT						REPORT ANNL MAX				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2007

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Vance Haskin
Plant Manager
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Vance R. Haskin
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	224-4584	07	01	25

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) NODI=B REPRESENTS INSTANCES WHERE PARAMETER CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE

STORM DATE: OCTOBER 26, 2006; DURATION: 42 HRS & 30 MIN ESTIMATED RAINFALL: 0.90 INCHES DISCHARGE: 0.000132

This is a 4-part form.

PAGE OF

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME [illegible]

ADDRESS [illegible] MAX. 160 [illegible] MO 38960

FACILITY [illegible]

LOCATION [illegible] PLANT [illegible] MO 38960

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER	DISCHARGE NUMBER
[illegible]	008 A

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM		[illegible]	[illegible]	TO	[illegible]	[illegible]	[illegible]

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
[illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		8.18	******	8.18		0	Annual	Grab
	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
[illegible] SUSPENDED [illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	332		0	Annual	Grab
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
[illegible] EXTR - IR METH) TOT. NO [illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI=B		0	Annual	Grab
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
[illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.003		0	Annual	Grab
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
[illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI=B		0	Annual	Grab
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2007

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Vance Haskin
Plant Manager

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Vance R. Hask

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
662	226-4584	07	01	25

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) NODI=B REPRESENTS INSTANCES WHERE PARAMETER CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE.

STORM DATE: OCTOBER 16, 2006 ; DURATION: 31 HRS & 35 MIN ; ESTIMATED RAINFALL: 4.65 INCHES ; DURATION DISCHARGE: 0.115

This is a 4-part form.

PAGE OF

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME
ADDRESS

FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No 2040-0004

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				8.11		8.11		0	Annual	Grab
	PERMIT REQUIREMENT	******	******		REPORT MINIMUM	******	REPORT MAXIMUM			ANNUAL	GRAB
	SAMPLE MEASUREMENT						402		0	Annual	Grab
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=B		0	Annual	Grab
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=B		0	Annual	Grab
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=B		0	Annual	Grab
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 2007

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Vance Haskin Plant Manager		662 226-4584		07	01	25
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) NODI=B REPRESENTS INSTANCES WHERE CONCENTRATIONS WERE BELOW DETECTION LIMITS OR NOT DETECTABLE.

STORM DATE: OCTOBER 16, 2006; DURATION: 31 HRS & 35 MIN; ESTIMATED RAINFALL: 4.65 INCHES; DISCHARGE: 0.514 MGD

This is a 4-part form.

PAGE OF

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/14/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 15:18
Sampled by: K. Coker

Project ID/Location: Stormwater Annual Requirements
Project Number:
Sample Description: Outfall 003 (Grab)
Sample Matrix: WATER
Sample Number: CC07974
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.24		units	150.1	SMB	10/17/06	15:10
Oil & Grease	ND	2.0	mg/L	1664A	SMB	10/27/06	08:00
Total Suspended Solids	271	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30
2-Chlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	JWH	10/22/06	02:30
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	JWH	10/22/06	02:30
2-Nitrophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30
4-Nitrophenol	ND	0.005	mg/L	8270C	JWH	10/22/06	02:30
Pentachlorophenol	0.057	0.001	mg/L	8270C	JWH	10/22/06	02:30
Phenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	02:30

Note: per the client's request, the results for this sample, which were previously reported on 10/27/06, have been reprinted on 12/14/06 on two separate reports. One report lists the results for pH, O&G, TSS and Phenols, and the other report lists the PAH results.

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 10/25/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 06:16
Sampled by: TJ

Project ID/Location: Stormwater Annual Requirements
Project Number:
Sample Description: Outfall 003 (Composite)
Sample Matrix: WATER
Sample Number: CC07975
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	227	1.0	mg/L	160.2	SMB	10/19/06	14:00
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05
2-Chlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	JWH	10/22/06	03:05
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	JWH	10/22/06	03:05
2-Nitrophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05
4-Nitrophenol	ND	0.005	mg/L	8270C	JWH	10/22/06	03:05
Pentachlorophenol	0.053	0.001	mg/L	8270C	JWH	10/22/06	03:05
Phenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	03:05

Robert Thompson
Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/14/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 08:25
Sampled by: TJ

Project ID/Location: Stormwater Annual Requirements
Project Number:

Sample Description: Outfall 005 (Grab)
Sample Matrix: WATER
Sample Number: CC07968
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.40		units	150.1	SMB	10/17/06	15:10
Oil & Grease	ND	2.2	mg/L	1664A	SMB	10/27/06	08:00
Total Suspended Solids	498	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenols							
4-Chloro-3-methylphenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34
2-Chlorophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34
2,4-Dichlorophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34
2,4-Dimethylphenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34
4,6-Dinitro-2-methylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	22:34
2,4-Dinitrophenol	ND	0.010	mg/L	8270C	JWH	10/21/06	22:34
2-Nitrophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34
4-Nitrophenol	ND	0.010	mg/L	8270C	JWH	10/21/06	22:34
Pentachlorophenol	0.264	0.002	mg/L	8270C	JWH	10/21/06	22:34
Phenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34
2,4,6-Trichlorophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	22:34

Note: per the client's request, the results for this sample, which were previously reported on 10/27/06, have been reprinted on 12/14/06 on two separate reports. One report lists the results for pH, O&G, TSS and Phenols, and the other report lists the PAH results.

Robert Thompson
Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 10/25/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 11:35
Sampled by: K. Coker

Project ID/Location: Stormwater Annual Requirements

Project Number:

Sample Description: Outfall 005 (Composite)
Sample Matrix: WATER

Sample Number: CC07969
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	323	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09
2-Chlorophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09
2,4-Dichlorophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09
2,4-Dimethylphenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09
4,6-Dinitro-2-methylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:09
2,4-Dinitrophenol	ND	0.010	mg/L	8270C	JWH	10/21/06	23:09
2-Nitrophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09
4-Nitrophenol	ND	0.010	mg/L	8270C	JWH	10/21/06	23:09
Pentachlorophenol	0.364	0.002	mg/L	8270C	JWH	10/21/06	23:09
Phenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09
2,4,6-Trichlorophenol	ND	0.004	mg/L	8270C	JWH	10/21/06	23:09

Robert Thompson
Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/14/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 10:18
Sampled by: K. Coker

Project ID/Location: Stormwater Annual Requirements

Project Number:

Sample Description: Outfall 006 (Grab)
Sample Matrix: WATER

Sample Number: CC07972
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.58		units	150.1	SMB	10/17/06	15:10
Oil & Grease	ND	6.7	mg/L	1664A	SMB	10/27/06	08:00
Total Suspended Solids	152	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenols							
4-Chloro-3-methylphenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18
2-Chlorophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18
2,4-Dichlorophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18
2,4-Dimethylphenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18
4,6-Dinitro-2-methylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	01:18
2,4-Dinitrophenol	ND	0.010	mg/L	8270C	JWH	10/22/06	01:18
2-Nitrophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18
4-Nitrophenol	ND	0.010	mg/L	8270C	JWH	10/22/06	01:18
Pentachlorophenol	0.157	0.002	mg/L	8270C	JWH	10/22/06	01:18
Phenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18
2,4,6-Trichlorophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:18

Note: per the client's request, the results for this sample, which were previously reported on 10/27/06, have been reprinted on 12/14/06 on two separate reports. One report lists the results for pH, O&G, TSS and Phenols, and the other report lists the PAH results.

Robert Thompson
Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 10/25/06
Date Received: 10/17/06
Date/Time Sampled: 10/17/06 01:25
Sampled by: K. Coker

Project Number:

Project ID/Location: Stormwater Annual Requirements

Sample Description: Outfall 006 (Composite)

Sample Matrix: WATER

Sample Number: CC07973

Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	144	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54
2-Chlorophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54
2,4-Dichlorophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54
2,4-Dimethylphenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54
4,6-Dinitro-2-methylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	01:54
2,4-Dinitrophenol	ND	0.010	mg/L	8270C	JWH	10/22/06	01:54
2-Nitrophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54
4-Nitrophenol	ND	0.010	mg/L	8270C	JWH	10/22/06	01:54
Pentachlorophenol	0.172	0.002	mg/L	8270C	JWH	10/22/06	01:54
Phenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54
2,4,6-Trichlorophenol	ND	0.004	mg/L	8270C	JWH	10/22/06	01:54

Robert Thompson
Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/14/06
Date Received: 10/31/06
Date/Time Sampled: 10/27/06 11:37
Sampled by: TJ/KC

Project Number:

Project ID/Location: Stormwater
Annual Requirements

Sample Description: Outfall 007 (Grab)
Sample Matrix: WATER

Sample Number: CC08590
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	7.75		units	150.1	JWH	11/01/06	09:50
Oil & Grease	ND	2.1	mg/L	1664A	CRM	11/08/06	15:35
Total Suspended Solids	184	1.0	mg/L	160.2	RAH	11/01/06	12:00
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50
2-Chlorophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50
4,6-Dinitro-2-methylphenol	0.003	0.001	mg/L	8270C	RLT	11/02/06	15:50
2,4-Dinitrophenol	ND	0.006	mg/L	8270C	RLT	11/02/06	15:50
2-Nitrophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50
4-Nitrophenol	ND	0.006	mg/L	8270C	RLT	11/02/06	15:50
Pentachlorophenol	0.056	0.001	mg/L	8270C	RLT	11/02/06	15:50
Phenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	15:50

Note: per the client's request, the results for this sample, which were previously reported on 11/09/06, have been reprinted on 12/14/06 on two separate reports. One report lists the results for pH, O&G, TSS and Phenols, and the other report lists the PAH results.

Robert Thompson
Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Haley Biddy

Date Reported: 11/03/06
Date Received: 10/31/06
Date/Time Sampled: 10/27/06 14:45
Sampled by: TJ/KC

Project ID/Location: Stormwater Annual Requirements

Project Number:

Sample Description: Outfall 007 (Composite)
Sample Matrix: WATER

Sample Number: CC08591
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	184	1.0	mg/L	160.2	RAH	11/01/06	12:00
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	RLT	11/02/06	16:25
2-Chlorophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	16:25
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	16:25
2,4-Dimethylphenol	0.002	0.002	mg/L	8270C	RLT	11/02/06	16:25
4,6-Dinitro-2-methylphenol	0.005	0.001	mg/L	8270C	RLT	11/02/06	16:25
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	RLT	11/02/06	16:25
2-Nitrophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	16:25
4-Nitrophenol	ND	0.005	mg/L	8270C	RLT	11/02/06	16:25
Pentachlorophenol	0.136	0.001	mg/L	8270C	RLT	11/02/06	16:25
Phenol	ND	0.002	mg/L	8270C	RLT	11/02/06	16:25
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	RLT	11/02/06	16:25

Robert Thompson
Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/14/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 17:04
Sampled by: TJ

Project ID/Location: Stormwater Annual Requirements

Project Number:

Sample Description: Outfall 008

Sample Matrix: WATER

Sample Number: CC07970

Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.18		units	150.1	SMB	10/17/06	15:10
Oil & Grease	ND	2.0	mg/L	1664A	SMB	10/27/06	08:00
Total Suspended Solids	332	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45
2-Chlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	JWH	10/21/06	23:45
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	JWH	10/21/06	23:45
2-Nitrophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45
4-Nitrophenol	ND	0.005	mg/L	8270C	JWH	10/21/06	23:45
Pentachlorophenol	0.003	0.001	mg/L	8270C	JWH	10/21/06	23:45
Phenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	23:45

Note: per the client's request, the results for this sample, which were previously reported on 10/27/06, have been reprinted on 12/14/06 on two separate reports. One report lists the results for pH, O&G, TSS and Phenols, and the other report lists the PAH results.

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 10/25/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 08:15
Sampled by: K. Coker

Project Number:

Project ID/Location: Stormwater Annual Requirements

Sample Description: Outfall 008

Sample Matrix: WATER

Sample Number: CC07971

Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	89	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20
2-Chlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	JWH	10/22/06	00:20
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	JWH	10/22/06	00:20
2-Nitrophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20
4-Nitrophenol	ND	0.005	mg/L	8270C	JWH	10/22/06	00:20
Pentachlorophenol	0.003	0.001	mg/L	8270C	JWH	10/22/06	00:20
Phenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	JWH	10/22/06	00:20

Robert Thompson
Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/14/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 14:51
Sampled by: K. Coker

Project Number:

Project ID/Location: Stormwater Annual Requirements

Sample Description: Outfall 009 (Grab)

Sample Matrix: WATER

Sample Number: CC07966

Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.11		units	150.1	SMB	10/17/06	15:10
Oil & Grease	ND	2.1	mg/L	1664A	SMB	10/27/06	08:00
Total Suspended Solids	402	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11
2-Chlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	JWH	10/21/06	20:11
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	JWH	10/21/06	20:11
2-Nitrophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11
4-Nitrophenol	ND	0.005	mg/L	8270C	JWH	10/21/06	20:11
Pentachlorophenol	ND	0.001	mg/L	8270C	JWH	10/21/06	20:11
Phenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	20:11

Note: per the client's request, the results for this sample, which were previously reported on 10/27/06, have been reprinted on 12/14/06 on two separate reports. One report lists the results for pH, O&G, TSS and Phenols, and the other report lists the PAH results.

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 10/25/06
Date Received: 10/17/06
Date/Time Sampled: 10/16/06 17:52
Sampled by: TJ

Project ID/Location: Stormwater Annual Requirements

Project Number:

Sample Description: Outfall 009 (Composite)
Sample Matrix: WATER

Sample Number: CC07967
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	260	1.0	mg/L	160.2	SMB	10/19/06	11:50
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58
2-Chlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	JWH	10/21/06	21:58
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	JWH	10/21/06	21:58
2-Nitrophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58
4-Nitrophenol	ND	0.005	mg/L	8270C	JWH	10/21/06	21:58
Pentachlorophenol	ND	0.001	mg/L	8270C	JWH	10/21/06	21:58
Phenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	JWH	10/21/06	21:58

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

PERMITTEE NAME, ADDRESS (Include Facility Name/Location if Different)

NAME

ADDRESS

Grenada

FACILITY LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				NODI-9		NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******		REPORT MINIMUM	******	REPORT MAXIMUM			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******				REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******				REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******				REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT									NODI-9	
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED FEB 2006

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE		
Kevin B. Coker Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662 226-4514	06	01	27
TYPED OR PRINTED			AREA CODE NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

EXEMPT PER PERMIT NO. MS0022005 PART IV.C.4.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS

FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

Form Approved.
OMB No. 2040-0004

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						N001-9			N001-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	COMP/GR
	SAMPLE MEASUREMENT						N001-9			N001-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	COMP/GR
	SAMPLE MEASUREMENT						N001-9			N001-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	COMP/GR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED FEB 2006

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY
TYPED OR PRINTED					06	01	27

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT PER PERMIT NO. MSR22005 PART IV. L.4.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS

FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				NODI-9		NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******		REPORT MINIMUM	******				ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT	******				******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******				REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******			******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED FEB 2006

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Kevin B. Cook Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	606	726-4884	06	01	27
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT PER PERMIT NO: MSR22005 PART IV.C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						N001-9			N001-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						N001-9			N001-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						N001-9			N001-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT									~~N001-9~~ (C)	
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED FEB 2006

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Kevin B. Foker Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(765)	771-4534	06	01	27
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT PER PERMIT NO. MSG220005 PART IV.C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS

FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				NODI-9		NODI-9			NODI-9	
	PERMIT REQUIREMENT				REPORT MINIMUM		REPORT MAXIMUM				
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT						REPORT ANNL MAX				
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT						REPORT ANNL MAX				
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT						REPORT ANNL MAX				
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT						REPORT ANNL MAX				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Kevin B. Coker
Plant Manager
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	776-4334	06	01	27
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT DEQ PERMIT NO. MSR22005 PART IV.C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED FEB 2006

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Kevin B. Coker Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662	226-4524	06	01	27
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT PER PERMIT NO. MSR 22005 PART IV.C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				N001-9		N001-9			N001-9	
	PERMIT REQUIREMENT	******	******		REPORT MINIMUM	******	REPORT MAXIMUM			ANNUAL	GRAB
	SAMPLE MEASUREMENT						N001-9			N001-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						N001-9			N001-9	
	PERMIT REQUIREMENT	******	******		******	******	R P I			ANNUAL	GRAB
	SAMPLE MEASUREMENT						N001-9			N001-9	
	PERMIT REQUIREMENT	******	******				REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						N001-9			N001-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED FEB 2006

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Kevin B. Coker Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662	726-4884	06	01	27
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT PER PERMIT NO. MSR220005 PART IV.C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						N001-9			N001-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	MG/L		ANNUAL COMPOS	
	SAMPLE MEASUREMENT						N001-9			N001-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	MG/L		ANNUAL COMPOS	
	SAMPLE MEASUREMENT						N001-9			N001-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	MG/L		ANNUAL COMPOS	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED FEB 2006

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE		
Kevin B Coker Plant Manager TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662 726-4584 AREA CODE NUMBER	06 YEAR	01 MO	27 DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Exempt per Permit No. MSR 220005 Part II.C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				8.16		8.16		0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******		REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
	SAMPLE MEASUREMENT						390		0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI = B		0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT						0.110		0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI = B		0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED FEB 2006

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Kevin B. Coker Plant Manager TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662	226-4584	06	01	27
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

DATE: DECEMBER 14, 2005 DURATION: 21 HOURS 55 MINUTES ESTIMATED RAINFALL: 2.13 INCHES DISCHARGE: 0.20698 MGD

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						462		0	Annual	Comp
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT						0.283		0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT						NODI = B		0	Annual	Comp.
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED FEB 2006

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Kevin B. Coker
Plant Manager
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Kevin B. Coker
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
662	226-4584	06	01	27
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

DATE: DECEMBER 14, 2005 DURATION: 21 HOURS 55 MINUTES ESTIMATED RAINFALL: 2.13 INCHES DISCHARGE: 0.20698 MGD

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

Form Approved.
OMB No. 2040-0004

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				7.22		7.22		0	Annual	Grab
	PERMIT REQUIREMENT	******	******		REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
	SAMPLE MEASUREMENT						50		0	Annual	Grab
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	NO/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI = B		0	Annual	Grab
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	NO/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT						0.326		0	Annual	Grab
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	NO/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI = B		0	Annual	Grab
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	NO/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Kevin B. Coyne	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662	226-4584	06	01	27
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

DATE: DECEMBER 24, 2005 DURATION: 8 HRS 12 MINUTES ESTIMATED RAINFALL: 1.13 INCHES DISCHARGE: 0.004275 MGD

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						29		0	Annual	Comp.
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	MG/L		ANNUAL COMPUT.	
	SAMPLE MEASUREMENT						0.323		0	Annual	Comp
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	MG/L		ANNUAL COMPUT.	
	SAMPLE MEASUREMENT						NONE = B		0	Annual	Comp.
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX	MG/L		ANNUAL COMPUT.	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
Kevin B. Coker	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		662	226-4584	06	01	27
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

DATE: DECEMBER 24 2005 DURATION: 8 HRS 12 MINUTES ESTIMATED RAINFALL: 1.13 INCHES DISCHARGE: 0.004275 MGD

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS:

FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

Form Approved.
OMB No. 2040-0004

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				8.18		8.18		0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******		REPORT MINIMUM	******	REPORT MAXIMUM			ANNUAL	GRAB
	SAMPLE MEASUREMENT						182		0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=B		0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						0.047		0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI=B		0	ANNUAL	GRAB
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Kevin B. Cover Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	662	226-4534	06	01	27
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

DATE: DECEMBER 14, 2005 DURATION: 21 HOURS 55 MINUTES ESTIMATED RAINFALL: 2.13 INCHES DISCHARGE: 0.10428 MGD

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						266		0	Annual	Comp.
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						0.115		0	Annual	Comp.
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						NOPI=B		0	Annual	Comp.
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
Kevin B. Cover Plant Manager TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		662	226-4584	06	01	27
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Date: December 14, 2005 Duration: 21 Hours 55 Minutes Estimated Rainfall: 2.13 Inches Discharge: ~~0.20648 MGD~~ 0.10428 MGD

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS

FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				NODI-9		NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******		REPORT MINIMUM	******	REPORT MAXIMUM			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE		
Kevin B. Cole Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	867 226-4584	06	01	27
TYPED OR PRINTED			AREA CODE / NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT PER PERMIT MSR220005 PART N.C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT	******	******		******	******	REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT									N/A	
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Kevin B. Coxon Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	1002	226-4584	06	01	27
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

EXEMPT PER PERMIT NO. MSL220005 PART IV. C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS

FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT				NODI-9		NODI-9			NODI-9	
	PERMIT REQUIREMENT				REPORT MINIMUM		REPORT MAXIMUM			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT						REPORT ANNL MA			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT						NODI-9			NODI-9	
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Kevin B. Coker Plant Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	662	726-4584	06	01	27
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Exempt per Permit No. MS0022005 Part IV. C.4

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS

FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT						NOD1-9			NOD1-9	
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						NOD1-9			NOD1-9	
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT						NOD1-9			NOD1-9	
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Kevin B. Coker Plant Manager TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE 706	NUMBER 4534	YEAR 06	MO 01	DAY 27

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Exceed Pa. Permit No. MSD022005 Part IV.C.4

Kevin B. Coker
Plant Manager

KOPPERS

Koppers Inc.
Utility Poles and Piling
P. O. Box 160
Tie Plant, MS 38960
Tel 662 226 4584
Fax 662 226 4588
Cokerkb@koppers.com
www.koppers.com

January 27, 2006

RECEIVED
FEB 2006

Chief, Industrial Wastewater Branch
Office of Pollution Control
Department of Environmental Quality
P.O. Box 10385
Jackson, Mississippi 39289-0385

CERTIFIED MAIL: 7002 0460 0003 7596 1963

Subject: Koppers Inc. - Grenada Plant
NPDES No.: MSR220005
2005 Annual Storm Water Sampling Results

Enclosed you will find information relevant to the 2005 Storm Water Sampling activities at the Koppers Inc. – Grenada Plant as required by Part IV.D of NPDES Permit No.: MSR220005. The sampling of storm water was conducted at Outfalls 005, 006 and 007. The balance of the outfalls was not sampled pursuant to exemptions allowed under Part IV.C.4 of the permit. An explanation of these monitoring exemptions was provided in the 2001 storm water sampling report submitted to the MSDEQ on January 4, 2002.

Please note that an additional set of analytical results for Outfall 006 is attached for a sample taken on December 15, 2005 (Sample Number: BB94300). These results were not utilized in the calculation of the data on the DMR due to our being uncertain of the exact time discharge through the weir began. Part IV.C.5 of the permit states "For other discharges, a grab sample during the first thirty minutes...shall be taken". Consequently, an additional sample was taken on December 24th, 2005 and the corresponding analytical results utilized.

Per Part IV.B of the permit a visual inspection and evaluation of all industrial areas contributing to storm water discharge was conducted. Various structural and non-structural storm water controls were considered in this assessment. A completed "Inspection Report and Certification Form" as well as supplemental information is attached.

If you have any questions please call.

Sincerely,

Kevin B. Coker

Part VII.

Inspection Report and Certification Form
For Storm Water Pollution Prevention Plan Evaluation

Wood Treater Storm Water General NPDES Permit No. MSR220005

(Please Print)

Owner and/or Operator: Koppers Inc.

Facility Name: Koppers Inc. - Grenada Plant

Facility Location: One Koppers Drive; The Plant, MS 38960

Date and Time: January 20, 2006 & January 21, 2006, Commencing @ 8:00 Am

Inspector(s): Kevin Coker

Date of Last Rainfall: January 16, 2006 Estimated Amount: 1.65 inches

Deficiencies Noted During the Inspection (attach additional sheets if necessary):

Details Are Provided In The Attachment.

Corrective Action Needed (attach additional sheets if necessary):

Details Are Provided In The Attachment

RECEIVED FEB 2006

Corrective Action Compliance Schedule:

See Attachment.

Based upon this inspection which I or personnel under my direct supervision conducted, I certify that all pollution control measures are adequate and have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan filed with the Office of Pollution Control and good engineering practices as required by the above referenced permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons 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 fines and imprisonment for knowing violations.

I further certify that the Mississippi Office of Pollution Control has been notified of any changes pertinent to our storm water permit as required in Part II.C.

Kevin B. Coker	Kevin B. Coker	1-27-06
Authorized Name (Print)	Signature	Date

These reports shall be submitted annually, as required in the permit, to:

Chief, Industrial Branch
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385

Visual Site Inspection & Evaluation
NPDES Permit No.: MSR220005
Coverage Year: 2005
KOPPERS INC. – Grenada Plant

Area/Activity/BMP	Possible Contaminants	Observation & Corrective Action
Exposed Inventory Status	ALL	There has been a reduction in the treated inventory quantities stocked at the plant over the previous 12 months. At this time the storage yard is being reorganized. Subsequent to the reorganization an evaluation of the outfall sampling locations will be conducted per Part IV.C.6, "Representative Discharge", of the permit. The focus of the reorganizing initiative is to minimize the plant's treated wood storage yard footprint gaining efficiency in inventory movement in the process.
Storm Water Management Controls	ALL	The effectiveness of various controls required by Part III.7.b was assessed. Spill risks at the plant's chemical loading and unloading stations, process areas, historical spill areas, and tank farm were evaluated. All structural containments were intact and effective. Various other non-structural Best Management Practices were also evaluated and found to be effective. Banks and slopes were found to be intact. Erosion is limited. Additional seeding of ditches will ensue this Spring. Spill prevention controls and countermeasures were found to be intact. Spill contact numbers were posted, the appropriate training of personnel has been completed, and response equipment and materials was inventoried. Concrete containments are impervious and in place.
Outfalls 001 - 009	ALL	Testing for illicit connections was conducted on two occasions in 2005 with no areas of concern being noted. A certification to this effect has been completed in accordance to NPDES Permit No. MSR220005 Part III.C.7.b.8. Weekly inspections of the plant's outfalls were conducted during 2005. It has been determined that Outfalls 009 and 002 will require re-stabilizing.

This inspection is responsive to Part III.7. (c) and Part IV.B of NPDES Permit No.: MSR220005. Any necessary corrective actions will be completed in 60 days.

RECEIVED FEB 2006

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/27/05
Date Received: 12/16/05
Date/Time Sampled: 12/14/05 17:53
Sampled by: K. Coker

Project ID/Location: 2005 Stormwater Annual Requirements

Project Number:

Sample Description: Outfall 005 (Grab)
Sample Matrix: WATER

Sample Number: BB94304
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.16		units	150.1	MWS	12/16/05	16:00
Total Suspended Solids	390	1.0	mg/L	160.2	SMB	12/21/05	13:07
Oil & Grease	ND	2.0	mg/L	1664A	CRM	12/23/05	11:15
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	RLT	12/20/05	13:50
2-Chlorophenol	ND	0.002	mg/L	8270C	RLT	12/20/05	13:50
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	RLT	12/20/05	13:50
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	RLT	12/20/05	13:50
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	RLT	12/20/05	13:50
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	RLT	12/20/05	13:50
2-Nitrophenol	ND	0.002	mg/L	8270C	RLT	12/20/05	13:50
4-Nitrophenol	ND	0.005	mg/L	8270C	RLT	12/20/05	13:50
Pentachlorophenol	0.110	0.001	mg/L	8270C	RLT	12/20/05	13:50
Phenol	ND	0.002	mg/L	8270C	RLT	12/20/05	13:50
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	RLT	12/20/05	13:50

RECEIVED
FEB 2006

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/23/05
Date Received: 12/16/05
Date/Time Sampled: 12/14/05 21:05
Sampled by: K. Coker

Project Number:

Project ID/Location: 2005 Stormwater Annual Requirements

Sample Description: Outfall 005 (Composite)

Sample Matrix: WATER

Sample Number: BB94305

Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	462	1.0	mg/L	160.2	SMB	12/21/05	13:07
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	RLT	12/19/05	19:13
2-Chlorophenol	ND	0.002	mg/L	8270C	RLT	12/19/05	19:13
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	RLT	12/19/05	19:13
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	RLT	12/19/05	19:13
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	RLT	12/19/05	19:13
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	RLT	12/19/05	19:13
2-Nitrophenol	ND	0.002	mg/L	8270C	RLT	12/19/05	19:13
4-Nitrophenol	ND	0.005	mg/L	8270C	RLT	12/19/05	19:13
Pentachlorophenol	0.283	0.001	mg/L	8270C	RLT	12/19/05	19:13
Phenol	ND	0.002	mg/L	8270C	RLT	12/19/05	19:13
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	RLT	12/19/05	19:13

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATtn: Kevin Coker

Date Reported: 01/05/06
Date Received: 12/27/05
Date/Time Sampled: 12/24/05 09:05
Sampled by: TJ/KC

Project ID/Location: Stormwater Sampling

Project Number:

Sample Description: Grab OUTFALL 006
Sample Matrix: WATER

Sample Number: BB94932
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	7.22		units	150.1	SMB	12/28/05	07:45
Oil & Grease	ND	6.7	mg/L	1664A	CRM	01/04/06	10:30
Total Suspended Solids	50	1.0	mg/L	160.2	SMB	12/28/05	15:50
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RLT	12/28/05	16:05
2-Chlorophenol	ND	0.002	mg/L	625	RLT	12/28/05	16:05
2,4-Dichlorophenol	ND	0.002	mg/L	625	RLT	12/28/05	16:05
2,4-Dimethylphenol	ND	0.002	mg/L	625	RLT	12/28/05	16:05
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RLT	12/28/05	16:05
2,4-Dinitrophenol	ND	0.005	mg/L	625	RLT	12/28/05	16:05
2-Nitrophenol	ND	0.002	mg/L	625	RLT	12/28/05	16:05
4-Nitrophenol	ND	0.005	mg/L	625	RLT	12/28/05	16:05
Pentachlorophenol	0.326	0.001	mg/L	625	RLT	12/28/05	16:05
Phenol	ND	0.002	mg/L	625	RLT	12/28/05	16:05
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RLT	12/28/05	16:05

RECEIVED
FEB 2006

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATtn: Kevin Coker

Date Reported: 12/29/05
Date Received: 12/27/05
Date/Time Sampled: 12/24/05 12:14
Sampled by: TJ/KC

Project Number:

Project ID/Location: Stormwater Sampling

Sample Description: Composite OUTFALL 006
Sample Matrix: WATER

Sample Number: BB94933
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	29	1.0	mg/L	160.2	SMB	12/28/05	15:50
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RLT	12/28/05	17:02
2-Chlorophenol	ND	0.002	mg/L	625	RLT	12/28/05	17:02
2,4-Dichlorophenol	ND	0.002	mg/L	625	RLT	12/28/05	17:02
2,4-Dimethylphenol	ND	0.002	mg/L	625	RLT	12/28/05	17:02
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RLT	12/28/05	17:02
2,4-Dinitrophenol	ND	0.005	mg/L	625	RLT	12/28/05	17:02
2-Nitrophenol	ND	0.002	mg/L	625	RLT	12/28/05	17:02
4-Nitrophenol	ND	0.005	mg/L	625	RLT	12/28/05	17:02
Pentachlorophenol	0.323	0.001	mg/L	625	RLT	12/28/05	17:02
Phenol	ND	0.002	mg/L	625	RLT	12/28/05	17:02
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RLT	12/28/05	17:02

RECEIVED
FEB 2006

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/27/05
Date Received: 12/16/05
Date/Time Sampled: 12/14/05 16:53
Sampled by: K. Coker

Project Number:

Project ID/Location: 2005 Stormwater Annual Requirements

Sample Description: Outfall 007 (Grab)
Sample Matrix: WATER

Sample Number: BB94302
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.18		units	150.1	MWS	12/16/05	16:00
Total Suspended Solids	182	1.0	mg/L	160.2	SMB	12/21/05	13:07
Oil & Grease	ND	2.0	mg/L	1664A	CRM	12/23/05	11:15
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	RLT	12/20/05	13:22
2-Chlorophenol	ND	0.002	mg/L	8270C	RLT	12/20/05	13:22
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	RLT	12/20/05	13:22
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	RLT	12/20/05	13:22
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	RLT	12/20/05	13:22
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	RLT	12/20/05	13:22
2-Nitrophenol	ND	0.002	mg/L	8270C	RLT	12/20/05	13:22
4-Nitrophenol	ND	0.005	mg/L	8270C	RLT	12/20/05	13:22
Pentachlorophenol	0.047	0.001	mg/L	8270C	RLT	12/20/05	13:22
Phenol	ND	0.002	mg/L	8270C	RLT	12/20/05	13:22
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	RLT	12/20/05	13:22

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/23/05
Date Received: 12/16/05
Date/Time Sampled: 12/14/05 20:05
Sampled by: K. Coker

Project Number:

Project ID/Location: 2005 Stormwater Annual Requirements

Sample Description: Outfall 007 (Composite)
Sample Matrix: WATER

Sample Number: BB94303
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	266	1.0	mg/L	160.2	SMB	12/21/05	13:07
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	RLT	12/19/05	18:46
2-Chlorophenol	ND	0.002	mg/L	8270C	RLT	12/19/05	18:46
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	RLT	12/19/05	18:46
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	RLT	12/19/05	18:46
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	RLT	12/19/05	18:46
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	RLT	12/19/05	18:46
2-Nitrophenol	ND	0.002	mg/L	8270C	RLT	12/19/05	18:46
4-Nitrophenol	ND	0.005	mg/L	8270C	RLT	12/19/05	18:46
Pentachlorophenol	0.115	0.001	mg/L	8270C	RLT	12/19/05	18:46
Phenol	ND	0.002	mg/L	8270C	RLT	12/19/05	18:46
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	RLT	12/19/05	18:46

RECEIVED
FEB 2006

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/27/05
Date Received: 12/16/05
Date/Time Sampled: 12/15/05 07:25
Sampled by: K. Coker

Project Number:

Project ID/Location: 2005 Stormwater Annual Requirements

Sample Description: Outfall 006 (Grab)
Sample Matrix: WATER

Sample Number: BB94300
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
pH	8.22		units	150.1	MWS	12/16/05	16:00
Total Suspended Solids	116	1.0	mg/L	160.2	SMB	12/21/05	13:07
Oil & Grease	ND	2.0	mg/L	1664A	CRM	12/23/05	11:15
Phenolic Compounds							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	RLT	12/20/05	12:54
2-Chlorophenol	ND	0.002	mg/L	8270C	RLT	12/20/05	12:54
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	RLT	12/20/05	12:54
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	RLT	12/20/05	12:54
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	RLT	12/20/05	12:54
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	RLT	12/20/05	12:54
2-Nitrophenol	ND	0.002	mg/L	8270C	RLT	12/20/05	12:54
4-Nitrophenol	ND	0.005	mg/L	8270C	RLT	12/20/05	12:54
Pentachlorophenol	0.632	0.001	mg/L	8270C	RLT	12/20/05	12:54
Phenol	ND	0.002	mg/L	8270C	RLT	12/20/05	12:54
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	RLT	12/20/05	12:54

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

ATTN: Kevin Coker

Date Reported: 12/23/05
Date Received: 12/16/05
Date/Time Sampled: 12/15/05 10:40
Sampled by: K. Coker

Project Number:

Project ID/Location: 2005 Stormwater Annual Requirements

Sample Description: Outfall 006 (Composite)

Sample Matrix: WATER

Sample Number: BB94301

Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Total Suspended Solids	92	1.0	mg/L	160.2	SMB	12/21/05	13:07
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	8270C	RLT	12/19/05	18:18
2-Chlorophenol	ND	0.002	mg/L	8270C	RLT	12/19/05	18:18
2,4-Dichlorophenol	ND	0.002	mg/L	8270C	RLT	12/19/05	18:18
2,4-Dimethylphenol	ND	0.002	mg/L	8270C	RLT	12/19/05	18:18
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	8270C	RLT	12/19/05	18:18
2,4-Dinitrophenol	ND	0.005	mg/L	8270C	RLT	12/19/05	18:18
2-Nitrophenol	ND	0.002	mg/L	8270C	RLT	12/19/05	18:18
4-Nitrophenol	ND	0.005	mg/L	8270C	RLT	12/19/05	18:18
Pentachlorophenol	0.902	0.001	mg/L	8270C	RLT	12/19/05	18:18
Phenol	ND	0.002	mg/L	8270C	RLT	12/19/05	18:18
2,4,6-Trichlorophenol	ND	0.002	mg/L	8270C	RLT	12/19/05	18:18

Robert Thompson
Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

STORMWATER SAMPLING FORM

KOPPERS

KOPPERS INC.
Grenada Plant
One Koppers Drive
Tie Plant, MS 38960

STORM WATER RUNOFF ESTIMATION

Requirements: NPDES Permit No. MSR220005 "The sampled discharge must result from a storm greater than 0.1 inches in magnitude and occuring at least 72 hours from the previously measurable (greater than 0.1 inch rainfall) storm."

Beginning of Sampled Storm Event:	December 14th, 2005 @ 4:15 AM
Ending of Sampled Storm Event:	December 15th, 2005 @ 2:10 PM
Amount of Rain Fall Measured:	2.13 Inches
Source of Storm Event Data Collection:	Plant Gauge - Rainwise CR2477N Data Logger
Date of Most Previous Storm Event Greater Than 0.1 Inches:	December 8th, 2005 @ 12:10 PM
Time Lapse Since Most Previous Storm Event (hours):	145.99 Hours
Amount of Rain Fall Measure for Most Previous Storm Event:	0.67 Inches
Curve Number (CN):	70
Slope Factor (S):	4.29
Duration:	21 Hours 55 Minutes

STORM WATER RUNOFF CALCULATIONS			
OUTFALL NO.	RUNOFF ACREAGE / AREA	RUNOFF FACTOR (MGD/Acre)	STORM WATER RUNOFF (MGD)
001	*Exempt Per NPDES PERMIT No. MSR22005 Part IV.C.4. "Monitoring Exemptions"*		
002	*Exempt Per NPDES PERMIT No. MSR22005 Part IV.C.4. "Monitoring Exemptions"*		
003	*Exempt Per NPDES PERMIT No. MSR22005 Part IV.C.4. "Monitoring Exemptions"*		
004	*Exempt Per NPDES PERMIT No. MSR22005 Part IV.C.4. "Monitoring Exemptions"*		
005	26.2	0.0079	0.20698
006	9.5	0.0079	0.07505
007	13.2	0.0079	0.10428
008	*Exempt Per NPDES PERMIT No. MSR22005 Part IV.C.4. "Monitoring Exemptions"*		
009	*Exempt Per NPDES PERMIT No. MSR22005 Part IV.C.4. "Monitoring Exemptions"*		

Note: MGD - "Million Gallons Discharged"

RECEIVED
FEB 2006

STORMWATER SAMPLING FORM

KOPPERS INC.
Grenada Plant
One Koppers Drive
Tie Plant, MS 38960

STORM WATER RUNOFF ESTIMATION

Requirements: NPDES Permit No. MSR220005 "The sampled discharge must result from a storm greater than 0.1 inches in magnitude and occuring at least 72 hours from the previously measurable (greater than 0.1 inch rainfall) storm."

Beginning of Sampled Storm Event:	December 24th, 2005 @ 5:52AM
Ending of Sampled Storm Event:	December 24th, 2005 @ 1:58 PM
Amount of Rain Fall Measured:	1.13 Inches
Source of Storm Event Data Collection:	Plant Gauge - Rainwise CR2477N Data Logger
Date of Most Previous Storm Event Greater Than 0.1 Inches:	December 15th, 2005 (Started on December 14th)
Time Lapse Since Most Previous Storm Event (hours):	219.69 Hours
Amount of Rain Fall Measure for Most Previous Storm Event:	2.13 Inches
Curve Number (CN):	70
Slope Factor (S):	4.29
Duration:	8 Hours 12 Minutes

STORM WATER RUNOFF CALCULATIONS			
OUTFALL NO.	RUNOFF ACREAGE / AREA	RUNOFF FACTOR (MGD/Acre)	STORM WATER RUNOFF (MGD)
001	*Exempt Per NPDES PERMIT No. MSR22005 Part IV.C.4. "Monitoring Exemptions"*		
002	*Exempt Per NPDES PERMIT No. MSR22005 Part IV.C.4. "Monitoring Exemptions"*		
003	*Exempt Per NPDES PERMIT No. MSR22005 Part IV.C.4. "Monitoring Exemptions"*		
004	*Exempt Per NPDES PERMIT No. MSR22005 Part IV.C.4. "Monitoring Exemptions"*		
005	*Outfall Sampled on December 14th, 2005*		
006	9.5	0.00045	0.004275
007	*Outfall Sampled on December 14th, 2005*		
008	*Exempt Per NPDES PERMIT No. MSR22005 Part IV.C.4. "Monitoring Exemptions"*		
009	*Exempt Per NPDES PERMIT No. MSR22005 Part IV.C.4. "Monitoring Exemptions"*		

Note: MGD - "Million Gallons Discharged"

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 4
ATLANTA FEDERAL CENTER
61 FORSYTH STREET
ATLANTA, GEORGIA 30303-8960

DEC 2 2 2005

CERTIFIED MAIL 7004 2510 0006 0102 8602
RETURN RECEIPT REQUESTED

Kevin B. Coker, Plant Manager
Koppers Inc.
P.O. Box 160
Tie Plant, MS 38960

SUBJ: Grenada, Mississippi Facility Grenada Co.
Compliance Evaluation Inspection and Pretreatment Inspection
General Storm Water Permit No. MSR220005
Pretreatment No. MSP090300

Dear Mr. Coker:

On May 25, 2005, the U.S. Environmental Protection Agency (EPA), Region 4 and the Mississippi Department of Environmental Quality (MDEQ) performed a Compliance Evaluation Inspection and Pretreatment Industrial User inspection of the Grenada, Mississippi facility (Facility). The results of EPA's inspection are summarized in the enclosed report. EPA's participation in this inspection was to evaluate the Facility's compliance with the treatment and disposal of process wastewater and storm water in accordance with the requirements of MDEQ's National Pollutant Discharge Elimination System permit and pretreatment permit.

During the inspection, it was noted that in some areas, permit conditions were not being followed and implemented. These areas are noted in the inspection report and should be given attention by the Facility. Please provide this office with the corrective actions your facility has taken or plans to take within thirty (30) days of receipt of this letter.

Enclosed is a document entitled *U.S. EPA Small Business Resources-Information Sheet* for your use and to assist you in understanding the compliance assistance resources and tools available to you. However, any decision to seek compliance assistance at this time does not relieve you of your obligation to EPA, does not create any new rights or defenses, and will not affect EPA's decision to pursue enforcement action. In addition, the Securities and Exchange Commission requires its registrants to periodically disclose environmental legal proceedings in statements filed with the Commission. To assist you, EPA has also enclosed a document entitled *Notice of Securities and Exchange Commission Registrants' Duty to Disclose Environmental Legal Proceedings.*

If you have specific questions or need additional information, please contact Kenneth Kwan, P.E., at (404) 562-9752.

Sincerely,

Arthur L. Collins

Arthur L. Collins, Chief
Gulf Enforcement Section
Water Programs Enforcement Branch
Water Management Division

Enclosures

cc: Mississippi Department of Environmental Quality
Peter Moore, EPA HQ

EPA

United States Environmental Protection Agency

Washington, D.C. 20460

Water Compliance Inspection Report

Form Approved
OMB No.2040-0057
Approval Expires
8-31-98

Section A: National Data System Coding (i.e., PCS)

Transaction Code	NPDES	yr/mo/day	Inspection Type	Inspector	Facility Type
N	MSR220005	05/05/25	C	J	2

Remarks

Inspection Work Days Facility Self Monitoring Evaluation Rating B1 QA ----------Reserved----------

Section B: Facility Data

Name and Location of Facility Inspected	Entry Time/Date	Permit Effective Date
Koppers Inc. Tie Plant Road Tie Plant, MS 38960	9:25 PM CST / 5/25/05	N/A
	Exit Time/Date: 5/25/05	**Permit Expiration Date:** Operate under MDEQ's expired Storm Water Wood Treater General Permit

Names of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)

Name, Address of Responsible Official/Title/Phone and Fax Number

Kevin B. Coker, Plant Manager
P.O. Box 160
Tie Plant, MS 38960

Contacted

Tel. 662/226-4584 ext. 11 Fax: 662/226-4588 Yes X No

Other Facility Data

Koppers Inc. also has a pretreatment permit issued by MDEQ. The permit, MSP090300, became effective on 9/18/2001 and expires on 8/31/2006. The permit allows the discharge of treated process wastewater and contaminated storm water to the City of Grenada's POTW.

Section C: Areas Evaluated During Inspection *(Check only those areas evaluated)*

X	Permit	X	Flow Measurement	X	Operations &		CSO/SSO (Sewer
X	Records/Reports	X	Self-Monitoring Program		Sludge	X	Pollution Prevention
X	Facility Site Review		Compliance Schedules	X	Pretreatment		Multimedia
X	Effluent/Receiving Waters	X	Laboratory	X	Storm Water	X	Other: SWPPP

Section D: Summary of Findings/Comments ***(Attach additional sheets of narrative and checklist as necessary)***

See Attachment

Name(s) and Signatures of Inspectors	Agency/Office/Phone and Fax Numbers	Date
Kenneth Kwan	U.S. EPA Region 4 Water Programs Enforcement Branch 404/562-9752 FAX 404/562-9728	12/6/05
Signature of Reviewer Arthur L. Collins	Agency/Office Chief, Gulf Enforcement Section U.S. EPA Region 4 404/562-9742	Date 12/14/05

EPA Form 3560-3 (Rev 9-94) Previous editions are obsolete

Koppers Industries, Inc.
Grenada, MS
NPDES Inspection and Pretreatment Industrial User

On May 25, 2005, personnel from the United States Environmental Protection Agency (EPA), Region 4 and the Mississippi Department of Environmental Quality (MDEQ) conducted a Compliance Evaluation Inspection (CEI) and an Industrial User (IU) inspection at the Grenada, Mississippi facility (Facility). The purpose of the CEI was to evaluate the Facility's treatment and discharge of storm water in accordance with the National Pollutant Discharge Elimination System (NPDES) permit. The CEI focused mainly on records review, operation & maintenance evaluation, sampling procedures, Storm Water Pollution Prevention Plan (SWPPP), and site inspection records. The purpose of the IU inspection was to evaluate the Facility's compliance with the IU permit issued by MDEQ under 40 Code of Federal Regulations (C.F.R.) Part 403, and with the General Pretreatment Regulations at 40 C.F.R. Part 403.10(e). The IU focused primarily on records review, process area overview, pretreatment system review and discussions with personnel. Credentials were presented to Mr. Coker upon entry, and an exit review was held with him.

The following individuals participated in the inspection:

Name	Organization	Telephone
Kenneth Kwan	U.S. EPA, Region 4	404/562-9752
Azzam Abu-Mirshid	MDEQ	601/961-5050
Kevin B. Coker Plant Manager	Koppers Inc.	662/226-4584 ext. 11
Blair R. Simpson General Yard Supervisor	Koppers Inc.	662/226-4584 ext. 12

The details of these inspections and the relevant findings are described in the subsequent sections of this report.

NPDES MSR00xxxx / MSR220005 – CEI INSPECTION FINDINGS:

Permit

Koppers has a Storm Water Baseline General Permit issued by MDEQ on September 12, 2000, and expired on September 11, 2005. The permit does not allow for the discharge of storm water runoff associated with wood treating operations. Storm water discharge from wood treating activities is not eligible for coverage under this Storm Water Baseline General Permit in accordance with Part 1.B. Koppers is working with MDEQ to revise this permit to a Storm Water Wood Treater General Permit. Koppers should operate under the continuation of their expired Storm Water Wood Treater General Permit number MSR220005.

Storm water generated on the Facility's footprint (approximately 130 acres), including the process area and storage yard, is discharged through 9 outfalls (001 – 009).

SWPPP/SPCC

Documentation relating to testing and certification for illicit connection was not made available to EPA during the inspection. However, Koppers has submitted this certification to EPA in a letter dated July 22, 2005.

It is recommended that employee training include topics such as cleaning procedures to prevent over-spreading of residual material off the drip pad, control(s) to minimize tracking of material off the drip pad from moving equipment, timely removal of incidental drippage from wood storage yard, etc.

The telephone number for spill response on page 15 of the Spill Prevention, Containment, and Countermeasure (SPCC) is incorrect. MDEQ spill report number is 800/222-6362.

The SWPPP/SPCC contained an inventory of tanks. It would be more useful if the tanks were grouped by location or common containment area. Also, it is recommended that the SWPPP/SPCC plan have a table listing the capacity of each tank and their respective secondary containment capacity.

SWPPP Implementation

Part III.C.7.b.(5) and (6) of the permit requires the permittee to implement good housekeeping, and spill prevention & response procedures in order to minimize the potential release of pollutants from material storage areas to waters of the State through plant runoff. Also, spills and incidental drippage should be cleaned up immediately as required by the Resource Conservation and Recovery Act (RCRA) at 40 C.F.R. Part 264.1.(g)(8)(i). These procedures were not followed since incidental drippage of creosote on bare ground was observed near the pole storage area along outfall 006.

Part III.C.7.b.(3) requires prevention measures to limit erosion. Banks along outfall 008 were stripped of vegetation with high potential for soil erosion. No erosion and sediment control was in place to limit erosion.

Storm Water Sampling

The SWPPP, dated June 25, 2004, stated that only outfalls 001, 008 and 009 are exempt from monitoring requirements. A review of sampling records showed no monitoring data for outfall 003. Unless additional justification is provided, Koppers should initiate storm water sampling at outfall 003.

Part IV.C.5 of the permit establishes specific criteria for conducting storm water samples. All samples should be obtained during the first 30 minutes of a discharge (or as soon thereafter as practicable). This record must be recorded as part of the storm water sampling procedures and records. Koppers' sampling records do not contain adequate rainfall and sampling data. Only the sample time and the amount of the storm events were recorded in the sampling log. There was no record on the exact time of storm water discharge at each outfall. This sampling requirement is intended to characterize the

maximum concentration of pollutants that may be present in storm water discharge. Collection of samples during a storm water event meeting these criteria, ensures that the resulting data will accurately represent the first flush condition of the Facility's industrial discharge.

MSP090300 - PRETREATMENT INSPECTION FINDINGS:

Permit

Koppers has a pretreatment permit issued by MDEQ on September 18, 2001, and expires on August 31, 2006. The permit allows for the discharge of treated process wastewater and contaminated storm water to the City of Grenada's Publicly Owned Treatment Works. The treatment process consists of storage tanks with chemical addition for pH adjustment and flocculation, oil/water separator, biological treatment, clarification, and discharge tank. Koppers is subject to the categorical standards for wood preserving at 40 C.F.R. Part 429 Subpart G; the permit, therefore, reflects both categorical standards and local limits.

Records/Reports

The number of excursions column in the Discharge Monitoring Report (DMR) should only be used to report the number of weekly and daily permit exceedances. The monthly permit exceedance should not be counted when totaling the number of exceedances in each month.

Preliminary reviews of the monitoring data for the past three years (2003-2005) indicate permit exceedances of pentachlorophenol and flow requirement.

Summary

Koppers should update and implement the SWPPP to address the following noted during the inspection:

1. Cleanup of any incidental drippage of creosote on bare ground immediately as required by RCRA at 40 C.F.R. Part 264.1(g)(8)(i). Koppers should evaluate the treated wood storage yard inspection and cleanup procedures to ensure immediate cleanup of drippage.

2. Provide justification for exempting outfall 003 from storm water sampling requirements.

3. Update MDEQ's spill report telephone number to 800/222-6362.

4. Koppers violated Part III.C.7.b.(3) of the permit by failing to install erosion and sediment controls. Koppers should install necessary BMP controls (i.e., silt fence, temporary stabilization, vegetative buffer, and etc.) at banks along outfall 008.

5. Establish a sampling protocol to ensure that storm water samples are collected in accordance with Part IV.C.5 of the permit requirements.

With regard to the pretreatment permit, Koppers should fill out the DMR forms correctly concerning the number of permit exceedances. Also, Koppers should evaluate existing operations (i.e., spill response, pollution prevention, employee training, drip pad operation, material inventory, good housekeeping measures, etc.) and its wastewater treatment process system to determine if modification and/or additional controls are necessary to maintain compliance with pretreatment standards, as specified in Part I.A.1. of the permit for pentachlorophenol and flow.

Kevin B. Coker
Plant Manager

MSR
220005
Grenada

KOPPERS

RECEIVED
NOV 14 2005
Dept. of Environmental Quality
Office of Pollution Control

Koppers Inc.
Utility Poles and Piling
P. O. Box 160
Tie Plant, MS 38960
Tel 662 226 4584
Fax 662 226 4588
Cokerkb@koppers.com
www.koppers.com

November 2, 2005

Mr. Azzam Abu-Mirshid, P.E.
Mississippi Department of Environmental Quality
Timber And Wood Products Branch - ECED
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385

CERTIFIED MAIL: 7002 0460 0003 7596 1765

Subject: Koppers Inc. Grenada Facility - Incident Notification

Dear Mr. Abu-Mirshid:

Per your request this document serves as written notification concerning the incident you were notified of on Friday, September 9, 2005. The NRC (Incident No. 71918) and LEPC were also notified of this incident.

A water leak from an eight-inch underground water line washed soil into the plant's central ditch. The area of this erosion fell within the umbrella of the plant's soil management program; therefore, precautionary measures were taken to ensure protection of the environment. Subsequent to the discovery of the leak, multiple booms and runs of absorbent cloth were placed down stream across the ditch as precautionary measures. The stream was monitored and assessed for several days. At no instance was wildlife in and around the stream observed to be adversely affected.

Per our soil management program, soil from this area has been sampled for the purpose of a TCLP analysis. The results indicate that the material is non-hazardous. Additionally, per your direction, samples of the stream's water above and below the point of the incident were also taken and analyzed for PAH's and pentachlorophenol. The results of these additional samples also tested to be non-hazardous. The analytical results of all three samples are attached for your review.

At this time, all booms have been removed and the area of the bank that was eroded by the water leak has been stabilized.

Should you have any questions or concerns please call.

Sincerely,

Kevin B. Coker

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

Attn: Blair Simpson

Date Reported: 09/29/05
Date Received: 09/20/05
Date/Time Sampled: 09/20/05 07:50
Sampled by: KC

Project ID/Location: NE Corner of Bridge

Project Number:

Sample Description: Special Soil @ Bridge
Sample Matrix: SOIL

Sample Number: BB90433
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
TCLP Metals							
Arsenic, TCLP	ND	0.05	mg/L	200.7	BTH	09/22/05	16:06
Barium, TCLP	1.47	0.01	mg/L	200.7	BTH	09/22/05	16:03
Cadmium, TCLP	ND	0.02	mg/L	200.7	BTH	09/22/05	16:06
Chromium, TCLP	ND	0.05	mg/L	200.7	BTH	09/22/05	16:04
Lead, TCLP	0.20	0.05	mg/L	200.7	BTH	09/22/05	16:04
Mercury, TCLP	ND	0.0002	mg/L	7470A	RAH	09/26/05	12:30
Selenium, TCLP	ND	0.05	mg/L	200.7	BTH	09/22/05	16:06
Silver, TCLP	ND	0.005	mg/L	200.7	BTH	09/22/05	16:05
TCLP Volatile Organics							
Benzene	ND	0.1	mg/L	8260B	KRE	09/22/05	08:55
Carbon tetrachloride	ND	0.1	mg/L	8260B	KRE	09/22/05	08:55
Chlorobenzene	ND	0.1	mg/L	8260B	KRE	09/22/05	08:55
Chloroform	ND	0.1	mg/L	8260B	KRE	09/22/05	08:55
1,2-Dichloroethane	ND	0.1	mg/L	8260B	KRE	09/22/05	08:55
1,1-Dichloroethylene	ND	0.1	mg/L	8260B	KRE	09/22/05	08:55
Methyl ethyl ketone	ND	1.0	mg/L	8260B	KRE	09/22/05	08:55
Tetrachloroethylene	ND	0.1	mg/L	8260B	KRE	09/22/05	08:55
Trichloroethylene	ND	0.1	mg/L	8260B	KRE	09/22/05	08:55
Vinyl chloride	ND	0.1	mg/L	8260B	KRE	09/22/05	08:55
TCLP Semivolatile Organics							
2,4-Dinitrotoluene	ND	0.05	mg/L	8270C	RLT	09/21/05	12:18
Hexachlorobenzene	ND	0.05	mg/L	8270C	RLT	09/21/05	12:18
Hexachlorobutadiene	ND	0.1	mg/L	8270C	RLT	09/21/05	12:18
1,4-Dichlorobenzene	ND	0.1	mg/L	8270C	RLT	09/21/05	12:18
Hexachloroethane	ND	0.1	mg/L	8270C	RLT	09/21/05	12:18
Nitrobenzene	ND	0.1	mg/L	8270C	RLT	09/21/05	12:18
Pyridine	ND	0.1	mg/L	8270C	RLT	09/21/05	12:18
Cresols, Total	ND	0.1	mg/L	8270C	RLT	09/21/05	12:18
Pentachlorophenol	ND	0.1	mg/L	8270C	RLT	09/21/05	12:18
2,4,5-Trichlorophenol	ND	0.1	mg/L	8270C	RLT	09/21/05	12:18
2,4,6-Trichlorophenol	ND	0.1	mg/L	8270C	RLT	09/21/05	12:18

Sample Description: Special So[illegible] Bridge

Sample Number: BB90433

Page Number: 2

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
TCLP Pesticides							
Chlordane	ND	0.015	mg/L	8081A	KRE	09/28/05	13:27
Endrin	ND	0.01	mg/L	8081A	KRE	09/28/05	13:27
Heptachlor	ND	0.005	mg/L	8081A	KRE	09/28/05	13:27
Heptachlor epoxide	ND	0.005	mg/L	8081A	KRE	09/28/05	13:27
Lindane	ND	0.2	mg/L	8081A	KRE	09/28/05	13:27
Methoxychlor	ND	1.0	mg/L	8081A	KRE	09/28/05	13:27
Toxaphene	ND	0.25	mg/L	8081A	KRE	09/28/05	13:27
TCLP Herbicides							
2,4-D	ND	5.0	mg/L	8150	KRE	09/27/05	14:22
2,4,5-TP (Silvex)	ND	0.5	mg/L	8150	KRE	09/27/05	14:22

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

The reported test results relate only to the items tested or to the samples as received by the laboratory. Reports shall not be reproduced except in full without the written approval of the laboratory. The Chain-of-Custody and the Cooler Receipt Check List are considered part of the final report; also, if included, the Notification of Deviation and the Narrative are part of the final report.

Common Reporting Symbols

ND - Not Detected
mg - milligrams (0.001 g)
ug - micrograms (0.000 001 g)
ng - nanograms (0.000 000 001 g)

TNTC - Too numerous to count
> - greater than
< - less than

L - Liters
kg - kilograms

For other definitions and technical information, such as TCLP Regulatory Limits, please visit Argus' Web Site at ArgusAnalytical.com.

Reporting Basis. Unless otherwise noted, all results are reported on the as received basis. Results reported under the heading "Dry Weight Basis" have been adjusted for moisture content

Subcontracted Parameters. A three digit numerical entry for the analysts initials indicates the parameter was subcontracted. Where possible, Argus uses NELAP certified laboratories.

NELAP. Unless otherwise noted, the test results meet all NELAP requirements for the methods listed in Argus' Scope of Accreditation. The parameters or methods listed below are typically <u>not</u> included in Argus' NELAP Scope of Accreditation. These are <u>not</u> included in Argus' scope because NELAP certification is either not available or Argus may not have applied for certification. For example, although drinking water methods are covered by Argus' Drinking Water Certification, NELAP does not offer accreditation for the Drinking Water matrix. The non-NELAP certified items include:

ASTM methods
Drinking Water methods
Parameters with a ' * ' suffix

NIOSH methods
Method citations with an "M" suffix

Modified methods, indicated by an "M" suffix, are described in an attached narrative. Although Argus is typically not NELAP certified for the modified method, Argus is usually certified for the unmodified reference method.

Koppers Company
1 Koppers Drive
Tie Plant MS 38960

Outfall:
Location: NE Corner of Bridge

ARGUS ANALYTICAL, INC.
235 HIGHPOINT DRIVE
RIDGELAND, MS 39157

Phone: 601/957-2676
FAX: 601/957-1887

T(W S) LC: KOP_01W

Cooler:

Site No: 222
dmps: ---
coc_r10
Kop_001_W
U:03/29/05 P:03/29/05 15:11:31

Contact: Blair Simpson FAX: 226-4588
Farrell Wilson 226-4584

40

Action by ARGUS: Pick up Sample, drop off kit

Field Readings:

Comments:
Special Soil @ Bridge Sample

	Sample description	Sampled by	Sampling Date	Sampling Time	Container/Preservative	Qnty	C G	Parameters	Lab Use
1	Special Soil @ Bridge	KBC	9-20-05	~~1150A~~	1000 ml Plastic / None	1	G	TCLP	BB90433
	Analysis								

	Person	Date/Time		Person	Date/Time
Relinquished by:	Kevin B. Cox	9-20-05/11:00AM	Received by:	PM	9/20/05 11:10
Relinquished by:	PM	9/20/05 13:00	Received by:	C	9/20/05 14:25

Cooler Receipt Check List

Sample Number(s): BB90433

Date Opened: 9-20-05

Opened by: G

Client: Koppers

	If checked, refer to the "Sample Receipt - Notification of Deviation" (attached).
	Per previous discussion with the client, thermal preservation not required, and Deviation Notification **not** required.

Login Checked by: JM

Temperature when opened: 4°(ice) Ambient Measured (1): _____

Type of wrapping material: None Peanuts Bubblewrap Paper Other

(1) In < 50% ice, use a thermometer to measure the temperature at the bottom of the cooler.

Cooler custody seals intact? n/a Y/N Signed & dated? Y/N

Container custody seals intact? n/a Y/N

COC papers received? Y/N Receipt properly noted on COC? Y/N

COC papers properly filled in (signed in ink)? Y/N Container labels correspond to the COC? Y/N

All containers intact (not broken)? Y/N

Correct containers/preservatives used? Y/N

Container labels filled in? Y/N

Samples received within holding times? Y/N

Short HT tests: BOD Br Color Cr6 DissMet DO Fecal MBAS Nitrate or Nitrite OrP pH SS Sulfite TCB/TPC TRC Turb

Lab Notified:

Were Trip Blanks rec'd with VOAs? Y/N

VOA vials - headspace detected? n/a Y/N

If headspace detected, < 0.25" dia? Y/N

VOA soils - 5035 compliance criteria met? n/a Y/N (if met, circle the applicable method, below)

High concentration jar (48 hr)

High concentration pre-weighed vial (methanol - 14 d)

Low conc EnCor samplers (48 hr)

Low conc pre-weighed vials (sodium bisulfate - 14 d)

Lab Notified (date, time, initials): _____

For further information concerning this project, refer to the following attachments which are considered part of the final report. These attachments provide additional information on topics such as method modifications or NELAP accreditation.

- Cooler Receipt Check List (always attached)
- Sample Receipt - Notification of Deviation (optional)
- Supplementary Report Information (always attached)
- Case Narrative (optional)

Comments: _____

Sample Receipt - Notification of Deviation

Sample Number(s): BB90433

Purpose: notify a client of a possible sample receipt deviation.

The information on this sheet should be telephoned or faxed to the indicated client. This form will be attached to the completed analytical test report.

The client should confirm that the sample can be tested as received or the client can cancel the test and send a replacement sample.

Client _____ Telephone _____

Contact _____ Fax _____

	Date/time	Initials
Telephone contact attempted:		
Fax sent		

Comments: _____

The following deviation(s) were noted and relayed to the client (see note, below):

- [ ] Incomplete COC
- [ ] Missing duplicate
- [ ] Missing trip blank
- [ ] Holding time(s) exceeded upon receipt
- [ ] Sample receipt temperature
- [ ] Incorrect container/preservative
- [ ] Not enough sample
- [ ] VOA vials - excessive head space
- [ ] VOA solids - 5035 sampling & handing
- [ ] Other

Notes: Per Blair run a full TCLP 9-20-05 13:40 JM

- [ ] Note: If checked, Client notification was not required. As per previous discussions with the client, the sample(s) can be tested as received.

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 10/21/05
Date Received: 10/18/05
Date/Time Sampled: 10/18/05 08:58
Sampled by: KC

Project ID/Location: Special Analysis

Project Number:

Sample Description: Downstream
Sample Matrix: WATER

Sample Number: BB91554
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RLT	10/18/05	18:24
2-Chlorophenol	ND	0.002	mg/L	625	RLT	10/18/05	18:24
2,4-Dichlorophenol	ND	0.002	mg/L	625	RLT	10/18/05	18:24
2,4-Dimethylphenol	ND	0.002	mg/L	625	RLT	10/18/05	18:24
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RLT	10/18/05	18:24
2,4-Dinitrophenol	ND	0.005	mg/L	625	RLT	10/18/05	18:24
2-Nitrophenol	ND	0.002	mg/L	625	RLT	10/18/05	18:24
4-Nitrophenol	ND	0.005	mg/L	625	RLT	10/18/05	18:24
Pentachlorophenol	ND	0.001	mg/L	625	RLT	10/18/05	18:24
Phenol	ND	0.002	mg/L	625	RLT	10/18/05	18:24
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RLT	10/18/05	18:24
PAHs							
Acenaphthene	ND	0.002	mg/L	8270C	RLT	10/20/05	17:36
Acenaphthylene	ND	0.002	mg/L	8270C	RLT	10/20/05	17:36
Anthracene	ND	0.002	mg/L	8270C	RLT	10/20/05	17:36
Benzo(a)anthracene	ND	0.002	mg/L	8270C	RLT	10/20/05	17:36
Benzo(a)pyrene	ND	0.002	mg/L	8270C	RLT	10/20/05	17:36
Benzo(b)fluoranthene	ND	0.005	mg/L	8270C	RLT	10/20/05	17:36
Benzo(g,h,i)perylene	ND	0.005	mg/L	8270C	RLT	10/20/05	17:36
Benzo(k)fluoranthene	ND	0.005	mg/L	8270C	RLT	10/20/05	17:36
Chrysene	ND	0.002	mg/L	8270C	RLT	10/20/05	17:36
Dibenzo(a,h)anthracene	ND	0.005	mg/L	8270C	RLT	10/20/05	17:36
Fluoranthene	ND	0.002	mg/L	8270C	RLT	10/20/05	17:36
Fluorene	ND	0.002	mg/L	8270C	RLT	10/20/05	17:36
Indeno(1,2,3-cd)pyrene	ND	0.005	mg/L	8270C	RLT	10/20/05	17:36
2-Methylnaphthalene	ND	0.002	mg/L	8270C	RLT	10/20/05	17:36
Naphthalene	ND	0.002	mg/L	8270C	RLT	10/20/05	17:36
Phenanthrene	ND	0.002	mg/L	8270C	RLT	10/20/05	17:36
Pyrene	ND	0.002	mg/L	8270C	RLT	10/20/05	17:36

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

ARGUS ANALYTICAL, INC.
235 Highpoint Drive
Ridgeland, Mississippi 39157
Telephone: 601/957-2676 FAX: 601/957-1887

NELAP Accredited
LELAP 04023

To: Koppers Company
1 Koppers Drive
Tie Plant, MS 38960

Attn: Kevin Coker

Date Reported: 10/21/05
Date Received: 10/18/05
Date/Time Sampled: 10/18/05 09:09
Sampled by: KC

Project ID/Location: Special Analysis

Project Number:

Sample Description: Upstream
Sample Matrix: WATER

Sample Number: BB91555
Page Number: 1

Parameter	Result	Det Limit	Units	Method	Analysts	Date	Time
Phenols							
4-Chloro-3-methylphenol	ND	0.002	mg/L	625	RLT	10/18/05	18:52
2-Chlorophenol	ND	0.002	mg/L	625	RLT	10/18/05	18:52
2,4-Dichlorophenol	ND	0.002	mg/L	625	RLT	10/18/05	18:52
2,4-Dimethylphenol	ND	0.002	mg/L	625	RLT	10/18/05	18:52
4,6-Dinitro-2-methylphenol	ND	0.001	mg/L	625	RLT	10/18/05	18:52
2,4-Dinitrophenol	ND	0.005	mg/L	625	RLT	10/18/05	18:52
2-Nitrophenol	ND	0.002	mg/L	625	RLT	10/18/05	18:52
4-Nitrophenol	ND	0.005	mg/L	625	RLT	10/18/05	18:52
Pentachlorophenol	ND	0.001	mg/L	625	RLT	10/18/05	18:52
Phenol	ND	0.002	mg/L	625	RLT	10/18/05	18:52
2,4,6-Trichlorophenol	ND	0.002	mg/L	625	RLT	10/18/05	18:52
PAHs							
Acenaphthene	ND	0.002	mg/L	8270C	RLT	10/20/05	18:03
Acenaphthylene	ND	0.002	mg/L	8270C	RLT	10/20/05	18:03
Anthracene	ND	0.002	mg/L	8270C	RLT	10/20/05	18:03
Benzo(a)anthracene	ND	0.002	mg/L	8270C	RLT	10/20/05	18:03
Benzo(a)pyrene	ND	0.002	mg/L	8270C	RLT	10/20/05	18:03
Benzo(b)fluoranthene	ND	0.005	mg/L	8270C	RLT	10/20/05	18:03
Benzo(g,h,i)perylene	ND	0.005	mg/L	8270C	RLT	10/20/05	18:03
Benzo(k)fluoranthene	ND	0.005	mg/L	8270C	RLT	10/20/05	18:03
Chrysene	ND	0.002	mg/L	8270C	RLT	10/20/05	18:03
Dibenzo(a,h)anthracene	ND	0.005	mg/L	8270C	RLT	10/20/05	18:03
Fluoranthene	ND	0.002	mg/L	8270C	RLT	10/20/05	18:03
Fluorene	ND	0.002	mg/L	8270C	RLT	10/20/05	18:03
Indeno(1,2,3-cd)pyrene	ND	0.005	mg/L	8270C	RLT	10/20/05	18:03
2-Methylnaphthalene	ND	0.002	mg/L	8270C	RLT	10/20/05	18:03
Naphthalene	ND	0.002	mg/L	8270C	RLT	10/20/05	18:03
Phenanthrene	ND	0.002	mg/L	8270C	RLT	10/20/05	18:03
Pyrene	ND	0.002	mg/L	8270C	RLT	10/20/05	18:03

Sample Description: Upstream

Sample Number: BB91555

Page Number: 2

Quality Assurance/Quality Control

B. G. Giessner, Ph.D.

* See supplementary information, attached.

MP1

General

The Chain-of-Custody and the Cooler Receipt Check List are considered part of the final report; also, if included, the Notification of Deviation and the Narrative are part of the final report.

The reported test results relate only to the items tested or to the samples as received by the laboratory. Reports shall not be reproduced except in full without the written approval of the laboratory.

Any referenced accreditation or certification is not an endorsement by any accrediting authority.

Common Reporting Symbols

ND - Not Detected
mg - milligrams (0.001 g)
ug - micrograms (0.000 001 g)
ng - nanograms (0.000 000 001 g)

TNTC - Too numerous to count
> - greater than
< - less than

L - Liters
kg - kilograms

For other definitions and technical information, such as TCLP Regulatory Limits, please visit Argus' Web Site at ArgusAnalytical.com.

Reporting Basis. Unless otherwise noted, all results are reported on the as received basis. Results reported under the heading "Dry Weight Basis" have been adjusted for moisture content

Subcontracted Parameters. A three digit numerical entry for the analysts initials indicates the parameter was subcontracted. Where possible, Argus uses NELAP certified laboratories.

NELAP. Unless otherwise noted, the test results meet all NELAP requirements for the methods listed in Argus' Scope of Accreditation. The parameters or methods listed below are typically <u>not</u> included in Argus' NELAP Scope of Accreditation. These are <u>not</u> included in Argus' scope because NELAP certification is either not available or Argus may not have applied for certification. For example, although drinking water methods are covered by Argus' Drinking Water Certification, NELAP does not offer accreditation for the Drinking Water matrix. The non-NELAP certified items include:

ASTM methods
Drinking Water methods
Parameters with a ' * ' suffix

NIOSH methods
Method citations with an "M" suffix

Modified methods, indicated by an "M" suffix, are described in an attached narrative. Although Argus is typically not NELAP certified for the modified method, Argus is usually certified for the unmodified reference method.

ARGUS ANALYTICAL, INC
235 Highpoint Drive
Ridgeland, MS 39157
Telephone: 601/957-2676 FAX: 601/957-1887

CHAIN-OF-CUSTODY

Argus Cooler #

Sampler (print/signature): Kevin B. Coxen

Report to: Koppers Inc
Address: One Koppers Drive
Tie Plant, MS 38960

Invoice to:
Address:

Project Name/Number:

Project Manager:

MGPTF# (if applicable)

Comments/priority:

Item #	Field Number	Sample Description	Collection Date	Time	Initials	G/C	#	Presv	Analysis Required	Lab Number (lab use only)
1	Down Stream #1	H_2O	10/18/05	8:54 A	KC	G	1	No	Phenols	BB91554
2	Down Stream #2	H_2O	10/18/05	8:58 A	KC	G	1	No	~~Phenols~~ PAH	↓
3	Down Stream #3	H_2O	10/18/05	8:56	KC	G	1	No	PAH	↓
4	Upstream #1	H_2O	10/18/05	9:09	KC	G	1	No	Phenols	91555
5	Upstream #2	H_2O	10/18/05	9:04	KC	G	1	No	PAH	↓
6	Upstream #3	H_2O	10/18/05	9:08	KC	G	1	No	PAH	↓

f:\users\public\forms\coc +10.xls

Relinquished by:	Date/time:	Accepted by:	Date/time
KC	10/18/05 9:22 AM	RL.	10-18-05 9:23
Relinquished by:	Date/time:	Accepted by:	Date/time

Relinquished by:	Date/time:	Accepted by:	Date/time
KC	10-18-05 12:00	C	10-18-05 12:00
Relinquished by:	Date/time:	Accepted by:	Date/time

Rev.0603

Cooler Receipt Check List

Sample Number(s): BB91554 - 91555

Date Opened: 10-18-05

Opened by: C

Client: Koppers

	If checked, refer to the "Sample Receipt - Notification of Deviation" (attached).
	Per previous discussion with the client, thermal preservation not required, and Deviation Notification **not** required.

Login Checked by: JM

Temperature when opened: (4°(ice)) Ambient Measured (1): _____

Type of wrapping material: None Peanuts (Bubblewrap) Paper Other

(1) In < 50% ice, use a thermometer to measure the temperature at the bottom of the cooler.

Cooler custody seals intact? (n/a) Y/N Signed & dated? Y/N

Container custody seals intact? (n/a) Y/N

COC papers received? (Y)/N Receipt properly noted on COC? (Y)/N

COC papers properly filled in (signed in ink)? (Y)/N Container labels correspond to the COC? (Y)/N

All containers intact (not broken)? (Y)/N Samples received within holding times? (Y)/N

Correct containers/preservatives used? (Y)/N Short HT tests: BOD Br Color Cr6 DissMet DO Fecal

Container labels filled in? (Y)/N MBAS Nitrate or Nitrite OrP pH SS Sulfite

TCB/TPC TRC Turb

Were Trip Blanks rec'd with VOAs? Y/N

VOA vials - headspace detected? (n/a) Y/N Lab Notified:

If headspace detected, < 0.25" dia? Y/N

VOA soils - 5035 compliance criteria met? (n/a) Y/N (if met, circle the applicable method, below)

High concentration jar (48 hr) Low conc EnCor samplers (48 hr)

High concentration pre-weighed vial (methanol - 14 d) Low conc pre-weighed vials (sodium bisulfate - 14 d)

Lab Notified (date, time, initials): _____

For further information concerning this project, refer to the following attachments which are considered part of the final report. These attachments provide additional information on topics such as method modifications or NELAP accreditation.

- Cooler Receipt Check List (always attached)
- Sample Receipt - Notification of Deviation (optional)
- Supplementary Report Information (always attached)
- Case Narrative (optional)

Comments: _____

KOPPERS INDUSTRIES

KOPPERS INDUSTRIES, I
MSR220005/AI#876
GRENADA COUNTY

AI

Koppers Industries, Inc.
P.O. Box 160
Tie Plant, MS 38960

Telephone: (601) 226-4584
FAX: (601) 226-4588

January 17, 2003

CERTIFIED MAIL 7099 3400 0002 5201 0932

RECEIVED
JAN 29 2003
DEQ-OPC

Environmental Compliance Division
Office of Pollution Control
P.O. Box 10385
Jackson, MS 39289-0385

Subject: 2002 Storm Water Sampling Results
Koppers Industries, Inc. – Permit # MSR220005

Dear Sir or Madam:

Enclosed you will find subject information pertaining to 2002 storm water sampling at Koppers Industries Inc., wood-treating facility in Grenada, MS. Sample locations included in 2002 were numbers 5, 6, and 7. Explanation for the monitoring exemptions exercised by this facility was previously described in the 2001 storm water sampling report submitted to MSDEQ on January 4, 2002.

If you have any questions or concerns with this matter or sampling event, please call me at (662) 226-4584 extension 11.

Sincerely,

Thomas L. Henderson

Thomas L. Henderson
Plant Manager

Cc: Tim Basilone/Koppers Pittsburgh

Part VII.

Inspection Report and Certification Form
For Storm Water Pollution Prevention Plan Evaluation

Wood Treater Storm Water General NPDES Permit No. MSR220005

(Please Print)

Owner and/or Operator: Koppers Industries, Inc.

Facility Name: Same

Facility Location: 2 Koppers Drive, Tie Plant, MS 38960

Date and Time: 12-6-02, 1:30 pm

Inspector(s): Bobby McClain

Date of Last Rainfall: 11-26-02 Estimated Amount: 2.20 inches

Deficiencies Noted During the Inspection (attach additional sheets if necessary):

None.

Corrective Action Needed (attach additional sheets if necessary):

None.

Corrective Action Compliance Schedule:

Based upon this inspection which I or personnel under my direct supervision conducted, I certify that all pollution control measures are adequate and have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan filed with the Office of Pollution Control and good engineering practices as required by the above referenced permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons 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 fines and imprisonment for knowing violations.

I further certify that the Mississippi Office of Pollution Control has been notified of any changes pertinent to our storm water permit as required in Part II.C.

Thomas L. Henderson	Thomas L. Henderson	1-23-03
Authorized Name (Print)	Signature	Date

These reports shall be submitted annually, as required in the permit, to:

Chief, Industrial Branch
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385

Koppers Industries Inc.
Grenada, MS.

Pentachlorophenol

Outfall #	2002	2001	2000	1999	1998	1997	1996	1995	Permit Exempt Limit	Status
					Year Composite/Grab (PPM)					
1	NA	NA	NA	0/0	0/0	0/0	0/0	0.024/0	0.02	exempt
2	NA	NA	NA	0/0	0/0	NA/0	NA/0	NA/0	0.02	exempt
3	NA	NA	NA	NA	0/0	0/0	0.02/0.03	0.023/0	0.02	exempt
4	NA	NA	NA	0/0	0/0	NA/0	NA/0	NA/0.13	0.02	exempt
5	.258/0.00	.666/.617	0.124/0.024	0/0	0.485/0.749	NA/0	NA/0.201	NA/0.21	0.02	SAMPLE
6	.254/.269	2.54/2.39	1.47/1.94	0/0	0.705/0.887	NA/0	NA/0.03	NA/0.84	0.02	SAMPLE
7	.223/.076	.478/.375	0.586/0.238	0.186/0.256	0.395/0.228	NA/0	NA/0.124	NA/0.29	0.02	SAMPLE
8	NA	NA	NA	NA	NA	NA	NA	NA	0.02	exempt
9	NA	NA	NA	NA	NA	NA	NA	NA	0.02	exempt

TSS

Outfall #	2002	2001	2000	1999	1998	1997	1996	1995	Permit Exempt Limit	Status
					Year Composite/Grab (PPM)					
1	NA	NA	NA	21/38	18/12	22/78	33/33	9\7	50.00	exempt
2	NA	NA	NA	8\39	13/7	NA/43	NA/114	NA/15	50.00	exempt
3	NA	NA	NA	NA	13/6	0/18	30/18	1\1	50.00	exempt
4	NA	NA	NA	27/39	27/47	NA/44	NA/83	NA/37	50.00	exempt
5	359/49	46/148	510/208	85.3/95	50/17	NA/212	NA/114	NA/70	50.00	SAMPLE
6	454/638	29/69	30/18	235/172	19/12	NA/27	NA/30	NA/82	50.00	SAMPLE
7	1325/280	66/124	540/294	194/184	3\2	NA/44	NA/130	NA/47	50.00	SAMPLE
8	NA	NA	NA	NA	NA	NA	NA	NA	50.00	exempt
9	NA	NA	NA	NA	NA	NA	NA	NA	50.00	exempt

Acidity/pH

Outfall #	2002	2001	2000	1999	1998	1997	1996	1995	Permit Exempt Limit	Status
					Year					
1	NA	NA	NA	6.22	7.22	7.29	7.26	7.07	6.0-8.5 S.U.	exempt
2	NA	NA	NA	6.76	7.25	7.16	6.99	6.98	6.0-8.5 S.U.	exempt
3	NA	NA	NA	NA	7.52	7.53	7.54	7.1	6.0-8.5 S.U.	exempt
4	NA	NA	NA	8.14	7.37	8.5	8.61	8.88	6.0-8.5 S.U.	exempt
5	NA	NA	NA	7.72	7.79	7.54	7.74	7.78	6.0-8.5 S.U.	exempt
6	NA	NA	NA	7.31	6.59	6.89	6.74	6.43	6.0-8.5 S.U.	exempt
7	NA	NA	NA	7.26	6.87	7.65	8.07	6.35	6.0-8.5 S.U.	exempt
8	NA	NA	NA	NA	NA	NA	NA	NA	6.0-8.5 S.U.	exempt
9	NA	NA	NA	NA	NA	NA	NA	NA	6.0-8.5 S.U.	exempt

Phenols

Outfall #	2002	2001	2000	1999	1998	1997	1996	1995	Permit Exempt Limit	Status
					Year Composite/Grab (PPM)					
1	NA	NA	NA	0	0	0	0	0.03	0.1	exempt
2	NA	NA	NA	0	0	0.088	0	0.02	0.1	exempt
3	NA	NA	NA	NA	0	0.054	0	0.04	0.1	exempt
4	NA	NA	NA	0	0.086	0.054	0.085	0.03	0.1	exempt
5	NA	NA	NA	0	0.053	0.176	0	0.056	0.1	exempt
6	NA	NA	NA	0	0	0.062	0	0.05	0.1	exempt
7	NA	NA	NA	0	0	0	0	0	0.1	exempt
8	NA	NA	NA	NA	NA	NA	NA	NA	0.1	exempt
9	NA	NA	NA	NA	NA	NA	NA	NA	0.1	exempt

Oil & Grease

Outfall #	2002	2001	2000	1999	1998	1997	1996	1995	Permit Exempt Limit	Status
					Year Grab (PPM)					
1	NA	NA	NA	0	0	1.6	1.11	0	5.00	exempt
2	NA	NA	NA	0	1.6	1	1.2	0	5.00	exempt
3	NA	NA	NA	NA	1.6	3.4	1.44	0.5	5.00	exempt
4	NA	NA	NA	0	3	5.1	1.56	0.9	5.00	exempt
5	NA	NA	0	0	5.6	4.3	2.21	1.4	5.00	exempt
6	NA	NA	NA	0	3.2	4.5	1.6	3.4	5.00	exempt
7	NA	NA	NA	0	1.5	2.5	2.1	1.6	5.00	exempt
8	NA	NA	NA	NA	NA	NA	NA	NA	5.00	exempt
9	NA	NA	NA	NA	NA	NA	NA	NA	5.00	exempt

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME: [illegible] ROPPERS INDUSTRIES INC

ADDRESS: P O BOX 160
[illegible] PLAIN MS 38960

FACILITY: GRENADA COUNTY

LOCATION: [illegible] PLAIN MS 38960

[illegible]: [illegible]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSD220005	001

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	0[illegible]	01	01	TO	02	12	31

RECEIVED JAN 29 2003 DEQ

TIMB

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
S[illegible]DS, TOTAL [illegible]ENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson Plant Mgr.

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	2264584	03	01	22 ~~23~~

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES); AND TOTAL DISCHARGE (GALLONS).

Exempt Status - per part IV. C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

00356/020117-1206

PAGE 1 OF

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)
NAME: KOPPERS INDUSTRIES INC
ADDRESS: P O BOX 150
TIE PLANT MS 38960
FACILITY: GRENADA COUNTY
LOCATION: TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSH220005	001 B

MINOR
(SUBR 30)
F - FINAL
STORMWATER COMPOSITE SAMPLING
TIME

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	01	01	TO	02	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

RECEIVED JAN 29 2003 DEQ-OPC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Thomas L. Henderson Plant Mgr.		662	226-4584	03	01	22
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Exempt status - per part IV.C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME: [illegible] I US RIES INC
ADDRESS: [illegible] 1 0
[illegible] 38960
FACILITY: GRENADA COUNTY
LOCATION: [illegible] PLANT [illegible] 3 960
ATTN: THOMAS L H[illegible]DERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR 220005	002 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER [illegible] SAMPLING
[illegible] NO DISCHARGE [ ] [illegible]

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	01	01	TO	02	12	31

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	******	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	******	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	******	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	******	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	******	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

RECEIVED
JAN 29 2003
DEQ-OPC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson Plant Mgr
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	03	01	22 ~~23~~

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
REPORT STORMS DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES); TOTAL DISCHARGE (GALLONS).
Exempt Status per part IV.C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

00358/020117-1208

PAGE 1 OF

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME [illegible]
ADDRESS [illegible]
[illegible] MS 3[illegible]

FACILITY GRENADA COUNTY
LOCATION [illegible] PLANT MS [illegible]
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MS 22[illegible]	002 S

MINOR
([illegible])
[illegible] NAL
[illegible] COMPOS TE SAMP NG
*** NO DISCHARGE [ ] ***

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	01	01	TO	02	12	31

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
[illegible] ACE LOPOLE OIL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

RECEIVED
JAN 29 2003
DEQ-OFC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

[illegible]deerson Plant Manager
[illegible] PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226 4584	03	01	22 23

[illegible]NATION OF ANY VIOLATIONS (Reference all attachments here)

[illegible]ts Per Part IV.C.4

[illegible]ous editions may be used.

This is a 4-part form.

PAGE [illegible] OF [illegible]

NAME: KOPPERS INDUSTRIES INC
ADDRESS P O BOX 60
PIE PLANT MS 38 60

FACILITY GRENADA COUNTY
LOCATION PIE PLANT M 38-0
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MS0220065	003 L

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	0	1	01	TO	00	2	1

(SEE NOTE)
SEE NOTE
FLOWMETER GRAB SAMPLING
TIMB
*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******			******		(12)			
	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

RECEIVED JAN 29 2003 DEQ-OPC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Henderson Plant Mgr.
OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4588	03	01	22 23

EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)
per part IV.C.4

Previous editions may be used.

This is a 4-part form.

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME: KOPPERS INDUSTRIES INC

ADDRESS: [illegible] BOX 160
TIE PLANT MS [illegible]

FACILITY: GRENADA COUNTY

LOCATION: TIE PLANT MS 3896[illegible]

ATTN: THOMAS [illegible]EN E S N

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220[illegible]5	003 [illegible]

MINOR
([illegible] NO)
F - [illegible]NA
STORMWATER COMPOSITE SAMPLING TIMB

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	01	01	TO	02	1[illegible]	3[illegible]

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	******	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
[illegible]TACHLOPOLY NOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	******	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	******	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

RECEIVED JAN 29 20[illegible] DEQ-OPC

RECEIVED JAN 29 2003 DEQ-OPC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson Plant/Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4524	03	01	22 ~~23~~

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Exempt Status per part IV.C.4

PA Form 3320-1 (Rev. 3/99) Previous editions may be used.

00361/020117-1208

This is a 4-part form.

PAGE OF

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME: KOPPERS INDUSTRIES INC

ADDRESS: P O BOX 160
TIE PLANT MS 38960

FACILITY: GRENADA COUNTY

LOCATION: TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	004 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING TIMB

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	01	01	TO	02	12	31

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******			******		(12)	0		
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
[illegible]DS, TOTAL [illegible]ENDED	SAMPLE MEASUREMENT	******	******		******	******	~~6.38~~	(19)	0		
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******		(19)	0		
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	~~0.269~~	(19)	0		
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)	0		
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPL

RECEIVED
JAN 29 2003
DEQ-DPD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L Henderson Plant Mngr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	03	01	22 ~~23~~

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

Exempt Status per IV.C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

00362/020117-1206

PAGE 1 OF

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME: KOPPERS INDUSTRIES INC

ADDRESS: P O BOX 160
TIE PLANT MS 38960

FACILITY: GRENADA COUNTY

LOCATION: TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	004 B

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING TIMB

*** NO DISCHARGE [ ] ***

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	01	01	TO	02	12	31

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	~~454~~	(19)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	~~0.254~~	(19)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

RECEIVED
JAN 29 2003
DEQ-OPC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson Plant/Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	03	01	22 ~~23~~

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Exempt Status per IV.C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

00363/0251171-1206

PAGE 1 OF

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME [illegible]

ADDRESS [illegible]

FACILITY GRENADA COUNTY

LOCATION [illegible]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MS0220005	005

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	01	01	TO	02	12	31

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				NODI=9		NODI=9	(12) SU	0	1/yr	Grab
	PERMIT REQUIREMENT				REPORT MINIMUM		REPORT MAXIMUM			ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						49	(19) MG/L	0	1/yr	Grab
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						NODI=9	(19) MG/L	0	1/yr	Grab
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	GRAB
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						NODI=B	(19) MG/L	0	1/yr	Grab
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	GRAB
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						NODI=9	(19) MG/L	0	1/yr	Grab
	PERMIT REQUIREMENT						REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED JAN 29 2003 DEQ-OPC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L Henderson Plant Mgr

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	03	01	22 ~~23~~

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

4-8-02 4 hrs 1.4 inches 0.0435 MGD

PERMITTEE NAME/ADDRESS (Name Facility Name Location if Different)

NAME KOPPERS INDUSTRIES N

ADDRESS P O BOX 1

PIE PLANT M. 3 960

FACILITY GRENADA COUNTY

LOCATION PIE PLAN M 3 960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR2200 5	005 P

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	01	01	TO	02	1	31

MINOR
(SEC NO)
F - FINAL
SIDEWATER COMPOSITE SAMPLING T M
*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	359	(19)	0	1/yr	Comp
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.258	(19)	0	1/yr	Comp
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI=9	(19)	0	1/yr	Comp
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 29 2003
DEQ-OPC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson Plant/Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	2264584	03	01	22

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PA Form 3320-1 (Rev. 3/99) Previous editions may be used.

00365/02011 This is a 4-part form. PAGE OF

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY

LOCATION TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

MS8220005 — PERMIT NUMBER

006 A — DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING TIMB

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	01	01	TO	02	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		NODI=9	******	NODI=9	(12)	0	1/yr	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
[illegible]DS, TOTAL [illegible]PENDED	SAMPLE MEASUREMENT	******	******		******	******	638	(19)	0	1/yr	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC	SAMPLE MEASUREMENT	******	******		******	******	NODI=9	(19)	0	1/yr	Grab
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.269	(19)	0	1/yr	Grab
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NODI=9	(19)	0	1/yr	Grab
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 29 2003
DEQ-OPC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson Plant/Mngr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
662	226 4584	03	01	22
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT STORM DATE AND DURATION (HOURS)	ESTIMATED RAINFALL (INCHES)	TOTAL DISCHARGE (GALLONS).
4-8-02 4 hrs.	1.4 inches	0.0158 MGD

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

00366/020117-1206

PAGE 1 OF

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: KOPPERS INDUSTRIES INC

ADDRESS: P O BOX 150
TIE PLANT MS 38960

FACILITY: GRENADA COUNTY

LOCATION: T. PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

MSR220005	006 B	MINOR (SUBR NO) F - FINAL
PERMIT NUMBER	DISCHARGE NUMBER	

TIMS

STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	01	01	TO	02	12	31

*** NO DISCHARGE | __ | ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******			******	454	(19)	0	1/yr	Comp
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.254	(19)	0	1/yr	Comp.
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI=9	(19)	0	1/yr	Comp
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 29 2003
DEQ-OPC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson Plt Mgr.

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	03	01	22

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: KOPPERS INDUSTRIES INC

ADDRESS: P O BOX 160
TIE PLANT MS 38960

FACILITY: GRENADA COUNTY

LOCATION: TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MS0220005	007 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMB

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	01	01	TO	02	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		NODI=9	******	NODI=9	(12) SU	0	1/yr	Grab
	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM			ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	280	(19) MG/L	0	1/yr	Grab
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX			ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RO 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI=9	(19) MG/L	0	1/yr	Grab
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX			ANNUAL	GRAB
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.076	(19) MG/L	0	1/yr	Grab
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX			ANNUAL	GRAB
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI=9	(19) MG/L	0	1/yr	Grab
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX			ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 29 2003
DEQ-OPC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson Plant Manager
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	03	01	22

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

4-8-02 4 hrs. 1.4 inches 0.0219 MGD

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

00365/02011/1208

PAGE OF

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME [illegible] INC

ADDRESS P O [illegible]

[illegible] MS 38960

FACILITY GRENADA COUNTY

LOCATION [illegible] PLANT MS 3 960

[illegible] SON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	007 B

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	01	1	TO	02	12	31

MINOR
(SUPP NO)
F - FINAL
STORMWATER COMPOSITE SAMPLIN TIMB
*** [illegible] DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	1325	(19)	0	1/yr	Comp
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
[illegible]TACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******		0.223	(19)	0	1/yr	Comp
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NODI-9	(19)	0	1/yr	Comp
	PERMIT REQUIREMENT	******	******	****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
JAN 29 2003
DEQ-OPC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson Plant/Mngr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	03	01	22

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PA Form 3320-1 (Rev. 3/99) Previous editions may be used.

00369/[illegible]

This is a 4-part form.

PAGE OF

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME: COPPERS INDUSTRIES INC

ADDRESS: P O BOX 160
TIE PLANT MS 38960

FACILITY: GRENADA COUNTY

LOCATION: TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	003 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIME

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	01	01	TO	02	12	31

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

RECEIVED
JAN 29 2003
DEQ-OPC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE	DATE		
Thomas L. Henderson Plant Mgr.		662 226 4534	03	01	22
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE / NUMBER	YEAR	MO	DAY

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L Henderson

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)

Exempt status - per part IV.C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

00370/020117-1290

PAGE OF

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME ROGERS INDUSTRIES INC

ADDRESS O B X 160

TIE PLN MS 38960

FACILITY GRENADA COUNTY

LOCATION T PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	005

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
02	01	01	02	12	31

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

RECEIVED
JAN 29 2003
DEQ-OPC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson Plant Mgr

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	03	01	22

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Except Status per part IV.C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

PAGE OF

NAME: ROGERS INDUSTRIES INC
ADDRESS: O BOX 140
TIE PLANT 35 38 60
FACILITY: GRENADA COUNTY
LOCATION: TIE PLANT
ATT: MR. JEFF O 3596

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Appr
OMB No. 20

MSR220065 — PERMIT NUMBER
009 A — DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	01	01	TO	02	12	31

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO DISCHARGE

RECEIVED JAN 29 2003 DEQ-OPC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Thomas L. Henderson, Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	03	01	22

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).
Exempt Status per part IV.C.4

PA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

00372/020117-4 PAR PAGE OF

NAME: COPPERS INDUSTRIES INC
ADDRESS: P O BOX 160
TIE PLANT MS 38960

FACILITY: GRENADA COUNTY
LOCATION: TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR229005	009 M

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING TIM

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	01	01	TO	02	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

RECEIVED
JAN 29 2003
DEQ-OPC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	03	01	22

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Exempt Status per part IV.C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form

PAGE OF

Kevin Coker
Plant Manager

KOPPERS

DEPT OF ENVIRONMENTAL QUALITY
REC'D
FEB 08 2006

Koppers Inc.
PO Box 160
Tie Plant, MS 38960
Tel 662 226 4584
Fax 662 226 4588
CokerKB@koppers.com
www.koppers.com

February 7, 2006

Arthur L. Collins
Chief, Gulf Enforcement Section
Water Programs Enforcement Branch, Water Management Division
United States Environmental Protection Agency - Region 4
Atlanta Federal Center
61 Forsyth Street
Atlanta, GA 30303-8960

Subject: Compliance Evaluation Inspection Report dated December 22, 2005
General Storm Water Permit No. MSR220005
Pretreatment Permit No. MSP090300
Koppers Inc
Grenada, MS

Dear Mr. Collins:

Koppers has received the above referenced inspection report regarding the inspection conducted on May 25, 2005 and submits the following response to the items listed in the summary[1].

1. **Cleanup of any incidental drippage of creosote on bare ground immediately as required by RCRA at 40 C.F.R Part 264.1(g)(8)(i).**

   Response: Incidental drippage is covered by EPA's RCRA regulations under 40 CFR 265.440(c)(1) which state in relevant part

   "The owner or operator maintains and complies with a written contingency plan that describes how the owner or operator will respond immediately to the discharge of such infrequent and incidental drippage."

   EPA has interpreted "*immediately*" in this context to mean "*...within 24 to 72 hours of the occurrence of drippage.*" [EPA letter to American Wood Preservers Institute, July 17, 2002] [Attachment 1]. As stated in 40 CFR 265.440(c)(1), the facility contingency plan must provide for this process of inspection and cleanup of incidental drippage.

   The Grenada Contingency Plan does provide for inspecting and responding "immediately" to incidental drippage in the storage yards [Attachment 2]. The Grenada facility does conduct these inspections, takes the corrective action as set forth in the Contingency Plan, and

[1] By email of January 20, 2006 from Judy Marshall of EPA Region IV to Chris Bell of Sidley Austin LLP, Koppers outside counsel, Koppers time to respond to this report was extended until February 8, 2006.

maintains records of these activities. The EPA inspection lasted for several hours during one day. It is likely that the storage yard inspections and cleanup for that day had not been completed at the time of the inspector's observation. In fact, the records for the time period of EPA's inspection [May 25, 2005] demonstrate that the yard was inspected, drippage was observed, and the necessary corrective actions were taken [Attachment 3].

2. **Provide justification for exempting outfall 003 from storm water sampling requirements.**

   Response: The facility is currently in the process of adjusting the treated wood storage areas to allow for better work flow. When storage areas have been determined, we will reevaluate all stormwater outfalls and monitoring. We expect this to be completed by mid-year 2006.

3. **Update MDEQ's spill report telephone number to 800-222-6362.**

   Response: The number has been updated in the current SPCC and the SPCC sent to the appropriate agencies.

4. **Koppers violated Part III.C.7.b.(3) of the permit by failing to install erosion and sediment controls.**

   Response: The Grenada facility does maintain erosion and sediment controls. Koppers understands that the inspector was concerned with an area (approximately 15 feet by 50 feet) just up gradient from outfall 008 where bare soil was exposed. Prior to the EPA inspection, the plant had determined that this area had become overgrown and was in need of maintenance. The intent was to grade the area and reseed it. The area had been graded, but the reseeding had not yet occurred when the inspector visited the facility, therefore the soil was exposed. This area does not receive significant overland flow during storm events and therefore, is not a high erosion-potential area. Additionally, the area flows into a retention pond which is controlled by a weir, providing additional control for sediment during re-vegetation.

   The area was reseeded and hay strewn on the planted area to control erosion within a week of the inspection. The vegetation is coming in nicely and the plant will continue to work on this area until it is fully vegetated.

5. **Establish a sampling protocol to ensure that storm water samples are collected in accordance with Part IV.C.5 of the permit requirement.**

   Response: Part IV.C.5 discusses the requirement to take grab and composite samples and the timing of such samples. The issue detailed in the text of the inspection report was not that the samples had not been taken, but discussed an alleged lack of notations regarding when the sample was obtained relative to the start of the storm event and data to indicate whether the sample was taken within the first 30 minutes of discharge, not the complete lack of a sampling protocol.

   The facility's permit is consistent with various documents that indicate that EPA does not and has not required that storm water sampling records include the time of the rainfall event that led to the stormwater sampling event. For example, EPA's 1992 "Storm Water Sampling Guidance Document" states in Section 3.7 on "Sample Documentation" that the date and time of sample collection should be recorded, but says nothing about time rainfall

or the associated discharge actually commenced. Further, EPA's Multi-Sector General Stormwater Permit that went into effect on October 30, 2000 states in the "Records Contents" section that sampling records include "the date, exact place, and time of sampling or measurements," but does not mention recording the time of beginning of rainfall. Section 9.16.3.1 at 65 Fed. Reg. 64746, 64855 (October 3, 2000). The recently proposed new Multi-Sector General Stormwater Permit contains essentially the same language and again does not require keeping records of the time the rainfall began. 70 Fed. Reg. 72116 (December 1, 2005).

The facility samples stormwater in accordance with the permit requirements including, where practicable, taking samples within the first 30 minutes of stormwater flowing from an outfall designated for sampling. The facility also keeps the sampling records and submits the stormwater sampling DMRs as required by its permit. The permit (Part IV.C.1) requires the following data be maintained:

1. Date and duration (in hours) of the storms sampled
2. Rainfall measurements or estimates (in inches) of the storm which generated the sampled runoff
3. The duration between the storm sampled and the end of the previous measurable (greater than 0.1 inch rainfall) storm
4. An estimate of the total discharge (gal.) for the storm sampled shall be provided

The plant Stormwater Runoff Worksheet includes all of these data points [Attachment 4].

The plant is currently rewriting its stormwater sampling procedure. In order to address EPA's concerns, in the future, Koppers will note sufficient information to document that samples were collected within the first 30 minutes of discharge and after 72 hours of dry weather (or explain why that was not possible).

6. **With regard to the pretreatment permit, Koppers should fill out the DMR forms correctly concerning the number of permit exceedances. Also, Koppers should evaluate existing operations...and its wastewater treatment process system to determine if modification and / or additional controls are necessary to maintain compliance with pretreatment standards, as specified in Part 1.A.1 of the permit for pentachlorophenol and flow.**

Response: In the text of the report, the inspector notes that "*The number of excursions column in the Discharge Monitoring Report (DMR) should only be used to report the number of weekly and daily permit exceedances. The monthly permit exceedances should not be counted when totaling the number of exceedances in each month.*" In effect, Koppers was reporting more information than required. We appreciate EPA's guidance on this issue and will correct our process for future submittals. We would also like to note that December 2005 marked the eleventh consecutive month without an exceedance. During this time frame sampling frequencies have been doubled to twice weekly versus once weekly, in an effort to better monitor the system and reflect diligence in our efforts to be compliant.

This improvement reflects significant study (including the retention of a consulting engineer), implementation of a testing and monitoring routine to track the system's performance, and additional training of and diligence on the part of the operators. Koppers described these activities at the September 1, 2005 meeting with EPA Region 4 and October 17, 2005

meeting with EPA Headquarters, through Power Point presentations, and also summarized them in its December 2005 submission to EPA.

The following issues discussed in the inspection report were not included in the summary:

1. It is recommended that employee training include topics such as cleaning procedures to prevent over-spreading of residual material off the drip pad, control(s) to minimize tracking of material off the drip pad from moving equipment, timely removal of incidental drippage from the wood storage yard, etc.

Response: Annually, plant employees are trained on these subjects. Plant training is based on the corporate guidance for training on this subject, which is attached [Attachment 5]. The plant maintains records of all employees trained.

2. The SWPPP/SPCC contained an inventory of tanks. It would be more useful if the tanks were grouped by location or common containment area. Also, it is recommended that the SWPPP/SPCC plan have a table listing the capacity of each tank and their respective secondary containment capacity.

Response: The facility lists its tanks numerically with numbers corresponding to the tank labels and the facility emergency plan. This process assists emergency responders in quickly identifying a tank and is consistent with SPCC, RCRA contingency, SWPPP, and Koppers internal policy requirements. The Tank Listing Table (Table 3.1) lists the capacity and contents of each tank. The capacity of the containment areas is listed in section 3 of the emergency plan. [Attachment 6]

Sincerely,

Plant Manager

Cc:
Mississippi Department of Environmental Quality

ATTACHMENT 1

EPA Letter to American Wood Preservers Institute
July 17, 2002

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, D.C. 20460

OFFICE OF
SOLID WASTE AND EMERGENCY RESPONSE

JUL 17 2002

Mr. Parker Brugge, President
American Wood Preservers Institute
2750 Prosperity Avenue
Suite 550
Fairfax, VA 22031-4312

Dear Mr. Brugge:

Over the past year, we have received correspondence from the American Wood Preservers Institute (AWPI) requesting clarification on the scope and applicability of the federal hazardous waste regulations at wood preserving facilities under the Resource Conservation and Recovery Act (RCRA). Some of this correspondence was directly related to specific enforcement proceedings to which we do not feel it is appropriate to respond in a general context. You did, however, request clarification on RCRA regulations that could apply more generally to the wood preserving industry. This letter responds to concerns raised in your letters of September 28, 2000 and June 25, 2001. Your September 28, 2000 letter raises three issues addressed in Part 1 of this letter. Your June 25, 2001 letter includes a "White Paper" discussion on additional issues addressed in Part 2 of this letter.

Part 1: Response to Issues Raised in Letter of September 28, 2000

Regulatory Status of Stormwater Generated in a Pentachlorophenol Treated Wood Storage Yard

You asked whether stormwater runoff containing pentachlorophenol or other constituents of concern from pentachlorophenol treated wood is covered under the scope of the F032 hazardous waste listing. This type of determination is generally based on site-specific factors. However, EPA can provide general guidance on how to interpret the Agency's regulations in this respect. In particular, preambles for several rules are relevant. The first is EPA's original listing of F032, F034, and F035 as hazardous wastes in the December 6, 1990 *Federal Register* (55 *FR* 50450-90). The proposed and final amendments to this rule were published in 56 *FR* 63848-63860 (December 5, 1991) and 57 *FR* 61492-61505 (December 24, 1992), respectively.

Where a wood preserving facility is in compliance with the applicable RCRA

quirements for its drip pads,[1] whether precipitation runoff from pentachlorophenol treated wood is regulated as a hazardous waste depends upon the particular facts, as described below. See 55 *FR* at 50458, footnote 4; 56 *FR* at 63850, and 57 *FR* at 61497-8.

If the stormwater in question is the result of rainwater that falls onto a wood preserving facility's drip pad and contacts preservative formulations or listed wastes, this stormwater would contain a listed hazardous waste. See 57 *FR* at 61497-8 (section titled "Mixture Rule and Contained-In Policy). The precipitation runoff exclusion in the "derived from" rule at 40 CFR §261.3(c)(2)(i) does not apply to this stormwater because "drip pads are hazardous waste management units designed and maintained to convey treated wood drippage, precipitation and surface water run-on to an associated collection system, . . ." 57 *FR* at 61498. If for some reason this stormwater is not contained within the drip pad and associated collection system (e.g., where runoff controls around the drip pad, such as berms, are non-existent or do not perform as appropriate), then the subsequent runoff also would be classified as hazardous waste because it "contains" hazardous waste. For this reason, we would urge wood preservers to pay attention to the proper collection and management of rainwater finding its way onto the drip pad.

Precipitation runoff in storage yards would not constitute an F032 hazardous waste, provided the facility is operating in compliance with Subpart W. This conclusion is reached by considering the longstanding interpretation of the wood preservative listings and the language of Subpart W. The December 6, 1990, Final Rule preamble states that, consistent with the general position not to apply the derived-from rule to precipitation runoff, the wood preserving listings do not apply to precipitation runoff from treated wood in storage yards where the owner or operator has complied with the no drippage requirement. See 55 *FR* at 50458, footnote 4. Also, if the wood preserving facility is in compliance with 40 CFR Parts 264 or 265, Subpart W, including adhering to the storage yard contingency plan required under 40 CFR §264.570(c) or §265.440(c),[2] then incidental and infrequent preservative drippage in storage yards is not considered illegal disposal of hazardous waste. However, as EPA stated in a subsequent guidance document, in the case of a facility that is not in compliance with Subpart W, EPA can assert that the stormwater transported a listed hazardous waste and that the resulting sludge also carries the listings.[3]

---

[1]"Drip pad" is defined under RCRA at 40 CFR §260.10. Specific management standards for drip pads are in Subpart W of 40 CFR Parts 264 and 265.

[2]Generally, the facility owner or operator must: 1) immediately clean up this incidental and infrequent drippage, 2) document the cleanup of this drippage, 3) retain documents regarding the cleanup for three years, and 4) manage the contaminated media in a manner consistent with federal regulations. EPA considers "immediate" to be generally within 24 to 72 hours of the occurrence of drippage. See 57 FR at 61494 ("Drippage in Storage Yards and Contingency Plans").

[3]Section 6-2, *Wood Preserving Resource Conservation and Recovery Act Compliance Guide, A Guide to Federal Environmental Regulation*, U.S. EPA, June 1996.

..atus of Steam or Vapor Emitted from Retort Doors or Treated Wood Following Pressure Treatment with Pentachlorophenol

The issue was raised whether steam that is released from the wood preserving process equipment (such as from the retort doors when they are opened) and including condensate that might subsequently form as the steam contacts the ground away from the immediate retort area, is a hazardous waste. The listing descriptions for the F032, F034, and F035 wood preserving wastes at 40 CFR §261.31 include "Wastewaters, process residuals, preservative drippage, and spent formulations..." Wastewaters from wood preserving processes include water that is collected "in door and retort sumps" within the wood-treating equipment area (see 53 *FR* at 53288, December 30, 1988), which includes water that has condensed from steam onto the retort door, associated sumps and drip pad when the door is opened.[4] EPA did not, however, include within the scope of the listing condensate resulting from steam that may have escaped and settled some distance from the process equipment. This interpretation is consistent with the Agency's record, which does not support the conclusion that the scope of wastewaters includes such condensate. This interpretation is also generally consistent with the Agency's overall approach to hazardous waste listings, which would not generally include fugitive air emissions from manufacturing processes, unless specifically identified. The Subpart W drip pad technical standards promulgated simultaneously with the wood preserving listings do not address, nor were they intended to address, releases to the air from process equipment.

However, where significant amounts of steam condensate from wood-treating process equipment are deposited in the immediate vicinity of the wood-treating process area, EPA might consider the resulting condensate to be covered by the listing description. In such cases, the condensate may be a wastewater or process residual that, in developing the listing, EPA expected to have been collected in the wood-treating process equipment or on the drip pad. I would add that if a particular facility is producing so much steam that significant amounts of preservative chemicals are being deposited on the ground, we would expect facilities to find ways to control the condensate, or reduce or minimize the amount of steam being emitted. Lastly, the point made in your letter that these vapors are not contained gases, and cannot be solid wastes, is irrelevant to whether or not the condensate is within the scope of the wood preserving waste listing.

Clarification of the Wastewater Treatment Unit Exemption Under RCRA For Wood Preserving Operations Subject to Zero Discharge Limitations under the Clean Water Act

Your letter also raised a question about the applicability of the wastewater treatment unit exemption (40 CFR §264.1(g)(6) and §265.1(c)(10)) to tanks located at wood preserving facilities. This exemption applies to units that meet the three-part definition of 'wastewater

[4]See page III-3 of Background Document Supporting the Proposed Listing of Wastes from Wood Preservation and Surface Protection Processes, Volume I, December 1988.

..ment unit' found at 40 CFR §260.10. According to the information you provided in your letter and at our meeting, your specific concern is over the interpretation of the requirement that an exempt wastewater treatment tank or tank system be part of a wastewater treatment facility "subject to regulation under either 402 or 307(b) of the Clean Water Act", as defined in 40 CFR §260.10, where that facility is operating a zero discharge system.

Generally, a facility operating with a tank-based zero wastewater discharge system, where applicable effluent guidelines or pretreatment standards specify zero discharge,[5] would be considered to be "subject to" the CWA for purposes of the wastewater treatment unit definition. Whether or not the criteria for the wastewater treatment unit exemption are met will depend, of course, on the particular facts. For example, if the facility is not subject to the CWA because the facility has no potential to discharge pollutants to waters of the United States, the exemption would not apply.

Part 2 : Response to Issues Raised In Letter of June 25, 2001

At a meeting on May 29, 2001, between EPA, AWPI, and other representatives of the wood treating industry, several issues were raised regarding the scope and applicability of RCRA requirements to wood preserving facilities. As a followup to that meeting, AWPI sent to EPA a letter dated June 25, 2001 which requested that EPA address not only the three issues raised in the original September 28, 2000 letter (which we do above in Part 1 of this letter), but also an additional issue concerning "..the applicability of the infrequent and incidental drippage regulation to areas other than the drip pad." First, let me clarify the issue regarding the scope of the term "storage yards" in the context of the contingency plan requirements in 40 CFR §264.570(c) and §265.440(c). Simply put, the approach taken in the wood preserving regulations is that drip pads are *not* required in "storage yards" *provided* any incidental and infrequent drippage is immediately responded to in accordance with the storage yard contingency plan requirements. Thus, while the term "storage yards" is not defined in the regulations, the applicability section of the drip pad regulations states that "The requirements of [Subpart W] are not applicable to the management of infrequent and incidental drippage in storage yards, provided that the owner or operator maintains and complies with a written contingency plan that describes how the owner or operator will respond immediately to the discharge of such infrequent and incidental drippage." 40 CFR §264.570(c) and §265.440(c).

You have indicated that the potential exists at many wood preserving facilities to store treated wood in most any location outside of the drip pad. Therefore, your question is whether the "storage yard contingency plan" (which allows for incidental and infrequent drippage to occur without constituting hazardous waste disposal as long as such drippage is responded to immediately in accordance with the contingency plan) can apply everywhere at a wood treating

[5]For example, wood preserving operations such as the "Boulton" process have specific effluent guidelines and pretreatment standards under the CWA that specify zero discharge. 40 CFR Part 429, Subpart H.

...ity *outside* of the drip pad. Generally speaking, the answer is yes. The contingency plan can cover all areas of the wood preserving facility outside the boundaries of the drip pad.

However, regarding the Agency's goal of preventing or minimizing releases of preservative outside the drip pad, I would like to highlight a couple of provisions in the Subpart W requirements of Part 265, with which owners or operators of wood treating facilities must comply (along with the rest of Subpart W, of course) if they are a generator of hazardous waste, in order to comply with 40 CFR §262.34(a)(1)(iii). Section 265.443(j) requires that the tracking of hazardous waste or constituents off the drip pad from personnel or equipment *be minimized*, and §265.443(k) requires that treated wood be held on the drip pad until drippage *has ceased*. While the Agency has clearly acknowledged that incidental and infrequent drippage may occur from the treated wood after its removal from the drip pad (56 *FR* at 63850), I would emphasize that facilities that do not comply with provisions such as the ones we have cited, or those that do not comply with the facility's contingency plan, would be subject to enforcement. There may also be situations where simply cleaning up and documenting releases is not adequate, because the drippage is more than infrequent and incidental, and therefore the basic standards of subpart W are not met.

You also presented arguments as to why the presence of hazardous constituents in soil at a wood treating plant is not by itself evidence of illegal disposal of hazardous waste under RCRA. You stated that the Agency has previously acknowledged that contamination at wood preserving plants existed before the Subpart W rules were promulgated, and that existing RCRA requirements allow for de minimis releases of preservative to soil to be addressed under the storage yard contingency plan, so that hazardous constituents in soil are not indicia of illegal disposal. In response to your question, the mere presence of contamination does not necessarily mean that hazardous waste has been illegally disposed; however, whether or not contamination is the result of hazardous waste disposal must be determined on a case-by-case basis. The fact that EPA has acknowledged that contamination may have been present prior to promulgating the Subpart W standards, or that de minimis releases to the ground can still occur under a facility's contingency plan, does not mean that there cannot be a finding, at a particular facility, that illegal disposal of hazardous waste has occurred.

Finally, in your letter, you pointed out that splits or cracks ("checks") in the wood were recognized by EPA as a function of the "type of wood" and, therefore, are a legitimate source of "incidental and infrequent" drippage. To clarify, we agree that EPA did acknowledge "imperfections in the wood" such as "splits and knotholes" when discussing factors affecting drippage in treated wood.[6] This should clarify for you that preservative drippage from these imperfections in the wood can be addressed under a wood treating facility's storage yard contingency plan, provided this drippage is "incidental and infrequent," which would be a case-

---

[6]See pages III-32, Background Document Supporting the Proposed Listing of Wastes from Wood Preservation and Surface Protection Processes, Volume I, December 1988.

case determination.

We should note that states may have requirements governing the management of hazardous waste that are more stringent than federal regulations. Where these state hazardous waste management requirements are part of the state-authorized RCRA program, they become requirements of RCRA Subtitle C, and can be enforced by EPA even if they are more stringent than the requirements in the federally-issued regulations. States also have independent authority to enforce state hazardous waste management requirements in the state system. In addition, some states (e.g., state of Washington) have taken a more stringent approach to ensuring that drippage from wood ceases and have included standards in water permits which specify that facilities must ensure that treated lumber is "shaken or manipulated well" so that all drippage ceases prior to it being removed from the drip pad.

Should you have any questions regarding this letter, please contact Ross Elliott of my staff at (703) 308-8748.

Sincerely,

Elizabeth Cotsworth, Director
Office of Solid Waste

ATTACHMENT 2

Grenada Contingency Plan

CONTINGENCY, SPILL PREVENTION,
CONTROL AND COUNTERMEASURES (SPCC)
AND
POLLUTION PREVENTION PLAN
KOPPERS INDUSTRIES, INC.
GRENADA PLANT
TIE PLANT, MS
May 16, 2000

CERTIFICATION

I hereby certify that I have inspected the subject facility and being familiar with the provisions of 40 CFR 112 for SPCC requirements and 40 CFR 122 for Storm Water Pollution Prevention requirements, attest that this Plan has been prepared in accordance with good engineering practices.

Robert Willis
Willis Engineering

Date: 6/6/00

ROBERT D. WILLIS
REGISTERED PROFESSIONAL ENGINEER
#10944
STATE OF MISSISSIPPI

MANAGEMENT APPROVAL

I certify under penalty of law that the information contained in this Plan is, to the best of my knowledge, true, accurate and complete. This Plan will be implemented as herein described.

Thomas L. Henderson
Plant Manager

Date: 6-27-2000

REVIEW AND EVALUATION OF SPCC PLAN

Review and evaluation of this plan, as described in Section 1.4, is documented below:

Signature	Title	Date
	P.E.	6/6/03

ROBERT D. WILLIS
REGISTERED PROFESSIONAL ENGINEER
#10944
STATE OF MISSISSIPPI

SPCC, CONTINGENCY, AND POLLUTION PREVENTION PLAN, GRENADA PLANT, KOPPERS INDUSTRIES, INC. **November 6, 2002**

TABLE OF CONTENTS

1.0 INTRODUCTION 1
- 1.1 Facility Location 1
- 1.2 Operation 1
- 1.3 Coordinated Emergency Services 1
- 1.4 SPCC Plan Maintenance 2
- 1.5 SWPPP Maintenance 2

2.0 INVENTORY OF OIL AND HAZARDOUS MATERIALS 3
- 2.1 Discussion 3
- 2.2 Business Information and Identification 3
- 2.3 Emergency Contacts/Emergency Coordinators 4
- 2.4 Hazardous Materials Inventory 4

3.0 SPILL PREVENTION, CONTROL, AND COUNTERMEASURES 5
- 3.2 Past Spill Experience - 40 CFR 112.7(a) 5
- 3.3 Prediction of Flow of Spills - 40 CFR 112.7(b) 5
- 3.4 Containment and/or Diversionary Structures - 40 CFR 112.7(c) 5
- 3.5 Conformance with SPCC Standards and Guidelines - 40 CFR 112.7(e) 5
- 3.6 Inspections and Records 6
- 3.7 Security 6
- 3.8 General Plant Spill Prevention 7
- 3.9 Surface Drainages 7
- 3.10 Treating Cylinders 8
- 3.11 Tank Car and Truck Unloading 8
- 3.12 Tank Farm 8
- 3.13 Fuel and Lubricating Oil 9
- 3.14 Oil Water Separator 9
- 3.15 Biological Waste Water Treatment 9
- 3.16 Drip Pad 9
- 3.17 Hazardous Waste Storage Facility 9
- 3.18 Boiler Fuel Preparation 10
- 3.19 Planned Improvements Schedule 10

TABLE 3.1 - TANK LISTINGS 11

4.0 EMERGENCY RESPONSE PROCEDURES 12
- 4.1 General 12
- 4.2 Emergency Coordinator 12
- 4.3 Immediate Response 12
- 4.4 Response Procedures 12
- 4.5 Emergency Notifications, Reports, and Record Keeping 14
  - 4.5.2 WHAT SPILLS OR INCIDENTS MUST BE REPORTED AND TO WHOM? 15
  - 4.5.3 WHAT SPILLS ARE REPORTABLE? 16

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT 17
- 4.6 Available Equipment 21
- 4.7 Emergency Response Contract Services 21
- 4.8 Fire and Disaster Response Plans 22
- 4.9 Medical Emergency Plans 24

5.0 STORM WATER POLLUTION PREVENTION PLAN 25
- 5.1 General 25
- 5.2 Pollution Prevention Objectives and Process 25
- 5.3 Pollution Prevention Team 26

5.4 Description of Potential Sources 26
5.5 Measures and Controls 28
5.6 Comprehensive Site Compliance Evaluations 33
5.7 Special Requirements for EPCRA Section 313 Facilities 33
5.8 Monitoring and Reporting Requirements 34
5.9 Compliance Schedule 37
5.10 Record Keeping 37

6.0 TRAINING 38

SITE, LOCATION, AND STORM WATER MANAGEMENT PLANS ..... FIGURES

OIL POLLUTION ACT SUBSTANTIAL HARM CERTIFICATION ..... APPENDIX A

STORM WATER POLLUTION PREVENTION REPORT FORM ..... APPENDIX B

STORM WATER DISCHARGE, EVALUATION AND CERTIFICATION,
MISSISSIPPI WORKSHEET #2c ..... APPENDIX C

PROCESS EQUIPMENT INSPECTION FORM ..... APPENDIX D

1.0 INTRODUCTION

This plan has been developed to (a) provide a basis for planning for and responding to potential spills, accidents, fires, or other contingencies, and (b) describe and implement practices to minimize and control pollutants in storm water discharges It includes the requirements for Contingency Plans as required by the Resources Conservation and Recovery Act (RCRA) as well as the plant's Spill Prevention, Control, and Countermeasures (SPCC) Plan and Storm Water Pollution Prevention Plan (SWPPP) as required by the Clean Water Act. It further includes the inventory reporting requirements of the Emergency Planning and Community Right-to-Know Act (SARA Title III).

Questions concerning this plan may be directed to:

Name	Title	Home Phone / Cell Phone
Kevin Coker	Plant Manager	(662) 513-4148 / (662) 417-4308
Marcus Smith	Assistant Plant Manager	(662) 226-5441 / (662) 417-3271
John Cummings	Maintenance Supervisor	(662) 237-9545 / (662) 417-6184

1.1 Facility Location

The Grenada Plant is located at the unincorporated town of Tie Plant, Mississippi in Grenada County approximately 1/2 mile East of U. S. Highway 51 South on Koppers Drive. The approximate USGS location is North 33°, 44'04", West 89°, 47'19".

1.2 Operation

The Grenada Plant processes and preserves wood products by the pressure treating process. Creosote coal tar solution and pentachlorophenol in oil are used as preservatives.

1.3 Coordinated Emergency Services

This plan is written to facilitate the quick and efficient coordination of emergency response actions between Koppers Inc. (Koppers) and any emergency response company or agency that may be needed. Copies of this plan, and updates, are provided to the following:

U. S. EPA Region IV
Grenada Fire Department
Tie Plant Volunteer Fire Department
Grenada Lake Medical Center
Grenada Civil Defense
Plant Supervisors
Police Department

Instructions on how and when to obtain assistance for emergency situations, including agency and contractor phone numbers, are included in section 4.0 of this plan.

Copies of this plan are available at the following plant locations:

Main Office
Maintenance Shop
Treating Control Room

1.4 SPCC Plan Maintenance

This Plan must be kept up to date. Notify the Environmental Program Manager in the event of any change made or needed. Review and evaluation of the SPCC plan is required every three (3) years and the plan must be amended, as necessary, within six (6) months of such review to include more effective spill prevention and control technologies. This Plan must also be amended whenever there is a change in design, construction, operation or maintenance which materially affects the facility's potential for discharge, and the amendment must be fully implemented as soon as possible and no later than within six months. Any amendment to the plan must be certification by a Professional Engineer. Evidence of the reviews and evaluations shall be recorded on the signature page.

A copy of this Plan is to be maintained in the plant's office. All changes to the Plan must be maintained in the same manner.

1.5 SWPPP Maintenance

The pollution prevention section of this plan may require revisions in addition to those described above.

1.5.1 If the SWPPP proves to be ineffective in eliminating or significantly minimizing pollutants in discharges, the plan shall be revised as necessary and changes implemented as soon as practical.

1.5.2 Following a Comprehensive Site Compliance Evaluation in which the need for changes are identified, revise the plan within 2 weeks and implement the changes within 12 weeks of the evaluation.

2.0 INVENTORY OF OIL AND HAZARDOUS MATERIALS

2.1 Discussion

Various materials are used at the Koppers facility which are considered hazardous based on the toxicity or flammability of the materials. Such materials may also be listed as Water Priority Chemicals based on their potential to impact water resources. These include preservatives that are used in the industrial processes to pressure treat wood products, unusable waste products from these processes, boiler water treatment chemicals, and fuel and lubricants for plant vehicles and equipment. Fuel and lubricants for plant vehicles and equipment are regulated as oil.

2.2 Business Information and Identification

The following information applies to the Koppers Industries Grenada Plant:

Business Name:	Koppers ~~Industries~~, Inc.
Business Phone:	(662) 226-4584
Owner:	Koppers Industries, Inc. 436 Seventh Ave. Pittsburgh, PA 15219
Operator:	Same as owner.
SIC Code:	2491
EPA ID Number:	MSD007027543
NPDES Permit:	Storm Water General Permit, Wood Treater MSR 220005
Site Address	1 Koppers Dr Tie Plant, Mississippi 38960
Mail Address:	P. O. Box 160 Tie Plant, Mississippi 38960
Type of Business:	Wood Preservative Treatment

2.3 Emergency Contacts/Emergency Coordinators

Name / Address	Title	Home Phone / Cell Phone
Kevin Coker 906 Sleepy Hollow Cove Oxford, MS 38655	Plant Manager	(662) 513-4148 / (662) 417-4308
Marcus Smith 2249 Perry Rd Grenada, MS 38901	Assistant Plant Manager	(662) 226-5441 / (662) 417-3271
John Cummings Route 1 Box 127B Grenada, MS 38901	Maintenance Supervisor	(662) 237-9545 / (662) 417-6184

The individuals referenced above can normally be reached during work hours at the business phone number, (662) 226-4584. Additionally, the night shift operator can be reached at (662) 226-4585, extension 31. Relevant phone numbers for Koppers Inc.

The plant manager is the Primary Emergency Coordinator (EC) and should be contacted first. The plant manager is accountable for oil discharge prevention. If he is not available, the others should be called in the order listed until someone is reached. The Primary Emergency Coordinator and alternates have complete authority to commit all necessary resources of the company in the event of an emergency.

During off shifts, holidays, and weekends, the shift supervisor must serve as the EC in the instance of an emergency until a higher ranking management member arrives at the site. His responsibilities would include the notification of the alternate persons listed above, calling for emergency response services, and/or mobilizing plant personnel and equipment to respond to the incident.

2.4 Hazardous Materials Inventory

The primary hazardous materials and oils, their respective storage tanks, and the nominal quantities of each stored at the Koppers Inc. – Grenada Plant are listed in Table 3.1. The name and number of each tank and various facilities are reflected on the site maps in Appendix C.

Drums of hazardous waste are stored in the Hazardous Waste Storage Facility for up to 90 days. This facility is a metal building equipped with a concrete floor and curb. Up to a maximum of 150 drums of wastes from the on-site wastewater, creosote, and pentachlorophenol treating processes may be stored prior to off-site disposal. This waste is stored for a maximum of 90 days, stored on wooden pallets, labeled, and spaced per RCRA regulations.

3.0 SPILL PREVENTION, CONTROL, AND COUNTERMEASURES

3.1 Description

This section of the Plan provides information specific to the storage and handling of oil and hazardous materials, spill prevention and containment equipment, and countermeasures to be implemented to control the impact of a spill. Recognizing that the requirement to prepare a SPCC plan, per 40 CFR 112, is only required for facilities which handle and/or store oil, KII has chosen to use this format to cover both oil and hazardous materials at our plants. This section generally follows the format for SPCC plans, modified as appropriate to include hazardous materials.

3.2 Past Spill Experience - 40 CFR 112.7(a)

Although occasional reportable spills of hazardous materials have occurred and been reported, no oil spills, as defined by 40 CFR 110 (See 4.5.3), have occurred at this facility. A record of all reported spill events is maintained in the plant's operating records.

3.3 Prediction of Flow of Spills - 40 CFR 112.7(b)

All process tanks containing oil or hazardous materials have been provided with secondary containment. That containment, except as noted, can only be emptied by operation of pumps which use dedicated piping to receiving wastewater tanks. It is unlikely that any event could cause significant quantities of material to be released to waters of the U. S. If such event did occur, the spilled material would follow the drainage courses, which also include spill control capabilities, as shown on the Storm Water Plan.

The quantities of materials listed for tank capacities in the Tank Listing Table, Table 3.1, represent the maximum quantities, which could potentially be released. Locations can be found for processes and tanks on the site map. The rate of flow would depend on the incident.

A drain valve is provided for the diesel fuel tank secondary containment. Water is only drained from this containment following visual inspection to assure that the water does not contain any oil and is only done by the plant Environmental Supervisor or a person reporting to him. If the water contains oil, it is transferred to the waste water system.

3.4 Containment and/or Diversionary Structures - 40 CFR 112.7(c)

This facility meets the requirements for containment and/or diversionary structures or equipment to prevent discharged oil or hazardous substances from reaching navigable waters. This is accomplished by providing a system of curbs, dikes, and secondary containment for all major tanks and process equipment and with backup of dikes with emergency shut-off gates within drainage. Rainwater from containment areas is automatically pumped to and treated with the process wastewater. Wastewater surge tanks have capacity large enough to handle the full volume of any one-process tank. Process area containments do not have drain valves and, therefore, could not allow a spill or release.

3.5 Conformance with SPCC Standards and Guidelines - 40 CFR 112.7(e)

A discussion of this facility's compliance with the applicable SPCC guidelines is provided in the following paragraphs. These first deal with general or facility wide issues and then with process or

equipment specific issues. Last, a schedule of improvements which are planned to enhance spill prevention is provided. Training of personnel is covered is Section 6.

The plant manager is the person accountable for spill prevention.

3.6 Inspections and Records

The operational areas in the Treating Department are checked regularly, normally every hour, by the operator on duty throughout each shift. The preservative pipes, valves, process equipment, tanks and treating cylinders are routinely checked by the treating operator on duty. Any problems or unusual circumstances which can not be immediately resolved are reported to the Supervisor.

Formal inspections of the tanks, treating cylinders, and piping systems for signs of leaks, deterioration or unsafe conditions are made weekly as part of the Plant Facility Inspection. A copy of this inspection form is included in Appendix D. Completed inspection forms are maintained in the plant Operating Record.

Additionally, whenever tanks are emptied and cleaned, a complete internal inspection will be made. Non-destructive shell thickness testing will be conducted periodically for tanks and piping, as needed. These additional inspections will be recorded in the Plant Operating Record.

Additional security provisions are provided for the RCRA facilities. The Closed Surface Impoundment is enclosed within fenced area. Gates are kept locked when not in use. Signs are posted at entrances to RCRA facilities stating, "Danger - Unauthorized Personnel Keep Out."

Any leaks or deficiencies identified by the above inspections will be corrected promptly.

3.7 Security

The plant normally operates 24 hours a day, 7 days a week and will have at least one employee present. Process areas of the plant where oil or hazardous substances are stored are well lighted. Roads leading into the plant are secured with gates, which are closed whenever the plant is not occupied. The plant is bordered by other industrial or agricultural properties, railroad right-of-way, and some residential area. Most of this border is not fenced. Experience indicates that trespassing is not a problem at this location.

Design features of the plant minimize the threat of release that could be caused by a trespasser. Process tank valves are connected to process pipes connected to other tanks, making release from unauthorized opening unlikely. There are no drain valves on work tanks, so it would be difficult for trespasser to cause a release. Some tanks have sample valves which could be opened, but due to their small size, the existing containment system could easily handle the material.

At times when the plant is not in operation and is unattended, the following security procedures apply:

- Treating room doors will be locked, which restricts access to valve headers.
- Cylinder doors are shut, with hydraulic controls turned off.
- Plant gates are closed and locked.

3.8 General Plant Spill Prevention

A hazardous material spill can occur any place, any time. All employees must be prepared to respond immediately to control damage and to notify management. Containing a spill to the smallest area possible is the first step. Containment can quickly be constructed using available equipment and supplies; usually by placing dirt, sand, or sawdust around the lower side of a spill with Koppers loaders. If possible, a spill should be prevented from reaching the surface water drainage, where it will spread more rapidly and have greater environmental and health impact.

Spills are more likely to occur when delivery trucks are unloading into Koppers tanks. Unloading operations should be supervised by employees familiar with the process equipment involved. Buckets or pans should be placed under hose connections to collect drips. Be prepared for hoses and pipes to be full and for liquid to be behind valves. Properly and promptly cleanup any drips or spills. Supervisors must be notified of any spills which are outside of containments. Oil, creosote, and other hazardous material deliveries are made by vehicles complying with DOT spill control regulations. Unloading is supervised by plant operators.

Maintenance, repair and plant modification projects also present a potential for causing spills since work often involves pipes and equipment which cannot be fully stripped of liquids. Workers must plan ahead and expect liquid whenever opening the pipe systems. Collection pans should first be readily available. Collected material must be returned to the processes or be properly containerized for disposal.

Only materials compatible with the stored/processed material will be used for tanks, equipment, and piping. Secondary containment is sufficiently impervious and of capacity to contain the largest tank in each tank area plus allow sufficient freeboard for precipitation. Pipe supports are designed to minimize abrasion and corrosion and allow for expansion and contraction. Above ground piping is located where damage by vehicles is unlikely or it is protected from damage by traffic barricades and/or warning signs.

In order to assure that leaks in steam coils in contact with preservative or oil do not result in a release, waste water permit violation, or boiler damage, condensate return is monitored for clarity by a meter. Excess turbidity will cause an alarm and will shut off the supply of condensate return to the boiler.

Portable tanks are not normally used. However, if needed, portable tanks will be positioned to prevent spills to navigable waters, provide secondary containment, and not be subject to flooding.

Out of service pipelines will be clearly identified and will be sealed with caps or blank-flanges until they are permanently removed.

3.9 Surface Drainage's

Koppers plant surface areas drain toward the Bogue Creek that goes to the Yalobusha River. Most of the process area first drains into either of three drainage ditches before draining to the River. Equipment, including secondary spill containment, has been installed and procedures implemented to prevent oil or hazardous materials from reaching the river. A spill is most likely to occur in the process area and, if not contained, would drain into the ditch.

In the case of a spill or event in which hazardous materials or oil does reach or has the potential to reach either or both of the drainage ditches, immediate action must be taken to contain the spill. Temporary earth dams should be constructed using plant equipment along the ditches, creating a series of impoundments to contain the flow. Sorbent booms may be used to remove containments from the water held behind the dams, if needed.

These dams can only hold back a limited amount of water, so emergency help should be contacted at the first sign that such a spill has occurred or may occur.

If a spill occurs into the cooling water pond, try to contain it there. The cooling pond overflows to the #4 storm water pond, at which a spill could also be contained.

3.10 Treating Cylinders

There are 5 treating cylinders located in one common concrete containment area. Cylinders 2, 3, and 4 are used for creosote treatment, cylinders 1 and 5 are used for penta-in-oil treatment. The largest cylinder capacity is 34,000 gallons. The containment capacity is approximately 56,000 gallons.

The treating processes consist of the cylinders, a work tank, vacuum system, and transfer and pressure pumps for each cylinder, and common storage tanks, waste water collection system, condensate tank, tank car and truck unloading, and oil water separation. Most of this associated equipment and piping is within concrete containment as described below.

3.11 Tank Car and Truck Unloading

Trucks and tank cars are unloaded at the Unloading Station, which is concrete lined for spill containment. All process transfer pipelines are all above ground. The primary potential spill sources in the creosote process include leaks from the process tanks, valves, pumps, and pipe systems. These leaks can best be prevented by proper valve and pump maintenance and equipment inspection during creosote transfers. Any leaks or drips must be cleaned up immediately.

Any rainwater which is collected in the containments is pumped to the wastewater treatment system for treatment.

The containment pad does not provide full containment for the tank car volume so that a major tank spill would spread to surrounding process areas. Therefore, tank heating and unloading must be carefully supervised by operators. Immediate action to contain a major spill will minimize any impacts.

The unloading facility will be replaced or modified to provide full secondary containment per section 3.19, Planned Improvements Schedule.

3.12 Tank Farm

All preservative tanks are in the concrete lined and diked tank farm. The largest tank capacity is 300,000 gallons. Containment capacity of approximately 308,000 gallons is provided by a concrete floor and wall surrounding the entire tank farm.

3.13 Fuel and Lubricating Oil

Gasoline and diesel fuel are delivered by tank truck and transferred into storage tanks that are within containments. Care must be taken to prevent spillage during dispensing fuel into vehicles and equipment.

Lubricating oil is delivered and stored in building, in 55-gallon drums. Drums will be stored upright and kept sealed. Dispensing areas will be kept clean. Oil drippage will be contained. Any minor spills will be cleaned up immediately.

Any oil or fuel spill (discharge) which violates applicable water quality standards, or causes a film or sheen upon or discoloration of the surface water or adjoining shorelines is reportable.

3.14 Oil Water Separator

The oil water separator is a reinforced concrete in-ground concrete tank with two primary basins. pH adjustment and coagulant and flocculent addition and mixing occur in an adjacent above ground steel tank. These tanks do not have secondary spill containment, but are equipped with high level switches which sound alarms in the control room and shut off inflowing wastewater. Plant operators are instructed in proper response to the high level alarms.

The separator will be replaced or modified to provide full secondary containment and leak detection per section 3.19, Planned Improvements Schedule.

3.15 Biological Waste Water Treatment

The activated sludge aeration tank, clarifier and final effluent tank are located in a concrete containment. The largest tank capacity is 150,000 gallons and the containment capacity is 198,000 gallons.

Although the treated effluent water presents a very small environmental risk, as a listed hazardous waste, a spill to the environment must be reported and cleaned if one occurs.

3.16 Drip Pad

Concrete drip pads have been installed to contain and recover any drippage which may occur from the freshly treated wood plus collect any storm water which falls onto the pads. Water and preservative is pumped from the drip pad sumps to waste water surge tanks, which have the design capacity to contain the water collected in a 24-hour, 25-year storm. Water from the oil process drip pad is transferred to the wastewater process for treatment.

3.17 Hazardous Waste Storage Facility

The Waste Storage Building is a less than 90-day facility for the storage of hazardous waste in containers. Up to 640 drums may be stored in the facility. Materials to be stored are the wastes generated at the plant. All materials to be stored are compatible with each other and are not reactive, explosive, or corrosive. The facility has a concrete floor with a berm and is fully contained within a steel building. The main significant spill potential is present when waste containers are being transported into or out of the building. Drums should only be transferred with gasket lids tightly

sealed. Only sound DOT approved drums are used.
Two hazardous waste satellite collection points exists on plant grounds. One is found outside the treating room door (left side of door). Another drum is found on the maintenance work pad.
Both drums are for creosote and PCP waste collection.

3.18 Boiler Fuel Preparation

We no longer use treated wood as fuel. Only material from the process of untreated wood products is used. Although the boiler is permitted to burn creosote and pentachlorophenol treated wood as fuel.

3.19 Planned Improvements Schedule

The following work will be completed within the schedules stated to bring the plant into full conformance with the spill prevention requirements of 40 CFR 112 and good engineering practice:

Project Description	Complete by end of:
Replace or modify in-ground separator to provide full secondary containment and leak detection.	July, 2003
Modify rail car and tank unloading area to provide full Containment	July, 2003

TABLE 3.1 - TANK LISTINGS
Koppers Industries, Grenada Plant

Reference No.	Name	Contents	Capacity
1.	#1 Cylinder	Penta	34,000
2.	#2 Cylinder	Creosote 60/40	27,000
3.	#3 Cylinder	Penta	27,000
4.	#4 Cylinder	Creosote #1	27,000
5.	#5 Cylinder	Penta	27,000
6.	#1 Work Tank	Penta in Oil	30,000
7.	#2 Work Tank	Creosote 60/40	30,000
8.	#3 Work Tank	Penta	30,000
9.	#4 Work Tank	Creosote #1	22,420
10.	#5 Work Tank	Penta in Oil	30,000
11.	Measuring Tank	Creosote #1	4,200
12.	#1 Storage Tank	Creosote #1	100,000
13.	#2 Surge Tank	Process Water	100,000
14.	#5 Storage Tank	Fuel Oil	100,000
15.	#6 Storage Tank	Creosote 60/40	105,000
16.	#10 Surge Tank	Process Water	300,000
17.	Storm Water Surge	Storm Water	250,000
18.	Coagulant	Dearfloc 4301	1,500
19.	Decant Tank	Creo/Oil/Water	2,500
20.	Creo Blowdown Tank	Water/Creosote	8,000
21.	Air Receivers	Compressed Air	
22.	Air Receivers	Compressed Air	
23.	Penta Blowdown Tank	Water/Penta/Oil	8,000
24.	Gas Tank	Gasoline	1,250
25.	Fuel Oil #2	Fuel Oil	9,000
26.	Water Treatment Tank	Water	150,000
27.	Water Treatment Tank	Water	25,000
28.	Water Treatment Tank	Water	15,000
29.	Creosote Dehydrator	Not in Use	8,000
30.	N. Penta Equalization	Water/Oil/Penta	14,000
31.	S. Penta Equalization	Water/Oil/Penta	14,000
32.	Penta Mix Tank	Oil/Penta	9,400
33.	Penta Mix Tank	Oil/Penta	5,000
34.	Penta Concentrate St.	Penta Concentrate	10,500

4.0 EMERGENCY RESPONSE PROCEDURES

4.1 General

This section of the plan describes the actions that are to be taken by Koppers personnel in response to any injury, accident, fire, explosion, or unplanned sudden or non-sudden release of oil, hazardous waste, hazardous waste constituent, or hazardous material to the air, soil, or surface water.

4.2 Emergency Coordinator

As soon as an emergency situation is discovered by an employee, that person shall quickly estimate the extent the problem, take safe and appropriate control action, and then notify the plant management immediately. Once notified, the Plant Manager or the supervisor highest on the emergency notification list in Section 2.3, page 4, who is present will assume the responsibilities of Emergency Coordinator (EC). Other personnel will respond as a team under the direction of the EC as needed based on the type of emergency, individual skills, and plant responsibilities.

The EC has Koppers Industries' commitment to spill prevention and response and has the authority to commit plant employees and contract labor and equipment to response actions and to purchase needed supplies. The EC is responsible for the appropriate implementation of this plan in an emergency.

Effective communication is vital in any emergency response. All plant supervisors, have portable two-way radios which will be used for communication and coordination between the plant offices and yard areas. Phones may also be used between offices.

4.3 Immediate Response

As soon as an employee discovers an emergency situation, he shall quickly determine the extent of the problem. If a simple action can be taken to control a release or other emergency, such as shutting a valve to stop the flow from a ruptured pipe, and can be done safely, then the control action should be completed first. If there is no simple, safe control action or after taking such action, the person shall immediately notify the plant management and any other personnel who may be endangered by the incident by phone or radio.

4.4 Response Procedures

4.4.1 Upon discovery or notification that an emergency exists, the EC, assisted by the management team, shall:

- Determine the extent of the emergency,
- Implement plant evacuation, if needed, to prevent injury,
- Call for outside assistance as needed,
- Start immediate control actions,
- Implement cleanup or other responses,
- Notify local, state, and federal agencies as required,
- Notify Koppers Pittsburgh office,
- Assure completion of cleanup,
- Provide for storage of cleanup material, inc. hazardous waste,
- Evaluate possible hazards to human health or environment,
- Make a final written incident report.

Many of these actions may occur concurrently and are discussed further below.

4.4.2 Whenever there is an imminent or actual emergency situation, the emergency coordinator, or his designee, shall:

- Immediately call by radio or phone to notify all facility personnel;
- Immediately notify appropriate federal, state, and/or local agencies with designated response roles if their help is needed;
- Make other notifications as stated in Section 3.5, Emergency Notifications.

4.4.3 Whenever there is a release, fire, or explosion, the emergency coordinator shall immediately identify the character, exact source, amount, and area extent of any released materials. This may be done by observation or review of facility records or manifests and, if necessary, by chemical analysis. Form 4.1 should be used to document the information needed for notifications.

4.4.4 Concurrently, the Emergency Coordinator shall assess possible hazards to human health or the environment that may result from the release, fire, or explosion. This assessment shall consider both direct and indirect effects of the release, fire, or explosion (e.g., the effects of any toxic, irritating, or asphyxiating gases that are generated, or the effects of any hazardous surface water run-off from water or chemical agents used to control fire and heat-induced explosions).

4.4.5 If the Emergency Coordinator determines that the facility has had a release, fire, or explosion which could threaten human health, or the environment, outside of the facility, or if the released amount of hazardous or extremely hazardous material exceeds the Reportable Quantity (RQ), the findings shall be immediately reported to the National Response Center as in Section 4.5, Emergency Notifications. Note that the reportable quantities for materials are listed in Section 4.5.

If his assessment indicates that evacuation of local areas may be advisable, appropriate local authorities shall be notified immediately. The Emergency Coordinator shall be available to help appropriate officials decide whether local areas should be evacuated.

4.4.6 During an emergency, the Emergency Coordinator shall take all reasonable measures necessary to ensure that fires, explosions, and releases do not occur, recur, or spread to other hazardous wastes or materials at the plant. These measures could include turning water sprays onto tanks, stopping and isolating processes, shutting off power to areas, collecting and containing released materials, or moving and isolating other containers.

4.4.7 If some or all operations are stopped in response to an emergency, the emergency coordinator shall monitor tanks, pipes, valves, and other process equipment for leaks, pressure build-up or ruptures wherever appropriate.

4.4.8 Immediately after an emergency, the Emergency Coordinator shall provide for treating, storing, or disposing of recovered materials or wastes, contaminated soil, surface water, or any other material that results from a release, fire, or explosion.

4.4.9 Before resuming operations, the Emergency Coordinator shall:

a. Insure that clean up is complete to the point that operations will not interfere or create further potential for hazardous waste release,

b. Insure that all emergency equipment is cleaned and fit for use, and

c. If hazardous wastes or a hazardous waste unit has been involved, then advise the Mississippi Department of Natural Resources and EPA Region IV that Steps a. and b. above are complete.

4.4.10 If hazardous wastes or a hazardous waste unit has been involved, the Emergency Coordinator shall submit a written report within 15 days of the incident to the Department of Health Services. Form 4.1, completed, may fulfill this purpose or will at least provide a basis for the report. A copy of the completed report shall be maintained in the Operating Record.

4.5 Emergency Notifications, Reports, and Record Keeping

4.5.1 The emergency coordinator shall ensure that the necessary notifications are made. The following form 4.1 is a three page form titled, "Emergency and/or Hazardous Materials Incident Report." Page 1 is organized to provide all the information needed for the initial verbal notification of the National Response Center or other agencies. As soon as a spill or other incident is discovered, the supervisor/manager who will do the reporting should begin filling in the information.

Page 2 should be used as a log of notifications made. Get the position and name of the person who accepts the phone notifications. Also, if an incident number is assigned, as by the National Response Center, that number should be recorded. As more is learned about the incident, the report should be updated. Updates can be recorded on page 2 as well.

Pages 1 and 2, completed either by hand or typed, can be used for the required written notification of agencies. These should be sent with cover letters showing everyone who will get copies. Copies must be kept in the plant's Operating Record.

Finally, page 3 should be used for Koppers Industries internal reporting of additional related information. KII has an obligation to report all spills which could possibly impact over-all cleanup work to Beazer East, Inc. (BEI). The complete report, Pages 1, 2, and 3 should be sent to the KII Environmental Program Manager, including original photographs. He will provide any required notification to BEI.

Copies of all completed Incident Reports must be maintained at the plant as part of the Operating Record.

4.5.2 WHAT SPILLS OR INCIDENTS MUST BE REPORTED AND TO WHOM?

Following is a summary. Note that more than one category may apply.

If outside help is needed, IMMEDIATELY:

Call fire and/or other appropriate emergency agencies, describe incident and needed assistance, such as fire suppression, medical aid, evacuation, and/or crowd control.

If release or threatened release of hazardous material, IMMEDIATELY:

Call the **Local Emergency Planning Committee (LEPC)** (662) 226-1076. This report shall be made unless it is determined that the release poses no significant hazard to human health and safety, property, or the environment **and** is less than the reportable quantity for the material.

Such releases which cannot be recovered must also be included in the SARA Title III annual reports.

If health threat or release outside of facility; OR

If the release results in or has the potential to cause an oil sheen on or discoloration of runoff water; OR

If release of hazardous or extremely hazardous material exceeds the Title III Reportable Quantity, IMMEDIATELY:

Call **National Response Center** at 800-424-8802.

If hazardous waste or a hazardous waste unit is involved OR if the plant contingency plan is implemented; IMMEDIATELY AND NOT LATER THAN 24 HOURS:

Call the appropriate **Mississippi Department of Environmental Quality** (800)222-6362.
AND, Within 15 days
Submit a written report of the incident to the agency.

If injuries result in 5 or more people being hospitalized or 1 or more person killed, IMMEDIATELY AND NOT LATER THAN 48 HOURS:

Call the **U. S. Occupational Safety and Health Administration** or authorized state OSHA agency.

If an uncontrollable release occurs, IMMEDIATELY CALL

SHAW Environmental at 1-800-537-9540 and ask for an "Emergency Response Manager."

In all cases, as soon as the emergency situation allows, Koppers management in Pittsburgh shall be called. Follow the guidance contained in "Internal Emergency Notification Procedures" for Koppers Inc. At least one of the following primary contacts in Pittsburgh shall be notified:

Name, Position	Work Phone	Cell Phone	Home Phone
Patrick Stark, Environmental Manager	(412) 227-2114	(412) 736-8305	(412) 274-7870
John Marcinowski, Emergency Manager	(412) 227-2884	(412) 897-8408	(412) 384-9430
Michael Juba, Global Safety Officer	(412) 227-2882	(412) 897-8407	(412) 731-4977
Randy Collins, SH&E Risk Manager	(412) 227-2456	(412) 401-1199	(412) 384-2855
Fran Wisniewski, UP&P Operations VP	(412) 227-2392	(412) 401-7807	(412) 318-0558
Jim Healey, UP&P Operations Manager	(412) 227-2264	(412) 606-1387	(412)259-7939
Leslie Hyde, Corporate Officer SH&E	(412) 227-2237	(412) 398-1305	(412) 431-8662

4.5.3 WHAT SPILLS ARE REPORTABLE?

For hazardous materials, Reportable Quantities (RQ) are specified by the EPA. Additional requirements may be set by some states. The Federal Reportable Quantities are:

Creosote	1 pound
Pentachlorophenol	10 pounds
Penta waste from mixing process	1 pound
Arsenic	1 pound
Chromium	1 pound
Process Waste Water	1 pound
Creo/Penta Waste Water Treatment Sludge	1 pound
Sodium Hydroxide	1000 pounds
Phosphoric Acid	5000 pounds
Sulfuric Acid	1000 pounds
Gasoline (as D001, Ignitable Waste)	100 pounds
Diesel	1000 gallons

The Clean Water Act also has reporting requirements. Generally if "oil" is released to or presents the potential to be released to navigable waters in amounts that violate an applicable water quality standard or cause a sheen upon or discoloration of the surface of the water or adjoining shorelines or cause a sludge or emulsion to be deposited beneath the surface of the water or upon adjoining shorelines, then it is reportable and the National Response Center must be notified.

Gasoline, lubricating oils, diluent oil, and transmission fluid are all regulated as "oil". Unless released as above, reporting is not mandatory.

4.5.4 IF IN DOUBT, REPORT

If a spill is large enough to require cleanup action but is not reportable, it generally is a good practice to

make a courtesy report to the local agency contact. It shows that we are on top of the problem and provides valuable documentation of our response in case of a report by a third party. The attached written report form (4.1) should also be completed and submitted internally.

Form 4.1
EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

OWNER/OPERATOR: Koppers Industries, Inc.
Plant Name: Grenada Mississippi Plant
Street Addr: 1 Koppers Drive
Mail Addr: P. O. Box 160
City, St, ZIP: Tie Plant, Mississippi 38960
Phone: 662-226-4584
EPA ID #: MSD007027543

FACILITY: Same as above

DATE OF INCIDENT: _____ TIME OF INCIDENT: _____

TYPE OF INCIDENT: (Circle One) Fire, Explosion, Hazardous Material Spill, Hazardous Waste Spill, Injury Accident

Other: _____

MATERIALS INVOLVED:

Name	Quantity

EXTENT OF INJURIES, IF ANY:

_____

_____

ASSESSMENT OF ACTUAL OR POTENTIAL HAZARDS TO HUMAN HEALTH OR THE ENVIRONMENT, WHERE APPLICABLE:

_____

_____

_____

DISPOSITION OF RECOVERED MATERIAL:

Material	Quantity	How Disposed or Stored

Form 4.1 Page 2

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

NOTIFICATION LOG:

Agency Notified	Phone No.	Name of Person	Date/Time
Sheriff	911(Emergency) 662-226-2721	_____	_____
Emergency Services Dispatcher	911	_____	_____
Local Emergency Planning Committee:	662-226-1076	_____	_____
CIVIL DEFENSE or home	662-226-1076 662-226-7595	_____	_____
National Response	800-424-8802	_____	_____
Mississippi Department of Environmental Quality	601-961-5377	David Lee	_____
Mississippi Emergency Management Agency	800-222-6362	_____	_____
OSHA	_____	_____	_____
Environmental Program Manager-KII or Home:	412-227-2114 412-274-7870	Tim Basilone	_____
_____	_____	_____	_____
_____	_____	_____	_____

ADDITIONAL DESCRIPTION OF INCIDENT AND ACTIONS TAKEN (Attach page if needed):

_____

_____

_____

_____

REPORT BY (Name): _____ DATE: _____

REPORT REVISED: _____ DATE: _____

REPORT REVISED: _____ DATE: _____

Table 4.1
EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

SUPPLEMENTAL INFORMATION REPORT
(This part of report is intended for KII internal use only.)

CLEARLY DESCRIBE HOW INCIDENT OCCURRED:

_____
_____
_____
_____
_____
_____

WHAT ACTS OR CONDITIONS MOST DIRECTLY CAUSED THE INCIDENT:

_____
_____
_____
_____

DESCRIBE WHAT HAS OR WILL BE DONE TO PREVENT A RECURRENCE:

_____
_____
_____
_____
_____

DESCRIBE ANY RESIDUAL CONTAMINATION OR IMPACT:

_____
_____
_____
_____

ATTACH PHOTOGRAPHS WHICH SHOW INCIDENT AREA, BEFORE AND AFTER RESPONSE ACTIONS. MARK DATE OF PHOTOS.
ATTACH ADDITIONAL SHEETS AS NEEDED TO DESCRIBE INCIDENT AND RESPONSE ACTIONS.

4.6 Available Equipment

The following equipment is available at the plant:

Equipment	Location
Lift trucks	Shop
Hydraulic Loaders	Shop
Dump Truck	Tie Sorter/Unloader
Grader	Shop
Pickup Truck	Shop
Portable pumps	Shop, Treating
Sawdust and sorbets	Treating, Shop, Emergency Spill Room
Portable steam cleaner	Treating
Bulldozer	Shop
Backhoe	Shop

The above equipment can be effectively used to control and clean a spill of oil, hazardous material, or hazardous waste. Trucks and loaders can be used to transport and place soil for containment dams, sorbets to soak up spilled liquid and contaminated soil from cleanup actions. Pumps can be used to pump spilled liquid back into containment. After response action is complete, equipment should be placed on the drip pad or other contained area and decontaminated with the steam cleaner prior to being released from the response.

4.7 Emergency Response Contract Services

Koppers has entered into a Corporate Agreement with Shaw Environmental to provide various environmental services in the event of an emergency. Shaw Environmental may be reached at their nationwide 24-hour line at 1-800-537-9540 and ask for a "Crisis Team Member".

Additionally, the following local contractors are available:

Willis Engineering
Mr. Robert Willis
Grenada, MS 38901
Phone: 662-226-1081

Electrician
Ronald Edwards
Edwards Electrical Service
Rt. 1 Box 106
Carrollton, MS 38917
Phone: 662-229-0606 or 662-237-9271

4.8 Emergency Response Plans (Fire, Civil, etc.)

4.8.1 This section of the Contingency Plan provides additional information on specific response actions to be taken in the event of a major disaster, emergency, or other disruption. Such an event could include:

- Fire or explosion
- Earthquake
- Strike or civil strife.

4.8.2 Fire or Explosion

Fire disasters can occur anywhere in the plant environment, so all employees should be knowledgeable as to the proper method for handling type A, B, and C fires, and where the largest potential risk areas are located. Communications with and between plant employees is vital to a safe and effective response. Therefore, the following sections describe responses that put all employees at locations where plant radios or phones will be available. Additionally, this will facilitate accounting for all personnel without having to search for anyone. Employees, which respond to the gate, will keep all unauthorized traffic out of the plant and move other traffic in and out as needed.

All fire emergency operations will be done by the Grenada Fire Department and responding agencies. Koppers employees will evacuate and correlate with the responding agencies.

4.8.3 Designated Response Stations

In the case of a disaster or other major incident, employees shall secure their work areas and processes and then report to the following designated response stations:

(If they are not directly involved in Emergency Response)

Fire Pump
Maintenance Supervisor: John Cummings (or his designate)

Treating Plant employees stay at plant area for controlled shutdown, if safe. Otherwise, respond to the Service Building.

Plant Office Employees stay at office. Coordinate outside calls, inquires, and media contacts.

4.8.4 Evacuation

The need for evacuation shall be signaled by a message over the radio to all supervisors, who will notify their employees. Employees shall follow the safest path to meet and check in at the following location:

Service Building

Supervisors shall account for all of their employees, notify the main office when they are "all clear" and relay further instructions. An alternate location will be designated and announced at the time of the incident if the service building is not a safe check-in location.

4.8.5 Fire Suppression Systems

Sprinklers, activated by fusible links in the nozzles, are located in the ceiling areas of the treating building. Water supply must be on at all times.

Fire Hose and Hose Reels are located at strategic points around the plant. Employees must be familiar with ones within their work areas.

Fire Extinguishers are located throughout the plant and on rolling stock. CO-2 and ABC Dry Chemical types are used exclusively.

Diesel or Electric Fire Pump is located in the firehouse, which pumps from the raw tanks. The pump is manually operated. This will provide fire protection water to the main fire pipe system.

4.8.6 Civil Strife, Strike

Emergencies resulting from, or shutdowns as a result of, civil strife or strike situations require the control of people entering the plant, both authorized and unauthorized. Local law enforcement agencies can be helpful in achieving this goal, but in-plant security is management's immediate concern. When a total shutdown is planned, and security measures are to be implemented, the following should be observed.

Treating Plant

- Secure all treating systems, close cylinder doors, shut all valves, open all steam drain lines, shut down air compressor or arrange for maintenance.
- Inspections of all processes shall be made on a regular basis, at least once every 2 hours at first, then every 4 hours.

Boiler

- Secure gate and door locks.
- Follow established shutdown procedure.
- Assure that all steam line drains are open.

Hazardous Waste Storage Facility

- Properly stores all hazardous waste drums in facility.
- Lock doors.

Major Operations including Mill, Stacker, and Shop
- Secure electrical panels.
- Turn off air compressors, shut valves.
- Store and secure portable tools, cords, hoses, etc.
- Clean up area for safety and fire protection.

Rolling Stock
- Park centrally in area in front of office.

Gates
- Keep locked at all times.
- Put on new locks to prevent unauthorized entry.

Access Roads
- Blockade with ties or lumber.

Security Patrols
- At least 2 persons will provide security patrols on shifts, 24 hours per day.
- Plant vehicles will be provided
- Communication will be maintained at all times between the patrols and the main office by radio.

4.9 Medical Emergency Plans

Emergency and first aid supplies are maintained at the following work locations:

Main Office - (Main supply center)
Treating Room – Control Room
Upstairs Lab-Waste Water Testing
Downstairs Lab- Quality Control
Treating Office- Group Leaders Office
Shop – Maintenance Office
Tie Yard- Supervisor Office
Pole Yard- Both Group Leader Offices
Pole Peeler- Supply Room
South Yard- Group leader Office

First aid supplies are intended for use on minor cuts, abrasions, and burns requiring simple care such as Band-Aids, disinfectant, or ointment. Supplies are also available for the immediate treatment of severe injuries while awaiting professional medical care, such as gauze pads, bandages, and splints. First aid applied at the plant by plant employees is in no way intended to replace any needed medical attention, but only to help prior to receiving professional treatment.

If a serious injury occurs, assure that an ambulance is called immediately.

5.0 STORM WATER POLLUTION PREVENTION PLAN

5.1 General

This section of the plan describes the pollution prevention procedures and facilities for this plant to minimize the impact of storm water runoff to the surrounding environment. This section specifically addresses the requirements of the Storm Water General NPDES Permit, including special requirements for wood preserving industrial operations.

5.2 Pollution Prevention Objectives and Process

The objectives of the storm water PPP are; 1) to identify potential sources affecting pollution of storm water and 2) describe and implement practices to minimize and control pollutants in storm water discharges and ensure permit compliance. In the preamble to the Federal Register which finalized the EPA storm water general permits, EPA described the permit program as "intended to facilitate a process whereby the operator of the industrial facility thoroughly evaluates potential pollution sources at the site and selects and implements appropriate measures designed to prevent or control the discharge of pollutants in storm water runoff." That process includes the following:

1) Form a Pollution Prevention Team,
2) Assess sources,
3) Select and implement practices and controls, and
4) Conduct periodic evaluations.

5.3 Pollution Prevention Team

The pollution prevention team is responsible for developing this pollution prevention plan and assisting in its implementation, maintenance, and revision. The team consists of the following:

STORM WATER POLLUTION PREVENTION TEAM

NAME	POSITION	RESPONSIBILITIES
Tom Henderson	Plant Manager	Overall plant compliance
Haley P. Biddy	Environmental & Treating Supervisor	Plan development and coordination, Routine inspections and enforcement.
Blair Simpson	Yard Foremen	Provide perspective for development and coordination
Tim Basilone	Corporate Environmental Manager	Plan development and engineering certifications, regulatory advise.
Walter Hobbs	North Pole Yard	Provide operational perspective for source identification and control measures.
Mark Sykes	South Yard	Provide operational perspective for source identification and control measures.
Terry Cobern	Utility Operator	Responsible for yard maintenance.
Broderick Spencer	Loader Operator	Provide equipment operator perspective in source identification and control measures.

5.4 Description of Potential Sources

This section describes activities, materials, and physical features potentially contributing to pollution.

5.4.1 Plant Drainage

Drainage patterns are shown on the Storm Water Management Plan, Figure 2. Generally, the central portion of the plant, which includes the preserving process area and maintenance shop, drains into the mid plant ditch. The north quarter of the plant, including the pole peeler yard, drains north to the north ditch and the south end of the yard drains south to the south ditch.

Significant plant features are identified on the Storm Water Management Plan, including the preserving process area, maintenance shop, drip pad, fuel tanks, material storage, loading, and unloading areas, and other process operations.
Pollutants most likely to be detected in storm water and likely sources are as follows:

Wood preservatives, including pentachlorophenol and creosote (which includes primarily various polycyclic aromatic hydrocarbons (PAHs)), may be detected in soil and storm water at many locations on the plant. Wood preserving has been conducted on this property since the early 1900s. Preservative may be present due to past waste disposal practices, past wood preserving practices, drippage from treated wood, preservative spills, and rain runoff from treated wood in storage.

Fuel, lubricating, and hydraulic oils are used on plant mobile equipment, trucks, and most fixed manufacturing equipment. Drips, leaks, or spills may contribute oil to storm water runoff.

Boiler and waste water treatment chemicals are used in the process area, but are kept in contained areas and are unlikely to impact storm water.

Other organic matter, generally from wood, may also be present in runoff from piles or stacks of wood poles, ties, or peeler shavings.

5.4.2 Inventory of Exposed Materials

Significant materials stored in exposed locations at the Koppers plant include untreated and treated wood poles and railroad ties, wood waste fuel, and yard waste materials. Typical inventory levels of these materials are:

Untreated RR ties:	260,000 pcs.
Creosote treated ties:	6,000 pcs.
Barky poles:	100 pcs.
Untreated poles:	3,700 pcs.
Penta treated poles:	9,000 pcs.
Creosote treated poles and piling:	3,000 pcs.
Untreated Switch Ties:	16,000 pcs.
Creosote Switch Ties:	4,000 pcs.
Untreated Lumber:	3,000 pcs.
Creosote Lumber:	3,000 pcs.
Yard waste:	5 bins
Peeler Shavings:	8 tons

All treated and untreated wood is stored in piles in the yard. Contact with rain is not controlled. Current practices to minimize impacts include:

Preservative cycles are designed to minimize drippage and produce clean surfaces on the treated product. These include extended vacuums, cleaning as needed, and proper preservative

temperatures. Treated wood is kept on the concrete drip track until any drippage has ceased.

Yard inspections are conducted daily, except when not treating, to detect and respond to preservative drippage, in accordance with Operating Procedures.

Treated wood is stacked on skids to prevent it from sitting in puddle surface water.

Preservative storage and process tanks and equipment are all located within containment facilities as described in Section 3 of this plan.

5.4.3 Significant Spills and Leaks

Within the last three years there have not been any spills or leaks, which resulted in any remaining site contamination. Copies of all spill reports for spills occurring during or after 1989 (the formation date of KII) are maintained in the plant operating record. These reports include a description of actions taken to prevent similar events.

5.4.4 Non-Storm Water Discharges

All process water is collected and pretreated on-site prior to discharge to the POTW. Process water includes wood water from boultonizing, preserving process condensate, vacuum seal water, rain and wash water collected within process containment's, boiler and cooling tower blowdown, and vehicle and equipment wash water from the shop. Members of the Team for flow during dry weather have inspected surface drainage and no dry weather flows were occurring. Certification is provided in Appendix C by use of a completed Non-Storm Water Discharge Evaluation and Certification, Mississippi Worksheet 2C.

5.4.5 Sampling Data

Sample results are maintained at the plant in a Storm Water Monitoring Results file.

5.5 Measures and Controls

5.5.1 Good Housekeeping

The need and reasons for good housekeeping will be communicated and emphasized to each employee and contractor working on the plant. Housekeeping practices will be part of each persons job, with emphasis on preventing contamination over cleaning contamination after it has occurred. Each supervisor is responsible for assuring that housekeeping is completed as part of each person's job.

Good housekeeping practices, including but not limited to the following, will be required at Koppers Industries:

* When cutting treated wood, collect sawdust and cutoff pieces. Do not leave waste on the ground.
* Do not drive loaders or trucks through ditches or standing water. Stay on established roadways.
* Mobile equipment will not be operated with significant oil or hydraulic leaks. If major leaks develop, such as a hydraulic line breaking, equipment will be shut off in place and repairs made before returning equipment to service.
* Drippage or leakage from equipment will be thoroughly cleaned, with contaminated soil being properly disposed.
* Stationary hydraulic equipment will be maintained to minimize leaks and leakage will routinely be cleaned and properly disposed.
* Waste developed during work will be placed in proper containers for disposal directly rather than placing on the ground to be collected later.
* Recycle scrap metal as generated and do not accumulate it on the ground.

5.5.2 Preventive Maintenance

Storm water management devices, such as detention basins and outlet structures, will be inspected at least monthly and after storms producing significant runoff. These will be inspected for signs of erosion, excess collected silt from runoff, and collection of debris that could interfere with discharge monitoring or flow. Records of inspections will be kept in the plant's operating records. See appendix B for inspection form.

On-site drainage will be inspected for signs of erosion or high silt loads or turbidity during runoff events. Such inspections will be made at least four times a year, depending on storm events. Sources of turbidity or silt will be identified and potential remedial actions identified. Corrective actions which should be considered include; rerouting of plant traffic, paving or gravel surfacing roads, ditch modifications, culvert additions or changes, changing yard activity or material storage locations, changing vegetation management, and yard grading. Inspections and actions taken will be documented on the Storm Water Management Facilities Inspection Record, shown in Appendix B.

Production equipment, including loaders, trucks, and fixed equipment, will be inspected weekly by the people operating the equipment. Inspections will include checks for oil or hydraulic leaks, accumulations of oil soaked dirt, pump, valve, and cylinder packing, and any other devises that could cause or contribute to leaks. Identified needs will be either repaired by the operator or will be identified to the maintenance department.

Maintenance needs identified by inspections will be accomplished on a schedule appropriate for each situation. Leaking mobile equipment will not be operated on the yard until the leaks are repaired.

5.5.3 Spill Prevention and Response

Spill prevention procedures and equipment are fully described in section 3 of this plan. Procedures for responses to spills or other emergencies are described in section 4 of this plan.

5.5.4 Inspections

This section will describe inspection procedures for storm water pollution prevention. In addition, there are also inspection requirements, which also further support pollution prevention under various other programs, including:

* Process area tank and containment inspections required by the SPCC provisions of this plan,
* Hazardous waste facility inspections required by RCRA,
* Drip pad inspections required by RCRA and the drip pad operating procedures, and
* Storage yard inspections of treated inventory required by RCRA and the storage yard contingency plan.

Storm water pollution prevention devices, such as detention basins and outlet structures will be inspected quarterly and after storms producing significant runoff. Upgradient ditches and drainage systems will be inspected at least four times a year during runoff events. These inspections will be performed by the Environmental Supervisor. In his absence, another member of the Team will conduct the inspections. Other Team members will participate as appropriate. A Storm Water Pollution Prevention Inspection Form will be used to document each inspection. Maintenance or repair needs will be identified on the form. The form will also be used to document when and how identified needs are corrected. A blank form is included in this plan in Appendix B. Completed inspection forms will be maintained at the plant per Section 5.5.5 of this plan.

5.5.5 Record Keeping and Internal Reporting Procedures

Record keeping and reporting procedures for spills are described in section 4 of this plan.

All completed Storm Water Pollution Prevention Inspection Forms will be maintained by the Environmental Supervisor. He will also be responsible for tracking maintenance or repair work to assure that needed work is completed and documented.

Maintenance and repair needs identified by inspections and which cannot be corrected by the inspector will, at a minimum, be reported to the Plant Manager and function Supervisor, as appropriate. Where priorities need to be determined, evaluation by the Pollution Prevention Team may be involved. The Plant Manager is responsible for setting work priorities and schedules.

5.5.6 Sediment and Erosion Control

The plant site is generally flat to slightly rolling. Soil does not tend to erode, except where vehicle traffic keeps the surface loose and prevents vegetation. Erosion is a problem where storm water runs or puddles in areas of active traffic. This section describes **prevention** type procedures for sediment and erosion control.

Erosion prevention mainly involves the design and maintenance of plant roads, drainage, and storage areas and procedures to assure these are properly used. Main roads, drainage, and storage areas are identified on the Storm Water Management Plan. Planned improvements to road and drainage areas known to be causing erosion have been completed and are identified on the Plan. Additional improvements will be made as necessary based on future inspections.

Existing drainage system - The existing yard drainage design has been reviewed by the plant pollution prevention team. The goal is to not create mud. Designs separate ditches from traffic. Culverts have been added where needed. Gentle side slopes, such as three horizontal to one vertical, will be used so that grass can grow and be mowed.

5.5.7 Management of Runoff

The plant drainage system has been designed to maximize its potential to mitigate or improve the quality of storm water runoff. Mitigation involves equipment and procedures to minimize the off-site affect of erosion and other activities occurring on-site. These generally include use of grassy swales or drainage to help filter sediment from runoff water and detention basins to enhance gravity settling and filtration by plants to remove sediment from the runoff water.

Storm Water run-off sediment and erosion control mitigation measures are described below for each discharge point and are shown on the Storm Water Management Plan.

Discharge 1 - This discharge to the south flows under a road through a culvert. The sampling point is at the culvert inlet. There is no sign of erosion or silt deposition in this drainage. Thus, no work is recommended. Inspection results will be used to evaluate any need for future improvements.

Discharge 2 - This includes runoff from approximately the northwest half of the south yard. An outlet structure provides for slow discharge of accumulated runoff and allows overflow during large storms. The detention pond provision allows for settling of sediment, which will improve water quality.

Discharge 3 - Storm water catch basins around the shop area now drain to a ditch which discharges around the remediation project / site. Effluent should be sampled at the runoff into the ditch.

Discharge 4 - This discharge includes runoff from much of the wood preserving process area and could, in case of a spill, contain spilled preservative chemicals. A detention pond provides for settling of sediment. The outlet from this pond is into the mid-plant ditch.

Discharge 5 - Plant areas draining to this discharge include some of the most intense traffic in the yard, including truck loading and unloading, kiln loading and unloading, and treated pole storage. A detention pond provides for sediment settling prior to discharge.

Discharge 6 - A relatively small part of the north yard drains to this ditch, but erosion of plant soils along the road and pole bins is evident. The detention basin and outlet structure will provide for some sediment removal.

Discharge 7 - Runoff from most of the north half of the north yard runs into the north ditch, previously via several discharge points. The detention basin and intercept ditches combine these into one discharge point and provide for sediment removal. The pole peeler yard is included in this drainage.

Discharge 8 - Runoff from a small portion of the north end of the south yard runs into this detention basin. Runoff from storage areas and from roadways is collected in this basin.

Discharge 9 - The north West End of the south yard drains into the area. This includes the untreated and treated lumber storage yards and most of the Lumber mill area. Berms and intercept ditches combine into one discharge point and the detention pond provides sediment removal.

Detention basins are designed to hold at least an average storm event, which is about one inch rainfall, and are able to contain runoff from a two-inch rainfall, recognizing that the runoff coefficient is probably about .3 to .5. This will allows for total containment of most storms to maximize water quality benefit at minimum cost and also mean that only a grab sample from the basins would be required, rather than collecting and testing both first flush and composite samples.

Outlet structures - Outlet structures meet several needs, including; provide for flow monitoring, provide a location for sampling, retain water for most storm events, allow slow release of water over one to several days, pass large storm flows as overflow without damage to structure or dams, allow for flow shutoff in case of a spill within the plant, and be easy to maintain.

Wet detention versus dry detention - Wet detention basins, in which at least a portion of the basin is a permanent pond, provide more potential for biological treatment and generally longer hydraulic holding time for the water than dry detention basins, which completely drain following storm events. However, wet basins also present special problems. The permanent ponds can present safety or liability problems, mosquito breeding can be a nuisance, maintenance is more difficult, the long term ponding of potentially contaminated water can pose groundwater questions, and initial cost is greater. The dry detention basins require less excavation, thus less cost, and, since they are actually dry most of the time, present much less hazard. Additionally, a dry basin can later be made into a wet basin by digging part

of it deeper. Thus, dry detention basins have been installed. If monitoring results indicate a need for water quality improvement that could be achieved by a wet pond, then modifications will be implemented as needed.

All construction areas have been seeded and mulched to establish a native mix of annual and perennial plants to control erosion and provide filtration.

5.6 Comprehensive Site Compliance Evaluations

Comprehensive site compliance evaluations (Evaluations) are required by the General Permit and are intended as self-audits of the plant storm water pollution prevention program. The Evaluations will be conducted to:

1) Confirm the accuracy of descriptions of sources contained in the PPP,
2) Determine if all storm water pollution prevention measures are accurately identified in the plan, in place, and working properly, and
3) Assess compliance with the storm water NPDES permit.

Evaluations will be made at least annually. The plant manager is the individual responsible for the evaluations and will sign each evaluation. Other members of the team may be involved in the evaluation, as requested by the plant manager. Each Evaluation must be documented. Documentation should include the date of the Evaluation, names of persons involved, a listing of areas inspected, major observations, deficiencies noted, and the signature of the plant manager. Documentation will consist of the Mississippi Part VII evaluation form and will be kept in the plant operating records. The storm water pollution prevention plan will be revised within two weeks after the Evaluation inspection and those revisions must be implemented in a timely manner and not later than 12 weeks after the inspection.

5.7 Special Requirements for EPCRA Section 313 Facilities

There are special requirements for facilities which store, process, or otherwise handle Section 313 listed chemicals. This plant uses pentachlorophenol and creosote, which are such chemicals and reports releases of these annually on the Form R reports. These materials are stored in tanks and used in the process area where full secondary containment is provided. Thus, all storm water which could come in contact with the chemicals is contained. All liquids, including storm water, from the containment areas is processed in the wastewater treatment system and discharged to the POTW. No water from process or tank secondary containment is discharged with storm water runoff.

The procedures and equipment, as described in Section 3 of this plan and relating to Section 313 chemicals, assure that the standards of good engineering practice are met.

5.8 Monitoring and Reporting Requirements

Monitoring of storm water runoff is required by the General Permit for specified parameters and results of monitoring are to be reported to the State in accordance with that permit. These requirements are summarized in this section.

5.8.1 Parameters and Sample Types

Operations contributing to each outfall are substantially the same, i.e. wood preservation, so each outfall must be monitored for the same constituents. The following parameters are to be measured in the units noted:

Parameter	Units	Sample Types
pH	s.u.	Grab
Total Suspended Solids (TSS)	mg/l	Grab + Composite
Oil and Grease	mg/l	Grab
Total Phenols	mg/l	Grab + Composite
Pentachlorophenol	mg/l	Grab + Composite

In addition, the following will be determined and reported:

* The date and duration (in hours) of the storm(s) sampled;
* Rainfall measurements or estimates (in inches) of the storm which generated the sampled runoff;
* The duration between the storm sampled and the end of the previous measurable (greater than 0.1 inch rainfall) storm; and
* An estimate of the total discharge (gallons) for the storm sampled.

5.8.2 Frequency of Monitoring

Sampling will be conducted at least one time per year, except as exempted in the permit for concentrations below indicated values or for substantially identical discharges.

5.8.3 Outfall Information Summary

OUT-FAL L NO.	LOCATION	INDUSTRIAL OPERATIONS IN RUNOFF AREA	AREA AND RUNOFF COEF.	SAMPLING METHODS
1	South end of south yard	Treated and untreated wood storage, closed ash landfill	15.9 Acres C= 0.3	report outfall #2 results
2	Northeast end of south yard	Treated and untreated wood storage, switch tie mill	12.1 Acres C= 0.3	composite grab from detention pond
3	Maintenance shop area	Vehicle and equipment maintenance, washing	2.8 Acres C= 0.5	report outfall #2 results
4	Southwest 1/4 of north yard	Treated and untreated wood storage, hazardous waste storage, boiler, wood treating process, preservative tanks, cooling water pond	24.1 Acres C= 0.3	composite grab from detention pond
5	Southeast 1/4 of north yard	Treated and untreated wood storage, dry kiln, truck loading, closed surface impoundment	26.2 Acres C= 0.3	composite grab from detention pond
6	Northeast 1/4 of north yard	Treated and untreated wood storage	9.5 Acres C= 0.3	composite grab from detention pond
7	Northwest 1/4 of north yard	Treated and untreated wood storage, pole peeler, bark storage	13.2 Acres C= 0.3	composite grab from detention pond
8	Middle area of north end of south yard	Treated and untreated wood storage, tram loading/unloading area.	2.4 Acres C=0.3	report outfall #2 results
9	Northwest end of south yard	Lumber mill area, truck loading and unloading, treated and untreated storage area	10.7 Acres C=0.3	report outfall #2 results

5.8.4 Criteria for Sampling

A) For discharges from detention ponds with a retention period greater than 24 hours, (estimated by dividing the volume of the detention pond by the estimated volume of water discharged during the 24 hours previous to the time that the sample is collected) one composite grab sample will be taken.

B) For all other discharges, both a grab sample and a composite sample will be taken.

All such samples shall be collected from the discharge resulting from a storm event that is greater than 0.1 inch in magnitude and that occurs at least 72 hours from the previously measurable (greater than 0.1 inch rainfall) storm event. The grab sample will be taken during the first 30 minutes of the discharge. The composite sample will be either flow-weighted or time-weighted in accordance with the General Permit.

5.8.5 Substantially Identical Outfalls

Discharge from outfall 8 and 9 is substantially identical to discharge from outfall 2. Yard activities which could impact storm water runoff and soil conditions are similar. Additionally, there are no activities in area 8 or 9 that would make their discharges be more impacted than are occurring in area 2. All of these areas contain some treated wood, but mostly untreated wood and have similar levels of vehicle traffic.

Discharge sampling is not required for outfall ~~1, 8, or 9, provided that effluent levels determined for outfall 2 are reported for these outfalls.~~

1, 2, 3, 4, 8 + 9 due to exemption clause found in NPDES permit # MSR 220005, Part IV.4.A.

5.8.6 Reporting

Annual Comprehensive Site Compliance Evaluation inspection reports and annual Discharge Monitoring Reports will be submitted to the following location and must be postmarked no later than January 28 for the previous report year.

Environmental Compliance Division
MS Dept. of Environmental Quality
P. O. Box 10385
Jackson, Mississippi 39289-0385

5.9 Compliance Schedule

Activity Description	Complete by end of:
Design and implement improvements to runoff drainage system	Completed

5.10 Record Keeping

5.10.1 Retention of Records: A NPDES Storm Water Pollution Prevention File will be maintained at the plant. Records of all monitoring information, including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation, copies of all reports required by the General Permit, periodic inspection reports, annual compliance evaluations, and records of all data used to complete the Notice of Intent will be maintained in the file for a minimum of three (3) years from the date of the measurement, report, or application.

5.10.2 Records Content: Records of monitoring information shall include:

a. The date, exact place, and time of sampling or measurements;

b. The initials or name(s) of the individual(s) who performed the sampling or measurements;

c. The date(s) and time(s) analysis were performed; and

d. Complete laboratory reports, including references or procedures for analytical methods used, results of such analyses and blank, duplicate, or method spike results.

6.0 TRAINING

All plant employees shall receive training on the content of this plan. Supervisors will each receive a copy and become thoroughly familiar with it through training, discussion, and self study. Supervisors will train their employees in the overall plan and in the specific needs of their work areas.

Training will, at a minimum, include programs to ensure that facility personnel understand basic procedures for pollution prevention and good housekeeping and are able to respond effectively to emergencies by familiarizing them with emergency procedures, emergency equipment, and emergency systems, including, as applicable to each employee's job function:

* Applicable pollution control laws, rules, and regulations;

* Procedures for using, inspecting, repairing, and replacing facility emergency and monitoring equipment;

* Communications and alarm systems;

* Response to fires or explosions;

* Response to ground-water or surface water contamination incidents;

* Shutdown of operations;

* Methods for the safe handling of hazardous materials;

* Procedures for coordination with local emergency response organizations;

* Use and location of medical supplies;

* Use of emergency response equipment and supplies appropriate to work areas; and

* Emergency response procedures and plans contained within this Plan.

Refresher training will be provided at least annually. New employees will not work in unsupervised positions until they have completed all training required for those positions. Supervisors will provide training to their employees and management will assure that supervisors are properly trained.
Employees with specific additional job related training needs will also be given that training, such as hazardous waste handling training as required by RCRA and State regulations, storm water pollution prevention, and waste water operations.
This training may be coordinated and take place concurrent with Hazard Communication and RCRA training, safety meetings, and annual updates.

ATTACHMENT 3

Yard Inspection Records

KOPPERS

Treated Wood Storage Yard Inspection - Grenada Facility

Inspected by: James Lockhart
Initials: JL

MONTH: 05
YEAR: 05

LEGEND
O- Indicates OK
X- Indicates a Problem*
* All problems noted will be described in Section II

Section I [Inspection date and location]

DAY / Location	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Pole Yard		X																													
Tie Yard		X	X	O	O	O																									
S. Yard-West									O	O	O	O	O			O	O	O	O	X			X	X	X	X	X	X			X
S. Yard-East																															
Time		9:00	9:00	9:00	9:00	9:00			12:00	9:00	9:00	9:00	9:00			8:00	9:00	8:00	8:00				9:00	12:00	2:00	12:00	9:00	9:00			12:00
Initials		JL	JL	JL	JL	JL			JL	JL	JL	JL	JL			JL	JL	JL	JL				JL	JL	JL	JL	JL	JL			JL

Section II [Problems noted and actions taken]

DATE	LOCATION	DESCRIPTION	COMPLETED BY:
5-2-05	Stack'n-ramp	Oil under stack bed, treated bat at unloading ramp & drums	
5-3-05	load ramp	Drip pat, north end ✓ ✓ ✓ ✓ 2 ✓	5-3-05
5-20-05	✓ ✓	Treated bats picked up put in drum 2 - drams	5-20-05
5-26-05	✓ ✓	Cleaned up dripping 6 - Scoops	5-26-05
5-28-05	✓ ✓	✓ ✓ ✓ 3 - ✓	5-28-05

GNA-FORM-024
Used with GNA-TREAT-016
ISO 14001 4.5.1
Revision #: 1

KOPPERS TIEPLANT, MS
NO. 459 P. 4

KOPPERS

Treated Wood Storage Yard Inspection - Grenada Facility

Inspected by: Walter Hall
Initials: WH

MONTH: 5
YEAR: 05

LEGEND
O- Indicates OK
X- Indicates a Problem*
* All problems noted will be described in Section II

Section I [Inspection date and location]

DAY / Location	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Pole Yard		O	O	O	O	O			O	X	O	X	O			O	O	O	O	O			O	O	X	O	O				O
Tie Yard																															
S. Yard-West																															
S. Yard-East																															
Time		[illegible]	[illegible]	[illegible]	[illegible]	[illegible]			[illegible]	[illegible]	[illegible]	[illegible]	[illegible]			[illegible]	[illegible]	[illegible]	[illegible]	[illegible]			[illegible]	[illegible]	[illegible]	[illegible]	[illegible]				[illegible]
Initials		WH	WH	WH	WH	WH			WH	WH	WH	WH	WH			WH	WH	WH	WH	WH			WH	WH	WH	WH	WH				WH

Section II [Problems noted and actions taken]

DATE	LOCATION	DESCRIPTION	COMPLETED BY:
5-10-05	Piling Yd	Film & Shadowing — 9 Rowld TURN-OVER PER Bobby	5-10-05
5-12-05	Wacyard	Pick up drippage & Put in DRUM	5-12-05
5-12-05	Piling Yard	✓ ✓ ✓ ✓ ✓ ✓	5-12-05
5-25-05	✓ ✓	✓ ✓ ✓ ✓ ✓ ✓	5-25-05

GNA-FORM-024
Used with GNA-TREAT-016
ISO 14001 4.5.1
Revision #: 1

KOPPERS

Treated Wood Storage Yard Inspection - Grenada Facility

Inspected by: John E Walpole
Initials: JW

MONTH: 05
YEAR: 05

LEGEND
O- Indicates OK
X- Indicates a Problem*
* All problems noted will be described in Section II

Section I [Inspection date and location]

DAY / Location	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Pole Yard	—	O	O	O	O	O	—		O	O	O	O	O	—		O	O	O	O	O	—	—	O	O	O	O	X	—	—	—	O
Tie Yard	—	O	O	O	X	O	—		O	O	O	O	O	—		O	O	O	X	O	—		O	O	O	O	O	—	—	—	O
S. Yard-West	—	O	O	O	O	O	—		O	O	O	O	O	—		O	O	O	O	X	—		O	O	O	O	O	—	—	—	O
S. Yard-East	—	O	O	O	O	O	—		O	X	O	O	X	—		O	O	O	O	O	—		O	O	O	O	O	—	—	—	O
Time																															
Initials		JW	JW	JW	JW	JW			JW	JW	JW	JW	JW			JW	JW	JW	JW	JW			JW	JW	JW	JW	JW				JW

Section II [Problems noted and actions taken]

DATE	LOCATION	DESCRIPTION	COMPLETED BY
5-5-05	Tie Yard	Pick up bats & treated material & placed in proper place	John E. Walpole
5-10-05	S.Y. East	" " " " " "	John E. Walpole
5-13-05	S.Y. East	clean-up drippage 3 Barrels	John E. Walpole
5-19-05	Tie Yard	Pick-up bats & place in clean harbor dumpster	John E. Walpole
5-20-05	S.Y. West	Scoop up drippage & pick up bats - 4 Burrells	John E. Walpole
5-27-05	Pole Yard	clean-up drippage 1 Barrel	John E. Walpole

GNA-FORM-024
Used with GNA-TREAT-016
ISO 14001 4.5.1
Revision #: 1

ATTACHMENT 4

Stormwater Runoff Worksheet

FORM 3
KOPPERS INDUSTRIES, INC.

STORM WATER RUNOFF WORKSHEET

PLANT NAME: Koppers Inc
CITY: Tie Plant, MS STATE: _____

STORM DATA

Beginning of storm: Date: 12/22/04 Time: 6:45 am or pm
End of storm: Date: 12/22/04 Time: 11:45 am or pm
Amount of rainfall measured: 3.02 inches
(Must be greater than 0.1 inch)
Source of rain data: Plant records or other: Plant Records

Date of last rainfall greater than 0.1 inch or estimated time since last rainfall
Date: 12/8/04 or amount of time: 14 days
(Must be at least 72 hours (3 days) since last storm to current storm)

RUNOFF DATA

Runoff amount: 0.71 inches
Runoff factor: 0.019 MGD/acre
(From Storm Water Runoff Estimation Table)

OUTFALL		RUNOFF AREA (acres)		RUNOFF FACTOR (MGD/ac)		STORM RUNOFF (MGD)
No.	Name					
001			X		=	.00340
002			X		=	.0012
003			X		=	.0017
004			X		=	
005	East of Main Office	26.2	X	0.019	=	0.4978
006	East of Pole Yard	9.5	X	0.019	=	0.1805
007	North of Pole Peeler	13.2	X	0.019	=	0.2508

ATTACHMENT 5

Corporate Training Guidelines

Excerpted from: DRIP TRACK OPERATIONS TRAINING – TRAINING OUTLINE

2.0 Instruct employees on drip track cleaning procedures

Note: Sections 2.1 through 2.6 are required only for employees who clean the drip track.

2.1 Discuss how to determine what areas need cleaning. Certain areas get more drippage than others. Instruct on how often each area should need cleaning. Identify who is responsible for cleaning of the track.
2.2 List the areas that need special attention: areas where people commonly walk, equipment entrances/exits and equipment working surfaces.
2.3 Discuss cleaning of track surfaces.
2.4 Describe how to remove debris from sumps and how often (at least every 90 days).
2.5 Identify when the tires on rubber-tired vehicles should be cleaned.
2.6 Instruct employees on correct completion of the "Drip Track Cleaning Record." Discuss the information to be recorded on it.

3.0 Describe procedures and methods to minimize tracking of wastes off of the drip track

3.1 Tell employees to avoid walking on the drip track unless necessary.
3.2 Discuss operation of wheeled vehicles on the drip track. Identify the proper entrance and exit locations for each track. Vehicle tires must be cleaned before exiting the drip track. Remind employees that the track surfaces where tires are cleaned must also be cleaned to avoid tires picking up the residues.
3.3 Discuss special precautions to be taken when trams must be moved off a track for maintenance or other reasons. Identify likely sources of drippage from trams.

Excerpted from: YARD DRIPPAGE CONTINGENCY PLAN TRAINING – TRAINING OUTLINE

2.0 Instruct employees on proper clean up procedures

2.1 Emphasize that all yard drips must be cleaned up within one day of occurrence. It does not matter when a drip is discovered. What matters is when the drip occurred. This is why inspections must be conducted daily.
2.2 Describe what to do if drips are noted. Identify where buckets and shovels or trowels are kept for cleaning up yard drippage. Remind employees that drips on gravel must be cleaned up just like drips on bare soil.
2.3 All drippage cleaned up must be disposed in the proper hazardous waste accumulation area.
2.4 Instruct employees to clean up all drippage and any discolored or wet soil or gravel.
2.5 Discuss procedures to take if treated wood is still dripping. Who should be notified and what should be done with the dripping product?

ATTACHMENT 6

Section 3 of the Emergency Plan

3.0 SPILL PREVENTION, CONTROL, AND COUNTERMEASURES

3.1 Description

This section of the Plan provides information specific to the storage and handling of oil and hazardous materials, spill prevention and containment equipment, and countermeasures to be implemented to control the impact of a spill. Recognizing that the requirement to prepare a SPCC plan, per 40 CFR 112, is only required for facilities which handle and/or store oil, KII has chosen to use this format to cover both oil and hazardous materials at our plants. This section generally follows the format for SPCC plans, modified as appropriate to include hazardous materials.

3.2 Past Spill Experience - 40 CFR 112.7(a)

Although occasional reportable spills of hazardous materials have occurred and been reported, no oil spills, as defined by 40 CFR 110 (See 4.5.3), have occurred at this facility. A record of all reported spill events is maintained in the plant's operating records.

3.3 Prediction of Flow of Spills - 40 CFR 112.7(b)

All process tanks containing oil or hazardous materials have been provided with secondary containment. That containment, except as noted, can only be emptied by operation of pumps which use dedicated piping to receiving wastewater tanks. It is unlikely that any event could cause significant quantities of material to be released to waters of the U. S. If such event did occur, the spilled material would follow the drainage courses, which also include spill control capabilities, as shown on the Storm Water Plan.

The quantities of materials listed for tank capacities in the Tank Listing Table, Table 3.1, represent the maximum quantities, which could potentially be released. Locations can be found for processes and tanks on the site map. The rate of flow would depend on the incident.

A drain valve is provided for the diesel fuel tank secondary containment. Water is only drained from this containment following visual inspection to assure that the water does not contain any oil and is only done by the plant Environmental Supervisor or a person reporting to him. If the water contains oil, it is transferred to the waste water system.

3.4 Containment and/or Diversionary Structures - 40 CFR 112.7(c)

This facility meets the requirements for containment and/or diversionary structures or equipment to prevent discharged oil or hazardous substances from reaching navigable waters. This is accomplished by providing a system of curbs, dikes, and secondary containment for all major tanks and process equipment and with backup of dikes with emergency shut-off gates within drainage. Rainwater from containment areas is automatically pumped to and treated with the process wastewater. Wastewater surge tanks have capacity large enough to handle the full volume of any one-process tank. Process area containments do not have drain valves and, therefore, could not allow a spill or release.

3.5 Conformance with SPCC Standards and Guidelines - 40 CFR 112.7(e)

A discussion of this facility's compliance with the applicable SPCC guidelines is provided in the following paragraphs. These first deal with general or facility wide issues and then with process or

equipment specific issues. Last, a schedule of improvements which are planned to enhance spill prevention is provided. Training of personnel is covered is Section 6.

The plant manager is the person accountable for spill prevention.

3.6 Inspections and Records

The operational areas in the Treating Department are checked regularly, normally every hour, by the operator on duty throughout each shift. The preservative pipes, valves, process equipment, tanks and treating cylinders are routinely checked by the treating operator on duty. Any problems or unusual circumstances which can not be immediately resolved are reported to the Supervisor.

Formal inspections of the tanks, treating cylinders, and piping systems for signs of leaks, deterioration or unsafe conditions are made weekly as part of the Plant Facility Inspection. A copy of this inspection form is included in Appendix D. Completed inspection forms are maintained in the plant Operating Record.

Additionally, whenever tanks are emptied and cleaned, a complete internal inspection will be made. Non-destructive shell thickness testing will be conducted periodically for tanks and piping, as needed. These additional inspections will be recorded in the Plant Operating Record.

Additional security provisions are provided for the RCRA facilities. The Closed Surface Impoundment is enclosed within fenced area. Gates are kept locked when not in use. Signs are posted at entrances to RCRA facilities stating, "Danger - Unauthorized Personnel Keep Out."

Any leaks or deficiencies identified by the above inspections will be corrected promptly.

3.7 Security

The plant normally operates 24 hours a day, 7 days a week and will have at least one employee present. Process areas of the plant where oil or hazardous substances are stored are well lighted. Roads leading into the plant are secured with gates, which are closed whenever the plant is not occupied. The plant is bordered by other industrial or agricultural properties, railroad right-of-way, and some residential area. Most of this border is not fenced. Experience indicates that trespassing is not a problem at this location.

Design features of the plant minimize the threat of release that could be caused by a trespasser. Process tank valves are connected to process pipes connected to other tanks, making release from unauthorized opening unlikely. There are no drain valves on work tanks, so it would be difficult for trespasser to cause a release. Some tanks have sample valves which could be opened, but due to their small size, the existing containment system could easily handle the material.

At times when the plant is not in operation and is unattended, the following security procedures apply:

- Treating room doors will be locked, which restricts access to valve headers.
- Cylinder doors are shut, with hydraulic controls turned off.
- Plant gates are closed and locked. [redacted]

3.8 General Plant Spill Prevention

A hazardous material spill can occur any place, any time. All employees must be prepared to respond immediately to control damage and to notify management. Containing a spill to the smallest area possible is the first step. Containment can quickly be constructed using available equipment and supplies; usually by placing dirt, sand, or sawdust around the lower side of a spill with Koppers loaders. If possible, a spill should be prevented from reaching the surface water drainage, where it will spread more rapidly and have greater environmental and health impact.

Spills are more likely to occur when delivery trucks are unloading into Koppers tanks. Unloading operations should be supervised by employees familiar with the process equipment involved. Buckets or pans should be placed under hose connections to collect drips. Be prepared for hoses and pipes to be full and for liquid to be behind valves. Properly and promptly cleanup any drips or spills. Supervisors must be notified of any spills which are outside of containments. Oil, creosote, and other hazardous material deliveries are made by vehicles complying with DOT spill control regulations. Unloading is supervised by plant operators.

Maintenance, repair and plant modification projects also present a potential for causing spills since work often involves pipes and equipment which cannot be fully stripped of liquids. Workers must plan ahead and expect liquid whenever opening the pipe systems. Collection pans should first be readily available. Collected material must be returned to the processes or be properly containerized for disposal.

Only materials compatible with the stored/processed material will be used for tanks, equipment, and piping. Secondary containment is sufficiently impervious and of capacity to contain the largest tank in each tank area plus allow sufficient freeboard for precipitation. Pipe supports are designed to minimize abrasion and corrosion and allow for expansion and contraction. Above ground piping is located where damage by vehicles is unlikely or it is protected from damage by traffic barricades and/or warning signs.

In order to assure that leaks in steam coils in contact with preservative or oil do not result in a release, waste water permit violation, or boiler damage, condensate return is monitored for clarity by a meter. Excess turbidity will cause an alarm and will shut off the supply of condensate return to the boiler.

Portable tanks are not normally used. However, if needed, portable tanks will be positioned to prevent spills to navigable waters, provide secondary containment, and not be subject to flooding.

Out of service pipelines will be clearly identified and will be sealed with caps or blank-flanges until they are permanently removed.

3.9 Surface Drainage's

Koppers plant surface areas drain toward the Bogue Creek that goes to the Yalobusha River. Most of the process area first drains into either of three drainage ditches before draining to the River. Equipment, including secondary spill containment, has been installed and procedures implemented to prevent oil or hazardous materials from reaching the river. A spill is most likely to occur in the process area and, if not contained, would drain into the ditch.

In the case of a spill or event in which hazardous materials or oil does reach or has the potential to reach either or both of the drainage ditches, immediate action must be taken to contain the spill. Temporary earth dams should be constructed using plant equipment along the ditches, creating a series of impoundments to contain the flow. Sorbent booms may be used to remove containments from the water held behind the dams, if needed.

These dams can only hold back a limited amount of water, so emergency help should be contacted at the first sign that such a spill has occurred or may occur.

If a spill occurs into the cooling water pond, try to contain it there. The cooling pond overflows to the #4 storm water pond, at which a spill could also be contained.

3.10 Treating Cylinders

There are 5 treating cylinders located in one common concrete containment area. Cylinders 2, 3, and 4 are used for creosote treatment, cylinders 1 and 5 are used for penta-in-oil treatment. The largest cylinder capacity is 34,000 gallons. The containment capacity is approximately 56,000 gallons.

The treating processes consist of the cylinders, a work tank, vacuum system, and transfer and pressure pumps for each cylinder, and common storage tanks, waste water collection system, condensate tank, tank car and truck unloading, and oil water separation. Most of this associated equipment and piping is within concrete containment as described below.

3.11 Tank Car and Truck Unloading

Trucks and tank cars are unloaded at the Unloading Station, which is concrete lined for spill containment. All process transfer pipelines are all above ground. The primary potential spill sources in the creosote process include leaks from the process tanks, valves, pumps, and pipe systems. These leaks can best be prevented by proper valve and pump maintenance and equipment inspection during creosote transfers. Any leaks or drips must be cleaned up immediately.

Any rainwater which is collected in the containments is pumped to the wastewater treatment system for treatment.

The containment pad does not provide full containment for the tank car volume so that a major tank spill would spread to surrounding process areas. Therefore, tank heating and unloading must be carefully supervised by operators. Immediate action to contain a major spill will minimize any impacts.

The unloading facility will be replaced or modified to provide full secondary containment per section 3.19, Planned Improvements Schedule.

3.12 Tank Farm

All preservative tanks are in the concrete lined and diked tank farm. The largest tank capacity is 300,000 gallons. Containment capacity of approximately 308,000 gallons is provided by a concrete floor and wall surrounding the entire tank farm.

3.13 Fuel and Lubricating Oil

Gasoline and diesel fuel are delivered by tank truck and transferred into storage tanks that are within containments. Care must be taken to prevent spillage during dispensing fuel into vehicles and equipment.

Lubricating oil is delivered and stored in building, in 55-gallon drums. Drums will be stored upright and kept sealed. Dispensing areas will be kept clean. Oil drippage will be contained. Any minor spills will be cleaned up immediately.

Any oil or fuel spill (discharge) which violates applicable water quality standards, or causes a film or sheen upon or discoloration of the surface water or adjoining shorelines is reportable.

3.14 Oil Water Separator

The oil water separator is a reinforced concrete in-ground concrete tank with two primary basins. pH adjustment and coagulant and flocculent addition and mixing occur in an adjacent above ground steel tank. These tanks do not have secondary spill containment, but are equipped with high level switches which sound alarms in the control room and shut off inflowing wastewater. Plant operators are instructed in proper response to the high level alarms.

The separator will be replaced or modified to provide full secondary containment and leak detection per section 3.19, Planned Improvements Schedule.

3.15 Biological Waste Water Treatment

The activated sludge aeration tank, clarifier and final effluent tank are located in a concrete containment. The largest tank capacity is 150,000 gallons and the containment capacity is 198,000 gallons.

Although the treated effluent water presents a very small environmental risk, as a listed hazardous waste, a spill to the environment must be reported and cleaned if one occurs.

3.16 Drip Pad

Concrete drip pads have been installed to contain and recover any drippage which may occur from the freshly treated wood plus collect any storm water which falls onto the pads. Water and preservative is pumped from the drip pad sumps to waste water surge tanks, which have the design capacity to contain the water collected in a 24-hour, 25-year storm. Water from the oil process drip pad is transferred to the wastewater process for treatment.

3.17 Hazardous Waste Storage Facility

The Waste Storage Building is a less than 90-day facility for the storage of hazardous waste in containers. Up to 640 drums may be stored in the facility. Materials to be stored are the wastes generated at the plant. All materials to be stored are compatible with each other and are not reactive, explosive, or corrosive. The facility has a concrete floor with a berm and is fully contained within a steel building. The main significant spill potential is present when waste containers are being transported into or out of the building. Drums should only be transferred with gasket lids tightly

TABLE 3.1 - TANK LISTINGS
Koppers Industries, Grenada Plant

Reference No.	Name	Contents	Capacity
1.	#1 Cylinder	Penta	34,000
2.	#2 Cylinder	Creosote 60/40	27,000
3.	#3 Cylinder	Penta	27,000
4.	#4 Cylinder	Creosote #1	27,000
5.	#5 Cylinder	Penta	27,000
6.	#1 Work Tank	Penta in Oil	30,000
7.	#2 Work Tank	Creosote 60/40	30,000
8.	#3 Work Tank	Penta	30,000
9.	#4 Work Tank	Creosote #1	22,420
10.	#5 Work Tank	Penta in Oil	30,000
11.	Measuring Tank	Creosote #1	4,200
12.	#1 Storage Tank	Creosote #1	100,000
13.	#2 Surge Tank	Process Water	100,000
14.	#5 Storage Tank	Fuel Oil	100,000
15.	#6 Storage Tank	Creosote 60/40	105,000
16.	#10 Surge Tank	Process Water	300,000
17.	Storm Water Surge	Storm Water	250,000
18.	Coagulant	Dearfloc 4301	1,500
19.	Decant Tank	Creo/Oil/Water	2,500
20.	Creo Blowdown Tank	Water/Creosote	8,000
21.	Air Receivers	Compressed Air	
22.	Air Receivers	Compressed Air	
23.	Penta Blowdown Tank	Water/Penta/Oil	8,000
24.	Gas Tank	Gasoline	1,250
25.	Fuel Oil #2	Fuel Oil	9,000
26.	Water Treatment Tank	Water	150,000
27.	Water Treatment Tank	Water	25,000
28.	Water Treatment Tank	Water	15,000
29.	Creosote Dehydrator	Not in Use	8,000
30.	N. Penta Equalization	Water/Oil/Penta	14,000
31.	S. Penta Equalization	Water/Oil/Penta	14,000
32.	Penta Mix Tank	Oil/Penta	9,400
33.	Penta Mix Tank	Oil/Penta	5,000
34.	Penta Concentrate St.	Penta Concentrate	10,500

Coker Kevin

From: Stephenson Jack
Sent: Tuesday, February 07, 2006 12:29 PM
To: Coker Kevin
Subject: RE: GE Water: Still no word on Contract renewal

Kevin,
The confusion is that there is no Pgh contract for waste water treatment. In review, the existing order is for the boiler. That being said, are your little notes, like the one that says $2004/month accurate as to what they want to bill for the wastewater treatment ? Also, on the boiler chemicals,is the cost now $2900 or $3067 a month. Since the 3 year period to pay for the water softener is over soon I'm confused. Also,could I please have a phone # for Mr Simms ? Thanks. Jack

-----Original Message-----
From: Coker Kevin
Sent: Tuesday, February 07, 2006 11:28 AM
To: Stephenson Jack
Subject: RE: GE Water: Still no word on Contract renewal

Jack:

The Waste Water portion of the contract expired January. The Boiler portion expires in March. We are getting low on WWTS chemicals and need additional chemicals to keep the WWTS running.

Kevin

-----Original Message-----
From: Stephenson Jack
Sent: Monday, February 06, 2006 2:43 PM
To: Coker Kevin
Subject: RE: GE Water: Still no word on Contract renewal

Kevin,
I will get a contract reissued for GE. Please note again, and tell Mr.Simms to quit bothering you that the existing contract runs through March 31,2006. If he keeps bugging you/me I'm going to insist that we get a competitive # from ChemTreat. Jack

-----Original Message-----
From: Coker Kevin
Sent: Monday, February 06, 2006 1:54 PM
To: Stephenson Jack
Subject: FW: GE Water: Still no word on Contract renewal

Jack:

Can you assist?

Kevin

-----Original Message-----
From: Simms, Douglas P (GE Infrastructure) [mailto:Douglas.Simms@ge.com]
Sent: Thursday, February 02, 2006 6:30 AM
To: Coker Kevin
Subject: GE Water: Still no word on Contract renewal

FYI, I have not heard anything from Mr. Jack concerning the contract renewal paperwork.

Need to order Farrell some Klaraid early in Feb, so it can be delivered before the end of the month.....

Douglas P. (Pat) Simms
Account Manager
GE Water and Process Technologies

Cell 601-594-1837
FAX 601-853-1802
Email Douglas.Simms@ge.com
Info www.gewater.com

David L.
Grenada Co.

KOPPERS INDUSTRIES

Koppers Industries, Inc.
P.O. Box 160
Tie Plant, MS 38960

Telephone: (601) 226-4584
FAX: (601) 226-4588

RECEIVED
JAN 8 - 2002
Dept. of Environmental Quality
Office of Pollution Control

January 4, 2002

CERTIFIED MAIL

Environmental Compliance Division
Office of Pollution Control
P.O. Box 10385
Jackson, MS 39289-0385

Subject: 2001 Storm Water Sampling Results
Koppers Industries, Inc. – Permit # MSR220005

Dear Sir or Madam:

This will serve as an explanation for the monitoring exemptions exercised at the Koppers Industries, Inc., wood-treating facility in Grenada, MS, in accordance with Section IV.C.4. of the State of Mississippi Water Pollution Control Wood Treater General Permit No. MSR22005. Originally, monitoring was done at nine sampling ports on the property. Currently, only three of these sites are monitored.

Attached is a table containing analytical results for samples collected at all monitoring points at the site since sampling has been required. In accordance with the applicable section of the permit described above sampling point numbers 1 through 4 were eliminated for all parameters since monitored concentrations were below indicated levels in the permit (within range for pH) for two consecutive annual samplings.

Sample location numbers 5, 6, and 7 will continue to be monitored for pentachlorophenol and total suspended solids. Other constituents for samples collected at locations 5, 6, and 7 will not be analyzed for, including oil and grease, total phenols, and pH.

Sampling locations numbers 8 and 9 were not sampled because discharge at these locations is substantially identical to effluent at sampling location number 2. Quantitative data applicable to sample location number 2 is identical.

If you have any questions or concerns with this matter or sampling event, please call me at (662) 226-4584 extension 11.

Sincerely,

Thomas L. Henderson

Thomas L. Henderson
Plant Manager

Cc: Tim Basilone/Koppers Pittsburgh

Stormwater Sampling Results 1995-2000

Pentachlorophenol

Outfall #	2001	2000	1999	1998	1997	1996	1995	Permit Exempt Limit	Status
				Year Composite/Grab (PPM)					
1	NA	NA	0/0	0/0	0/0	0/0	0.024/0	0.02	exempt
2	NA	NA	0/0	0/0	NA/0	NA/0	NA/0	0.02	exempt
3	NA	NA	NA	0/0	0/0	0.02/0.03	0.023/0	0.02	exempt
4	NA	NA	0/0	0/0	NA/0	NA/0	NA/0.13	0.02	exempt
5		0.124/0.024	0/0	0.485/0.749	NA/0	NA/0.201	NA/0.21	0.02	SAMPLE
6		1.47/1.94	0/0	0.705/0.887	NA/0	NA/0.03	NA/0.84	0.02	SAMPLE
7		0.586/0.238	0.188/0.256	0.395/0.228	NA/0	NA/0.124	NA/0.29	0.02	SAMPLE
8	NA	NA	NA	NA	NA	NA	NA	0.02	exempt
9	NA	NA	NA	NA	NA	NA	NA	0.02	exempt

TSS

Outfall #	2001	2000	1999	1998	1997	1996	1995	Permit Exempt Limit	Status
				Year Composite/Grab (PPM)					
1	NA	NA	21/38	18/12	22/78	33/33	9\7	50.00	exempt
2	NA	NA	8\39	13/7	NA/43	NA/114	NA/15	50.00	exempt
3	NA	NA	NA	13/6	0/18	30/18	1\1	50.00	exempt
4	NA	NA	27/39	27/47	NA/44	NA/83	NA/37	50.00	exempt
5		510/208	85.3/95	50/17	NA/212	NA/114	NA/70	50.00	SAMPLE
6		30/18	235/172	19/12	NA/27	NA/30	NA/82	50.00	SAMPLE
7		540/294	194/184	3\2	NA/44	NA/130	NA/47	50.00	SAMPLE
8	NA	NA	NA	NA	NA	NA	NA	50.00	exempt
9	NA	NA	NA	NA	NA	NA	NA	50.00	exempt

Acidity/pH

Outfall #	2001	2000	1999	1998	1997	1996	1995	Permit Exempt Limit	Status
				Year					
1	NA	NA	6.22	7.22	7.29	7.26	7.07	6.0-8.5 S.U.	exempt
2	NA	NA	6.76	7.25	7.16	6.99	6.98	6.0-8.5 S.U.	exempt
3	NA	NA	NA	7.52	7.53	7.54	7.1	6.0-8.5 S.U.	exempt
4	NA	NA	8.14	7.37	8.5	8.61	8.88	6.0-8.5 S.U.	exempt
5	NA	NA	7.72	7.79	7.54	7.74	7.78	6.0-8.5 S.U.	exempt
6	NA	NA	7.31	6.59	6.89	6.74	6.43	6.0-8.5 S.U.	exempt
7	NA	NA	7.26	6.87	7.65	8.07	6.35	6.0-8.5 S.U.	exempt
8	NA	NA	NA	NA	NA	NA	NA	6.0-8.5 S.U.	exempt
9	NA	NA	NA	NA	NA	NA	NA	6.0-8.5 S.U.	exempt

Phenols

Outfall #	2001	2000	1999	1998	1997	1996	1995	Permit Exempt Limit	Status
				Year Composite/Grab (PPM)					
1	NA	NA	0	0	0	0	0.03	0.1	exempt
2	NA	NA	0	0	0.088	0	0.02	0.1	exempt
3	NA	NA	NA	0	0.054	0	0.04	0.1	exempt
4	NA	NA	0	0.086	0.054	0.085	0.03	0.1	exempt
5	NA	NA	0	0.053	0.176	0	0.056	0.1	exempt
6	NA	NA	0	0	0.062	0	0.05	0.1	exempt
7	NA	NA	0	0	0	0	0	0.1	exempt
8	NA	NA	NA	NA	NA	NA	NA	0.1	exempt
9	NA	NA	NA	NA	NA	NA	NA	0.1	exempt

Oil & Grease

Outfall #	2001	2000	1999	1998	1997	1996	1995	Permit Exempt Limit	Status
				Year Grab (PPM)					
1	NA	NA	0	0	1.6	1.11	0	5.00	exempt
2	NA	NA	0	1.6	1	1.2	0	5.00	exempt
3	NA	NA	NA	1.6	3.4	1.44	0.5	5.00	exempt
4	NA	NA	0	3	5.1	1.56	0.9	5.00	exempt
5	NA	0	0	5.6	4.3	2.21	1.4	5.00	exempt
6	NA	NA	0	3.2	4.5	1.6	3.4	5.00	exempt
7	NA	NA	0	1.5	2.5	2.1	1.6	5.00	exempt
8	NA	NA	NA	NA	NA	NA	NA	5.00	exempt
9	NA	NA	NA	NA	NA	NA	NA	5.00	exempt

Part VII.

Inspection Report and Certification Form
For Storm Water Pollution Prevention Plan Evaluation

Wood Treater Storm Water General NPDES Permit No. MSR220005

(Please Print)

Owner and/or Operator: Koppers Industries, Inc.

Facility Name: Same

Facility Location: 1 Koppers Drive, Tie Plant, MS 38960

Date and Time: 12-5-01, 8:30 AM

Inspector(s): Blair Simpson, Bobby McClain

Date of Last Rainfall: 11-30-01 Estimated Amount: 2.40 inches

Deficiencies Noted During the Inspection (attach additional sheets if necessary):

None.

Corrective Action Needed (attach additional sheets if necessary):

None.

Corrective Action Compliance Schedule:

Based upon this inspection which I or personnel under my direct supervision conducted, I certify that all pollution control measures are adequate and have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan filed with the Office of Pollution Control and good engineering practices as required by the above referenced permit.

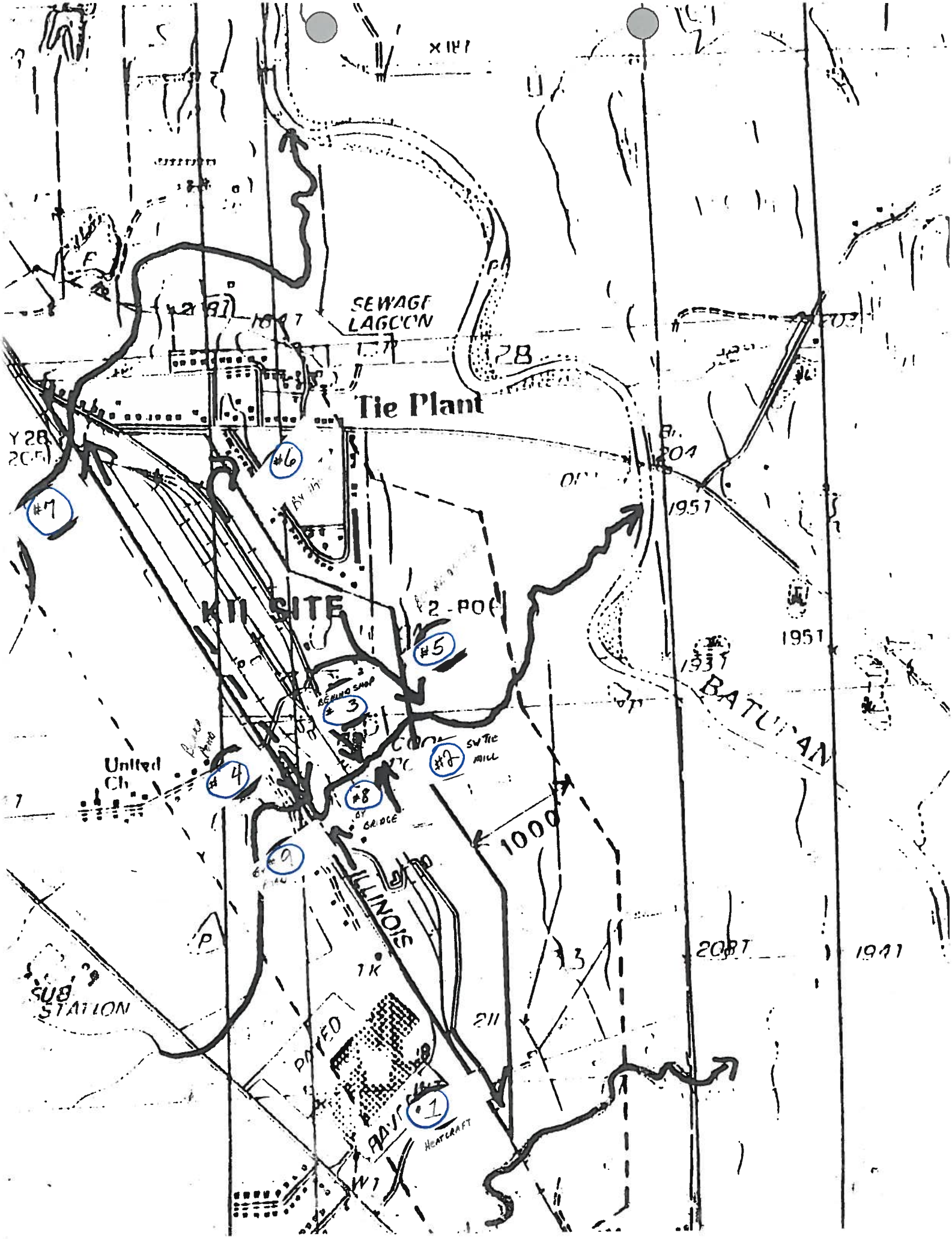
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons responsible 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 fines and imprisonment for knowing violations.

I further certify that the Mississippi Office of Pollution Control has been notified of any changes pertinent to our storm water permit as required in Part II.C.

Thomas L. Henderson	Thomas L. Henderson	1-4-02
Authorized Name (Print)	Signature	Date

These reports shall be submitted annually, as required in the permit, to:

Chief, Industrial Branch
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385



SEWAGE LAGOON
Tie Plant
KII SITE
#1
#2
#3
#4
#5
#6
#7
#8
#9
BATUPAN
ILLINOIS
1000
United Ch
SUB STATION
HEATCRAFT

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY

LOCATION TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

NSR220005	001 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING TIMB

*** NO DISCHARGE ***

RECEIVED
JAN 8 2002
DEQ-FCFD

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	01	01	01	TO	01	12	31

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00560 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46000 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE	DATE		
Thomas L. Henderson / Plant Mgr	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	662 226-4584	02	01	04
TYPED OR PRINTED		AREA CODE / NUMBER	YEAR	MO	DAY

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES); AND TOTAL DISCHARGE (GALLONS).

Exempt Status - per Part IV.C.4

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

MSR220005 — PERMIT NUMBER

001 H — DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

TIMB

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	01	01	01	TO	01	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Mgr.

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	02	01	04

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Exempt Status - per Part IV.C.4, See attached letter

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

00107/010822-1300

NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

MSR220005 — PERMIT NUMBER
002 A — DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIME

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
01	01	01	01	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
Ph	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

No Sample

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Thomas L. Henderson / Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 662 NUMBER 226-4584

DATE: YEAR 02 MO 01 DAY 04

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
REPORT STORMS DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES); TOTAL DISCHARGE (GALLONS).
Exempt Status - per Part IV.C.4

PA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form.

NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

MSR220005 — PERMIT NUMBER
002 B — DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

TIME

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	01	01	01	TO	01	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson / Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	02	01	04

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Exempt Status - per Part IV.C.4, see attached letter

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

PERMITTEE NAME/ADDRESS (Includes Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

MSR220005 — PERMIT NUMBER
003 A — DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMBI

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	01	01	01	TO	01	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RO	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

No Sample

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson / Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 662 / 226-4584 (AREA CODE / NUMBER)
DATE: 02 01 04 (YEAR MO DAY)

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT STORM DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)

Exempt Status - per Part IV.C.4

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

MSR220005 — PERMIT NUMBER
003 B — DISCHARGE NUMBER

MINOR
(SUBR NC)
F - FINAL
STORMWATER COMPOSITE SAMPLING

TIMB

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	01	01	01	TO	01	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT			ANNUAL	COMPOS
EFFLUENT GROSS VALUE							ANNL MAX	MG/L			
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT			ANNUAL	COMPOS
EFFLUENT GROSS VALUE							ANNL MAX	MG/L			
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46000 1 0 0	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT			ANNUAL	COMPOS
EFFLUENT GROSS VALUE							ANNL MAX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

No Sample

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson / Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	02	01	04

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Exempt Status - per Part IV.C.4, see attached letter

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form.

PERMITTEE NAME/ADDRESS (Includes Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

MSR220005 — PERMIT NUMBER
004 A — DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMB

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	01	01	01	TO	01	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

No Sample

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson / Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 662-226-4584 (AREA CODE / NUMBER)

DATE: 02 01 04 (YEAR / MO / DAY)

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).
Exempt Status - Per IV.C.4

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form.

00112/010822-1500

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

MSR220005 — PERMIT NUMBER
004 B — DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

TIMBI

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	01	01	01	TO	01	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

No Sample

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson / Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	02	01	04

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Exempt Status - per Part IV.G.4, see attached letter

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form.

00113/010622-1300

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

MSR220005	005 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMBR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	01	01	01	TO	01	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		NA	******	NA	(12)	0	1/yr	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	******	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	148	(19)	0	1/yr	G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	******	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RO	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)	0	1/yr	G
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	******	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.617	(19)	0	1/yr	G
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	******	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)	0	1/yr	G
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	******	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson / Plant mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
662	226-4584	02	01	04
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

11-27-01, 11 hrs 1.5 inches 0.05974 MGD

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form.

00114/010822-1500

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

MSR220005 — PERMIT NUMBER
005 B — DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
TIMBR
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	01	01	01	TO	01	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	46	(19)	0	1/yr	Comp
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.666	(19)	0	1/yr	Comp
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)	0	1/yr	Comp
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson, Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	02	01	04

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

00115/010822-1300

PERMITTEE NAME/ADDRESS (Includes Facility Name/Location if Different)

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY

LOCATION TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

MSR220005 — PERMIT NUMBER

006 A — DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMBR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	01	01	01	TO	01	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******			******	NA	(12)	0	1/yr	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	69	(19)	0	1/yr	G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)	0	1/yr	G
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	2.39	(19)	0	1/yr	G
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)	0	1/yr	G
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Mgr.

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	02	01	04

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT STORM DATE AND DURATION (HOURS)	ESTIMATED RAINFALL (INCHES)	TOTAL DISCHARGE (GALLONS).
11-27-01 11 hrs	1.5 inches	0.02166 MGD

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	006 B

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	01	01	01	TO	01	12	31

*** NO DISCHARGE |__| ***
NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	29	(19)	0	1/4r	Comp
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	2.54	(19)	0	1/4r	Comp
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)	0	1/4r	Comp
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson / Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-1584	02	01	04

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

00117/010622-1300

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY

LOCATION TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

MSR220005 — PERMIT NUMBER

007 A — DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMBR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	01	01	01	TO	01	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		NA	******	NA	(12)	0	1/yr	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	124	(19)	0	1/yr	G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)	0	1/yr	G
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.375	(19)	0	1/yr	G
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)	0	1/yr	G
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Mgr.

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	02	01	04

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

11-27-01 11 hrs 1.5 inches 0.0301 MGD

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

MSR220005 — PERMIT NUMBER
007 B — DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

TIMBR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	01	01	01	TO	01	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	66	(19)	0	1/yr	Comp
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.478	(19)	0	1/yr	Comp
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)	0	1/yr	Comp
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	02	01	04

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	008 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMBR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	01	01	01	TO	01	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT,RC	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

No Sample

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson / Plant Mgr.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
662	226-4584	00	01	04

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)

Exempt Status - per Part IV.C.4

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	008 B

MINOR
(SUBR NO)
F - FINAL TIMBR
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	01	01	01	TO	01	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

No Sample

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson / Plant Mgr.
TYPED OR PRINTED

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.

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
662	226-4584	02	01	04

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Exempt Status - per Part IV.C.4, see attached letter

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used. This is a 4-part form.

00121/010822-1300

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

MSR220005 — PERMIT NUMBER
009 A — DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

TIMBE

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	01	01	01	TO	01	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RO	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

No Sample

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson / Plant Mgr
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 662 226-4584 (AREA CODE / NUMBER)

DATE: 02 01 04 (YEAR / MO / DAY)

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).
Exempt Status - per Parts IV.C.4

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY GRENADA COUNTY
LOCATION TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

MSR220005 — PERMIT NUMBER

009 R — DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL TIMBI
STORMWATER COMPOSITE SAMPLING

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	01	01	01	TO	01	12	31

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46000 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

No Sample

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson Plant Mgr.

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 662 NUMBER 236-4584

DATE: YEAR 02 MO 01 DAY 04

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Exempt Status - per Part IV.C.4, see attached letter

EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

This is a 4-part form.

00123/010822-1300

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

To: Scott Mills
From: Clift Jeter, NRO
Date: November 8, 1996

Subject: Stormwater Complaint Sampling
Koppers Industry
Grenada County

On November 8, 1996, Dewitt Spurgeon and I traveled to the above site to perform requested sampling from the stormwater effluent leaving the property. We met with only the original complainant on this date.

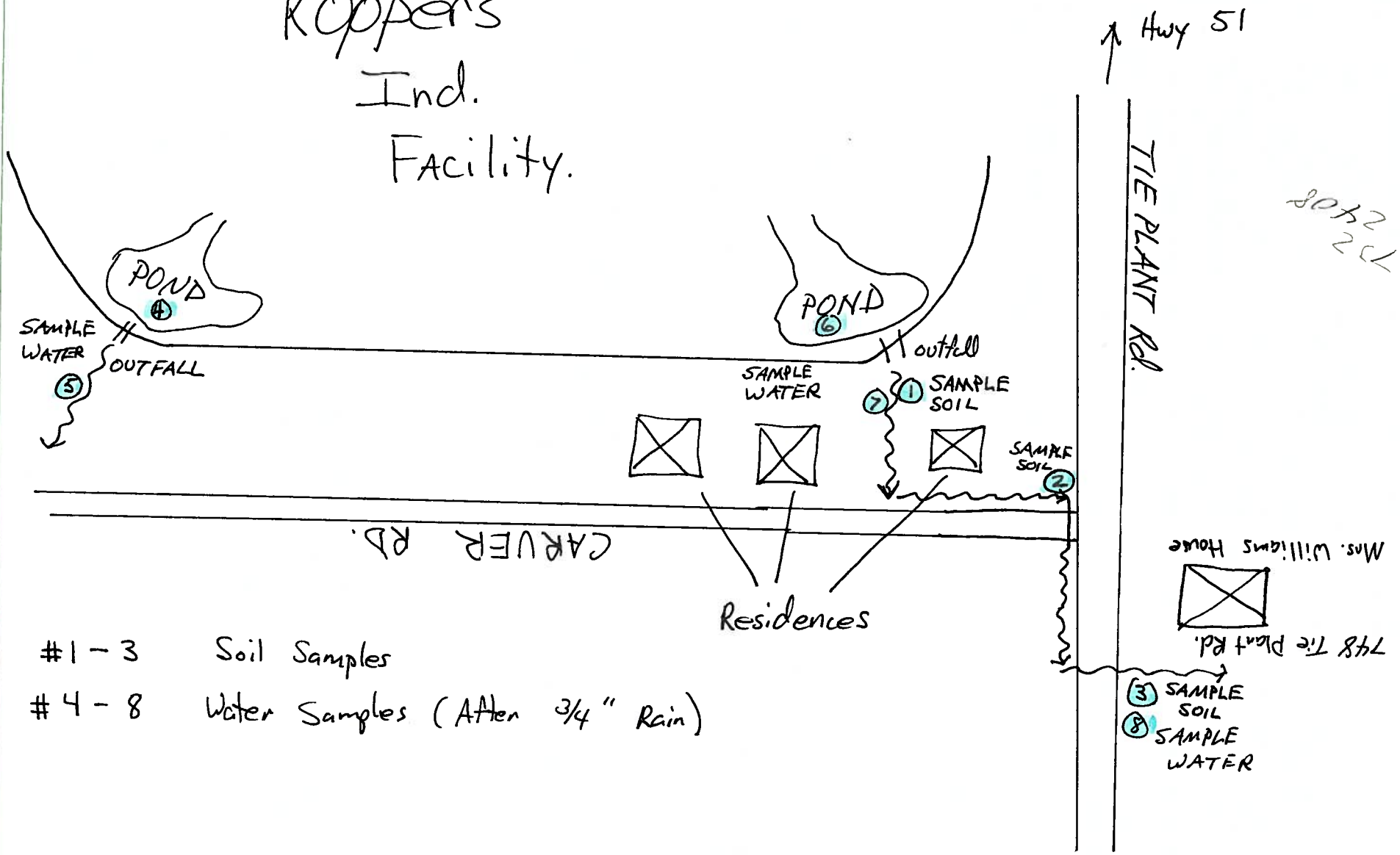
The sampling was done after a 3-6 inch rainfall two days before. Samples for Phenols, TPH, Semi-volatiles and Metals were taken in water and soil forms at various places along the effluent flow path. The map attached shows the exact location of the numbered samples taken.

There was a steady discharge from the facility on this date. The color of the water was dark and turbid with a slight creosote odor present.

If we can be of further assistance please call.

RCJ:cj

Koppers Ind. Facility.



#1 – 3 Soil Samples

#4 – 8 Water Samples (After 3/4" Rain)

WT 5

Louis L, for your file. DSM

AW

STATE OF MISSISSIPPI

DEPARTMENT OF ENVIRONMENTAL QUALITY

JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

To: Scott Mills DSM
From: Clift Jeter, NRO
Date: November 8, 1996

Subject: Stormwater Complaint Sampling
Koppers Industry
Grenada County

On November 8, 1996, Dewitt Spurgeon and I traveled to the above site to perform requested sampling from the stormwater effluent leaving the property. We met with only the original complainant on this date.

The sampling was done after a 3-6 inch rainfall two days before. Samples for Phenols, TPH, Semi-volatiles and Metals were taken in water and soil forms at various places along the effluent flow path. The map attached shows the exact location of the numbered samples taken.

There was a steady discharge from the facility on this date. The color of the water was dark and turbid with a slight creosote odor present.

If we can be of further assistance please call.

RCJ:cj

FILE COPY

STATE OF MISSISSIPPI

DEPARTMENT OF ENVIRONMENTAL QUALITY

JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

MEMORANDUM

Date: November 7, 1996

From: Louis Lavallee

To: Jerry W. Cain

Subject: Pentachlorophenol in Storm Water Runoff
Koppers Industries, Tie Plant
Permit Coverage MSR220005

Since our meeting on Tuesday I have evaluated the self-monitoring sampling data submitted in January 1996, the first (and only) data received after site improvements completed in early '95.

The data indicate the storm water below outfalls 5 and 6 significantly exceed State Water Quality Criteria. Outfall 6, which flows to the residential area with a school, had the highest concentration, 0.84 mg/l pentachlorophenol.

Attached is a copy of the DMRs, a table on the outfalls from the SWPPP, the SWPPP map showing outfall locations, the map used to planimeter drainage areas and the summary sheet showing estimated receiving stream concentrations of pentachlorophenol.

Let me know if you have questions or guidance on communicating with Koppers.

National® Brand 42-182 100 SHEETS
Made in U.S.A.

11/7/96

Evaluation of DMR storm water sampling data received 1/22/96, Koppers Industries, Tie Plant, MS

pH	Outfall	Industrial Area	Upstream Area for dilution: Planimetered Units	Upstream Area for dilution: miles² (443 units = 1 mi²)	Upstream Area for dilution: Acres	Dilution Factor (Ind. Area / upstream Area)	Pentachlorophenol (mg/l) grab/composite	Assumed Receiving Stream Concentration (mg/l)
.07	1	15.9 acres	3407	7.69	4921.6	0.00323	0/0.024	0.00008
.98	2	25.2 "					0	
71	3	2.8 " } 52.1	421	0.95	608.0	0.08569	0/0.023 } 0.0614 weighted avg.	0.0053
.88	4	24.1 "					0.21	
7.78	5	26.2 "	0	0	0	none	0.21	0.21
.43	6	9.5 "	0	0	0	none	0.84	0.84
6.35	7	13.2 "	180	0.41	262.4	0.0503	0.09	0.0146

Outfalls 2,3,4 go to same creek (see map)

Outfalls 2,4,5,6,7 have detention pond from which the grab sample was taken.

Outfalls 1,3 have no detention pond necessitating a grab and composite sample

The weighted average for outfalls 2,3,4 was based on industrial area.

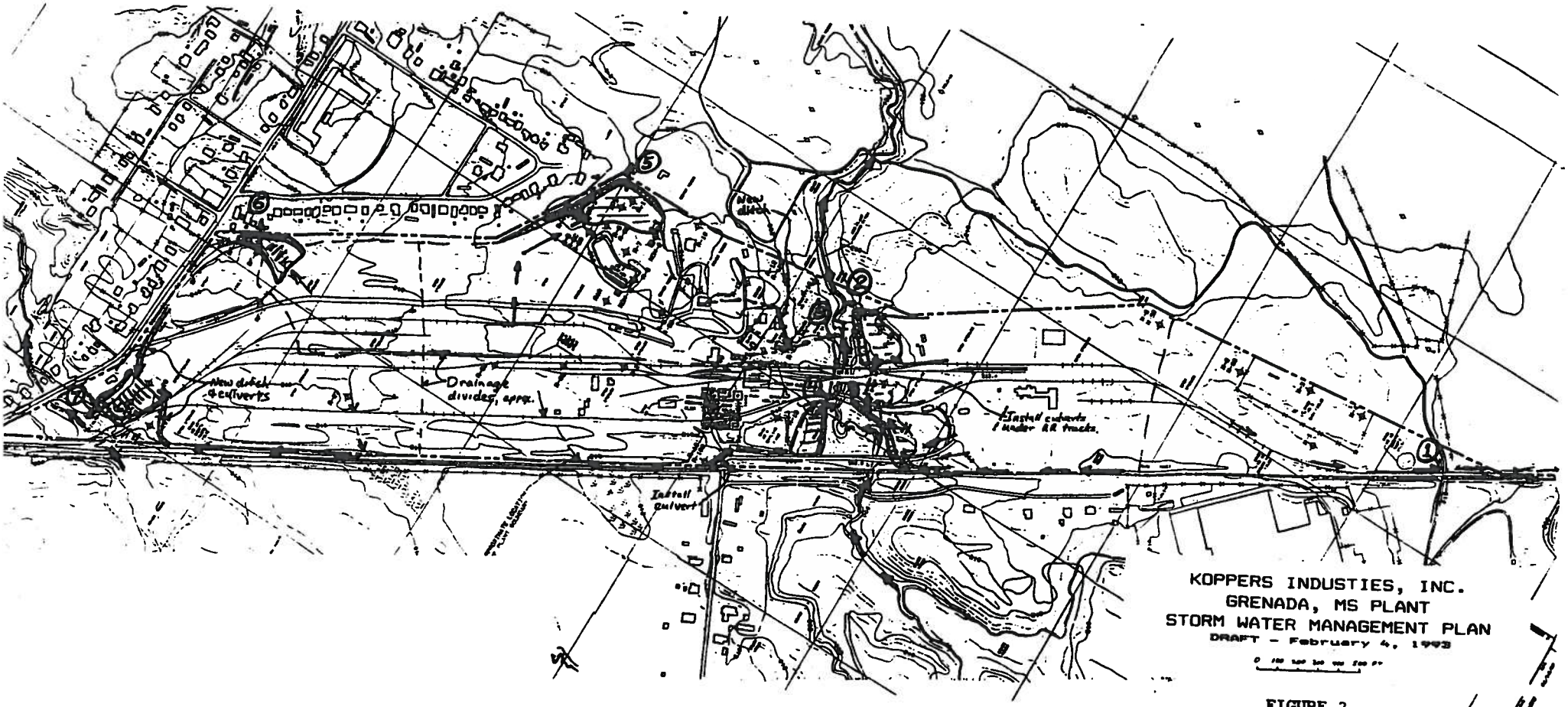
The composite value was used for outfalls 1,3.

Acute WQC for pentachlorophenol = 0.0032 mg/l @ pH = 7.0

Human Health Criteria = 0.03 mg/l

1 mi² = 640 Acres

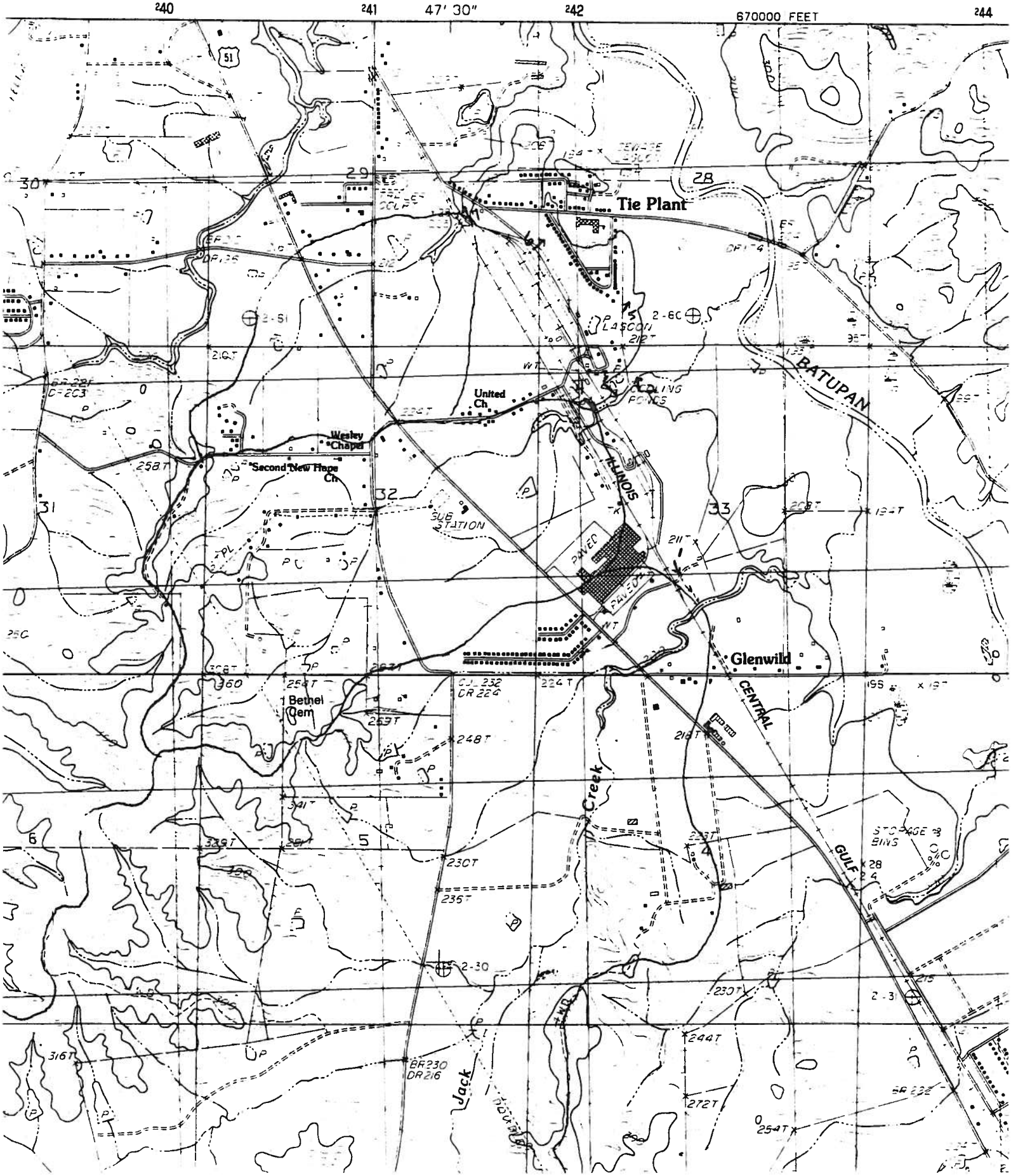
Dilution factors were calculated using the procedure in our Wastewater Regulations



KOPPERS INDUSTIES, INC.
GRENADA, MS PLANT
STORM WATER MANAGEMENT PLAN
DRAFT - February 4, 1993

FIGURE 2

TIE PLANT
MISS
7.5 MINUTE SER



5.8.3 Outfall Information Summary

OUT-FALL NO.	LOCATION	INDUSTRIAL OPERATIONS IN RUNOFF AREA	AREA AND RUNOFF COEF.	SAMPLING METHODS
1	South end of south yard	Treated and untreated wood storage, closed ash landfill	15.9 Acres C= 0.3	report outfall 2 data
2	North end of south yard	Treated and untreated wood storage, switch tie mill	25.2 Acres C= 0.3	composite grab from detention pond
3	Maintenance shop area	Vehicle and equipment maintenance, washing	2.8 Acres C= 0.5	30 min. grab + composite from ditch
4	Southwest 1/4 of north yard	Treated and untreated wood storage, hazardous waste storage, boiler, wood treating process, preservative tanks, cooling water pond	24.1 Acres C= 0.3	composite grab from detention pond
5	Southeast 1/4 of north yard	Treated and untreated wood storage, dry kiln, truck loading, closed surface impoundment	26.2 Acres C= 0.3	composite grab from detention pond
6	Northeast 1/4 of north yard	Treated and untreated wood storage	9.5 Acres C= 0.3	report outfall 5 data
7	Northwest 1/4 of north yard	Treated and untreated wood storage, pole peeler, bark storage	13.2 Acres C= 0.3	composite grab from detention pond

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

MEMORANDUM

Date: November 7, 1996

From: Louis Lavallee

To: Jerry W. Cain

Subject: Pentachlorophenol in Storm Water Runoff
Koppers Industries, Tie Plant
Permit Coverage MSR220005

Since our meeting on Tuesday I have evaluated the self-monitoring sampling data submitted in January 1996, the first (and only) data received after site improvements completed in early '95.

The data indicate the storm water below outfalls 5 and 6 significantly exceed State Water Quality Criteria. Outfall 6, which flows to the residential area with a school, had the highest concentration, 0.84 mg/l pentachlorophenol.

Attached is a copy of the DMRs, a table on the outfalls from the SWPPP, the SWPPP map showing outfall locations, the map used to planimeter drainage areas and the summary sheet showing estimated receiving stream concentrations of pentachlorophenol.

Let me know if you have questions or guidance on communicating with Koppers.

National® Brand 42-182 100 SHEETS
Made in U.S.A.

11/7/96

Evaluation of DMR storm water sampling data received 1/22/96, Roppers Industries, Tie Plant, MS

pH	Outfall	Industrial Area	Upstream Area for dilution: Planimetered Units	Upstream Area for dilution: miles² (443 units = 1 mi²)	Upstream Area for dilution: Acres	Dilution Factor (Ind. Area / upstream Area)	Pentachlorophenol (mg/l) grab/composite	Assumed Receiving Stream Concentration (mg/l)
7.07	1	15.9 acres	3407	7.69	4921.6	0.00323	0/0.024	0.00008
6.98	2	25.2 "					0	
7.1	3	2.8 " } 52.1	421	0.95	608.0	0.08569	0/0.023 } 0.0614 weighted avg.	0.0053
8.88	4	24.1 "					0.21	
7.78	5	26.2 "	0	0	0	none	0.21	0.21
6.43	6	9.5 "	0	0	0	none	0.84	0.84
6.35	7	13.2 "	180	0.41	262.4	0.0503	0.29	0.0146

Outfalls 2,3,4 go to same creek (see map)

Outfalls 2,4,5,6,7 have detention pond from which the grab sample was taken.

Outfalls 1,3 have no detention pond necessitating a grab and composite sample.

The weighted average for outfalls 2,3,4 was based on industrial area.

The composite value was used for outfalls 1,3.

Acute WQC for pentachlorophenol = 0.0032 mg/l @ pH = 7.0

Human Health Criteria = 0.03 mg/l

1 mi² = 640 Acres

Dilution factors were calculated using the procedure in our Wastewater Regulations

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

THIS COPY FOR

MEMORANDUM

To: Steve Spengler, Scott Mills, Louis Lavallee
From: Jerry W. Cain JWC
Subject: Joint Storm water and NPDES compliance Group Meeting
Date: Nov. 1, 1996

Please be prepared to discuss the projects identified in the attached memo in a joint meeting on Nov. 5, 1996 at 1:15 PM. The meeting will be held in my office. Thanks.

STATE OF MISSISSIPPI

DEPARTMENT OF ENVIRONMENTAL QUALITY

JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

MEMORANDUM

TO: Jerry Cain
Steve Spengler
Louis Lavalee

FROM: Scott Mills

SUBJECT: Industrial NPDES/Storm Water Joint Meeting

DATE: October 17, 1996
Oct. 28, 1996

Complaints made to and investigated by the Industrial NPDES Section need to cover issues dealt with by the Storm Water Section in order to thoroughly investigate them. In moving towards complaint resolution, a meeting needs to be scheduled with the above mentioned section staff members. Facilities which need to be discussed are as follows:

- OIL BASE PENTA

Complaint 1. Koppers Industries, Inc. - Grenada County (Tie Plant) MSR 225005
2. South Mississippi Recycling - Forrest County (Hattiesburg) MSR 200095
3. Norfolk Southern Railroad Company - Lauderdale County (Meridian) MSR 00107
Tony Russell - uncontrolled sites investigation.

1. Sample submitted for 94 and 95. No inspection report.
Was the runoff sampled?

2. No SWPPP; No inspection reports; no response to our letters.

3. Inspection reports [illegible]

2. SW permit require reporting a spill??

Letter for CSR signature
Show cause
(1) violation of SW permit
SWPPP
[illegible] reports
[illegible] Nov. 96
1000 a.m.

(3) No oil water separators on storm water ponds.

TPH in samples

Penta has saturation of 15 ppm - WSS

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

To: Steve Spengler
From: Clift Jeter, NRO
Date: September 12, 1996

Subject: Discharge Complaint
Koppers Industries, Inc.
Grenada County

On September 12, 1996, I traveled to the above site to investigate a complaint of a discharge leaving the property. I met with Ms. Frankie Mae Williams, the complainant, at her home. The discharge ditch runs by a schoolyard and through her yard. There was a steady flow in the ditch on this date.

The water in the ditch was a pale orange brown with solids present. Ms. Williams said the discharge has occurred for years but she didn't know who to call. She fears for the children's safety who play in her yard around the odd colored water. Her residence is at 748 Tie Plant Road.

I traced the origin of the flow about two hundred yards southwest of her home and found it to be coming from a drain pipe located on the east side of the Koppers facility. It appeared that a berm had been built at the site to contain any stormwater but a overflow had been placed in the levee and under the concrete overflow was a pipe which runs continuously. I found no stormwater permit for this facility in our files.

As you can see from the pictures, the discharge needs to be stopped and options looked at before this is allowed to flow through such a populated area. If I can be of further assistance please call.

Respectfully,

Clift Jeter

RCJ:cj

FILE COPY

March 5, 1996

Mr. Ronald P. Murphey
Koppers Industries, Inc.
P O Box 160
Tie Plant, Mississippi 38960

Dear Mr. Murphey:

Re: 1996 Discharge Monitoring Report (DMR) Forms for Storm Water Sampling Results Under Wood Treater General Storm Water Permit Permit Coverage Number MSR220005

Mississippi's Wood Treater Storm Water General Permit requires that you sample your storm water runoff as outlined in Part IV.C. Enclosed are DMR forms which should be used to report sample results for both the grab and composite samples. A copy of the completed DMR forms must be returned to our office by January 28, 1997.

We appreciate your attention to your storm water permit. If you have any questions, please contact me at 601-961-5074.

Respectfully,

Louis Lavallee, P. E., Chief
Industrial Storm Water Section

Enclosures

Facility Name/Location (if different)

NAME

ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960

FACILITY KOPPERS INDUSTRIES, INC.

LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MSR220005

(17-19) DISCHARGE NUMBER:

Form Approved
OMB No. 2040-0004

Page 1 - first 30 minute sample

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	1	1	TO	96	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (*Reference all attachments here*)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

Facility Name/Location if different)
NAME
ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MSR220005

(17-19) DISCHARGE NUMBER:

Form Approved
OMB No. 2040-0004

Page 3 - three hour composite

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	1	1	TO	96	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

I CERTIFY UNDER 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 SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE | NUMBER

DATE: YEAR | MO | DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No.: 96-01297
Cost Code: 3200

I. GENERAL INFORMATION:
Facility Name: KOPPERS COMPLAINT STORMWATER
County Code: Grenada NPDES Permit No.:
Discharge No: RE:9/12/96 Date Requested: 10/14/96
Sample Point Identification: Site#1 (Soil)
Requested By: Scott Mills Data To: Scott Mills
Type of Sample: Grab: Composite: Flow: Time: Other:

II. SAMPLE IDENTIFICATION:
Environment Condition: Sunny, Cool CollectedBy: Clift Jeter/Dewitt Spurgeon
Where Taken: See Map

	Type	Parameters	Preservative	Date	Time
1.	GRAB	G.C. PHENOLS			
2.	GRAB	TPH	Cool	11/8/96	1130
3.	GRAB	SEMI VOLITILES			
4.	GRAB	Cu, Cr, As			
5.					

III. FIELD:

Analysis	Computer Code	Req	Results	Analyst	Date
pH	000400	X			
D.O.	000300				
Temperature	000010				
ResidualChlorine	050060				
Flow	074060	X			

IV. TRANSPORTATION OF SAMPLE:
Bus: RO Vehicle: Other: SUNBELT COURIERS

V. LABORATORY:
Received by: Kathy Farris Date: 11/13/96 Time:0900
Recorded by: Dot Lewis Date Sent to State Office: 1/14/97

VI. Remarks:See Attached Sheets.

TARGET COMPOUND LIST
WET CHEMISTRY PARAMETERS

Lab Bench No.:96-01297

Analysis	Computer Req Code		Result	Analyst	Date Measured or Date Test Initiated
BOD_5	000310		mg/l		
COD	000340		mg/l		
TOC	000680		mg/l		
Suspended Solids	099000		mg/l		
TKN	000625		mg/l		
Ammonia-N	000610		mg/l		
Fecal Coliform	074055		colonies/100ml		
Total Phosphorous	000665		mg/l		
Oil & Grease	000550		mg/l		
Chlorides	099016		mg/l		
Phenol	032730		mg/l		
Total Chromium	001034		mg/l		
Hex. Chromium	001032		mg/l		
Zinc	001092		mg/l		
Copper	001042		mg/l		
Lead	017501		mg/l		
Cyanide	000722		mg/l		
TPH		X	690.0 mg/kg	VS, KF	11/18/96

Remarks:

++++

TARGET COMPOUND LIST
SEMIVOLATILE ORGANIC COMPOUNDS
IN SOILS/SOLIDS

OPCL NO.: 96-01297 MARKED: Koppers Site #1
ANALYSIS OF: Soil/Sed. DATE RECEIVED: 11/13/96

COMPOUNDS	MQL	µg/kg	COMPOUNDS	MQL	µg/Kg	COMPOUNDS	MQL	µg/Kg
Phenol	330	ND	4-Chloro-3-methylphenol	330	ND	Hexachlorobenzene	330	ND
bis(2-Chloroethyl)ether	330	ND	2-Methylnaphthalene	330	ND	Pentachloropohenol	660	ND
2-Chlorophenol	330	ND	Hexachlorocyclopentadiene	330	ND	Phenanthrene	330	4200
1,3-Dichlorobenzene	330	ND	2,4,6-Trichlorophenol	330	ND	Anthracene	330	4700
1,4-Dichlorobenzene	330	ND	2,4,5-Trichlorophenol	1600	ND	Di-n-butylphthalate	330	ND
Benzyl alcohol	330	ND	2-Chloronaphthalene	330	ND	Fluoranthene	330	26,200
1,2-Dichlorobenzene	330	ND	2-Nitroaniline	1600	ND	Pyrene	330	24,900
2-Methylphenol	330	ND	Dimethylphthalate	330	ND	Butylbenzylphthalate	330	ND
bis(2-Chloroisopropyl)ether	330	ND	Acenaphtylene	330	3600	3,3'Dichlorobenzidine	660	ND
4-Methylphenol	330	ND	2,6-Dinitrotoluene	330	ND	Benzo(a)anthracene	330	14,100
N-Nitroso-di-n-propylamine	330	ND	3-Nitroaniline	1600	ND	Chrysene	330	21,800
Hexachloroethane	330	ND	Acenaphthene	330	ND	bis(2-Ethylhexyl)phthalate	330	ND
Nitrobenzene	330	ND	2,4-Dinitrophenol	1600	ND	Di-n-octylphthalate	330	ND
Isophorone	330	ND	4-Nitrophenol	1600	ND	Benzo(b)fluoranthene*	330	Approx 42,000
2-Nitrophenol	330	ND	Dibenzofuran	330	ND	Benzo(k)fluoranthene*	330	ND
2,4-Dimethylphenol	330	ND	2,4-Dinitrotoluene	330	ND	Benzo(a)pyrene	330	15,500
Benzoic acid	1600	ND	Diethylphthalate	330	ND	Indeno(1,2,3-cd)pyrene	330	10,500
bis(2-Chloroethoxy)methane	330	ND	4-Chlorophenyl-phenylether	330	ND	Dibenz(a,h)anthracene	330	ND
2,4-Dichlorophenol	330	ND	Fluorene	330	ND	Benzo(g,h,i)perylene	330	8120
1,2,4-Trichlorobenzene	330	ND	4-Nitroaniline	1600	ND			
Naphthalene	330	ND	4,6-Dinitro-2-methylphenol	1600	ND			
4-Chloroaniline	330	ND	N-nitrosodiphenylamine	330	ND			
Hexachlorobutadiene	330	ND	4-Bromophenyl-phenylether	330	ND			

SURROGATES	RECOVERY (%)	LIMITS
2-Fluorophenol	88	25 - 121
Phenol-d5	85	24 - 113
Nitrobenzene-d5	80	23 - 120
2-Fluorobiphenyl	78	30 - 115
2,4,6-Tribromophenol	87	19 - 122
p-Terphenyl-d14	86	18 - 137

Date Extracted: 11 / 18 / 1996
Date Injected: 12 / 16 / 1996
ND = None Detected
MQL = Minimum Quantifiable Level
Analyst: Jon Shell (JES)

Lower Detection Level = MQL X 10 = 3,300 etc. µg/L

___ No peaks above 40% of internal standard.
___ Peaks above 40% of internal standard on EPA Appendx IX were identified.*
___ Peaks above 40% of internal standard not on EPA Appendix IX.**
1 Peaks above 40% of internal standard not on EPA Appendix IX were not identified.
___ Additional peaks were observed, but not examined.

COMMENTS: *The system investigator was not able to separate and integrate the Benzo(b) fluoranthene and the Benzo(K) fluoranthene peaks. The concentration reported for Benzo(b) fluoranthene is actually the combined value and is reported as an "approximate" value.

++++

INORGANICS REPORT
SOIL/SEDIMENT

SAMPLE No.: 96-1297

ANALYSES: Soil **DATE COLLECTED:** 11/8/96

PARAMETER	CONC. ug/g	MQL ug/g	QC %Rec.	Analyst	Date
Arsenic	3.4	0.5	84	GB	12/4/96
Chromium	14.5	0.1	92	GB	12/3/96
Copper	18.0	0.5	90	GB	12/3/96

MQL = minimum quantifiable levels
QC %Rec = percent recovery of quality control standard

COMPLAINT FORM

11:45 DATE 9-11-96 TIME ☐ AIR ☒ WATER ☐ SOLID ☐ TANK ☐ HAZARDOU

PERSON REPORTING: ☐ MR. ☒ MS. Frankie Mae Williams

ADDRESS: Grenada CITY Grenada COUNTY 748 Tie Plant Rd STREET OR BOX ZIP CODE

TELEPHONE HOME: 226-1667
WORK:

COMPLAINT SITE: Ditch by her home

TEXT OF COMPLAINT: Water running down a ditch by her house with a film on it. Water is red in color. Water is coming from Koppers. She is concerned because her children play around this ditch.

COMPLAINT TAKEN BY: Ken Lefleur NAME Jackson OFFICE

REFERRED TO: ☒ NORTH REGIONAL OFFICE ☐ CENTRAL REGIONAL OFFICE ☐ SOUTH REGIONAL OFFICE

SEND WRITTEN REPORT TO: Steve Spengler

REFERRED BY: ☒ PHONE ☐ MAIL ☐ COURIER

ROUTED TO R.O. BY: Ken Lefleur DATE: 9-11-96 (11:55 KH)

RESOLUTION:

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. _____

I. GENERAL INFORMATION: Facility Name KOPPERS COMPLAINT STORMWATER
County Code GRENADA NPDES Permit No. _____
Discharge No. RE:9/12/96 Date Requested 10/14/96
Sample Point Identification Site #1 (Soil)
Requested By SCOTT MILLS Data To SCOTT MILLS
Type of Sample: Grab ( ) Composite (Flow) (Time) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition Sunny, Cool Collected By CLIFT JETER
Where Taken See map Dewitt Spurgeon

	Type	Parameters	Preservative	Date	Time
1.	GRAB	G.C. PHENOLS			
2.	GRAB	TPH	Cool	11-8-96	1130
3.	GRAB	SEMI VOLITILES			
4.	GRAB	Cu, Cr, As			
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)			
D.O.	(000300)	( )			
Temperature	(000010)	( )			
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)			

IV. TRANSPORTATION OF SAMPLE: Bus ( ) RO Vehicle ( ) Other (X) SUNBELT COURIERS
V. LABORATORY: Received By Kathy Fassus Date 11-12-96 Time 0900
Recorded By _____ Date Sent to State Office _____

Analysis	Computer Code	Request	Result	Analyst	Date Measured
BOD_5	(000310)	( )	mg/l		*
COD	(000340)	( )	mg/l		
TOC	(000680)	( )	mg/l		
Suspended Solids	(099000)	( )	mg/l		
TKN	(000625)	( )	mg/l		
Ammonia-N	(000610)	( )	mg/l		
Fecal Coliform(1)	(074055)	( )	colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )	colonies/100 ml		*
Total Phosphorus	(000665)	( )	mg/l		
Oil and Grease(1)	(000550)	( )	mg/l		
Oil and Grease(2)	(000550)	( )	mg/l		
Chlorides	(099016)	( )	mg/l		
Phenol	(032730)	( )	mg/l		
Total Chromium	(001034)	( )	mg/l		
Hex. Chromium	(001032)	( )	mg/l		
Zinc	(001092)	( )	mg/l		
Copper	(001042)	( )	mg/l		
Lead	(017501)	( )	mg/l		
Cyanide	(000722)	( )	mg/l		
TPH		(X)	690.0 mg/kg	VS, KF	11-18-96
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			

Remarks _____

*Date of Test Initiation

5200 WATER

1297

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. _____

I. GENERAL INFORMATION: Facility Name KOPPERS COMPLAINT STORMWATER
County Code GRENADA NPDES Permit No. _____
Discharge No. RE: 9/12/96 Date Requested 10/14/96
Sample Point Identification Site #3 (Soil)
Requested By SCOTT MILLS Date To SCOTT MILLS
Type of Sample: Grab (X) Composite (Flow) (Time) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition Sunny, Cool Collected By CLIFT JETER
Where Taken See map

	Type	Parameters	Preservative	Date	Time
1.	GRAB	G. C. PHENOLS		11-8-96	12:00
2.	GRAB	TPH	Cool		
3.	GRAB	SEMI VOLITILES			
4.	GRAB	Cu, Cr, As			
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)			
D.O.	(000300)	( )			
Temperature	(000010)	( )			
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)			

IV. TRANSPORTATION OF SAMPLE: Bus ( ) RO Vehicle ( ) Other (X) SUNBELT COURIERS
V. LABORATORY: Received By Kathy Fassis Date 11-13-96 Time 0900
Recorded By _____ Date Sent to State Office _____

Analysis	Computer Code	Request	Result	Analyst	Date Measured
BOD_5	(000310)	( )	mg/l		*
COD	(000340)	( )	mg/l		
TOC	(000680)	( )	mg/l		
Suspended Solids	(099000)	( )	mg/l		
TKN	(000625)	( )	mg/l		
Ammonia-N	(000610)	( )	mg/l		
Fecal Coliform(1)	(074055)	( )	colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )	colonies/100 ml		*
Total Phosphorus	(000665)	( )	mg/l		
Oil and Grease(1)	(000550)	( )	mg/l		
Oil and Grease(2)	(000550)	( )	mg/l		
Chlorides	(099016)	( )	mg/l		
Phenol	(032730)	( )	mg/l		
Total Chromium	(001034)	( )	mg/l		
Hex. Chromium	(001032)	( )	mg/l		
Zinc	(001092)	( )	mg/l		
Copper	(001042)	( )	mg/l		
Lead	(017501)	( )	mg/l		
Cyanide	(000722)	( )	mg/l		
TPH		(X)	2600.0 mg/kg	RS, KF	11-18-96
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			

Remarks _____

*Date of Test Initiation

5200 WATER

1299

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No.: 96-01298
Cost Code: 3200

I. GENERAL INFORMATION:
Facility Name: KOPPERS COMPLAINT STORMWATER
County Code: Grenada NPDES Permit No.:
Discharge No: RE: 9/12/96 Date Requested: 10/14/ 96
Sample Point Identification: Site #2 (Soil)
Requested By: Scott Mills Data To: Scott Mills
Type of Sample: Grab: X Composite: Flow: Time: Other:

II. SAMPLE IDENTIFICATION:
Environment Condition:Sunny, Cool CollectedBy:Clift Jeter, Dewitt Sprugeon
Where Taken: See Map

	Type	Parameters	Preservative	Date	Time
1.	GRAB	G. C. PHENOLS			
2.	GRAB	TPH	Cool	11/8/96	1145
3.	GRAB	SEMI VOLITILES			
4.	GRAB	Cu, Cr, As			
5.					

III. FIELD:

Analysis	Computer Code	Req	Results	Analyst	Date
pH	000400	X			
D.O.	000300				
Temperature	000010				
ResidualChlorine	050060				
Flow	074060	X			

IV. TRANSPORTATION OF SAMPLE:
Bus: RO Vehicle: Other: SUNBELT COURIERS

V. LABORATORY:
Received by: Kathy Farris Date: 11/13/96 Time:0900
Recorded by: Dot Lewis Date Sent to State Office: 1/14/97

VI. Remarks: See Attached Sheets.

TARGET COMPOUND LIST
WET CHEMISTRY PARAMETERS

Lab Bench No.:96-01298

Analysis	Computer Req Code		Result	Analyst	Date Measured or Date Test Initiated
BOD_5	000310		mg/l		
COD	000340		mg/l		
TOC	000680		mg/l		
Suspended Solids	099000		mg/l		
TKN	000625		mg/l		
Ammonia-N	000610		mg/l		
Fecal Coliform	074055		colonies/100ml		
Total Phosphorous	000665		mg/l		
Oil & Grease	000550		mg/l		
Chlorides	099016		mg/l		
Phenol	032730		mg/l		
Total Chromium	001034		mg/l		
Hex. Chromium	001032		mg/l		
Zinc	001092		mg/l		
Copper	001042		mg/l		
Lead	017501		mg/l		
Cyanide	000722		mg/l		
TPH		X	415.0 mg/kg	KF	11/18/96

Remarks:

++++

TARGET COMPOUND LIST
SEMIVOLATILE ORGANIC COMPOUNDS
IN SOILS/SOLIDS

OPCL NO.: 96-01298 MARKED: Koppers Site #2
ANALYSIS OF: Soil/Sed. DATE RECEIVED: 11/13/96

COMPOUNDS	MQL	µg/kg	COMPOUNDS	MQL	µg/Kg	COMPOUNDS	MQL	µg/Kg
Phenol	330	ND	4-Chloro-3-methylphenol	330	ND	Hexachlorobenzene	330	ND
bis(2-Chloroethyl)ether	330	ND	2-Methylnaphthalene	330	ND	Pentachloropohenol	660	ND
2-Chlorophenol	330	ND	Hexachlorocyclopentadiene	330	ND	Phenanthrene	330	ND
1,3-Dichlorobenzene	330	ND	2,4,6-Trichlorophenol	330	ND	Anthracene	330	ND
1,4-Dichlorobenzene	330	ND	2,4,5-Trichlorophenol	1600	ND	Di-n-butylphthalate	330	ND
Benzyl alcohol	330	ND	2-Chloronaphthalene	330	ND	Fluoranthene	330	3470
1,2-Dichlorobenzene	330	ND	2-Nitroaniline	1600	ND	Pyrene	330	3510
2-Methylphenol	330	ND	Dimethylphthalate	330	ND	Butylbenzylphthalate	330	ND
bis(2-Chloroisopropyl)ether	330	ND	Acenaphtylene	330	ND	3,3'Dichlorobenzidine	660	ND
4-Methylphenol	330	ND	2,6-Dinitrotoluene	330	ND	Benzo(a)anthracene	330	ND
N-Nitroso-di-n-propylamine	330	ND	3-Nitroaniline	1600	ND	Chrysene	330	ND
Hexachloroethane	330	ND	Acenaphthene	330	ND	bis(2-Ethylhexyl)phthalate	330	ND
Nitrobenzene	330	ND	2,4-Dinitrophenol	1600	ND	Di-n-octylphthalate	330	ND
Isophorone	330	ND	4-Nitrophenol	1600	ND	Benzo(b)fluoranthene	330	4620
2-Nitrophenol	330	ND	Dibenzofuran	330	ND	Benzo(k)fluoranthene	330	ND
2,4-Dimethylphenol	330	ND	2,4-Dinitrotoluene	330	ND	Benzo(a)pyrene	330	ND
Benzoic acid	1600	ND	Diethylphthalate	330	ND	Indeno(1,2,3-cd)pyrene	330	ND
bis(2-Chloroethoxy)methane	330	ND	4-Chlorophenyl-phenylether	330	ND	Dibenz(a,h)anthracene	330	ND
2,4-Dichlorophenol	330	ND	Fluorene	330	ND	Benzo(g,h,i)perylene	330	ND
1,2,4-Trichlorobenzene	330	ND	4-Nitroaniline	1600	ND			
Naphthalene	330	ND	4,6-Dinitro-2-methylphenol	1600	ND			
4-Chloroaniline	330	ND	N-nitrosodiphenylamine	330	ND			
Hexachlorobutadiene	330	ND	4-Bromophenyl-phenylether	330	ND			

SURROGATES	RECOVERY (%)	LIMITS
2-Fluorophenol	90	25 - 121
Phenol-d5	83	24 - 113
Nitrobenzene-d5	78	23 - 120
2-Fluorobiphenyl	72	30 - 115
2,4,6-Tribromophenol	86	19 - 122
p-Terphenyl-d14	86	18 - 137

Date Extracted: 11 / 18 / 1996
Date Injected: 12 / 16 / 1996
ND = None Detected
MQL = Minimum Quantifiable Level
Analyst: Jon Shell (JES)

Lower Detection Level = MQL X 10 = 3,300, etc. µg/L

___ No peaks above 40% of internal standard.
___ Peaks above 40% of internal standard on EPA Appendx IX were identified.*
___ Peaks above 40% of internal standard not on EPA Appendix IX.**
___ Peaks above 40% of internal standard not on EPA Appendix IX were not identified.
___ Additional peaks were observed, but not examined.

COMMENTS: _____

++++

INORGANICS REPORT
SOIL/SEDIMENT

SAMPLE No.: 96-01298

ANALYSES: Soil **DATE COLLECTED:** 11/8/96

PARAMETER	CONC. ug/g	MQL ug/g	QC %Rec.	Analyst	Date
Arsenic	1.4	0.5	84	GB	12/4/96
Chromium	8.0	0.1	92	GB	12/3/96
Copper	9.5	0.5	90	GB	12/3/96

MQL = minimum quantifiable levels
QC %Rec = percent recovery of quality control standard

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. _____

I. GENERAL INFORMATION: Facility Name KOPPERS COMPLAINT STORMWATER
County Code GRENADA NPDES Permit No. _____
Discharge No. RE: 9/12/96 Date Requested 10/14/96
Sample Point Identification Site #2 (Soil)
Requested By SCOTT MILLS Data To SCOTT MILLS
Type of Sample: Grab (X) Composite (Flow) (Time) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition Sunny Cool Collected By CLIFT JETER
Where Taken See map Dewitt Spurgeon

Type	Parameters	Preservative	Date	Time
1. GRAB	G. C. PHENOLS			
2. GRAB	TPH	Cool	11-8-96	11:45
3. GRAB	SEMI VOLITILES			
4. GRAB	Cu. Cr.As			
5.				

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)			
D.O.	(000300)	( )			
Temperature	(000010)	( )			
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)			

IV. TRANSPORTATION OF SAMPLE: Bus ( ) RO Vehicle ( ) Other (X) SUNBELT COURIERS
V. LABORATORY: Received By Kathy Farris Date 11-13-96 Time 0900
Recorded By _____ Date Sent to State Office _____

Analysis	Computer Code	Request	Result	Analyst	Date Measured
BOD_5	(000310)	( )	mg/l		*
COD	(000340)	( )	mg/l		
TOC	(000680)	( )	mg/l		
Suspended Solids	(099000)	( )	mg/l		
TKN	(000625)	( )	mg/l		
Ammonia-N	(000610)	( )	mg/l		
Fecal Coliform(1)	(074055)	( )	colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )	colonies/100 ml		*
Total Phosphorus	(000665)	( )	mg/l		
Oil and Grease(1)	(000550)	( )	mg/l		
Oil and Grease(2)	(000550)	( )	mg/l		
Chlorides	(099016)	( )	mg/l		
Phenol	(032730)	( )	mg/l		
Total Chromium	(001034)	( )	mg/l		
Hex. Chromium	(001032)	( )	mg/l		
Zinc	(001092)	( )	mg/l		
Copper	(001042)	( )	mg/l		
Lead	(017501)	( )	mg/l		
Cyanide	(000722)	( )	mg/l		
TPH		(X)	415.0 mg/kg	KF	11-18-96
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			

Remarks _____

*Date of Test Initiation
5200 WATER

1298

SM

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No.: 96-01299
Cost Code: 3200

I. GENERAL INFORMATION:
Facility Name: KOPPERS COMPLAINT STORMWATER
County Code: Grenada NPDES Permit No.:
Discharge No: RE: 9/12/96 Date Requested: 10/14/ 96
Sample Point Identification: Site #3 (Soil)
Requested By: Scott Mills Data To: Scott Mills
Type of Sample: Grab: X Composite: Flow: Time: Other:

II. SAMPLE IDENTIFICATION:
Environment Condition:Sunny, Cool CollectedBy:Clift Jeter
Where Taken: See Map

	Type	Parameters	Preservative	Date	Time
1.	GRAB	G. C. PHENOLS			
2.	GRAB	TPH	Cool	11/8/96	1200
3.	GRAB	SEMI VOLITILES			
4.	GRAB	Cu, Cr, As			
5.					

III. FIELD:

Analysis	Computer Code	Req	Results	Analyst	Date
pH	000400	X			
D.O.	000300				
Temperature	000010				
ResidualChlorine	050060				
Flow	074060	X			

IV. TRANSPORTATION OF SAMPLE:
Bus: RO Vehicle: Other: SUNBELT COURIERS

V. LABORATORY:
Received by: Kathy Farris Date: 11/13/96 Time:0900
Recorded by: Dot Lewis Date Sent to State Office: 1/14/97

VI. Remarks: See Attached Sheets.

TARGET COMPOUND LIST
WET CHEMISTRY PARAMETERS

Lab Bench No.:96-01299

Analysis	Computer Req Code		Result	Analyst	Date Measured or Date Test Initiated
BOD_5	000310		mg/l		
COD	000340		mg/l		
TOC	000680		mg/l		
Suspended Solids	099000		mg/l		
TKN	000625		mg/l		
Ammonia-N	000610		mg/l		
Fecal Coliform	074055		colonies/100ml		
Total Phosphorous	000665		mg/l		
Oil & Grease	000550		mg/l		
Chlorides	099016		mg/l		
Phenol	032730		mg/l		
Total Chromium	001034		mg/l		
Hex. Chromium	001032		mg/l		
Zinc	001092		mg/l		
Copper	001042		mg/l		
Lead	017501		mg/l		
Cyanide	000722		mg/l		
TPH		X	260.0 mg/kg	VS, KF	11/18/96
Total Petroleum Hydrocarbons					

Remarks: _____

++++

TARGET COMPOUND LIST
SEMIVOLATILE ORGANIC COMPOUNDS
IN SOILS/SOLIDS

OPCL NO.: 96-01299 MARKED: Koppers Site #3
ANALYSIS OF: Soil/Sed. DATE RECEIVED: 11/13/96

COMPOUNDS	MQL	µg/kg	COMPOUNDS	MQL	µg/Kg	COMPOUNDS	MQL	µg/Kg
Phenol	330	ND	4-Chloro-3-methylphenol	330	ND	Hexachlorobenzene	330	ND
bis(2-Chloroethyl)ether	330	ND	2-Methylnaphthalene	330	ND	Pentachloropohenol	660	ND
2-Chlorophenol	330	ND	Hexachlorocyclopentadiene	330	ND	Phenanthrene	330	ND
1,3-Dichlorobenzene	330	ND	2,4,6-Trichlorophenol	330	ND	Anthracene	330	ND
1,4-Dichlorobenzene	330	ND	2,4,5-Trichlorophenol	1600	ND	Di-n-butylphthalate	330	ND
Benzyl alcohol	330	ND	2-Chloronaphthalene	330	ND	Fluoranthene	330	ND
1,2-Dichlorobenzene	330	ND	2-Nitroaniline	1600	ND	Pyrene	330	ND
2-Methylphenol	330	ND	Dimethylphthalate	330	ND	Butylbenzylphthalate	330	ND
bis(2-Chloroisopropyl)ether	330	ND	Acenaphtylene	330	ND	3,3'Dichlorobenzidine	660	ND
4-Methylphenol	330	ND	2,6-Dinitrotoluene	330	ND	Benzo(a)anthracene	330	ND
N-Nitroso-di-n-propylamine	330	ND	3-Nitroaniline	1600	ND	Chrysene	330	ND
Hexachloroethane	330	ND	Acenaphthene	330	ND	bis(2-Ethylhexyl)phthalate	330	ND
Nitrobenzene	330	ND	2,4-Dinitrophenol	1600	ND	Di-n-octylphthalate	330	ND
Isophorone	330	ND	4-Nitrophenol	1600	ND	Benzo(b)fluoranthene	330	ND
2-Nitrophenol	330	ND	Dibenzofuran	330	ND	Benzo(k)fluoranthene	330	ND
2,4-Dimethylphenol	330	ND	2,4-Dinitrotoluene	330	ND	Benzo(a)pyrene	330	ND
Benzoic acid	1600	ND	Diethylphthalate	330	ND	Indeno(1,2,3-cd)pyrene	330	ND
bis(2-Chloroethoxy)methane	330	ND	4-Chlorophenyl-phenylether	330	ND	Dibenz(a,h)anthracene	330	ND
2,4-Dichlorophenol	330	ND	Fluorene	330	ND	Benzo(g,h,i)perylene	330	ND
1,2,4-Trichlorobenzene	330	ND	4-Nitroaniline	1600	ND			
Naphthalene	330	ND	4,6-Dinitro-2-methylphenol	1600	ND			
4-Chloroaniline	330	ND	N-nitrosodiphenylamine	330	ND			
Hexachlorobutadiene	330	ND	4-Bromophenyl-phenylether	330	ND			

SURROGATES	RECOVERY (%)	LIMITS
2-Fluorophenol	74	25 - 121
Phenol-d5	73	24 - 113
Nitrobenzene-d5	68	23 - 120
2-Fluorobiphenyl	64	30 - 115
2,4,6-Tribromophenol	74	19 - 122
p-Terphenyl-d14	78	18 - 137

Date Extracted: 11 / 18 / 1996
Date Injected: 12 / 16 / 1996
ND = None Detected
MQL = Minimum Quantifiable Level
Analyst: Jon Shell (JES)

Lower Detection Level = MQL X 10 = 3,300, etc. µg/L

___ No peaks above 40% of internal standard.
___ Peaks above 40% of internal standard on EPA Appendx IX were identified.*
___ Peaks above 40% of internal standard not on EPA Appendix IX.**
___ Peaks above 40% of internal standard not on EPA Appendix IX were not identified.
___ Additional peaks were observed, but not examined.

COMMENTS: No Target compounds with concentrations above the MQL were detected.

++++

INORGANICS REPORT
SOIL/SEDIMENT

SAMPLE No.: 96-01299

ANALYSES: Soil

DATE COLLECTED: 11/8/96

PARAMETER	CONC. ug/g	MQL ug/g	QC %Rec.	Analyst	Date
Arsenic	2.0	0.5	84	GB	12/4/96
Chromium	6.1	0.1	92	GB	12/3/96
Copper	5.1	0.5	90	GB	12/3/96

MQL = minimum quantifiable levels
QC %Rec = percent recovery of quality control standard

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No.: 96-01300
Cost Code: 3200

I. GENERAL INFORMATION:

Facility Name: Koppers Complaint Stormwater
County Code: Grenada NPDES Permit No.:
Discharge No: RE: 9/12/96 Date Requested: 10/14/96
Sample Point Identification: Site #4
Requested By: Scott Mills Data To: Scott Mills
Type of Sample: Grab: X Composite: Flow: Time: Other:

II. SAMPLE IDENTIFICATION:

Environment Condition: Sunny, Cool Collected By: Clift Jeter
Where Taken: Directly behind the home. Dewitt Spurgeon

	Type	Parameters	Preservative	Date	Time
1.	GRAB	G. C. Phenols	Cool	11/8/96	1150
2.	GRAB	TPH	5_{ml} H_2SO_4	11/8/96	1150
3.	GRAB	SEMI VOLITILES	Cool	11/8/96	1150
4.	GRAB	Cu, Cr, As	5_{ml} HNO_3	11/8/96	1150
5.					

III. FIELD:

Analysis	Computer Code	Req	Results	Analyst	Date
pH	000400	X	7.5	CJ	11/8/96
D.O.	000300				
Temperature	000010				
ResidualChlorine	050060				
Flow	074060				

IV. TRANSPORTATION OF SAMPLE:

Bus: RO Vehicle: Other: X Sunbelt Couriers

V. LABORATORY:

Received by: Kathy Farris Date: 11/13/96 Time:0900
Recorded by: Dot Lewis Date Sent to State Office: 12/26/96

VI. Remarks: See Attached.

TARGET COMPOUND LIST
WET CHEMISTRY PARAMETERS

Lab Bench No.:96-01300

Analysis	Computer Req Code		Result	Analyst	Date Measured or Date Test Initiated
BOD	000310		mg/l		
COD	000340		mg/l		
TOC	000680		mg/l		
Suspended Solids	099000		mg/l		
TKN	000625		mg/l		
Ammonia-N	000610		mg/l		
Fecal Coliform	074055		colonies/100ml		
Total Phosphorous	000665		mg/l		
Oil & Grease	000550		mg/l		
Chlorides	099016		mg/l		
Phenol	032730		mg/l		
Cyanide	000722		mg/l		
Nitrate-Nitrite	000630		mg/l		
Alkalinity	000410		mg/l		
Hardness	000900		mg/l		
TPH		X	<5.0 mg/l	KF	11/20/96

Remarks: _____

++++

TARGET COMPOUND LIST
SEMIVOLATILE ORGANIC COMPOUNDS
IN WATER

OPCL NO.: 96-01300 MARKED: Koppers Site #4
ANALYSIS OF: Water DATE RECEIVED: 11/13/96

COMPOUNDS	MQL	µg/L	COMPOUNDS	MQL	µg/L	COMPOUNDS	MQL	µg/L
Phenol	10	ND	4-Chloro-3-methylphenol	20	ND	Hexachlorobenzene	10	ND
bis(2-Chloroethyl)ether	10	ND	2-Methylnaphthalene	10	ND	Pentachloropohenol	50	127
2-Chlorophenol	10	ND	Hexachlorocyclopentadiene	10	ND	Phenanthrene	10	ND
1,3-Dichlorobenzene	10	ND	2,4,6-Trichlorophenol	10	ND	Anthracene	10	ND
1,4-Dichlorobenzene	10	ND	2,4,5-Trichlorophenol	10	ND	Di-n-butylphthalate	10	ND
Benzyl alcohol	20	ND	2-Chloronaphthalene	10	ND	Fluoranthene	10	ND
1,2-Dichlorobenzene	10	ND	2-Nitroaniline	50	ND	Pyrene	10	ND
2-Methylphenol	10	ND	Dimethylphthalate	10	ND	Butylbenzylphthalate	10	ND
bis(2-Chloroisopropyl)ether	10	ND	Acenaphtylene	10	ND	3,3'Dichlorobenzidine	50	ND
4-Methylphenol	10	ND	2,6-Dinitrotoluene	10	ND	Benzo(a)anthracene	10	ND
N-Nitroso-di-n-propylamine	20	ND	3-Nitroaniline	50	ND	Chrysene	10	ND
Hexachloroethane	20	ND	Acenaphthene	10	ND	bis(2-Ethylhexyl)phthalate	10	ND
Nitrobenzene	10	ND	2,4-Dinitrophenol	50	ND	Di-n-octylphthalate	10	ND
Isophorone	10	ND	4-Nitrophenol	50	ND	Benzo(b)fluoranthene	10	ND
2-Nitrophenol	20	ND	Dibenzofuran	10	ND	Benzo(k)fluoranthene	10	ND
2,4-Dimethylphenol	10	ND	2,4-Dinitrotoluene	10	ND	Benzo(a)pyrene	10	ND
Benzoic acid	50	ND	Diethylphthalate	10	ND	Indeno(1,2,3-cd)pyrene	20	ND
bis(2-Chloroethoxy)methane	10	ND	4-Chlorophenyl-phenylether	10	ND	Dibenz(a,h)anthracene	20	ND
2,4-Dichlorophenol	10	ND	Fluorene	10	ND	Benzo(g,h,i)perylene	20	ND
1,2,4-Trichlorobenzene	10	ND	4-Nitroaniline	50	ND			
Naphthalene	10	ND	4,6-Dinitro-2-methylphenol	50	ND			
4-Chloroaniline	20	ND	N-nitrosodiphenylamine	20	ND			
Hexachlorobutadiene	10	ND	4-Bromophenyl-phenylether	10	ND			

SURROGATES	RECOVERY (%)
2-Fluorophenol	86
Phenol-d5	86
Nitrobenzene-d5	84
2-Fluorobiphenyl	71
2,4,6-Tribromophenol	66
p-Terphenyl-d14	73

Date Extracted: 11/ 13/ 1996
Date Injected: 11/ 20/ 1996
ND = None Detected
MQL = Minimum Quantifiable Level
Analyst: Jon Shell (JES)

Lower Detection Level = MQL X 1 = _____ µg/L

___ No peaks above 40% of internal standard.
___ Peaks above 40% of internal standard on EPA Appendx IX were identified.*
___ Peaks above 40% of internal standard not on EPA Appendix IX.**
4 Peaks above 40% of internal standard not on EPA Appendix IX were not identified.
___ Additional peaks were observed, but not examined.

COMMENTS: This sample contains TRACE levels of the (<MQL) of the compounds Isophorone, Fluoranthene, Pyrene and Benzo (b) flurothene.

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Bench No. _____

I. GENERAL INFORMATION: Facility Name KOPPERS COMPLAINT STORMWATER
County Code GRENADA NPDES Permit No. _____
Discharge No. RE: 9/12/96 Date Requested 10/14/96
Sample Point Identification Site # 4
Requested By SCOTT MILLS Data To SCOTT MILLS
Type of Sample: Grab (X) Composite (Flow) (Time) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition Sunny, Cool Collected By CLIFT JETER
Where Taken See MAP Dewitt Spurgeon

Type	Parameters	Preservative	Date	Time
1. GRAB	G. C. PHENOLS	Cool	11-8-96	1150
2. GRAB	TPH	5ml H_2SO_4	11-8-96	1150
3. GRAB	SEMI VOLITILES	Cool	11-8-96	1150
4. GRAB	Cu, Cr, As	5ml HNO_3	11-8-96	1150
5.				

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	7.5	CJ	11-8-96
D.O.	(000300)	( )			
Temperature	(000010)	( )			
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)			

IV. TRANSPORTATION OF SAMPLE: Bus ( ) RO Vehicle ( ) Other (X) SUNBELT COURIERS

V. LABORATORY: Received By Kathy Fassis Date 11-13-96 Time 0900
Recorded By _____ Date Sent to State Office _____

Analysis	Computer Code	Request	Result	Analyst	Date Measured
BOD_5	(000310)	( )	mg/l		*
COD	(000340)	( )	mg/l		
TOC	(000680)	( )	mg/l		
Suspended Solids	(099000)	( )	mg/l		
TKN	(000625)	( )	mg/l		
Ammonia-N	(000610)	( )	mg/l		
Fecal Coliform(1)	(074055)	( )	colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )	colonies/100 ml		*
Total Phosphorus	(000665)	( )	mg/l		
Oil and Grease(1)	(000550)	( )	mg/l		
Oil and Grease(2)	(000550)	( )	mg/l		
Chlorides	(099016)	( )	mg/l		
Phenol	(032730)	( )	mg/l		
Total Chromium	(001034)	( )	mg/l		
Hex. Chromium	(001032)	( )	mg/l		
Zinc	(001092)	( )	mg/l		
Copper	(001042)	(X)	~~2220~~ mg/l		
Lead	(017501)	( )	mg/l		
Cyanide	(000722)	( )	mg/l		
TPH		(X)	<5.0 mg/l	RF	11-20-96
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			

Remarks _____

*Date of Test Initiation

5200 WATER

1300

++++

INORGANICS REPORT
WATER

SAMPLE No.: 96-01300

ANALYSES: water

DATE COLLECTED: 11/8/96

PARAMETER	CONC. ug/l	MQL ug/l	QC %Rec.	Analyst	Date
Arsenic	ND	5.0	91	GB	12/4/96
Chromium	ND	1.0	92	GB	12/3/96
Copper	22.0	5.0	92	GB	12/3/96

MQL = minimum quantifiable levels
QC %Rec = percent recovery of quality control standard

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No.: 96-01301
Cost Code: 3200

I. GENERAL INFORMATION:

Facility Name: Koppers Complaint Stormwater
County Code: Grenada NPDES Permit No.:
Discharge No: RE: 9/12/96 Date Requested: 10/14/96
Sample Point Identification: Site #5
Requested By: Scott Mills Data To: Scott Mills
Type of Sample: Grab: X Composite: Flow: Time: Other:

II. SAMPLE IDENTIFICATION:

Environment Condition: Sunny, Mild Collected By: Clift Jeter
Where Taken: See Map Dewitt Spurgeon

	Type	Parameters	Preservative	Date	Time
1.	GRAB	G. C. Phenols	Cool	11/8/96	1150
2.	GRAB	TPH	5_{ml} H_2SO_4	11/8/96	1150
3.	GRAB	SEMI VOLITILES	Cool	11/8/96	1150
4.	GRAB	Cu, Cr, As	5_{ml} HNO_3	11/8/96	1150
5.					

III. FIELD:

Analysis	Computer Code	Req	Results	Analyst	Date
pH	000400	X	7.60	CJ	11/8/96
D.O.	000300				
Temperature	000010				
ResidualChlorine	050060				
Flow	074060				

IV. TRANSPORTATION OF SAMPLE:

Bus: RO Vehicle: Other: X Sunbelt Couriers

V. LABORATORY:

Received by: Kathy Farris Date: 11/13/96 Time:0900
Recorded by: Dot Lewis Date Sent to State Office: 12/26/96

VI. Remarks: See Attached.

TARGET COMPOUND LIST
WET CHEMISTRY PARAMETERS

Lab Bench No.:96-01301

Analysis	Computer Req Code		Result	Analyst	Date Measured or Date Test Initiated
BOD	000310		mg/l		
COD	000340		mg/l		
TOC	000680		mg/l		
Suspended Solids	099000		mg/l		
TKN	000625		mg/l		
Ammonia-N	000610		mg/l		
Fecal Coliform	074055		colonies/100ml		
Total Phosphorous	000665		mg/l		
Oil & Grease	000550		mg/l		
Chlorides	099016		mg/l		
Phenol	032730		mg/l		
Cyanide	000722		mg/l		
Nitrate-Nitrite	000630		mg/l		
Alkalinity	000410		mg/l		
Hardness	000900		mg/l		
TPH		X	<5.0 mg/l	KF	11/20/96

Remarks: _____

++++

INORGANICS REPORT
WATER

SAMPLE No.: 96-01301

ANALYSES: water

DATE COLLECTED: 11/8/96

PARAMETER	CONC. ug/l	MQL ug/l	QC %Rec.	Analyst	Date
Arsenic	ND	5.0	91	GB	12/4/96
Chromium	ND	1.0	92	GB	12/3/96
Copper	17.0	5.0	92	GB	12/3/96

MQL = minimum quantifiable levels
QC %Rec = percent recovery of quality control standard

++++

TARGET COMPOUND LIST
SEMIVOLATILE ORGANIC COMPOUNDS IN WATER

OPCL NO.: 96-01301 MARKED: Koppers Site #5
ANALYSIS OF: Water DATE RECEIVED: 11/13/96

COMPOUNDS	MQL	µg/L	COMPOUNDS	MQL	µg/L	COMPOUNDS	MQL	µg/L
Phenol	10	ND	4-Chloro-3-methylphenol	20	ND	Hexachlorobenzene	10	ND
bis(2-Chloroethyl)ether	10	ND	2-Methylnaphthalene	10	ND	Pentachloropohenol	50	128
2-Chlorophenol	10	ND	Hexachlorocyclopentadiene	10	ND	Phenanthrene	10	ND
1,3-Dichlorobenzene	10	ND	2,4,6-Trichlorophenol	10	ND	Anthracene	10	ND
1,4-Dichlorobenzene	10	ND	2,4,5-Trichlorophenol	10	ND	Di-n-butylphthalate	10	ND
Benzyl alcohol	20	ND	2-Chloronaphthalene	10	ND	Fluoranthene	10	ND
1,2-Dichlorobenzene	10	ND	2-Nitroaniline	50	ND	Pyrene	10	ND
2-Methylphenol	10	ND	Dimethylphthalate	10	ND	Butylbenzylphthalate	10	ND
bis(2-Chloroisopropyl)ether	10	ND	Acenaphtylene	10	ND	3,3'Dichlorobenzidine	50	ND
4-Methylphenol	10	ND	2,6-Dinitrotoluene	10	ND	Benzo(a)anthracene	10	ND
N-Nitroso-di-n-propylamine	20	ND	3-Nitroaniline	50	ND	Chrysene	10	ND
Hexachloroethane	20	ND	Acenaphthene	10	ND	bis(2-Ethylhexyl)phthalate	10	ND
Nitrobenzene	10	ND	2,4-Dinitrophenol	50	ND	Di-n-octylphthalate	10	ND
Isophorone	10	ND	4-Nitrophenol	50	ND	Benzo(b)fluoranthene	10	ND
2-Nitrophenol	20	ND	Dibenzofuran	10	ND	Benzo(k)fluoranthene	10	ND
2,4-Dimethylphenol	10	ND	2,4-Dinitrotoluene	10	ND	Benzo(a)pyrene	10	ND
Benzoic acid	50	ND	Diethylphthalate	10	ND	Indeno(1,2,3-cd)pyrene	20	ND
bis(2-Chloroethoxy)methane	10	ND	4-Chlorophenyl-phenylether	10	ND	Dibenz(a,h)anthracene	20	ND
2,4-Dichlorophenol	10	ND	Fluorene	10	ND	Benzo(g,h,i)perylene	20	ND
1,2,4-Trichlorobenzene	10	ND	4-Nitroaniline	50	ND			
Naphthalene	10	ND	4,6-Dinitro-2-methylphenol	50	ND			
4-Chloroaniline	20	ND	N-nitrosodiphenylamine	20	ND			
Hexachlorobutadiene	10	ND	4-Bromophenyl-phenylether	10	ND			

SURROGATES	RECOVERY (%)
2-Fluorophenol	86
Phenol-d5	90
Nitrobenzene-d5	87
2-Fluorobiphenyl	72
2,4,6-Tribromophenol	68
p-Terphenyl-d14	82

Date Extracted: 11/ 13/ 1996
Date Injected: 11/ 20/ 1996
ND = None Detected
MQL = Minimum Quantifiable Level
Analyst: Jon Shell (JES)

Lower Detection Level = MQL X 1 = _____ µg/L

___ No peaks above 40% of internal standard.
___ Peaks above 40% of internal standard on EPA Appendx IX were identified.*
___ Peaks above 40% of internal standard not on EPA Appendix IX.**
4 Peaks above 40% of internal standard not on EPA Appendix IX were not identified.
___ Additional peaks were observed, but not examined.

COMMENTS: This sample contains TRACE levels of the (<MQL) of the compounds Isophorone, Fluoranthene, Pyrene and Benzo (b) flurothene.

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Bench No. _____

I. GENERAL INFORMATION: Facility Name KOPPERS COMPLAINT STORMWATER
County Code GRENADA NPDES Permit No. _____
Discharge No. RE: 9/12/96 Date Requested 10/14/96
Sample Point Identification Site #5
Requested By SCOTT MILLS Data To SCOTT MILLS
Type of Sample: Grab (X) Composite (Flow) (Time) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition Sunny, Mild Collected By CLIFT JETER
Where Taken See MAP Dewitt Spurgeon

	Type	Parameters	Preservative	Date	Time
1.	GRAB	G. C. PHENOLS	Cool	11-8-96	1150
2.	GRAB	TPH	5ml H_2SO_4	11-8-96	1150
3.	GRAB	SEMI VOLITILES	Cool	11-8-96	1150
4.	GRAB	Cu, Cr, As	5ml HNO3	11-8-96	1150
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	7.60	CJ	11-8-96
D.O.	(000300)	( )			
Temperature	(000010)	( )			
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)			

IV. TRANSPORTATION OF SAMPLE: Bus ( ) BO Vehicle ( ) Other (X) SUNBELT COURIERS

V. LABORATORY: Received By Kathy Farris Date 11-13-96 Time 0906
Recorded By _____ Date Sent to State Office _____

Analysis	Computer Code	Request	Result	Analyst	Date Measured
BOD_5	(000310)	( )	mg/l		*
COD	(000340)	( )	mg/l		
TOC	(000680)	( )	mg/l		
Suspended Solids	(099000)	( )	mg/l		
TKN	(000625)	( )	mg/l		
Ammonia-N	(000610)	( )	mg/l		
Fecal Coliform(1)	(074055)	( )	colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )	colonies/100 ml		*
Total Phosphorus	(000665)	( )	mg/l		
Oil and Grease(1)	(000550)	( )	mg/l		
Oil and Grease(2)	(000550)	( )	mg/l		
Chlorides	(099016)	( )	mg/l		
Phenol	(032730)	( )	mg/l		
Total Chromium	(001034)	( )	mg/l		
Hex. Chromium	(001032)	( )	mg/l		
Zinc	(001092)	( )	mg/l		
Copper	(001042)	( )	mg/l		
Lead	(017501)	( )	mg/l		
Cyanide	(000722)	( )	mg/l		
TPH		(X)	<5.0 mg/l	KF	11-20-96
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			

Remarks _____

*Date of Test Initiation
5200 WATER

1301

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No.: 96-01302
Cost Code: 3200

I. GENERAL INFORMATION:

Facility Name: Koppers Complaint Stormwater
County Code: Grenada NPDES Permit No.:
Discharge No: RE: 9/12/96 Date Requested: 10/14/96
Sample Point Identification: Site #6
Requested By: Scott Mills Data To: Scott Mills
Type of Sample: Grab: X Composite: Flow: Time: Other:

II. SAMPLE IDENTIFICATION:

Environment Condition: Sunny, Mild Collected By: Clift Jeter
Where Taken: See Map Dewitt Spurgeon

	Type	Parameters	Preservative	Date	Time
1.	GRAB	G. C. Phenols	Cool	11/8/96	1140
2.	GRAB	TPH	5_{ml} H_2SO_4	11/8/96	1140
3.	GRAB	SEMI VOLITILES	Cool	11/8/96	1140
4.	GRAB	Cu, Cr, As	5_{ml} HNO_3	11/8/96	1140
5.					

III. FIELD:

Analysis	Computer Code	Req	Results	Analyst	Date
pH	000400	X	7.55	CJ	11/8/96
D.O.	000300				
Temperature	000010				
ResidualChlorine	050060				
Flow	074060				

IV. TRANSPORTATION OF SAMPLE:

Bus: RO Vehicle: Other: X Sunbelt Couriers

V. LABORATORY:

Received by: Kathy Farris Date: 11/13/96 Time:0900
Recorded by: Dot Lewis Date Sent to State Office: 12/26/96

VI. Remarks: See Attached.

TARGET COMPOUND LIST
WET CHEMISTRY PARAMETERS

Lab Bench No.:96-01302

Analysis	Computer Req Code		Result	Analyst	Date Measured or Date Test Initiated
BOD	000310		mg/l		
COD	000340		mg/l		
TOC	000680		mg/l		
Suspended Solids	099000		mg/l		
TKN	000625		mg/l		
Ammonia-N	000610		mg/l		
Fecal Coliform	074055		colonies/100ml		
Total Phosphorous	000665		mg/l		
Oil & Grease	000550		mg/l		
Chlorides	099016		mg/l		
Phenol	032730		mg/l		
Cyanide	000722		mg/l		
Nitrate-Nitrite	000630		mg/l		
Alkalinity	000410		mg/l		
Hardness	000900		mg/l		
TPH		X	<5.0 mg/l	KF	11/20/96

Remarks: _____

++++

INORGANICS REPORT
WATER

SAMPLE No.: 96-01302

ANALYSES: water

DATE COLLECTED: 11/8/96

PARAMETER	CONC. ug/l	MQL ug/l	QC %Rec.	Analyst	Date
Arsenic	ND	5.0	91	GB	12/4/96
Chromium	ND	1.0	92	GB	12/3/96
Copper	ND	5.0	92	GB	12/3/96

MQL = minimum quantifiable levels
QC %Rec = percent recovery of quality control standard

++++

TARGET COMPOUND LIST
SEMIVOLATILE ORGANIC COMPOUNDS
IN WATER

OPCL NO.: 96-01302 MARKED: Koppers Site #6
ANALYSIS OF: Water DATE RECEIVED: 11/13/96

COMPOUNDS	MQL	µg/L	COMPOUNDS	MQL	µg/L	COMPOUNDS	MQL	µg/L
Phenol	10	ND	4-Chloro-3-methylphenol	20	ND	Hexachlorobenzene	10	ND
bis(2-Chloroethyl)ether	10	ND	2-Methylnaphthalene	10	ND	Pentachloropohenol	50	167
2-Chlorophenol	10	ND	Hexachlorocyclopentadiene	10	ND	Phenanthrene	10	ND
1,3-Dichlorobenzene	10	ND	2,4,6-Trichlorophenol	10	ND	Anthracene	10	ND
1,4-Dichlorobenzene	10	ND	2,4,5-Trichlorophenol	10	ND	Di-n-butylphthalate	10	ND
Benzyl alcohol	20	ND	2-Chloronaphthalene	10	ND	Fluoranthene	10	ND
1,2-Dichlorobenzene	10	ND	2-Nitroaniline	50	ND	Pyrene	10	ND
2-Methylphenol	10	ND	Dimethylphthalate	10	ND	Butylbenzylphthalate	10	ND
bis(2-Chloroisopropyl)ether	10	ND	Acenaphtylene	10	ND	3,3'Dichlorobenzidine	50	ND
4-Methylphenol	10	ND	2,6-Dinitrotoluene	10	ND	Benzo(a)anthracene	10	ND
N-Nitroso-di-n-propylamine	20	ND	3-Nitroaniline	50	ND	Chrysene	10	ND
Hexachloroethane	20	ND	Acenaphthene	10	ND	bis(2-Ethylhexyl)phthalate	10	ND
Nitrobenzene	10	ND	2,4-Dinitrophenol	50	ND	Di-n-octylphthalate	10	ND
Isophorone	10	ND	4-Nitrophenol	50	ND	Benzo(b)fluoranthene	10	ND
2-Nitrophenol	20	ND	Dibenzofuran	10	ND	Benzo(k)fluoranthene	10	ND
2,4-Dimethylphenol	10	ND	2,4-Dinitrotoluene	10	ND	Benzo(a)pyrene	10	ND
Benzoic acid	50	ND	Diethylphthalate	10	ND	Indeno(1,2,3-cd)pyrene	20	ND
bis(2-Chloroethoxy)methane	10	ND	4-Chlorophenyl-phenylether	10	ND	Dibenz(a,h)anthracene	20	ND
2,4-Dichlorophenol	10	ND	Fluorene	10	ND	Benzo(g,h,i)perylene	20	ND
1,2,4-Trichlorobenzene	10	ND	4-Nitroaniline	50	ND			
Naphthalene	10	ND	4,6-Dinitro-2-methylphenol	50	ND			
4-Chloroaniline	20	ND	N-nitrosodiphenylamine	20	ND			
Hexachlorobutadiene	10	ND	4-Bromophenyl-phenylether	10	ND			

SURROGATES	RECOVERY (%)
2-Fluorophenol	81
Phenol-d5	85
Nitrobenzene-d5	84
2-Fluorobiphenyl	70
2,4,6-Tribromophenol	73
p-Terphenyl-d14	80

Date Extracted: 11/ 13/ 1996
Date Injected: 11/ 20/ 1996
ND = None Detected
MQL = Minimum Quantifiable Level
Analyst: Jon Shell (JES)

Lower Detection Level = MQL X 1 = _____ µg/L

___ No peaks above 40% of internal standard.
___ Peaks above 40% of internal standard on EPA Appendx IX were identified.*
___ Peaks above 40% of internal standard not on EPA Appendix IX.**
4 Peaks above 40% of internal standard not on EPA Appendix IX were not identified.
___ Additional peaks were observed, but not examined.

COMMENTS: This sample contains TRACE levels of the (<MQL) compounds Fluoranthene, Pyrene and Benzo (b) fluoranthene.

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Bench No. _____

I. GENERAL INFORMATION: Facility Name KOPPERS COMPLAINT STORMWATER
County Code GRENADA NPDES Permit No. _____
Discharge No. RE: 9/12/96 Date Requested 10/14/96
Sample Point Identification Site #6
Requested By SCOTT MILLS Data To SCOTT MILLS
Type of Sample: Grab (X) Composite (Flow) (Time) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition Sunny, Mild Collected By CLIFT JETER
Where Taken See MAP Dewitt Spurgeon

	Type	Parameters	Preservative	Date	Time
1.	GRAB	G. C. PHENOLS	Cool	11-8-96	1140
2.	GRAB	TPH	5ml H_2SO_4	11-8-96	1140
3.	GRAB	SEMI VOLITILES	Cool	11-8-96	1140
4.	GRAB	Cu, Cr, As	5ml HNO_3	11-8-96	1140
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	7.55	CJ	11-8-96
D.O.	(000300)	( )			
Temperature	(000010)	( )			
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)			

IV. TRANSPORTATION OF SAMPLE: Bus ( ) RO Vehicle ( ) Other (X) SUNBELT COURIERS

V. LABORATORY: Received By Kathy Farris Date 11-13-96 Time 0900
Recorded By _____ Date Sent to State Office _____

Analysis	Computer Code	Request	Result	Analyst	Date Measured
BOD_5	(000310)	( )	mg/l		*
COD	(000340)	( )	mg/l		
TOC	(000680)	( )	mg/l		
Suspended Solids	(099000)	( )	mg/l		
TKN	(000625)	( )	mg/l		
Ammonia-N	(000610)	( )	mg/l		
Fecal Coliform(1)	(074055)	( )	colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )	colonies/100 ml		*
Total Phosphorus	(000665)	( )	mg/l		
Oil and Grease(1)	(000550)	( )	mg/l		
Oil and Grease(2)	(000550)	( )	mg/l		
Chlorides	(099016)	( )	mg/l		
Phenol	(032730)	( )	mg/l		
Total Chromium	(001034)	( )	mg/l		
Hex. Chromium	(001032)	( )	mg/l		
Zinc	(001092)	( )	mg/l		
Copper	(001042)	( )	mg/l		
Lead	(017501)	( )	mg/l		
Cyanide	(000722)	( )	mg/l		
TPH		(X)	<5.0 mg/l	KP	11-20-96
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			

Remarks _____

*Date of Test Initiation

5200 WATER

1302

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No.: 96-01303
Cost Code: 3200

I. GENERAL INFORMATION:

Facility Name: Koppers Complaint Stormwater
County Code: Grenada NPDES Permit No.:
Discharge No: RE: 9/12/96 Date Requested: 10/14/96
Sample Point Identification: Site #7
Requested By: Scott Mills Data To: Scott Mills
Type of Sample: Grab: X Composite: Flow: Time: Other:

II. SAMPLE IDENTIFICATION:

Environment Condition: Sunny, Mild Collected By: Clift Jeter
Where Taken: See Map Dewitt Spurgeon

	Type	Parameters	Preservative	Date	Time
1.	GRAB	G. C. Phenols	Cool	11/8/96	1140
2.	GRAB	TPH	5_{ml} H_2SO_4	11/8/96	1140
3.	GRAB	SEMI VOLITILES	Cool	11/8/96	1140
4.	GRAB	Cu, Cr, As	5_{ml} HNO_3	11/8/96	1140
5.					

III. FIELD:

Analysis	Computer Code	Req	Results	Analyst	Date
pH	000400	X	7.58	CJ	11/8/96
D.O.	000300				
Temperature	000010				
ResidualChlorine	050060				
Flow	074060				

IV. TRANSPORTATION OF SAMPLE:

Bus: RO Vehicle: Other: X Sunbelt Couriers

V. LABORATORY:

Received by: Kathy Farris Date: 11/13/96 Time:0900
Recorded by: Dot Lewis Date Sent to State Office: 12/26/96

VI. Remarks: See Attached.

TARGET COMPOUND LIST
WET CHEMISTRY PARAMETERS

Lab Bench No.:96-01303

Analysis	Computer Req Code		Result	Analyst	Date Measured or Date Test Initiated
BOD	000310		mg/l		
COD	000340		mg/l		
TOC	000680		mg/l		
Suspended Solids	099000		mg/l		
TKN	000625		mg/l		
Ammonia-N	000610		mg/l		
Fecal Coliform	074055		colonies/100ml		
Total Phosphorous	000665		mg/l		
Oil & Grease	000550		mg/l		
Chlorides	099016		mg/l		
Phenol	032730		mg/l		
Cyanide	000722		mg/l		
Nitrate-Nitrite	000630		mg/l		
Alkalinity	000410		mg/l		
Hardness	000900		mg/l		
TPH		X	<5.0 mg/l	KF	11/20/96

Remarks:

++++

INORGANICS REPORT
WATER

SAMPLE No.: 96-01303

ANALYSES: water

DATE COLLECTED: 11/8/96

PARAMETER	CONC. ug/l	MQL ug/l	QC %Rec.	Analyst	Date
Arsenic	7.0	5.0	91	GB	12/4/96
Chromium	4.4	1.0	92	GB	12/3/96
Copper	18.0	5.0	92	GB	12/3/96

MQL = minimum quantifiable levels
QC %Rec = percent recovery of quality control standard

++++

TARGET COMPOUND LIST
SEMIVOLATILE ORGANIC COMPOUNDS
IN WATER

OPCL NO.: 96-01303 MARKED: Koppers Site #7
ANALYSIS OF: Water DATE RECEIVED: 11/13/96

COMPOUNDS	MQL	µg/L	COMPOUNDS	MQL	µg/L	COMPOUNDS	MQL	µg/L
Phenol	10	ND	4-Chloro-3-methylphenol	20	ND	Hexachlorobenzene	10	ND
bis(2-Chloroethyl)ether	10	ND	2-Methylnaphthalene	10	ND	Pentachloropohenol	50	Approx. 215
2-Chlorophenol	10	ND	Hexachlorocyclopentadiene	10	ND	Phenanthrene	10	ND
1,3-Dichlorobenzene	10	ND	2,4,6-Trichlorophenol	10	ND	Anthracene	10	ND
1,4-Dichlorobenzene	10	ND	2,4,5-Trichlorophenol	10	ND	Di-n-butylphthalate	10	ND
Benzyl alcohol	20	ND	2-Chloronaphthalene	10	ND	Fluoranthene	10	ND
1,2-Dichlorobenzene	10	ND	2-Nitroaniline	50	ND	Pyrene	10	ND
2-Methylphenol	10	ND	Dimethylphthalate	10	ND	Butylbenzylphthalate	10	ND
bis(2-Chloroisopropyl)ether	10	ND	Acenaphtylene	10	ND	3,3'Dichlorobenzidine	50	ND
4-Methylphenol	10	ND	2,6-Dinitrotoluene	10	ND	Benzo(a)anthracene	10	ND
N-Nitroso-di-n-propylamine	20	ND	3-Nitroaniline	50	ND	Chrysene	10	ND
Hexachloroethane	20	ND	Acenaphthene	10	ND	bis(2-Ethylhexyl)phthalate	10	ND
Nitrobenzene	10	ND	2,4-Dinitrophenol	50	ND	Di-n-octylphthalate	10	ND
Isophorone	10	ND	4-Nitrophenol	50	ND	Benzo(b)fluoranthene	10	ND
2-Nitrophenol	20	ND	Dibenzofuran	10	ND	Benzo(k)fluoranthene	10	ND
2,4-Dimethylphenol	10	ND	2,4-Dinitrotoluene	10	ND	Benzo(a)pyrene	10	ND
Benzoic acid	50	ND	Diethylphthalate	10	ND	Indeno(1,2,3-cd)pyrene	20	ND
bis(2-Chloroethoxy)methane	10	ND	4-Chlorophenyl-phenylether	10	ND	Dibenz(a,h)anthracene	20	ND
2,4-Dichlorophenol	10	ND	Fluorene	10	ND	Benzo(g,h,i)perylene	20	ND
1,2,4-Trichlorobenzene	10	ND	4-Nitroaniline	50	ND			
Naphthalene	10	ND	4,6-Dinitro-2-methylphenol	50	ND			
4-Chloroaniline	20	ND	N-nitrosodiphenylamine	20	ND			
Hexachlorobutadiene	10	ND	4-Bromophenyl-phenylether	10	ND			

SURROGATES	RECOVERY (%)
2-Fluorophenol	76
Phenol-d5	80
Nitrobenzene-d5	77
2-Fluorobiphenyl	73
2,4,6-Tribromophenol	68
p-Terphenyl-d14	82

Date Extracted: 11/ 13/ 1996
Date Injected: 11/ 20/ 1996
ND = None Detected
MQL = Minimum Quantifiable Level
Analyst: Jon Shell (JES)

Lower Detection Level = MQL X 1 = _____ µg/L

___ No peaks above 40% of internal standard.
___ Peaks above 40% of internal standard on EPA Appendx IX were identified.*
___ Peaks above 40% of internal standard not on EPA Appendix IX.**
4 Peaks above 40% of internal standard not on EPA Appendix IX were not identified.
___ Additional peaks were observed, but not examined.

COMMENTS: * Note(1): Pentachlorophenol reported as an "APPROXIMATE" value (215mg/l) because this value slightly exceeds the highest point on the calibrating curve (200mg/l) Note(2): This sample also contain TRACE levels (<MQL) of Fluoranthene, Pyrene, and Benzo (b) fluoranthene.

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Bench No. _____

I. GENERAL INFORMATION: Facility Name KOPPERS COMPLAINT STORMWATER
County Code GRENADA NPDES Permit No. _____
Discharge No. RE: 9/12/96 Date Requested 10/14/96
Sample Point Identification Site #7
Requested By SCOTT MILLS Data To SCOTT MILLS
Type of Sample: Grab (X) Composite (Flow) (Time) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition Sunny, Mild Collected By CLIFT JETER
Where Taken See MAP Dewitt Spurgeon

	Type	Parameters	Preservative	Date	Time
1.	GRAB	G. C. PHENOLS	Cool	11-8-96	1140
2.	GRAB	TPH	5ml H_2SO_4	11-8-96	1140
3.	GRAB	SEMI VOLITILES	Cool	11-8-96	1140
4.	GRAB	Cu, Cr, As	5ml HNO3	11-8-96	1140
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	7.58	CJ	11-8-96
D.O.	(000300)	( )			
Temperature	(000010)	( )			
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)			

IV. TRANSPORTATION OF SAMPLE: Bus ( ) RO Vehicle ( ) Other (X) SUNBELT COURIERS

V. LABORATORY: Received By Kathy Fassis Date 11-13-96 Time 0900
Recorded By _____ Date Sent to State Office _____

Analysis	Computer Code	Request	Result	Analyst	Date Measured
BOD_5	(000310)	( )	mg/l		*
COD	(000340)	( )	mg/l		
TOC	(000680)	( )	mg/l		
Suspended Solids	(099000)	( )	mg/l		
TKN	(000625)	( )	mg/l		
Ammonia-N	(000610)	( )	mg/l		
Fecal Coliform(1)	(074055)	( )	colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )	colonies/100 ml		*
Total Phosphorus	(000665)	( )	mg/l		
Oil and Grease(1)	(000550)	( )	mg/l		
Oil and Grease(2)	(000550)	( )	mg/l		
Chlorides	(099016)	( )	mg/l		
Phenol	(032730)	( )	mg/l		
Total Chromium	(001034)	( )	mg/l		
Hex. Chromium	(001032)	( )	mg/l		
Zinc	(001092)	( )	mg/l		
Copper	(001042)	( )	mg/l		
Lead	(017501)	( )	mg/l		
Cyanide	(000722)	( )	mg/l		
TPH		(X)	<5.0 mg/l	KF	11-20-96
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			

Remarks _____

*Date of Test Initiation

5200 WATER

1303

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No.: 96-01304
Cost Code: 3200

I. GENERAL INFORMATION:

Facility Name: Koppers Complaint Stormwater
County Code: Grenada NPDES Permit No.:
Discharge No: RE: 9/12/96 Date Requested: 10/14/96
Sample Point Identification: Site #8
Requested By: Scott Mills Data To: Scott Mills
Type of Sample: Grab: X Composite: Flow: Time: Other:

II. SAMPLE IDENTIFICATION:

Environment Condition: Sunny, Mild Collected By: Clift Jeter
Where Taken: See Map Dewitt Spurgeon

	Type	Parameters	Preservative	Date	Time
1.	GRAB	G. C. Phenols	Cool	11/8/96	1215
2.	GRAB	TPH	5_{ml} H_2SO_4	11/8/96	1215
3.	GRAB	SEMI VOLITILES	Cool	11/8/96	1215
4.	GRAB	Cu, Cr, As	5_{ml} HNO_3	11/8/96	1215
5.					

III. FIELD:

Analysis	Computer Code	Req	Results	Analyst	Date
pH	000400	X	7.5	CJ	11/8/96
D.O.	000300				
Temperature	000010				
ResidualChlorine	050060				
Flow	074060				

IV. TRANSPORTATION OF SAMPLE:

Bus: RO Vehicle: Other: X Sunbelt Couriers

V. LABORATORY:

Received by: Kathy Farris Date: 11/13/96 Time:0900
Recorded by: Dot Lewis Date Sent to State Office: 12-26-96

VI. Remarks: See Attached.

TARGET COMPOUND LIST
WET CHEMISTRY PARAMETERS

Lab Bench No.:96-01304

Analysis	Computer Req Code		Result	Analyst	Date Measured or Date Test Initiated
BOD	000310		mg/l		
COD	000340		mg/l		
TOC	000680		mg/l		
Suspended Solids	099000		mg/l		
TKN	000625		mg/l		
Ammonia-N	000610		mg/l		
Fecal Coliform	074055		colonies/100ml		
Total Phosphorous	000665		mg/l		
Oil & Grease	000550		mg/l		
Chlorides	099016		mg/l		
Phenol	032730		mg/l		
Cyanide	000722		mg/l		
Nitrate-Nitrite	000630		mg/l		
Alkalinity	000410		mg/l		
Hardness	000900		mg/l		
TPH		X	<5.0 mg/l	KF	11/20/96

Remarks:

++++

INORGANICS REPORT
WATER

SAMPLE No.: 96-01304

ANALYSES: water

DATE COLLECTED: 11/8/96

PARAMETER	CONC. ug/l	MQL ug/l	QC %Rec.	Analyst	Date
Arsenic	ND	5.0	91	GB	12/4/96
Chromium	ND	1.0	92	GB	12/3/96
Copper	ND	5.0	92	GB	12/3/96

MQL = minimum quantifiable levels
QC %Rec = percent recovery of quality control standard

++++

TARGET COMPOUND LIST
SEMIVOLATILE ORGANIC COMPOUNDS
IN WATER

OPCL NO.: 96-01304 MARKED: Koppers Site #8
ANALYSIS OF: Water DATE RECEIVED: 11/13/96

COMPOUNDS	MQL	µg/L	COMPOUNDS	MQL	µg/L	COMPOUNDS	MQL	µg/L
Phenol	10	ND	4-Chloro-3-methylphenol	20	ND	Hexachlorobenzene	10	ND
bis(2-Chloroethyl)ether	10	ND	2-Methylnaphthalene	10	ND	Pentachloropohenol	50	Approx. 219
2-Chlorophenol	10	ND	Hexachlorocyclopentadiene	10	ND	Phenanthrene	10	ND
1,3-Dichlorobenzene	10	ND	2,4,6-Trichlorophenol	10	ND	Anthracene	10	ND
1,4-Dichlorobenzene	10	ND	2,4,5-Trichlorophenol	10	ND	Di-n-butylphthalate	10	ND
Benzyl alcohol	20	ND	2-Chloronaphthalene	10	ND	Fluoranthene	10	ND
1,2-Dichlorobenzene	10	ND	2-Nitroaniline	50	ND	Pyrene	10	ND
2-Methylphenol	10	ND	Dimethylphthalate	10	ND	Butylbenzylphthalate	10	ND
bis(2-Chloroisopropyl)ether	10	ND	Acenaphtylene	10	ND	3,3'Dichlorobenzidine	50	ND
4-Methylphenol	10	ND	2,6-Dinitrotoluene	10	ND	Benzo(a)anthracene	10	ND
N-Nitroso-di-n-propylamine	20	ND	3-Nitroaniline	50	ND	Chrysene	10	ND
Hexachloroethane	20	ND	Acenaphthene	10	ND	bis(2-Ethylhexyl)phthalate	10	ND
Nitrobenzene	10	ND	2,4-Dinitrophenol	50	ND	Di-n-octylphthalate	10	ND
Isophorone	10	ND	4-Nitrophenol	50	ND	Benzo(b)fluoranthene	10	ND
2-Nitrophenol	20	ND	Dibenzofuran	10	ND	Benzo(k)fluoranthene	10	ND
2,4-Dimethylphenol	10	ND	2,4-Dinitrotoluene	10	ND	Benzo(a)pyrene	10	ND
Benzoic acid	50	ND	Diethylphthalate	10	ND	Indeno(1,2,3-cd)pyrene	20	ND
bis(2-Chloroethoxy)methane	10	ND	4-Chlorophenyl-phenylether	10	ND	Dibenz(a,h)anthracene	20	ND
2,4-Dichlorophenol	10	ND	Fluorene	10	ND	Benzo(g,h,i)perylene	20	ND
1,2,4-Trichlorobenzene	10	ND	4-Nitroaniline	50	ND			
Naphthalene	10	ND	4,6-Dinitro-2-methylphenol	50	ND			
4-Chloroaniline	20	ND	N-nitrosodiphenylamine	20	ND			
Hexachlorobutadiene	10	ND	4-Bromophenyl-phenylether	10	ND			

SURROGATES	RECOVERY (%)
2-Fluorophenol	92
Phenol-d5	92
Nitrobenzene-d5	91
2-Fluorobiphenyl	82
2,4,6-Tribromophenol	80
p-Terphenyl-d14	81

Date Extracted: 11/ 13/ 1996
Date Injected: 11/ 20/ 1996
ND = None Detected
MQL = Minimum Quantifiable Level
Analyst: Jon Shell (JES)

Lower Detection Level = MQL X 1 = _____ µg/L

___ No peaks above 40% of internal standard.
___ Peaks above 40% of internal standard on EPA Appendx IX were identified.*
___ Peaks above 40% of internal standard not on EPA Appendix IX.**
5 Peaks above 40% of internal standard not on EPA Appendix IX were not identified.
___ Additional peaks were observed, but not examined.

COMMENTS: * Note(1): The concentration of Pentachlorophenol is reported as an "APPROXIMATE" value because that value slightly exceeds the highest point on the calibration curve (200 ug/l)
Note(2): This sample also contain TRACE levels (<MQL) of the compound Fluoranthene.

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Bench No. _____

I. GENERAL INFORMATION: Facility Name KOPPERS COMPLAINT STORMWATER
County Code GRENADA NPDES Permit No. _____
Discharge No. RE: 9/12/96 Date Requested 10/14/96
Sample Point Identification Site #8
Requested By SCOTT MILLS Data To SCOTT MILLS
Type of Sample: Grab (X) Composite (Flow) (Time) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition Sunny, Mild Collected By CLIFT JETER
Where Taken See MAP Dewitt Spurgeon

Type	Parameters	Preservative	Date	Time
1. GRAB	G. C. PHENOLS	Cool	11-8-96	12:15
2. GRAB	TPH	5ml H_2SO_4	11-8-96	12:15
3. GRAB	SEMI VOLITILES	Cool	11-8-96	1215
4. GRAB	Cu, Cr, As	5ml HNO_3	11-8-96	1215
5.				

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	7.5	CJ	11-8-96
D.O.	(000300)	( )			
Temperature	(000010)	( )			
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)			

IV. TRANSPORTATION OF SAMPLE: Bus ( ) RO Vehicle ( ) Other (X) SUNBELT COURIERS

V. LABORATORY: Received By Kathy Fassio Date 11-13-96 Time 0900
Recorded By _____ Date Sent to State Office _____

Analysis	Computer Code	Request	Result	Analyst	Date Measured
BOD_5	(000310)	( )	mg/l		*
COD	(000340)	( )	mg/l		
TOC	(000680)	( )	mg/l		
Suspended Solids	(099000)	( )	mg/l		
TKN	(000625)	( )	mg/l		
Ammonia-N	(000610)	( )	mg/l		
Fecal Coliform(1)	(074055)	( )	colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )	colonies/100 ml		*
Total Phosphorus	(000665)	( )	mg/l		
Oil and Grease(1)	(000550)	( )	mg/l		
Oil and Grease(2)	(000550)	( )	mg/l		
Chlorides	(099016)	( )	mg/l		
Phenol	(032730)	( )	mg/l		
Total Chromium	(001034)	( )	mg/l		
Hex. Chromium	(001032)	( )	mg/l		
Zinc	(001092)	( )	mg/l		
Copper	(001042)	( )	mg/l		
Lead	(017501)	( )	mg/l		
Cyanide	(000722)	( )	mg/l		
TPH		(X)	25.0 mg/l	KP	11-20-96
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			

Remarks _____

*Date of Test Initiation

5200 WATER

1304

EMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME

ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960

FACILITY KOPPERS INDUSTRIES, INC.

LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #1 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	1	1	TO	96	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page 1 - ~~first 30 minute sample~~ Grab for site #1

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.26	S.U.		1/yr	grab
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report				
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				33	mg/l		1/yr	grab
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report				
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				1.11	mg/l		1/yr	grab
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report				
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	grab
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report				
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	grab
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	97	01	22
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

11-6-96 thru 11-7-96 Approx 26 hrs, Total rainfall = 2.1", Total discharge = .1208 MGD

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME RONALD P. MURPHEY
ADDRESS P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MSR220005

(17-19) DISCHARGE NUMBER: #1

Form Approved
OMB No. 2040-0004

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	1	1	TO	96	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page 3 - ~~three hour composite~~ Composite for site #1

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				33				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	97	01	22
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

11-6-96 thru 11-7-96, Approx 26 hrs, Total Rainfall = 2.1" Total Discharge = .1208 MGD

Facility Name/Location if different)
NAME
ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MSR220005

(17-19) DISCHARGE NUMBER: #2

Form Approved
OMB No. 2040-0004

Page 1 - ~~first 30 minute sample~~ Grab for site #2 (pond)

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	1	1	TO	96	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				6.99				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				114				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				1.2				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	2264581	97	01	22
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

11-6-96 thru 11-7-96, Approx 26 hrs, Total rainfall = 2.1", Total discharge = .0958 MGD

Facility Name/Location if different)
NAME
ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MSR220005

(17-19) DISCHARGE NUMBER: #3

Form Approved
OMB No. 2040-0004

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	1	1	TO	96	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page 1 ~~- first 30 minute sample~~
Grab for site #3

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.54	S.U.			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report			1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				18	mg/l			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				1.44	mg/l			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.03	mg/l			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	2264584	97	01	22
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

11-6-96 thru 11-7-96 Approx 26 hrs, Total Rainfall = 2.1" Total discharge = .0219 MGD

Facility Name/Location if different)

NAME

ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960

FACILITY KOPPERS INDUSTRIES, INC.

LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #3 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

~~Page 3 - three hour composite~~
Composite For site #3

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	1	1	TO	96	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				30				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.02				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L Henderson

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	97	01	22
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

11-6-96 - 11-7-96 Approx 26 hrs, Total Rain Fall = 2.1", Total discharge = .0219 MGD

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

Facility Name/Location (if different)

NAME

ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960

FACILITY KOPPERS INDUSTRIES, INC.

LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #4 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	1	1	TO	96	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page 1 - ~~first 30 minute sample~~ Grab for site #4 (pond)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				8.61				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				83				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				1.56				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.085				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L Henderson

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 — NUMBER 226-4984

DATE: YEAR 97 — MO 01 — DAY 22

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

11-6-96 thru 11-7-96 Approx 26 hrs, Total Rainfall = 2.1", Total discharged .1832 MGL

Facility Name/Location if different)

NAME

ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960

FACILITY KOPPERS INDUSTRIES, INC.

LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #5 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	1	1	TO	96	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page 1 ~~first 30 minute sample~~ Grab for site #5 (Pond)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.74				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				114				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				2.21				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0.201				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	97	01	22
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

11-6-96 thru 11-7-96, Approx 26 hrs, Total Rainfall = 2.1", Total discharge = .1991 MGD

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

PAGE OF

Facility Name/Location (if different)

NAME

ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960

FACILITY KOPPERS INDUSTRIES, INC.

LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #6 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	1	1	TO	96	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page 1 - ~~first 30 minute sample~~ Grab for site# 6 (Pond)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				6.74	S.U.			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report			1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				30	mg/l			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				1.6	mg/l			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.03	mg/l			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L Henderson

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	97	01	22
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

11-6-96 thru 11-7-96 Approx 26 hrs total rainfall = 2.1" , Total discharge = .0722 MGD

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

ERMITTEE NAME/ADDRESS (Include cility Name/Location if different)

AME

DDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960

ACILITY KOPPERS INDUSTRIES, INC.

OCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #7 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	1	1	TO	96	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page 1 - ~~first 30 minute sample~~ Grab for site #7 (pond)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				8.07	S.U.			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report			1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				130	mg/l			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				2.1	mg/l			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.124	mg/l			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	2264584	97	01	22
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

11-6-96 thru 11-7-96 Approx 26 hrs, Total Rainfall = 2.1" Total discharge = .1003 MGD

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

FILE COPY

February 10, 1995

Mr. Ronald P. Murphey
Koppers Industries, Inc.
P. O. Box 160
Tie Plant, Mississippi 38960

Dear Mr. Murphey:

Re: 1995 Discharge Monitoring Report (DMR) Forms for Storm Water Sampling Results Under Wood Treater General Storm Water Permit Permit Coverage Number MSR220005

Mississippi's Wood Treater Storm Water General Permit requires that you sample your storm water runoff as outlined in Part IV.C. Enclosed are DMR forms which should be used to report sample results for both the grab and composite samples. A copy of the completed DMR forms must be returned to our office by January 28, 1996.

Only one outfall need be sampled if it is representative of all storm water outfalls. If more than one outfall will be sampled, please make copies of the enclosed forms for the additional outfall(s). The outfall sampled should be ident.fied on each DMR form.

We appreciate your attention to your storm water permit. Please let us know if you have any questions.

Sincerely,

Louis Lavallee, P.E., Chief
Industrial Storm Water Section

LL:ap
Enclosures

Facility Name/Location if different)
NAME
ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

Received JAN 1995 OPC

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MSR220005

(17-19) DISCHARGE NUMBER:

NPS

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
94	1	1	94	12	31

Page 1 - first 30 minute sample

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	(54-61) AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE | NUMBER

DATE: YEAR | MO | DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME
ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MSR220005
(17-19) DISCHARGE NUMBER:

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 2 - three hour composite

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	1	1	TO	94	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319 (*Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.*)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (*Reference all attachments here*)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

Facility Name/Location if different)

NAME ~~RONALD P. MURPHEY~~

ADDRESS ~~P O BOX 160~~
~~TIE PLANT, MS 38960~~
~~KOPPERS INDUSTRIES, INC.~~

FACILITY TIE PLANT, MS

LOCATION

DISCHARGE MONITORING REPORT (DMR)

(2-16) ~~MSR220005~~ PERMIT NUMBER

(17-19) DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 1 - first 30 minute sample

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C § 1001 AND 33 U.S.C § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE, NUMBER

DATE: YEAR, MO, DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

Facility (Name/Location if different)

NAME RONALD P. MURPHEY

ADDRESS P O BOX 160
TIE PLANT, MS 38960
KOPPERS INDUSTRIES, INC.

FACILITY TIE PLANT, MS

LOCATION

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) — DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 3 - three hour composite

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE, NUMBER

DATE: YEAR, MO, DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

Facility Name/Location if different)
NAME ~~RONALD P. MURPHEY~~
ADDRESS ~~P O BOX 160~~
~~TIE PLANT, MS 38960~~
~~KOPPERS INDUSTRIES, INC.~~
FACILITY TIE PLANT, MS
LOCATION

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #1 — DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 1 - ~~First 30 minute sample~~ Grab for Site #1

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.07				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.03				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: RONALD P. MURPHEY (TYPED OR PRINTED)

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Ronald P Murphey
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	96	1	18
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-17-95 thru 12-19-95 Approx. 48hrs, Total Rainfall = 1.7" Total ~~Rainfall~~ discharge = .0597 MGD

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME ~~RONALD P. MURPHEY~~

ADDRESS ~~P O BOX 160~~

~~TIE PLANT, MS 38960~~

~~KOPPERS INDUSTRIES, INC.~~

FACILITY TIE PLANT, MS

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #1 — DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 3 - ~~three hour composite~~ Composite for site #1

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				9				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.024				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Ronald P. Murphey
TYPED OR PRINTED

I CERTIFY UNDER 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 SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Ronald P. Murphey
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	96	1	18
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-17-95 thru 12-19-95 Approx. 48 hrs, Total Rainfall = 1.7" Total discharge = .0597 MGD

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED)

Facility Name/Location if different)
NAME ~~RONALD P. MURPHEY~~
ADDRESS ~~P O BOX 160~~
~~TIE PLANT, MS 38960~~
~~KOPPERS INDUSTRIES, INC.~~
FACILITY TIE PLANT, MS
LOCATION

DISCHARGE MONITORING REPORT (DMR)

(2-16) ~~MSR220005~~ PERMIT NUMBER

(17-19) #2 DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 1 - ~~first 30 minute sample~~ Grab for Site #2 (pond)

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				6.98				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				15				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.02				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Ronald P. Murphey
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Ronald P. Murphey
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	96	1	18
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-17-95 thru 12-19-95 Approx. 48 hrs Total Rainfall = 1.7" Total discharge = .0473 MGD

Facility Name/Location if different)
NAME ~~RONALD P. MURPHEY~~
ADDRESS ~~P O BOX 160~~
~~TIE PLANT, MS 38960~~
~~KOPPERS INDUSTRIES, INC.~~
FACILITY TIE PLANT, MS
LOCATION

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #3 — DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 1 - ~~first 30 minute sample~~ Grab for Site #3

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.1				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				6.0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.5				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.04				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: RONALD P. MURPHEY (TYPED OR PRINTED)

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Ronald P Murphey — SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601, NUMBER 226-4584

DATE: YEAR 96, MO 1, DAY 18

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-17-95 thru 12-18-95 Approx. 48hrs, Total Rainfall = 1.7" Total discharge = .0105 MGD

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME ~~RONALD P. MURPHEY~~

ADDRESS ~~P O BOX 160~~

~~TIE PLANT, MS 38960~~

~~KOPPERS INDUSTRIES, INC.~~

FACILITY ~~TIE PLANT, MS~~

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) ~~MSR220005~~ — PERMIT NUMBER

(17-19) #3 — DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 3 - ~~three hour composite~~ Composite for Site #3

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				1.0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.023				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Ronald P. Murphey

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE, 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Ronald P Murphey

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	96	1	18
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-17-95 thru 12-19-95, Approx. 48hrs, Total Rainfall = 1.7" Total discharge = .0105 MGD

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME ~~RONALD P. MURPHEY~~

ADDRESS ~~P O BOX 160~~

~~TIE PLANT, MS 38960~~

~~KOPPERS INDUSTRIES, INC.~~

FACILITY TIE PLANT, MS

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) ~~MSR220005~~ — PERMIT NUMBER

(17-19) #4 — DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 1 - ~~first 30 minute sample~~ Grab for site #4 (pond)

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				8.88				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				37				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.9				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.03				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.13				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: RONALD P. Murphey — TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Ronald P Murphey — SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 — NUMBER 226-4584

DATE: YEAR 96 — MO 1 — DAY 18

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-17-95 thru 12-19-95, Approx. 48 hrs, 1.7" Rain fall Total discharge = .0906 MGD

Facility Name/Location if different)
NAME ~~RONALD P. MURPHEY~~
ADDRESS ~~P O BOX 160~~
~~TIE PLANT, MS 38960~~
~~KOPPERS INDUSTRIES, INC.~~
FACILITY TIE PLANT, MS
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) ~~MSR220005~~ PERMIT NUMBER

(17-19) 5 DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 1 - ~~first 30 minute sample~~
Grab for Site #5 (pond)

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.78				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				70				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				1.4				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.056				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.21				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Ronald P. Murphey
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Ronald P Murphey
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	96	1	18
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-17-95 thru 12-19-95. Approx. 48hrs Total Rainfall = 1.7" Total discharge = .0985 MGD

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME ~~RONALD P. MURPHEY~~

ADDRESS ~~P O BOX 160~~

~~TIE PLANT, MS 38960~~

~~KOPPERS INDUSTRIES, INC.~~

FACILITY TIE PLANT, MS

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) ~~MSR220005~~ PERMIT NUMBER

(17-19) #6 DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 1 - ~~first 30 minute sample~~ Grab for Site #6

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-61)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				6.43				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				82				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				3.4				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.05				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.84				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Ronald P. Murphey

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Ronald P Murphey

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	96	1	18
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-17-95 thru 12-19-95 Approx. 48 hrs, Total Rainfall = 1.7" Total discharge = .03522 MGD

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED)

Facility Name/Location if different)
NAME ~~RONALD P. MURPHEY~~
ADDRESS ~~P O BOX 160~~
~~TIE PLANT, MS 38960~~
~~KOPPERS INDUSTRIES, INC.~~
FACILITY TIE PLANT, MS
LOCATION

DISCHARGE MONITORING REPORT (DMR)

(2-16) ~~MSR220005~~ PERMIT NUMBER

(17-19) Site #7 DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 1 - ~~first 30 minute sample~~
Grab for site #7 (pond)

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				6.35				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				47				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				1.6				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.29				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Ronald P. Murphey
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Ronald P Murphey
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 226-4584

DATE: YEAR 96 (~~95~~) MO 1 (~~12~~) DAY 18 (~~31~~)

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-17-95 thru 12-19-95 Approx. 48hrs, 1.7" Rainfall total discharge = .0496 MGD

KOPPERS INDUSTRIES

Koppers Industries, Inc.
P.O. Box 160
Tie Plant, MS 38960

Telephone: (601) 226-4584
FAX: (601) 226-4588

RECEIVED
JAN 30 1995
Dept of Environmental Quality
Office of Pollution Control

January 25, 1995

Mr. Louis Lavallee, P.E. Chief
Industrial Storm Water Section
Office of Pollution Control
P.O. Box 10385
Jackson,MS 39289

Dear Mr. Lavallee:

Enclosed is a copy of the 1994 Discharge Monitoring Report (DMR) Forms for Storm Water Sampling Results Under Wood Treater General Storm Water Permit (Coverage Number MSR220005). Construction of are Storm Water Management Plan is not complete. Thus we were unable to sample in 1994. Construction should be completed by spring of 1995. Please contact myself or Ron Murphey Plant Manager, if you have any questions.

Sincerely,

Michael B. Sylvester
Environmental Supervisor

cc:Plant file

Facility Name/Location if different)
NAME ~~RONALD P. MURPHEY~~
ADDRESS ~~P O BOX 160~~
~~TIE PLANT, MS 38960~~
~~KOPPERS INDUSTRIES, INC.~~
FACILITY ~~TIE PLANT, MS~~
LOCATION

DISCHARGE MONITORING REPORT (DMR)

(2-16) ~~MSR220005~~ PERMIT NUMBER

(17-19) #1 DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 1 - ~~first 30 minute sample~~ Grab for Site #1

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.07				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.03				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Ronald P. Murphey
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Ronald P Murphey
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	96	1	18
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

2-17-95 thru 12-19-95 Approx. 48hrs, Total Rainfall = 1.7" Total ~~Runoff~~ discharge = .0597 MGD

EPA Form 3320-1 (Rev. 9-88) *Previous editions may be used.* (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

NAME AND ADDRESS (Include Facility Name/Location if different)

NAME: RONALD P. MURPHEY
ADDRESS: P O BOX 160
TIE PLANT, MS 38960
KOPPERS INDUSTRIES, INC.
FACILITY: TIE PLANT, MS
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #1 — DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 3 - ~~three hour composite~~ Composite for site #1

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				9				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.024				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

RONALD P. MURPHEY
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Ronald P. Murphey
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	2264584	96	1	18
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-17-95 thru 12-19-95 Approx. 48 hrs, Total Rainfall = 1.7" Total discharge = .0597 MGD

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 1 - ~~first 30 minute sample~~ Grab for Site #2 (pond)

NOTE: Read instructions before completing this form.

Facility Name/Location if different)
NAME ~~RONALD P. MURPHEY~~
ADDRESS ~~P O BOX 160~~
~~TIE PLANT, MS 38960~~
~~KOPPERS INDUSTRIES, INC.~~
FACILITY ~~TIE PLANT, MS~~
LOCATION

(2-16) PERMIT NUMBER: MSR220005

(17-19) DISCHARGE NUMBER: #2

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				6.98				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				15				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.02				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Ronald P. Murphey
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Ronald P. Murphey
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	96	1	18
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)
12-17-95 thru 12-19-95 Approx. 48 hrs Total Rainfall = 1.7" Total discharge = .0473 MGD

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 1 - ~~first 30 minute sample~~ Grab for Site #3

NOTE: Read instructions before completing this form.

Facility Name/Location if different)
NAME ~~RONALD P. MURPHEY~~
ADDRESS ~~P O BOX 160~~
~~TIE PLANT, MS 38960~~
~~KOPPERS INDUSTRIES, INC.~~
FACILITY ~~TIE PLANT, MS~~
LOCATION

(2-16) ~~MSR220005~~ PERMIT NUMBER

(17-19) #3 DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.1				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				6.0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.5				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.04				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Ronald P. Murphey
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Ronald P Murphey
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	96	1	18
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-17-95 thru 12-18-95 Approx. 48hrs, Total Rainfall = 1.7" Total discharge = .0105 MGD

EPA Form 3320-1 (Rev. 9-88) *Previous editions may be used.* (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

ERMITTEE NAME/ADDRESS (Include
acility Name/Location if different)
AME ~~RONALD P. MURPHEY~~
DDRESS ~~P O BOX 160~~
~~TIE PLANT, MS 38960~~
~~KOPPERS INDUSTRIES, INC.~~
ACILITY TIE PLANT, MS
OCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
MSR220005	#3

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 3 - ~~three hour composite~~
Composite for Site #3

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				1.0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.023				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Ronald P. Murphey
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Ronald P Murphey
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	96	1	18
AREA CODE	NUMBER	YEAR	MO	DAY

OMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
eport storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-17-95 thru 12-19-95, Approx. 48hrs, Total Rainfall = 1.7" Total discharge = .0105 MGD

cility Name/Location if different)
AME ~~RONALD P. MURPHEY~~
DDRESS ~~P O BOX 160~~
~~TIE PLANT, MS 38960~~
~~KOPPERS INDUSTRIES, INC.~~
ACILITY TIE PLANT, MS
OCATION

DISCHARGE MONITORING REPORT (DMR)

(2-16) ~~MSR220005~~ PERMIT NUMBER

(17-19) #4 DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 1 - ~~first 30 minute sample~~
Grab for site #4 (pond)

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				8.88				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				37				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.9				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.03				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.13				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

RONALD P. Murphey
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Ronald P Murphey
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	96	1	18
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)
12-17-95 thru 12-19-95, Approx. 48 hrs, 1.7" Rain fall Total discharge = .0906 MGD

ERMITTEE NAME/ADDRESS (Include
acility Name/Location if different)
AME RONALD P. MURPHEY
DDRESS P O BOX 160
TIE PLANT, MS 38960
KOPPERS INDUSTRIES, INC.
ACILITY TIE PLANT, MS
OCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) 5 — DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 1 - ~~first 30 minute sample~~
Grab for Site #5 (pond)

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.78				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				70				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				1.4				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.056				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.21				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

RONALD P. MURPHEY
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE, 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Ronald P Murphey
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	96	1	18
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-17-95 thru 12-19-95. Approx. 48 hrs Total Rainfall = 1.7" Total discharge = .0985 MGD

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME ~~RONALD P. MURPHEY~~

ADDRESS ~~P O BOX 160~~

~~TIE PLANT, MS 38960~~

~~KOPPERS INDUSTRIES, INC.~~

FACILITY TIE PLANT, MS

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) ~~MSR220005~~ PERMIT NUMBER

(17-19) #6 DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 1 - ~~first 30 minute sample~~ Grab for Site #6

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				6.43				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				82				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				3.4				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.05				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.84				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Ronald P. Murphey

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years)

Ronald P Murphey

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	96	1	18
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-17-95 thru 12-19-95 Approx. 48 hrs, Total Rainfall = 1.7" Total discharge = .03572 MGD

ERMITTEE NAME/ADDRESS (Include cility Name/Location if different)
AME RONALD P. MURPHEY
DDRESS P O BOX 160
TIE PLANT, MS 38960
KOPPERS INDUSTRIES, INC.
ACILITY TIE PLANT, MS
OCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) Site #7 — DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 1 - ~~First 30 minute sample~~ Grab for site #7 (pond)

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	1	1	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				6.35				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				47				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				1.6				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.29				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

RONALD P. MURPHEY
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Ronald P Murphey
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	96	1	18
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-17-95 thru 12-19-95 Approx. 48hrs, 1.7" Rainfall total discharge = .0496 MGD

Koppers Industries
Grenada County
File No. MSR 220005
NPDES

Koppers Industries, Inc.
P.O. Box 160
Tie Plant, MS 38960

Telephone: (601) 226-4584
FAX: (601) 226-4588

December 19, 2000

CERTIFIED MAIL

FILE COPY

RECEIVED
DEC 21 2000
Dept. of Environmental Quality
Office of Pollution Control

Melissa Collier
MS Dept. of Environmental Quality
P. O. Box 10385
Jackson, MS 39289-0385

Dear Ms. Collier,

On the morning of December 19, 2000, we received notification from Argus Analytical indicating that the pentachlorophenol concentration for a sample collected from our wastewater treatment facility on December 13, 2000 was at 4.24 mg/L. Our daily maximum concentration is .36 mg/L.

After notification from Argus Analytical, the wastewater facility was shut down and the city discharge valve was closed. The city wastewater treatment plant was notified. Another sample was immediately taken and sent overnight to Argus Analytical for analysis.

Melissa Collier was notified by voice mail around 3:30 p.m. on December 19, 2000.

We are attempting to re-circulate the wastewater through our system. We are not sure where the initial problem has occurred. We are taking quick and thorough measures to find the problem and prevent its re-occurrence. We will continue to re-circulate the wastewater until acceptable levels are attained.

If you have any questions, please call me at 662-226-4584 ext. 40.

Sincerely,

Anthony A. Mayhan

Anthony A. Mayhan
SH&E Supervisor

Permit No. MSR 220005 NPDES

Part VII.

Inspection Report and Certification Form
For Storm Water Pollution Prevention Plan Evaluation

FILE COPY

RECEIVED DEC 12 2000 DEQ-EPD

Wood Treater Storm Water General NPDES Permit No. MSR220005

(Please Print)

Owner and/or Operator: Koppers Industries, Inc.

Facility Name: same

Facility Location: 1 Koppers Drive P.O. Box 160 Tie Plant, MS 38960

Date and Time: 11-6-00 11:00 am

Inspector(s): Anthony A. Mayhan

Date of Last Rainfall: 11-12-00 Estimated Amount: 0.6 in.

Deficiencies Noted During the Inspection (attach additional sheets if necessary):

NONE

Corrective Action Needed (attach additional sheets if necessary):

NONE

Corrective Action Compliance Schedule:

Based upon this inspection which I or personnel under my direct supervision conducted, I certify that all pollution control measures are adequate and have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan filed with the Office of Pollution Control and good engineering practices as required by the above referenced permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons 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 fines and imprisonment for knowing violations.

I further certify that the Mississippi Office of Pollution Control has been notified of any changes pertinent to our storm water permit as required in Part II.C.

Thomas L. Henderson	Thomas L. Henderson	12-5-00
Authorized Name (Print)	Signature	Date

These reports shall be submitted annually, as required in the permit, to:

Chief, Industrial Branch
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385

Stormwater Grenada County
MSR 220005

KOPPERS INDUSTRIES

Koppers Industries, Inc.
P.O. Box 160
Tie Plant, MS 38960

Telephone: (601) 226-4584
FAX: (601) 226-4588

December 5, 2000

RECEIVED
DEC - 7 2000
Dept. of Environmental Quality
Office of Pollution Control

CERTIFIED MAIL

Environmental Compliance Division
Office of Pollution Control
P. O. Box 10385
Jackson, MS 39289-0385

Subject: **2000 Storm Water Sampling Results**
Koppers Industries, Inc. - Permit # MSR220005

Dear Madam or sir:

This will serve as an explanation for the monitoring exemptions exercised at the Koppers Industries, Inc., wood treating facility in Grenada, MS, in accordance with Section IV.C.4 of the State of Mississippi Water Pollution Control Wood Treater General Permit No. MSR220005. Originally, monitoring was done at nine sampling points on the property. Currently, only three of these sites are monitored.

Attached is a table containing analytical results for samples collected at all monitoring points at the site since sampling has been required. In accordance with the applicable section of the permit described above sampling point numbers 1 and 4 were eliminated for all parameters since monitored concentrations were below indicated levels in the permit (within the range for pH) for two consecutive annual samplings.

Sample location numbers 5, 6, and 7 will continue to be monitored for pentachlorophenol and total suspended solids. In addition, sample location number 5 will be monitored for oil and grease. Other constituents for samples collected at locations 5, 6, and 7 will not be analyzed for, including oil and grease at two locations, total phenols, and pH. These constituents will not be analyzed for since monitoring concentrations were below indicated levels in the permit (within the range for pH) for two consecutive annual samplings.

Sampling location numbers 8 and 9 were not sampled because discharge at these locations is substantially identical to effluent at sampling location number 2. Quantitative data applicable to sample location number 2 is also identical.

Significant remediation at the site has occurred adjacent to and along the drainage swale that transects the site trending from southwest to northwest. Remedial activities changed

the general configuration of the drainage swale and associated monitoring points under the permit. As part of the remediation project a capped land storage facility was constructed adjacent to the drainage swale that contains contaminated sediments and soil removed during remediation efforts.

If you have any questions or concerns with this matter or sampling event, please call me at
662-226-4584 ext. 11.

Sincerely,

Thomas L. Henderson

Thomas L. Henderson
Plant Manager

Cc: Tim Basilone/K-1800

FORM 3
KOPPERS INDUSTRIES, INC.

STORM WATER RUNOFF WORKSHEET

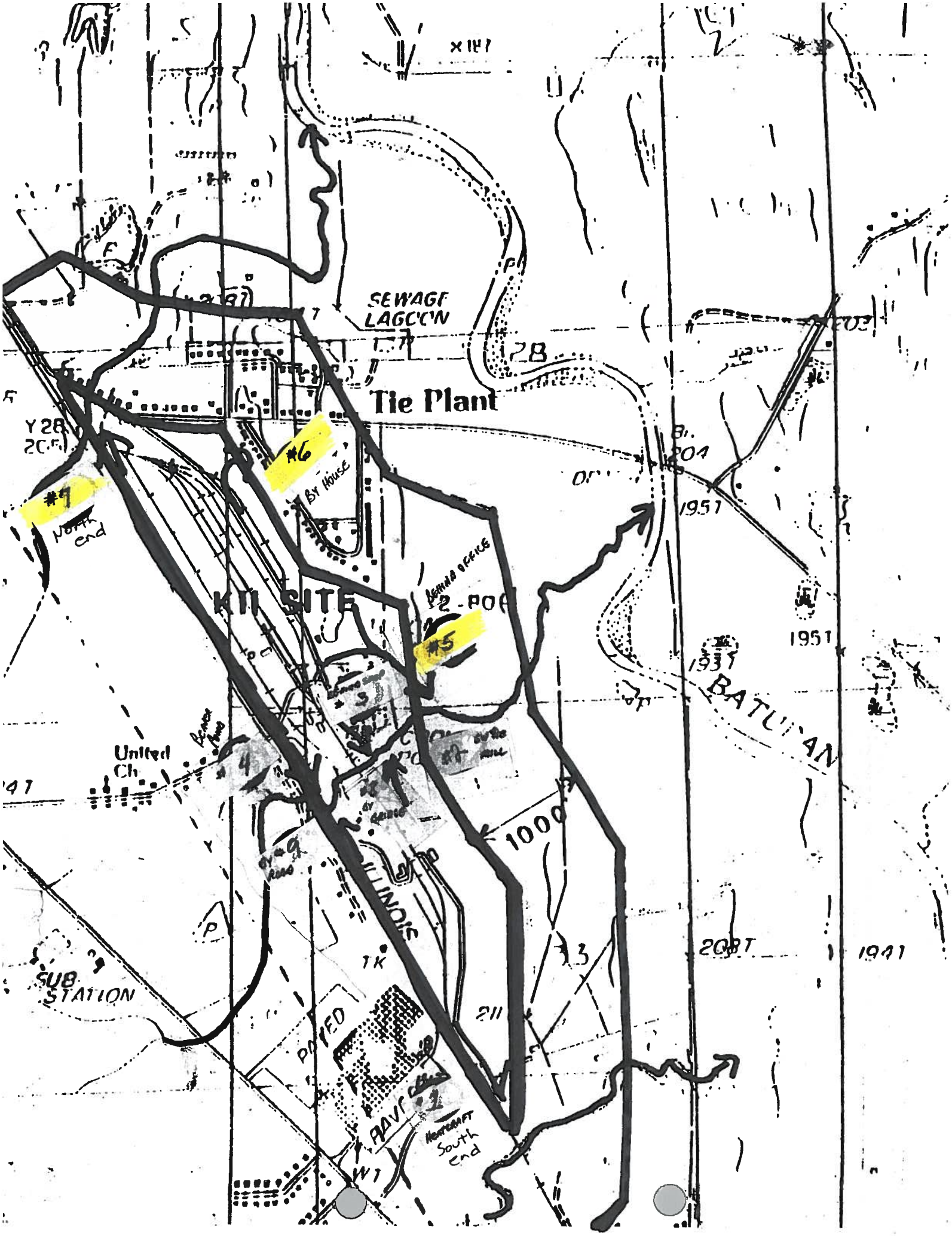
PLANT NAME: Koppers Industries
CITY: Grenada (Tie Plant) STATE: MS

STORM DATA

Beginning of storm: Date: 11 / 16 / 00 Time: 5 : 30 am
End of storm: Date: 11 / 16 / 00 Time: 10 : 40 am
Amount of rainfall measured: 1.4 inches Repeatedly throughout day
(Must be greater than 0.1 inch)
Source of rain data: Plant records or other: Plastic Rain Gauge
Date of last rainfall greater than 0.1 inch or estimated time since last rainfall
Date: 11 / 12 / 00 or amount of time: ____ days
(Must be at least 72 hours (3 days) since last storm to current storm)

RUNOFF DATA Time began: 7:15 am
Runoff amount: 0.06 inches
Runoff factor: 0.00166 MGD/acre
(From Storm Water Runoff Estimation Table)

OUTFALL		RUNOFF AREA (acres)		RUNOFF FACTOR (MGD/ac)		STORM RUNOFF (MGD)
No.	Name					
001			X		=	
002			X		=	
003			X		=	
004			X		=	
005	Behind main office	26.2	X	0.00166	=	0.0435
006	Behind neighborhood	9.5	X	0.00166	=	0.0158
007	North end plant	13.2	X	0.00166	=	0.0219



SEWAGE LAGOON
Tie Plant
#6
By House
#7
North end
KII SITE
#5
BATUDAN
United Ch
1000
SUB STATION
PAVED
South end

2000

Stormwater Results
1995-1999

PENTACHLOROPHENOL							
OUTFALL			YEAR				
			COMPOSITE/GRAB (PPM)				
	1999	1998	1997	1996	1995	Permit Limit	Status
1	0/0	0/0	0/0	0/0	0.024/0	0.02	exempt
2	0/0	0/0	NA/0	NA/0	NA/0	0.02	exempt
3	NA	0/0	0/0	0.02/0.03	0.023/0	0.02	exempt
4	0/0	0/0	NA/0	NA/0	NA/0.13	0.02	exempt
5	0/0	0.485/0.749	NA/0	NA/.201	NA/0.21	0.02	sample
6	0/0	.705/0.887	NA/0	NA/0.03	NA/0.84	0.02	sample
7	0.186/0.256	0.395/0.228	NA/0	NA/0.124	NA/0.29	0.02	sample
8	NA	NA	NA	NA	NA	0.02	exempt
9	NA	NA	NA	NA	NA	0.02	exempt

TSS							
OUTFALL			YEAR				
			COMPOSITE/GRAB (PPM)				
	1999	1998	1997	1996	1995	Permit Limit	Status
1	21/38	18/12	22/78	33/33	9\7	50.00	exempt
2	8\39	13/7	NA/43	NA/114	NA/15	50.00	exempt
3	NA	13/6	0/18	30/18	1\1	50.00	exempt
4	27/39	27/47	NA/44	NA/83	NA/37	50.00	exempt
5	85.3/95	50/17	NA/212	NA/114	NA/70	50.00	sample
6	235/172	19/12	NA/27	NA/30	NA/82	50.00	sample
7	194/184	3\2	NA/44	NA/130	NA/47	50.00	sample
8	NA	NA	NA	NA	NA	50.00	exempt
9	NA	NA	NA	NA	NA	50.00	exempt

Acidity/pH							
OUTFALL			YEAR				
			GRAB (PPM)				
	1999	1998	1997	1996	1995	Permit Limit	Status
1	6.22	7.22	7.29	7.26	7.07	6.0-8.5 S.U.	exempt
2	6.76	7.25	7.16	6.99	6.98	6.0-8.5 S.U.	exempt
3	NA	7.52	7.53	7.54	7.1	6.0-8.5 S.U.	exempt
4	8.14	7.37	8.5	8.61	8.88	6.0-8.5 S.U.	exempt
5	7.72	7.79	7.54	7.74	7.78	6.0-8.5 S.U.	exempt
6	7.31	6.59	6.89	6.74	6.43	6.0-8.5 S.U.	exempt
7	7.26	6.87	7.65	8.07	6.35	6.0-8.5 S.U.	exempt
8	NA	NA	NA	NA	NA	6.0-8.5 S.U.	exempt
9	NA	NA	NA	NA	NA	6.0-8.5 S.U.	exempt

Phenols							
OUTFALL			YEAR				
			GRAB (PPM)				
	1999	1998	1997	1996	1995	Permit Limit	Status
1	0	0	0	0	0.03	0.10	exempt
2	0	0	0.088	0	0.02	0.10	exempt
3	NA	0	0.054	0	0.04	0.10	exempt
4	0	0.086	0.054	0.085	0.03	0.10	exempt
5	0	0.053	0.176	0	0.056	0.10	exempt
6	0	0	0.062	0	0.05	0.10	exempt
7	0	0	0	0	0	0.10	exempt
8	NA	NA	NA	NA	NA	0.10	exempt
9	NA	NA	NA	NA	NA	0.10	exempt

O & G							
OUTFALL			YEAR				
			GRAB (PPM)				
	1999	1998	1997	1996	1995	Permit Limit	Status
1	0	0	1.6	1.11	0	5.00	exempt
2	0	1.6	1	1.2	0	5.00	exempt
3	NA	1.6	3.4	1.44	0.5	5.00	exempt
4	0	3	5.1	1.56	0.9	5.00	~~sample~~ exempt
5	0	5.6	4.3	2.21	1.4	5.00	sample
6	0	3.2	4.5	1.6	3.4	5.00	exempt
7	0	1.5	2.5	2.1	1.6	5.00	exempt
8	NA	NA	NA	NA	NA	5.00	exempt
9	NA	NA	NA	NA	NA	5.00	exempt

KOPPERS INDUSTRIES

Koppers Industries, Inc.
P.O. Box 160
Tie Plant, MS 38960

Telephone: (601) 226-4584
FAX: (601) 226-4588

January 24, 2000

CERTIFIED MAIL: Z 490 517 017

RECEIVED
JAN 27 2000
Office of Environmental Quality
Office of Pollution Control

Jim Morris
Environmental Compliance Division
Office of Pollution Control
P. O. Box 10385
Jackson, MS 39289-0385

Subject: **1999 Storm Water Sampling Results**
Koppers Industries, Inc, - Grenada Plant

Dear Mr. Morris,

Permit #: MSR220005

Attached are the Discharge Monitoring Reports for the 1999 Storm Water Sampling. Outfalls (8) and (9) are represented by outfall number (2).

Outfall (3) ran through a containment area built by Sevenson (Beazer East). Sevenson moved the outfall to go around the area. Sevenson is cleaning out a central ditch on the property, so they were catching the water runoff and sending the water through their wastewater treatment system. The MSDEQ was notified, and the notification letter is enclosed.

Total phenols were not sampled as a composite for any outfalls. This parameter was not stated in our permit, and we have been under the phenol regulatory exemption for two consecutive years (Part IV, C, 4).

If you have any questions regarding this report or would like to discuss it in further detail, please contact me at (662) 226-4584 ext. 11.

Sincerely,

Thomas L. Henderson

Thomas L. Henderson
Plant Manager

Cc: Tim Basilone

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
[illegible]	001 A

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	00	01	01	TO	00	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

RECEIVED
DEC - 7 2000
Dept. of Environmental Quality
Office of Pollution Control

MINOR
(SUBK
F - FI
STORMWATER GRAB SAMPLING
JMM

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00500 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
0[illegible] 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RO	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00500 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

No Sample

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Thomas L. Henderson / Plant Manager	I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Thomas L. Henderson	662	226-4584	00	12	04
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES); AND TOTAL DISCHARGE (GALLONS).

See attached letter, worksheet, + table

EPA Form 3320-1 (08-95) Previous editions may not be used. **(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)**

00013/000112-1606

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
[illegible]	011

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	00	01	01	TO	00	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	******	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	******	******	******	REPORT ANNL MAX	UG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
65030 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	******	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Thomas L. Henderson / Plant Manager	I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Thomas L. Henderson	662	226-4584	00	12	04
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

See attached letter & table

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 150
TIE PLANT MS 38960

FACILITY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

(2-16)	(17-19)
[illegible]	[illegible]
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	00	01	01	TO	00	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MINOR
(SUBR NO)
F - FINAL JMM
STORMWATER GRAB SAMPLING
*** NO DISCHARGE ***

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(17)			
0[illegible]0 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
45500 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Thomas L. Henderson / Plant Manager	I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Thomas L. Henderson	662	226-4584	00	12	04
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORMS DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES); TOTAL DISCHARGE (GALLONS).

See attached letter + table

EPA Form 3320-1 (08-95) Previous editions may not be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

00015/000112-1005

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PETACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	UG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46030 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	UG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Thomas L. Henderson / Plant Manager	I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Thomas L. Henderson	662	226-4584	00	12	04
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

See attached letter + table

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME [illegible]
ADDRESS [illegible]
[illegible] PLANT [illegible]

FACILITY
LOCATION [illegible] PLANT [illegible]
ATTN: THOMAS L. HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*
(2-16) *(17-19)*

PERMIT NUMBER	DISCHARGE NUMBER
[illegible]	[illegible]

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MIDCK
(SUM NO)
F - FINAL
GT WATER GRAB SAMPLING
JAM

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
[illegible]	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTRACTION METHOD, PO	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	UG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46030 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	UG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Thomas L. Henderson Plant Manager	I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Thomas L. Henderson	662	226-4584	00	12	04
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
REPORT STORM DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)
See attached letter + table

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME [illegible]
ADDRESS [illegible]

FACILITY
LOCATION [illegible]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
[illegible]	[illegible]

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	[illegible]	01	01	TO	[illegible]	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

[illegible] (SUBM [illegible])
[illegible] FINAL JRM
STORMWATER COMPOSITE SAMPLING
[illegible]

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
[illegible] 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	***** *****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
[illegible] 2 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	***** *****	******	******	REPORT ANNL MAX	UG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
[illegible] 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	***** *****	******	******	REPORT ANNL MAX	UG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Thomas L. Henderson / Plant Manager	I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Thomas L. Henderson	662	226-4584	00	12	04
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

See attached letter + table

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 100
TYE PLANT MS 38660

FACILITY
LOCATION TYE PLANT MS 38660
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
MS 0022 005	004 A

MINOR
(SUBCATEGORY)
F - FINAL
STORMWATER GRAB SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	00	11	01	TO	00	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTN.-IR METHOD)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	UG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
65030 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	UG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Thomas L. Henderson / Plant Manager	I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Thomas L Henderson	662	226-4584	00	12	04
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).
See attached letter + table

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME [illegible]
ADDRESS [illegible]
[illegible] PLANT [illegible]

FACILITY
LOCATION [illegible] PLANT [illegible]
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

(2-16)	(17-19)
[illegible]	004
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	00	01	01	TO	00	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MTHOR
(SUBM NO)
F - FINAL JMH
STORMWATER COMPOSITE SAMPLING

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
3[illegible]62 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Thomas L. Henderson / Plant Manager	I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Thomas L. Henderson	662	226-4584	00	12	04
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

See attached letter + table

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 180
TIE PLANT MS 38960

FACILITY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

(2-16)	(17-19)
[illegible]	005 9
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	00	01	01	TO	00	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [__] ***

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	510	(19)	0	Annual	C
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 3[illegible]62 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.124	(19)	0	Annual	C
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	N/A	(19)	0	Annual	C
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Thomas L. Henderson / Plant Manager	I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Thomas L Henderson	662	226-4584	00	12	04
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

See attached letter, worksheet, and table

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME [illegible] INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

(2-16)	(17-19)
[illegible]	[illegible]
PERMIT NUMBER	DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MINOR
(SOUR NO)
F - FINAL
STORMWATER GRAB SAMPLING
JMM

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	00	01	01	TO	00	12	01
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH	SAMPLE MEASUREMENT	******	******		NA	******	NA	(12)	0	Annual	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	208	(19)	0	Annual	G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC	SAMPLE MEASUREMENT	******	******		******	******	0	(19)	0	Annual	G
00550 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.024	(19)	0	Annual	G
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)	0	Annual	G
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Thomas L. Henderson / Plant Manager	I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Thomas L. Henderson	662	226-4584	00	12	04
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

See attached letter, worksheet, + table

EPA Form 3320-1 (08-95) Previous editions may not be used. **(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)**

00021/000112-1006

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME [illegible]
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

(2-16)	(17-19)
[illegible]	[illegible]
PERMIT NUMBER	DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MINOR
(SUBM NO)
F - FINAL JMM
STORMWATER GRAB SAMPLING

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	00	01	01	TO	00	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH	SAMPLE MEASUREMENT	******	******		NA	******	NA	(12)	0	Annual	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	18	(19)	0	Annual	G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RO	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)	0	Annual	G
00550 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	1.940	(19)	0	Annual	G
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)	0	Annual	G
40000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Thomas L. Henderson / Plant Manager	I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Thomas L Henderson	662	226-4584	00	12	04
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

See attached letter, worksheet, + table

EPA Form 3320-1 (08-95) Previous editions may not be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

00023/000112-1006

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME [illegible]
ADDRESS [illegible]
TIE PLANT [illegible]

FACILITY
LOCATION TIE PLANT [illegible]
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
[illegible]	[illegible]

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	00	01	01	TO	00	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MI [illegible]
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING
*** NO DISCHARGE | | ***

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	30	(19)	0	Annual	C
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	1.47	(19)	0	Annual	C
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	UG/L		ANNUAL	COMPOS
PHENOLS 46300 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)	0	Annual	C
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	UG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Thomas L. Henderson / Plant Manager	I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Thomas L Henderson	662	226-4584	00	12	04
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

See attached letter, worksheet, + table

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P.O. BOX 160
TIE PLANT MS 38960

FACILITY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

(2-16)	(17-19)
MS0220005	007 A
PERMIT NUMBER	DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MINOR
(SUBR NO)
F - FINAL JMM
STORMWATER GRAB SAMPLING
*** NO DISCHARGE ***

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	00	01	01	TO	00	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH	SAMPLE MEASUREMENT	******	******			******	NA	(12)	0	Annual	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	294	(19)	0	Annual	G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)	0	Annual	G
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.238	(19)	0	Annual	G
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)	0	Annual	G
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Thomas L. Henderson / Plant Manager	I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Thomas L. Henderson	662	226-4584	00	12	04
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).
See attached letter, worksheet, + table

EPA Form 3320-1 (08-95) Previous editions may not be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

00025/000112-1006

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P.O. BOX 150
TIE PLANT MS 38960

FACILITY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
MS0020065	001

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	00	01	01	TO	00	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MAJOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

*** NO DISCHARGE |__| ***

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	540	(19)	0	Annual	C
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.586	(19)	0	Annual	C
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	UG/L		ANNUAL	COMPOS
PHENOLS 48000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)	0	Annual	C
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	UG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Thomas L. Henderson / Plant Manager	I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Thomas L Henderson	662	226-4584	00	12	04
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

See attached letter, worksheet, + table

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PB	SAMPLE MEASUREMENT	******	******			******		(12)			
00620 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	UG/L		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTRACTION METHOD) TOT, RU	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(19)			
32730 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE		
Thomas L. Henderson / Plant Manager	I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Thomas L. Henderson	662	226-4584	00	12	04
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)

See attached letter + table

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

(2-16)	(17-19)
[illegible]	[illegible]
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	00	01	01	TO	00	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MINOR
([illegible])
F - FINAL
STORMWATER COMPOSITE SAMPLING
*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	[illegible]/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 0[illegible]82 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	[illegible]/L		ANNUAL	COMPOS
PHENOLS 4[illegible] 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	[illegible]/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Thomas L. Henderson / Plant Manager	I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Thomas L. Henderson	662	226-4584	00	12	04
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

See attached letter + table

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME [illegible]
ADDRESS [illegible]
FACILITY
LOCATION [illegible]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
[illegible]	[illegible]

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	00	11	01	TO	00	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
[illegible] EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED [illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FROM EXTR.-IR METHOD) [illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL 39032 1 [illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	UG/L		ANNUAL	GRAB
PHENOLS 65030 1 [illegible] EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	*****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE		
Thomas L. Henderson / Plant Manager	I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Thomas L. Henderson	662	226-4584	00	12	04
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).
See attached letter & table

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME
ADDRESS
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******		(LB)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	***** *****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******		(LB)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	***** *****	******	******	REPORT ANNL MAX	UG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******		(LB)			
34000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	***** *****	******	******	REPORT ANNL MAX	UG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO SAMPLE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Thomas L. Henderson / Plant Manager	I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Thomas L. Henderson	662	226-4584	00	12	04
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

See attached letter + table

Part VII.

Inspection Report and Certification Form For Storm Water Pollution Prevention Plan Evaluation

Wood Treater Storm Water General NPDES Permit No. MSR220005

(Please Print)

Owner and/or Operator: Koppers Industries, Inc.

Facility Name: SAME

Facility Location: 1 Koppers Dr., P.O. Box 160 Tie Plant, MS 3896

Date and Time: 12-3-99

Inspector(s): Anthony Mayhan

Date of Last Rainfall: 11-26-99 Estimated Amount: 0.25

Deficiencies Noted During the Inspection (attach additional sheets if necessary):

NONE

Corrective Action Needed (attach additional sheets if necessary):

NONE

Corrective Action Compliance Schedule:

Based upon this inspection which I or personnel under my direct supervision conducted, I certify that all pollution control measures are adequate and have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan filed with the Office of Pollution Control and good engineering practices as required by the above referenced permit.

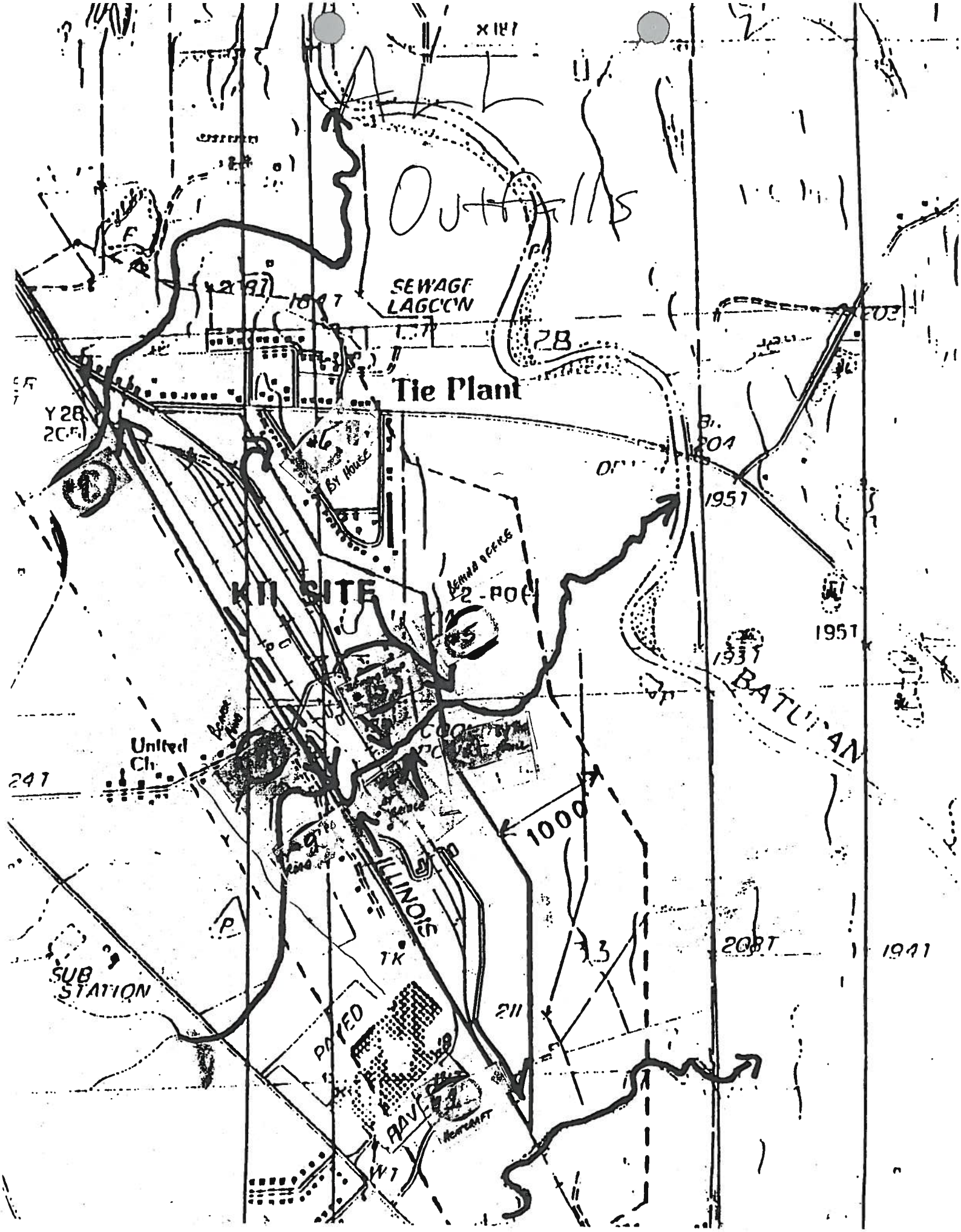
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons responsible 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 fines and imprisonment for knowing violations.

I further certify that the Mississippi Office of Pollution Control has been notified of any changes pertinent to our storm water permit as required in Part II.C.

Thomas L. Henderson	Thomas L. Henderson	1-7-00
Authorized Name (Print)	Signature	Date

These reports shall be submitted annually, as required in the permit, to:

Chief, Industrial Branch
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385



ALL
Outfalls
SEWAGE LAGOON
Tie Plant
KII SITE
BY HOUSE
BEHIND OFFICE
2-POC
United Ch
ILLINOIS
PAVED
SUB STATION
BATUPAN
1000
1951
1941
208T
211
TK

Facility Data Screen #1 (FAC1)

PERMIT #: MSR220005

TRANSACTION CODE: (N=NEW R=REISSUANCE)

IS THIS A MODIFICATION ? (Y/N)

FACILITY NAME: KOPPERS INDUSTRIES INC

COGNIZANT OFFICIAL: THOMAS L HENDERSON

PHONE: 601-226-4584

CITY: ~~GRENADA~~ TIE PLANT

COUNTY CODE: 043

SIC CODE: 2491

TYPE OF APPLICATION: (See Page 11)

FACILITY OWNERSHIP: PRI

TYPE OF PERMIT: S

FEDERAL GRANT : 92-500 ONLY "$"

WATER QUALITY LIMITS (Y/N)

FACILITY INACTIVE CODE

FACILITY INACTIVE DATE - -

(Use ONLY if you are inactivating a entire facility. Otherwise use OFL

SUB-REGION: NO

ENGINEER: JMM

AVERAGE DESIGN FLOW : 0.001

COMPLIANCE:

Facility Data Screen #2 (FAC2)

RIVER BASIN # 1011

0338 - Upper Tombigbee River
0340 - Lower Tombigbee River
0342 - Pascagoula River
0343 - Pearl River
0408 - Tennesse River
1006 - Mississippi River
1011 - Yazoo River
1018 - Big Black
1021 - South Independent
1099 - Coastal Streams

RECEIVING WATERS BATUPAN BOGUE

Facility Type:

RDF1 I

I = Industrial
X = Ind. No Report
P = Pretreatment
M = Municipal
D = Domestic
N = Dom. No Report
F = Federal

Toxic and Bio-Assay Code:

RDF2

T = Toxic
A = Acute
C = Chronic

Treatment Type:

RDF4 EOP (See Page 12)

AC = Activated Carbon
AS = Activated Sludge
AL = Aerated Lagoon
AN = Anaerobic Lagoon
API = API Separator
AW = Artificial Wetlands
CC = Contact Cooling
CL = Conventional Lagoon
CT = Cooling Tower
DW = Deepwell
DF = Diffuser
EOP = End of Pipe
EV = Evaporation
HC = Hydrograph Controlled
ML = Multiple Lagoon
NC = Non-Contact Cooling
OS = Off Site Disposal
OF = Overland Flow
OD = Oxidation Ditch
PC = Physical Chemistry
PH = PH Adjustment
PS = Primary Sedimentation
RR = Recycle and Reuse
RO = Reverse Osmosis
RBC = Rotating Biological Contractor
SF = Sand Filter
SS = Secondary Sedimentation
SI = Spray Irrigation
SW = Statewide
TF = Trickling Filter

Facility Address Screen (FACA)

** Permit # MSR220005

- - - - * Primary DMR Mailing Address - - - -

Facility Name KOPPERS INDUSTRIES INC

Address Line1 PO BOX 160

Address Line2

CITY TIE PLANT ST MS ZIP 38960

- - - - Alternate DMR Mailing Address - - - -

Facility Name

Address Line1

Address Line2

CITY ST ZIP

- - - - Facility Location Address - - - -

Facility Name KOPPERS INDUSTRIES INC

Address Line1 543 TIE PLANT ROAD

Address Line2

CITY TIE PLANT ST MS ZIP 38960

Telephone 601 - 226 - 4584

Permit Tracking Screen (PTRK)

PERMIT # : MSR220005

Permit Issuance:

TRANSACTION CODE : N
(N=NEW C=CHANGE)

PERMIT TRACKING EVENT CODE : P4099

SCHEDULED DATE : 10-27-92

ACTUAL DATE : 10-27-92

Permit Expiration:

TRANSACTION CODE :
(N=NEW C=CHANGE)

PERMIT TRACKING EVENT CODE : P5099

SCHEDULED DATE : 07-13-97

ACTUAL DATE : 07-13-97

Permit Facility Geographic Data Screen (FAGD)

PERMIT # : M S R 2 2 0 0 0 5 TRANSACTION CODE : C

LATITUDE (FLAT) : + | | | | | | | |
H D D M M S S T

LONGITUDE (FLON) : - | | | | | | | | |
H D D D M M S S T

LAT/LONG METHOD (FLLM) : A

A = Map Interpolation
B = Navigation-Quality GPS
C = Remote Sensing
D = Zip Code Centroid
U = Unknown
1 = Address Mapping
2 = Aerial Photo w/Ground Control
3 = Cadastral Survey
4 = State Plan Coord System Conv
5 = Township-Section-Range sys Conv
6 = UTM Coordinates Conversion
7 = Raw Photo Extration
8 = GPS Survey
9 = Loran-C Navigational Device

LAT/LONG DATUM (FLLT) : 1

U = Unknown 1 = NAD27 2 = NAD83

LAT/LONG SCALE (FLLS) : 3

N = Not Applicable
U = Unknown
1 = 15,840
2 = 20,000
3 = 24,000
4 = 25,000
5 = 62,500
6 = 63,000
7 = 63,350
8 = 63,360
9 = 250,000

LAT/LONG DESCRIPTION (FLLD) : 0 1 0 9 9

01099 = Centroid of Processing Area
02099 = Front Door of Facility

USGS HYDROLOGIC BASIN CODE (FHBC) : 0 8 0 3 0 2 0 5

Outfall General Data Screen #1 (OFLG)

PERMIT # : MS222005

TRANSACTION CODE : N
(N=New C=Change)

DISCHARGE NUMBER : 001

REPORT DESIGNATOR : Y

INITIAL REPORT DATE : 01-01-98
(Date monitoring is to begin)

REPORT UNITS : M

NUMBER OF MONTHS IN REPORT PERIOD : 012

TOTAL NUMBER OF MONTHS DUE : 005
(Months due in 5 years)

INITIAL STATE SUBMISSION DATE : 01-28-99

STATE SUBMISSION UNIT : M

NUMBER OF UNITS IN STATE SUBMISSION PERIOD 12 (See instruction sheet, #9).

PIPE DESCRIPTION : STORMWATER RUNOFF

SEASONAL DMR PRINTING INDICATORS : Y Y Y Y Y Y Y Y Y Y Y Y

INITIAL LIMIT DATES : START - - END - -

INTERIM LIMIT DATES : START - - END - -

FINAL LIMIT DATES : START 10-27-92 END 07-13-97

PIPE INACTIVE CODE :

PIPE INACTIVE DATE : - -

AGENCY REVIEWER (ENGINEER) : JM

(Use if only the pipe itself is not active.
To inactivate an entire facility, use FAC1.)

Outfall General Data Screen #2 (OFLT)

Use these nine lines if you want comments or instructions to appear on the bottom of the DMR when it is preprinted for the facility.

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) & TOTAL DISCHARGE (GALS)

Outfall General Data Screen #1 (OFLG)

PERMIT # : MSR220005

TRANSACTION CODE : N
(N=New C=Change)

DISCHARGE NUMBER : 002

REPORT DESIGNATOR : Y

INITIAL REPORT DATE : 01-01-98
(Date monitoring is to begin)

REPORT UNITS : M

NUMBER OF MONTHS IN REPORT PERIOD : 012

TOTAL NUMBER OF MONTHS DUE : 005
(Months due in 5 years)

INITIAL STATE SUBMISSION DATE : 01-28-99

STATE SUBMISSION UNIT : M

NUMBER OF UNITS IN STATE SUBMISSION PERIOD 12 (See instruction sheet, #9).

PIPE DESCRIPTION : STORMWATER RUNOFF

SEASONAL DMR PRINTING INDICATORS : Y Y Y Y Y Y Y Y Y Y Y Y

INITIAL LIMIT DATES : START - - END - -

INTERIM LIMIT DATES : START - - END - -

FINAL LIMIT DATES : START 10-27-92 END 07-13-97

PIPE INACTIVE CODE :

PIPE INACTIVE DATE : - -

AGENCY REVIEWER (ENGINEER) : d

(Use if only the pipe itself is not active.
To inactivate an entire facility, use FAC1.)

Outfall General Data Screen #2 (OFLT)

Use these nine lines if you want comments or instructions to appear on the bottom of the DMR when it is preprinted for the facility.

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) & TOTAL DISCHARGE (GALS)

Outfall General Data Screen #1 (OFLG)

PERMIT # : MS0222005

TRANSACTION CODE : N
(N=New C=Change)

DISCHARGE NUMBER : 005

REPORT DESIGNATOR : Y

INITIAL REPORT DATE : 01-01-98
(Date monitoring is to begin)

REPORT UNITS : M

NUMBER OF MONTHS IN REPORT PERIOD : 012

TOTAL NUMBER OF MONTHS DUE : 005
(Months due in 5 years)

INITIAL STATE SUBMISSION DATE : 01-28-99

STATE SUBMISSION UNIT : M

NUMBER OF UNITS IN STATE SUBMISSION PERIOD 12 (See instruction sheet, #9).

PIPE DESCRIPTION : STORMWATER RUNOFF

SEASONAL DMR PRINTING INDICATORS : Y Y Y Y Y Y Y Y Y Y Y Y

INITIAL LIMIT DATES : START - - END - -

INTERIM LIMIT DATES : START - - END - -

FINAL LIMIT DATES : START 10-27-92 END 07-13-97

PIPE INACTIVE CODE :

PIPE INACTIVE DATE : - -

AGENCY REVIEWER (ENGINEER) :

(Use if only the pipe itself is not active.
To inactivate an entire facility, use FAC1.)

Outfall General Data Screen #2 (OFLT)

Use these nine lines if you want comments or instructions to appear on the bottom of the DMR when it is preprinted for the facility.

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) & TOTAL DISCHARGE (GALS)

Outfall General Data Screen #1 (OFLG)

PERMIT # : MSR220005

TRANSACTION CODE : N
(N=New C=Change)

DISCHARGE NUMBER : 004

REPORT DESIGNATOR : Y

INITIAL REPORT DATE : 01-01-92
(Date monitoring is to begin)

REPORT UNITS : M

NUMBER OF MONTHS IN REPORT PERIOD : 012

TOTAL NUMBER OF MONTHS DUE : 005
(Months due in 5 years)

INITIAL STATE SUBMISSION DATE : 01-28-99

STATE SUBMISSION UNIT : M

NUMBER OF UNITS IN STATE SUBMISSION PERIOD 12 (See instruction sheet, #9).

PIPE DESCRIPTION : STORMWATER RUNOFF

SEASONAL DMR PRINTING INDICATORS : Y Y Y Y Y Y Y Y Y Y Y Y

INITIAL LIMIT DATES : START - - END - -

INTERIM LIMIT DATES : START - - END - -

FINAL LIMIT DATES : START 10-27-92 END 07-13-97

PIPE INACTIVE CODE :

PIPE INACTIVE DATE : - -

AGENCY REVIEWER (ENGINEER) : [illegible]

(Use if only the pipe itself is not active.
To inactivate an entire facility, use FAC1.)

Outfall General Data Screen #2 (OFLT)

Use these nine lines if you want comments or instructions to appear on the bottom of the DMR when it is preprinted for the facility.

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) & TOTAL DISCHARGE (GALS)

Outfall General Data Screen #1 (OFLG)

PERMIT # : MS222005

TRANSACTION CODE : N
(N=New C=Change)

DISCHARGE NUMBER : 005

REPORT DESIGNATOR : Y

INITIAL REPORT DATE : 01-01-92
(Date monitoring is to begin)

REPORT UNITS : M

NUMBER OF MONTHS IN REPORT PERIOD : 012

TOTAL NUMBER OF MONTHS DUE : 005
(Months due in 5 years)

INITIAL STATE SUBMISSION DATE : 01-28-99

STATE SUBMISSION UNIT : M

NUMBER OF UNITS IN STATE SUBMISSION PERIOD 12 (See instruction sheet, #9).

PIPE DESCRIPTION : STORMWATER RUNOFF

SEASONAL DMR PRINTING INDICATORS : Y Y Y Y Y Y Y Y Y Y Y Y

INITIAL LIMIT DATES : START - - END - -

INTERIM LIMIT DATES : START - - END - -

FINAL LIMIT DATES : START 10-27-92 END 07-13-97

PIPE INACTIVE CODE :

PIPE INACTIVE DATE : - -

AGENCY REVIEWER (ENGINEER) : JK

(Use if only the pipe itself is not active.
To inactivate an entire facility, use FAC1.)

Outfall General Data Screen #2 (OFLT)

Use these nine lines if you want comments or instructions to appear on the bottom of the DMR when it is preprinted for the facility.

REPORT STORM DATE AND DURATION
(HOURS); ESTIMATED RAINFALL (I
NCHES) & TOTAL DISCHARGE (GALS
)

Outfall General Data Screen #1 (OFLG)

PERMIT # : MS222005

TRANSACTION CODE : N
(N=New C=Change)

DISCHARGE NUMBER : 006

REPORT DESIGNATOR : Y

INITIAL REPORT DATE : 01-01-92
(Date monitoring is to begin)

REPORT UNITS : M

NUMBER OF MONTHS IN REPORT PERIOD : 012

TOTAL NUMBER OF MONTHS DUE : 004
(Months due in 5 years)

INITIAL STATE SUBMISSION DATE : 01-28-99

STATE SUBMISSION UNIT : M

NUMBER OF UNITS IN STATE SUBMISSION PERIOD 12 (See instruction sheet, #9).

PIPE DESCRIPTION : STORMWATER RUNOFF

SEASONAL DMR PRINTING INDICATORS : Y Y Y Y Y Y Y Y Y Y Y Y

INITIAL LIMIT DATES : START - - END - -

INTERIM LIMIT DATES : START - - END - -

FINAL LIMIT DATES : START 10-27-92 END 97-13-97

PIPE INACTIVE CODE : PIPE INACTIVE DATE : - -

AGENCY REVIEWER (ENGINEER) : JH

(Use if only the pipe itself is not active.
To inactivate an entire facility, use FAC1.)

Outfall General Data Screen #2 (OFLT)

Use these nine lines if you want comments or instructions to appear on the bottom of the DMR when it is preprinted for the facility.

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) & TOTAL DISCHARGE (GALS)

PERMIT # : MS0222005

TRANSACTION CODE : N
(N=New C=Change)

DISCHARGE NUMBER : 007

REPORT DESIGNATOR : Y

INITIAL REPORT DATE : 01-01-92
(Date monitoring is to begin)

REPORT UNITS : M

NUMBER OF MONTHS IN REPORT PERIOD : 012

TOTAL NUMBER OF MONTHS DUE : 005
(Months due in 5 years)

INITIAL STATE SUBMISSION DATE : 01-28-99

STATE SUBMISSION UNIT : M

NUMBER OF UNITS IN STATE SUBMISSION PERIOD 12 (See instruction sheet, #9).

PIPE DESCRIPTION : STORMWATER RUNOFF

SEASONAL DMR PRINTING INDICATORS : Y Y Y Y Y Y Y Y Y Y Y Y

INITIAL LIMIT DATES : START - - END - -

INTERIM LIMIT DATES : START - - END - -

FINAL LIMIT DATES : START 10-27-92 END 07-13-97

PIPE INACTIVE CODE :

PIPE INACTIVE DATE : - -

AGENCY REVIEWER (ENGINEER) : JJ

(Use if only the pipe itself is not active.
To inactivate an entire facility, use FAC1.)

Outfall General Data Screen #2 (OFLT)

Use these nine lines if you want comments or instructions to appear on the bottom of the DMR when it is preprinted for the facility.

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) & TOTAL DISCHARGE (GALS)

Outfall General Data Screen #1 (OFLG)

PERMIT # : MS222005

TRANSACTION CODE : N
(N=New C=Change)

DISCHARGE NUMBER : 008

REPORT DESIGNATOR : Y

INITIAL REPORT DATE : 01-01-92
(Date monitoring is to begin)

REPORT UNITS : M

NUMBER OF MONTHS IN REPORT PERIOD : 012

TOTAL NUMBER OF MONTHS DUE : 005
(Months due in 5 years)

INITIAL STATE SUBMISSION DATE : 01-28-99

STATE SUBMISSION UNIT : M

NUMBER OF UNITS IN STATE SUBMISSION PERIOD 12 (See instruction sheet, #9).

PIPE DESCRIPTION : STORMWATER RUNOFF

SEASONAL DMR PRINTING INDICATORS : Y Y Y Y Y Y Y Y Y Y Y Y

INITIAL LIMIT DATES : START - - END - -

INTERIM LIMIT DATES : START - - END - -

FINAL LIMIT DATES : START 10-27-92 END 07-13-97

PIPE INACTIVE CODE :

PIPE INACTIVE DATE : - -

AGENCY REVIEWER (ENGINEER) : JL

(Use if only the pipe itself is not active.
To inactivate an entire facility, use FAC1.)

Outfall General Data Screen #2 (OFLT)

Use these nine lines if you want comments or instructions to appear on the bottom of the DMR when it is preprinted for the facility.

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) & TOTAL DISCHARGE (GALS)

Outfall General Data Screen #1 (OFLG)

PERMIT # : MB222005

TRANSACTION CODE : N
(N=New C=Change)

DISCHARGE NUMBER : 009

REPORT DESIGNATOR : Y

INITIAL REPORT DATE : 01-01-92
(Date monitoring is to begin)

REPORT UNITS : M

NUMBER OF MONTHS IN REPORT PERIOD : 012

TOTAL NUMBER OF MONTHS DUE : 005
(Months due in 5 years)

INITIAL STATE SUBMISSION DATE : 01-28-99

STATE SUBMISSION UNIT : M

NUMBER OF UNITS IN STATE SUBMISSION PERIOD 12 (See instruction sheet, #9).

PIPE DESCRIPTION : STORMWATER RUNOFF

SEASONAL DMR PRINTING INDICATORS : Y Y Y Y Y Y Y Y Y Y Y Y

INITIAL LIMIT DATES : START - - END - -

INTERIM LIMIT DATES : START - - END - -

FINAL LIMIT DATES : START 10-27-92 END 07-13-97

PIPE INACTIVE CODE :

PIPE INACTIVE DATE : - -

AGENCY REVIEWER (ENGINEER) :

(Use if only the pipe itself is not active.
To inactivate an entire facility, use FAC1.)

Outfall General Data Screen #2 (OFLT)

Use these nine lines if you want comments or instructions to appear on the bottom of the DMR when it is preprinted for the facility.

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) & TOTAL DISCHARGE (GALS)

Koppers Industries, Inc.
Grenada Plant
P. O. Box 160
Tie Plant, Ms 38960
Permit #: **MSR220005**

12/16/99

Point Source: 1

# of Acres: 15.9

Exact Sampling Location: Behind Heatcraft - South end

Person Obtaining Sample: Anthony Mayhan

Date sample was taken: 12 - 3 - 99

Time taken: C - 11:45 am finished
G - 9:00am - 9:05 am

Time Rainfall Began: 8:00 - 8:15 am

Time Rainfall Ended: @ 12:00 NOON

Time Runoff Began: 9:00 am

Rainfall Amount: 0.9 in

Date of Previous Rainfall (> 0.1 inches): 11 - 26 - 99

Equations Used:

Volume of Rainfall = Runoff Coef. * Area acres * Rainfall (in.) * F

$$V = C * A * R * F$$

$$F = \frac{(43560\ 1^2/Ac)(7.48\ gal/1^3)}{(12\ in/ft)(1{,}000{,}000\ gal/MG)} = 0.027\ MG/Ac - in.$$

R = 0.9 inches

C = 0.40

V = Runoff volume in MGD

$$V = (0.4)(15.9)(0.9)(0.027)$$

$$= 0.15455 \text{ MGD}$$

Koppers Industries, Inc.
Grenada Plant
P. O. Box 160
Tie Plant, Ms 38960
Permit #: **MSR220005**

12/16/99

Point Source: 2

# of Acres: 12.6

Exact Sampling Location: Behind Switch tie mill - central ditch

Person Obtaining Sample: Anthony Mayhan

Date sample was taken: 12 - 3 - 99

Time taken: C - 11:40 am finished
G - 9:15 am

Time Rainfall Began: 8:00 - 8:15 am

Time Rainfall Ended: @ 12:00 NOON

Time Runoff Began: 9:00 am

Rainfall Amount: 0.9 in

Date of Previous Rainfall (> 0.1 inches): 11 - 26 - 99

Equations Used:

Volume of Rainfall = Runoff Coef. * Area acres * Rainfall (in.) * F

V = C * A * R * F

$$F = \frac{(43560\ 1^2/Ac)(7.48\ gal/1^3)}{(12\ in/ft)(1{,}000{,}000\ gal/MG)} = 0.027\ MG/Ac-in.$$

R = 0.9 inches

C = 0.40

V = Runoff volume in MGD

V = (0.4) (12.6) (0.9) (0.027)

= 0.12247

Koppers Industries, Inc.
Grenada Plant
P. O. Box 160
Tie Plant, Ms 38960
Permit #: **MSR220005**

12/16/99

Point Source: 4

# of Acres: 24.1

Exact Sampling Location: Beaver Pond

Person Obtaining Sample: Anthony Mayhan

Date sample was taken: 12 - 3 - 99

Time taken: G - 9:20 - 9:30 am
C - 12:00 finished

Time Rainfall Began: 8:00 - 8:15 am

Time Rainfall Ended: @ 12:00 NOON

Time Runoff Began: 9:00 am

Rainfall Amount: 0.9 in

Date of Previous Rainfall (> 0.1 inches): 11 - 26 - 99

Equations Used:

Volume of Rainfall = Runoff Coef. * Area acres * Rainfall (in.) * F

$$V = C * A * R * F$$

$$F = \frac{(43560\ 1^2/Ac)(7.48\ gal/1^3)}{(12\ in/ft)(1{,}000{,}000\ gal/MG)} = 0.027\ MG/Ac - in.$$

R = 0.9 inches

C = 0.40

V = Runoff volume in MGD

$$V = (0.4)(24.1)(0.9)(0.027)$$

$$= 0.23425$$

Koppers Industries, Inc.
Grenada Plant
P. O. Box 160
Tie Plant, Ms 38960
Permit #: **MSR220005**

12/16/99

Point Source: 5

# of Acres: 26.2

Exact Sampling Location: Behind Main Office

Person Obtaining Sample: Anthony Mayhan

Date sample was taken: 12 - 3 - 99

Time taken: C · 12:05 pm G · 9:35 am

Time Rainfall Began: 8:00 - 8:15 am

Time Rainfall Ended: @ 12:00 NOON

Time Runoff Began: 9:00 am

Rainfall Amount: 0.9 in

Date of Previous Rainfall (> 0.1 inches): 11 - 26 - 99

Equations Used:

Volume of Rainfall = Runoff Coef. * Area acres * Rainfall (in.) * F

V = C * A * R * F

$$F = \frac{(43560\ I^2/Ac)(7.48\ gal/I^3)}{(12\ in/ft)(1{,}000{,}000\ gal/MG)} = 0.027\ MG/Ac - in.$$

R = 0.9 inches

C = 0.40

V = Runoff volume in MGD

V = (0.4)(26.2)(0.9)(0.027)

= 0.25466

Koppers Industries, Inc.
Grenada Plant
P. O. Box 160
Tie Plant, Ms 38960
Permit #: **MSR220005**

12/16/99

Point Source: 6

# of Acres: 9.5

Exact Sampling Location: Pole Yard - NE corner

Person Obtaining Sample: Anthony Mayhan

Date sample was taken: 12 - 3 - 99

Time taken: C 12:10pm finished G 9:40am

Time Rainfall Began: 8:00 - 8:15 am

Time Rainfall Ended: @ 12:00 NOON

Time Runoff Began: 9:00 am

Rainfall Amount: 0.9 in

Date of Previous Rainfall (> 0.1 inches): 11 - 26 - 99

Equations Used:

Volume of Rainfall = Runoff Coef. * Area acres * Rainfall (in.) * F

$$V = C * A * R * F$$

$$F = \frac{(43560\ 1^2/Ac)(7.48\ gal/1^3)}{(12\ in/ft)(1{,}000{,}000\ gal/MG)} = 0.027\ MG/Ac-in.$$

R = 0.9 inches

C = 0.40

V = Runoff volume in MGD

$$V = (0.4)(9.5)(0.9)(0.027)$$

$$= 0.09234$$

Koppers Industries, Inc.
Grenada Plant
P. O. Box 160
Tie Plant, Ms 38960
Permit #: **MSR220005**

12/16/99

Point Source: 7

# of Acres: 13.2

Exact Sampling Location: North end of plant

Person Obtaining Sample: Anthony Mayhan

Date sample was taken: 12 - 3 - 99

Time taken: 6 9:45 am - 10:00am C 12:15pm finished

Time Rainfall Began: 8:00 - 8:15 am

Time Rainfall Ended: @ 12:00 NOON

Time Runoff Began: 9:00 am

Rainfall Amount: 0.9 in

Date of Previous Rainfall (> 0.1 inches): 11 - 26 - 99

Equations Used:

Volume of Rainfall = Runoff Coef. * Area acres * Rainfall (in.) * F

V = C * A * R * F

$$F = \frac{(43560\ 1^2/Ac)(7.48\ gal/1^3)}{(12\ in/ft)(1{,}000{,}000\ gal/MG)} = 0.027\ MG/Ac - in.$$

R = 0.9 inches

C = 0.40

V = Runoff volume in MGD

$$V = (0.4)(13.2)(0.9)(0.027)$$

$$= 0.12830$$

KOPPERS INDUSTRIES

Koppers Industries, Inc.
P.O. Box 160
Tie Plant, MS 38960

Telephone: (601) 226-4584
FAX: (601) 226-4588

5/03/99

Steve Spengler
Office of Pollution Control
Environmental Permitting Division
Chief of Timber & Wood Products Division
P.O. Box 10385
Jackson, MS 39289-0385

Subject: Permit #. MSR220005

Mr. Spengler,

As you are probably aware of Beazer East Inc. has a major earth moving project in process at our Koppers Industries Inc. plant in Grenada Mississippi. Part of this project will require them to make a surface impoundment on our property. This location of this surface impoundment will be such that it will interrupt the flow of storm water to our discharge point #3 along the central ditch. We will dig a trench around this impoundment that will re-route the storm water to another point on the central ditch. This new discharge point will still be identified as #3, and will be approximately 75 to 100 yards further east than the original. Enclosed you will find a map showing the old #3 discharge point and the new #3 discharge point.

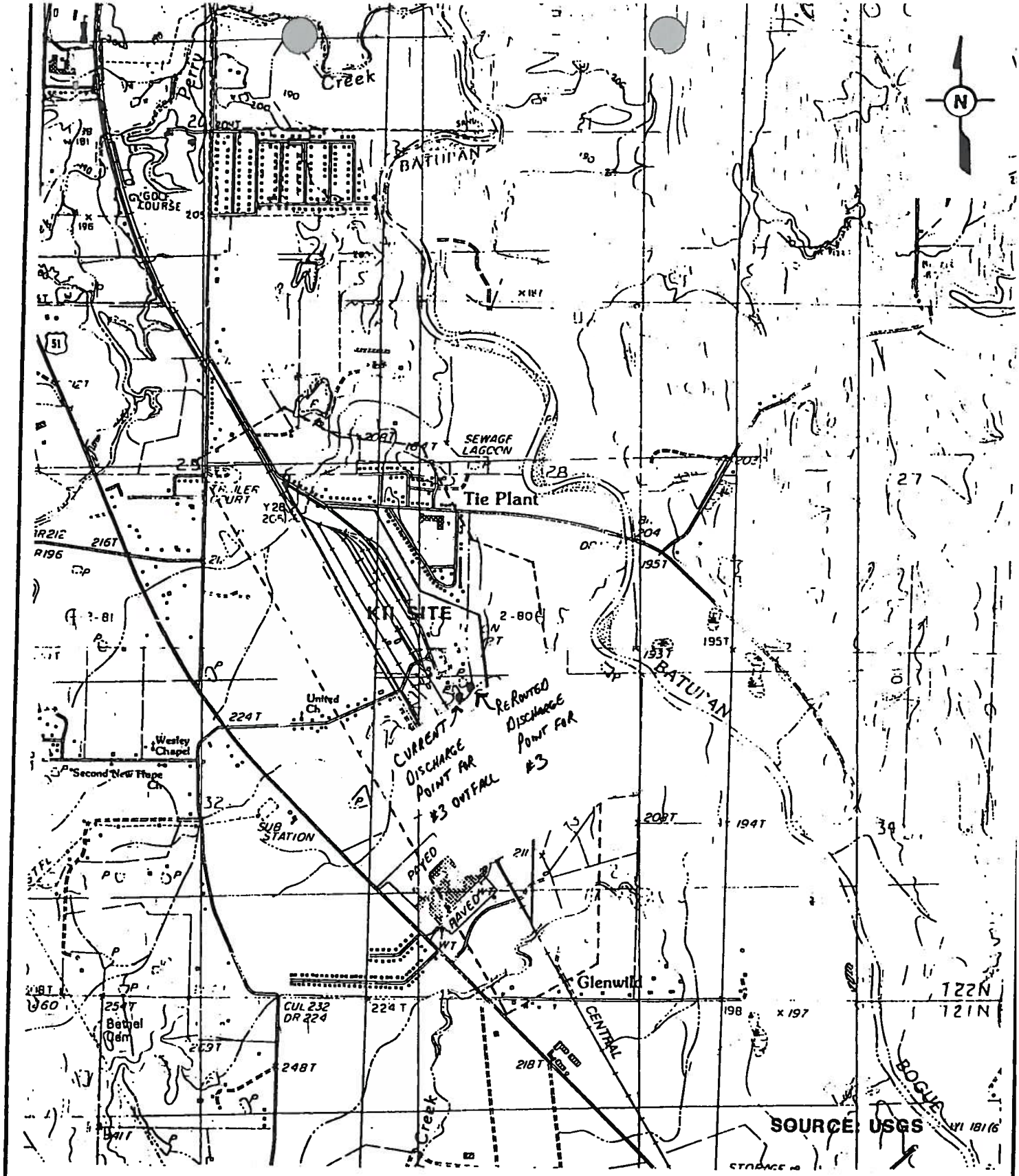
If you have any questions please contact James Hatch at 601-226-4584 x-22 or myself at x-11.

Sincerely,

Thomas L. Henderson

Thomas L. Henderson

Cc: Tom Duplessis - KII
Russ Twitty - MDEQ



KOPPERS INDUSTRIES, INC. GRENADA, MISSISSIPPI	Woodward-Clyde Consultants Consulting Engineers, Geologists and Environmental Scientists Baton Rouge, Louisiana	SITE LOCATION AND SURFACE FEATURES	FILE NO. 91B432C
	SCALE: 1" = 2000' / DRAWN BY: KPQ / DATE: 07/01/92 / CHKD. BY: A. Dukes / DATE: 6/27/92		FIG. NO. 4

KOPPERS INDUSTRIES

Koppers Industries, Inc.
P.O. Box 160
Tie Plant, MS 38960

Telephone (601) 226-4584
FAX (601) 226-4588

January 7, 2000

CERTIFIED MAIL: Z 490 517 015

RECEIVED
JAN 10 2000
Dept. of Environmental Quality
Office of Pollution Control

Russ Twitty
Industrial Storm Water Section
MS Dept. of Environmental Quality
P. O. Box 10385
Jackson, MS 39289-0385

Subject: 1999 Storm Water Sampling Results
Koppers Industries, Inc. – Grenada Plant

Dear Mr. Twitty,

Permit #: MSR220005

Attached are the Discharge Monitoring Reports for the 1999 Storm Water Results. Outfalls number (8), (9), and (3) are represented by outfall number (2) results.

Sevenson (Beazer East, Inc.) moved outfall number (3) in regards to environmental cleanup. A letter of the event notified the MSDEQ. Sevenson catches all the water runoff and sends it through their water treatment system. Then they send the water to the city discharge line.

If you have any questions regarding this report or would like to discuss it in further detail, please contact me at (662) 226-4584 ext. 40.

Sincerely,

Thomas L. Henderson

Thomas L. Henderson
Plant Manager

Cc: Tim Basilone – Koppers, Pittsburgh

Enclosure: Previous letter, Evaluation, DMR's, and Outfall measurements

Part VII.

Inspection Report and Certification Form For Storm Water Pollution Prevention Plan Evaluation

Wood Treater Storm Water General NPDES Permit No. MSR220005

(Please Print)

Owner and/or Operator: Koppers Industries, Inc.

Facility Name: SAME

Facility Location: 1 Koppers Dr., P.O. Box 160 Tie Plant, MS 38960

Date and Time: 12-3-99

Inspector(s): Anthony Mayhan

Date of Last Rainfall: 11-26-99 Estimated Amount: 0.25

Deficiencies Noted During the Inspection (attach additional sheets if necessary):

NONE

Corrective Action Needed (attach additional sheets if necessary):

NONE

Corrective Action Compliance Schedule:

Based upon this inspection which I or personnel under my direct supervision conducted, I certify that all pollution control measures are adequate and have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan filed with the Office of Pollution Control and good engineering practices as required by the above referenced permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons 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 fines and imprisonment for knowing violations.

I further certify that the Mississippi Office of Pollution Control has been notified of any changes pertinent to our storm water permit as required in Part II.C.

Thomas L. Henderson	Thomas L Henderson	1-7-00
Authorized Name (Print)	Signature	Date

These reports shall be submitted annually, as required in the permit, to:

Chief, Industrial Branch
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385

KOPPERS INDUSTRIES

Koppers Industries, Inc.
P.O. Box 160
Tie Plant, MS 38960

Telephone: (601) 226-4584
FAX: (601) 226-4588

5/03/99

RECEIVED
MAY - 5 1999
Dept. of Environmental Quality
Office of Pollution Control

Steve Spengler
Office of Pollution Control
Environmental Permitting Division
Chief of Timber & Wood Products Division
P.O. Box 10385
Jackson, MS 39289-0385

Subject: Permit #. MSR220005

Mr. Spengler,

As you are probably aware of Beazer East Inc. has a major earth moving project in process at our Koppers Industries Inc. plant in Grenada Mississippi. Part of this project will require them to make a surface impoundment on our property. This location of this surface impoundment will be such that it will interrupt the flow of storm water to our discharge point #3 along the central ditch. We will dig a trench around this impoundment that will re-route the storm water to another point on the central ditch. This new discharge point will still be identified as #3, and will be approximately 75 to 100 yards further east than the original. Enclosed you will find a map showing the old #3 discharge point and the new #3 discharge point.

If you have any questions please contact James Hatch at 601-226-4584 x-22 or myself at x-11.

Sincerely,

Thomas L. Henderson

Thomas L. Henderson

Cc: Tom Duplessis - KII
Russ Twitty - MDEQ

KOPPERS INDUSTRIES

Koppers Industries, Inc.
P.O. Box 160
Tie Plant, MS 38960

Telephone: (601) 226-4584
FAX: (601) 226-4588

5/03/99

Steve Spengler
Office of Pollution Control
Environmental Permitting Division
Chief of Timber & Wood Products Division
P.O. Box 10385
Jackson, MS 39289-0385

Subject: Permit #. MSR220005

Mr. Spengler,

As you are probably aware of Beazer East Inc. has a major earth moving project in process at our Koppers Industries Inc. plant in Grenada Mississippi. Part of this project will require them to make a surface impoundment on our property. This location of this surface impoundment will be such that it will interrupt the flow of storm water to our discharge point #3 along the central ditch. We will dig a trench around this impoundment that will re-route the storm water to another point on the central ditch. This new discharge point will still be identified as #3, and will be approximately 75 to 100 yards further east than the original. Enclosed you will find a map showing the old #3 discharge point and the new #3 discharge point.

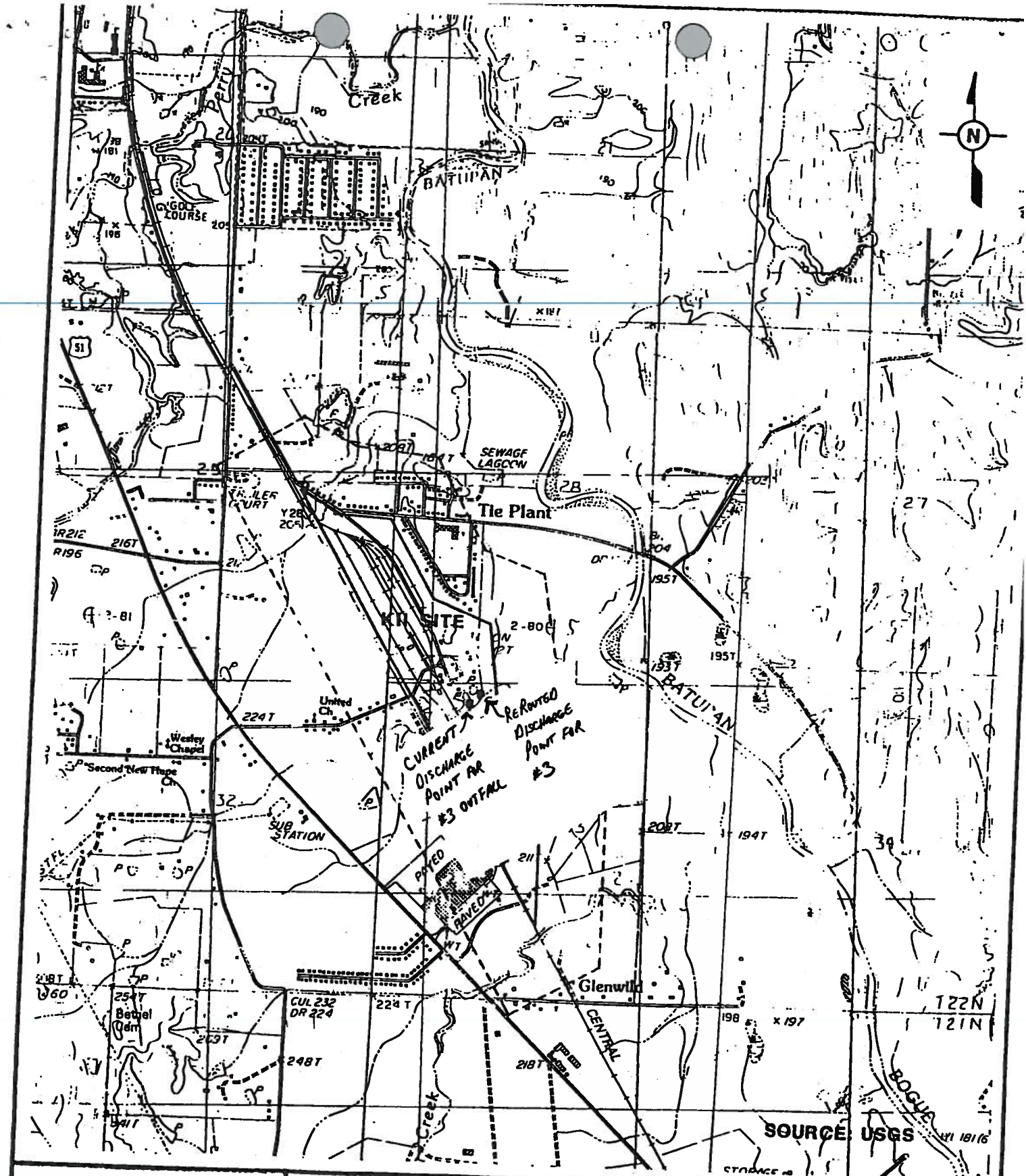
If you have any questions please contact James Hatch at 601-226-4584 x-22 or myself at x-11.

Sincerely,

Thomas L. Henderson

Thomas L. Henderson

Cc: Tom Duplessis - KII
Russ Twitty - MDEQ



KOPPERS INDUSTRIES, INC. GRENADA, MISSISSIPPI	Woodward-Clyde Consultants Consulting Engineers, Geologists and Environmental Scientists Baton Rouge, Louisiana	SITE LOCATION AND SURFACE FEATURES	FILE NO. 91B432C
	SCALE: 1" = 2000' / DRAWN BY: KPQ / CHKD. BY: A. Dukes	DATE: 07/01/92 / DATE: 6/27/92	FIG. NO. 4

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: KOPPERS INDUSTRIES INC

ADDRESS: P O BOX 160
TIE PLANT MS 38960

FACILITY LOCATION: TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
MSR220005	001 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

JMM

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		NA	******	6.22	(12)		1/yr	G
	PERMIT REQUIREMENT	******	******	********	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	38	(19)		1/yr	G
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	G
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	G
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	G
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	00	01	24
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES); AND TOTAL DISCHARGE (GALLONS).

12-3-99 6 Hours 0.9 inches 0.15455 MGD

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME: KOPPERS INDUSTRIES INC

ADDRESS: P O BOX 160
TIE PLANT MS 38960

FACILITY LOCATION: TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
MSR220005	001 B

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

JMM

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [__] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	21	(19)	0	1/yr	C
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0	(19)	0	1/yr	C
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)	0	NA	NA
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	00	01	24
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960
FACILITY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR) (2-16) (17-19)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	002 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

JMM

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [__] ***

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH	SAMPLE MEASUREMENT	******	******			******	6.76	(12)		1/yr	G
00400 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	39	(19)		1/yr	G
00530 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	G
00560 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	G
39032 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	G
46000 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson / Plant Manager
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (*Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.*)

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4594	00	01	24
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (*Reference all attachments here*)

REPORT STORMS DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES); TOTAL DISCHARGE (GALLONS).
12-3-99 6 Hours 0.9 Inches 0.12247 MGD

EPA Form 3320-1 (08-95) Previous editions may not be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

00113/990224-1058

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY LOCATION TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*
(2-16) *(17-19)*

MSR220005	002 B
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

JMM

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE |__| ***

NOTE: Read Instructions before completing this form.

PARAMETER *(32-37)*		(3 Card Only) QUANTITY OR LOADING *(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION *(38-45)* MINIMUM	*(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	8	(19)		1/yr	C
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	C
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)		NA/yr	NA
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226 4584	00	01	24
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY LOCATION TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*
(2-16) (17-19)

PERMIT NUMBER: MSR220005

DISCHARGE NUMBER: 004 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

JNM

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE |__| ***

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH	SAMPLE MEASUREMENT	******	******		NA	******	8.14	(12)		1/yr	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	39	(19)		1/yr	G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	G
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	G
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	G
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	00	01	24
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

12-3-99 6 Hours 0.9 inches 0.23425 MGD

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY LOCATION TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
MSR220005	004 B

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

JMM

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE | _ | ***

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	27	(19)		1/yr	C
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	C
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)		NA	NA
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Thomas L Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	00	01	24
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY LOCATION TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
MSR220005	005 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

JMM

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [__] ***

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH	SAMPLE MEASUREMENT	******	******		NA	******	7.72	(12)		1/yr	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	95	(19)		1/yr	G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	G
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	G
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	G
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Thomas L Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	00	01	24
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

12-3-99 6 Hours 0.9 inches 0.25466 MGD (Outfall 5)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
MSR220005	005 3

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING
JMM

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE |__| ***
NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	85.3	(19)		1/yr	C
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	C
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)		NA	NA
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson / Plant Manager
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
601	226-4584	00	01	24

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960
FACILITY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)* (2-16) (17-19)

MSR220005 — PERMIT NUMBER
006 A — DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING
JMM

*** NO DISCHARGE |__| ***
NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH	SAMPLE MEASUREMENT	******	******		NA	******	7.31	(12)		1/yr	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	172	(19)		1/yr	G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	G
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	G
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	G
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson / Plant Manager
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	00	01	24
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

REPORT STORM DATE AND DURATION (HOURS)		ESTIMATED RAINFALL (INCHES)	TOTAL DISCHARGE (GALLONS).
12-3-99	6Hrs	0.9 inches	0.09234 MGD (outfall 6)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY LOCATION TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
MSR220005	006 B

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

JMM

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	235	(19)		1/yr	C
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	C
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)		NA	NA
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Thomas L Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
601	226-4584	00	01	24

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960
FACILITY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR) (2-16) (17-19)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MSR220005 — PERMIT NUMBER
007 A — DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

JMM

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE |__| ***

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH	SAMPLE MEASUREMENT	******	******		NA	******	7.26	(12)		1/yr	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	184	(19)		1/yr	G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	G
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	0.256	(19)		1/yr	G
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	0	(19)		1/yr	G
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson / Plant Manager
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	00	01	24
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT STORM DATE AND DURATION (HOURS); ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).

12-3-99 6 Hrs 0.88 (0.9) inches 0.12830 MGD (Outfall 7)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: KOPPERS INDUSTRIES INC

ADDRESS: P O BOX 160
TIE PLANT MS 38960

FACILITY LOCATION: TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PERMIT NUMBER	DISCHARGE NUMBER
MS8220005	007 B

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

JMM

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE |__| ***

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	194	(19)		1/yr	C
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
TACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.186	(19)		1/yr	C
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)		NA	NA
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	00	01	24
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*
(2-16) (17-19)

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	003 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

JMM

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [X] ***
NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH	SAMPLE MEASUREMENT	******	******			******	NA	(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO Discharge

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L Henderson / Plant Manager
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Thomas L Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601 (AREA CODE)	226-4504 (NUMBER)	00 (YEAR)	01 (MO)	24 (DAY)

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
REPORT STORM DATE AND DURATION (HOURS): ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)
Letters attached - Represented by Outfall #2

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME KOPPERS INDUSTRIES INC

ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY LOCATION TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*
(2-16) *(17-19)*

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PERMIT NUMBER	DISCHARGE NUMBER
MSR220005	003 B

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

JMM

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [X] ***

NOTE: Read instructions before completing this form.

PARAMETER *(32-37)*		(3 Card Only) QUANTITY OR LOADING *(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION *(38-45)* MINIMUM	*(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
TACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

No Discharge

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Thomas L Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
601	226-4584	00	01	24

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Letters attached - Results represented by Outfall #2

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: KOPPERS INDUSTRIES INC

ADDRESS: P O BOX 160
TIE PLANT MS 38960

FACILITY LOCATION: TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR) (2-16) (17-19)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PERMIT NUMBER: MSR220005

DISCHARGE NUMBER: 008 A

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING

JMM

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE |__| ***

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH	SAMPLE MEASUREMENT	******	******		NA	******	NA	(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4564	00	01	24
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS)

Represented by Outfall #2

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: KOPPERS INDUSTRIES INC

ADDRESS: P O BOX 160
TIE PLANT MS 38960

FACILITY LOCATION: TIE PLANT MS 38960

ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
MSR220005	008 8

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING

JMM

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE |__| ***

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PENTACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	00	01	24
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Represented by Outfall #2

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
MSR220005	009 A

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MINOR
(SUBR NO)
F - FINAL
STORMWATER GRAB SAMPLING
JMM

*** NO DISCHARGE [__] ***
NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH	SAMPLE MEASUREMENT	******	******		NA	******	NA	(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
OIL & GREASE (FREON EXTR.-IR METH) TOT,RO	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
39032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
PHENOLS	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT ANNL MAX	MG/L		ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L Henderson / Plant Manager
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Thomas L Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	00	01	24
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
REPORT STORM DATE AND DURATION (HOURS) ESTIMATED RAINFALL (INCHES) TOTAL DISCHARGE (GALLONS).
Represented by Outfall #2

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME KOPPERS INDUSTRIES INC
ADDRESS P O BOX 160
TIE PLANT MS 38960

FACILITY
LOCATION TIE PLANT MS 38960
ATTN: THOMAS L HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*
(2-16) (17-19)

MSR220005 — PERMIT NUMBER
009 B — DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
STORMWATER COMPOSITE SAMPLING
JMM

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	01	01	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE |__| ***

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
TETRACHLOROPHENOL 39032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	NA	(19)			
	PERMIT REQUIREMENT	******	******	********	******	******	REPORT ANNL MAX	MG/L		ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L Henderson / Plant Manager
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

Thomas L Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	00	01	24
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Represented by Outfall #2

(Mailing Name/Location if different)

NAME

ADDRESS

P O BOX 160
TIE PLANT, MS 38960

FACILITY NAME KOPPERS INDUSTRIES, INC.

LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) 1 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

Page 3 - three hour composite

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
99	1	1	99	12	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				21	mg/l		1/yr	C
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	C
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
601	226-4564	00	01	07

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

Facility Name/Location (if different)

NAME

ADDRESS

P O BOX 160
TIE PLANT, MS 38960

FACILITY KOPPERS INDUSTRIES, INC.

LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) 1 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

Page 1 - first 30 minute sample

MONITORING PERIOD	YEAR	MO	DAY
FROM	99	1	1
	(20-21)	(22-23)	(24-25)
TO	99	12	1
	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	(54-61) AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				6.22	S.U.		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report			1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				38	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
601	226-4584	00	01	07

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

NAME

ADDRESS P O BOX 160
TIE PLANT, MS 38960

FACILITY ~~KOPPERS INDUSTRIES, INC.~~
LOCATION ~~TIE PLANT, MS~~

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) 2 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

Page 3 - three hour composite

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
99	1	1	99	12	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				8			1/yr	C
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0			1/yr	C
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
601	2264584	00	01	07

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

NAME
ADDRESS P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) 2 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
99	1	1	99	12	31

Page 1 - first 30 minute sample

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				6.76			1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				39			1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0			1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0			1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0			1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
601	226-4584	00	01	07

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

HMITTEE NAME/ADDRESS (Include cility Name/Location if different)
AME
DDRESS
P O BOX 160
TIE PLANT, MS 38960
KOPPERS INDUSTRIES, INC.
ACILITY
OCATION
TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
MSR220005	4

Form Approved
OMB No. 2040-0004

Page 3 - three hour composite

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	1	1	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				27	mg/l		1/yr	C
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	C
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
601	226-4584	00	01	07

OMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

NAME

ADDRESS P O BOX 160
TIE PLANT, MS 38960

FACILITY KOPPERS INDUSTRIES, INC.

LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) 4 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

Page 1 - first 30 minute sample

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	1	1	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				8.14	S.U.		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report			1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				39	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	00	01	01
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

NAME

ADDRESS P O BOX 160
TIE PLANT, MS 38960

FACILITY KOPPERS INDUSTRIES, INC.

LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) 5 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

Page 3 - three hour composite

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
99	1	1	99	12	31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				85.3			1/yr	C
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0			1/yr	C
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
601	226-4584	00	01	07

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

acility Name/Location if different)
AME
DDRESS
P O BOX 160
TIE PLANT, MS 38960
ACILITY KOPPERS INDUSTRIES, INC.
OCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) 5 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

Page 1 - first 30 minute sample

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	1	1	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.72	S.U.		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report			1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				95	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Thomas L Henderson / Plant Manager
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
601	2264584	00	01	07

OMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

NAME

ADDRESS P O BOX 160
TIE PLANT, MS 38960

FACILITY KOPPERS INDUSTRIES, INC.

LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) 6 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

Page 3 - three hour composite

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
99	1	1	99	12	31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				235			1/yr	C
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0			1/yr	C
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
601	226-4584	00	01	07

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

(Facility Name/Location if different)

NAME

ADDRESS

P O BOX 160
TIE PLANT, MS 38960

FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MSR220005

(17-19) DISCHARGE NUMBER: 6

Form Approved
OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
99	1	1	99	12	31

Page 1 - first 30 minute sample

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	(54-61) AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.31	S.U.		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report			1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				172	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
601	226-4584	00	01	07

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

NAME
ADDRESS P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) 7 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

Page 3 - three hour composite

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
99	1	1	99	12	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				194	mg/l		1/yr	C
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	comp
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0.186	mg/l		1/yr	C
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	comp
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson / Plant Manager
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
601	226-4584	00	01	07

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

NAME

ADDRESS P O BOX 160
TIE PLANT, MS 38960

FACILITY KOPPERS INDUSTRIES, INC.

LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
MSR220005	7

Form Approved
OMB No. 2040-0004

Page 1 - first 30 minute sample

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	99	1	1	TO	99	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.26	S.U.		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report			1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				184	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0.256	mg/l		1/yr	G
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	00	01	07
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

Grenada Co.

Kopper's Industries, Inc.
P. O. Box 160
Tie Plant, MS 38960

January 22, 1999

RECEIVED
JAN 27 1999
Dept. of Environmental Quality
Office of Pollution Control

Louis Lavallee, P.E. Chief
Industrial Storm Water Section
MS Department of Environmental Quality
Office of Pollution Control
P. O. Box 10385
Jackson, MS 39289-0385

Dear Louis Lavallee,

Subject: 1998 Storm Water Sampling Results

Permit #: MSR220005

Attached are the Discharge Monitoring Reports (DMR's) for the 1998 Storm Water Sampling Results.

Outfalls number (8) and (9) were not sampled because they are representative of the sampling results from outfall number (2).

If you have any questions regarding this report or would like to discuss it in further detail, please contact me at (601) 226-4584 EXT. 11.

Sincerely,

Thomas L. Henderson

Thomas L. Henderson
Plant Manager

Cc: Tom DuPlessis

Certified mail #: Z 538 934 769

Part VII.

Inspection Report and Certification Form For Storm Water Pollution Prevention Plan Evaluation

Wood Treater Storm Water General NPDES Permit No. MSR220005

(Please Print)

Owner and/or Operator: KOPPERS IND. INC.

Facility Name: SAME

Facility Location: 543 TIE PLANT ROAD TIE PLANT, MS 38960

Date and Time: 11-20-98

Inspector(s): JAMES HATCH

Date of Last Rainfall: 11-15-98 Estimated Amount: .8

Deficiencies Noted During the Inspection (attach additional sheets if necessary):

NONE

Corrective Action Needed (attach additional sheets if necessary):

NONE

Corrective Action Compliance Schedule:

Based upon this inspection which I or personnel under my direct supervision conducted, I certify that all pollution control measures are adequate and have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan filed with the Office of Pollution Control and good engineering practices as required by the above referenced permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons 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 fines and imprisonment for knowing violations.

I further certify that the Mississippi Office of Pollution Control has been notified of any changes pertinent to our storm water permit as required in Part II.C.

Thomas L. Henderson	Thomas L. Henderson	1-22-99
Authorized Name (Print)	Signature	Date

These reports shall be submitted annually, as required in the permit, to:

Chief, Industrial Branch
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385

KOPPERS INDUSTRIES

Koppers Industries, Inc.
P.O. Box 160
Tie Plant, MS 38960

Telephone: (601) 226-4584
FAX: (601) 226-4588

DATE: January 22, 1998

TO: Louis Lavallee P.E. Chief
Industrial Storm Water Section
Mississippi Department of Environmental Quality

FROM: Thomas L. Henderson

SUBJECT: Permit Number MSR220005
1997 Storm Water Sampling Results and
Certification Form
Koppers Industries Inc.
Tie Plant, Mississippi
Grenada County

Dear Mr.Lavallee:

Attached is the Discharge Monitoring Reports(DMRs) for the 1997 Storm Water Sampling Results.

Outfalls number (8) and (9), were not sampled because they are representative of the sampling results from outfall number (2).

If you have any questions about this report or would like to discus it in further detail please contact me at 601-226-4584.

Sincerely,

Thomas L. Henderson

Thomas L. Henderson
Plant Manager

cc: Steve Smith

RECEIVED
JAN 23 1998

Part VII.

Inspection Report and Certification Form
For Storm Water Pollution Prevention Plan Evaluation

Wood Treater Storm Water General NPDES Permit No. MSR22 0 0 0 5
(Fill in your Certificate of Coverage Number)

(Please Print)

Owner and/or Operator: Koppers Industries Inc.

Facility Name: Same

Facility Location: 543 Tie Plant Rd, Tie Plant MS 38960

Date and Time: 12-4-97

Inspector(s): Michael Sylvester, Bobby McClain

Date of Last Rainfall: 12-3-97 **Estimated Amount:** 1.05"

Deficiencies Noted During the Inspection (attach additional sheets if necessary):

None

Corrective Action Needed (attach additional sheets if necessary):

None

Corrective Action Compliance Schedule:

—

Based upon this inspection which I or personnel under my direct supervision conducted, I certify that all pollution control measures are adequate and have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan filed with the Office of Pollution Control and good engineering practices as required by the above referenced permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons 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 fines and imprisonment for knowing violations.

I further certify that the Mississippi Office of Pollution Control has been notified of any changes pertinent to our storm water permit as required in Part II.C.

Thomas L. Henderson	Thomas L. Henderson	1-21-98
Authorized Name (Print)	**Signature**	**Date**

These reports shall be submitted annually, as required in the permit, to:

Chief, Industrial Branch
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385

cility Name/Location if different)
AME
DDRESS
P O BOX 160
TIE PLANT, MS 38960
ACILITY KOPPERS INDUSTRIES, INC.
OCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #1 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

Page 1 - first 30 minute sample

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	98	1.	1	TO	98	12	31.
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.22	S.U.			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report			1/yr	grab
TS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				12	mg/l			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

AME/TITLE PRINCIPAL EXECUTIVE OFFICER
Plant Manager
Thomas L. Henderson
TYPED OR PRINTED

I CERTIFY UNDER 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 SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years)

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	99	01	22
AREA CODE	NUMBER	YEAR	MO	DAY

OMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
eport storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

ADDRESS P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MSR220005

(17-19) DISCHARGE NUMBER: #2

Form Approved
OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
98	1	1	98	12	31

Page 1 - first 30 minute sample

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.25				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				1.6				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601, NUMBER 226-4584

DATE: YEAR 99, MO 1, DAY 22

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

ADDRESS P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #3 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
98	1	1	98	12	31

Page 1 - first 30 minute sample

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.52				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				6				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				1.6				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Thomas L. Henderson / Plant Manager
TYPED OR PRINTED

I CERTIFY UNDER 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 SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
601	226-4584	99	1	22

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

ADDRESS P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MSR220005

(17-19) DISCHARGE NUMBER: #4

Form Approved
OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
98	1.	1	98	12	31

Page 1 - first 30 minute sample

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.37				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				47				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				3				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.086				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Thomas L. Henderson / Plant Manager
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
601	226-4564	99	1	22

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

DISCHARGE MONITORING REPORT (DMR)

ADDRESS P O BOX 160
TIE PLANT, MS 38960

FACILITY KOPPERS INDUSTRIES, INC.

LOCATION TIE PLANT, MS

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #5 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	98	1	1	TO	98	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page 1 - first 30 minute sample

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.79				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				17				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				5.6				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.053				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.749				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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 SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
601	226-4584	99	1	22

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

ADDRESS P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MSR220005

(17-19) DISCHARGE NUMBER: #6

Form Approved
OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
98	1.	1	98	12	31

Page 1 - first 30 minute sample

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				6.59				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				12				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				3.2				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.887				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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 SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years)

Thomas L Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
601	226-4584	99	1	22

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

ADDRESS P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #7 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

Page 1 - first 30 minute sample

MONITORING PERIOD	YEAR	MO	DAY
FROM	98	1	1
	(20-21)	(22-23)	(24-25)
TO	98	12	31
	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				6.87				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				2				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				1.5				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.228				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
601	226-4584	99	1	22

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

NAME (if different)

ADDRESS P O BOX 160
TIE PLANT, MS 38960

FACILITY KOPPERS INDUSTRIES, INC.

LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #1 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

Page 3 - three hour composite

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	98	1	1	TO	98	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				18				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr.	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr.	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
601	226-4584	99	1	22

MENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

port storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

NAME
ADDRESS P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #2 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

Page 3 - three hour composite

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
98	1	1	98	12	31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				13	mg/l		1/yr	comp.
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report				
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	comp.
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Thomas L. Henderson / Plant Manager
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 226-4584

DATE: YEAR 99 MO 1 DAY 22

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

NAME
ADDRESS P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #3 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

Page 3 - three hour composite

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
98	1	1	98	12	31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				13				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas L. Henderson / Plant Manager
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 — NUMBER 226-4584

DATE: YEAR 99 — MO 1 — DAY 22

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

NAME
ADDRESS P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #4 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

Page 3 - three hour composite

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
98	1	1	98	12	31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				27	mg/l			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l			
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report			1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L Henderson/Plant Manager
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
601	226-4584	99	1	22

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

Facility Name/Location if different)
NAME
ADDRESS
P O BOX 160
TIE PLANT, MS 38960
FACILITY ~~KOPPERS INDUSTRIES, INC.~~
LOCATION ~~TIE PLANT, MS~~

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
MSR220005	#5

Form Approved
OMB No. 2040-0004

Page 3 - three hour composite

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	98	1	1	TO	98	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				50				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.485				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
601	726-4584	99	1	22

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

NAME

ADDRESS P O BOX 160
TIE PLANT, MS 38960

FACILITY ~~KOPPERS INDUSTRIES, INC.~~
LOCATION ~~TIE PLANT, MS~~

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #6 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

Page 3 - three hour composite

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	98	1	1	TO	98	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	(54-61) AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				19				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
NTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.705				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson / Plant Manager

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	99	1	22
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

Facility Name/Location if different)
NAME
ADDRESS P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER (2-16): MSR220005

DISCHARGE NUMBER (17-19): A7

Form Approved
OMB No. 2040-0004

Page 3 - three hour composite

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	98	10	1	TO	98	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				3				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.395				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L Henderson / Plant Manager
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	99	1	22
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

Part VII.

Inspection Report and Certification Form For Storm Water Pollution Prevention Plan Evaluation

Wood Treater Storm Water General NPDES Permit No. MSR220005

(Please Print)

Owner and/or Operator: Koppers Industries Inc.

Facility Name: Same

Facility Location: 543 Tie Plant Road, Tie Plant, MS, 38960

Date and Time: 11-8-96 9:00 AM

Inspector(s): Michael Sylvester

Date of Last Rainfall: 11-7-96 Estimated Amount: 2.1"

Deficiencies Noted During the Inspection (attach additional sheets if necessary):

None

Corrective Action Needed (attach additional sheets if necessary):

None

Corrective Action Compliance Schedule:

—

Based upon this inspection which I or personnel under my direct supervision conducted, I certify that all pollution control measures are adequate and have been implemented and maintained, except for those deficiencies noted above, in accordance with the Storm Water Pollution Prevention Plan filed with the Office of Pollution Control and good engineering practices as required by the above referenced permit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons 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 fines and imprisonment for knowing violations.

I further certify that the Mississippi Office of Pollution Control has been notified of any changes pertinent to our storm water permit as required in Part II.C.

Thomas L. Henderson — Authorized Name (Print)

Thomas L. Henderson — Signature

RECEIVED — Date

These reports shall be submitted annually, as required in the permit, to:

Chief, Industrial Branch
Office of Pollution Control
P.O. Box 10385
Jackson, Mississippi 39289-0385

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME

ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960

FACILITY ~~KOPPERS INDUSTRIES, INC.~~

LOCATION ~~TIE PLANT, MS~~

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #1 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	1	1	TO	97	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page 3 - ~~three hour composite~~ Composite for site #1

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				22	mg/l		1/yr	comp.
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report				
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0	mg/l		1/yr	comp.
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Thomas L Henderson

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 — NUMBER 226-4584

DATE: YEAR 98 — MO 01 — DAY 19

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-3-97 Approx 7½ hrs Total Rainfall = 1.05" Total Discharge = .0056 MGD

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME

ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960

FACILITY ~~KOPPERS INDUSTRIES, INC.~~

LOCATION ~~TIE PLANT, MS~~

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
MSR220005	#1

Form Approved
OMB No. 2040-0004

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	1	1	TO	97	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page 1 - ~~first 30 minute sample~~ Grab for site #1

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				7.29				
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		report	XXXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				78				
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		XXXXXXX	XXXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				1.6				
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		XXXXXXX	XXXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				0				
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		XXXXXXX	XXXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				0				
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		XXXXXXX	XXXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	276-4584	98	01	19
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-3-97 thru 12-3-97 Approx 7½hrs, Total Rainfall 1.05", Total Discharge = .0056 MGL

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME

ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960

FACILITY ~~KOPPERS INDUSTRIES, INC.~~

LOCATION ~~TIE PLANT, MS~~

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
MSR220005	#2

Form Approved
OMB No. 2040-0004

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	1	1	TO	97	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page 1 - ~~first 30 minute sample~~ Grab for site #2 (Pond)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.16				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				43				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				1.0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.088				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
601	226-4587	98	01	19

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-3-97, approx 7½ hrs, Total Rainfall = 1.05" Total Discharge = .0044 MGD

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME

ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960

FACILITY ~~KOPPERS INDUSTRIES, INC.~~

LOCATION ~~TIE PLANT, MS~~

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
MSR220005	#3

Form Approved
OMB No. 2040-0004

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	1	1	TO	97	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page 1 ~~- first 30 minute sample~~
Grab for site #3

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				7.53				
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		report	XXXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				18				
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		XXXXXXX	XXXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				3.4				
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		XXXXXXX	XXXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				.054				
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		XXXXXXX	XXXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				0				
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		XXXXXXX	XXXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas C. Henderson

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas C. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	98	01	19
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-3-97, approx 7½ hrs, Total Rain Fall = 1.05", Total Discharge = .001 MGD

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME

ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960

FACILITY ~~KOPPERS INDUSTRIES, INC.~~
LOCATION ~~TIE PLANT, MS~~

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
MSR220005	#3

Form Approved
OMB No. 2040-0004

Page 3 - ~~three hour composite~~ composite for site #3

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	1	1	TO	97	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				76				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Thomas L. Henderson
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
601	226-9584	98	01	19

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-3-97, Approx 7½ hrs, Total Rainfall, 1.05", Total Discharge = .001 MGD

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME
ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960
FACILITY ~~KOPPERS INDUSTRIES, INC.~~
LOCATION ~~TIE PLANT, MS~~

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #4 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	1	1	TO	97	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page 1 ~~- first 30 minute sample~~
Grab for site #4 (pond)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				8.50				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				44				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				5.1				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.054				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	726-4584	98	01	19
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-3-97, approx = 7½ hrs, Total Rainfall = 1.05" Total Discharge = .0084 MGD

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME

ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960

FACILITY ~~KOPPERS INDUSTRIES, INC.~~
LOCATION ~~TIE PLANT, MS~~

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #5 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

Page 1 - ~~first 30 minute sample~~
Grab for site #5 (pond)

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	1	1	TO	97	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.54				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				212				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				4.3				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.176				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	98	01	19
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-3-97 Approx. 7½ hrs, Total Rainfall = 1.05", Total Discharge = .0091 MGD

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME

ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960

FACILITY ~~KOPPERS INDUSTRIES, INC.~~

LOCATION ~~TIE PLANT, MS~~

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
MSR220005	#6

Form Approved
OMB No. 2040-0004

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	1	1	TO	97	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page ~~1 - first 30 minute sample~~
Grab for site #6 (pond)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				6.89				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				27				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				4.5				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				.062				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	98	01	19
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-3-97, Approx. 7½", Total Rainfall = 1.05", Total Discharge = .0033 MGD

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME

ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960

FACILITY ~~KOPPERS INDUSTRIES, INC.~~
LOCATION ~~TIE PLANT, MS~~

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16)	(17-19)
MSR220005	#7
PERMIT NUMBER	DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	1	1	TO	97	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page ~~1 - first 30 minute sample~~
Grab for site #7 (Pond)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				7.65				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				44				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				2.5				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX				0				
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-4584	98	01	19
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-3-97 Approx - 7½ hrs, Total Rainfall = 1.05" Total Discharge = .0046 MGD

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME

ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960

FACILITY ~~KOPPERS INDUSTRIES, INC.~~

LOCATION ~~TIE PLANT, MS~~

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 — PERMIT NUMBER

(17-19) #8 — DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	1	1	TO	97	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page 1 - first 30 minute sample
Grab sample results from (pond #2) Representative of Pond #8

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				7.16				
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		report	XXXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				43				
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		XXXXXXX	XXXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				1.0				
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		XXXXXXX	XXXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				.088				
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		XXXXXXX	XXXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				0				
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		XXXXXXX	XXXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Thomas L. Henderson

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	226-9584	98	01	19
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-3-97, Approx 7 1/2 hrs Total Rainfall = 1.05", Total Discharge = .0008 MGD

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME

ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960

FACILITY ~~KOPPERS INDUSTRIES, INC.~~
LOCATION ~~TIE PLANT, MS~~

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
MSR220005	#9

Form Approved
OMB No. 2040-0004

Grab sample results from (pond #2)
~~Page 1 - first 30 minute sample~~
Representative of pond #9

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	1	1	TO	97	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				7.16	S.U.			
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		report	XXXXXX	report			1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				43	mg/l			
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				1.0	mg/l			
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				.088	mg/l			
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX				0	mg/l			
	PERMIT REQUIREMENT	XXXXXXX	XXXXXXX		XXXXXX	XXXXXX	report			1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Thomas L. Henderson
TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

Thomas L. Henderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
601	226-4584	98	01	19

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

12-3-97, approx 7½ hrs, Total Rainfall = 1.05", Total Discharge = .0037 MGD

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME

ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960

FACILITY ~~KOPPERS INDUSTRIES, INC.~~

LOCATION ~~TIE PLANT, MS~~

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

MAILED 1-31-97

Form Approved
OMB No. 2040-0004

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
MSR220005	

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	1	1	TO	97	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page 1 - first 30 minute sample

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME: RONALD P. MURPHEY
ADDRESS: P O BOX 160
TIE PLANT, MS 38960
FACILITY: KOPPERS INDUSTRIES, INC.
LOCATION: TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
MSR220005	

Form Approved
OMB No. 2040-0004

Page 3 - three hour composite

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	1	1	TO	97	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (*Reference all attachments here*)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

FILE COPY

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

July 18, 1994

Mr. Ronald P. Murphey
Koppers Industries, Inc.
P. O. Box 160
Tie Plant, Mississippi 38960

Dear Mr. Murphey:

Re: 1994 Discharge Monitoring Report (DMR) Forms for Storm Water Sampling Results Under Wood Treater General Storm Water Permit Permit Coverage Number MSR220005

Mississippi's Wood Treater Storm Water General Permit requires that you sample your storm water runoff as outlined in Part IV.C. Enclosed are DMR forms which should be used to report sample results for both the grab and composite samples. A copy of the completed DMR forms must be returned to our office by January 28, 1995.

Only one outfall need be sampled if it is representative of all storm water outfalls. If more than one outfall will be sampled, please make copies of the enclosed forms for the additional outfall(s). The outfall sampled should be identified on each DMR form.

We appreciate your attention to your storm water permit. Please let us know if you have any questions.

Sincerely,

Louis Lavallee, P.E., Chief
Industrial Storm Water Section

LL:ap
Enclosures

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if different*)
NAME
ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (*NPDES*)
DISCHARGE MONITORING REPORT (*DMR*)

(2-16) PERMIT NUMBER: MSR220005
(17-19) DISCHARGE NUMBER:

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	1	1	TO	94	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page 1 - first 30 minute sample

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		report	XXXXXX	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (*Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.*)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE | NUMBER

DATE: YEAR | MO | DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (*Reference all attachments here*)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if different*)
NAME
ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MSR220005
(17-19) DISCHARGE NUMBER:

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Page 2 - three hour composite

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	1	1	TO	94	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	XXXXXX	XXXXXX		XXXXXX	XXXXXX	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319 (*Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.*)

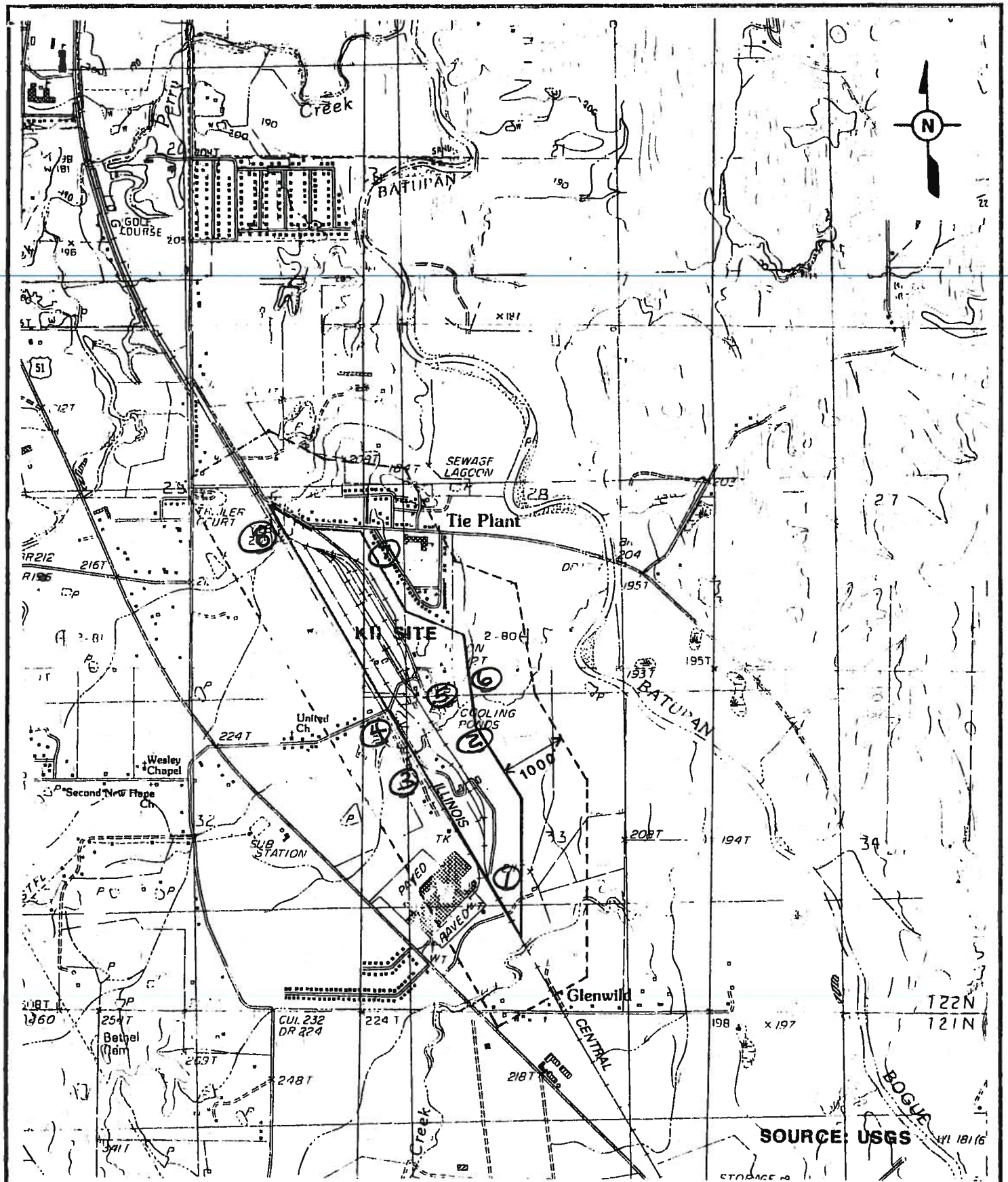
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE | NUMBER

DATE: YEAR | MO | DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (*Reference all attachments here*)

Report storm date and duration (hours); estimated rainfall (inches) & total discharge (gals)



KOPPERS INDUSTRIES, INC. GRENADA, MISSISSIPPI	**Woodward-Clyde Consultants** Consulting Engineers, Geologists and Environmental Scientists Baton Rouge, Louisiana	SITE LOCATION AND SURFACE FEATURES	FILE NO. 91B432C
	SCALE: 1" = 2000' / DRAWN BY: KPQ / DATE: 07/01/92 / CHKD. BY: A. Duhon / DATE: 6/7/92		FIG. NO. 4

KOPPERS INDUSTRIES

Koppers Industries, Inc.
436 Seventh Avenue
Pittsburgh, PA 15219-1800

Telephone: (412) 227-2001
FAX: (412) 227-2423

RECEIVED
SEP 25 1992
Dept. of Environmental Quality
Office of Pollution Control

September 25, 1992

via FEDERAL EXPRESS

Mississippi Department of Environmental Quality
Office of Pollution Control
P. O. Box 10385
Jackson, MS 39289-0385

RE: **Wood Treater Notice of Intent (WNOI)**

Enclosed is the Notice of Intent for Koppers Industries, Inc. wood preserving plant at Tie Plant, Ms. for coverage under the wood treater storm water general NPDES permit.

Please call me at (412)227-2677 or Ron Murphey, Plant Manager, at (602)226-4584 if you have questions.

Sincerely,

Stephen T. Smith

Stephen T. Smith
Environmental Program Manager

cc: Ron Murphey, Grenada, MS

File Wood Treating #5

KOPPERS INDUSTRIES

Koppers Industries, Inc.
436 Seventh Avenue
Pittsburgh, PA 15219-1800

Telephone: (412) 227-2001

via Express Mail

March 1, 1994

~~David Peacock~~
Hazardous Waste Division
Department of Environmental Quality
P.O. Box 10385
Jackson, MS 39289-0385

Jaqualine Jack
U. S. EPA Region 4
RCRA and Federal Facilities Branch
Second Floor
345 Courtland Street
Atlanta, GA 30365

Re: Koppers Industries, Inc. Grenada Plant, Storm Water Pollution Prevention Plan, MSD 007 027 543

Mississippi Hazardous Waste Permit No. 88-543-08 and U. S. EPA HSWA Permit

Dear Mr. Peacock and Ms. Jack:

I have written to you previously, on June 9, 1993 and July 6, 1993 on this subject and provided conceptual information about Koppers plans to implement our Storm Water Pollution Prevention Plan (SWPPP). Since then, Ms. Jack indicated to me by phone that more detailed plans were required before potential conflicts with the RCRA investigation and possible corrective action could be evaluated. Additionally, she indicated that if any Solid Waste Management Units (SWMUs) would be within the storm water project areas, then those SWMUs would first have to be closed.

Based on this response, I asked our engineer, Willis Engineering, to complete a detailed design of the storm water project that would locate and avoid all known SWMUs. Additionally, he was directed to clear brush to allow an accurate survey and to check for any unknown SWMUs within the planned construction area.

This work has now been completed. Enclosed is the design for storm water improvements which will implement Koppers' SWPPP. This work has been designed to not involve any of the known SWMUs within the construction zones. SWMUs near the improvements have been physically located and marked on the construction plans. Additionally, they will be clearly marked during construction so that contractor's equipment can easily avoid those areas.

Mr. Peacock, MS DEQ, and Ms. Jack, EPA Reg. 4
RE: Koppers Industries, Inc. Pollution Prevention Plan
March 2, 1994

Soil and Debris Management

Because clearing has already been completed in all areas of significant planned construction and no stained soil or other waste was detected, we are confident that this project can proceed without discovery of unknown SWMUs or other surprises. However, the following procedures will assure that solid or hazardous wastes are not mishandled:

1. Soil excavation, by design, will be minimal. Where required, excavated soil will either be used to construct the berms required for this project or will be used as fill within the Koppers plant. No soil excavated from Koppers will be moved off of Koppers property.

2. If any soil that is excavated is visibly stained with wood preservative, it will be managed as hazardous waste, F032/F034, and will be disposed off-site in a permitted facility.

3. If excavation reveals conditions likely to be an unknown SWMU, then work in that area will be stopped. No more work will be completed in that area until after adequate investigation and approval by your agencies.

4. Since all construction areas have already been cleared, no debris is expected to be encountered. If debris is encountered, such as buried concrete or treated wood, that would indicate a SWMU and provisions of 3 above will apply.

Koppers believes that we can proceed with this project without any impact on the anticipated RCRA activities and without any conflict with the existing RCRA permit. Although no RCRA facilities, SWMUs, or other facilities used for treatment, storage, or disposal of solid waste will be involved or changed by this work, Koppers is hereby providing notice of planned facility changes under section I.D.10 of the Mississippi and EPA RCRA permits. I understand that under this situation, no written approval of this plan is required. However, I will call each of you soon to discuss this work and to resolve any remaining concerns you may have. A meeting at the plant will be arranged if so requested.

As long as no problems arise which cannot be resolved, Koppers plans to advertize this project for construction bids during March and hopes that construction can begin in April. Please call me at (412)227-2677 if you have questions.

Sincerely,

Stephen T. Smith

Stephen T. Smith
Environmental Program Manager
Koppers Industries, Inc.

cc with attachment:
Louis Lavallee, Chief, Industrial Storm Water Section, DEQ
Robert S. Markwell, Beazer East, Inc. K-1101
Ron Murphey, KII, Grenada, MS

cc without attachment:
J. R. Batchelder, KII, K-1701
R. S. Ohlis, KII, K-1750
W. R. Donley, KII, K-1750
Billie Flaherty, BEI, K-1001
Terry Faye, BEI, K-1001

file
Woodtreater
#5

KOPPERS INDUSTRIES

Koppers Industries, Inc.
436 Seventh Avenue
Pittsburgh, PA 15219-1800

Telephone: (412) 227-2001
FAX: (412) 227-2423

December 10, 1993

Louis Lavallee, Chief
Industrial Storm Water Section
Mississippi Dept. of Environmental Quality
P. O. Box 10385
Jackson, MS 39289-0385

RE: General Permit No. MSR 220 005

Dear Mr. Lavallee:

As Ron Murphey and I discussed with you today, Koppers Industries Inc. (Koppers) has prepared a Pollution Prevention Plan for our facility in Tie Plant, MS. This plan includes the construction of several detention basins and consolidation of various discharges. Our facility also has a RCRA facility investigation underway under supervision of the U.S. EPA. Thus, all work planned to comply with the PPP must be first approved by the EPA. At this point, we have completed a conceptual plan, done clearing and field surveying, and final design is underway. Thus, we have not been able to sample storm water runoff and will not be able to submit the discharge monitoring report due by January 28.

We expect the final design to be ready for EPA review by the end of January. If the design is approved, a construction contract could be issued in February and all work could be completed by June. Thus, we now expect that the first storm water sampling event can take place in June, 1994. Results of that sampling will be reported as soon as available, likely in July, 1994.

Please call me at (412)227-2677 if you have questions.

Sincerely,

Stephen T. Smith

Stephen T. Smith
Environmental Program Manager

cc: Ron Murphey, Grenada MS plant
J. R. Batchelder, K-1701
W. R. Donley, K-1750

DEC 17 1993
Dept. of Environmental Quality
Office of Pollution Control

file
Wood treater
5

RECEIVED
OCT - 7 1993
Dept. of Environmental Quality
Office of Pollution Control

October 5, 1993

Louis Lavallee, Chief
Industrial Storm Water Section
State of Mississippi
Department of Environmental Quality
P.O. Box 10385
Jackson, MS 39289-0385

Dear Mr. Lavallee:

Re: Delay in construction according to plan submitted.
General NPDES Permit MSR220005

This is confirm our conversation on Sept. 23, 1993, concerning our delay in the construction according to our permitted outfalls. Due to some correspondence with EPA Region 4 and the time delay in their response to our modifications, we have fallen behind in our construction efforts. We are sorry for any inconvience this might bring about. We are do not see any further problems with the implication of this permit.

If there are any questions or if we can be of any assistance, please contact Ronald P. Murphey, plant manager or myself at any time.

Sincerely,

Mark T. Good

Mark T. Good
Environmental/OH&PS Supervisor
Koppers Industries, Inc.
Tie Plant, MS

c: R.P. Murphey, Grenada
Steve Smith, K-1800

FILE COPY

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

June 11, 1993

Mr. Ronald P. Murphey
Koppers Industries, Inc.
P.O. Box 160
Tie Plant, Mississippi 38960

Dear Mr. Murphey:

Re: Storm Water Wood Treater Permit MSR220005
Storm Water Pollution Prevention Plan (SWPPP)
Koppers Industries, Inc., Grenada County

We received your Pollution Prevention Plan (SWPPP) on April 5, 1993, and find that it contains the essential elements required by Mississippi's Storm Water General NPDES Permit.

The plan will be further reviewed whenever we make a compliance inspection. The Office of Pollution Control reserves the right to request the plan be modified as needed. You should also review and modify the plan as needed. All significant modifications to the plan must be submitted to the Office of Pollution Control.

We appreciate your attention to the new storm water regulations. Please let us know if you have any questions.

Respectfully,

Louis Lavallee, P.E., Chief
Industrial Storm Water Section

LL:ap
cc: Jon Balserak, OPC

KOPPERS INDUSTRIES

Koppers Industries, Inc.
P.O. Box 160
Tie Plant, MS 38960

Telephone: (601) 226-4584
FAX: (601) 226-4586

Chief, Industrial Wastewater Branch
Office of Pollution Control
Department of Environmental Quality
P.O. Box 10385
Jackson, MS 38289-0385

Certified Mail # p140485493

RE: NPDES Premit # MSR220005
Pollution Prevention Plan

Dear Sir:

Please find enclosed the Pollution Prevention Plan for Koppers Industries, Inc. Grenada, MS plant. We have incorperated the plan into our Contingency, SPCC plans to simplify our records.

If there are any questions or comments, please direct them to Ronald P. Murphey, Grenada plant manager or Mark T. Good, Environmental supervisor at the above phone number.

Sincerely,

Mark T. Good

Mark T. Good
Environmental/Safety Supervisor

MSR220005

APR 1993
RECEIVED
DEQ - OPC

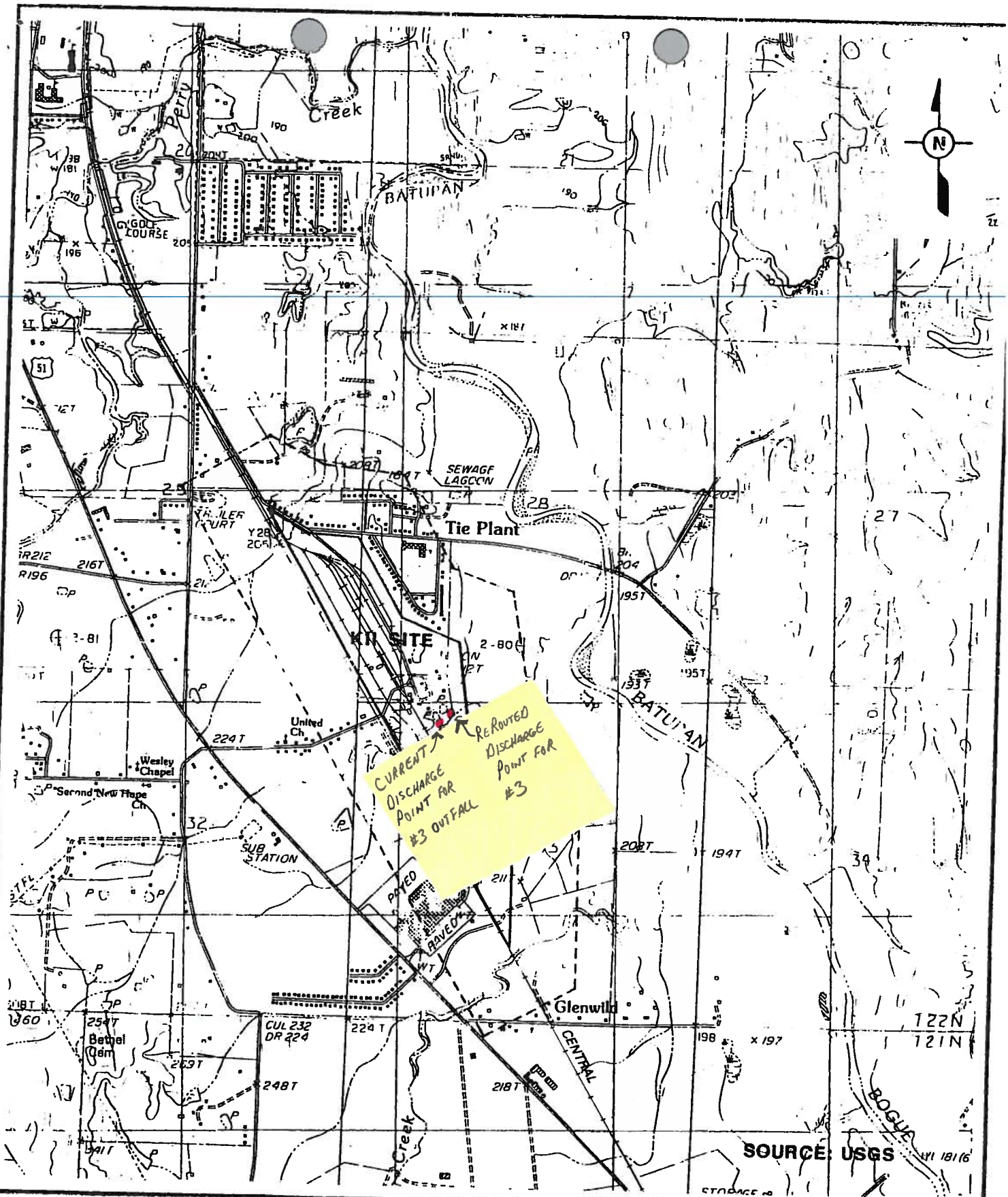
CONTINGENCY, SPCC, AND

POLLUTION PREVENTION PLAN

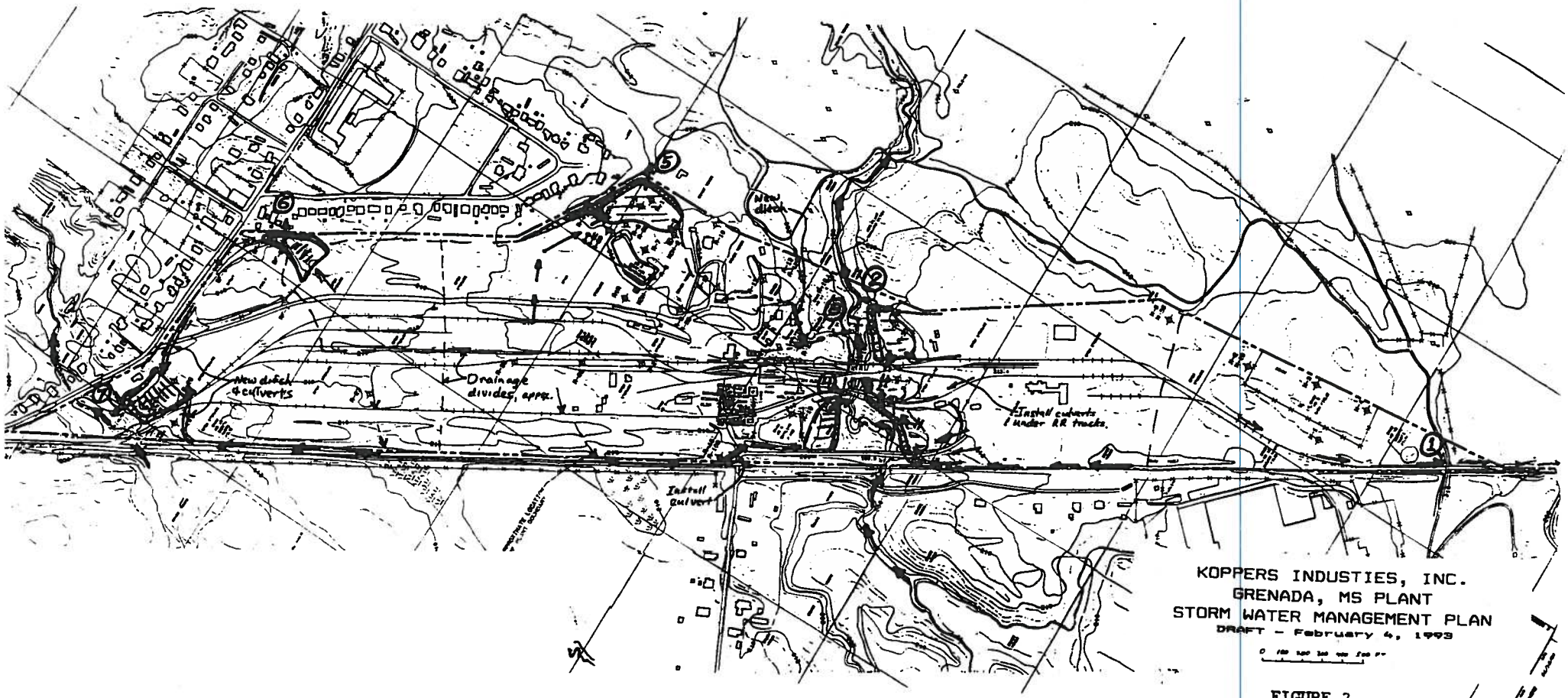
KOPPERS INDUSTRIES, INC.

GRENADA PLANT

TIE PLANT, MS



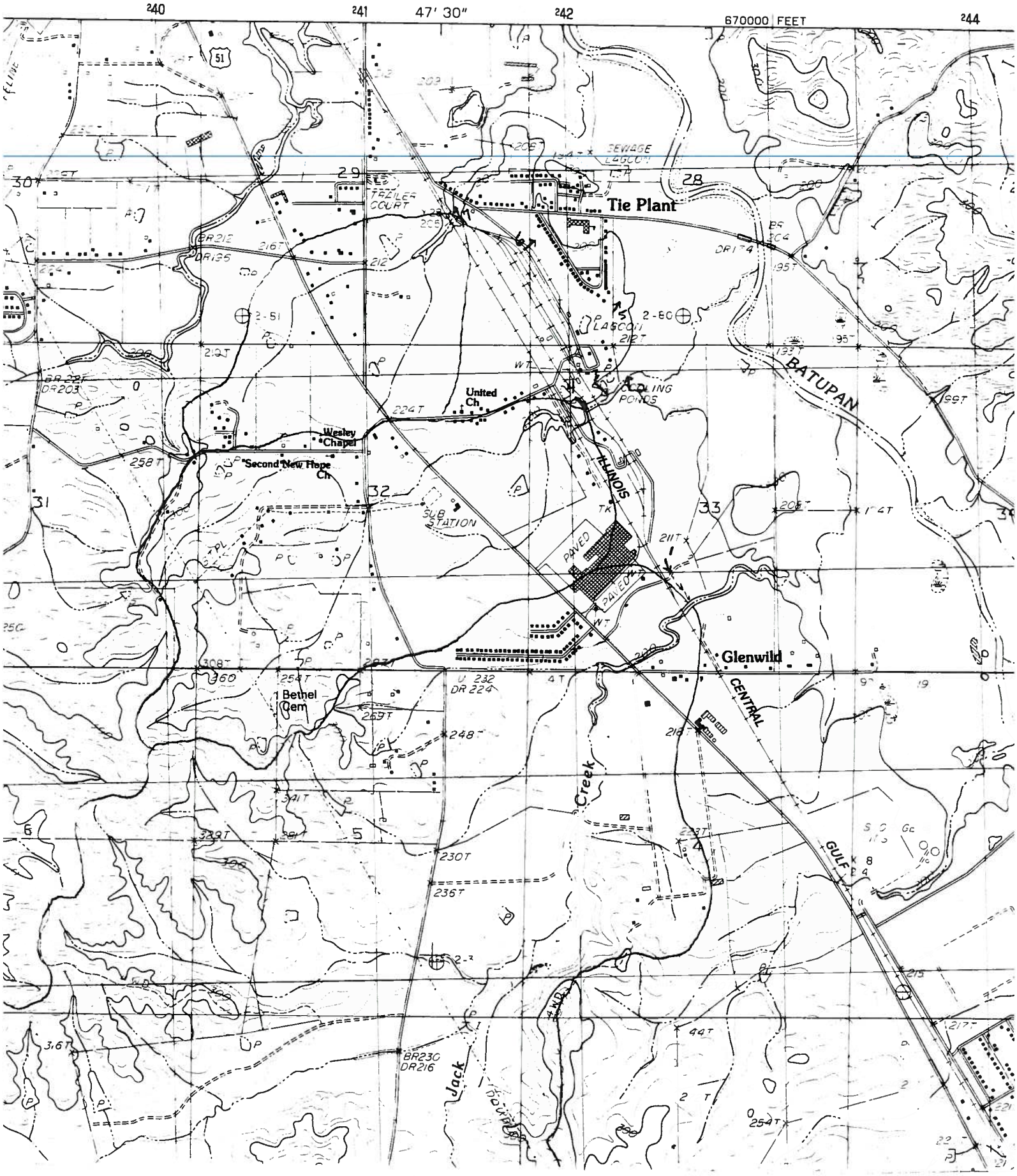
KOPPERS INDUSTRIES, INC. GRENADA, MISSISSIPPI	Woodward-Clyde Consultants Consulting Engineers, Geologists and Environmental Scientists Baton Rouge, Louisiana	SITE LOCATION AND SURFACE FEATURES	FILE NO. 91B432C
	SCALE: 1" = 2000' / DRAWN BY: KPQ / DATE: 07/01/92 / CHKD. BY: A. Duhon / DATE: 6/5/92		FIG. NO. 4



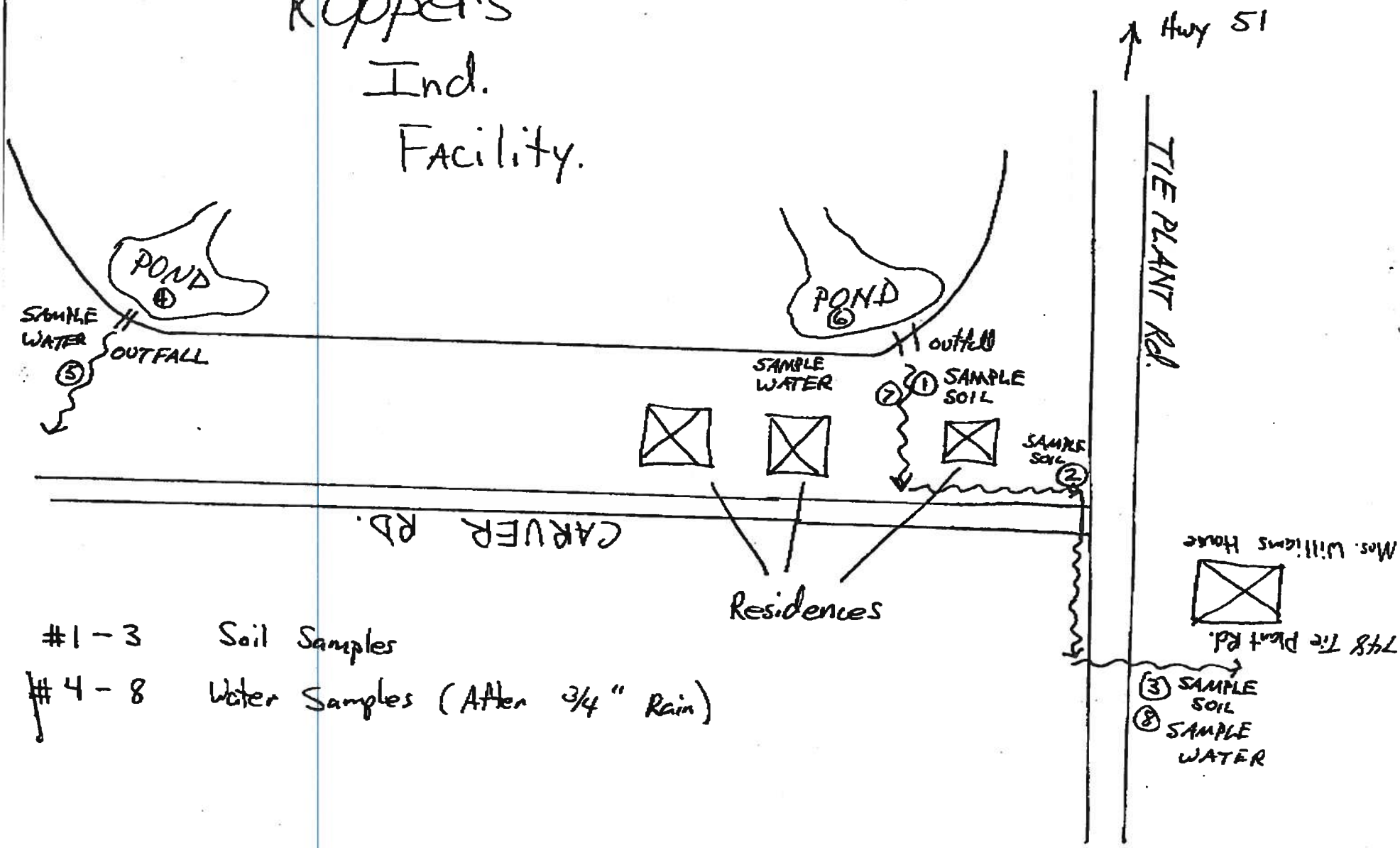
KOPPERS INDUSTIES, INC.
GRENADA, MS PLANT
STORM WATER MANAGEMENT PLAN
DRAFT - February 4, 1993

FIGURE 2

TIE PLANT Q
MISSIS
7.5 MINUTE SERIE

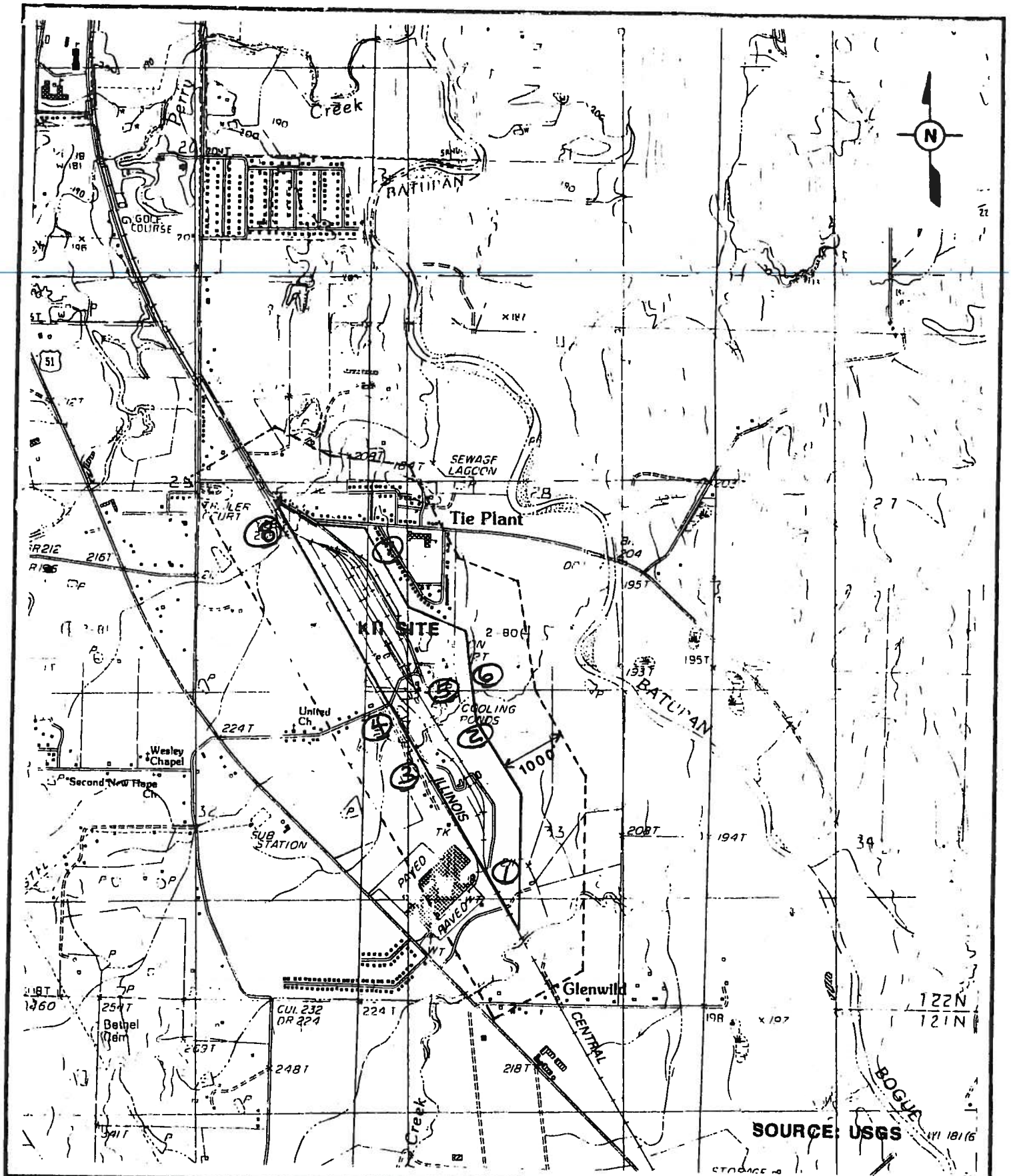


Koppers Ind. Facility.



#1 – 3 Soil Samples

#4 – 8 Water Samples (After 3/4" Rain)



KOPPERS INDUSTRIES, INC. GRENADA, MISSISSIPPI	**Woodward-Clyde Consultants** Consulting Engineers, Geologists and Environmental Scientists Baton Rouge, Louisiana	SITE LOCATION AND SURFACE FEATURES	FILE NO. 91B432C
	SCALE: 1" = 2000' / DRAWN BY: KPQ / DATE: 07/01/92 / CHKD. BY: A. Duhon / DATE: 6/7/92		FIG. NO. 4

State of Mississippi
Water Pollution Control

STORMWATER

WOOD TREATER GENERAL PERMIT

TO DISCHARGE STORM WATER IN ACCORDANCE WITH THE

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM

THIS CERTIFIES THAT

facilities granted a *Certificate of Permit Coverage* under this permit are granted permission to discharge

storm water associated with industrial activity

into

state waters

in accordance with discharge limitations, inspection requirements and other conditions set forth in Parts I through VII hereof. This permit is issued in accordance with the provisions of the Mississippi Water Pollution Control Law (Section 49-17-1 et seq., Mississippi Code of 1972), and the regulations and standards adopted and promulgated thereunder, and under authority granted pursuant to Section 402(b) of the Federal Water Pollution Control Act.

MISSISSIPPI ENVIRONMENTAL QUALITY PERMIT BOARD

HEAD, OFFICE OF POLLUTION CONTROL
MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

Permit Issued: July 14, 1992

Permit Modified: November 24, 1992

Permit Expires: July 13, 1997

Permit No. MSR22

f. **Salt Storage.** Storage piles of salt shall be enclosed or covered to prevent exposure to precipitation, unless all storm water is collected and used in the industrial process.

Part IV. Non-Numeric Limitations, Inspections, Monitoring and Reporting

A. **Storm water discharges shall be free from:**

1. debris, oil, scum, and other floating materials other than in trace amounts.

2. eroded soils and other materials that will settle to form objectionable deposits in receiving waters;

3. suspended solids, turbidity and color at levels inconsistent with the receiving waters;

4. chemicals in concentrations that would cause violation of State Water Quality Criteria in the receiving waters.

B. **Inspections:** During coverage under this permit, all areas contributing to storm water discharges associated with industrial activity must be inspected as often as needed but no less than once annually. The inspection must evaluate whether the storm water pollution prevention plan adequately minimizes pollutant loadings and is properly implemented in accordance with the terms of this permit or whether additional control measures are needed.

C. **Monitoring Requirements:** During coverage under this permit, storm water discharges associated with industrial activity from wood treatment, surface application or associated storage facilities are subject to the following monitoring requirements:

1. **Parameters.** The parameters to be measured include: pH and TSS (mg/l). In addition: the date and duration (in hours) of the storm(s) sampled; rainfall measurements or estimates (in inches) of the storm which generated the sampled runoff; the duration between the storm sampled and the end of the previous measurable (greater than 0.1 inch rainfall) storm; and an estimate of total discharge (gal.) for the storm sampled shall be provided;

2. **Additional parameters (all in mg/l) for facilities using:**

Creosote	Pentachlorophenol	CCA
Oil & Grease	Oil & Grease	Total Arsenic
Total Phenols	Total Phenols	Total Chromium
	Pentachlorophenol	Total Copper

3. **Frequency of Monitoring.** Sampling shall be conducted at least annually (1 time per year) except as provided by paragraph IV.C.4 or IV.C.6. Sampling should be done early in the year to avoid weather conditions that may prevent sampling.

4. **Monitoring Exemptions.** If two consecutive annual samplings show concentrations are below the indicated value (within range for pH) then monitoring for these parameters may be discontinued. Otherwise monitoring must continue.

pH..... between 6.0 and 8.5 S.U.
Total Suspended Solids..... 50.0 mg/l
Total Arsenic..... 0.19 mg/l
Total Chromium..... 0.12 mg/l
Total Copper..... 0.01 mg/l
Oil & Grease..... 5.0 mg/l
Pentachlorophenol..... 0.02 mg/l
Total Phenols..... 0.10 mg/l

5.8.3 Outfall Information Summary

OUT-FALL NO.	LOCATION	INDUSTRIAL OPERATIONS IN RUNOFF AREA	AREA AND RUNOFF COEF.	SAMPLING METHODS
1	South end of south yard	Treated and untreated wood storage, closed ash landfill	15.9 Acres C= 0.3	report outfall 2 data
2	North end of south yard	Treated and untreated wood storage, switch tie mill	25.2 Acres C= 0.3	composite grab from detention pond
3	Maintenance shop area	Vehicle and equipment maintenance, washing	2.8 Acres C= 0.5	30 min. grab + composite from ditch
4	Southwest 1/4 of north yard	Treated and untreated wood storage, hazardous waste storage, boiler, wood treating process, preservative tanks, cooling water pond	24.1 Acres C= 0.3	composite grab from detention pond
5	Southeast 1/4 of north yard	Treated and untreated wood storage, dry kiln, truck loading, closed surface impoundment	26.2 Acres C= 0.3	composite grab from detention pond
6	Northeast 1/4 of north yard	Treated and untreated wood storage	9.5 Acres C= 0.3	report outfall 5 data
7	Northwest 1/4 of north yard	Treated and untreated wood storage, pole peeler, bark storage	13.2 Acres C= 0.3	composite grab from detention pond

CONTINGENCY, SPILL PREVENTION,
CONTROL AND COUNTERMEASURES (SPCC)
AND
POLLUTION PREVENTION PLAN
KOPPERS INDUSTRIES, INC.
GRENADA PLANT
TIE PLANT, MS
April 1, 1993

CERTIFICATION

I hereby certify that I have inspected the subject facility, and being familiar with the provisions of 40 CFR 112 for SPCC requirements and 40 CFR 122 for Storm Water Pollution Prevention requirements, attest that this Plan has been prepared in accordance with good engineering practices.

Stephen T. Smith
Environmental Program Manager
CAL #C27309

Date: 4/1/93

REGISTERED PROFESSIONAL ENGINEER
STEPHEN TRUMAN SMITH
No. C27309
CIVIL
STATE OF CALIFORNIA

MANAGEMENT APPROVAL

I certify under penalty of law that the information contained in this Plan is, to the best of my knowledge, true, accurate and complete. This Plan will be implemented as herein described.

Ronald P. Murphey
Plant Manager

Date: 4/2/93

CONTINGENCY, SPCC, AND POLLUTION PREVENTION PLAN,
GRENADA PLANT, KOPPERS INDUSTRIES

April 1, 1993

TABLE OF CONTENTS

1.0 INTRODUCTION 1
1.1 Facility Location 1
1.2 Operation 1
1.3 Coordinated Emergency Services 1
1.4 SPCC Plan Maintenance 2

2.0 INVENTORY OF OIL AND HAZARDOUS MATERIALS 3
2.1 Discussion 3
2.2 Business Information and Identification 3
2.3 Emergency Contacts/Emergency Coordinators 4
2.4 Hazardous Materials Inventory 4

3.0 SPILL PREVENTION, CONTROL, AND COUNTERMEASURES 5
3.1 Description 5
3.2 Conformance with SPCC Standards and Guidelines 5
3.3 Inspections and Security 5
3.4 General Plant Spill Prevention 6
3.5 Surface Drainage 6
3.6 Treating Cylinders 7
3.7 Tank Car and Truck Unloading 7
3.8 Tank Farm 7
3.9 Fuel and Lubricating Oil 7
3.10 Oil Water Separator 8
3.11 Biological Waste Water Treatment 8
3.12 Boiler Hazardous Waste Fuel Additive 8
3.13 Hazardous Waste Storage Facility 9
3.14 Planned Improvements Schedule 9

TABLE 3.1 - TANK LISTINGS 10

4.0 EMERGENCY RESPONSE PROCEDURES 11
4.1 General 11
4.2 Emergency Coordinator 11
4.3 Immediate Response 11
4.4 Response Procedures 11
4.5 Emergency Notifications, Reports, and Record Keeping 14
4.5.2 WHAT SPILLS OR INCIDENTS MUST BE REPORTED AND TO WHOM? 15
4.5.3 WHAT SPILLS ARE REPORTABLE? 16
Form 4.1 17
4.6 Available Equipment 20
4.7 Emergency Response Contract Services 20
4.8 Fire and Disaster Response Plans 21
4.9 Medical Emergency Plans 23

5.0 STORM WATER POLLUTION PREVENTION PLAN 24
5.1 General 24
5.2 Pollution Prevention Objectives and Process 24
5.3 Pollution Prevention Team 25
5.4 Description of Potential Sources 25
5.5 Measures and Controls 27

5.6 Comprehensive Site Compliance Evaluations 32
5.7 Special Requirements for EPCRA Section 313 Facilities 32
5.8 Monitoring and Reporting Requirements 33
5.9 Compliance Schedule 36
5.10 Record Keeping 36

6.0 TRAINING 37

SITE PLAN . . . . . Figure 1

STORM WATER MANAGEMENT PLAN . . . . . Figure 2

SPILL REPORTS . . . . . APPENDIX A

STORM WATER POLLUTION PREVENTION INSPECTION FORM . . . . . APPENDIX B

NON-STORM WATER EVALUATION AND CERTIFICATION . . . . . APPENDIX C

CONTINGENCY, SPCC, AND POLLUTION PREVENTION PLAN, GRENADA PLANT, KOPPERS INDUSTRIES

April 1, 1993

1.0 INTRODUCTION

This plan has been developed to; a) provide a basis for planning for and responding to potential spills, accidents, fires, or other contingencies and b) describe and implement practices to minimize and control pollutants in storm water discharges and ensure discharge permit compliance. It includes the requirements for the Contingency Plan as required by the Resources Conservation and Recovery Act (RCRA), the Spill Prevention, Control, and Countermeasures (SPCC) Plan and Storm Water Pollution Prevention Plan (SWPPP) of the Clean Water Act, and the inventory reporting requirements of the Emergency Planning and Community Right-to-Know Act (SARA Title III).

Questions concerning this plan may be directed to:

Ron Murphey	Plant Manager	(601) 226-4584
Mark Good	Environmental Supervisor	(601) 226-4584

1.1 Facility Location

The Grenada Plant is located at the unincorporated town of Tie Plant, Mississippi in Grenada County approximately 1/2 mile East of U. S. Highway 51 South on the Tie Plant and Old Carrolton Road. The approximate USGS location is North 330°, 44'04", West 890°, 47'19".

1.2 Operation

The Grenada Plant processes and preserves wood products by the pressure treating process. Creosote coal tar solution and pentachlorophenol in oil are used as preservatives.

1.3 Coordinated Emergency Services

This plan is written to facilitate the quick and efficient coordination of emergency response actions between Koppers Industries Inc. (Koppers) and any emergency response companies or agencies which may be needed. Copies of this plan, and updates, are provided to the following:

U. S. EPA Region IV
Grenada Fire Department
Tie Plant Volunteer Fire Department
Grenada Lake Medical Center
Plant Supervisors

Instructions on how and when to obtain assistance for emergency situations, including agency and contractor phone numbers, are included in section 4 of this plan.

Copies of this plan are available at the following plant locations:

Main Office	Treating Control Room
Service Building	Maintenance Shop

1.4 SPCC Plan Maintenance

This Plan must be kept up to date. Notify your Environmental Program Manager in the event of any change made. Automatic review, evaluation and recertification by a Professional Engineer is required once every three years from the date of the latest certification. This Plan must also be amended whenever there is a change in design, construction, operation or maintenance which materially affects the facility's potential for discharge, and the amendment fully implemented as soon as possible and no later than within six months.

A copy of this Plan is to be maintained in the plant's office. All changes to the Plan must be maintained in the same manner.

1.5 SWPPP Maintenance

The pollution prevention section of this plan may require revisions in addition to those described above.

1.5.1 If the SWPPP proves to be ineffective in eliminating or significantly minimizing pollutants in dischares, the plan shall be revised as necessary and changes implemented as soon as practical.

1.5.2 Following a Comprehensive Site Compliance Evaluation in which the need for changes are identified, revise the plan within 2 weeks and implement the changes within 12 weeks of the evaluation.

1.5.3 If toxicity is identified in discharges by the whole effluent toxicity testing after October 1, 1995, evaluate sources of toxicity and develop and implement control plans.

2.0 INVENTORY OF OIL AND HAZARDOUS MATERIALS

2.1 Discussion

Various materials are used at the Koppers facility which are considered hazardous based on the toxicity or flammability of the materials. Such materials may also be listed as Water Priority Chemicals based on their potential to impact water resources. These include preservatives which are used in the industrial processes to pressure treat wood products, unusable waste products from these processes, boiler water treatment chemicals, and fuel and lubricants for plant vehicles and equipment.

2.2 Business Information and Identification

The following information applies to the Koppers Industries Grenada Plant:

Business Name:	Koppers Industries, Inc.
Business Phone:	(601) 226-4584
Owner:	Koppers Industries, Inc. 436 Seventh Ave. Pittsburgh, PA 15219
Operator:	Same as owner.
SIC Code:	2491
EPA ID Number:	MSD007027543
NPDES Permit:	Storm Water General Permit, Wood Treater MSR 220005
Site Address:	Tie Plant & Old Carrolton Road Tie Plant, Mississippi 38960
Mail Address:	P. O. Box 160 Tie Plant, Mississippi 38960
Type of Business:	Wood Preservative Treatment

2.3 Emergency Contacts/Emergency Coordinators

Name/Address	Title	Home Phone
Ron Murphey 331 Forrest Hill Dr., Grenada, MS 38901	Plant Manager	(601) 226-2657
Tommy Henderson 844 S. Line St., Grenada, MS 38901	Treating Supervisor	(601) 226-1884
Mark Good Rt. 3, Box 33, Grenada, MS 38901	Environmental Supervisor	(601) 226-1612
Jim Tiner Rt. 1, Box 166J, Grenada, MS 38901	Maintenance Supervisor	(601) 226-3027
Effie Walker 316 Thomas St., Grenada, MS 38901	Office Manager	(601) 226-1952

The above people can normally be reached during work hours at the business phone number, (601) 226-4584. Additionally, the night shift operator can be reached at (601) 226-4585. Phone numbers for Koppers Industries Corporate Contacts are provided on Page 15.

The plant manager is the Primary Emergency Coordinator (EC) and should be contacted first. If he is not available, the others should be called, in the order listed, until someone is reached. The Primary Emergency Coordinator and alternates have complete authority to commit all necessary resources of the company in the event of an emergency.

During off shifts, holidays, and weekends, the shift foreman will be the acting Emergency Coordinator. As acting EC, he will take actions necessary for the immediate response to an emergency, including notification of one of the above persons, calling for emergency response services, and mobilizing plant personnel and equipment to respond to the incident. The Emergency Coordinator, above, will assume responsibility for implementation upon his arrival at the plant.

2.4 Hazardous Materials Inventory

The primary hazardous materials which are used or stored on the Koppers site are listed by tank in Table 3.1, Tank Listings Table. The tanks and facilities are shown on the site map by number or name.

Additionally, drums of hazardous waste may be stored in the Hazardous Waste Storage Facility. This facility is a metal building with concrete floor and curb. Up to a maximum of 640 drums of wastes from creosote and pentachlorophenol wood preserving processes and waste from the production of phthalic anhydride may be stored in this facility. None of these wastes are incompatible, reactive, or explosive. Such wastes will either be used as fuel additive in the boiler or will be properly disposed off site.

3.0 SPILL PREVENTION, CONTROL, AND COUNTERMEASURES

3.1 Description

This section of the plan provides information specific to the storage and handling of hazardous liquids, spill prevention and containment equipment, and countermeasures to be implemented to control the impact of a spill. The Tank Listings Table, Table 3.1, lists all the tanks used at the Koppers plant by number along with their name, contents, and capacity. Locations can be found for processes and tanks on the site map.

3.2 Conformance with SPCC Standards and Guidelines

This facility meets the minimum requirements for diversionary structures and equipment to prevent discharged oil or hazardous substances from reaching navigable waters as required by 40 CFR 112.7(c) by providing secondary containment for all major tanks and process equipment and with backup of dikes with emergency shut-off gates.

After completion of the specified plant improvements, the facility will also be in conformance with the applicable guidelines of 40 CFR 112.7(e). Rainwater from containment areas either being treated with the process waste water or being inspected prior to discharge. Tank installations are equipped with secondary containment and are regularly inspected by operators. The creosote tank car unloading station is top unloading. Spill prevention details for equipment and processes are discussed more fully below.

3.3 Inspections and Security

The operational areas in the Treating Department are checked hourly by the operator on duty throughout each shift. The work tank area is routinely checked by the treating operator on duty. Any problems or unusual circumstances which can not be immediately resolved are reported to the Supervisor. Problems will be remedied on a schedule which ensures that the problem does not lead to an environmental or human health hazard. Where a hazard is imminent or has already occurred, the emergency response procedures of Section 4 of this plan will be implemented immediately.

In addition to the above routine operational inspections, inspections of specific RCRA facilities are require in accordance with the RCRA Facility Inspection Plans.

Additional security provisions are provided for the RCRA facilities. The Container Storage Facility is an enclosed building. Doors are kept locked when not in use. The Hazardous Waste Boiler areas are either fenced or within an enclosed building and gates and doors are kept locked when the facility is not in use and/or not occupied. Signs are posted at entrances to both facilities stating, "Danger - Unauthorized Personnel Keep Out."

3.4 General Plant Spill Prevention

A hazardous material spill can occur any place, any time. All employees must be prepared to respond immediately to control damage and to notify management. Containing a spill to the smallest area possible is the first step. Containments can quickly be constructed using available equipment and supplies; usually by placing dirt, sand, or sawdust around the lower side of a spill with Koppers leaders. If possible, a spill should be prevented from reaching the surface water drainage, where it will spread more rapidly and have greater environmental and health impact.

Spills are more likely to occur when delivery trucks are unloading into Koppers tanks. Unloading operations should be supervised by employees familiar with the process equipment involved. Buckets or pans should be placed under hose connections to collect drips. Be prepared for hoses and pipes to be full and for liquid to be behind valves. Properly and promptly cleanup any drips or spills. Supervisors must be notified of any spills which are outside of containments. Oil, creosote, and other hazardous material deliveries are made by vehicles complying with DOT spill control regulations. Unloading is supervised by plant operators.

Maintenance, repair and plant modification projects also present a potential for causing spills since work often involves pipes and equipment which cannot be fully stripped of liquids. Workers must plan ahead and expect liquid whenever opening the pipe systems. Collection pans should first be readily available. Collected material must be returned to the processes or be properly containerized for disposal.

3.5 Surface Drainage

Koppers plant surface areas drain toward the Bogue Creek that goes to the Yalobusha River. Most of the process area first drains into either of three drainage ditches before draining to the River. Equipment, including secondary spill containment, has been installed and procedures implemented to prevent oil or hazardous materials from reaching the river. A spill is most likely to occur in the process area and, if not contained, would drain into the ditch.

In the case of a spill or event in which hazardous materials or oil does reach or has the potential to reach either or both of the drainage ditches, immediate action must be taken to contain the spill. Temporary earth dams should be constructed using plant equipment along the ditches, creating a series of impoundments to contain the flow. Sorbent booms may be used to remove containments from the water held behind the dams, if needed.

These dams can only hold back a limited amount of water, so emergency help should be contacted at the first sign that such a spill has occurred or may occur.

If a spill occurs into the cooling water pond, try to contain it there. The cooling pond overflows to the emergency pond, at which a spill could also be contained. Overflow from the emergency pond would be into the ditch. The

emergency pond is normally kept empty with it's drain valve closed to maintain it's ability to contain a spill. After rains, the water in the emergency pond is visually inspected and, after approval of the Environmental Supervisor, is manually drained. The drain valve is then reclosed.

3.6 Treating Cylinders

There are 5 treating cylinders located in one common concrete containment area. Cylinders 2 and 4 are used for creosote treatment, cylinders 1 and 5 are used for penta-in-oil treatment, and cylinder 3 is used only for steam conditioning of wood. The largest cylinders capacity is 34,000 gallons. The containment capacity is approximately 56,000 gallons.

The treating processes consist of the cylinders, a work tank, vacuum system, and transfer and pressure pumps for each cylinder, and common storage tanks, waste water collection system, condensate tank, tank car and truck unloading, and oil water separation. Most of this associated equipment and piping is within concrete containment as described below.

3.7 Tank Car and Truck Unloading

Trucks and tank cars are unloaded at the Unloading Station, which is concrete lined for spill containment. All process transfer pipelines are all above ground. The primary potential spill sources in the creosote process include leaks from the process tanks, valves, pumps, and pipe systems. These leaks can best be prevented by proper valve and pump maintenance and equipment inspection during creosote transfers. Any leaks or drips must be cleaned up immediately.

Any rain water which is collected in the containments is pumped to the waste water treatment system for treatment.

The containment pad does not provide full containment for the tank car volume so that a major tank spill would spread to surrounding process areas. Therefore, tank heating and unloading must be carefully supervised by operators. Immediate action to contain a major spill will minimize any impacts.

3.8 Tank Farm

All preservative tanks are in the concrete lined and diked tank farm. The largest tank capacity is 300,000 gallons. Containment capacity of approximately 308,000 gallons is provided by a concrete floor and wall surrounding the entire tank farm.

3.9 Fuel and Lubricating Oil

Gasoline and diesel fuel are delivered by tank truck and transferred into storage tanks that are within containments. Care must be taken to prevent spillage during dispensing fuel into vehicles and equipment.

Lubricating oil is delivered and stored in building, in 55-gallon drums. Drums will be stored upright and kept sealed. Dispensing areas will be kept clean. Oil drippage will be contained. Any minor spills will be cleaned up immediately.

Any oil or fuel spill (discharge) which violates applicable water quality standards, or causes a film or sheen upon or discoloration of the surface water or adjoining shorelines is reportable.

3.10 Oil Water Separator

The oil water separator is a reinforced concrete in-ground concrete tank with two primary basins. PH adjustment and coagulant and flocculent addition and mixing occur in an adjacent above ground steel tank. These tanks do not have secondary spill containment, but are equipped with high level switches which sound alarms in the control room and shut off inflowing waste water. Plant operators are instructed in proper response to the high level alarms.

3.11 Biological Waste Water Treatment

The activated sludge aeration tank, clarifier and final effluent tank are located in a concrete containment. The largest tank capacity is 150,000 gallons and the containment capacity is 198,000 gallons.

Although the treated effluent water presents a very small environmental risk, as a listed hazardous waste, a spill to the environment must be reported and cleaned if one occurs.

3.12 Boiler Hazardous Waste Fuel Additive

Wood preserving process wastes from Koppers Industries pentachlorophenol and creosote systems are burned for fuel value in the boiler. These wastes are listed hazardous wastes F032 and F034. Hazardous wastes K001 and U051, also from pentachlorophenol and creosote wood preserving operations, may also be used for fuel. Additionally, it is planned to use waste from phthalic anhydride production (K023 and K024) from Koppers Stickney, IL plant as boiler fuel.

The fuel additive system is not currently in operation. Before re-starting the fuel additive system, drainage control and security improvements are required. The waste handling, infeed, and ash areas must be contained within berms to prevent runoff due to spills or storm water and provide for that to be pumped to the waste water system. Efforts to obtain a RCRA permit to treat and store hazardous waste on site are currently underway.

3.13 Hazardous Waste Storage Facility

The Waste Storage Building is a RCRA Interim Status facility for the storage of hazardous waste in containers. Up to 640 drums may be stored in the facility. Materials to be stored are the wastes described above which are planned to be burned in the boiler, plus other wastes or wood preservatives generated or used at the plant. All materials to be stored are compatible with each other and are not reactive, explosive, or corrosive. The facility has a concrete floor with a berm and is fully contained within a steel building. The main significant spill potential is present when waste containers are being transported into or out of the building. Drums should only be transferred with gasketted lids tightly sealed. Only sound DOT approved drums are used.

3.14 Planned Improvements Schedule

The following work will be completed within the schedules stated to bring the plant into full conformance with the spill prevention requirements of 40 CFR 112 and good engineering practice:

Project Description:	Complete by end of:
Install runoff control and security at fuel additive equipment	before restarting system
Provide full containment for creosote tank car and truck unloading	Dec. 1993
Provide full secondary containment for the oil water separator	Dec. 1994

TABLE 3.1 - TANK LISTINGS
Koppers Industries, Grenada Plant

Reference No.	Name	Contents	Capacity
1.	#1 Cylinder	Oil Borne Treatment	34,000
2.	#2 Cylinder	Creosote 60/40	27,000
3.	#3 Cylinder	Steam Conditioning	27,000
4.	#4 Cylinder	Creosote #1	27,000
5.	#5 Cylinder	Oil Borne Treatment	27,000
6.	#1 Work Tank	Creosote 60/40	30,000
7.	#2 Work Tank	Creosote 60/40	30,000
8.	#3 Work Tank	Penta in Oil	30,000
9.	#4 Work Tank	Creosote #1	22,420
10.	#5 Work Tank	Penta in Oil	30,000
11.	Measuring Tank	Creosote #1	4,200
12.	#1 Storage Tank	Creosote #1	100,000
13.	#2 Storage Tank	Water	100,000
14.	#5 Storage Tank	Fuel Oil	100,000
15.	#6 Storage Tank	Creosote 60/40	105,000
16.	#10 Storage Tank	Water	300,000
17.	Water Treatment Tank	Water	250,000
18.	Coagulant	Amerfloc(R) 10	2,500
19.	Decanter	Penta in Oil	50,000
20.	Reclaim Tank	Creosote 60/40	10,000
21.	Air Receivers	Compressed Air	
22.	Air Receivers	Compressed Air	
23.	Reclaim Tank	Penta in Oil	10,000
24.	Gas Tank	Gasoline	1,000
25.	Fuel Oil #2	Fuel Oil	20,000
26.	Water Treatment Tank	Water	150,000
27.	Water Treatment Tank	Water	25,000
28.	Water Treatment Tank	Water	10,000
29.	Creosote Decanter	Water and Creosote	4,000

4.0 EMERGENCY RESPONSE PROCEDURES

4.1 General

This section of the plan describes the actions that are to be taken by Koppers personnel in response to any injury, accident, fire, explosion, or unplanned sudden or non-sudden release of hazardous waste, hazardous waste constituent, or hazardous material to the air, soil, or surface water.

4.2 Emergency Coordinator

As soon as an emergency situation is discovered by an employee, that person shall quickly estimate the extent the problem, take safe and appropriate control action, and then notify the plant management immediately. Once notified, the Plant Manager or the supervisor highest on the emergency notification list in Section 2.3, page 4, who is present will assume the responsibilities of Emergency Coordinator (EC). Other personnel will respond as a team under the direction of the EC as needed based on the type of emergency, individual skills, and plant responsibilities.

The EC has Koppers Industries' commitment to spill prevention and response and has the authority to commit plant employees and contract labor and equipment to response actions and to purchase needed supplies. The EC is responsible for the appropriate implementation of this plan in an emergency.

Effective communication is vital in any emergency response. All plant supervisors, have portable two-way radios which will be used for communication and coordination between the plant offices and yard areas. Phones may also be used between offices.

4.3 Immediate Response

As soon as an employee discovers an emergency situation, he shall quickly determine the extent of the problem. If a simple action can be taken to control a release or other emergency, such as shutting a valve to stop the flow from a ruptured pipe, and can be done safely, then the control action should be completed first. If there is no simple, safe control action or after taking such action, the person shall immediately notify the plant management and any other personnel who may be endangered by the incident by phone or radio.

4.4 Response Procedures

4.4.1 Upon discovery or notification that an emergency exists, the EC, assisted by the management team, shall:

- Determine the extent of the emergency,
- Implement plant evacuation, if needed, to prevent injury,
- Call for outside assistance as needed,
- Start immediate control actions,

- Implement cleanup or other responses,
- Notify local, state, and federal agencies as required,
- Notify Koppers Pittsburgh office,
- Assure completion of cleanup,
- Provide for storage of cleanup material, inc. hazardous waste,
- Evaluate possible hazards to human health or environment,
- Make a final written incident report.

Many of these actions may occur concurrently and are discussed further below.

4.4.2 Whenever there is an imminent or actual emergency situation, the emergency coordinator, or his designee, shall:

- Immediately call by radio or phone to notify all facility personnel;
- Immediately notify appropriate federal, state, and/or local agencies with designated response roles if their help is needed;
- Make other notifications as stated in Section 3.5, Emergency Notifications.

4.4.3 Whenever there is a release, fire, or explosion, the emergency coordinator shall immediately identify the character, exact source, amount, and area extent of any released materials. This may be done by observation or review of facility records or manifests and, if necessary, by chemical analysis. Form 4.1 should be used to document the information needed for notifications.

4.4.4 Concurrently, the Emergency Coordinator shall assess possible hazards to human health or the environment that may result from the release, fire, or explosion. This assessment shall consider both direct and indirect effects of the release, fire, or explosion (e.g., the effects of any toxic, irritating, or asphyxiating gases that are generated, or the efferts of any hazardous surface water run off from water or chemical agents used to control fire and heat-induced explosions).

4.4.5 If the Emergency Coordinator determines that the facility has had a release, fire, or explosion which could threaten human health, or the environment, outside of the facility, or if the released amount of hazardous or extremely hazardous material exceeds the Reportable Quantity (RQ), the findings shall be immediately reported to the National Response Center as in Section 4.5, Emergency Notifications. Note that the reportable quantities for materials are listed in Section 4.5.

If his assessment indicates that evacuation of local areas may be advisable, appropriate local authorities shall be notified immediately. The Emergency Coordinator shall be available to help appropriate officials decide whether local areas should be evacuated.

4.4.6 During an emergency, the Emergency Coordinator shall take all reasonable measures necessary to ensure that fires, explosions, and releases do not occur, recur, or spread to other hazardous wastes or materials at the plant. These measures could include turning water sprays onto tanks, stopping and

isolating processes, shutting off power to areas, collecting and containing released materials, or moving and isolating other containers.

4.4.7 If some or all operations are stopped in response to an emergency, the emergency coordinator shall monitor tanks, pipes, valves, and other process equipment for leaks, pressure build-up or ruptures wherever appropriate.

4.4.8 Immediately after an emergency, the Emergency Coordinator shall provide for treating, storing, or disposing of recovered materials or wastes, contaminated soil, surface water, or any other material that results from a release, fire, or explosion.

4.4.9 Before resuming operations, the Emergency Coordinator shall:

a. Insure that clean-up is complete to the point that operations will not interfere or create further potential for hazardous waste release,

b. Insure that all emergency equipment is cleaned and fit for use, and

c. If hazardous wastes or a hazardous waste unit has been involved, then advise the Mississippi Department of Natural Resources and EPA Region IV that Steps a. and b. above are complete.

4.4.10 If hazardous wastes or a hazardous waste unit has been involved, the Emergency Coordinator shall submit a written report within 15 days of the incident to the Department of Health Services. Form 4.1, completed, may fulfill this purpose or will at least provide a basis for the report. A copy of the completed report shall be maintained in the Operating Record.

4.5 Emergency Notifications, Reports, and Record Keeping

4.5.1 The emergency coordinator shall ensure that the necessary notifications are made. The following form 4.1 is a three page form titled, "Emergency and/or Hazardous Materials Incident Report." Page 1 is organized to provide all the information needed for the initial verbal notification of the National Response Center or other agencies. As soon as a spill or other incident is discovered, the supervisor/manager who will do the reporting should begin filling in the information.

Page 2 should be used as a log of notifications made. Get the position and name of the person who accepts the phone notifications. Also, if an incident number is assigned, as by the National Response Center, that number should be recorded. As more is learned about the incident, the report should be updated. Updates can be recorded on page 2 as well.

Pages 1 and 2, completed either by hand or typed, can be used for the required written notification of agencies. These should be sent with cover letters showing everyone who will get copies. Copies must be kept in the plant's Operating Record.

Finally, page 3 should be used for Koppers Industries internal reporting of additional related information. KII has an obligation to report all spills which could possibly impact over-all cleanup work to Beazer East, Inc. (BEI). The complete report. Pages 1, 2, and 3 should be sent to Jim Batchelder, including original photographs. He will provide the required notification to BEI.

Copies of all completed Incident Reports must be maintained at the plant as part of the Operating Record.

4.5.2 WHAT SPILLS OR INCIDENTS MUST BE REPORTED AND TO WHOM?

Following is a summary. Note that more than one category may apply.

If outside help is needed, IMMEDIATELY:

Call fire and/or other appropriate emergency agencies, describe incident and needed assistance, such as fire suppression, medical aid, evacuation, and/or crowd control.

If release or threatened release of hazardous material, IMMEDIATELY:

Call the Local Emergency Planning Committee (LEPC). This report shall be made unless it is determined that the release poses no significant hazard to human health and safety, property, or the environment and is less than the reportable quantity for the material.

Such releases which cannot be recovered must also be included in the SARA Title III annual reports.

If health threat or release outside of facility; OR

If the release results in or has the potential to cause an oil sheen on or discoloration of runoff water; OR

If release of hazardous or extremely hazardous material exceeds the Title III Reportable Quantity, IMMEDIATELY:

Call National Response Center at 800-424-8802.

If hazardous waste or a hazardous waste unit is involved OR if the plant contingency plan is implemented; IMMEDIATELY AND NOT LATER THAN 24 HOURS:

Call the appropriate Mississippi Department of Natural Resources
AND, Within 15 days
Submit a written report of the incident to the agency.

If injuries result in 5 or more people being hospitalized or 1 or more person killed, IMMEDIATELY AND NOT LATER THAN 48 HOURS:

Call the U. S. Occupational Safety and Health Administration or authorized state OSHA agency.

In all cases, as soon as the emergency situation allows, Koppers management in Pittsburgh shall be called. Follow the guidance contained in "Internal Emergency Notification Procedures" for Koppers Industries, Inc. At least one of the following primary contacts in Pittsburgh shall be notified:

Name, Position	Work Phone	Home Phone
Stephen Smith, Program Manager	(412) 227-2677	(412) 441-5256
Lee Allison, Mgr. Occ. Health	(412) 227-2592	(412) 899-2131
Randy Collins, Mgr. Loss Control	(412) 227-2456	(412) 384-2855
Bill Donley, Round Stock Ops Mgr.	(412) 227-2724	(412) 243-7418
Tom Loadman, Railroad Ops. Mgr.	(412) 227-2729	(412) 833-8372

4.5.3 WHAT SPILLS ARE REPORTABLE?

For hazardous materials, Reportable Quantities (RQ) are specified by the EPA. Additional requirements may be set by some states. The Federal Quantities are:

Creosote	1 pound
Pentachlorophenol	10 pounds
Penta waste from mixing process	1 pound
Arsenic	1 pound
Chromium	1 pound
Process Waste Water	1 pound
Creo/Penta Waste Water Treatment Sludge	1 pound
Sodium Hydroxide	1000 pounds
Phosphoric Acid	5000 pounds
Sulfuric Acid	1000 pounds
Gasoline (as D001, Ignitable Waste)	100 pounds

The Clean Water Act also has reporting requirements. Generally if "oil" is released to or presents the potential to be released to navigable waters in amounts that violate an applicable water quality standard or cause a sheen upon or discoloration of the surface of the water or adjoining shorelines or cause a sludge or emulsion to be deposited beneath the surface of the water or upon adjoining shorelines, then it is reportable and the National Response Center must be notified.

Gasoline, lubricating oils, and transmission fluid are all regulated as "oil". Unless released as above, reporting is not mandatory.

4.5.4 IF IN DOUBT, REPORT!

If a spill is large enough to require cleanup action but is not reportable, it generally is a good practice to make a courtesy report to the local agency contact. It shows that we are on top of the problem and provides valuable documentation of our response in case of a report by a third party. The attached written report form should also be completed and submitted internally.

Form 4.1
EMERGENCY AND/OR HAZARDOUS MATERIALS
INCIDENT REPORT

OWNER/OPERATOR: Koppers Industries, Inc.
Plant Name: Grenada Mississippi Plant
Street Addr: Tie Plant Road
Mail Addr: P. O. Box 160
City, St, ZIP: Tie Plant, Mississippi 38960
Phone: 601-226-4584
EPA ID #: MSD007027543

FACILITY: Same as above

DATE OF INCIDENT: _____ TIME OF INCIDENT: _____

TYPE OF INCIDENT: Fire, Explosion, Hazardous Material Spill,
(Circle One) Hazardous Waste Spill, Injury Accident

Other: _____

MATERIALS INVOLVED:

Name	Quantity

EXTENT OF INJURIES, IF ANY:

_____

_____

_____

ASSESSMENT OF ACTUAL OR POTENTIAL HAZARDS TO HUMAN HEALTH OR THE ENVIRONMENT, WHERE APPLICABLE:

_____

_____

DISPOSITION OF RECOVERED MATERIAL:

Material	Quantity	How Disposed or Stored

Form 4.1
EMERGENCY AND/OR HAZARDOUS MATERIALS
INCIDENT REPORT

NOTIFICATION LOG:

Agency	Phone No.	Name of Person	Date/Time Notified
Sheriff	911(Emergency) 601-226-2721	_____	_____
Emergency Services Dispatcher	911	_____	_____
Local Emergency Planning Committee:	_____	_____	_____
CIVIL DEFENSE or home	601-226-1076 601-226-7595	_____	_____
National Response Center	800-424-8802	_____	_____
Mississippi Department of Natural Resources	601-961-5171	Bob Rogers	_____
Mississippi Emergency Management Agency	800-222-6362	_____	_____
OSHA	_____	_____	_____
Environmental Program Manager-KII or Home:	412-227-2677 412-441-5256	Stephen Smith	_____
_____	_____	_____	_____
_____	_____	_____	_____

ADDITIONAL DESCRIPTION OF INCIDENT AND ACTIONS TAKEN (Attach page if needed):

_____

_____

_____

_____

REPORT BY (Name): _____ DATE: _____
REPORT REVISED: _____ DATE: _____
REPORT REVISED: _____ DATE: _____

Table 4.1
EMERGENCY AND/OR HAZARDOUS MATERIALS
INCIDENT REPORT

SUPPLEMENTAL INFORMATION REPORT
(This part of report is intended for KII internal use only.)

CLEARLY DESCRIBE HOW INCIDENT OCCURRED:

_____

_____

_____

_____

_____

WHAT ACTS OR CONDITIONS MOST DIRECTLY CAUSED THE INCIDENT:

_____

_____

_____

_____

DESCRIBE WHAT HAS OR WILL BE DONE TO PREVENT A RECURRENCE:

_____

_____

_____

_____

DESCRIBE ANY RESIDUAL CONTAMINATION OR IMPACT:

_____

_____

_____

ATTACH PHOTOGRAPHS WHICH SHOW INCIDENT AREA, BEFORE AND AFTER RESPONSE ACTIONS. MARK DATE OF PHOTOS.
ATTACH ADDITIONAL SHEETS AS NEEDED TO DESCRIBE INCIDENT AND RESPONSE ACTIONS.

4.6 Available Equipment

The following equipment is available at the plant:

- Lumber lift trucks
- Tractor with bucket
- Hydraulic Loaders
- Dump Truck
- Grader
- Skidder
- 2 Pickup Trucks
- Portable pumps
- Sawdust and sorbents
- Portable steam cleaner

The above equipment can be effectively used to control and clean a spill of oil, hazardous material, or hazardous waste. Trucks and tractors can be used to transport and place soil for containment dams, sorbent to soak up spilled liquid, and contaminated soil from cleanup actions. Pumps can be used to pump spilled liquid back into containments. After response action is complete, equipment should be placed on the drip pad or other contained area and decontaminated with the steam cleaner prior to being released from the response.

4.7 Emergency Response Contract Services

Koppers has entered into a Corporate Agreement with O.H. Materials Corporation to provide various environmental services in the event of an emergency. O. H. Materials may be reached at their nationwide 24-hour line at 800-537-9540.

Additionally, the following local contractors are available:

<u>General Contractor</u>
Green & Green Construction
Highway 8, West
Grenada, MS 38901
Phone: 601-226-8454

<u>Electrician</u>
AAA Electric Company
11 Mimosa Drive
Grenada, MS, 38901
Phone: 601-226-8964
Bob Pellusch

4.8 Fire and Disaster Response Plans

4.8.1 This section of the Contingency Plan provides additional information on specific response actions to be taken in the event of a major disaster, emergency, or other disruption. Such an event could include:

- Fire or explosion
- Earthquake
- Strike or civil strife.

4.8.2 Fire or Explosion

Fire disasters can occur anywhere in the plant environment, so all employees should be knowledgeable as to the proper method for handling type A, B, and C fires, and where the largest potential risk areas are located. Communications with and between plant employees is vital to a safe and effective response. Therefore, the following sections describe responses that put all employees at locations where plant radios or phones will be available. Additionally, this will facilitate accounting for all personnel without having to search for anyone. Employees which respond to the gate will keep all unauthorized traffic out of the plant and move other traffic in and out as needed.

4.8.3 Designated Response Stations

In the case of a disaster or other major incident, employees shall secure their work areas and processes and then report to the following designated response stations:

(If they are not directly involved in Emergency Response)

Fire Crew to the Fire Truck
Tie Yard Supervisor: Bennie Taylor (or his designate)
Maintenance Crew
All other Department Crews when called.
Fire Crew will start and respond with fire truck if needed.

Fire Pump
Maintenance Supervisor: Jim Tiner (or his designate)

Treating Plant employees stay at plant area for controlled shutdown, if safe. Otherwise, respond to the Service Building.

Plant Office Employees stay at office. Coordinate outside calls, inquires, and media contacts.

4.8.4 Evacuation

The need for evacuation shall be signalled by a message over the radio to all supervisors, who will notify their employees. Employees shall follow the safest path to meet and check in at the following location:

Service Building

Supervisors shall account for all of their employees, notify the main office when they are "all clear" and relay further instructions. An alternate location will be designated and announced at the time of the incident if the service building is not a safe check-in location.

4.8.5 Fire Suppression Systems

Sprinklers, activated by fusible links in the nozzles, are located in the ceiling areas of the treating building. Water supply must be on at all times.

Fire Hose and Hose Reels are located at strategic points around the plant. Employees must be familiar with ones within their work areas.

Fire Extinguishers are located throughout the plant and on rolling stock. CO-2 and ABC Dry Chemical types are used exclusively.

Diesel or Electric Fire Pump is located in the firehouse which pumps from the raw tanks. The pump is manually operated. This will provide fire protection water to the main fire pipe system.

Fire Truck is located in the garage in front of the shop. It is equipped with hose and nozzles and is maintained fueled and ready for emergencies.

4.8.6 Civil Strife, Strike

Emergencies resulting from, or shutdowns as a result of, civil strife or strike situations require the control of people entering the plant, both authorized and unauthorized. Local law enforcement agencies can be helpful in achieving this goal, but in-plant security is management's immediate concern. When a total shutdown is planned, and security measures are to be implemented, the following should be observed.

Treating Plant

- Secure all treating systems, close cylinder doors, shut all valves, open all steam drain lines, shut down air compressor or arrange for maintenance.
- Inspections of all processes shall be made on a regular basis, at least once every 2 hours at first, then every 4 hours.

Boiler

- Disable hazardous waste feed and cover feed hopper.
- Secure gate and door locks.
- Follow established shutdown procedure.

- Assure that all steam line drains are open.

Hazardous Waste Storage Facility
- Properly store all hazardous waste drums in facility.
- Lock doors.

Major Operations including Mill, Stacker, and Shop
- Secure electrical panels.
- Turn off air compressors, shut valves.
- Store and secure portable tools, cords, hoses, etc.
- Clean up area for safety and fire protection.

Rolling Stock
- Park centrally in area in front of office.

Gates
- Keep locked at all times.
- Put on new locks to prevent unauthorized entry.

Access Roads
- Blockade with ties or lumber.

Security Patrols
- At least 2 persons will provide security patrols on shifts, 24 hours per day.
- Plant vehicles will be provided
- Communication will be maintained at all times between the patrols and the main office by radio.

4.9 Medical Emergency Plans

Emergency and first aid supplies are maintained at the following work locations:

Main Office (Main supply center)	
Treating Plant	Tie Machine
Maintenance Shop	South Mill

First aid supplies are intended for use on minor cuts, abrasions, and burns requiring simple care such as band-aids, disinfectant, or ointment. Supplies are also available for the immediate treatment of severe injuries while awaiting professional medical care, such as gauze pads, bandages, and splints. First aid applied at the plant by plant employees is in no way intended to replace any needed medical attention, but only to help prior to receiving professional treatment.

If a serious injury occurs, assure that an ambulance is called immediately.

5.0 STORM WATER POLLUTION PREVENTION PLAN

5.1 General

This section of the plan describes the pollution prevention procedures and facilities for this plant to minimize the impact of storm water runoff to the surrounding environment. This section specifically addresses the requirements of the Storm Water General NPDES Permit, including special requirements for wood preserving industrial operations.

5.2 Pollution Prevention Objectives and Process

The objectives of the storm water PPP are; 1) to identify potential sources affecting pollution of storm water and 2) describe and implement practices to minimize and control pollutants in storm water discharges and ensure permit compliance. In the preamble to the Federal Register which finalized the EPA storm water general permits, EPA described the permit program as "intended to facilitate a process whereby the operator of the industrial facility thoroughly evaluates potential pollution sources at the site and selects and implements appropriate emasures designed to prevent or control the discharge of pollutants in storm water runoff." That process includes the following:

1) Form a Pollution Prevention Team,
2) Assess sources,
3) Select and implement practices and controls, and
4) Conduct periodic evaluations.

5.3 Pollution Prevention Team

The pollution prevention team is responsible for developing this pollution prevention plan and assisting in its implementation, maintenance, and revision. The team consists of the following:

STORM WATER POLLUTION PREVENTION TEAM

NAME	POSITION	RESPONSIBILITIES
Ron Murphey	Plant Manager	Overall plant compliance
Mark Good	Environmental Supervisor	Plan development and coordination, Routine inspections and enforcement.
Stephen Smith	Corporate Environmental Manager	Plan development and engineering certification, regulatory advise.
Billy Vance	North Pole Yard	Provide operational perspective for source identification and control measures.
Lloyd Sivley	South Yard	Provide operational perspective for source identification and control measures.
Robert Reed	Utility Operator	Responsible for yard maintenance.
Broderick Spencer	Loader Operator	Provide equipment operator perspective in source identification and control measures.
Allan Horton	Peeler Supervisor	Provide pole peeler perspective for source indentification and control measures.

5.4 Description of Potential Sources

This section describes activities, materials, and physical features potentially contributing to pollution.

5.4.1 Plant Drainage

Drainage patterns are shown on the Storm Water Management Plan, Figure 2. Generally, the central portion of the plant, which includes the preserving process area and maintenance shop, drains into the mid plant ditch. The north quarter of the plant, including the pole peeler yard, drains north to the north ditch and the south end of the yard drains south to the south ditch.

Significant plant features are identified on the Storm Water Management Plan, including the preserving process area, maintenance shop, drip pad, fuel tanks, material storage, loading, and unloading areas, and other process operations.

Pollutants most likely to be detected in storm water and likely sources are as follows:

Wood preservatives, including pentachlorophenol and creosote (which includes primarily various polycyclic aromatic hydrocarbons (PAHs)), may be detected in soil and storm water at many locations on the plant. Wood preserving has been conducted on this property since the early 1900s. Preservative may be present due to past waste disposal practices, past wood preserving practices, drippage from treated wood, preservative spills, and rain runoff from treated wood in storage.

Fuel, lubricating, and hydraulic oils are used on plant mobile equipment, trucks, and most fixed manufacturing equipment. Drips, leaks, or spills may contribute oil to storm water runoff.

Boiler and waste water treatment chemicals are used in the process area, but are kept in contained areas and are unlikely to impact storm water.

Other organic matter, generally from wood, may also be present in runoff from piles or stacks of wood poles, ties, or peeler shavings.

5.4.2 Inventory of Exposed Materials

Significant materials stored in exposed locations at the Koppers plant include untreated and treated wood poles and railroad ties, wood waste fuel, and yard waste materials. Typical inventory levels of these materials are:

Untreated RR ties:	160,000 pcs.
Creosote treated ties:	6,000 pcs.
Barky poles:	100 pcs.
Untreated poles:	3,700 pcs.
Penta treated poles:	9,000 pcs.
Creosote treated poles and piling:	3,000 pcs.
Untreated Switch Ties:	16,000 pcs.
Creosote Switch Ties:	4,000 pcs.
Untreated Lumber:	3,000 pcs.
Creosote Lumber:	3,000 pcs.
Yard waste:	5 bins
Peeler Shavings:	8 tons

All treated and untreated wood is stored in piles in the yard. Contact with rain is not controlled. Current practices to minimize impacts include:

Preservative cycles are designed to minimize drippage and produce clean surfaces on the treated product. These include extended vacuums, cleaning as needed, and proper preservative temperatures. Treated wood is kept on the concrete drip track until any drippage has ceased.

Yard inspections are conducted daily, except when not treating, to

detect and respond to preservative drippage, in accordance with Operating Procedures.

Treated wood is stacked on skids to prevent it from sitting in puddled surface water.

Preservative storage and process tanks and equipment are all located within containment facilities as described in Section 3 of this plan.

5.4.3 Significant Spills and Leaks

Within the last three years there have not been any significant spills or leaks which resulted in any remaining site contamination. A few spill incidents have occured in this time, generally consisting of small incidents. Appenix A includes copies of all spill reports for spills occuring during or after 1989. These reports include a description of actions taken to prevent similar events.

5.4.4 Non-Storm Water Discharges

All process water is collected and pretreated on-site prior to discharge to the POTW. Process water includes wood water from boultonizing, preserving process condensate, vacuum seal water, rain and wash water collected within process containments, boiler and cooling tower blowdown, and vehicle and equipment wash water from the shop. Surface drainages have been inspected by members of the Team for flow during dry weather and no dry weather flows were occuring. Certification is provided in Appendix C by use of a completed Non-Storm Water Discharge Evaluation and Certification, Mississippi Worksheet 2C.

5.4.5 Sampling Data

There is no storm water sampling data at this time. Sample results will be maintained at the plant in a Storm Water Monitoring Results file.

5.5 Measures and Controls

5.5.1 Good Housekeeping

The need and reasons for good housekeeping will be communicated and emphasized to each employee and contractor working on the plant. Housekeeping practices will be part of each persons job, with emphasis on preventing contamination over cleaning contamination after it has occurred. Each supervisor is responsible for assuring that housekeeping is completed as part of each person's job.

Good housekeeping practices, including but not limited to the following, will be required at Koppers Industries:

* When cutting treated wood, collect sawdust and cutoff pieces. Do not leave waste on the ground.
* Do not drive loaders or trucks through ditches or standing water. Stay

on established roadways.

* Mobile equipment will not be operated with significant oil or hydraulic leaks. If major leaks develop, such as a hydraulic line breaking, equipment will be shut off in place and repairs made before returning equipment to service.
* Drippage or leakage from equipment will be thoroughly cleaned, with contaminated soil being properly disposed.
* Stationary hydraulic equipment will be maintained to minimize leaks and leakage will routinely be cleaned and properly disposed.
* Waste developed during work will be placed in proper containers for disposal directly rather than placing on the ground to be collected later.
* Recycle scrap metal as generated and do not accumulate it on the ground.

5.5.2 Preventive Maintenance

Storm water management devices, such as detention basins and outlet structures, will be inspected at least monthly and after storms producing significant runoff. These will be inspected for signs of erosion, excess collected silt from runoff, and collection of debris which could interfere with discharge monitoring or flow. Records of inspections will be kept in the plant's operating records. See appendix B for inspection form.

On-site drainages will be inspected for signs of erosion or high silt loads or turbidity during runoff events. Such inspections will be made at least four times a year, depending on storm events. Sources of turbidity or silt will be identified and potential remedial actions identified. Corrective actions which should be considered include; rerouting of plant traffic, paving or gravel surfacing roads, ditch modifications, culvert additions or changes, changing yard activity or material storage locations, changing vegetation management, and yard grading. Inspections and actions taken will be documented on the Storm Water Management Facilities Inspection Record, shown in Appendix B.

Production equipment, including loaders, trucks, and fixed equipment, will be inspected weekly by the people operating the equipment. Inspections will include checks for oil or hydraulic leaks, accumulations of oil soaked dirt, pump, valve, and cylinder packings, and any other devises which could cause or contribute to leaks. Identified needs will be either repaired by the operator or will be identified to the maintenance department.

Maintenance needs identified by inspections will be accomplished on a schedule appropriate for each situation. Leaking mobile equipment will not be operated on the yard until the leaks are repaired.

5.5.3 Spill Prevention and Response

Spill prevention procedures and equipment are fully described in section 3 of this plan. Procedures for responses to spills or other emergencies are described in section 4 of this plan.

5.5.4 Inspections

This section will describe inspection procedures for storm water pollution prevention. In addition, there are also inspection requirements which also further support pollution prevention under various other programs, including:

* Process area tank and containment inspections required by the SPCC provisions of this plan,
* Hazardous waste facility inspections required by RCRA,
* Drip pad inspections required by RCRA and the drip pad operating procedures, and
* Storage yard inspections of treated inventory required by RCRA and the storage yard contingency plan.

Storm water pollution prevention devices, such as detention basins and outlet structures will be inspected quarterly and after storms producing significant runoff. Upgradient ditches and drainage systems will be inspected at least four times a year during runoff events. These inspections will be performed by the Environmental Supervisor. In his absence, another member of the Team will conduct the inspections. Other Team members will participate as appropriate. A Storm Water Pollution Prevention Inspection Form will be used to document each inspection. Maintenance or repair needs will be identified on the form. The form will also be used to document when and how identified needs are corrected. A blank form is included in this plan in Appendix B. Completed inspection forms will be maintained at the plant per Section 5.5.5 of this plan.

5.5.5 Record Keeping and Internal Reporting Procedures

Record keeping and reporting procedures for spills are described in section 4 of this plan.

All completed Storm Water Pollution Prevention Inspection Forms will be maintained by the Environmental Supervisor. He will also be responsible for tracking maintenance or repair work to assure that needed work is completed and documented.

Maintenance and repair needs identified by inspections and which cannot be corrected by the inspector will, at a minimum, be reported to the Plant Manager and function Supervisor, as appropriate. Where priorities need to be determined, evaluation by the Pollution Prevention Team may be involved. The Plant Manager is responsible for setting work priorities and schedules.

5.5.6 Sediment and Erosion Control

The plant site is generally flat to slightly rolling. Soil does not tend to erode, except where vehicle traffic keeps the surface loose and prevents vegetation. Erosion is a problem where storm water runs or puddles in areas of active traffic. This section describes **prevention** type procedures for sediment and erotion control.

Erosion prevention mainly involves the design and maintenance of plant roads, drainages, and storage areas and procedures to assure these are properly used. Main roads, drainages, and storage areas are identified on the Storm Water Management Plan. Planned improvements to road and drainage areas now known to be causing erosion are identified on the Plan. Additional improvements will be made as necessary based on future inspections.

Existing drainage system - The existing yard drainage design has been reviewed by the plant pollution prevention team. The plant has the equipment and manpower to do most of the drainage work required, but may need some engineering or surveying support. The goal is to not create mud. Designs will separate ditches from traffic. Culverts will be added where needed. Gentle side slopes, such as three horizontal to one vertical, will be used so that grass can grow and be mowed. This means that a two foot deep ditch requires 12 feet of total width.

5.5.7 Management of Runoff

The plant drainage system has been designed to maximize its potential to mitigate or improve the quality of storm water runoff. Mitigation involves equipment and procedures to minimize the off-site affect of erosion and other activities occuring on-site. These generally include use of grassy swales or drainages to help filter sediment from runoff water and detention basins to enhanse gravity settling and filtration by plants to remove sediment from the runoff water.

Planned sediment and erosion control mitigation measures are described below for each discharge point and are shown on the Storm Water Management Plan.

Discharge 1 - This discharge to the south flows under a road through a culvert. The sampling point will be at the culvert inlet. There is no sign of erosion or silt deposition in this drainage. Thus, no work is recommended. Inspection results will be used to evaluate any need for future improvements.

Discharge 2 - This includes runoff from approximately the north half of the south yard. The plan includes the installation of culverts under tracks to consolidate three discharge points to one. Construction of berms or low dams just south of the existing ditch will create detention basins. An outlet structure at the east side will provide for slow discharge of accumulated runoff and allow overflow during large storms. The detention provision will allow for settling of sediment, which will improve water quality. If costs of installing culverts under the tracks is prohibitive, three separate discharges should be considered.

Discharge 3 - Storm water catch basins around the shop area now drain via culverts to a ditch which discharges as shown. There are two short pieces of culvert that this water flows through before flowing into the mid-plant ditch. Effluent should be sampled at the inlet to the second culvert. A new small ditch should be constructed from southeast of the shop to approximately the outlet of the collection culvert near the transformer pad, as shown. This

will assure that all runoff from the shop area is monitored. Excavation in the lower areas at the existing ditch should be minimized in this area.

Discharge 4 - This discharge includes runoff from much of the wood preserving process area and could, in case of a spill, contain spilled preservative chemicals. The existing emergency spill pond will be expanded to be a detention basin by construction of a berm south of the cooling pond and north of the mid-plant ditch as shown. A new outlet structure will be installed in the berm. A culvert will need to be installed across the main plant entrance to intercept runoff from the southwest part of the north yard, as shown. This culvert will discharge into the existing ditch, just west of the cooling water pond.

Discharge 5 - A berm will be constructed along the east property boundary as shown to form a detention basin. This area is now quite flat and lower than the plant areas draining into it so that local ponding occurs following rains.

Plant areas draining to this discharge include some of the most intense traffic in the yard, including truck loading and unloading, kiln loading and unloading, and treated pole storage. Eroded soil from the plant has been deposited in the area of the planned basin. Additionally, storm water from the housing to the east also drains into this area. The berm should be constructed, probably of imported soil, to separate water from the plant from water from off plant areas and provide detention of the plant runoff water. An outlet structure will be installed.

Discharge 6 - A relatively small part of the north yard drains to this ditch, but erosion of plant soils along the road and pole bins is evident. Construction of a small detention basin with an outlet structure will provide for some sediment removal.

Discharge 7 - Runoff from most of the north half of the north yard runs into the north ditch, but via several discharge points. Construction of a detention basin and intercept ditches will combine these into one discharge point and provide for sediment removal. The pole peeler yard is included in this drainage and could be a source of considerable floating debris from heavy runoff. Filter fences may need to be installed to intercept this material.

Detention basins should be designed to hold at least an average storm event, which is about one inch rainfall, and preferably be able to contain runoff from a two inch rainfall, recognizing that the runoff coefficient is probably about .3 to .5. This will allow for total containment of most storms to maximize water quality benefit at minimum cost and also mean that only a grab sample from the basins would be required, rather than collecting and testing both first flush and composite samples.

Outlet structures - Outlet structures must meet several needs, including; provide for flow monitoring, provide a location for sampling, retain water for most storm events, allow slow release of water over one to several days, pass large storm flows as overflow without damage to structure or dams, allow for flow shutoff in case of a spill within the plant, and be easy to maintain.

Wet detention versus dry detention - Wet detention basins, in which at least a portion of the basin is a permanent pond, provide more potential for biological treatment and generally longer hydraulic holding time for the water than dry detention basins, which completely drain following storm events. However, wet basins also present special problems. The permanent ponds can present safety or liability problems, mosquito breeding can be a nuisance, maintenance is more difficult, the long term ponding of potentially contaminated water can pose groundwater questions, and initial cost is greater. The dry detention basins require less excavation, thus less cost, and, since they are actually dry most of the time, present much less hazard. Additionally, a dry basin can later be made into a wet basin by digging part of it deeper. Thus, dry detention basins will be installed. If monitoring results indicate a need for water quality improvement which could be achieved by a wet pond, then modifications will be implemented as needed.

All new construction will be seeded and mulched to establish a native mix of annual and perennial plants to control erosion and provide filtration.

5.6 Comprehensive Site Compliance Evaluations

Comprehensive site compliance evaluations (Evaluations) are required by the General Permit and are intended as self-audits of the plant storm water pollution prevention program. The Evaluations will be conducted to:

1) Confirm the accuracy of descriptions of sources contained in the PPP,
2) Determine if all storm water pollution prevention measures are accuratedly identified in the plan, in place, and working properly, and
3) Assess compliance with the storm water NPDES permit.

Evaluations will be made at least annually. The plant manager is the individual responsible for the evaluations and will sign each evaluation. Other members of the team may be involved in the evaluation, as requested by the plant manager. Each Evaluation must be documented. Documentation should include the date of the Evaluation, names of persons involved, a listing of areas inspected, major observations, deficiencies noted, and the signature of the plant manager. Documentation will consist of the Mississippi Part VII evaluation form and will be kept in the plant operating records. The storm water pollution prevention plan will be revised within two weeks after the Evaluation inspection and those revisions must be implemented in a timely manner and not later than 12 weeks after the inspection.

5.7 Special Requirements for EPCRA Section 313 Facilities

There are special requirements for facilities which store, process, or otherwise handle Section 313 listed chemicals. This plant uses pentachlorophenol and creosote, which are such chemicals and reports releases of these annually on the Form R reports. These materials are stored in tanks and used in the process area where full secondary containment is provided. Thus, all storm water which could come in contact with the chemicals is contained. All liquids, including storm water, from the containment areas is processed in the waste water treatment system and discharged to the POTW. No water from process or tank secondary containment is discharged with storm

water runoff.

The procedures and equipment, as described in Section 3 of this plan and relating to Section 313 chemicals, assure that the standards of good engineering practice are met.

5.8 Monitoring and Reporting Requirements

Monitoring of storm water runoff is required by the General Permit for specified parameters and results of monitoring are to be reported to the State in accordance with that permit. These requirements are summarized in this section.

5.8.1 Parameters and Sample Types

Operations contributing to each outfall are substantially the same, ie. wood preservation, so each outfall must be monitored for the same constituents. The following parameters are to be measured in the units noted:

Parameter	Units	Sample Types
pH		Grab
Total Suspended Solids (TSS)	mg/l	Grab + Composite
Oil and Grease	mg/l	Grab
Total Phenols	mg/l	Grab + Composite
Pentachlorophenol	mg/l	Grab + Composite

In addition, the following will be determined and reported:

* The date and duration (in hours) of the storm(s) sampled;
* Rainfall measurements or estimates (in inches) of the storm which generated the sampled runoff;
* The druation between the storm sampled and the end of the previous measurable (greater than 0.1 inch rainfall) storm; and
* An estimate of the total discharge (gallons) for the storm sampled.

5.8.2 Frequency of Monitoring

Sampling will be conducted at least one time per year, except as exempted in the permit for concentrations below indicated values or for substantially identical discharges.

5.8.3 Outfall Information Summary

OUT-FALL NO.	LOCATION	INDUSTRIAL OPERATIONS IN RUNOFF AREA	AREA AND RUNOFF COEF.	SAMPLING METHODS
1	South end of south yard	Treated and untreated wood storage, closed ash landfill	15.9 Acres C= 0.3	report outfall 2 data
2	North end of south yard	Treated and untreated wood storage, switch tie mill	25.2 Acres C= 0.3	composite grab from detention pond
3	Maintenance shop area	Vehicle and equipment maintenance, washing	2.8 Acres C= 0.5	30 min. grab + composite from ditch
4	Southwest 1/4 of north yard	Treated and untreated wood storage, hazardous waste storage, boiler, wood treating process, preservative tanks, cooling water pond	24.1 Acres C= 0.3	composite grab from detention pond
5	Southeast 1/4 of north yard	Treated and untreated wood storage, dry kiln, truck loading, closed surface impoundment	26.2 Acres C= 0.3	composite grab from detention pond
6	Northeast 1/4 of north yard	Treated and untreated wood storage	9.5 Acres C= 0.3	report outfall 5 data
7	Northwest 1/4 of north yard	Treated and untreated wood storage, pole peeler, bark storage	13.2 Acres C= 0.3	composite grab from detention pond

5.8.4 Criteria for Sampling

A) For discharges from detention ponds with a retention period greater than 24 hours, (estimated by dividing the volume of the detention pond by the estimated volume of water discharged during the 24 hours previous to the time that the sample is collected) one composite grab sample will be taken.

B) For all other discharges, both a grab sample and a composite sample will be taken.

All such samples shall be collected from the dischage resulting from a storm event that is greater than 0.1 inch in magnitude and that occurs at least 72 hours from the previously measureable (greater than 0.1 inch rainfall) storm event. The grab sample will be taken during the first 30 minutes of the discharge. The composite sample will be either flow-weighted or time-weighted in accordance with the General Permit.

5.8.5 Substantially Identical Outfalls

Discharge from outfall 1 is substantially identical to discharge from outfall 2. Yard activities which could impact storm water runoff and soil conditions are similar. Additionally, there are no activities in area 1 that would make it's discharge be more impacted than are occuring in area 2. Both areas contain some treated wood, but mostly untreated wood and both areas have similar levels of vehicle traffic.

Discharge from outfall 6 is substantially identical to discharge from outfall 5. Yard activities in area 6 are the same as in 5, including storage and handling of treated wood, loading of trucks, intensity of vehicle traffic, and soil type. Additionally, both areas discharge through detention ponds.

Discharge sampling is not required for outfall 1 or 6, provided that effluent levels determined for outfalls 2 and 5, respectively, are reported for these outfalls.

5.8.6 Reporting

Annual Comprehensive Site Compliance Evaluation inspection reports and annual Discharge Monitoring Reports will be submitted to the following location and must be postmarked no later than January 28 for the previous report year.

Chief, Industrial Wastewater Branch
Office of Pollution Control, Dept. of Environmental Quality
P. O. Box 10385
Jackson, Mississippi 39289-0385

5.9 Compliance Schedule

Activity Description	Complete by
Complete Storm Water Pollution Prevention Plan and submit to State	April 1, 1993
Implement SWPPP, including construction of detention ponds and drainage changes	October 1, 1993

5.10 Record Keeping

5.10.1 Retention of Records: A NPDES Storm Water Pollution Prevention File will be maintained at the plant. Records of all monitoring information, including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation, copies of all reports required by the General Permit, periodic inspection reports, annual compliance evaluations, and records of all data used to complete the Notice of Intent will be maintained in the file for a minimum of three (3) years from the date of the measurement, report, or application.

5.10.2 Records Content: Records of monitoring information shall include:

a. The date, exact place, and time of sampling or measurements;

b. The initials or name(s) of the individual(s) who performed the sampling or measurements;

c. The date(s) adn time(s) analysese were performed; and

d. Complete laboratory reports, including references or procedures for analytical methods used, results of such analyses and blank, duplicate, or method spike results.

6.0 TRAINING

All plant employees shall receive training on the content of this plan. Supervisors will each receive a copy and become thoroughly familiar with it through training, discussion, and self study. Supervisors will train their employees in the overall plan and in the specific needs of their work areas.

Training will, at a minimum, include programs to ensure that facility personnel understand basic procedures for pollution prevention and good housekeeping and are able to respond effectively to emergencies by familiarizing them with emergency procedures, emergency equipment, and emergency systems, including, as applicable to each employee's job function:

* Procedures for using, inspecting, repairing, and replacing facility emergency and monitoring equipment;

* Key parameters for automatic waste feed cut-off systems;

* Communications and alarm systems;

* Response to fires or explosions;

* Response to ground-water or surface water contamination incidents;

* Shutdown of operations;

* Methods for the safe handling of hazardous materials;

* Procedures for coordination with local emergency response organizations;

* Use and location of medical supplies;

* Use of emergency response equipment and supplies appropriate to work areas; and

* Emergency response procedures and plans contained within this SPCC and Contingency Plan.

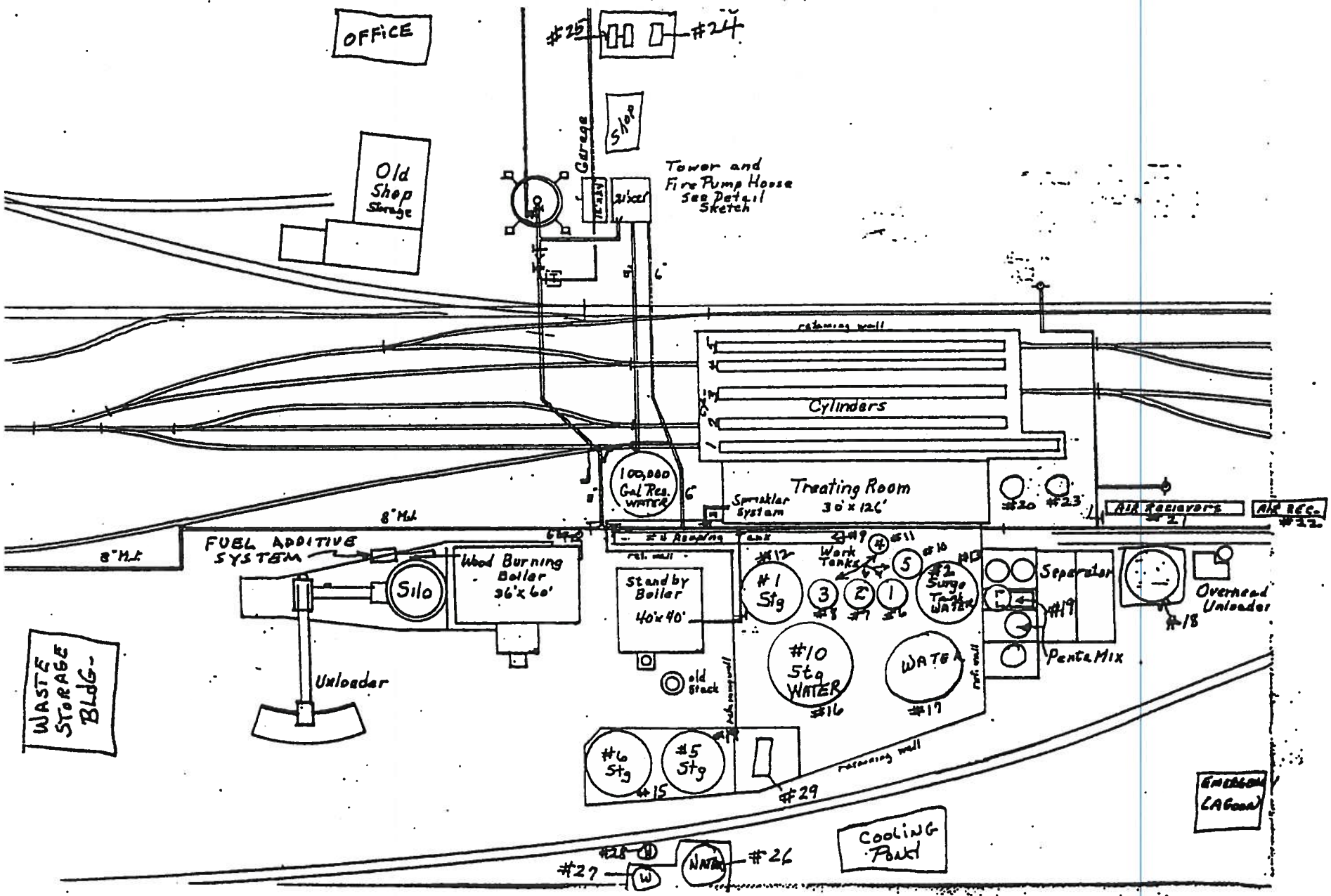
Refresher training will be provided at least annually. New employees will not work in unsupervised positions until they have completed all training required for those positions. Supervisors will provide training to their employees and management will assure that supervisors are properly trained.

Employees with specific additional job related training needs will also be given that training, such as hazardous waste handling training as required by RCRA and State regulations, hazardous waste operating procedures for fuel additive to the boiler, storm water pollution prevention, and waste water operations.

This training may be coordinated and take place concurrent with Hazard Communication and RCRA training, safety meetings, and annual updates.

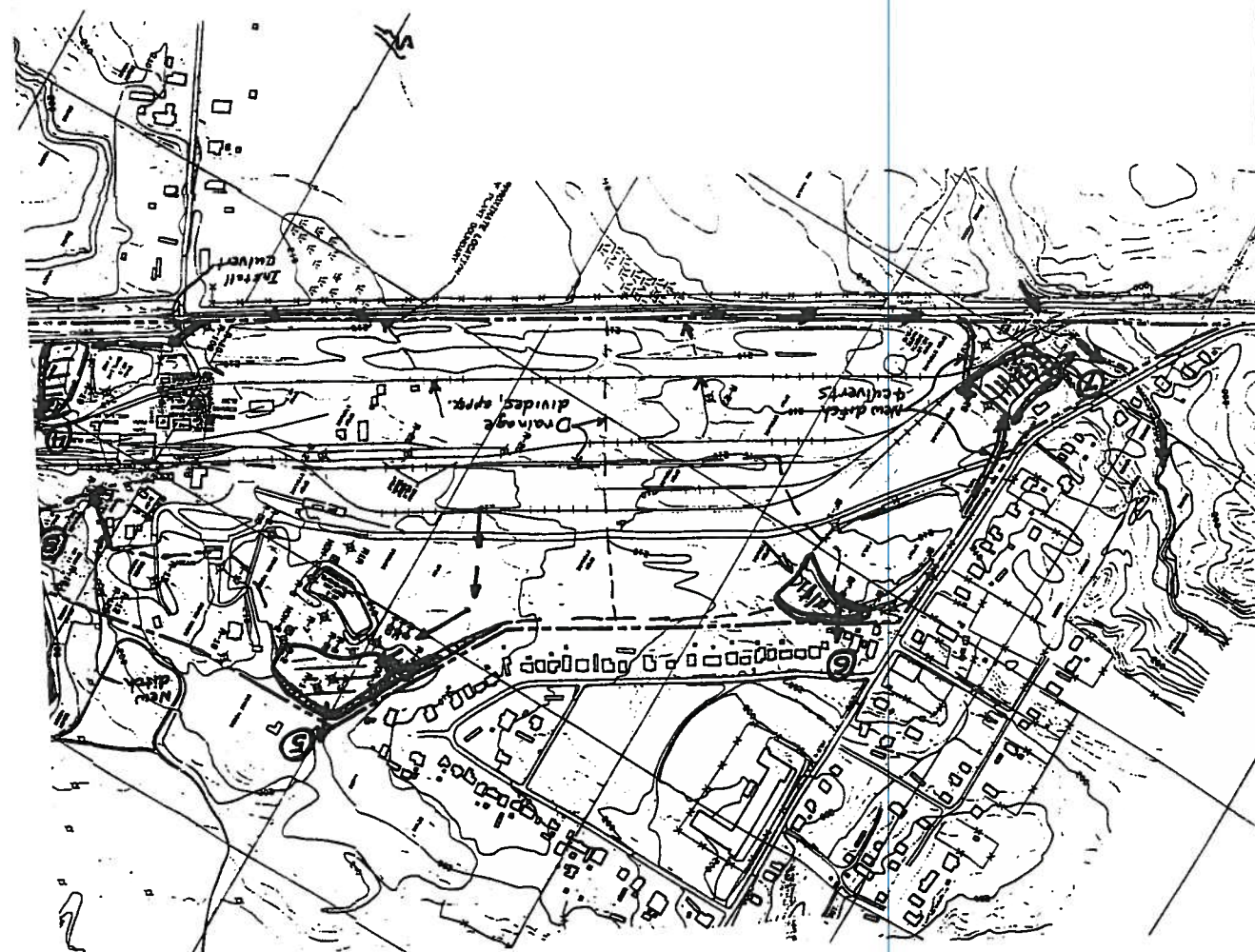
FIGURES

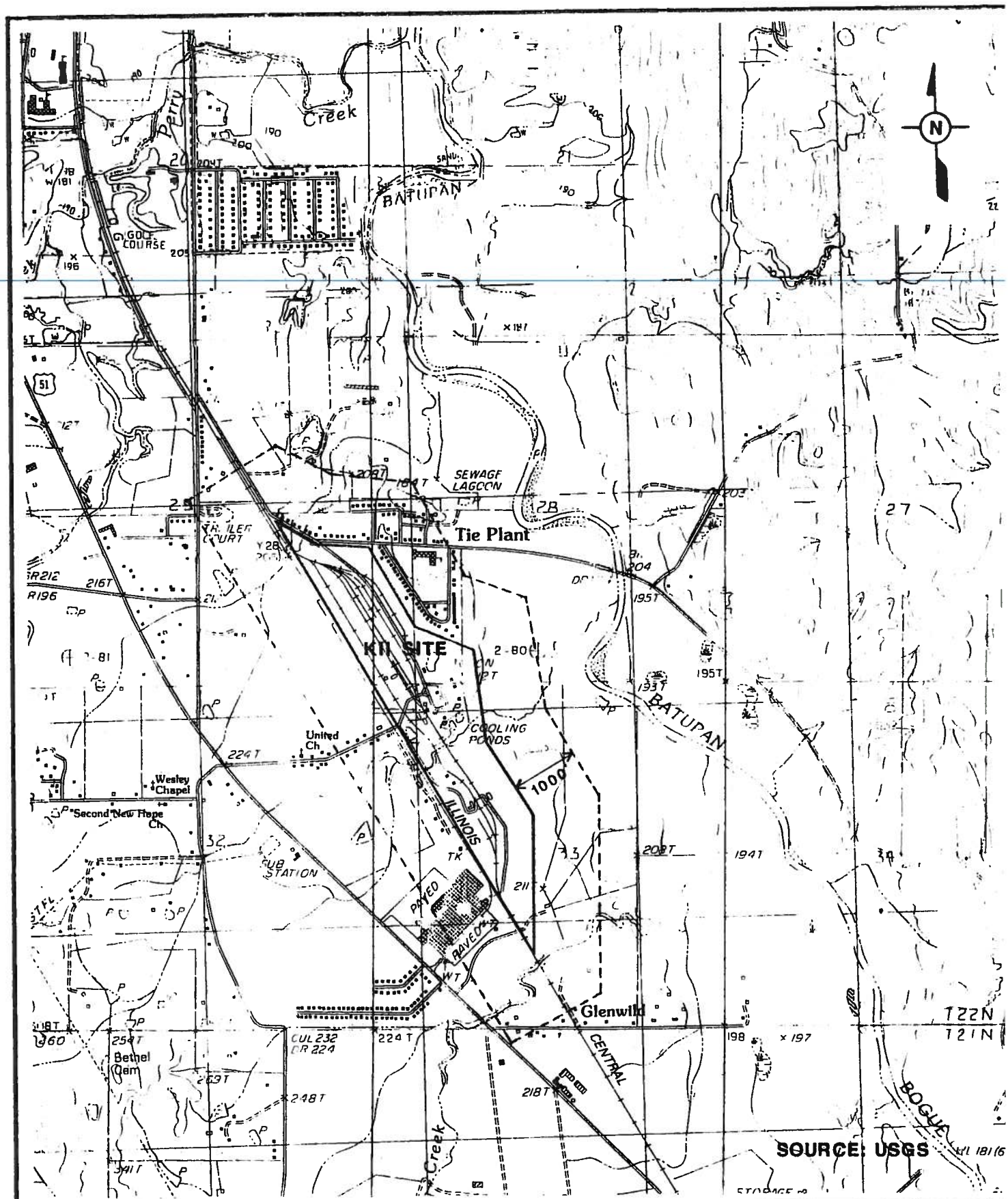
CONTINGENCY, SPCC, AND POLLUTION PREVENTION PLAN,
GRENADA PLANT, KOPPERS INDUSTRIES



SITE PLAN

FIGURE 1


Install culvert
Drainage divides, appx.
New ditch 4 culverts
New ditch



KOPPERS INDUSTRIES, INC. **GRENADA, MISSISSIPPI**	**Woodward-Clyde Consultants** Consulting Engineers, Geologists and Environmental Scientists Baton Rouge, Louisiana	**SITE LOCATION AND SURFACE FEATURES**	FILE NO. 91B432
	SCALE: 1" = 2000' / DRAWN BY: KPQ / DATE: 07/01/92 / CHKD. BY: A. Duhon / DATE: 6/7/92		FIG. NO. 4

APPENDIX A

SPILL REPORTS

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

OWNER/OPERATOR: Koppers Industries, Inc.
Plant Name: Tie Plant (Grenada)
Street Addr: P.O. Box 160 Tie Plant Road
Mail Addr: P.O. Box 160
City,St,ZIP: Tie Plant, Ms. 38960
Phone: (601)- 226-4584

FACILITY: Same as above.

DATE OF INCIDENT: 7-22-92 TIME OF INCIDENT: 7:30 A.M.

TYPE OF INCIDENT: (Circle One) Fire, Explosion, Hazardous Material Spill, Hazardous Waste Spill, Injury Accident

Other: _____

MATERIALS INVOLVED:

Name	Quantity
Storm Water From Treated	30 Gals.
Drip Pad	

EXTENT OF INJURIES, IF ANY:

None

ASSESSMENT OF ACTUAL OR POTENTIAL HAZARDS TO HUMAN HEALTH OR THE ENVIRONMENT, WHERE APPLICABLE:

None

DISPOSITION OF RECOVERED MATERIAL:

Material	Quantity	How disposed or stored
Storm Water	30 Gals.	30 gals went into cooling pond no longer us
		All other stayed on concrete, was pumped int system.
Sand	1/55 gal Drum	Sand dike was put around drain to stop release into pond. It was drummed after all other was pumped up. The pad was swept and this went in drums also.

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

NOTIFICATIONS LOG:

Agency	Phone No.	Name of Person	Date/Time Notified
Sheriff	911		
Local Emergency Planning Committee (LEPC)	601-226-1076	George Frazier	7/22/92-Called 8:44 A. He returned my call 9:
National Response Center	800-424-8802	Petty Officer Moore Report # 128171	7/22/92-8:22 A.M.
Fed. OSHA			
Environmental Program Manager-KII	412-227-2677	Stephen Smith	
St. of Miss. Pollution Control	1/800/222/6362	Alvin Reynolds	7/22/92-8:39 A.M.

ADDITIONAL DESCRIPTON OF INCIDENT AND ACTIONS TAKEN (Attach page if needed):

At 7:30 A.M. on Wednesday, July 22, 1992, Storm Water was released off of drip pad onto concrete pad west of drip pad. Approximately 30 gals. of water went down drain into cooling pond before flow was stopped and a small sand dike was put around the drain. The release occured from 2" pipe going to #1 sump pump. The pump had been removed and the line left un-capped and turned to discharge off of pad. Since all three sump pumps are on the same line, when another sump pump was accidentally started, the storm water was discharged off of pad for 3-5 minutes befor pump was shut off. Any water left standing on concrete pad was air pumped back onto drip pad and into effluent system. Sand was drummed and yellow labeled. The effected area of pad was swept and put in the drum also. Approximately 1/55 gallon drum.

REPORT BY (Name): Thomas L. Henderson **DATE:** 7/22/92

REPORT REVISED: _____ **DATE:** _____

REPORT REVISED: _____ **DATE:** _____

SUPPLEMENTAL INFORMATION REPORT
(This part of report is intended for KII internal use only.)

CLEARLY DESCRIBE HOW INCIDENT OCCURED:

The #1 sump pump on drip pad had been taken out for repair and the line had been left un-capped and turned to aim off pad. Since this line is a common line shared by the other two sump pumps, when the #2 pump was accidentally started for 3-5 minutes, storm water was being pumped throug the line discharged off drip pad onto concrete east of drip pad. 30 gals. ran down drain and into cooling pond that is no longer used.

WHAT ACTS OR CONDITIONS MOST DIRECTLY CAUSED THE INCIDENT:

The fact that 2" line at #1 sump pump had been left uncapped and aimed off of drip pad. Also neligence on part of employee who accidentally cut pump on for not having noticed the #1 sump pump being out of seryice.

DESCRIBE ANY SIMILAR INCIDENTS FROM LAST FEW YEARS. HOW ARE THESE SIMILAR? EQUIPMENT, PROCESS, TIME OF DAY, ETC.

On 3/24/92 the 2" line carrying waste water from seperator to bacteria tan ruptured and released water onto ground surface and into old cooling pond. Dirt from around this line was drummed and yellow labeled.

DESCRIBE WHAT HAS OR WILL BE DONE TO PREVENT A RECURRENCE:

Maintenance crew has been instructed to be sure all lines are capped off and not left open.

DESCRIBE ANY RESIDUAL CONTAMINATION OR IMPACT. IS FOLLOW-UP WORK NEEDED?

None

ATTACH PHOTOGRAPHS WHICH SHOW INCIDENT AREA, BEFORE AND AFTER RESPONSE ACTIONS. MARK DATE OF PHOTOS.

ATTACH ADDITIONAL SHEETS AS NEEDED TO DESCRIBE INCIDENT AND RESPONSE ACTIONS.

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

OWNER/OPERATOR: Koppers Industries, Inc.
Plant Name: Tie Plant (Grenada)
Street Addr: Tie Plant Road
Mail Addr: P.O. Box 160
City,St,ZIP: Tie Plant, Ms. 38960
Phone: (601)- 226-4584

FACILITY: Same as above.

DATE OF INCIDENT: 3/24/92 TIME OF INCIDENT: 2:43 p.m.

TYPE OF INCIDENT: (Circle One) Fire, Explosion, Hazardous Material Spill, Hazardous Waste Spill, Injury Accident

Other: _____

MATERIALS INVOLVED:

Name	Quantity
Waste Water Enroute From Separator To Bacteria Tank	100-150 gallons

EXTENT OF INJURIES, IF ANY:

NONE

ASSESSMENT OF ACTUAL OR POTENTIAL HAZARDS TO HUMAN HEALTH OR THE ENVIRONMENT, WHERE APPLICABLE:

NONE

DISPOSITION OF RECOVERED MATERIAL:

Material	Quantity	How disposed or stored
Waste Water	75-100 Gals.	Standing in Puddle was pumped back into Effluent System.
Soil	2/55 Gal.Drums	Cleaned From Around Pipe that Burst and Under puddle that was Standing.

MISSISSIPPI EMERGENCY MANAGEMENT AGENCY
HAZARDOUS MATERIAL RELEASE REPORT

1. Release Location

Tie Plant Road
Tie Plant, Ms. 38960
East of Hwy 51 South

2. Date 3 / 24 /92

3. Time 4:22

5. Contact for further information:

Name: Thomas L. Henderson

Title: Treating Supervisor

Address: P.O. Box 160 Tie Plant Road

City: Tie Plant

State: Ms Zip: 38960

Phone: 601-226-4584

4. Company Name

Koppers Industries, Inc.

6. Release Information

a) Name of substance: Waste Water Enroute To Bacteria Tank from Separator

b) NA/UN: _____ CAS: _____ c) Est. Quantity: 100-150 Gallons

d) Date of Release: 3/24/92 e) Time of Release: 2:43 p.m.

f) Duration of Release: 10 Min.

g) Release occurred into ☐ Air ☒ Water ☒ Ground

h) Substance is extremely hazardous ☐ YES ☒ NO
(per list in 40 CFR 355)

7. Recommended precautions

Wear Rubber gloves, goggles,
Rainsuit and Rubber Boots

8. Anticipated Health Risks

None

9. Person reporting release:

Name: Thomas L. Henderson

Title: Treating Supervisor

Address: P.O. Box 160, Tie Plant Rd

City: Tie Plant

State: Ms. Zip: 38960

Phone: 601-226-4584

10. Notified:

☐ Pollution Control
☐ Radiological Health

Name: Dusty Perkins

Date: 3/24/92 Time: 4:22 p.m.

11. Emergency Action Required:

☒ None ☐ State ☐ Local

12. Person taking report:

Dusty perkins

MEMA-III-1 [OCT87]

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

NOTIFICATIONS LOG:

Agency	Phone No.	Name of Person	Date/Time Notified
Sheriff	911		
Local Emergency Planning Committee (LEPC)	601-226-1076	George Frazier	4:35 p.m. 3/24/92
National Response Center	800-424-8802	Petty Officer Yuska Report #111659	4:10p.m. 3/24/92
Fed. OSHA			
Environmental Program Manager-KII	412-227-2677	Stephen Smith	

ADDITIONAL DESCRIPTON OF INCIDENT AND ACTIONS TAKEN (Attach page if needed):

At 2:43 p.m., the 2" line carrying water from the separator to the bacteria tank ruptured and released water up onto the surface of the ground. The line was immediately shutdown and purged of any residual water. The Plant backhoe and shovels were used to dig the line up and the hole was welded shut. The water, 75-100gals., collected in a puddle on the surface and was pumped back into the effluent system. 25-50 gals. of water did run into the cooling water pond on site. This pond is not in use at the present time, is totally contained on plant property. Soil from under the puddle and around ruptured pipe was drummed, approximately 2/55 gal drums and yellow labeled.

REPORT BY (Name): Thomas L. Henderson DATE: 3/25/92

REPORT REVISED: DATE:

REPORT REVISED: DATE:

SUPPLEMENTAL INFORMATION REPORT
(This part of report is intended for KII internal use only.)

CLEARLY DESCRIBE HOW INCIDENT OCCURED:

On 3/24/92, the 2" line carrying water from the separator to the bacteria tank burst and released water up onto the ground surface. Approximately 100-150 gals. was released. The line was repaired and the area around it cleaned up the same day.

WHAT ACTS OR CONDITIONS MOST DIRECTLY CAUSED THE INCIDENT:

Abrasive objects,(rocks&bricks) in ground around line and traffic over the top of the line, caused stress on the line and it ruptured.

DESCRIBE ANY SIMILAR INCIDENTS FROM LAST FEW YEARS. HOW ARE THESE SIMILAR? EQUIPMENT, PROCESS, TIME OF DAY, ETC.

A release occurred from this same line on 12/17/91 at 1:45 p.m.

DESCRIBE WHAT HAS OR WILL BE DONE TO PREVENT A RECURRENCE:

For the present time the line has been welded, however, immediate action has been taken to re-route this line above ground. Work was started on the above ground piping at 7:00 a.m. 3/25/92.

DESCRIBE ANY RESIDUAL CONTAMINATION OR IMPACT. IS FOLLOW-UP WORK NEEDED?

NONE

ATTACH PHOTOGRAPHS WHICH SHOW INCIDENT AREA, BEFORE AND AFTER RESPONSE ACTIONS. MARK DATE OF PHOTOS.

ATTACH ADDITIONAL SHEETS AS NEEDED TO DESCRIBE INCIDENT AND RESPONSE ACTIONS.

MISSISSIPPI EMERGENCY MANAGEMENT AGENCY
HAZARDOUS MATERIAL RELEASE REPORT

1. Release Location
Tie Plant Road
Tie Plant, Ms. 38960
East of Hwy 51 South

2. Date 12/17/91

3. Time 1:45 P.M.

5. Contact for further information:
Name: Thomas L. Henderson
Title: Treating Supervisor
Address: P.O. Box 160, Tie Plant Road
City: Tie Plant
State: Ms. Zip: 38960
Phone: 601/226/4584

4. Company Name
Koppers Industries, Inc.

6. Release Information
a) Name of substance: Waste water enroute to bacteria tank from separator
b) NA/UN: ____ CAS: ____ c) Est. Quantity: 50 Gals.
d) Date of Release: 12/17/91 e) Time of Release: 1:45 P.M.
f) Duration of Release: 2 Min.
g) Release occurred into ☐ Air ☒ Water ☒ Ground
h) Substance is extremely hazardous ☐ YES ☒ NO
(per list in 40 CFR 355)

7. Recommended precautions
Wear rubber gloves, goggles, rainsuit and rubber boots.

8. Anticipated Health Risks
NONE

9. Person reporting release:
Name: Thomas L. Henderson
Title: Treating Supervisor
Address: P.O. Box 160, Tie Plant Rd.
City: Tie Plant
State: Ms. Zip: 38960
Phone: 601/226/4584

10. Notified:
☐ Pollution Control
☐ Radiological Health
Name: Bob Rogers
Date: 12/17/91 Time: 3:15 P.M.

11. Emergency Action Required:
☒ None ☐ State ☐ Local

12. Person taking report:
Mark Muller

MEMA-III-1 (OCT87)

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

OWNER/OPERATOR: Koppers Industries, Inc.
Plant Name: Tie Plant (Grenada)
Street Addr: Tie Plant Road
Mail Addr: P.O. Box 160
City,St,ZIP: Tie Plant, Ms. 38960
Phone: (601) - 226-4584

FACILITY: Same as above.

DATE OF INCIDENT: 12-17-91 TIME OF INCIDENT: 1:45 P.M.

TYPE OF INCIDENT: (Circle One) Fire, Explosion, Hazardous Material Spill, Hazardous Waste Spill, Injury Accident

Other: Waste Water Spill

MATERIALS INVOLVED:

Name	Quantity
Waste Water Enroute From Separator To Bacteria Tank	50 Gals.

EXTENT OF INJURIES, IF ANY:

NONE

ASSESSMENT OF ACTUAL OR POTENTIAL HAZARDS TO HUMAN HEALTH OR THE ENVIRONMENT, WHERE APPLICABLE:

NONE

DISPOSITION OF RECOVERED MATERIAL:

Material	Quantity	How disposed or stored
50 Gals.Water		Water was standing in puddle. The puddle was pumped out back into the effluent system.
Soil	½ of 55 gal Drum	Cleaned around pipe that burst and around area where puddle was standing.

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

NOTIFICATIONS LOG:

Agency	Phone No.	Name of Person	Date/Time Notified
Sheriff	911		
Local Emergency Planning Committee (LEPC)	601/226/1076	George Frazier	Called @ 3:00P.M.12/17 George returned cal @4:15 P.M. 12/17/91
National Response Center	800-424-8802	Petty Office Beshoar Report # 100032	2:46 P.M. 12/17/91
Fed. OSHA			
Environmental Program Manager-KII	412-227-2677	Stephen Smith	1:45 P.M. 12/17/91

ADDITIONAL DESCRIPTON OF INCIDENT AND ACTIONS TAKEN (Attach page if needed):

At 1:45 P.M. on 12/17/91, the 2" line carrying water from the separator to the bacteria tank ruptured and started spewing water up through the ground. The water supply was immediately shut off and line was purged of any water. The plant back hoe and shovels were used to dig the line up and the hole was welded shut. The water, 40-45 gals., stayed in a puddle beside where it came out of ground. This puddle was pumped back into the effluent system. However, some water 5-10 gals. did run into cooling water pond on the plant site. An absorbent boom was used to try and recover most of the soil from around the leak site and puddle was drummed and yellow labelled (approximately ½ drum).

REPORT BY (Name): Thomas L. Henderson DATE: 12/18/91

REPORT REVISED: DATE:

REPORT REVISED: DATE:

SUPPLEMENTAL INFORMATION REPORT
(This part of report is intended for KII internal use only.)

CLEARLY DESCRIBE HOW INCIDENT OCCURED:

On 12/17/91, the 2"line carrying water from the separator to the bacteri tank burst and spewed water up out of the ground, creating a puddle approximately 40-45 gals. The line was welded shut and the area around tank was cleaned up the same day.

WHAT ACTS OR CONDITIONS MOST DIRECTLY CAUSED THE INCIDENT:

There were rocks and other abrasive objects in the ground around the line. Traffic across this area caused the rocks to rub against the line also the line would flex. These two things together caused a hole to be rubbed in the line.

DESCRIBE ANY SIMILAR INCIDENTS FROM LAST FEW YEARS. HOW ARE THESE SIMILAR? EQUIPMENT, PROCESS, TIME OF DAY, ETC.

The only similar incidents in the past, involving pipes, have been oil process lines that have ruptured under pressure and sprayed oil onto the ground. An incident like this occurred on 3/15/90.

DESCRIBE WHAT HAS OR WILL BE DONE TO PREVENT A RECURRENCE:

For the present time, the hole in the line was welded up to stop the leak. Sand was packed back around the line before it was covered. The plans are to re-route the line above the ground in the future.

DESCRIBE ANY RESIDUAL CONTAMINATION OR IMPACT. IS FOLLOW-UP WORK NEEDED?

NONE

ATTACH PHOTOGRAPHS WHICH SHOW INCIDENT AREA, BEFORE AND AFTER RESPONSE ACTIONS. MARK DATE OF PHOTOS.

ATTACH ADDITIONAL SHEETS AS NEEDED TO DESCRIBE INCIDENT AND RESPONSE ACTIONS.

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

OWNER/OPERATOR: Koppers Industries, Inc.
Plant Name: Tie Plant Ms (Grenada)
Street Addr: Tie Plant Rd.
Mail Addr: P.O. Box 160
City,St,ZIP: Tie Plant Ms 38960
Phone: (601)- 226-4584

FACILITY: Same as above.

DATE OF INCIDENT: 02-04-91 TIME OF INCIDENT: 10:00 A.M

TYPE OF INCIDENT: (Circle One) Fire, Explosion, Hazardous Material Spill, Hazardous Waste Spill, Injury Accident

Other: Spill consisted of 60/40 c/cTs out of Tank car

MATERIALS INVOLVED:

Name	Quantity
60/40 c/cTs	20-30 gallons

EXTENT OF INJURIES, IF ANY:

None

ASSESSMENT OF ACTUAL OR POTENTIAL HAZARDS TO HUMAN HEALTH OR THE ENVIRONMENT, WHERE APPLICABLE:

None - The 20-30 gallons of 60/40 spilled on the dirt/gravel surface was cleaned up and barreled within 2 hrs

DISPOSITION OF RECOVERED MATERIAL:

Material	Quantity	How disposed or stored
60/40 c/cTs mixed with sawdust & dirt/gravel	2 55gal drums including sawdust & dirt	Barrels were cleaned. Lids were placed securely on them. yellow (Hazardous) Labels were put on them and they were put in a storage shed

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

NOTIFICATIONS LOG:

Agency	Phone No.	Name of Person	Date/Time Notified
Sheriff	911		
Local Emergency Planning Committee (LEPC)	601-226-1016	George Frazier	02-04-91 / 10:20 A.M.
National Response Center	800-424-8802	Petty officer Cherry report # 57889	02-04-91 / 10:14 A.M.
Fed. OSHA			
Environmental Program Manager-KII	412-227-2677	Stephen Smith	
Called Steve Smith @ 10:10 A.M 02-04-91. He was not in. He called back at 10:15 A.M and Talked with Gary McClelland			
State of Mississippi Emergency response Commission		Mark Muller	02-04-91 / 10:25 A.M.

ADDITIONAL DESCRIPTON OF INCIDENT AND ACTIONS TAKEN (Attach page if needed):

At 10:00 A.M on 2-4-91 a weld in the tank car unloading line burst, and released a quantity of approximately 20-30 gallons of 6/40 oils onto the ground around the unloading area. Two men with shovels were able to clean the area up within 2hrs of the spill. They used sawdust to soak up any free oil, and this along with any contaminated dirt and gravel was put into two 55gal drums. The drums were cleaned, lids placed securely on them, marked with yellow "Hazardous" labels and put into our storage shed.

REPORT BY (Name): Thomas L. Henderson DATE: 2-05-91
REPORT REVISED: DATE:
REPORT REVISED: DATE:

SUPPLEMENTAL INFORMATION REPORT
(This part of report is intended for KII internal use only.)

CLEARLY DESCRIBE HOW INCIDENT OCCURED:

At 10:00 AM on 2-4-91 a weld in the tank car unloading line burst, and released approximately 20-30 gallons of 60/40 c/cts onto the ground. The weld was on an old strainer that was in the line that was used for an old metering device that used to be in the line. Since the metering device is not longer used the strainer was removed, and a straight section of pipe was put in to replace it.

WHAT ACTS OR CONDITIONS MOST DIRECTLY CAUSED THE INCIDENT:

The weld on the strainer mentioned above, had worn thin from use, and it finally ruptured causing the spill

DESCRIBE ANY SIMILAR INCIDENTS FROM LAST FEW YEARS. HOW ARE THESE SIMILAR? EQUIPMENT, PROCESS, TIME OF DAY, ETC.

On 3-15-90, an elbow on the 6" overhead line going to #4 gal burst and released approximately 250 gallons of grade 1 creosote onto the ground. In this incident, the elbow had been worn thin from use and burst

DESCRIBE WHAT HAS OR WILL BE DONE TO PREVENT A RECURRENCE:

As mentioned above, the old strainer in the line was removed and a straight section of pipe, was put in to replace it. Where the new piece of pipe was flanged to the old pipe, flange gasket covers were installed to prevent another spill.

DESCRIBE ANY RESIDUAL CONTAMINATION OR IMPACT. IS FOLLOW-UP WORK NEEDED?

None - all contaminated dirt and gravel was cleaned up within 2 hrs. No follow up work is needed.

ATTACH PHOTOGRAPHS WHICH SHOW INCIDENT AREA, BEFORE AND AFTER RESPONSE ACTIONS. MARK DATE OF PHOTOS.

ATTACH ADDITIONAL SHEETS AS NEEDED TO DESCRIBE INCIDENT AND RESPONSE ACTIONS.

MISSISSIPPI EMERGENCY MANAGEMENT AGENCY
HAZARDOUS MATERIAL RELEASE REPORT

1. Release Location

Koppers Industries, Inc.
Tie Plant Road
East of Hwy. 51
Tie Plant, MS. 38960

2. Date 10/03/90

3. Time 2:15 p.m.

5. Contact for further information:

Name: Gary E. McClelland
Title: General Yard Foreman
Address: P.O. Box 160, Tie Plant Road
City: Tie Plant
State: MS. Zip: 38960
Phone: 601-226-4584

4. Company Name

Koppers Industries, Inc.

6. Release Information

a) Name of substance: Pentachlorophenol Solution
b) (NA) UN: 9188 CAS: 87865 c) Rel. Quantity: 20 gallons - 13 LBS. Penta.
d) Date of Release: 10-3-90 e) Time of Release: 11:00 a.m.
f) Duration of Release: 5 minutes
g) Release occurred into ☐ Air ☒ Water ☒ Ground
h) Substance is extremely hazardous ☐ YES ☒ NO
(per list in 40 CFR 355)

7. Recommended precautions

When handling Pentachlorophenol, wear protective equipment such as impervious gloves, rain suit and eye protection.

8. Anticipated Health Risks

None

9. Person reporting release:

Name: Gary E. McClelland
Title: General Yard Foreman
Address: P.O. Box 160
City: Tie Plant
State: MS. Zip: 38960
Phone: 601-226-4584

10. Notified:

☐ Pollution Control
☐ Radiological Health
Name: Bill Ford
Date: 10-3-90 Time: 1:34 p.m.

11. Emergency Action Required:

☒ None ☐ State ☐ Local

12. Person taking report:

Bill Ford

MEMA-III-1 [OCT87]

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

OWNER/OPERATOR: Koppers Industries, Inc.
Plant Name: Grenada
Street Addr: Tie plant Rd
Mail Addr: P.O. Box 160
City, St, ZIP: Tie Plant Ms 38960
Phone: (601)- 226-4584

FACILITY: Same as above.

DATE OF INCIDENT: 10-3-90 TIME OF INCIDENT: 11:00 A.M

TYPE OF INCIDENT: (Circle One) Fire, Explosion, Hazardous Material Spill, Hazardous Waste Spill, Injury Accident

Other: Spill of Pentachlorophenol

MATERIALS INVOLVED:

Name	Quantity
Pentachlorophenol	20 gals. @ 13LB = RQ

EXTENT OF INJURIES, IF ANY:

None

ASSESSMENT OF ACTUAL OR POTENTIAL HAZARDS TO HUMAN HEALTH OR THE ENVIRONMENT, WHERE APPLICABLE:

None

DISPOSITION OF RECOVERED MATERIAL:

Material	Quantity	How disposed or stored
pentachlorophenol & water	Approximately 50 gallons penta & water mixture	Cleaned up with absorbent booms & absorbent cloth and put in 55gal drums.

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

NOTIFICATIONS LOG:

Agency	Phone No.	Name of Person	Date/Time Notified
Sheriff	911		
Local Emergency Planning Committee (LEPC)	226-1076	George Frazier	10-3-90 1:26 pm
National Response Center	800-424-8802	Cherry	1:19 p.m 10-3-90
		report # 42164	
Fed. OSHA			
Environmental Program Manager-KII	412-227-2677	Stephen Smith	1:11 pm 10-3-90
State of Mississippi	1-800-222-6362	Bill Ford	1:34 pm 10-3-90

ADDITIONAL DESCRIPTON OF INCIDENT AND ACTIONS TAKEN (Attach page if needed):

Condensate collection tank in standby boiler room. over flowed with pentachlorophenol, which came from leaking coils in penta treating cylinder #5. When tank over flowed, the penta ~~ran~~ flowed into drain at southwest corner of boiler room and flowed into cooling pond. The amount in pond was totally enclosed and soaked up with absorbent booms and cloths. The pond is totally enclosed and does not flow into any outside streams or ditches

REPORT BY (Name): Thomas L. Henderson DATE: 10-4-90
REPORT REVISED: DATE:
REPORT REVISED: DATE:

MISSISSIPPI EMERGENCY MANAGEMENT AGENCY
HAZARDOUS MATERIAL RELEASE REPORT

1. Release Location

Koppers Industries, Inc.
Tie Plant Road
East of Hwy. 51
Tie Plant, MS. 38960

2. Date 01/19/90

3. Time 1:00 P.M.

4. Company Name

Koppers Industries, Inc.

5. Contact for further information:

Name: Gary E. McClelland
Title: General Yard Foreman
Address: P.O. Box 160 · Tie Plant Road
City: Tie Plant
State: MS. Zip: 38960
Phone: 601-226-4584

6. Release Information

a) Name of substance: 60/40 Creosote/Coal Tar Solution
b) NA/UN: _____ CAS: 65996-92-1 c) Est. Quantity: 40-50 Gallons
d) Date of Release: 01-19-90 e) Time of Release: 7:56 A.M.
f) Duration of Release: 1 Minute
g) Release occurred into ☐ Air ☐ Water ☒ Ground
h) Substance is extremely hazardous ☐ YES ☒ NO
(per list in 40 CFR 355)

7. Recommended precautions

When Handling 60/40 C/CTS, Wear Protective Equipment Such As Impervious Gloves, Rain Suit and Eye Protection.

8. Anticipated Health Risks

None

9. Person reporting release:

Name: Gary E. McClelland
Title: General Yard Foreman
Address: P.O. Box 160
City: Tie Plant
State: MS. Zip: 38960
Phone: 601-226-0410

10. Notified:

☒ Pollution Control
☐ Radiological Health
Name: Alvin Reynolds
Date: 01-19-90 Time: 8:16 A.M.

11. Emergency Action Required:

☒ None ☐ State ☐ Local

12. Person taking report:

Alvin Reynolds

MEMA-III-1 [OCT87]

SUPPLEMENTAL INFORMATION REPORT
(This part of report is intended for KII internal use only.)

CLEARLY DESCRIBE HOW INCIDENT OCCURED:

A hole formed in coil box in pentachlorophenol treating cylinder #5. When the cylinder was put under pressure penta was forced into the coils, and finally into condensate lines and condensate collection tanks in boiler room. This caused the tank to overflow.

WHAT ACTS OR CONDITIONS MOST DIRECTLY CAUSED THE INCIDENT:

Same as above.

DESCRIBE ANY SIMILAR INCIDENTS FROM LAST FEW YEARS. HOW ARE THESE SIMILAR? EQUIPMENT, PROCESS, TIME OF DAY, ETC.

Creosote, backed through a check valve on #4 creosote cylinder and contaminated the condensate lines and collection tank. The valve was replaced

DESCRIBE WHAT HAS OR WILL BE DONE TO PREVENT A RECURRENCE:

The hole in the coil box in #5 cylinder was welded shut and all coils in cylinder were inspected for leaks using air pressure. No additional leaks were found.

DESCRIBE ANY RESIDUAL CONTAMINATION OR IMPACT. IS FOLLOW-UP WORK NEEDED?

None. No follow up work will be neccessary

ATTACH PHOTOGRAPHS WHICH SHOW INCIDENT AREA, BEFORE AND AFTER RESPONSE ACTIONS. MARK DATE OF PHOTOS.

ATTACH ADDITIONAL SHEETS AS NEEDED TO DESCRIBE INCIDENT AND RESPONSE ACTIONS.

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

OWNER/OPERATOR: Koppers Industries, Inc.
Plant Name: Tie Plant, MS. (Grenada)
Street Addr: Tie Plant Road
Mail Addr: P.O. Box 160
City, St, ZIP: Tie Plant, MS. 38960
Phone: (601) - 226-4584

FACILITY: Same as above.

DATE OF INCIDENT: 01-19-90 TIME OF INCIDENT: 7:56 A.M.

TYPE OF INCIDENT: (Circle One) Fire, Explosion, Hazardous Material Spill, Hazardous Waste Spill, Injury Accident

Other: Process 60/40 c/cTS Spill

MATERIALS INVOLVED:

Name	Quantity
60/40 c/cTS	40-50 Gallons

EXTENT OF INJURIES, IF ANY:

None

ASSESSMENT OF ACTUAL OR POTENTIAL HAZARDS TO HUMAN HEALTH OR THE ENVIRONMENT, WHERE APPLICABLE:

None — The 40-50 gal. quantity of 60/40 c/cTS spilled on the dirt/gravel surface was cleaned up within 1½ Hours.

DISPOSITION OF RECOVERED MATERIAL:

Material	Quantity	How disposed or stored
60/40 c/cTS mixed with Sawdust & Dirt/Gravel	2-55 gal. Drums including Sawdust and Dirt	Mixed with Non-Hazardous Process Waste (Fuel Additive Material) and Burned in Grenada's Wood Waste Boiler.

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

NOTIFICATIONS LOG:

Agency	Phone No.	Name of Person	Date/Time Notified
Sheriff	911		
Local Emergency Planning Committee (LEPC)	601-226-1076	George Frazier	1-19-90/8:20 A.M.
National Response Center	800-424-8802	John Cherry	1-19-90/8:12 A.M.
Fed. OSHA			
Environmental Program Manager-KII	412-777-2677	Stephen Smith	1-19-90/8:01 A.M.
State of Mississippi Emergency Response Commission	1-800-222-6362	Alvin Reynolds	1-19-90/8:16 A.M.
Mississippi Department of Environmental Quality	601-352-9100	Bob Rogers	1-19-90 →

(Inspected Spill Area at 9:15 A.M. with LEPC)

ADDITIONAL DESCRIPTION OF INCIDENT AND ACTIONS TAKEN (Attach page if needed):

At 7:56 a.m. on 1-19-90, the door gasket blew out while the cylinder was under pressure. The majority of the spill was contained and recovered in the door pit area. However, a quantity of approximately 40-50 gallons was spilled over the top of the door pit retaining wall onto the dirt/gravel surface in front of the cylinders. The plant backhoe was used to scrape up the spilled material - sawdust was mixed in to help absorb the creosote solution - and then all of the contaminated material was dumped into the Fuel Additive (Sludge) feeder and burned in the Wood Waste boiler.

REPORT BY (Name): Gary McClelland DATE: 1-19-90

REPORT REVISED: DATE:

REPORT REVISED: DATE:

SUPPLEMENTAL INFORMATION REPORT
(This part of report is intended for KII internal use only.)

CLEARLY DESCRIBE HOW INCIDENT OCCURED:

On 1-19-90, #2 cylinder was under pressure at the start of the 1st shift (7:00 a.m.). At 7:56 a.m. the door gasket blew out spilling 60/40 c/cts into the door pit area and also onto the ground on the yard area in front of the cylinder. The pressure on the treating cylinder was immediately released and clean up of the spill was started.

WHAT ACTS OR CONDITIONS MOST DIRECTLY CAUSED THE INCIDENT:

A worn door gasket — The gasket was utilized beyond its normal service life.

DESCRIBE ANY SIMILAR INCIDENTS FROM LAST FEW YEARS. HOW ARE THESE SIMILAR? EQUIPMENT, PROCESS, TIME OF DAY, ETC.

Door gasket blew out on 12-23-88 on #1 Cylinder door causing a spill. In this incident in '88, the cylinder door was not tightened adequately on a new gasket.

DESCRIBE WHAT HAS OR WILL BE DONE TO PREVENT A RECURRENCE:

Cylinder door gaskets will be inspected each time the cylinder door is opened and will be replaced if a worn or weak spot is detected in the gasket.

DESCRIBE ANY RESIDUAL CONTAMINATION OR IMPACT. IS FOLLOW-UP WORK NEEDED?

None — All the contaminated dirt/gravel was cleaned up. Follow-up work is not needed in this case.

ATTACH PHOTOGRAPHS WHICH SHOW INCIDENT AREA, BEFORE AND AFTER RESPONSE ACTIONS. MARK DATE OF PHOTOS.

ATTACH ADDITIONAL SHEETS AS NEEDED TO DESCRIBE INCIDENT AND RESPONSE ACTIONS.

EMERGENCY AND/OR HAZARDOUS MATERIALS
INCIDENT REPORT

OWNER/OPERATOR: Koppers Industries, Inc.
Plant Name: Tie Plant Ms (Grenada)
Street Addr: Tie Plant Rd.
Mail Addr: P.O. Box 160
City,St,ZIP: Tie Plant Ms 38960
Phone: (601)- 226-4584

FACILITY: Same as above.

DATE OF INCIDENT: 3-28-90 TIME OF INCIDENT: 6:05 P.M.

TYPE OF INCIDENT: (Circle One) Fire, Explosion, Hazardous Material Spill, Hazardous Waste Spill, Injury Accident

Other: Process 60/40 c/cts spill

MATERIALS INVOLVED:

Name	Quantity
60/40 creosote/creosote coal tar solution	200 gals

EXTENT OF INJURIES, IF ANY:
None

ASSESSMENT OF ACTUAL OR POTENTIAL HAZARDS TO HUMAN HEALTH OR THE ENVIRONMENT, WHERE APPLICABLE:
None: The 200 gal quantity was spilled onto dirt and gravel surface in front of cylinder basement area, and was cleaned up with plant backhoe within 2½ hrs. No waterway was reached.

DISPOSITION OF RECOVERED MATERIAL:

Material	Quantity	How disposed or stored
60/40 c/cts with dirt and gravel	4½-55gal drums with 60/40 c/cts, dirt & gravel	Mixed with non-hazardous process waste and burned in Grenada's wood waste boiler.

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

NOTIFICATIONS LOG:

Agency	Phone No.	Name of Person	Date/Time Notifie
Sheriff	911		
Local Emergency Planning Committee (LEPC)	601-226-1076	George Frazier Left message on Business phone and called him at hom	7:35 p.m.
National Response Center	800-424-8802	Scott Berry Report # 14832	7:25 p.m.
Fed. OSHA			
Environmental Program Manager-KII	412-227-2677	Stephen Smith he was at Florence plant, at 8:14 A.M. on 3-29-90	called [redacted] him on 3 2 Stephen called back

ADDITIONAL DESCRIPTON OF INCIDENT AND ACTIONS TAKEN (Attach page if needed):

At 6:05 p.m. on 3-28-90 the door gasket on #2 cylinder blew out while the cylinder was under pressure. 60/40 cuts sprayed onto the gravel & dirt surface at the ~~[illegible]~~ north end of the cylinder basement area. The plant backhoe was used to scrape up the spilled material, and the 60/40 cuts, dirt, and gravel, mixture was dumped into the fuel additive, sludge, feeder and burned in the wood waste boiler. The door gasket was replaced the same evening. The spilled quantity was estimated at ~~[illegible]~~ 200 gals.

REPORT BY (Name): Thomas L. Henderson DATE: 3-29-90
REPORT REVISED: DATE:
REPORT REVISED: DATE:

SUPPLEMENTAL INFORMATION REPORT
(This part of report is intended for KII internal use only.)

CLEARLY DESCRIBE HOW INCIDENT OCCURED:

On 3-28-90 at 6:05 P.M. The door gasket on #2 cylinder blew out while the cylinder was under pressure. 60/40 C/CTS sprayed onto the dirt and gravel surface at north end of cylinder basement area. The spilled amount was estimated at 200 gals. The gasket was replaced and the cylinder was put back on line.

WHAT ACTS OR CONDITIONS MOST DIRECTLY CAUSED THE INCIDENT:

The door gasket was worn slightly, the door had been loosened and retightened before the charge was pressed, and the door did not reseat itself properly in the gasket.

DESCRIBE ANY SIMILAR INCIDENTS FROM LAST FEW YEARS. HOW ARE THESE SIMILAR? EQUIPMENT, PROCESS, TIME OF DAY, ETC.

The elbow on 6" overhead line to #4 cyl, and heat exchanger gasket on #2 blew out earlier this month. Door gaskets blew out on #1 & #2 cylinders in Jan & Feb.

DESCRIBE WHAT HAS OR WILL BE DONE TO PREVENT A RECURRENCE:

When doors are loosened prior to pressing, they will be opened all the way, and the gasket inspected. The seating of the door in gasket will be inspected each and every time cylinder doors are opened and closed.

DESCRIBE ANY RESIDUAL CONTAMINATION OR IMPACT. IS FOLLOW-UP WORK NEEDED?

No residual contamination occured in this case.

ATTACH PHOTOGRAPHS WHICH SHOW INCIDENT AREA, BEFORE AND AFTER RESPONSE ACTIONS. MARK DATE OF PHOTOS.

ATTACH ADDITIONAL SHEETS AS NEEDED TO DESCRIBE INCIDENT AND RESPONSE ACTIONS.

MISSISSIPPI EMERGENCY MANAGEMENT AGENCY
HAZARDOUS MATERIAL RELEASE REPORT

1. Release Location
Koppers Industries Inc.
Tie Plant Rd
Tie Plant Ms 38960

2. Date 3/29/90

3. Time 12:30 P.M.

5. Contact for further information:
Name: Thomas L. Henderson
Title: Treating Supervisor
Address: P.O. Box 160 · Tie Plant Rd.
City: Tie Plant
State: Ms Zip: 38960
Phone: 601-226-4584

4. Company Name
Koppers Industries Inc.

6. Release Information
a) Name of substance: 60/40 creosote / creosote Coal tar Solution
b) NA/UN: _____ CAS: 65996-92-1 c) Est. Quantity: 200 gals.
d) Date of Release: 3-28-90 e) Time of Release: 6:05 P.M.
f) Duration of Release: _____
g) Release occurred into ☐ Air ☐ Water ☑ Ground
h) Substance is extremely hazardous ☐ YES ☑ NO
(per list in 40 CFR 355)

7. Recommended precautions
When handling 60/40 c/cts wear rubber gloves, goggles and a rainsuit

8. Anticipated Health Risks
None

9. Person reporting release:
Name: Thomas L. Henderson
Title: Treating Supervisor
Address: P.O. Box 160 Tie Plant Rd
City: Tie Plant
State: Ms. Zip: 38960
Phone: 601-226-4584

10. Notified:
☑ Pollution Control
☐ Radiological Health
Name: Nancy Mize
Date: 3-28-90 Time: 7:39 P.M.

11. Emergency Action Required:
☑ None ☐ State ☐ Local

12. Person taking report:
Nancy Mize

MEMA-III-1 [OCT87]

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

OWNER/OPERATOR: Koppers Industries, Inc.
Plant Name: Tie Plant Ms (Grenada)
Street Addr: Tie Plant Rd.
Mail Addr: P.O. Box 160
City, St, ZIP: Tie Plant Ms 38960
Phone: (601)- 226 - 4584

FACILITY: Same as above.

DATE OF INCIDENT: 3-15-90 TIME OF INCIDENT: 4:05 p.m.

TYPE OF INCIDENT: (Circle One) Fire, Explosion, Hazardous Material Spill, Hazardous Waste Spill, Injury Accident

Other: Process Grade #1 creosote spill

MATERIALS INVOLVED:

Name	Quantity
Grade #1 creosote	250 gal

EXTENT OF INJURIES, IF ANY:

None

ASSESSMENT OF ACTUAL OR POTENTIAL HAZARDS TO HUMAN HEALTH OR THE ENVIRONMENT, WHERE APPLICABLE:

None: The 250 gallon quantity was spilled onto the dirt and gravel surface outside cylinder basement area, and was cleaned up with plant backhoe within 2 hrs. No waterway was reached.

DISPOSITION OF RECOVERED MATERIAL:

Material	Quantity	How disposed or stored
Grade #1 creosote with dirt & gravel	6½ - 55 gal drums including grade #1 creosote & dirt and gravel	Mixed with non-hazardous process waste and burned in Grenada's wood waste boiler.

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

NOTIFICATIONS LOG:

Agency	Phone No.	Name of Person	Date/Time Notified
Sheriff	911		
Local Emergency Planning Committee (LEPC)	601-226-1076	George Frazier	4:44 pm
National Response Center	800-424-8802	Petty officer Bradshaw Report # 12714	4:34 p.m.
Fed. OSHA			
Environmental Program Manager-KII	412-227-2677	Stephen Smith	3-16-90/7:40 a.m.

ADDITIONAL DESCRIPTON OF INCIDENT AND ACTIONS TAKEN (Attach page if needed):

At 4:05pm on 3-15-90, the elbow in the six inch overhead line going to #4 cyl. burst, while the cylinder was under pressure Grade #1 creosote sprayed into the cylinder basement area and on to the dirt and gravel surface at the South east corner of the cylinder basement area. The plant backhoe was used to scrape up the spilled material which was put into the fuel additive system to be burned in the wood waste boiler. The elbow was repaired the same evening. The spilled quantity was estimated to be 250 gallons.

REPORT BY (Name): Thomas L. Henderson DATE: 3-16-90
REPORT REVISED: DATE:
REPORT REVISED: DATE:

SUPPLEMENTAL INFORMATION REPORT
(This part of report is intended for EII internal use only.)

CLEARLY DESCRIBE HOW INCIDENT OCCURED:

On 3-15-90 the Elbow in the 6" overhead line going to #4 cylinder burst while the cylinder was under pressure. Grade #1 creosote sprayed onto the dirt and gravel surface at the south east corner of the cylinder basement area. The amount spilled was estimated to be 250 gallons. A patch was welded the full length of the Elbow and the cylinder was put back on the line the same evening.

WHAT ACTS OR CONDITIONS MOST DIRECTLY CAUSED THE INCIDENT:

The Elbow was worn thin from the constant flow of oil back and forth to the cylinder from the work tank. There are also impurities picked up from the wood, such as sand, that increases the wearing process on the piping.

DESCRIBE ANY SIMILAR INCIDENTS FROM LAST FEW YEARS. HOW ARE THESE SIMILAR? EQUIPMENT, PROCESS, TIME OF DAY, ETC.

In January and February the door gaskets on #1 and #2 cylinders blew out, and the heat exchanger gasket blew out on #2 cylinder earlier this month.

DESCRIBE WHAT HAS OR WILL BE DONE TO PREVENT A RECURRENCE:

Piping of the same age or older will be visually inspected for signs of wear. If any is noticed, these portions will be replaced.

DESCRIBE ANY RESIDUAL CONTAMINATION OR IMPACT. IS FOLLOW-UP WORK NEEDED?

No residual contamination occured in this case.

ATTACH PHOTOGRAPHS WHICH SHOW INCIDENT AREA, BEFORE AND AFTER RESPONSE ACTIONS. MARK DATE OF PHOTOS.

ATTACH ADDITIONAL SHEETS AS NEEDED TO DESCRIBE INCIDENT AND RESPONSE ACTIONS.

MISSISSIPPI EMERGENCY MANAGEMENT AGENCY
HAZARDOUS MATERIAL RELEASE REPORT

1. Release Location
Koppers Industries Inc
Tie Plant Road
Tie Plant Ms 38960

2. Date 03/16/90

3. Time 1:15 pm

5. Contact for further information:
Name: Thomas L. Henderson
Title: Treating Supervisor
Address: P.O. Box 160, Tie Plant Rd
City: Tie Plant
State: Ms Zip: 38960
Phone: 601-226-4584

4. Company Name

6. Release Information
a) Name of substance: Grade #1 creosote
b) NA/UN: _____ CAS: 8001-58-9 c) Est. Quantity: 250 gallons
d) Date of Release: 3-15-90 e) Time of Release: 4:05 P.M.
f) Duration of Release: 1½ min
g) Release occurred into ☐ Air ☐ Water ☒ Ground
h) Substance is extremely hazardous ☐ YES ☒ NO
(per list in 40 CFR 355)

7. Recommended precautions
When handling grade #1 creosote wear protective clothing such as impervious gloves, Rain suit and eye goggles

8. Anticipated Health Risks
none

9. Person reporting release:
Name: Thomas L. Henderson
Title: Treating Supervisor
Address: P.O. Box 160 Tie plant Rd
City: Tie Plant
State: Ms Zip: 38960
Phone: 601-226-4584

10. Notified:
☒ Pollution Control
☐ Radiological Health
Name: Bill Ford
Date: 3-15-90 Time: 4:45 pm

11. Emergency Action Required:
☒ None ☐ State ☐ Local

12. Person taking report:
Bill Ford

MEMA-III-1 [OCT87]

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

OWNER/OPERATOR: Koppers Industries, Inc.
Plant Name: Tie Plant, MS. (Grenada)
Street Addr: Tie Plant Road
Mail Addr: P.O. Box 160
City, St, ZIP: Tie Plant, MS. 38960
Phone: (601) - 226-4584

FACILITY: Same as above.

DATE OF INCIDENT: 03-08-90 TIME OF INCIDENT: 8:35 p.m.

TYPE OF INCIDENT: (Circle One) Fire, Explosion, Hazardous Material Spill, Hazardous Waste Spill, Injury Accident

Other: Process 60/40 c/cTS spill

MATERIALS INVOLVED:

Name	Quantity
60/40 c/cTS	25 Gallons

EXTENT OF INJURIES, IF ANY:

None

ASSESSMENT OF ACTUAL OR POTENTIAL HAZARDS TO HUMAN HEALTH OR THE ENVIRONMENT, WHERE APPLICABLE:

None — The 25 gal. quantity of 60/40 c/cTS spilled on the dirt/gravel surface was cleaned up within 2 Hours. The spilled material did not reach any waterway.

DISPOSITION OF RECOVERED MATERIAL:

Material	Quantity	How disposed or stored
60/40 c/cTS mixed with dirt + gravel	1-55 gal. Drum including 60/40, dirt and gravel.	Mixed with Non-Hazardous Process Waste (Fuel Additive Material) and Burned in Grenada plant's wood waste boiler.

EMERGENCY AND/OR HAZARDOUS MATERIALS
INCIDENT REPORT

NOTIFICATIONS LOG:

Agency	Phone No.	Name of Person	Date/Time Notified
Sheriff	911		
Local Emergency Planning Committee (LEPC)	601-226-1076	George Frazier	3-8-90/10:15 p.m.
National Response Center	800-424-8802	Scott Berry	3-8-90/10:02 p.m.
		Report No. 11513	
Fed. OSHA			
Environmental Program Manager-KII	412-227-2677	Stephen Smith	(Not Available)
	412-227-2424	Lee Allison	3-9-90/7:40 a.m.
State of MS. Emergency Response Commission	800-222-6362	Robin Powell	3-8-90/10:17 p.m.

ADDITIONAL DESCRIPTION OF INCIDENT AND ACTIONS TAKEN (Attach page if needed):

At 8:35 p.m. on 3-08-90, the head gasket on #2 cylinder heat exchanger blew out while the cylinder was under pressure. 60/40 c/cTs sprayed out onto the dirt/gravel surface in front of the cylinders with the majority of the solution being contained within the cylinder basement area. The plant backhoe was used to scrape up the spilled material which was then put in the Fuel Additive Sludge feeder to be burned in the wood waste boiler. The gasket on the heat exchanger was repaired the same night. The amount of material spilled on the ground was estimated to be 25 gallons.

REPORT BY (Name): Gary McClelland DATE: 3-09-90
REPORT REVISED: DATE:
REPORT REVISED: DATE:

SUPPLEMENTAL INFORMATION REPORT
(This part of report is intended for KTI internal use only.)

CLEARLY DESCRIBE HOW INCIDENT OCCURED:

On 3-08-90, the head gasket on #2 Cylinder heat exchanger blew out while the cylinder was under pressure. 60/40 c/cTS sprayed out onto the dirt/gravel surface in front of the cylinders. The amount spilled was estimated to be 25 gallons. Clean up was started within one hour. The gasket was replaced and the cylinder was back on line that night.

WHAT ACTS OR CONDITIONS MOST DIRECTLY CAUSED THE INCIDENT:

An old gasket on the heat exchanger. This particular gasket is not one that normally blows out.

DESCRIBE ANY SIMILAR INCIDENTS FROM LAST FEW YEARS. HOW ARE THESE SIMILAR? EQUIPMENT, PROCESS, TIME OF DAY, ETC.

Cylinder door gaskets on #1 + #2 Cylinders - January and February of this year produced similar type spills.

DESCRIBE WHAT HAS OR WILL BE DONE TO PREVENT A RECURRENCE:

Heat exchangers to be inspected by treating operator each time a cylinder goes under pressure.

DESCRIBE ANY RESIDUAL CONTAMINATION OR IMPACT. IS FOLLOW-UP WORK NEEDED?

No residual contamination in this case.

ATTACH PHOTOGRAPHS WHICH SHOW INCIDENT AREA, BEFORE AND AFTER RESPONSE ACTIONS. MARK DATE OF PHOTOS.

ATTACH ADDITIONAL SHEETS AS NEEDED TO DESCRIBE INCIDENT AND RESPONSE ACTIONS.

MISSISSIPPI EMERGENCY MANAGEMENT AGENCY
HAZARDOUS MATERIAL RELEASE REPORT

1. Release Location

Koppers Industries, Inc.
Tie Plant Road
East of Hwy. 51
Tie Plant, MS. 38960

2. Date 03 / 09 / 90

3. Time 11:15 A.M.

4. Company Name

Koppers Industries, Inc.

5. Contact for further information:

Name: Gary E. McClelland
Title: General Yard Foreman
Address: P.O. Box 160, Tie Plant Road
City: Tie Plant
State: Ms. Zip: 38960
Phone: 601-226-4584

6. Release Information

a) Name of substance: 60/40 Creosote/Coal Tar Solution
b) NA/UN: — CAS: 65996-92-1 c) Est. Quantity: 25 Gallons
d) Date of Release: 3-08-90 e) Time of Release: 8:35 p.m.
f) Duration of Release: 30 Seconds
g) Release occurred into ☐ Air ☐ Water ☒ Ground
h) Substance is extremely hazardous ☐ YES ☒ NO
(per list in 40 CFR 355)

7. Recommended precautions

When Handling 60/40 c/c TS, Wear Protective Equipment Such As Impervious Gloves, Rain Suit and Eye Protection.

8. Anticipated Health Risks

None

9. Person reporting release:

Name: Gary E. McClelland
Title: General Yard Foreman
Address: P.O. Box 160
City: Tie Plant
State: MS. Zip: 38960
Phone: 601-226-4584

10. Notified:

☒ Pollution Control
☐ Radiological Health

Name: Robin Powell
Date: 3-08-90 Time: 10:17 p.m.

11. Emergency Action Required:

☒ None ☐ State ☐ Local

12. Person taking report:

Robin Powell

MISSISSIPPI EMERGENCY MANAGEMENT AGENCY
HAZARDOUS MATERIAL RELEASE REPORT

1. Release Location
Koppers Industries Inc
Tie Plant Road
Tie Plant Ms 38960

2. Date 10/12/90

3. Time 7:30 A.M.

5. Contact for further information:
Name: Thomas L. Henderson
Title: Treating Supervisor
Address: P.O. Box 160 · Tie Plant Rd.
City: Tie Plant
State: Ms Zip: 38960
Phone: 601-226-4584

4. Company Name
Koppers Industries Inc

6. Release Information
a) Name of substance: 60/40 creosote/coal tar solution & water mix
b) NA/UN: _____ CAS: 65996-92-1 c) Est. Quantity: 25-30 gallons
d) Date of Release: 10-11-90 e) Time of Release: 4:00 A.m
f) Duration of Release: < 1 minute
g) Release occurred into ☐ Air ☐ Water ☑ Ground
h) Substance is extremely hazardous ☐ YES ☑ NO
(per list in 40 CFR 355)

7. Recommended precautions
when handling 60/40 creosote wear protective equipment such as Impervious Gloves, Rain suit & Eye protection

8. Anticipated Health Risks
None

9. Person reporting release:
Name: Thomas L. Henderson
Title: Treating Supervisor
Address: P.O. Box 160
City: Tie plant
State: Ms Zip: 38960
Phone: 601-226-4584

10. Notified:
☑ Pollution Control
☐ Radiological Health
Name: Alvin Reynolds
Date: 10-11-90 Time: 9:00 A.m.

11. Emergency Action Required:
☑ None ☐ State ☐ Local

12. Person taking report:
Alvin Reynolds

MEMA-III-1 [OCT87]

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

OWNER/OPERATOR: Koppers Industries, Inc.
Plant Name: Tie Plant Ms. (Grenada)
Street Addr: Tie Plant Rd
Mail Addr: P.O Box 160
City,St,ZIP: Tie Plant Ms 38960
Phone: (601)-226-4584

FACILITY: Same as above.

DATE OF INCIDENT: 10-11-90 TIME OF INCIDENT: 4:00 A.m.

TYPE OF INCIDENT: (Circle One) Fire, Explosion, Hazardous Material Spill, Hazardous Waste Spill, Injury Accident

Other: Process 60/40 c/cts & Water mixture spill

MATERIALS INVOLVED:

Name	Quantity
60/40 c/cts & water	25-30 gallons

EXTENT OF INJURIES, IF ANY:

None

ASSESSMENT OF ACTUAL OR POTENTIAL HAZARDS TO HUMAN HEALTH OR THE ENVIRONMENT, WHERE APPLICABLE:

None - The 25-30 gallon quantity of 60/40 c/cts & water mixture spilled on dirt & gravel was cleaned up within 1 hr.

DISPOSITION OF RECOVERED MATERIAL:

Material	Quantity	How disposed or stored
25-30 gallons 60/40 c/cts & water mixed with dirt	1-55 gallon drum including dirt	Mixed with Fuel additive material and burned in Grenadas wood waste boiler.

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

NOTIFICATIONS LOG:

Agency	Phone No.	Name of Person	Date/Time Notified
Sheriff	911		
Local Emergency Planning Committee (LEPC)	601-226-1076	George Frazier	10-11-90 8:51 A.M.
National Response Center	800-424-8802	Kyle Wallace	10-11-90 8:55 A.M.
	Report #	43115	
Fed. OSHA			
Environmental Program Manager-KII	412-227-2677	Stephen Smith	10-11-90 8:00 A.M.
State of Ms. Emergency response Comm.	1-800-222-6362	Alma Reynolds	10-11-90 9:00 A.M.

ADDITIONAL DESCRIPTON OF INCIDENT AND ACTIONS TAKEN (Attach page if needed):

At 4:00 A.M on 10-11-90, the creosote blow down tank at the south end of the treating blew over, releasing approximately 25-30 gallons of 60/40 C/CTS and water mixture. The plant Bob-Cat loader and shovels was used to scrape up the contaminated dirt and gravel and it was dumped in with fuel additive material and burned in Grenadas' wood waste boiler.

REPORT BY (Name): Thomas L. Henderson DATE: 10-12-90

REPORT REVISED: DATE:

REPORT REVISED: DATE:

SUPPLEMENTAL INFORMATION REPORT
(This part of report is intended for KII internal use only.)

CLEARLY DESCRIBE HOW INCIDENT OCCURED:

On 10-11-90 at 4:00 A.M. The creosote blow down tank blew over, spilling w/40 c/ts and water. All lines to blow down were immediately closed, and clean up was started once the 1ST shift came on duty.

WHAT ACTS OR CONDITIONS MOST DIRECTLY CAUSED THE INCIDENT:

On 10-10-90, before the 1ST shift left the blow down was checked by opening drain line, and appeared to be empty. However, after spill it was determined that the drain line was clogged up, and was not draining properly. The tank had ~~[illegible]~~ had more in it than thought, and when more went in during that night and the morning of 10-11-90 it ov

DESCRIBE ANY SIMILAR INCIDENTS FROM LAST FEW YEARS. HOW ARE THESE SIMILAR? EQUIPMENT, PROCESS, TIME OF DAY, ETC.

Door gasket blew on #2 cyl on 1-19-90, releasing w/40 c/ts onto dirt & gravel surface. The door gasket failed under pressure.

DESCRIBE WHAT HAS OR WILL BE DONE TO PREVENT A RECURRENCE:

The drain line on the blow down tank was steamed out and un-clogged, also the coils on the blow down tank itself were opened, to keep the liquid in the tank at a higher temp and keep any sludge from forming.

DESCRIBE ANY RESIDUAL CONTAMINATION OR IMPACT. IS FOLLOW-UP WORK NEEDED?

None; No follow up work is needed.

ATTACH PHOTOGRAPHS WHICH SHOW INCIDENT AREA, BEFORE AND AFTER RESPONSE ACTIONS. MARK DATE OF PHOTOS.

ATTACH ADDITIONAL SHEETS AS NEEDED TO DESCRIBE INCIDENT AND RESPONSE ACTIONS.

Gary

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

OWNER/OPERATOR: Koppers Industries, Inc.
Plant Name: Tie Plant Ms
Street Addr: Tie Plant Rd
Mail Addr: P.O. Box 160
City,St,ZIP: Tie Plant Ms 38960
Phone: (601)- 226-4584

FACILITY: Same as above.

DATE OF INCIDENT: 02-20-90 TIME OF INCIDENT: 4:30 AM

TYPE OF INCIDENT: (Circle One) Fire, Explosion, Hazardous Material Spill, Hazardous Waste Spill, Injury Accident

Other: Process 60/40 C/CTS spill

MATERIALS INVOLVED:

Name	Quantity
60/40 C/CTS	20-80 gls

EXTENT OF INJURIES, IF ANY:

None

ASSESSMENT OF ACTUAL OR POTENTIAL HAZARDS TO HUMAN HEALTH OR THE ENVIRONMENT, WHERE APPLICABLE:

There were no hazards. The 20-80 gls of 60/40 spilled on the dirt and gravel surface was cleaned up within 2 hrs.

DISPOSITION OF RECOVERED MATERIAL:

Material	Quantity	How disposed or stored
60/40 C/CTS mixed with sawdust & dirt/gravel	2 1/2 55gal drums including sawdust and dirt	Mixed with non-hazardous Process waste (Fuel Additive Material) and burned in Grenadas wood waste boiler

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

NOTIFICATIONS LOG:

Agency	Phone No.	Name of Person	Date/Time Notified
Sheriff	911		
Local Emergency Planning Committee (LEPC)	601-226-1076	George Frazier	02-20-90/8:02 AM
National Response Center	800-424-8802	James Heard	02-20-90/7:30 A.M.
Fed. OSHA			
Environmental Program Manager-KII	412-227-2677	Stephen Smith	called and stephen was not in He called back at 10:00 A.M. 02-20-90
State of Mississippi Emergency Response Committee	1-800-222-6362	Leon Shaifer	8:14 AM/02-20-90

ADDITIONAL DESCRIPTION OF INCIDENT AND ACTIONS TAKEN (Attach page if needed):

At 4:30 AM on 02-20-90, the door gasket blew out while the cylinder was under pressure. Most of the spill was contained in the door pit area, but 70-80 gallons did get onto the dirt and gravel surface in front of the cylinders. The plant backhoe was used to mix sawdust into the oil to Absorb it, and then the backhoe was used to dump the creosote, sawdust, and dirt mixture into the fuel additive (Sludge) feeder. To be burned in the wood waste boiler.

REPORT BY (Name): Thomas L. Henderson DATE: 02-20-90

REPORT REVISED: DATE:

REPORT REVISED: DATE:

SUPPLEMENTAL INFORMATION REPORT
(This part of report is intended for KII internal use only.)

CLEARLY DESCRIBE HOW INCIDENT OCCURED:

On 02-20-90, #1 cylinder was under pressure at 4:30 AM, when the door gasket blew out spilling 69% into the door pit, and on to the dirt and gravel surface in front of the cylinders. The pressure on the cylinder was immediately released, and the clean up process started.

WHAT ACTS OR CONDITIONS MOST DIRECTLY CAUSED THE INCIDENT:

The door gasket was worn thin in several places, and the door was not fitting properly. The door hinges were loose and had allowed the door to drop, and not fit properly.

DESCRIBE ANY SIMILAR INCIDENTS FROM LAST FEW YEARS. HOW ARE THESE SIMILAR? EQUIPMENT, PROCESS, TIME OF DAY, ETC.

Door gasket blew out on 01-19-90 on #2 cyl door causing a spill. In this incident, the gasket was utilized beyond its regular service life.

DESCRIBE WHAT HAS OR WILL BE DONE TO PREVENT A RECURRENCE:

Door gaskets will be thoroughly inspected each time the doors are opened, and replaced if need be. Also, doors will be checked to make sure they are fitting properly

DESCRIBE ANY RESIDUAL CONTAMINATION OR IMPACT. IS FOLLOW UP WORK NEEDED?

None - all contaminated sawdust, dirt, and gravel was cleaned up and dumped in fuel additive (sludge) feeder, no follow up work is needed

ATTACH PHOTOGRAPHS WHICH SHOW INCIDENT AREA, BEFORE AND AFTER RESPONSE ACTIONS. MARK DATE OF PHOTOS.

ATTACH ADDITIONAL SHEETS AS NEEDED TO DESCRIBE INCIDENT AND RESPONSE ACTIONS.

GARY

MISSISSIPPI EMERGENCY MANAGEMENT AGENCY
HAZARDOUS MATERIAL RELEASE REPORT

1. Release Location

Koppers Industries Inc
Tie Plant Road
East of Hwy. 51
Tie Plant, Ms 38960

2. Date 02 / 20 / 90

3. Time 1:15 pm

5. Contact for further information:

Name: Thomas L. Henderson
Title: Treating Supervisor
Address: P.O. Box 160 Tie Plant Rd.
City: Tie Plant
State: Ms. Zip: 38960
Phone: 601-226-4584

4. Company Name

Koppers Industries, Inc.

6. Release Information

a) Name of substance: 60/40 Creosote / Coal tar Solution
b) NA/UN: _____ CAS: 65996-92-1 c) Est. Quantity: 70-80 Gallons
d) Date of Release: 02-20-90 e) Time of Release: 4:30 A.M.
f) Duration of Release: 1 Minute
g) Release occurred into ☐ Air ☐ Water ☑ Ground
h) Substance is extremely hazardous ☐ Yes ☑ No
(per list in 40 CFR 355)

7. Recommended precautions

When handling 60/40 wear safety equipment such as Impervious Gloves, Coveralls, and Eye Protection

8. Anticipated Health Risks

None

9. Person reporting release:

Name: Thomas L. Henderson
Title: Treating Supervisor
Address: P.O. Box 160 Tie Plant Rd.
City: Tie Plant
State: Ms Zip: 38960
Phone: 601-226-4584

10. Notified:

☑ Pollution Control
☐ Radiological Health

Name: LEON Shaifer
Date: 02-20-90 Time: 8:14 A.M.

11. Emergency Action Required:

☑ Fed ☐ State ☐ Local

12. Person taking report:

Leon Shaifer

MEMA-III-1 [OCT87]

Extra Copy

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

OWNER/OPERATOR: Koppers Industries, Inc.
Plant Name: Tie Plant, MS. (Grenada)
Street Addr: Tie Plant Road
Mail Addr: P.O. Box 160
City, St, ZIP: Tie Plant, MS. 38960
Phone: (601) - 226-4584

FACILITY: Same as above.

DATE OF INCIDENT: 01-19-90 TIME OF INCIDENT: 7:56 A.M.

TYPE OF INCIDENT: (Circle One) Fire, Explosion, Hazardous Material Spill, Hazardous Waste Spill, Injury Accident

Other: Process 60/40 c/cTS Spill

MATERIALS INVOLVED:

Name	Quantity
60/40 c/cTS	40-50 Gallons

EXTENT OF INJURIES, IF ANY:

None

ASSESSMENT OF ACTUAL OR POTENTIAL HAZARDS TO HUMAN HEALTH OR THE ENVIRONMENT, WHERE APPLICABLE:

None — The 40-50 gal. quantity of 60/40 c/cTS spilled on the dirt/gravel surface was cleaned up within 1½ Hours.

DISPOSITION OF RECOVERED MATERIAL:

Material	Quantity	How disposed or stored
60/40 c/cTS mixed with Sawdust & Dirt/Gravel	2-55 gal. Drums including Sawdust and Dirt	Mixed with Non-Hazardous Process Waste (Fuel Additive Material) and Burned in Grenada's Wood Waste Boiler.

EMERGENCY AND/OR HAZARDOUS MATERIALS
INCIDENT REPORT

NOTIFICATIONS LOG:

Agency	Phone No.	Name of Person	Date/Time Notified
Sheriff	911		
Local Emergency Planning Committee (LEPC)	601-226-1076	George Frazier	1-19-90/8:20 A.M.
National Response Center	800-424-8802	John Cherry	1-19-90/8:12 A.M.
Fed. OSHA			
Environmental Program Manager-KII	412-777-2677	Stephen Smith	1-19-90/8:01 A.M.
State of Mississippi Emergency Response Commission	1-800-222-6362	Alvin Reynolds	1-19-90/8:16 A.M.
Mississippi Department of Environmental Quality	601-352-9100	Bob Rogers	1-19-90 →

(Inspected Spill Area at 9:15 A.M. with LEPC)

ADDITIONAL DESCRIPTION OF INCIDENT AND ACTIONS TAKEN (Attach page if needed):

At 7:56 a.m. on 1-19-90, the door gasket blew out while the cylinder was under pressure. The majority of the spill was contained and recovered in the door pit area. However, a quantity of approximately 40-50 gallons was spilled over the top of the door pit retaining wall onto the dirt/gravel surface in front of the cylinders. The plant backhoe was used to scrap up the spilled material - sawdust was mixed in to help absorb the creosote solution - and then all of the contaminated material was dumped into the Fuel Additive (Sludge) feeder and burned in the wood waste boiler.

REPORT BY (Name): Gary McClelland DATE: 1-19-90
REPORT REVISED: DATE:
REPORT REVISED: DATE:

SUPPLEMENTAL INFORMATION REPORT
(This part of report is intended for KII internal use only.)

CLEARLY DESCRIBE HOW INCIDENT OCCURED:

On 1-19-90, #2 cylinder was under pressure at the start of the 1st shift (7:00 a.m.). At 7:56 a.m. the door gasket blew out spilling 60/40 c/cTs into the door pit area and also onto the ground on the yard area in front of the cylinder. The pressure on the treating cylinder was immediately released and clean up of the spill was started.

WHAT ACTS OR CONDITIONS MOST DIRECTLY CAUSED THE INCIDENT:

A worn door gasket — The gasket was utilized beyond its normal service life.

DESCRIBE ANY SIMILAR INCIDENTS FROM LAST FEW YEARS. HOW ARE THESE SIMILAR? EQUIPMENT, PROCESS, TIME OF DAY, ETC.

Door gasket blew out on 12-23-88 on #1 Cylinder door causing a spill. In this incident in '88, the cylinder door was not tightened adequately on a new gasket.

DESCRIBE WHAT HAS OR WILL BE DONE TO PREVENT A RECURRENCE:

Cylinder door gaskets will be inspected each time the cylinder door is opened and will be replaced if a worn or weak spot is detected in the gasket.

DESCRIBE ANY RESIDUAL CONTAMINATION OR IMPACT. IS FOLLOW-UP WORK NEEDED?

None — All the contaminated dirt/gravel was cleaned up. Follow-up work is not needed in this case.

ATTACH PHOTOGRAPHS WHICH SHOW INCIDENT AREA, BEFORE AND AFTER RESPONSE ACTIONS. MARK DATE OF PHOTOS.

ATTACH ADDITIONAL SHEETS AS NEEDED TO DESCRIBE INCIDENT AND RESPONSE ACTIONS.

EMERGENCY AND/OR HAZARDOUS MATERIALS INCIDENT REPORT

NOTIFICATIONS LOG:

Agency	Phone No.	Name of Person	Date/Time Notified
Sheriff	911		
Local Emergency Planning Committee (LEPC)	601-226-1076	George Frazier	5-3-89/9:40 A.M.
National Response Center	800-424-8802	Paul Mackey	5-3-89/9:25 A.M.
Fed. OSHA			
Environmental Program Manager-KII	412-227-2677	Stephen Smith	5-3-89/9:15 A.M.
State of Mississippi Emergency Response Commission	1-800-222-6362	Alvin Reynolds	5-3-89/9:34 A.M.

ADDITIONAL DESCRIPTION OF INCIDENT AND ACTIONS TAKEN (Attach pg if needed)

This spill occured as a result of human error. Two employees were using the penta. effluent piping for different effluent movements. The two valves that were left open on the line between the process/storm water storage tank and the penta. effluent equalization tanks are used on a regular daily basis. If the 2 employees had talked with each other before the end of their shift, the spill could have been prevented. This was discussed in the spill prevention meeting held on 5-3-89. A 2" check valve has been installed in the piping between the two tanks since effluent movement is in one direction only.

REPORT BY Gary McClelland 5-3-89

EMERGENCY AND/OR HAZARDOUS MATERIALS
INCIDENT REPORT

Page 1

OWNER/OPERATOR: Koppers Industries, Inc.
Plant Name: Tie Plant, MS. (Grenada)
Street Addr: Tie Plant Road
Mail Addr: P.O. Box 160
City, St, ZIP: Tie Plant, MS. 38960
Phone: (601) 226-4584

Same as above.

INCIDENT: 5-02-89 TIME OF INCIDENT: 10:00 P.M.

TYPE OF INCIDENT: Fire, Explosion, Hazardous Material Spill
(One) Hazardous Waste Spill, Injury Accident

Process Penta. Emulsion Spill

	Quantity
Penta. in Oil/Water Emulsion	Approx. 5 gallons (Approx. 1 pound of Penta.)

EXTENT OF INJURIES,

None

EXTENT OF DEPARTMENT,

None - The 5 gallon quantity spilled on the dirt/gravel surface was cleaned up.

DISPOSITION OF RE
Material Qu

Penta. Oil/Water Emulsion in 3M Absorbent Cloth	1 - 55 gal. DOT Drum	Will dispose of (burn) in Wood Waste - Boiler with process sludge

SUPPLEMENTAL INFORMATION REPORT
(This part of report is intended for KII internal use only.)

CLEARLY DESCRIBE HOW INCIDENT OCCURED:

Storm water was being pumped from the Work Tank area into the process/storm water storage tank. The pipe line between the process/storm water storage tank and the penta. effluent equalization tanks was open because of prior effluent transfers. The storm water being pumped flowed into the penta. effluent tanks because of their shorter height (less head to pump against) causing the penta. tanks to fill up and overflow.

[illegible] OR CONDITIONS MOST DIRECTLY [illegible] THE INCIDENT:

Two valves at the penta. effluent equalization tanks were left open. One valve was left open by the waste water treatment system operator and the 2nd valve was left open by the effluent laborer after draining water off of the penta. work tank. Either of the two valves being closed would have prevented the spill.

[illegible] WILL BE DONE TO PREVENT A RECURRENCE:

A 2" check valve has been installed on the line between the process/storm water storage tank and the penta. effluent equa. tanks to prevent a back flow of process water into the penta. tanks, Also a spill prevention meeting was held on 5-3-89 with treating dept. employees + waste water employees to discuss causes and prevention of this type of spill.

[illegible] ANY RESIDUAL [illegible] IMPACT:

None - A complete clean-up was accomplished on the dirt/gravel surface adjacent to the penta. effluent tank retain. ing wall. The majority of the material spilled was contained on concrete.

[illegible] PHOTOG[illegible] [illegible] SHOW [illegible] AFTER [illegible] ACTIONS [illegible]

[illegible] ADDITIONAL [illegible] TO DESCRIBE [illegible] AND RESPONSE ACTIONS.

APPENDIX B

STORM WATER MANAGEMENT FACILITIES INSPECTION RECORD BLANK FORM

STORM WATER MANAGEMENT FACILITIES INSPECTION RECORD KOPPERS INDUSTRIES, INC.

Plant: Grenada, MS Year: 19 _ _ Page: _____

Inspector's Name	Initials
_____	_____
_____	_____
_____	_____
_____	_____

LEGEND
O - Indicates OK
X - Indicates Problem
Note all problems, observations, and actions taken in Section II of Inspection Record on back.

I. INSPECTION

DATE (m/d)->										
TIME (hr/min)->										
OUTFALL 001 **										
OUTFALL 002										
-Outlet Structure *										
-Ponds & Inflow Ditches **										
Outfall 3 **										
OUTFALL 004 -Outlet Structure *										
-Ponds & Inflow Ditches **										
OUTFALL 005 -Outlet Structure *										
-Pond & Ditches **										
OUTFALL 006 -Outlet Structure *										
-Pond & Ditches **										
OUTFALL 006 -Outlet Structure *										
-Pond & Ditches **										

Frequency: * Monthly ** Quarterly AND after significant storms.

Look for damage, debris, or erosion that indicates or could cause malfunction of outlet structure, excessive sedimentation in ponds, erosion or loss of vegetation, treated wood debris, sources of contamination or muddy water, damaged culverts, and general housekeeping.

Enter observations and remedial actions on back of this form.

II. OBSERVATIONS AND REMEDIAL ACTIONS

Date	Description	Initials

APPENDIX C

STORM WATER DISCHARGE EVALUATION AND CERTIFICATION MISSISSIPPI WORKSHEET #2c

NON-STORM WATER DISCHARGE EVALUATION AND CERTIFICATION

Worksheet #2c

Outfall No.	Date of Evaluation	Method Used to Test or Evaluate Discharge	If Evaluation is Impossible Give Reason	Is Non-Storm Water Being Discharged? (Yes/No)	List Likely Sources of Non-Storm Water Discharges	Person(s) Who Conducted the Test or Evaluation
1	2-2-93	Visual	NA	No	NONE	Steve Smith Mark Good
2	2-2-93	Visual	NA	No	NONE	Steve Smith Mark Good
3	2-2-93	Visual	NA	No	NONE	Steve Smith Mark Good
4	2-2-93	Visual	NA	No	NONE	Steve Smith Mark Good
5	2-2-93	Visual	NA	No	NONE	Steve Smith Mark Good
6 & 7	2-2-93	Visual	NA	No/No	NONE	Steve Smith Mark Good

CERTIFICATION

I certify under penalty of law that is, to the best of my knowledge and belief, true, accurate, and complete (see permit Part V.G.).

A. Name & Official Title (type or print) Stephen T. Smith, Mgr. Environmental	B. Area Code and Telephone No. 412-227-2677
C. Signature Stephen T. Smith	D. Date Signed 3-31-93

(Make additional copies of this form as needed)

FILE COPY

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

March 15, 1993

Mr. Ronald P. Murphey
Koppers Industries, Inc.
P.O. Box 160
Tie Plant, Mississippi 38960

Dear Mr. Murphey:

Re: Discharge Monitoring Report (DMR) Forms for Sample Reporting by Facilities Under Wood Treater General Storm Water Permit

Your wood treating facility was recently issued coverage under Mississippi's Wood Treater Storm Water General Permit MSR220005. The permit requires that you sample your storm water runoff at least once per year for two years. Enclosed are DMR forms which should be used to report sample results for both the grab and composite samples. A copy of the completed DMR forms must be returned to our office by January 28, 1994.

Only one outfall need be sampled if it is representative of all storm water outfalls. If more than one outfall will be sampled, please make copies of the enclosed forms for the additional outfalls. The outfall sampled should be identified on each DMR form.

We appreciate your attention to your storm water permit. Please let us know if you have any questions.

Sincerely,

Louis Lavallee, P.E., Chief
Industrial Storm Water Section

LL:ap
Enclosures

RMITTEE NAME/ADDRESS (Include
ility Name/Location if different)
ME
DRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960
CILITY KOPPERS INDUSTRIES, INC.
CATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

(2-16) PERMIT NUMBER: MSR220005

(17-19) DISCHARGE NUMBER:

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
93	1	1	93	12	31

Page 1 - first 30 minute sample

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
pH	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX								
	PERMIT REQUIREMENT	xxxxxx	xxxxxx		report	xxxxxx	report	S.U.		1/yr	grab
TSS	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX								
	PERMIT REQUIREMENT	xxxxxx	xxxxxx		xxxxxx	xxxxxx	report	mg/l		1/yr	grab
OIL & GREASE	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX								
	PERMIT REQUIREMENT	xxxxxx	xxxxxx		xxxxxx	xxxxxx	report	mg/l		1/yr	grab
TOTAL PHENOLS	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX								
	PERMIT REQUIREMENT	xxxxxx	xxxxxx		xxxxxx	xxxxxx	report	mg/l		1/yr	grab
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXXX	XXXXXXX								
	PERMIT REQUIREMENT	xxxxxx	xxxxxx		xxxxxx	xxxxxx	report	mg/l		1/yr	grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE, NUMBER

DATE: YEAR, MO, DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (*Reference all attachments here*)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME
ADDRESS RONALD P. MURPHEY
P O BOX 160
TIE PLANT, MS 38960
FACILITY KOPPERS INDUSTRIES, INC.
LOCATION TIE PLANT, MS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) MSR220005 PERMIT NUMBER

(17-19) DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	93	1	1	TO	93	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Page 2 - three hour composite

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	(54-61) AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TSS	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	xxxxxx	xxxxxx		xxxxxx	xxxxxx	report	mg/l		1/yr	comp.
PENTACHLOROPHENOL	SAMPLE MEASUREMENT	XXXXXX	XXXXXX								
	PERMIT REQUIREMENT	xxxxxx	xxxxxx		xxxxxx	xxxxxx	report	mg/l		1/yr	comp.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

I CERTIFY UNDER 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. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

FILE COPY

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

October 30, 1992

CERTIFIED MAIL NO. P 396 249 383
Mr. Ronald P. Murphey
Koppers Industries, Inc.
P.O. Box 160
Tie Plant, Mississippi 38960

Dear Mr. Murphey:

Re: Coverage Under Storm Water Wood Treater General NPDES Permit MSR220005

Enclosed is National Pollutant Discharge Elimination System (NPDES) Permit Number MSR220005, which was issued for your facility on October 27, 1992. Please note that a Pollution Prevention Plan is due by April 1, 1993 with any needed facility modifications to be completed by October 1, 1993. The last page of the permit is an inspection form which should be copied and used for the annual inspection. The first inspection should be done in 1993 after implementation of the Pollution Prevention Plan and the report submitted to our office by January 28, 1994.

In addition to the annual inspection, the permit requires annual sampling for at least two years. The method of sampling and parameters to be tested are outlined in Part IV. C. on pages 7-8.

This permit is issued in accordance with the provisions of the Mississippi Air and Water Pollution Control Law (Sections 49-17-1, et seq., Mississippi Code of 1972), and the regulations and standards adopted and promulgated thereunder, and under the authority granted to the Mississippi Environmental Quality Permit Board pursuant to Section 402(b) of the Federal Water Pollution Control Act.

Any appeal of this permit action must be made within the 30 day period provided for in Section 49-17-29(4)(b) Mississippi Code of 1972.

Sincerely,

Louis Lavallee, Chief
Industrial Storm Water Section

LL:ap
Enclosure

Sampling should be done in 95 and reported by J.28,96

State of Mississippi
Water Pollution Control

WOOD TREATER GENERAL PERMIT

TO DISCHARGE STORM WATER IN ACCORDANCE WITH THE

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM

THIS CERTIFIES THAT

KOPPERS INDUSTRIES, INC.
TIE PLANT, MISSISSIPPI

has been granted permission to discharge storm water runoff from

Wood Preserving Facility

into

Tributaries of Batupan Bogue

in accordance with discharge limitations, inspection requirements and other conditions set forth in Parts I through VII hereof. This permit is issued in accordance with the provisions of the Mississippi Water Pollution Control Law (Section 49-17-1 et seq., Mississippi Code of 1972), and the regulations and standards adopted and promulgated thereunder, and under authority granted pursuant to Section 402(b) of the Federal Water Pollution Control Act.

MISSISSIPPI ENVIRONMENTAL QUALITY PERMIT BOARD

Charles Chisolm

HEAD, OFFICE OF POLLUTION CONTROL
MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

Date of Coverage: October 27, 1992

Date Pollution Prevention Plan Due: April 1, 1993

Date First Inspection and Sampling Report is Due: January 28, 1994

Permit Issued: July 14, 1992 Permit No. MSR220005

Permit Expires: July 13, 1997

SIC CODE FOR WOOD PRESERVING IS 2491. LIST ANY OTHER APPLICABLE SIC CODES: N/A

ATTACH A USGS QUAD MAP SHOWING SITE LOCATION AND STORM WATER OUTFALLS.

TOTAL ACREAGE USE TO STORE TREATED LUMBER: Appr. 80 Acres.

IS TREATMENT PROVIDED AT ANY OUTFALL? IF SO, DESCRIBE:

No

DOES ANY STORMWATER GO TO A MUNICIPAL STORM SEWER? Yes

If so, list municipality: City of Grenada, Grenada, MS

ATTACH (AFTER APRIL 1, 1993) A STORM WATER POLLUTION PREVENTION PLAN AS REQUIRED IN THE PERMIT.

ATTACH A COPY OF ANY QUANTITATIVE LABORATORY DATA YOU HAVE FOR EACH STORM WATER OUTFALL. IF MULTIPLE SAMPLING HAS BEEN PERFORMED, PROVIDE A SUMMARY FOR EACH PARAMETER, INCLUDING SAMPLING DATES AND THE MINIMUM, AVERAGE AND MAXIMUM VALUES.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated 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.

J R Batchelder — 9/23/92

Signature[1] (Must be signed by operator when different than owner) — DATE SIGNED

J.R. BATCHELDER — V.P.

Printed Name[1] — Title

[1]This application shall be signed according to the General Permit, Part V.E., as follows:

- For a corporation, by a responsible corporate officer.
- For a partnership, by a general partner.
- For a sole proprietorship, by the proprietor.
- For a municipal, state or other public facility, by either a principal executive officer, the mayor, or ranking elected official.

Tribs of Batupan Bogue

Rec'd 9-25-92

STATE OF MISSISSIPPI

DEPARTMENT OF ENVIRONMENTAL QUALITY

JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

WOOD TREATER NOTICE OF INTENT (WNOI)
FOR COVERAGE UNDER WOOD TREATER STORM WATER
GENERAL NPDES PERMIT MSR22 0 0 0 5
(Number to be assigned by State)

(file at least 60 days prior to the commencement of regulated industrial activity)

NAME OF FACILITY: Koppers Industries, Inc.

FACILITY OWNER: Koppers Industries, Inc.

FACILITY OPERATOR (if different than owner):

Koppers Industries, Inc. (same)

(OPERATOR IS RESPONSIBLE FOR PERMIT COMPLIANCE)

IS THIS FACILITY ALREADY COVERED UNDER ANY NPDES PERMITS? No

If yes, list permit number(s): N/A

FACILITY CONTACT PERSON: Ronald P. Murphey

FACILITY STATUS (Federal, Private, State, Other) Private

TELEPHONE NUMBER (INCLUDE AREA CODE): (601)226-4584

FACILITY MAILING ADDRESS:

NUMBER AND STREET (P. O. BOX): P.O. Box 160

CITY: Tie Plant **STATE:** MS **ZIP:** 38960

FACILITY LOCATION:

STREET, ROUTE OR OTHER: Tie Plant Rd.

CITY: Tie Plant **COUNTY:** Grenada **ZIP:** 38960

WOOD PRESERVATIVES THAT HAVE BEEN USED: Creosote, Creosote/Coal Tar Solution, Pentachlorophenol.