

Permit Information

Report Year: 2019

NPDES ID: IDR053144

Facility Information

Facility Name: UNIMN CORPORATION

Facility Point of Contact

First Name Middle Initial Last Name: Kerry Kelley

Phone: 208-365-7153 Ext.:

Email: kerry.kelley@coviacorp.com

Facility Mailing Address

Address Line 1: 4601 CASCADE ROAD

Address Line 2:

City: EMMETT

ZIP/Postal Code: 83617

State: ID

County or Similar Division: GEM

General Findings

Provide a summary of your past year's routine facility inspection documentation (see Part 3.1.2 of the permit). In addition, if you are an operator of an airport facility (Sector S) that is subject to the airport effluent limitations guidelines, and are complying with the MSGP Part 8.S.8.1 effluent limitation through the use of non-urea-containing deicers, provide a statement certifying that you do not use pavement deicers containing urea (e.g., "Urea was not used at [name of airport] for pavement deicing in the past year and will also not be used in 2015." (Note: Operators of airport facilities that are complying with Part 8.S.8.1 by meeting the numeric effluent limitation for ammonia do not need to include this statement.)

The routine facility inspection occurred between 16:00-17:00 on October 1, 2019 by Kerry Kelley, Plant Manager. The weather that day was clear. Observations were made relating to the implementation of control measures at the facility. There were no discharges and no evidence of or the potential pollutants entering the drainage system. Observations were made of the physical conditions of and around the outfalls and everything appeared normal. There was no evidence of discharge or pollutants. There are no control measures that need maintenance, repairs or replacements, and no additional control measures are needed. There were no incidents of noncompliance.

Provide a summary of your past year's quarterly visual assessment documentation (see Part 3.2.2 of the permit).

A quarterly visual assessment was made of each sample location. There were no discharges, therefore no sample collection. The facility is located in an area where limited rainfall occurs during most parts of the year and freezing conditions also exist that prevents runoff from occurring for some periods.

For any four-sample (minimum) average benchmark monitoring exceedance, if after reviewing the selection, design, installation, and implementation of your control measures and considering whether any modifications are necessary to meet the effluent limits in the permit, you determine that no further pollutant reductions are technologically available and economically practicable and achievable in light of best industry practice, provide your rationale for why you believe no further reductions are achievable (see Part 6.2.1.2 of the permit). Enter "NA" if not applicable.

N/A

Provide a summary of your past year's corrective action documentation (See Part 4.4 of the permit). (Note: If corrective action is not yet completed at the time of submission of this annual report, you must describe the status of any outstanding corrective action(s).) Also describe any incidents of noncompliance in the past year or currently ongoing, or if none, provide a statement that you are in compliance with the permit.

There was not an existence of any conditions requiring corrective action including: SWPPP review or revision to ensure effluent limits are met nor conditions requiring SWPPP review to determine if modification were necessary.

Certification Information

Certified On Behalf Of:

Responsible Official: Douglas Losee (DSLOSEE68)

DAR Designated: 01/15/2018 12:00 AM -05:00

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 have no personal knowledge that the information submitted is other than 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. Signing an electronic document on behalf of another person is subject to criminal, civil, administrative, or other lawful action.

Certified By: Jamie L. Swenson

Certifier Title:

Certifier Email: jamie.swenson@coviacorp.com

Certified On: 01/22/2020 3:50 PM ET