NPDES FORM 6100-28



## UNITED STATES ENVIRONMENTAL PROTECTION AGENCY WASHINGTON, DC 20460 ANNUAL REPORT FOR STORMWATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY UNDER THE NPDES MULTI-SECTOR GENERAL PERMIT

FORM Approved OMB No. 2040-0004

Permit Information

Report Year: 2019

NPDES ID: IDR053015

Facility Information

Facility Name: LKQ OF EASTERN IDAHO

**Facility Point of Contact** 

First Name Middle Initial Last Name: Curtis R Evans

Phone: 208-573-6634 Ext.:

Email: CEvans@LKQCorp.com

**Facility Mailing Address** 

Address Line 1: 5497 SOUTH 5TH AVE.

Address Line 2: SUITE 2800 City: POCATELLO

ZIP/Postal Code: 83204 State: ID

County or Similar Division: BANNOCK

## 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 annual comprehensive facility inspection was completed on 7/24/2019 and recommended corrections were implemented. Quarterly in spections were completed on 2/13/2019, 6/20/2019, 8/13/2019, and 12/19/2019. No significant environmental concerns were noted durin g these quarterly inspections, aside from minor issues that were immediately corrected.

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

No qualifying discharges occurred at the facility during 2019 and, therefor, no visual assessments of discharge were able to be made. A visual assessment will be completed if/when the next qualifying discharge occurs. Quarterly inspections identified minor housekeeping issues that were addressed promptly as necessary, including trash, spills/staining, and parts accumulation throughout the yards areas.

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.

Since no discharges were observed at the facility in 2018, corrective actions were not necessary as a result of visual assessments; or, the exceedance of a nonnumeric effluent limit(s). No unauthorized discharges occurred at the facility in 2019. The facility is not subject to num eric effluent limits. All control measures have been properly maintained.

## Certification Information

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.

Certified By: Daniel P. McIntyre

Certifier Title: ECM

Certifier Email: dpmcintyre@kqcorp.com

Certified On: 01/20/2020 4:20 PM ET