STATE OF MISSOURI

DEPARTMENT OF NATURAL RESOURCES

MISSOURI CLEAN WATER COMMISSION

MISSOURI STATE OPERATING PERMIT

In compliance with the Missouri Clean Water Law, (Chapter 644 R.S. Mo. as amended, hereinafter, the Law), and the Federal Water Pollution Control Act (Public Law 92-500, 92nd Congress) as amended,

Permit No.	MO-0135208
Owner:	The Boeing Company
Address:	P.O. Box 516, Mailcode S111-2491, St. Louis, MO 63166-0516
Continuing Authority:	Same as above
Address:	Same as above
Facility Name:	The Boeing Company (Tract 5)
Facility Address:	2600 Third Street, St. Charles, MO 63301
Legal Description:	See Page 2
UTM Coordinates:	See Page 2
Receiving Stream:	See Page 2
First Classified Stream and ID:	See Page 2
USGS Basin & Sub-watershed No.:	See Page 2

is authorized to discharge from the facility described herein, in accordance with the effluent limitations and monitoring requirements as set forth herein:

FACILITY DESCRIPTION

See Page 2

This permit authorizes only stormwater discharges under the Missouri Clean Water Law and the National Pollutant Discharge Elimination System; it does not apply to other regulated areas. This permit may be appealed in accordance with Sections 640.013, 621.250, and 644.051.6 of the Law.

July 1, 2016
Effective Date

Sara Parker Pauley, Director, Department of Natural Resources

September 30, 2020
Expiration Date

John Madras, Director, Water Protection Program

FACILITY DESCRIPTION (CONTINUED)

OUTFALL #001 Stormwater only; SIC #3721, #3761
Receives stormwater from a facility that manufactures and assembles combat aircraft and missile parts.

Legal Description:	Landgrant 3280, Common of St. Charles, St. Charles County
UTM Coordinates:	X = 719926, Y = 4298463
Receiving Stream:	Tributary to the Missouri River (8-20-13 MUDD V 1.0) (C) 3960
First Classified Stream and ID:	Tributary to the Missouri River (8-20-13 MUDD V 1.0) (C) 3960
USGS Basin & Sub-watershed No.:	Cowmire Creek-Missouri River (10300200-0801)
Actual Flow:	Dependent upon Precipitation

OUTFALLS #002 Stormwater only; SIC #3721, #3761
Receives stormwater from a facility that manufactures and assembles combat aircraft and missile parts.

Legal Description:	Landgrant 3280, Common of St. Charles, St. Charles County
UTM Coordinates:	X = 719854, Y = 4298461
Receiving Stream:	Tributary to the Missouri River (8-20-13 MUDD V 1.0) (C) 3960
First Classified Stream and ID:	Tributary to the Missouri River (8-20-13 MUDD V 1.0) (C) 3960
USGS Basin & Sub-watershed No.:	Cowmire Creek-Missouri River (10300200-0801)
Actual flow:	Dependent upon precipitation

OUTFALL # 003 – Stormwater only; SIC #3721, #3761
Receives stormwater from a facility that manufactures and assembles combat aircraft and missile parts.

Legal Description:	Landgrant 3280, Common of St. Charles, St. Charles County
UTM Coordinates:	X = 719694, Y = 4298148
Receiving Stream:	Tributary to the Missouri River (8-20-13 MUDD V 1.0) (C) 3960
First Classified Stream and ID:	Tributary to the Missouri River (8-20-13 MUDD V 1.0) (C) 3960
USGS Basin & Sub-watershed No.:	Cowmire Creek-Missouri River (10300200-0801)
Actual flow:	Dependent upon precipitation

OUTFALL # 004 – Stormwater only; SIC # 3721, #3761
Receives stormwater from a facility that manufactures and assembles combat aircraft and missile parts.

Legal Description:	Landgrant 3280, Common of St. Charles, St. Charles County
UTM Coordinates:	X = 719578, Y = 4297959
Receiving Stream:	Tributary to the Missouri River (8-20-13 MUDD V 1.0) (C) 3960
First Classified Stream and ID:	Tributary to the Missouri River (8-20-13 MUDD V 1.0) (C) 3960
USGS Basin & Sub-watershed No.:	Cowmire Creek-Missouri River (10300200-0801)
Actual flow:	Dependent upon precipitation

OUTFALL # 005 – Stormwater only; SIC #3721, #3761
Receives stormwater from a facility that manufactures and assembles combat aircraft and missile parts.

Legal Description:	Landgrant 161, Cul De Sac Field, St. Charles County
UTM Coordinates:	X = 719335, Y = 4298909
Receiving Stream:	Tributary to 8-20-13 MUDD V 1.0
First Classified Stream and ID:	Tributary to the Missouri River (8-20-13 MUDD V 1.0) (C) 3960
USGS Basin & Sub-watershed No.:	Cowmire Creek-Missouri River (10300200-0801)
Actual flow:	Dependent upon precipitation

A. EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS

OUTFALL #001-005 *Stormwater Only*	**TABLE A-1** **FINAL EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS**

The permittee is authorized to discharge from outfall(s) with serial number(s) as specified in the application for this permit. The final effluent limitations shall become effective on **July 1, 2016** and remain in effect until expiration of the permit. Such discharges shall be controlled, limited and monitored by the permittee as specified below:

EFFLUENT PARAMETERS	UNITS	DAILY MAXIMUM	BENCH-MARKS	MONITORING REQUIREMENTS∞	
				MEASUREMENT FREQUENCY ◊	SAMPLE TYPE
PHYSICAL					
Flow	MGD	*	-	once/quarter	24 hr. est.
Precipitation	inches	*	-	once/quarter***	measured
CONVENTIONAL					
Chemical Oxygen Demand	mg/L	**	143	once/quarter	grab
Oil & Grease	mg/L	**	10	once/quarter	grab
pH Ω	SU	6.5 to 9.0	-	once/quarter	grab
Total Suspended Solids	mg/L	100	-	once/quarter	grab
METALS					
Hardness as $CaCO_3$	mg/L	*	-	once/quarter	grab
Aluminum, Total Recoverable	µg/L	**	750	once/quarter	grab
Copper, Total Recoverable	µg/L	*	-	once/quarter	grab
Iron, Total Recoverable	µg/L	**	4000	once/quarter	grab

MONITORING REPORTS SHALL BE SUBMITTED QUARTERLY; THE FIRST REPORT IS DUE OCTOBER 28, 2016.
THERE SHALL BE NO DISCHARGE OF FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

* Monitoring requirement only.

** Monitoring requirement with associated benchmark. See Special Conditions #9 through #12

*** Measure during same precipitation event other samples are collected from. It is not necessary to measure precipitation every day in the quarter due to easily available information online.

Ω The facility will report the minimum and maximum values. pH is not to be averaged.

∞ All samples shall be collected from a discharge resulting from a precipitation event greater than 0.1 inches in magnitude and that occurs at least 72 hours from the previously measurable precipitation event. If a discharge does not occur within the reporting period, report as no discharge. The total amount of precipitation should be noted from the event from which the samples were collected.

◊ Quarterly sampling.

MINIMUM QUARTERLY SAMPLING REQUIREMENTS			
QUARTER	**MONTHS**	**EFFLUENT PARAMETERS**	**REPORT IS DUE**
First	January, February, March	Sample at least once during any month of the quarter	April 28th
Second	April, May, June	Sample at least once during any month of the quarter	July 28th
Third	July, August, September	Sample at least once during any month of the quarter	October 28th
Fourth	October, November, December	Sample at least once during any month of the quarter	January 28th

B. STANDARD CONDITIONS

In addition to specified conditions stated herein, this permit is subject to the attached Part I standard conditions dated August 1, 2014, and hereby incorporated as though fully set forth herein.

C. SPECIAL CONDITIONS

1. This permit may be reopened and modified, or alternatively revoked and reissued, to:
   (a) Comply with any applicable effluent standard or limitation issued or approved under Sections 301(b)(2)(C) and (D), 304(b)(2), and 307(a) (2) of the Clean Water Act, if the effluent standard or limitation so issued or approved:
      (1) contains different conditions or is otherwise more stringent than any effluent limitation in the permit; or
      (2) controls any pollutant not limited in the permit.
   (b) Incorporate new or modified effluent limitations or other conditions, if the result of a waste load allocation study, toxicity test or other information indicates changes are necessary to assure compliance with Missouri's Water Quality Standards.
   (c) Incorporate new or modified effluent limitations or other conditions if, as the result of a watershed analysis, a Total Maximum Daily Load (TMDL) limitation is developed for the receiving waters which are currently included in Missouri's list of waters of the state not fully achieving the state's water quality standards, also called the 303(d) list.

   The permit as modified or reissued under this paragraph shall also contain any other requirements of the Clean Water Act then applicable.

2. All outfalls must be clearly marked in the field.

3. Water Quality Standards
   (a) To the extent required by law, discharges to waters of the state shall not cause a violation of water quality standards rule under 10 CSR 20-7.031, including both specific and general criteria.
   (b) General Criteria. The following general water quality criteria shall be applicable to all waters of the state at all times including mixing zones. No water contaminant, by itself or in combination with other substances, shall prevent the waters of the state from meeting the following conditions:
      (1) Waters shall be free from substances in sufficient amounts to cause the formation of putrescent, unsightly or harmful bottom deposits or prevent full maintenance of beneficial uses;
      (2) Waters shall be free from oil, scum and floating debris in sufficient amounts to be unsightly or prevent full maintenance of beneficial uses;
      (3) Waters shall be free from substances in sufficient amounts to cause unsightly color or turbidity, offensive odor or prevent full maintenance of beneficial uses;
      (4) Waters shall be free from substances or conditions in sufficient amounts to result in toxicity to human, animal or aquatic life;
      (5) There shall be no significant human health hazard from incidental contact with the water;
      (6) There shall be no acute toxicity to livestock or wildlife watering;
      (7) Waters shall be free from physical, chemical or hydrologic changes that would impair the natural biological community;
      (8) Waters shall be free from used tires, car bodies, appliances, demolition debris, used vehicles or equipment and solid waste as defined in Missouri's Solid Waste Law, section 260.200, RSMo, except as the use of such materials is specifically permitted pursuant to section 260.200-260.247.

4. Changes in Discharges of Toxic Pollutant

   In addition to the reporting requirements under §122.41(1), all existing manufacturing, commercial, mining, and silvicultural dischargers must notify the Director as soon as they know or have reason to believe:
   (a) That an activity has occurred or will occur which would result in the discharge, on a routine or frequent basis, of any toxic pollutant which is not limited in the permit, if that discharge will exceed the highest of the following notification levels:
      (1) One hundred micrograms per liter (100 µg/L);
      (2) Two hundred micrograms per liter (200 µg/L) for acrolein and acrylonitrile;
      (3) Five hundred micrograms per liter (500 µg/L) for 2,4-dinitrophenol and for 2-methyl-4, 6-dinitrophenol;
      (4) One milligram per liter (1 mg/L) for antimony;
      (5) Five (5) times the maximum concentration value reported for the pollutant in the permit application in accordance with 40 CFR 122.21(g)(7); or
      (6) The notification level established by the department in accordance with 40 CFR 122.44(f).
   (b) That any activity has occurred or will occur which would result in any discharge, on a non-routine or infrequent basis, of a toxic pollutant which is not limited in the permit, if that discharge will exceed the highest of the following "notification levels":
      (1) Five hundred micrograms per liter (500 µg/l);
      (2) One milligram per liter (1 mg/l) for antimony;

C. SPECIAL CONDITIONS (CONTINUED)

(3) Ten (10) times the maximum concentration value reported for that pollutant in the permit application in accordance with §122.21(g)(7).
(4) The level established by the Director in accordance with §122.44(f).

5. Report as no-discharge when a discharge does not occur during the report period.

6. Reporting of Non-Detects
   (a) An analysis conducted by the permittee or their contracted laboratory shall be conducted in such a way that the precision and accuracy of the analyzed result can be enumerated.
   (b) The permittee shall not report a sample result as "Non-Detect" without also reporting the detection limit of the test. Reporting as "Non-Detect" without also including the detection limit will be considered failure to report, which is a violation of this permit.
   (c) The permittee shall report the "Non-Detect" result using the less than sign and the minimum detection limit (e.g. <10).
   (d) The permittee shall use one-half (½) of the detection limit for the non-detect result when calculating and reporting monthly averages.
   (e) See Standard Conditions Part I, Section A, #4 regarding proper detection limits used for sample analysis.

7. It is a violation of the Missouri Clean Water Law to fail to pay fees associated with this permit (644.055 RSMo).

8. Any pesticide discharge from any point source shall comply with the requirements of Federal Insecticide, Fungicide and Rodenticide Act, as amended (7 U.S.C. 136 ET. SEQ.) and the use of such pesticides shall be in a manner consistent with its label.

9. The purpose of the SWPPP and the BMPs listed herein is the prevention of pollution of waters of the state. A deficiency of a BMP means it was not effective in preventing pollution [10 CSR 20-2.010(56)] of waters of the state, and corrective actions means the facility took steps to eliminate the deficiency.

10. The permittee shall implement a Stormwater Pollution Prevention Plan (SWPPP). The SWPPP must be prepared and implemented within 90 days of permit issuance. The SWPPP must be kept on-site and should not be sent to the department unless specifically requested. The SWPPP must be reviewed and updated, if needed, every five (5) years or as site conditions change. The permittee shall select, install, use, operate, and maintain the Best Management Practices prescribed in the SWPPP in accordance with the concepts and methods described in the following document: *Developing Your Stormwater Pollution Prevention Plan, A Guide for Industrial Operators*, (Document number EPA 833-B-09-002) published by the United States Environmental Protection Agency (USEPA) in February 2009.
    The SWPPP must include the following:
    (a) A listing of specific Best Management Practices (BMPs) and a narrative explaining how BMPs will be implemented to control and minimize the amount of potential contaminants that may enter stormwater. The BMPs at the facility should be designed to meet this value during rainfall event up to the 10 year, 24 hour rain event.
    (b) The SWPPP must include a schedule for once per month site inspections and brief written reports. The inspection report must include precipitation information for the entire period since last inspection, as well as observations and evaluations of BMP effectiveness. Deficiencies must be corrected within seven (7) days and the actions taken to correct the deficiencies shall be included with the written report, including photographs. Inspection reports must be kept on site with the SWPPP and maintained for a period of five (5) years. These must be made available to department personnel upon request.
    (c) A provision for designating an individual to be responsible for environmental matters.
    (d) A provision for providing training to all personnel involved in material handling and storage, and housekeeping of maintenance and cleaning areas. Proof of training shall be submitted on request of the department.

11. This permit stipulates pollutant benchmarks applicable to your discharge. The benchmarks do not constitute direct numeric effluent limitations; therefore, a benchmark exceedance alone is not a permit violation. Benchmark monitoring and visual inspections shall be used to determine the overall effectiveness of SWPPP and to assist you in knowing when additional corrective action may be necessary to protect water quality. If a sample exceeds a benchmark concentration you must review your SWPPP and your BMPs to determine what improvements or additional controls are needed to reduce that pollutant in your stormwater discharge(s).

    Any time a benchmark exceedance occurs a Corrective Action Report (CAR) must be completed. A CAR is a document that records the efforts undertaken by the facility to improve BMPs to meet benchmarks in future samples. CARs must be retained with the SWPPP and available to the department upon request. If the efforts taken by the facility are not sufficient and subsequent exceedances of a benchmark occur, the facility must contact the department if a benchmark value cannot be achieved. Failure to take corrective action to address a benchmark exceedance and failure to make measureable progress towards achieving the benchmarks is a permit violation.

C. SPECIAL CONDITIONS (CONTINUED)

12. Permittee shall adhere to the following minimum Best Management Practices (BMPs):
    (a) Prevent the spillage or loss of fluids, oil, grease, fuel, etc. from vehicle maintenance, equipment cleaning, or warehouse activities and thereby prevent the contamination of stormwater from these substances.
    (b) Provide collection facilities and arrange for proper disposal of waste products including but not limited to petroleum waste products, and solvents.
    (c) Store all paint, solvents, petroleum products and petroleum waste products (except fuels), and storage containers (such as drums, cans, or cartons) so that these materials are not exposed to stormwater or provide other prescribed BMPs such as plastic lids and/or portable spill pans to prevent the commingling of stormwater with container contents. Commingled water may not be discharged under this permit. Provide spill prevention control, and/or management sufficient to prevent any spills of these pollutants from entering waters of the state. Any containment system used to implement this requirement shall be constructed of materials compatible with the substances contained and shall also prevent the contamination of groundwater.
    (d) Provide good housekeeping practices on the site to keep trash from entry into waters of the state.
    (e) Provide sediment and erosion control sufficient to prevent or control sediment loss off of the property. This could include the use of straw bales, silt fences, or sediment basins, if needed, to comply with effluent limits or benchmarks.
    (f) Ensure that adequate provisions are provided to prevent surface water intrusion into the storage basin, to divert stormwater runoff around the storage basin, and to protect embankments from erosion.

13. Before releasing water that has accumulated in secondary containment areas it must be examined for hydrocarbon odor and presence of a sheen. On-site remediation may take place prior to testing. If the presence of hydrocarbons is indicated, this water must be tested for Total Petroleum Hydrocarbons (TPH). The analytical method for testing TPH must comply with EPA approved testing methods listed in 40 CFR 136 and the water must be tested prior to release to ensure compliance with water quality standards. If the concentration for TPH exceeds 10mg/L, the water shall be taken to a WWTP for treatment.

14. Release of a hazardous substance must be reported to the department in accordance with 10 CSR 24-3.010. A record of each reportable spill shall be retained with the SWPPP and made available to the department upon request.

15. This permit does not authorize the discharge of cooling tower overflow water. In the case of overflow, including, but not limited to, accidental or emergency overflow, the facility shall report the event as a spill to the St. Louis Regional Office within 24 hours by phone and five days by mail, and sample resulting effluent for all permitted parameters. These results shall be submitted to the St. Louis regional office.

    St. Louis Regional Office
    7545 S. Lindbergh, STE 210
    St. Louis, MO 63125
    Phone: (314) 416-2960
    Fax: (314) 416-2970

MISSOURI DEPARTMENT OF NATURAL RESOURCES
FACT SHEET
FOR THE PURPOSE OF RENEWAL
OF
MO-0135208
THE BOEING COMPANY (TRACT 5)

The Federal Water Pollution Control Act ("Clean Water Act" Section 402 Public Law 92-500 as amended) established the National Pollution Discharge Elimination System (NPDES) permit program. This program regulates the discharge of pollutants from point sources into the waters of the United States, and the release of stormwater from certain point sources. All such discharges are unlawful without a permit (Section 301 of the "Clean Water Act"). After a permit is obtained, a discharge not in compliance with all permit terms and conditions is unlawful. Missouri State Operating Permits (MSOPs) are issued by the Director of the Missouri Department of Natural Resources (Department) under an approved program, operating in accordance with federal and state laws (Federal "Clean Water Act" and "Missouri Clean Water Law" Section 644 as amended). MSOPs are issued for a period of five (5) years unless otherwise specified for less.

As per [40 CFR Part 124.8(a)] and [10 CSR 20-6.020(1)2.] a factsheet shall be prepared to give pertinent information regarding the applicable regulations, rationale for the development of effluent limitations and conditions, and the public participation process for the Missouri State Operating Permit (MSOP or operating permit) listed below. A factsheet is not an enforceable part of an operating permit.

Part I. FACILITY INFORMATION

Facility Type: Industrial
Facility SIC Code(s): #3721, #3761
Application Date: 02/22/2013
Expiration Date: 08/27/2013
Last Inspection: 04/22/2008 In Compliance

FACILITY DESCRIPTION:
Military contractor for the manufacturing of combat aircraft and missile parts.

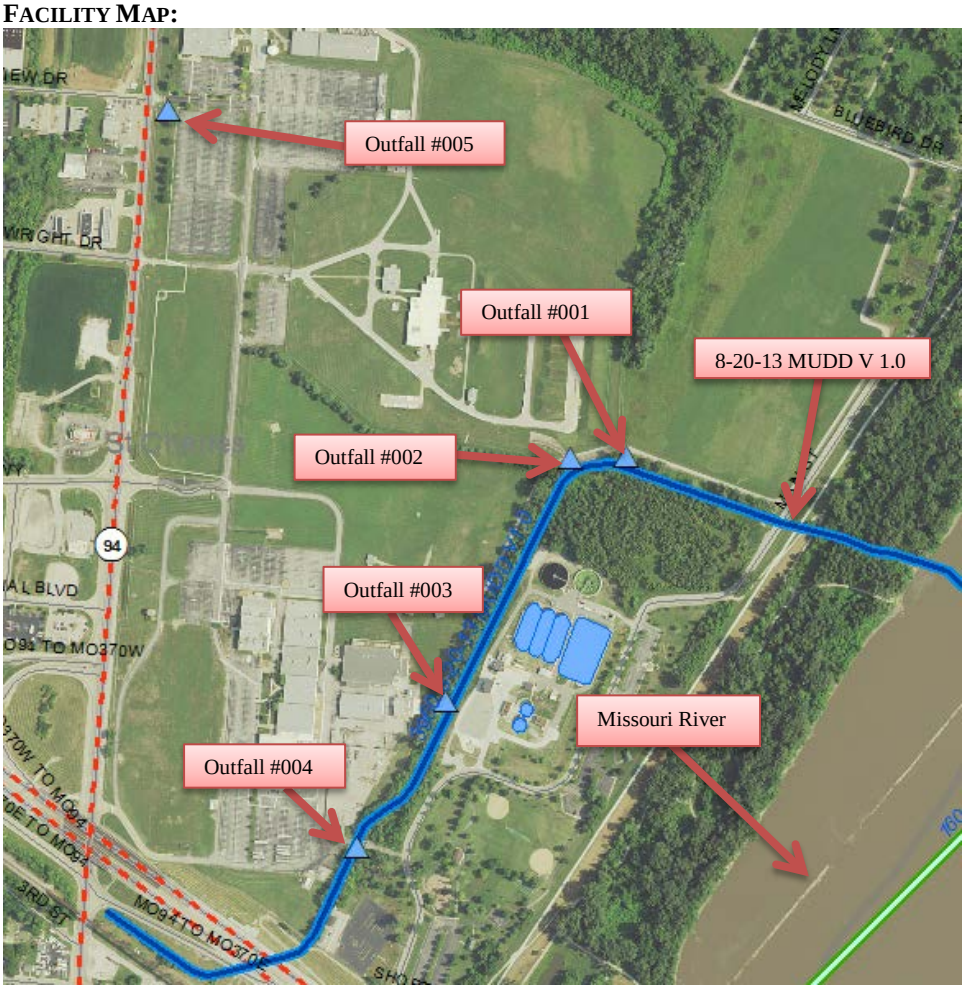
PERMITTED FEATURES TABLE:

OUTFALL	AVERAGE FLOW (MGD)	EST. FLOW IN A 10 YR. 24 HR. RAIN EVENT* (MGD)	TREATMENT LEVEL	EFFLUENT TYPE
#001	Dependent on precipitation	0.58	BMPs	Industrial Stormwater
#002	Dependent on precipitation	0.69	BMPs	Industrial Stormwater
#003	Dependent on precipitation	1.16	BMPs	Industrial Stormwater
#004	Dependent on precipitation	1.15	BMPs	Industrial Stormwater
#005	Dependent on precipitation	1.54	BMPs	Industrial Stormwater

*Calculated using the Rational Equation Method; acreage interpolated from map, rational runoff coefficient being 0.5, and rainfall intensity of 5.1 inches/day. BMPs = Best Management Practices

FACILITY PERFORMANCE HISTORY & COMMENTS:
The electronic discharge monitoring reports were reviewed for the last five years. This facility passed all required wet tests at outfall #001 during the last five years. They had one exceedance of TSS at outfall #003 and two exceedances of TSS at outfall #004. No other permitted exceedances were recorded in this time period. This facility was last inspected on 04/22/2008. The conditions of the facility at the time of inspection were found to be satisfactory. The inspection report was not available for the permit writer to view.

FACILITY MAP:



Part II. RECEIVING STREAM INFORMATION

RECEIVING WATER BODY'S WATER QUALITY:
The receiving stream Tributary to the Missouri River has no concurrent water quality data available. The Tributary to the Missouri River (C) (3960) is now classified whereas it was not classified in the previous permit, as EPA has approved the Department's new stream classifications. The receiving water is not under a TMDL and is not found on the 303d list. Outfalls range from 0.7 miles to 0.2 miles from the Missouri River. The Missouri River is located on the 2008 303d list for *E. coli* contamination, and is subject to a 2006 TMDL for PCBs and Chlordane; however, this facility is not considered a contributor to any of these pollutants.

APPLICABLE DESIGNATIONS OF WATERS OF THE STATE:

✓ As per Missouri's Effluent Regulations [10 CSR 20-7.015(1)(B)], the waters of the state are divided into the following seven categories. Each category lists effluent limitations for specific parameters, which are presented in each outfall's Effluent Limitation Table and further discussed in the Derivation & Discussion of Limits section.

- Missouri or Mississippi River: ☐
- Lake or Reservoir: ☐
- Losing: ☐
- Metropolitan No-Discharge: ☐
- Special Stream: ☐
- Subsurface Water: ☐
- All Other Waters: ☒

Classes [10 CSR 20-7.031(1)(F)1. to 8.] of water bodies which may be found in the receiving streams table below are:

Lakes: L1 = drinking supply lakes; L2 = major reservoirs; L3 = other

Streams: P = permanent streams; P1 = standing water of P streams; C = may cease flow in droughts but maintains permanent pools; E = ephemeral; W = natural wetlands

✓ As per 10 CSR 20-7.031 Missouri Water Quality Standards, the department defines the Clean Water Commission's water quality objectives in terms of "water uses to be maintained and the criteria to protect those uses." The receiving stream and 1st classified receiving stream's beneficial water uses to be maintained are in the following receiving stream table in accordance with [10 CSR 20-7.031(1)(C)].

Uses which may be found in the following receiving streams table:

10 CSR 20-7.031(1)(C)1.: Protection and propagation of fish, shellfish, and wildlife (formerly AQL; this permit uses AQL effluent limitations in 10 CSR 20-7.031 Table A for all habitat temperature designations unless otherwise specified) WWH = Warm Water Habitat; CLH = Cool Water Habitat; CDH = Cold Water Habitat; EAH = Ephemeral Aquatic Habitat; MAH = Modified Aquatic Habitat; LAH = Limited Aquatic Habitat

10 CSR 20-7.031(1)(C)2.: Recreation in and on the water
WBC = Whole Body Contact; WBC-A = public swimming; WBC-B = swimming
SCR = Secondary Contact Recreation (like fishing, wading, and boating)

10 CSR 20-7.031(1)(C)3. to 7.: HHP (formerly HHF) = Human Health Protection (fish consumption); IRR = irrigation; LWP (formerly LWW) = Livestock And Wildlife Protection; DWS = Drinking Water Supply; IND = industrial water supply

10 CSR 20-7.031(6): GRW = Groundwater

✓ As per Missouri's stormwater regulations [10 CSR 20.6.200(6)(B)2.] and federal regulations [40 CFR 122.26(b)(14)], the department shall establish limits necessary to protect waters of the state. Effluent limitations or benchmarks for stormwater are established using best professional judgment based on the category, impairments, technology available, and designated uses of the receiving stream.

RECEIVING STREAMS TABLE:

OUTFALL	WATERBODY NAME	CLASS	WBID	DESIGNATED USES	DISTANCE TO CLASSIFIED SEGMENT	12-DIGIT HUC
#001	Tributary to Missouri River (8-20-13 MUDD V 1.0)	C	3960	HHP, IRR, LWW, SCR, WBC-B, WWH	0.0 mi	10300200-0801 Cowmire Creek-Missouri River
#002	Tributary to Missouri River (8-20-13 MUDD V 1.0)	C	3960	HHP, IRR, LWW, SCR, WBC-B, WWH	0.0 mi	
#003	Tributary to Missouri River (8-20-13 MUDD V 1.0)	C	3960	HHP, IRR, LWW, SCR, WBC-B, WWH	0.0 mi	
#004	Tributary to Missouri River (8-20-13 MUDD V 1.0)	C	3960	HHP, IRR, LWW, SCR, WBC-B, WWH	0.0 mi	
#005	Tributary to 8-20-13 MUDD V 1.0	n/a	n/a	GEN	0.0 mi	
	Tributary to Missouri River (8-20-13 MUDD V 1.0)	C	3960	HHP, IRR, LWW, SCR, WBC-B, WWH	0.7 mi	

n/a = not applicable WBID = Waterbody ID: Missouri Use Designation Dataset 8-20-13 MUDD V1.0 data can be found as an ArcGIS shapefile on MSDIS at ftp://msdis.missouri.edu/pub/Inland_Water_Resources/MO_2014_WQS_Stream_Classifications_and_Use_shp.zip

MIXING CONSIDERATIONS:

Mixing Zone: Not Allowed [10 CSR 20-7.031(5)(A)4.B.(I)(a)].
Zone of Initial Dilution: Not Allowed [10 CSR 20-7.031(5)(A)4.B.(I)(b)]

MIXING CONSIDERATIONS TABLE: For Class C defaults

ZONE OF INITIAL DILUTION (CFS) (ACUTE) [10 CSR 20-7.031(5)(A)4.B…]			MIXING ZONE (CFS) (CHRONIC) [10 CSR 20-7.031(5)(A)4.B…]		
1Q10	7Q10	30Q10	1Q10	7Q10	30Q10
0	0	n/a	0	0	0

RECEIVING STREAM MONITORING REQUIREMENTS:

No receiving water monitoring requirements are recommended at this time.

Part III. RATIONALE AND DERIVATION OF EFFLUENT LIMITATIONS & PERMIT CONDITIONS

ALTERNATIVE EVALUATIONS FOR NEW FACILITIES:
As per [10 CSR 20-7.015(4)(A)], discharges to losing streams shall be permitted only after other alternatives including land application, discharges to a gaining stream and connection to a regional wastewater treatment facility have been evaluated and determined to be unacceptable for environmental and/or economic reasons.

- ✓ Not applicable; the facility does not discharge to a losing stream as defined by [10 CSR 20-2.010(36)] & [10 CSR 20-7.031(1)(N)], or is an existing facility.

ANTI-BACKSLIDING:
A provision in the Federal Regulations [CWA §303(d)(4); CWA §402(c); 40 CFR Part 122.44(I)] requires a reissued permit to be as stringent as the previous permit with some exceptions.

- ✓ Limitations in this operating permit for the reissuance of this permit conform to the anti-backsliding provisions of Section 402(o) of the Clean Water Act, and 40 CFR Part 122.44.
  - ✓ Information is available which was not available at the time of permit issuance (other than revised regulations, guidance, or test methods) and which would have justified the application of a less stringent effluent limitation at the time of permit issuance. DMRs from the last five years demonstrate no potential to exceed water quality criteria.
  - ✓ The previous permit limits for outfall #001-005 were established in error, based on limits for process wastewater, however, this is a stormwater outfall. This renewal establishes limits and benchmarks appropriate for stormwater discharges. There will be no changes to industrial activities onsite or the composition of the stormwater discharge as a result of this renewal. The benchmark concentrations and required corrective actions are protective of the receiving stream's uses to be maintained.

ANTIDEGRADATION:
In accordance with Missouri's Water Quality Standard [10 CSR 20-7.031(2)], the Department is to document by means of Antidegradation Review that the use of a water body's available assimilative capacity is justified. Degradation is justified by documenting the socio-economic importance of a discharging activity after determining the necessity of the discharge.

- ✓ Renewal no degradation proposed and no further review necessary.

BENCHMARKS:
When a permitted feature or outfall consists of only stormwater, a benchmark may be implemented at the discretion of the permit writer. Benchmarks require the facility to monitor, and if necessary, replace and update stormwater control measures. Benchmark concentrations are not effluent limitations. A benchmark is a technology-based threshold. A benchmark exceedance, therefore, is not a permit violation; however, failure to take corrective action is a violation of the permit. Benchmark monitoring data is used to determine the overall effectiveness of control measures and to assist the permittee in knowing when additional corrective actions may be necessary to comply with the technology based effluent limitations (TBEL).

Because of the fleeting nature of stormwater discharges, the department, under the direction of EPA guidance, has determined monthly averages are capricious measures of stormwater discharges. The *Technical Support Document for Water Quality Based Toxics Control* (EPA/505/2-90-001; 1991) Section 3.1 indicates most procedures within the document apply only to water quality based approaches, not end-of-pipe technology-based controls. Hence, stormwater outfalls will only contain a maximum daily limit (MDL), benchmark, or monitoring requirement determined by the site specific conditions including the receiving water's current quality. While inspection of the stormwater BMPs occur monthly, facilities with no compliance issues are usually expected to sample stormwater quarterly.

Numeric benchmark values are based on other stormwater permits including the Environmental Protection Agency's (EPA's) *Multi-Sector General Permit For Stormwater Discharges Associated With Industrial Activity* (MSGP) or water quality standards. Because precipitation events are sudden and momentary, benchmarks based on state or federal standards or recommendations use the Criteria Maximum Concentration (CMC) value, or acute standard. The CMC is the estimate of the highest concentration of a material in surface water to which an aquatic community can be exposed briefly without resulting in an unacceptable effect. The CMC for aquatic life is intended to be protective of the vast majority of the aquatic communities in the United States.

- ✓ Applicable; this facility has stormwater-only outfalls with benchmark constraints. The benchmarks listed are consistently achieved in stormwater discharges by a variety of other industries with SWPPs and is deemed protective of instream water quality and aquatic life.

BIOSOLIDS & SEWAGE SLUDGE:
Biosolids are solid materials resulting from domestic wastewater treatment that meet federal and state criteria for beneficial uses (i.e. fertilizer). Sewage sludge is solids, semi-solids, or liquid residue generated during the treatment of domestic sewage in a treatment works; including but not limited to, domestic septage; scum or solids removed in primary, secondary, or advanced wastewater treatment process; and a material derived from sewage sludge. Sewage sludge does not include ash generated during the firing of sewage sludge in a sewage sludge incinerator or grit and screening generated during preliminary treatment of domestic sewage in a treatment works. Additional information regarding biosolids and sludge is located at the following web address: http://extension.missouri.edu/main/DisplayCategory.aspx?C=74, items WQ422 through WQ449.
✓ Not applicable; this condition is not applicable to the permittee for this facility.

COMPLIANCE AND ENFORCEMENT:
Enforcement is the action taken by the Water Protection Program (WPP) to bring an entity into compliance with the Missouri Clean Water Law, its implementing regulations, and/or any terms and conditions of an operating permit. The primary purpose of the enforcement activity in the WPP is to resolve violations and return the entity to compliance.
✓ Not applicable; the permittee/facility is not currently under Water Protection Program enforcement action.

GROUNDWATER MONITORING:
Groundwater is a water of the state according to 10 CSR 20-7.015(7) and 10 CSR 20-7.031(6) and must be protected accordingly.
✓ This facility is not required to monitor groundwater.

INDUSTRIAL SLUDGE:
Industrial sludge is solids, semi-solids, or liquid residue generated during the treatment of industrial process wastewater in a treatment works; including but not limited to, scum or solids removed in primary, secondary, or advanced wastewater treatment process; scum and solids filtered from water supplies and backwashed; and a material derived from industrial sludge.
✓ Not applicable; this condition is not applicable to the permittee for this facility.

REASONABLE POTENTIAL ANALYSIS (RPA):
Federal regulation [40 CFR Part 122.44(d)(1)(i)] requires effluent limitations for all pollutants that are or may be discharged at a level that will cause or have the reasonable potential to cause or contribute to an in-stream excursion above narrative or numeric water quality standard. In accordance with [40 CFR Part 122.44(d)(1)(iii)] if the permit writer determines that any give pollutant has the reasonable potential to cause, or contribute to an in-stream excursion above the WQS, the permit must contain effluent limits for that pollutant.
✓ Not applicable; a RPA was not conducted for this facility.

SCHEDULE OF COMPLIANCE (SOC):
A schedule of remedial measures included in a permit, including an enforceable sequence of interim requirements (actions, effluent limits, operations, or milestone events) leading to compliance with the Missouri Clean Water Law, its implementing regulations, and/or the terms and conditions of an operating permit. SOCs are allowed under 40 CFR 122.47 providing certain conditions are met.
✓ Not applicable; this permit does not contain a SOC.

SPILL REPORTING:
Per 10 CSR 24-3.010, any emergency involving a hazardous substance must be reported to the department's 24 hour Environmental Emergency Response hotline at (573) 634-2436 at the earliest practicable moment after discovery. The department may require the submittal of a written report detailing measures taken to clean up a spill. These reporting requirements apply whether or not the spill results in chemicals or materials leaving the permitted property or reaching waters of the state. This requirement is in addition to the noncompliance reporting requirement found in Standard Conditions Part I. http://dnr.mo.gov/env/esp/spillbill.htm

STORMWATER POLLUTION PREVENTION PLAN (SWPPP):
In accordance with 40 CFR 122.44(k) *Best Management Practices (BMPs)* to control or abate the discharge of pollutants when: (1) Authorized under section 304(e) of the Clean Water Act (CWA) for the control of toxic pollutants and hazardous substances from ancillary industrial activities: (2) Authorized under section 402(p) of the CWA for the control of stormwater discharges; (3) Numeric effluent limitations are infeasible; or (4) the practices are reasonably necessary to achieve effluent limitations and standards or to carry out the purposes and intent of the CWA. In accordance with the EPA's *Developing Your Stormwater Pollution Prevention Plan, A Guide for Industrial Operators*, (Document number EPA 833-B-09-002) [published by the United States Environmental Protection Agency (USEPA) in February 2009], BMPs are measures or practices used to reduce the amount of pollution entering (regarding this operating permit) waters of the state. BMPs may take the form of a process, activity, or physical structure. Additionally in accordance with the Stormwater Management, a SWPPP is a series of steps and activities to (1) identify sources of pollution or contamination, and (2) select and carry out actions which prevent or control the pollution of storm water discharges.

The purpose of a SWPPP is to comply with all applicable stormwater regulations by creating an adaptive management plan to control and mitigate pollution of stormwater runoff. Developing a SWPPP provides opportunities to employ appropriate BMPs to minimize the risk of pollutants being discharged with during storm events. The following paragraph outlines the general steps the permittee should take to determine which BMPs will work to achieve the benchmark values discussed in Part V above. This section is not intended to be all encompassing or restrict the use of any physical BMP or operational and maintenance procedure that will assist in pollution control. Additional steps or revisions to the SWPPP may be required to meet the requirements of the permit. Additional information can be found in EPA's *Developing Your Stormwater Pollution Prevention Plan, A Guide for Industrial Operators*, (Document number EPA 833-B-09-002) [published by the United States Environmental Protection Agency (USEPA) in February 2009].

Areas which should be included in the SWPPP are identified in 40 CFR 122.26(b)(14). Once the potential sources of stormwater pollution have been identified, a plan should be formulated to best control the amount of pollutant being released and discharged by each activity or source. This should include, but is not limited to, minimizing exposure to stormwater, good housekeeping measures, proper facility and equipment maintenance, spill prevention and response, vehicle traffic control, and proper materials handling. Once a plan has been developed the facility will employ the control measures that have been determined to be adequate to achieve the benchmark values discussed above. The facility will conduct monitoring and inspections of the BMPs to ensure they are working properly and re-evaluate any BMP not achieving compliance with permitting requirements. For example, if sample results from an outfall show values of TSS above the benchmark value, the BMP being employed is deficient in controlling stormwater pollution. Corrective action should be taken to repair, improve, or replace the failing BMP. This internal evaluation is required at least once per month but should be continued more frequently if BMPs continue to fail. If failures do occur, continue this trial and error process until appropriate BMPs have been established.
If failures continue to occur and the permittee feels there are no practicable or cost-effective BMPs that will sufficiently reduce a pollutant concentration in the discharge to the benchmark values established in the permit, the permittee can submit a request to re-evaluate the benchmark values. This request needs to include 1) a detailed explanation of why the facility is unable to comply with the permit conditions and unable to establish BMPs to achieve the benchmark values; 2) financial data of the company and documentation of cost associated with BMPs for review and 3) the SWPPP, which should contain adequate documentation of BMPs employed, failed BMPs, corrective actions, and all other required information. This will allow the department to conduct a cost analysis on control measures and actions taken by the facility to determine cost-effectiveness of BMPs. The request shall be submitted in the form of an operating permit modification; the application is found at: http://dnr.mo.gov/forms/index.html.

- ✓ Applicable; a SWPPP shall be developed and implemented for each area and shall incorporate required practices identified by the Department with jurisdiction, incorporate erosion control practices specific to site conditions, and provide for maintenance and adherence to the plan.

303(D) LIST:
Section 303(d) of the federal Clean Water Act requires that each state identify waters that are not meeting water quality standards and for which adequate water pollution controls have not been required. Water quality standards protect such beneficial uses of water as whole body contact (such as swimming), maintaining fish and other aquatic life, and providing drinking water for people, livestock and wildlife. The 303(d) list helps state and federal agencies keep track of waters that are impaired but not addressed by normal water pollution control programs. http://dnr.mo.gov/env/wpp/waterquality/303d/303d.htm

- ✓ Applicable; the Missouri River or is listed on the 2008 Missouri 303(d) List for *E. coli*.
- ✓ This facility is not considered to be a source of the above listed pollutant(s) or considered to contribute to the impairment of the Missouri River.

TOTAL MAXIMUM DAILY LOAD (TMDL):
A TMDL is a calculation of the maximum amount of a given pollutant that a body of water can absorb before its water quality is affected; hence, the purpose of a TMDL is to determine the pollutant loading a specific waterbody can assimilate without exceeding water quality standards. If a water body is determined to be impaired as listed on the 303(d) list, then a watershed management plan will be developed that shall include the TMDL calculation. http://dnr.mo.gov/env/wpp/tmdl/

- ✓ Applicable; the Missouri River is associated with the 2006 EPA Approved TMDL for PCB and Chlordane.
- ✓ As these pollutants have been banned, this facility is not considered to be a source of the above listed pollutant(s) or considered to contribute to the impairment of the Missouri River.

VARIANCE:
As per the Missouri Clean Water Law § 644.061.4, variances shall be granted for such period of time and under such terms and conditions as shall be specified by the commission in its order. The variance may be extended by affirmative action of the commission. In no event shall the variance be granted for a period of time greater than is reasonably necessary for complying with the Missouri Clean Water Law §§644.006 to 644.141 or any standard, rule or regulation promulgated pursuant to Missouri Clean Water Law §§644.006 to 644.141.

- ✓ Not applicable; this operating permit is not drafted under premises of a petition for variance.

WASTELOAD ALLOCATIONS (WLA) FOR LIMITS:
As per [10 CSR 20-2.010(78)], the WLA is the amount of pollutant each discharger is allowed to release into a given stream after the department has determined total amount of pollutant that may be discharged into that stream without endangering its water quality.
✓ Not applicable; wasteload allocations were not calculated.

WLA MODELING:
There are two general types of effluent limitations, technology-based effluent limits (TBELs) and water quality based effluent limits (WQBELs). If TBELs do not provide adequate protection for the receiving waters, then WQBEL must be used.
✓ Not applicable; a WLA study was either not submitted or determined not applicable by Department staff.

WATER QUALITY STANDARDS:
Per [10 CSR 20-7.031(4)], general criteria shall be applicable to all waters of the state at all times including mixing zones. Additionally, [40 CFR 122.44(d)(1)] directs the Department to establish in each NPDES permit to include conditions to achieve water quality established under Section 303 of the Clean Water Act, including State narrative criteria for water quality.

WHOLE EFFLUENT TOXICITY (WET) TEST:
A WET test is a quantifiable method of determining if a discharge from a facility may be causing toxicity to aquatic life by itself, in combination with or through synergistic responses when mixed with receiving stream water.
✓ Not applicable; at this time, the permittee is not required to WET test for this facility. This facility was previously required to WET test on Outfall #001 two times a year. This facility passed all required WET tests in the last five years. It is in the best professional judgment of the permit writer that WET tests are not valid measures of toxicity at stormwater outfalls. Stormwater events are variable and often fleeting; acute wet tests measure exposure of organisms to pollutants over a 48 hour time period.

Part IV. EFFLUENT LIMITS DETERMINATION

OUTFALL #001-005– STORMWATER OUTFALLS
Effluent limitations derived and established in the below Effluent Limitations Table are based on current operations of the facility. Future permit action due to facility modification may contain new operating permit terms and conditions that supersede the terms and conditions, including effluent limitations, of this operating permit.

PARAMETERS OUTFALLS #001-005	UNIT	BASIS	DAILY MAXIMUM LIMIT	BENCH-MARK	PREVIOUS PERMIT LIMITS	MINIMUM SAMPLING FREQUENCY	MINIMUM REPORTING FREQUENCY	SAMPLE TYPE
PHYSICAL								
FLOW	MGD	1	*	-	SAME	ONCE/QUARTER	ONCE/QUARTER	24 HR. EST.
PRECIPITATION	INCHES	6	*	-	NEW	ONCE/QUARTER	ONCE/QUARTER	MEASURED
CONVENTIONAL								
COD	MG/L	6, 8	**	143	*/*	ONCE/QUARTER	ONCE/QUARTER	GRAB
OIL & GREASE	MG/L	1, 3	**	10	15/ 10	ONCE/QUARTER	ONCE/QUARTER	GRAB
pH ǂ	SU	1, 3	6.5 TO 9.0	-	6.0 TO 9.0	ONCE/QUARTER	ONCE/QUARTER	GRAB
TSS	MG/L	6, 8	100	-	100/*	ONCE/QUARTER	ONCE/QUARTER	GRAB
METALS								
TOTAL HARDNESS AS $CaCO_3$	mg/L	6	*	-	NEW	ONCE/QUARTER	ONCE/QUARTER	GRAB
ALUMINUM, TOTAL RECOVERABLE	µg/L	6, 9	**	750	NEW	ONCE/QUARTER	ONCE/QUARTER	GRAB
COPPER, TOTAL RECOVERABLE	µg/L	6,9,10	**	26	NEW	ONCE/QUARTER	ONCE/QUARTER	GRAB
IRON, TOTAL RECOVERABLE	µg/L	6	**	4000	NEW	ONCE/QUARTER	ONCE/QUARTER	GRAB

* - Monitoring requirement only
** - Monitoring with associated benchmark
ǂ The facility will report the minimum and maximum pH values; pH is not to be averaged
NEW = Parameter not established in previous operating permit

Basis for Limitations Codes:
1. State or Federal Regulation/Law
2. Water Quality Standard (includes RPA)
3. Water Quality Based Effluent Limits
4. Antidegradation Review/Policy
5. Water Quality Model
6. Best Professional Judgment
7. TMDL or Permit in lieu of TMDL
8. Benchmark based on MSGP
9. Benchmark based on Missouri Water Quality Standards
10. Benchmark based on Missouri General Permit MOR203

DERIVATION AND DISCUSSION OF LIMITS:

PHYSICAL:

Flow
In accordance with [40 CFR Part 122.44(i)(1)(ii)] the volume of effluent discharged from each outfall is needed to assure compliance with permitted effluent limitations. If the permittee is unable to obtain effluent flow, then it is the responsibility of the permittee to inform the department, which may require the submittal of an operating permit modification. The facility will report the total flow in millions of gallons per day (MGD).

Precipitation
Monitoring only requirement; measuring the amount of precipitation [(10 CSR 20-6.200(2)(C)1.E(VI)] during an event is necessary to ensure adequate stormwater management exists at the site. Knowing the amount of potential stormwater runoff can provide the permittee a better understanding of specific control measure that should be employed to ensure protection of water quality. The facility will provide the 24 hour accumulation value of precipitation from the day of sampling the other parameters. It is not necessary to report all days of precipitation during the quarter because of the readily available on-line data.

CONVENTIONAL:

Chemical Oxygen Demand (COD)
Monitoring with a daily maximum benchmark of 143 mg/L. The previous permit had monitoring only for this parameter. There is no water quality standard for COD; however, increased oxygen demand may impact instream water quality. COD is also a valuable indicator parameter. COD monitoring allows the permittee to identify increases in COD that may indicate materials/chemicals coming into contact with stormwater that cause an increase in oxygen demand. Increases in COD may indicate a need for maintenance or improvement of BMPs. The daily maximum benchmark was calculated using methods described in the *Technical Support Document for Water Quality-Based Toxics Control* (EPA/505/2-90-001), Appendix E, Section 2; the 99th percentile maximum daily limit was determined using all measured COD values from all outfalls (100 data points). This method is EPA approved, scientifically and statistically defensible, and has been used at similar sites.

Maximum COD value from 5 years of DMR data: 260 mg/L
Minimum COD value from 5 years of DMR data: 50 mg/L
Arithmetic mean of all values ($\hat{\mu}$) = $\sum[x_i]$ / k = $\sum[x_i]$ / 100 = 65.09
Variance ($\hat{\sigma}^2$) = $\sum[(x_i - \hat{\mu})^2]/(k-1)$ = 1129.33525
Standard Deviation ($\hat{\sigma}$) = $(\hat{\sigma}^2)^{1/2}$ = 33.60558
Coefficient of Variation ($\widehat{CV}$) = $\hat{\sigma}/\hat{\mu}$ = 0.516294
Standardized Z-score for the pth percentile of standardized normal distribution (Z_p) = 2.326
99th percentile maximum daily limits = $\hat{\mu}$ + Z_p $\hat{\sigma}$ = 65.09 + (2.326 * 33.60558) = 143.2566 = 143 mg/L

Oil & Grease
Monitoring with a 10 mg/L daily maximum benchmark. Previous permit had a daily maximum limit of 15mg/L and a monthly average limit of 10 mg/L. Oil and grease is a conventional pollutant. In accordance with 10 CSR 20-7.031 Table A: *Criteria for Designated Uses*, 10 mg/L is a value protective of aquatic life. There have been no exceedances of 10 mg/L in the last permit cycle, and it is in the permit writer's best professional judgment to require monitoring only for this parameter with a daily maximum benchmark of 10 mg/L.

pH
Effluent limitation range is from 6.5 to 9.0 Standard pH Units (SU), as per [10 CSR 20-7.031(5)(E)]. The previous permit had limits of 6.0-9.0 Standard pH Units (SU); however, the permittee's DMRs for the last five years show that 6.5 is reasonable and achievable by this facility. The Water Quality Standards [10 CSR 20-7.031(5)(E)], state water contaminants shall not cause pH to be outside the range of 6.5 to 9.0 SU. pH is not to be averaged. The facility shall report the minimum and maximum values.

Total Suspended Solids (TSS)
Daily maximum limit of 100 mg/L. This is retained from the previous permit after re-evaluation. There were exceedances of this parameter at outfalls #003 and #004 in the last permit cycle; however, after review of the last five years of DMR data, it is in the permit writer's best professional judgment these limits are largely achievable by this facility, and there is no justification under anti-backsliding to raise these limits. There is no water quality standard for TSS; however, sediment discharges can negatively impact aquatic life habitat. It is in the best professional judgment 100mg/L is protective of the Missouri general water quality criteria that states "Waters shall be free from substances or conditions in sufficient amounts to result in toxicity to human, animal or aquatic life". TSS is also a valuable indicator parameter. TSS monitoring allows the permittee to identify increases in TSS that may indicate uncontrolled materials leaving the site. 100 mg/L as a benchmark is found in similar industrial permits, including the Missouri State General Permit for Fabricated Metal (MOR203), which covers SIC codes 37xx.

METALS:

Metals
Effluent benchmarks for total recoverable metals were developed to acute water quality standards found in 10 CSR 20, 7.031 Table A. General warm-water habitat criteria (WWH; designated as AQL in 10 CSR 20-7.031 Table A) at a stormwater assumed hardness of 193 is used in the conversion below.

Due to the absence of contemporaneous effluent and instream data for total recoverable metals, dissolved metals, hardness, and total suspended solids with which to calculate metals translators, partitioning between the dissolved and absorbed phases was assumed to be minimal (Section 5.7.3, EPA/505/2-90-001). Freshwater criteria conversion factors for dissolved metals were used as the metals translator as recommended in guidance (Section 1.3, 1.5.3, and Table 1, EPA 823-B-96-007). If concurrent site-specific data for total recoverable metals, dissolved metals, hardness, and total suspended solids are provided to the department, partitioning evaluations may be considered and site-specific translators developed.

METAL	CONVERSION FACTORS	
	ACUTE	CHRONIC
Aluminum	N/A	N/A
Copper	0.960	0.960
Iron	N/A	N/A
Mercury	0.85	N/A
Nickel	0.998	0.997

Conversion factors for Cd and Pb are hardness dependent. N/A = not applicable.
Values calculated using equation found in Section 1.3 of EPA 823-B-96-007 and hardness = 193 mg/L.

Total Hardness as $CaCO_3$
Monitoring only. This is a new parameter for this permit. The toxicities of certain metals are hardness dependent. Monitoring this parameter is necessary for limit calculations of these metals in future permit cycles.

Aluminum, Total Recoverable
Monitoring requirement with a benchmark set at 750 µg/L. This is a new parameter for this permit. This pollutant was detected in the stormwater effluent of this facility in the testing associated with the permittee's application for permit renewal in amounts that exceed water quality standards at outfalls #001-004, and in non-negligible quantities (662 µg/L) at outfall #005. It is in the permit writer's best professional judgment to assign a benchmark of 750 µg/L to this parameter using the acute water quality standards found in 10 CSR 20-7.031 Table A for the protection of the general criteria and aquatic life. When there is no mixing, the wasteload allocation is equal to the water quality standard for a pollutant.

Copper, Total Recoverable
Monitoring only. This is a new parameter for this permit. This pollutant is a pollutant of concern for this SIC code. This is a benchmark found in the Missouri State General Permit for Fabricated Metal (MOR203), which covers SIC codes 37xx. This parameter is also found in permits for similar facilities. Monitoring will be added to ensure this facility is not discharging this pollutant in amounts which could exceed water quality standards.

Iron, Total Recoverable
Monitoring requirement only with a benchmark set at 4000 µg/L. This is a new parameter for this permit. This pollutant was detected in the stormwater effluent of this facility in the testing associated with the permittee's application for permit renewal. The chronic water quality standard for iron is 1000 µg/L. Due to the sporadic nature of stormwater discharges, the Department, under the direction of EPA guidance, has determined chronic standards are capricious measures of stormwater discharges. Chronic effluent limitations are based on the organism's ability to survive within the designated concentration for seven days. Stormwater is rarely discharged continuously for seven days. Conversely, acute water quality standards are applicable, but are non-existent for iron in the state of Missouri. After reviewing other sources of data, it is in the permit writer's best professional judgment to adopt Kentucky's iron surface water quality standard for warm water aquatic habitat as a benchmark for this facility. 40 CFR 122.44(k) indicates that a BMP-based approach is appropriate (see Stormwater Pollution Prevention Plan). In accordance with the department's current stormwater permitting, under the direction of EPA guidance, it is the permit writer's best professional judgment that an iron benchmark of 4000 µg/L is both feasible and protective of water quality at this facility. This benchmark is accompanied by a TSS limit of 100 mg/L. It is the permit writer's best professional judgment that this combination of parameters is protective of all numeric and general criteria.

Part V. SAMPLING AND REPORTING REQUIREMENTS:

ELECTRONIC DISCHARGE MONITORING REPORTING:
Due to recently enacted federal regulations, all facilities will need to begin submitting their discharge monitoring reports electronically, called the eDMR system. To begin the process, please visit http://dnr.mo.gov/env/wpp/edmr.htm. This process is expected to save time, lessen paperwork, and reduce operating costs for both the facilities and the water protection program. Additional information may also be found at http://dnr.mo.gov/pubs/pub2474.pdf.

SAMPLING FREQUENCY JUSTIFICATION:
Sampling and reporting frequency was generally retained from previous permit. Sampling frequency for stormwater-only outfalls is typically quarterly even though BMP inspection occurs monthly. The facility may sample more frequently if they need additional data to determine if their best management technology is performing as expected.

SAMPLING TYPE JUSTIFICATION:
Sampling type was continued from the previous permit. The sampling types are representative of the discharges, and are protective of water quality. Discharges with altering effluent should have composite sampling; discharges with uniform effluent can have grab samples. Grab samples are usually appropriate for stormwater. Parameters which must have grab sampling are: pH, ammonia, *E. coli*, total residual chlorine, free available chlorine, hexavalent chromium, dissolved oxygen, total phosphorus, and volatile organic samples.

Part VI. ADMINISTRATIVE REQUIREMENTS

On the basis of preliminary staff review and the application of applicable standards and regulations, the Department, as administrative agent for the Missouri Clean Water Commission, proposes to issue a permit(s) subject to certain effluent limitations, schedules, and special conditions contained herein and within the operating permit. The proposed determinations are tentative pending public comment.

PERMIT SYNCHRONIZATION:
The Department of Natural Resources is currently undergoing a synchronization process for operating permits. Permits are normally issued on a five-year term, but to achieve synchronization many permits will need to be issued for less than the full five years allowed by regulation. The intent is that all permits within a watershed will move through the Watershed Based Management (WBM) cycle together will all expire in the same fiscal year. http://dnr.mo.gov/env/wpp/cpp/docs/watershed-based-management.pdf. This will allow further streamlining by placing multiple permits within a smaller geographic area on public notice simultaneously, thereby reducing repeated administrative efforts. This will also allow the department to explore a watershed based permitting effort at some point in the future. Renewal applications must continue to be submitted within 180 days of expiration, however, in instances where effluent data from the previous renewal is less than three years old, that data may be re-submitted to meet the requirements of the renewal application. If the permit provides a schedule of compliance for meeting new water quality based effluent limits beyond the expiration date of the permit, the time remaining in the schedule of compliance will be allotted in the renewed permit. *This permit will become synchronized by expiring end of 3rd quarter, 2020.*

PUBLIC NOTICE:
The Department shall give public notice that a draft permit has been prepared and its issuance is pending. http://dnr.mo.gov/env/wpp/permits/pn/index.html Additionally, public notice will be issued if a public hearing is to be held because of a significant degree of interest in and water quality concerns related to a draft permit. No public notice is required when a request for a permit modification or termination is denied; however, the requester and permittee must be notified of the denial in writing.

The Department must issue public notice of a pending operating permit or of a new or reissued statewide general permit. The public comment period is the length of time not less than 30 days following the date of the public notice which interested persons may submit written comments about the proposed permit.

For persons wanting to submit comments regarding this proposed operating permit, then please refer to the Public Notice page located at the front of this draft operating permit. The Public Notice page gives direction on how and where to submit appropriate comments.

☐ - The Public Notice period for this operating permit was from 02/26/2016 to 03/28/2016. No responses were received.

DATE OF FACT SHEET: (12/22/2015)

COMPLETED BY:
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WATER PROTECTION PROGRAM
OPERATING PERMITS SECTION - INDUSTRIAL UNIT
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STANDARD CONDITIONS FOR NPDES PERMITS
ISSUED BY
THE MISSOURI DEPARTMENT OF NATURAL RESOURCES
MISSOURI CLEAN WATER COMMISSION
REVISED
AUGUST 1, 2014

These Standard Conditions incorporate permit conditions as required by 40 CFR 122.41 or other applicable state statutes or regulations. These minimum conditions apply unless superseded by requirements specified in the permit.

Part I – General Conditions
Section A – Sampling, Monitoring, and Recording

1. **Sampling Requirements.**
   a. Samples and measurements taken for the purpose of monitoring shall be representative of the monitored activity.
   b. All samples shall be taken at the outfall(s) or Missouri Department of Natural Resources (Department) approved sampling location(s), and unless specified, before the effluent joins or is diluted by any other body of water or substance.

2. **Monitoring Requirements**.
   a. Records of monitoring information shall include:
      i. The date, exact place, and time of sampling or measurements;
      ii. The individual(s) who performed the sampling or measurements;
      iii. The date(s) analyses were performed;
      iv. The individual(s) who performed the analyses;
      v. The analytical techniques or methods used; and
      vi. The results of such analyses.
   b. If the permittee monitors any pollutant more frequently than required by the permit at the location specified in the permit using test procedures approved under 40 CFR Part 136, or another method required for an industry-specific waste stream under 40 CFR subchapters N or O, the results of such monitoring shall be included in the calculation and reported to the Department with the discharge monitoring report data (DMR) submitted to the Department pursuant to Section B, paragraph 7.

3. **Sample and Monitoring Calculations.** Calculations for all sample and monitoring results which require averaging of measurements shall utilize an arithmetic mean unless otherwise specified in the permit.

4. **Test Procedures**. The analytical and sampling methods used shall conform to the reference methods listed in 10 CSR 20-7.015 unless alternates are approved by the Department. The facility shall use sufficiently sensitive analytical methods for detecting, identifying, and measuring the concentrations of pollutants. The facility shall ensure that the selected methods are able to quantify the presence of pollutants in a given discharge at concentrations that are low enough to determine compliance with Water Quality Standards in 10 CSR 20-7.031 or effluent limitations unless provisions in the permit allow for other alternatives. A method is "sufficiently sensitive" when; 1) the method minimum level is at or below the level of the applicable water quality criterion for the pollutant or, 2) the method minimum level is above the applicable water quality criterion, but the amount of pollutant in a facility's discharge is high enough that the method detects and quantifies the level of pollutant in the discharge, or 3) the method has the lowest minimum level of the analytical methods approved under 10 CSR 20-7.015. These methods are also required for parameters that are listed as monitoring only, as the data collected may be used to determine if limitations need to be established. A permittee is responsible for working with their contractors to ensure that the analysis performed is sufficiently sensitive.

5. **Record Retention.** Except for records of monitoring information required by the permit related to the permittee's sewage sludge use and disposal activities, which shall be retained for a period of at least five (5) years (or longer as required by 40 CFR part 503), the permittee shall retain 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 permit, and records of all data used to complete the application for the permit, for a period of at least three (3) years from the date of the sample, measurement, report or application. This period may be extended by request of the Department at any time.

6. **Illegal Activities.**
   a. The Federal Clean Water Act provides that any person who falsifies, tampers with, or knowingly renders inaccurate any monitoring device or method required to be maintained under the permit shall, upon conviction, be punished by a fine of not more than $10,000, or by imprisonment for not more than two (2) years, or both. If a conviction of a person is for a violation committed after a first conviction of such person under this paragraph, punishment is a fine of not more than $20,000 per day of violation, or by imprisonment of not more than four (4) years, or both.
   b. The Missouri Clean Water Law provides that any person or who falsifies, tampers with, or knowingly renders inaccurate any monitoring device or method required to be maintained pursuant to sections 644.006 to 644.141 shall, upon conviction, be punished by a fine of not more than $10,000, or by imprisonment for not more than six (6) months, or by both. Second and successive convictions for violation under this paragraph by any person shall be punished by a fine of not more than $50,000 per day of violation, or by imprisonment for not more than two (2) years, or both.

Section B – Reporting Requirements

1. **Planned Changes.**
   a. The permittee shall give notice to the Department as soon as possible of any planned physical alterations or additions to the permitted facility when:
      i. The alteration or addition to a permitted facility may meet one of the criteria for determining whether a facility is a new source in 40 CFR 122.29(b); or
      ii. The alteration or addition could significantly change the nature or increase the quantity of pollutants discharged. This notification applies to pollutants which are subject neither to effluent limitations in the permit, nor to notification requirements under 40 CFR 122.42;
      iii. The alteration or addition results in a significant change in the permittee's sludge use or disposal practices, and such alteration, addition, or change may justify the application of permit conditions that are different from or absent in the existing permit, including notification of additional use or disposal sites not reported during the permit application process or not reported pursuant to an approved land application plan;
      iv. Any facility expansions, production increases, or process modifications which will result in a new or substantially different discharge or sludge characteristics must be reported to the Department 60 days before the facility or process modification begins. Notification may be accomplished by application for a new permit. If the discharge does not violate effluent limitations specified in the permit, the facility is to submit a notice to the Department of the changed discharge at least 30 days before such changes. The Department may require a construction permit and/or permit modification as a result of the proposed changes at the facility.

2. **Non-compliance Reporting.**
   a. The permittee shall report any noncompliance which may endanger health or the environment. Relevant information shall be provided orally or via the current electronic method approved by the Department, within 24 hours from the time the permittee becomes aware of the circumstances, and shall be reported to the appropriate Regional Office during normal business hours or the Environmental Emergency Response hotline at 573-634-2436 outside of normal business hours. A written submission shall also be provided within five (5) business days of the time the permittee becomes aware of the circumstances. The written submission shall contain a description of the noncompliance and its cause; the period of noncompliance, including exact dates and times, and if the noncompliance has not been corrected, the anticipated time it is expected to continue; and steps taken or planned to reduce, eliminate, and prevent reoccurrence of the noncompliance.

b. The following shall be included as information which must be reported within 24 hours under this paragraph.
   i. Any unanticipated bypass which exceeds any effluent limitation in the permit.
   ii. Any upset which exceeds any effluent limitation in the permit.
   iii. Violation of a maximum daily discharge limitation for any of the pollutants listed by the Department in the permit required to be reported within 24 hours.
c. The Department may waive the written report on a case-by-case basis for reports under paragraph 2. b. of this section if the oral report has been received within 24 hours.

3. **Anticipated Noncompliance**. The permittee shall give advance notice to the Department of any planned changes in the permitted facility or activity which may result in noncompliance with permit requirements. The notice shall be submitted to the Department 60 days prior to such changes or activity.

4. **Compliance Schedules.** Reports of compliance or noncompliance with, or any progress reports on, interim and final requirements contained in any compliance schedule of the permit shall be submitted no later than 14 days following each schedule date. The report shall provide an explanation for the instance of noncompliance and a proposed schedule or anticipated date, for achieving compliance with the compliance schedule requirement.

5. **Other Noncompliance.** The permittee shall report all instances of noncompliance not reported under paragraphs 2, 3, and 6 of this section, at the time monitoring reports are submitted. The reports shall contain the information listed in paragraph 2. a. of this section.

6. **Other Information**. Where the permittee becomes aware that it failed to submit any relevant facts in a permit application, or submitted incorrect information in a permit application or in any report to the Department, it shall promptly submit such facts or information.

7. **Discharge Monitoring Reports.**
   a. Monitoring results shall be reported at the intervals specified in the permit.
   b. Monitoring results must be reported to the Department via the current method approved by the Department, unless the permittee has been granted a waiver from using the method. If the permittee has been granted a waiver, the permittee must use forms provided by the Department.
   c. Monitoring results shall be reported to the Department no later than the 28th day of the month following the end of the reporting period.

Section C – Bypass/Upset Requirements

1. **Definitions.**
   a. *Bypass*: the intentional diversion of waste streams from any portion of a treatment facility, except in the case of blending.
   b. *Severe Property Damage*: substantial physical damage to property, damage to the treatment facilities which causes them to become inoperable, or substantial and permanent loss of natural resources which can reasonably be expected to occur in the absence of a bypass. Severe property damage does not mean economic loss caused by delays in production.
   c. *Upset*: an exceptional incident in which there is unintentional and temporary noncompliance with technology based permit effluent limitations because of factors beyond the reasonable control of the permittee. An upset does not include noncompliance to the extent caused by operational error, improperly designed treatment facilities, inadequate treatment facilities, lack of preventive maintenance, or careless or improper operation.

2. **Bypass Requirements.**
   a. Bypass not exceeding limitations. The permittee may allow any bypass to occur which does not cause effluent limitations to be exceeded, but only if it also is for essential maintenance to assure efficient operation. These bypasses are not subject to the provisions of paragraphs 2. b. and 2. c. of this section.
   b. Notice.
      i. Anticipated bypass. If the permittee knows in advance of the need for a bypass, it shall submit prior notice, if possible at least 10 days before the date of the bypass.
      ii. Unanticipated bypass. The permittee shall submit notice of an unanticipated bypass as required in Section B – Reporting Requirements, paragraph 5 (24-hour notice).
   c. Prohibition of bypass.
      i. Bypass is prohibited, and the Department may take enforcement action against a permittee for bypass, unless:
         1. Bypass was unavoidable to prevent loss of life, personal injury, or severe property damage;
         2. There were no feasible alternatives to the bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of equipment downtime. This condition is not satisfied if adequate back-up equipment should have been installed in the exercise of reasonable engineering judgment to prevent a bypass which occurred during normal periods of equipment downtime or preventive maintenance; and
         3. The permittee submitted notices as required under paragraph 2. b. of this section.
      ii. The Department may approve an anticipated bypass, after considering its adverse effects, if the Department determines that it will meet the three (3) conditions listed above in paragraph 2. c. i. of this section.

3. **Upset Requirements.**
   a. Effect of an upset. An upset constitutes an affirmative defense to an action brought for noncompliance with such technology based permit effluent limitations if the requirements of paragraph 3. b. of this section are met. No determination made during administrative review of claims that noncompliance was caused by upset, and before an action for noncompliance, is final administrative action subject to judicial review.
   b. Conditions necessary for a demonstration of upset. A permittee who wishes to establish the affirmative defense of upset shall demonstrate, through properly signed, contemporaneous operating logs, or other relevant evidence that:
      i. An upset occurred and that the permittee can identify the cause(s) of the upset;
      ii. The permitted facility was at the time being properly operated; and
      iii. The permittee submitted notice of the upset as required in Section B – Reporting Requirements, paragraph 2. b. ii. (24-hour notice).
      iv. The permittee complied with any remedial measures required under Section D – Administrative Requirements, paragraph 4.
   c. Burden of proof. In any enforcement proceeding, the permittee seeking to establish the occurrence of an upset has the burden of proof.

Section D – Administrative Requirements

1. **Duty to Comply.** The permittee must comply with all conditions of this permit. Any permit noncompliance constitutes a violation of the Missouri Clean Water Law and Federal Clean Water Act and is grounds for enforcement action; for permit termination, revocation and reissuance, or modification; or denial of a permit renewal application.
   a. The permittee shall comply with effluent standards or prohibitions established under section 307(a) of the Federal Clean Water Act for toxic pollutants and with standards for sewage sludge use or disposal established under section 405(d) of the CWA within the time provided in the regulations that establish these standards or prohibitions or standards for sewage sludge use or disposal, even if the permit has not yet been modified to incorporate the requirement.
   b. The Federal Clean Water Act provides that any person who violates section 301, 302, 306, 307, 308, 318 or 405 of the Act, or any permit condition or limitation implementing any such sections in a permit issued under section 402, or any requirement imposed in a pretreatment program approved under sections 402(a)(3) or 402(b)(8) of the Act, is subject to a civil penalty not to exceed $25,000 per day for each violation. The Federal Clean Water Act provides that any person who negligently violates sections 301, 302, 306, 307, 308, 318, or 405 of the Act, or any condition or limitation implementing any of such sections in a permit issued under section 402 of the Act, or any requirement

imposed in a pretreatment program approved under section 402(a)(3) or 402(b)(8) of the Act, is subject to criminal penalties of $2,500 to $25,000 per day of violation, or imprisonment of not more than one (1) year, or both. In the case of a second or subsequent conviction for a negligent violation, a person shall be subject to criminal penalties of not more than $50,000 per day of violation, or by imprisonment of not more than two (2) years, or both. Any person who knowingly violates such sections, or such conditions or limitations is subject to criminal penalties of $5,000 to $50,000 per day of violation, or imprisonment for not more than three (3) years, or both. In the case of a second or subsequent conviction for a knowing violation, a person shall be subject to criminal penalties of not more than $100,000 per day of violation, or imprisonment of not more than six (6) years, or both. Any person who knowingly violates section 301, 302, 303, 306, 307, 308, 318 or 405 of the Act, or any permit condition or limitation implementing any of such sections in a permit issued under section 402 of the Act, and who knows at that time that he thereby places another person in imminent danger of death or serious bodily injury, shall, upon conviction, be subject to a fine of not more than $250,000 or imprisonment of not more than 15 years, or both. In the case of a second or subsequent conviction for a knowing endangerment violation, a person shall be subject to a fine of not more than $500,000 or by imprisonment of not more than 30 years, or both. An organization, as defined in section 309(c)(3)(B)(iii) of the CWA, shall, upon conviction of violating the imminent danger provision, be subject to a fine of not more than $1,000,000 and can be fined up to $2,000,000 for second or subsequent convictions.

c. Any person may be assessed an administrative penalty by the EPA Director for violating section 301, 302, 306, 307, 308, 318 or 405 of this Act, or any permit condition or limitation implementing any of such sections in a permit issued under section 402 of this Act. Administrative penalties for Class I violations are not to exceed $10,000 per violation, with the maximum amount of any Class I penalty assessed not to exceed $25,000. Penalties for Class II violations are not to exceed $10,000 per day for each day during which the violation continues, with the maximum amount of any Class II penalty not to exceed $125,000.

d. It is unlawful for any person to cause or permit any discharge of water contaminants from any water contaminant or point source located in Missouri in violation of sections 644.006 to 644.141 of the Missouri Clean Water Law, or any standard, rule or regulation promulgated by the commission. In the event the commission or the director determines that any provision of sections 644.006 to 644.141 of the Missouri Clean Water Law or standard, rules, limitations or regulations promulgated pursuant thereto, or permits issued by, or any final abatement order, other order, or determination made by the commission or the director, or any filing requirement pursuant to sections 644.006 to 644.141 of the Missouri Clean Water Law or any other provision which this state is required to enforce pursuant to any federal water pollution control act, is being, was, or is in imminent danger of being violated, the commission or director may cause to have instituted a civil action in any court of competent jurisdiction for the injunctive relief to prevent any such violation or further violation or for the assessment of a penalty not to exceed $10,000 per day for each day, or part thereof, the violation occurred and continues to occur, or both, as the court deems proper. Any person who willfully or negligently commits any violation in this paragraph shall, upon conviction, be punished by a fine of not less than $2,500 nor more than $25,000 per day of violation, or by imprisonment for not more than one year, or both. Second and successive convictions for violation of the same provision of this paragraph by any person shall be punished by a fine of not more than $50,000 per day of violation, or by imprisonment for not more than two (2) years, or both.

2. **Duty to Reapply.**
   a. If the permittee wishes to continue an activity regulated by this permit after the expiration date of this permit, the permittee must apply for and obtain a new permit.
   b. A permittee with a currently effective site-specific permit shall submit an application for renewal at least 180 days before the expiration date of the existing permit, unless permission for a later date has been granted by the Department. (The Department shall not grant permission for applications to be submitted later than the expiration date of the existing permit.)
   c. A permittees with currently effective general permit shall submit an application for renewal at least 30 days before the existing permit expires, unless the permittee has been notified by the Department that an earlier application must be made. The Department may grant permission for a later submission date. (The Department shall not grant permission for applications to be submitted later than the expiration date of the existing permit.)

3. **Need to Halt or Reduce Activity Not a Defense.** It shall not be a defense for a permittee in an enforcement action that it would have been necessary to halt or reduce the permitted activity in order to maintain compliance with the conditions of this permit.

4. **Duty to Mitigate.** The permittee shall take all reasonable steps to minimize or prevent any discharge or sludge use or disposal in violation of this permit which has a reasonable likelihood of adversely affecting human health or the environment.

5. **Proper Operation and Maintenance**. The permittee shall at all times properly operate and maintain all facilities and systems of treatment and control (and related appurtenances) which are installed or used by the permittee to achieve compliance with the conditions of this permit. Proper operation and maintenance also includes adequate laboratory controls and appropriate quality assurance procedures. This provision requires the operation of back-up or auxiliary facilities or similar systems which are installed by a permittee only when the operation is necessary to achieve compliance with the conditions of the permit.

6. **Permit Actions.**
   a. Subject to compliance with statutory requirements of the Law and Regulations and applicable Court Order, this permit may be modified, suspended, or revoked in whole or in part during its term for cause including, but not limited to, the following:
      i. Violations of any terms or conditions of this permit or the law;
      ii. Having obtained this permit by misrepresentation or failure to disclose fully any relevant facts;
      iii. A change in any circumstances or conditions that requires either a temporary or permanent reduction or elimination of the authorized discharge; or
      iv. Any reason set forth in the Law or Regulations.
   b. The filing of a request by the permittee for a permit modification, revocation and reissuance, or termination, or a notification of planned changes or anticipated noncompliance does not stay any permit condition.

7. **Permit Transfer.**
   a. Subject to 10 CSR 20-6.010, an operating permit may be transferred upon submission to the Department of an application to transfer signed by the existing owner and the new owner, unless prohibited by the terms of the permit. Until such time the permit is officially transferred, the original permittee remains responsible for complying with the terms and conditions of the existing permit.
   b. The Department may require modification or revocation and reissuance of the permit to change the name of the permittee and incorporate such other requirements as may be necessary under the Missouri Clean Water Law or the Federal Clean Water Act.
   c. The Department, within 30 days of receipt of the application, shall notify the new permittee of its intent to revoke or reissue or transfer the permit.

8. **Toxic Pollutants.** The permittee shall comply with effluent standards or prohibitions established under section 307(a) of the Federal Clean Water Act for toxic pollutants and with standards for sewage sludge use or disposal established under section 405(d) of the Federal Clean Water Act within the time provided in the regulations that establish these standards or prohibitions or standards for sewage sludge use or disposal, even if the permit has not yet been modified to incorporate the requirement.

9. **Property Rights.** This permit does not convey any property rights of any sort, or any exclusive privilege.

10. **Duty to Provide Information.** The permittee shall furnish to the Department, within a reasonable time, any information which the Department may request to determine whether cause exists for modifying, revoking and reissuing, or terminating this permit or to determine compliance with this permit. The permittee shall also furnish to the Department upon request, copies of records required to be kept by this permit.

11. **Inspection and Entry.** The permittee shall allow the Department, or an authorized representative (including an authorized contractor acting as a representative of the Department), upon presentation of credentials and other documents as may be required by law, to:
    a. Enter upon the permittee's premises where a regulated facility or activity is located or conducted, or where records must be kept under the conditions of the permit;
    b. Have access to and copy, at reasonable times, any records that must be kept under the conditions of this permit;
    c. Inspect at reasonable times any facilities, equipment (including monitoring and control equipment), practices, or operations regulated or required under this permit; and
    d. Sample or monitor at reasonable times, for the purposes of assuring permit compliance or as otherwise authorized by the Federal Clean Water Act or Missouri Clean Water Law, any substances or parameters at any location.

12. **Closure of Treatment Facilities.**
    a. Persons who cease operation or plan to cease operation of waste, wastewater, and sludge handling and treatment facilities shall close the facilities in accordance with a closure plan approved by the Department.
    b. Operating Permits under 10 CSR 20-6.010 or under 10 CSR 20-6.015 are required until all waste, wastewater, and sludges have been disposed of in accordance with the closure plan approved by the Department and any disturbed areas have been properly stabilized. Disturbed areas will be considered stabilized when perennial vegetation, pavement, or structures using permanent materials cover all areas that have been disturbed. Vegetative cover, if used, shall be at least 70% plant density over 100% of the disturbed area.

13. **Signatory Requirement.**
    a. All permit applications, reports required by the permit, or information requested by the Department shall be signed and certified. (See 40 CFR 122.22 and 10 CSR 20-6.010)
    b. The Federal Clean Water Act provides that any person who knowingly makes any false statement, representation, or certification in any record or other document submitted or required to be maintained under this permit, including monitoring reports or reports of compliance or non-compliance shall, upon conviction, be punished by a fine of not more than $10,000 per violation, or by imprisonment for not more than six (6) months per violation, or by both.
    c. The Missouri Clean Water Law provides that any person who knowingly makes any false statement, representation or certification in any application, record, report, plan, or other document filed or required to be maintained pursuant to sections 644.006 to 644.141 shall, upon conviction, be punished by a fine of not more than ten thousand dollars, or by imprisonment for not more than six months, or by both.

14. **Severability.** The provisions of the permit are severable, and if any provision of the permit, or the application of any provision of the permit to any circumstance, is held invalid, the application of such provision to other circumstances, and the remainder of the permit, shall not be affected thereby.

AP 14695

FOR AGENCY USE ONLY	
CHECK NUMBER	
DATE RECEIVED 2/22/13	FEE SUBMITTED 1083

MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM, WATER POLLUTION CONTROL BRANCH
FORM A – APPLICATION FOR CONSTRUCTION OR OPERATING PERMIT UNDER MISSOURI CLEAN WATER LAW

Note ▶ PLEASE READ THE ACCOMPANYING INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1. This application is for:

- ☐ An operating permit and antidegradation review public notice
- ☐ A construction permit following an appropriate operating permit and antidegradation review public notice
- ☐ A construction permit and concurrent operating permit and antidegradation review public notice
- ☐ A construction permit (submitted before Aug. 30, 2008 or antidegradation review is not required)
- ☐ An operating permit for a new or unpermitted facility — Construction Permit # _____
- ☑ An operating permit renewal: permit # MO- 135208 — Expiration Date 08/27/2013
- ☐ An operating permit modification: permit # MO-_____ — Reason: _____

1.1 Is the appropriate fee included with the application? (See instructions for appropriate fee) ☑ YES ☐ NO

2. FACILITY

NAME		TELEPHONE WITH AREA CODE	
The Boeing Company (Tract 5)		(314) 777-9172	
		FAX (314) 234-7177	
ADDRESS (PHYSICAL)	CITY	STATE	ZIP CODE
2600 Third Street	St. Charles	Mo	63301

3. OWNER

NAME	E-MAIL ADDRESS	TELEPHONE WITH AREA CODE	
The Boeing Company	gary.s.buford@boein	(314) 777-9172	
		FAX (314) 234-7177	
ADDRESS (MAILING)	CITY	STATE	ZIP CODE
PO Box 516, Mailcode S111-2491	St. Louis	Mo.	63166-0516

3.1 Request review of draft permit prior to public notice? ☑ YES ☐ NO

4. CONTINUING AUTHORITY

NAME		TELEPHONE WITH AREA CODE	
The Boeing Company		(314) 777-9172	
		FAX (314) 234-7177	
ADDRESS (MAILING)	CITY	STATE	ZIP CODE
PO Box 516, Mailcode S111-2491	St. Louis	Mo.	63166-0516

5. OPERATOR

NAME	CERTIFICATE NUMBER	TELEPHONE WITH AREA CODE	
N/A			
		FAX	
ADDRESS (MAILING)	CITY	STATE	ZIP CODE

6. FACILITY CONTACT

NAME	TITLE	TELEPHONE WITH AREA CODE
Gary Buford	Environmental Engineer/Scientist	(314) 777-9172
		FAX (314) 234-7177

7. ADDITIONAL FACILITY INFORMATION

7.1 Legal Description of Outfalls. (Attach additional sheets if necessary.)

001 ____¼ ____¼ Sec ____ T ____ R ____ ____ County
UTM Coordinates Easting (X): _____ Northing (Y): _____
For Universal Transverse Mercator (UTM), Zone 15 North referenced to North American Datum 1983 (NAD83)

002 ____¼ ____¼ Sec ____ T ____ R ____ ____ County
UTM Coordinates Easting (X): _____ Northing (Y): _____

003 ____¼ ____¼ Sec ____ T ____ R ____ ____ County
UTM Coordinates Easting (X): _____ Northing (Y): _____

004 ____¼ ____¼ Sec ____ T ____ R ____ ____ County
UTM Coordinates Easting (X): _____ Northing (Y): _____

7.2 Primary Standard Industrial Classification (SIC) and Facility North American Industrial Classification System (NAICS) Codes.

001 – SIC 3721 and NAICS _____ 002 – SIC _____ and NAICS _____
003 – SIC _____ and NAICS _____ 004 – SIC _____ and NAICS _____

8. ADDITIONAL FORMS AND MAPS NECESSARY TO COMPLETE THIS APPLICATION (Complete all forms that are applicable.)

A.	Is your facility a manufacturing, commercial, mining or silviculture waste treatment facility? If yes, complete Form C (unless storm water only, then complete U.S. Environmental Protection Agency Form 2F per Item C below).	YES ☑	NO ☐
B.	Is your facility considered a "Primary Industry" under EPA guidelines: If yes, complete Forms C and D.	YES ■	NO ☐
C.	Is application for storm water discharges only? If yes, complete EPA Form 2F.	YES ☑	NO ☐
D.	Attach a map showing all outfalls and the receiving stream at 1" = 2,000' scale.		
E.	Is wastewater land applied? If yes, complete Form I.	YES ☐	NO ☑
F.	Is sludge, biosolids, ash or residuals generated, treated, stored or land applied? If yes, complete Form R.	YES ☐	NO ☑

9. DOWNSTREAM LANDOWNER(S) Attach additional sheets as necessary. See Instructions. (PLEASE SHOW LOCATION ON MAP. SEE 8.D ABOVE).

NAME			
City of St. Charles			
ADDRESS	**CITY**	**STATE**	**ZIP CODE**
200 North Second Street	St. Charles	Mo.	63301-2891

10. I certify that I am familiar with the information contained in the application, that to the best of my knowledge and belief such information is true, complete and accurate, and if granted this permit, I agree to abide by the Missouri Clean Water Law and all rules, regulations, orders and decisions, subject to any legitimate appeal available to applicant under the Missouri Clean Water Law to the Missouri Clean Water Commission.

NAME AND OFFICIAL TITLE (TYPE OR PRINT)	TELEPHONE WITH AREA CODE
Gary Buford / Environmental Engineer / Scientist	(314) 777-9172
SIGNATURE	**DATE SIGNED**
Gary Buford	2/18/13

MO 780-1479 (01-09)

BEFORE MAILING, PLEASE ENSURE ALL SECTIONS ARE COMPLETED AND ADDITIONAL FORMS, IF APPLICABLE, ARE INCLUDED.

Submittal of an incomplete application may result in the application being returned.

HAVE YOU INCLUDED:

- ☐ Appropriate Fees?
- ☐ Map at 1" = 2000' scale?
- ☐ Signature?
- ☐ Form C, if applicable?
- ☐ Form D, if applicable?
- ☐ Form 2F, if applicable?
- ☐ Form I (Irrigation), if applicable?
- ☐ Form R (Sludge), if applicable?

MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM, WATER POLLUTION BRANCH

FORM C – APPLICATION FOR DISCHARGE PERMIT – MANUFACTURING, COMMERCIAL, MINING, SILVICULTURE OPERATIONS, PROCESS & STORM WATER

FOR AGENCY USE ONLY	
CHECK NO.	
DATE RECEIVED	FEE SUBMITTED

TE: DO NOT ATTEMPT TO COMPLETE THIS FORM BEFORE READING THE ACCOMPANYING INSTRUCTIONS

1.00 NAME OF FACILITY

The Boeing Company - St. Charles

1.10 THIS FACILITY IS NOW IN OPERATION UNDER MISSOURI OPERATING PERMIT NUMBER

MO-0135208

1.20 THIS IS A NEW FACILITY AND WAS CONSTRUCTED UNDER MISSOURI CONSTRUCTION PERMIT NUMBER (COMPLETE ONLY IF THIS FACILITY DOES NOT HAVE AN OPERATING PERMIT).

2.00 LIST THE STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODES APPLICABLE TO YOUR FACILITY (FOUR DIGIT CODE)

A. FIRST 3721 B. SECOND _____

C. THIRD _____ D. FOURTH _____

2.10 FOR EACH OUTFALL GIVE THE LEGAL DESCRIPTION.

OUTFALL NUMBER (LIST) _____ 1/4 _____ 1/4 SEC_____ T_____ R_____ _____ COUNTY

2.20 FOR EACH OUTFALL LIST THE NAME OF THE RECEIVING WATER

OUTFALL NUMBER (LIST)	RECEIVING WATER
001, 002, 003, 004, 005	Missouri River

2.30 BRIEFLY DESCRIBE THE NATURE OF YOUR BUSINESS

Military contractor for the manufacturing and assembly of combat aircraft and missile parts.

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent and treatment units labeled to correspond to the more detailed descriptions in item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, public sewers and outfalls. If a water balance cannot by determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of

1. All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water and storm water runoff.
2. The average flow contributed by each operation.
3. The treatment received by the wastewater.

Continue on additional sheets if necessary.

1. OUTFALL NO.	2. OPERATION(S) CONTRIBUTING FLOW		3. TREATMENT	
(LIST)	A. OPERATION (LIST)	B. AVERAGE FLOW (INCLUDE UNITS) (MAXIMUM FLOW)	A. DESCRIPTION	B. LIST CODES FROM TABLE A
001	Storm Water only	N/A	N/A	N/A
002	Storm Water only	N/A	N/A	N/A
003	Storm Water only	N/A	N/A	N/A
004	Storm Water only	N/A	N/A	N/A
005	Storm Water only	N/A	N/A	N/A

2.40 CONTINUED

C. EXCEPT FOR STORM RUNOFF, LEAKS OR SPILLS, ARE ANY OF THE DISCHARGES DESCRIBED IN ITEMS A OR B INTERMITTENT OR SEASONAL?

☐ **YES** *(COMPLETE THE FOLLOWING TABLE)* ☑ **NO** *(GO TO SECTION 2.50)*

1. OUTFALL NUMBER *(list)*	2. OPERATION(S) CONTRIBUTING FLOW *(list)*	3. FREQUENCY		4. FLOW				C. DURATION *(in days)*
				A. FLOW RATE *(in mgd)*		B. TOTAL VOLUME (specify with units)		
		A. DAYS PER WEEK *(specify average)*	B. MONTHS PER YEAR *(specify average)*	1. LONG TERM AVERAGE	2. MAXIMUM DAILY	4. LONG TERM DAILY	3. MAXIMUM AVERAGE	

2.50 MAXIMUM PRODUCTION

A. DOES AN EFFLUENT GUIDELINE LIMITATION PROMULGATED BY EPA UNDER SECTION 304 OF THE CLEAN WATER ACT APPLY TO YOUR FACILITY?

☐ **YES** *(COMPLETE B.)* ☑ **NO** *(GO TO SECTION 2.60)*

B. ARE THE LIMITATIONS IN THE APPLICABLE EFFLUENT GUIDELINES EXPRESSED IN TERMS OF PRODUCTION (OF OTHER MEASURE OF OPERATION)?

☐ **YES** *(COMPLETE c.)* ☑ **NO** *(GO TO SECTION 2.60)*

C. IF YOU ANSWERED "YES" TO B. LIST THE QUANTITY THAT REPRESENTS AN ACTUAL MEASUREMENT OF YOUR MAXIMUM LEVEL OF PRODUCTION, EXPRESSED IN THE TERMS AND UNITS USED IN THE APPLICABLE EFFLUENT GUIDELINE AND INDICATE THE AFFECTED OUTFALLS.

1. MAXIMUM QUANTITY			2. AFFECTED OUTFALLS *(list outfall numbers)*
A. QUANTITY PER DAY	B. UNITS OF MEASURE	C. OPERATION, PRODUCT, MATERIAL, ETC. *(specify)*	

2.60 IMPROVEMENTS

A. ARE YOU NOW REQUIRED BY ANY FEDERAL, STATE OR LOCAL AUTHORITY TO MEET, ANY IMPLEMENTATION SCHEDULE FOR THE CONSTRUCTION, UPGRADING OR OPERATION OF WASTEWATER TREATMENT EQUIPMENT OR PRACTICES OR ANY OTHER ENVIRONMENTAL PROGRAMS THAT MAY AFFECT THE DISCHARGES DESCRIBED IN THIS APPLICATION? THIS INCLUDES, BUT IS NOT LIMITED TO, PERMIT CONDITIONS, ADMINISTRATIVE OR ENFORCEMENT ORDERS, ENFORCEMENT COMPLIANCE SCHEDULE LETTERS, STIPULATIONS, COURT ORDERS AND GRANT OR LOAN CONDITIONS.

☐ **YES** *(COMPLETE THE FOLLOWING TABLE)* ☑ **NO** *(GO TO 3.00)*

1. IDENTIFICATION OF CONDITION AGREEMENT, ETC.	2. AFFECTED OUTFALLS		3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE	
				A. REQUIRED	B. PROJECTED

B. OPTIONAL: YOU MAY ATTACH ADDITIONAL SHEETS DESCRIBING ANY ADDITIONAL WATER POLLUTION CONTROL PROGRAMS *(OR OTHER ENVIRONMENTAL PROJECTS THAT MAY AFFECT YOUR DISCHARGES)* YOU NOW HAVE UNDER WAY OR ARE YOU PLANNING. INDICATE WHETHER EACH PROGRAM IS NOW UNDER WAY OR PLANNED, AND INDICATE YOUR ACTUAL OR PLANNED SCHEDULES FOR CONSTRUCTION.

☐ **MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED.**

3.00 INTAKE AND EFFLUENT CHARACTERISTICS

A. & B. SEE INSTRUCTIONS BEFORE PROCEEDING – COMPLETE ONE TABLE FOR EACH OUTFALL – ANNOTATE THE OUTFALL NUMBER IN THE SPACE PROVIDED.
NOTE: TABLE 1 IS INCLUDED ON SEPARATE SHEETS NUMBERED FROM PAGE 6 TO PAGE 7.

C. USE THE SPACE BELOW TO LIST ANY OF THE POLLUTANTS LISTED IN PART B OF THE INSTRUCTIONS, WHICH YOU KNOW OR HAVE REASON TO BELIEVE IS DISCHARGED OR MAY BE DISCHARGED FROM ANY OUTFALL. FOR EVERY POLLUTANT YOU LIST, BRIEFLY DESCRIBE THE REASONS YOU BELIEVE IT TO BE PRESENT AND REPORT ANY ANALYTICAL DATA IN YOUR POSSESSION.

1. POLLUTANT	2. SOURCE	1. POLLUTANT	2. SOURCE
Chlorine	Cooling Tower Overflow		
Fecal Coliform	Wildlife population		
Flouride	Cooling Tower Overflow		
Nitrate-Nitrite	Lawn Fertilizer		
Oil and Grease	Vehicle parking		
Aluminum	Raw Material		
Iron	Raw Material		
Phosphorus	Lawn Fertilizer		
Titanium	Raw Material		

3.10 BIOLOGICAL TOXICITY TESTING DATA

DO YOU HAVE ANY KNOWLEDGE OR REASON TO BELIEVE THAT ANY BIOLOGICAL TEST FOR ACUTE OR CHRONIC TOXICITY HAS BEEN MADE ON ANY OF YOUR DISCHARGES OR ON RECEIVING WATER IN RELATION TO YOUR DISCHARGE WITHIN THE LAST THREE YEARS?

☑ YES (IDENTIFY THE TEST(S) AND DESCRIBE THEIR PURPOSES BELOW.) ☐ NO (GO TO 3.20)

Whole Effluent Toxicity Test performed at Outfall #001. Permit requirement.

3.20 CONTRACT ANALYSIS INFORMATION

WERE ANY OF THE ANALYSES REPORTED PERFORMED BY A CONTRACT LABORATORY OR CONSULTING FIRM?

☑ **YES** *(LIST THE NAME, ADDRESS AND TELEPHONE NUMBER OF AND POLLUTANTS ANALYZED BY EACH SUCH LABORATORY OR FIRM BELOW.)* ☐ **NO** *(GO TO 3.30)*

A. NAME	B. ADDRESS	C. TELEPHONE *(area code and number)*	D. POLLUTANTS ANALYZED *(list)*
AECOM	4303 West LaPorte Avenue, Fort Collins, Colorado, 80521-2154	970-416-0916	WET

3.30 CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the information is true, accurate and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

NAME AND OFFICIAL TITLE (TYPE OR PRINT)	TELEPHONE NUMBER WITH AREA CODE
Mike Dwyer, Director \ Environment, Health, and Safety	(314) 777-9238
SIGNATURE (SEE INSTRUCTIONS)	DATE SIGNED
	2/18/13

PLEASE PRINT OR TYPE. You may report some or all of this information on separate sheet instead of completing these pages.
(Use the same format)
SEE INSTRUCTIONS

FORM C
TABLE 1 FOR 3.00 ITEM A AND B

INTAKE AND EFFLUENT CHARACTERISTICS

OUTFALL NO. 001

PART A – You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT							3. UNITS *(specify if blank)*		4. INTAKE *(optional)*		
	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE *(if available)*		C. LONG TERM AVRG. VALUE *(if available)*		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
A. Biochemical Oxygen Demand (BOD)	11	118	n/a	n/a	n/a	n/a	1	mg/l.	lb			
B. Chemical Oxygen Demand (COD)	56	602	n/a	n/a	51.5	16	4	mg/l.	lb			
C. Total organic Carbon (TOC)	12.5	16.1	n/a	n/a	n/a	n/a	1	mg/l	lb			
D. Total Suspended Solids (TSS)	22	237	n/a	n/a	14.5	4.6	4	mg/l.	lb			
E. Ammonia *(as N)*	0.12	1.28	n/a	n/a	n/a	n/a	1	mg/l.	lb			
F. Flow	VALUE 1.29		VALUE n/a		VALUE 0.038		4	mgd.		VALUE		
G. Temperature *(winter)*	VALUE 11		VALUE n/a		VALUE 13		2	°C		VALUE		
H. Temperature *(summer)*	VALUE 26		VALUE n/a		VALUE 21		2	°C		VALUE		
I. pH	MINIMUM 7.0	MAXIMUM 8.7	MINIMUM	MAXIMUM			4	STANDARD UNITS				

PART B – Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2-a for any pollutant, you must provide the results for at least one analysis for that pollutant. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	A. BELIEVED PRESENT	B. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE *(if available)*		C. LONG TERM AVRG. VALUE *(if available)*		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
A. Bromide (24959-67-9)		x												
B. Chlorine Total Residual	x		<0.05	<0.54	n/a	n/a	n/a	n/a	1	mg/l	lb			
C. Color		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
D. Fecal Coliform	x		50	538	n/a	n/a	n/a	n/a	1	CFU/100ml.	n/a			
E. Fluoride (16984-48-8)	x		<0.1	1.08	n/a	n/a	n/a	n/a	1	mg/l.	lb			
F. Nitrate—Nitrate *(as N)*	x		0.487	5.24	n/a	n/a	n/a	n/a	1	mg/l.	lb			

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	A. BELIEVED PRESENT	B. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (if available)		C. LONG TERM AVRG. VALUE (if available)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
G. Nitrogen Total Organic *(as N)*	x		1.58	17	n/a	n/a	n/a	n/a	1	mg/l	lb			
H. Oil and Grease	x		<6	<64.5	n/a	n/a	<6	1.9	4	mg/l	lb			
I. Phosphorus *(as P)* Total (7723-14-0)	x		0.368											
J. Sulfate *(as SO^4)* (14808-79-8)		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
K. Sulfide *(as S)*		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
L. Sulfite (as SO^3) (14265-45-3)		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
M. Surfactants		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
N. Aluminum Total (7429-90-5)	x		2.04	21.9	n/a	n/a	n/a	n/a	1	mg/l	lb			
O. Barium Total (7440-39-3)		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
P. Boron Total (7440-42-8)		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
Q. Cobalt Total (7440-48-4)		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
R. Iron Total (7439-89-6)	x		1.88	20.2	n/a	n/a	n/a	n/a	1	mg/l.	lb			
S. Magnesium Total (7439-95-4)		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
T. Molybdenum Total (7439-98-7)		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
U. Manganese Total (7439-96-5)		x	n/a	n//a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
V. Tin Total (7440-31-5)		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
W. Titanium Total (7440-32-6)	x		0.0548	0.59	n/a	n/a	n/a	n/a	1	mg/l.	lb			

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	A. BELIEVED PRESENT	B. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE *(if available)*		C. LONG TERM AVRG. VALUE *(if available)*		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, AND TOTAL PHENOLS														
1M. Antimony, Total (7440-36-9)		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
2M. Beryllium, Total (7440-41-7)		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
3M. Magnesium, Total (7439-95-4)		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
4M. Molybdenum, Total (7439-98-7)		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
5M. Tin, Total (7440-31-5)		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
6M. Titanium, Total (7440-32-6)	x		0.0548	0.59	n/a	n/a	n/a	n/a	1	mg/l	lb			
7M. Mercury, Total (7439-97-6)		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
8M. Selenium, Total (7782-49-2)		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
9M. Thallium, Total (7440-28-0)		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
10M. Phenols, Total		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
RADIOACTIVITY														
(1) Alpha Total		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
(2) Beta Total		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
(3) Radium Total		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			
(4) Radium 226 Total		x	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a			

The Boeing Company
P.O. Box 516
St. Louis, MO 63166-0516
(314) 232-0232

111-23 NPDES
MO-0135208

RECEIVED

FEB 22 2013

WATER PROTECTION PROGRAM

February 18, 2013

Mr. Chris Wieberg
Industrial Permits Unit
Water Protection Program
Missouri Department of Natural Resources
PO Box 176
Jefferson City, MO. 65102

Reference: NPDES Permit Number MO-0135208

Enclosures:

(1) Form A - Application for Construction or Operating Permit
(2) Form C - Application for Discharge Permit – Manufacturing, Commercial, Mining and Silviculture Operations
(3) Form D - Application for Discharge Permit – Primary Industries
(4) Boeing-St. Charles maps
(5) Boeing-St. Charles Outfall Location / Description

Dear Mr. Wieberg:

Please, find enclosed discharge permit applications for the Boeing Company – St. Charles. These applications are being submitted for Outfalls 001–005, located in St. Charles County.

If you should have question relating to information found within the submitted permit applications, please contact me at (314) 777-9172.

Sincerely,

Gary Buford
Environmental and Hazardous Material Services
Dept. 107E, Bldg. 111, Mailcode S111-2491

Boeing – St. Charles (Tract 5)

Outfall Location/Description

Outfall #001 Legal Description: SE ¼ , NE ¼ , Sec. 20, T47N, R5E, St. Charles County
Outfall #001 Latitude/Longitude: +3848270/-09028020
Receiving Stream: Unnamed tributary to the Missouri River (U)
First Classified Stream and ID: Missouri River (P) (01640) (303d)
USGS Basin & Sub0watershed No.: (010300200-170001)

Outfall #002 Legal Description: SE ¼ , NE ¼ , Sec. 20, T47N, R5E, St. Charles County
Outfall #002 Latitude/Longitude: +3848270/-09028050
Receiving Stream: Unnamed tributary to the Missouri River (U)
First Classified Stream and ID: Missouri River (P) (01640) (303d)
USGS Basin & Sub0watershed No.: (010300200-170001)

Outfall #003 Legal Description: SE ¼ , NE ¼ , Sec. 20, T47N, R5E, St. Charles County
Outfall #003 Latitude/Longitude: +3848170/-09028120
Receiving Stream: Unnamed tributary to the Missouri River (U)
First Classified Stream and ID: Missouri River (P) (01640) (303d)
USGS Basin & Sub0watershed No.: (010300200-170001)

Outfall #004 Legal Description: SE ¼ , NE ¼ , Sec. 20, T47N, R5E, St. Charles County
Outfall #004 Latitude/Longitude: +3848110/-09028170
Receiving Stream: Unnamed tributary to the Missouri River (U)
First Classified Stream and ID: Missouri River (P) (01640) (303d)
USGS Basin & Sub0watershed No.: (010300200-170001)

Outfall #005 Legal Description: SE ¼ , NE ¼ , Sec. 20, T47N, R5E, St. Charles County
Outfall #001 Latitude/Longitude: +3848420/-09028260
Receiving Stream: Unnamed tributary to the Missouri River (U)
First Classified Stream and ID: Missouri River (P) (01640) (303d)
USGS Basin & Sub0watershed No.: (010300200-170001)

MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM, WATER POLLUTION BRANCH

FORM D – APPLICATION FOR DISCHARGE PERMIT PRIMARY INDUSTRIES

FOR AGENCY USE ONLY	
CHECK NO.	
DATE RECEIVED	FEE SUBMITTED

NOTE: DO NOT ATTEMPT TO COMPLETE THIS FORM BEFORE READING THE ACCOMPANYING INSTRUCTIONS

1.00 NAME OF FACILITY

The Boeing Company - St. Charles

1.10 THIS FACILITY IS NOW IN OPERATION UNDER MISSOURI OPERATING PERMIT NUMBER

MO - 135208

This form is to be filled out in addition to forms A and C "Application for Discharge Permit" for the Industries listed below.

INDUSTRY CATEGORY

Adhesives and sealants
Aluminum forming
Auto and other laundries
Battery manufacturing
Coal mining
Coil coating
Copper forming
Electric and electronic compounds
Electroplating
Explosives manufacturing
Foundries
Gum and wood chemicals
Inorganic chemicals manufacturing
Iron and steel manufacturing
Leather tanning and finishing
Landfill
Mechanical products manufacturing
Nonferrous metals manufacturing
Ore mining
Organic chemicals manufacturing
Paint and ink formulation
Pesticides
Petroleum refining
Pharmaceutical preparations
Photographic equipment and supplies
Plastic and synthetic materials manufacturing
Plastic processing
Porcelain enameling
Printing and publishing
Pulp and paperboard mills
Rubber processing
Soap and detergent manufacturing
Steam electric power plants
Textile mills
Timber products processing

APPLICATION FOR DISCHARGE PERMIT
FORM D – PRIMARY INDUSTRIES

TABLE II	
NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	001

1.30 If you are a primary industry and this outfall contains process wastewater, refer to Table A in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-A for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. Mark "X" in column 2-B for each pollutant you know or have reason to believe is present. Mark "X" in column 2-C for each pollutant you believe to be absent. If you mark either columns 2-A or 2-B for any pollutant, you must provide the results of at least one analysis for that pollutant. Note that there are seven pages to this part, please review each carefully. Complete one table (*all seven pages*) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TEST-ING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-9)			✓												
2M. Beryllium, Total (7440-41-7)			✓												
3M. Magnesium Total (7439-95-4)			✓												
4M. Molybdenum Total (7439-98-7)			✓												
5M. Tin Total (7440-31-5)			✓												
6M. Titanium Total (7440-32-6)		✓		0.0548	0.59	n/a	n/a	n/a	n/a	1	mg/l	lb			
7M. Mercury, Total (7439-97-6)			✓												
8M. Selenium, Total (7782-49-2)			✓												
9M. Thallium, Total (7440-28-0)			✓												
10M. Phenols, Total		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
DIOXIN															
2,3,7,8 – Tetra – chlorodibenzo-P-Dioxin (1764-01-6)			✓	**DESCRIBE RESULTS**											

CONTINUED FROM PAGE 3

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCENTRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – VOLATILE COMPOUNDS															
1V. Acrolein (107-02-8)			✓												
2V. Acrylonitrile (107-13-1)			✓												
3V. Benzene (71-43-2)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
4V. Bis (*Chloromethyl*) Ether (542-88-1)			✓												
5V. Bromoform (75-25-2)			✓												
6V. Carbon Tetrachloride (56-23-5)			✓												
7V. Chlorobenzene (108-90-7)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
8V. Chlorodibromomethane (124-48-1)			✓												
9V. Chloroethane (75-00-3)			✓												
10V. 2-Chloroethylvinyl Ether (110-75-8)			✓												
11V. Chloroform (67-66-3)			✓												
12V. Dichlorobromomethane (75-27-4)			✓												
13V. Dichloro-difluoromethane (75-71-8)			✓												
14V. 1,1 – Dichloroethane (75-34-3)			✓												
15V. 1,2 – Dichloroethane (107-06-2)			✓												
16V. 1,1 – Dichloroethylene (75-35-4)			✓												
17V. 1,2 – Dichloropropane (78-87-5)			✓												
18V. 1,2 – Dichloropropylene (542-75-6)			✓												
19V. Ethylbenzene (100-41-4)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
20V. Methyl Bromide (74-83-9)			✓												
21V. Methyl Chloride (74-87-3)			✓												

CONTINUE ON PAGE 4

CONTINUED FROM THE FRONT

NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	001

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING RE-QUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC.MS FRACTION – VOLATILE COMPOUNDS *(continued)*															
22V. Methylene Chloride (75-09-2)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
23V. 1,1,2,2 – Tetra-chloroethane (79-34-5)			✓												
24V. Tetrachloroethylene (127-18-4)			✓												
25V. Toluene (108-88-3)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
26V. 1,2 – Trans Dichloroethylene (156-60-5)			✓												
27V. 1,1,1 – Tri – chloroethane (71-55-6)			✓												
28V. 1,1,2 – Tri-chloroethane (79-00-5)			✓												
29V. Trichloro – ethylene (79-01-6)			✓												
30V. Trichloro – fluoromethane (75-69-4)			✓												
31V. Vinyl Chloride (75-01-4)			✓												
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2 – Chlorophenol (95-57-8)			✓												
2A. 2,4 – Dichloro – phenol (120-83-2)			✓												
3A. 2,4 – Dimethyl – phenol (105-67-9)			✓												
4A. 4,6 – Dinitro - O-Cresol (534-52-1)			✓												
5A. 2,4 – Dinitro – phenol (51-28-5)			✓												
6A. 2-Nitrophenol (88-75-5)			✓												
7A. 4-Nitrophenol (100-02-7)			✓												
8A. P – Chloro – M Cresol (59-50-7)			✓												
9A. Pentachloro – phenol (87-86-5_			✓												
10A. Phenol (108-952)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
11A. 2,4,6 – Trichloro-phenol (88-06-2)			✓												

CONTINUE ON PAGE 5

CONTINUED FROM THE PAGE 7

NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	001

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – PESTICISES *(continued)*															
17P. Heptachlor Epoxide (1024-57-3)			✓												
18P. PCB-1242 (53469-21-9)			✓												
19P. PBC-1254 (11097-69-1)			✓												
20P. PCB-1221 (11104-28-2)			✓												
21P. PCB-1232 (11141-16-5)			✓												
22P. PCB-1248 (12672-29-6)			✓												
23P. PCB-1260 (11096-82-5)			✓												
24P. PCB-1016 (12674-11-2)			✓												
25P. Toxaphene (8001-35-2)			✓												
J. RADIOACTIVITY															
(1) Alpha Total			✓												
(2) Beta Total			✓												
(3) Radium Total			✓												
(4) Radium 226 Total			✓												

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS *(continued)*															
42B. N-Nitroso N-Propylamine (621-64-7)			✓												
43B. N-Nitro-sodiphenylamine (86-30-6)			✓												
44B. Phenanthrene (85-01-8)			✓												
45B. Pyrene (129-00-0)			✓												
46B. 1,2,4-Tri chlorobenzene (120-82-1)			✓												
GC/MS FRACTION - PESTICIDES															
1P. Aldrin (309-00-2)			✓												
2P. α-BHC (319-84-6)			✓												
3P. β-BHC (319-84-6)			✓												
4P. γ-BHC (58-89-9)			✓												
5P. δ-BHC (319-86-8)			✓												
6P. Chlordane (57-74-9)			✓												
7P. 4,4'-DDT (50-29-3)			✓												
8P. 4,4'-DDE (72-55-9)			✓												
9P. 4,4'-DDD (72-54-8)			✓												
10P. Dieldrin (60-57-1)			✓												
11P. α-Endosulfan (115-29-7)			✓												
12P. β-Endosultan (115-29-7)			✓												
13P. Endosulfan Sulfate (1031-07-8)			✓												
14P. Endrin (72-20-8)			✓												
15P. Endrin Aldehyde (7421-93-4)			✓												
16P. Heptachlor (76-44-8)			✓												

CONTINUED ON PAGE 8

CONTINUED FROM THE PAGE 5

NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	001

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS *(continued)*															
22B. 1, 4-Dichlorobenzene (106-46-7)			✓												
23B. 3, 3'-Dichlorobenzidine (91-94-1)			✓												
24B. Diethyl Phthalate (84-66-2)			✓												
25B. Dimethyl Phthalate (131-11-3)			✓												
26B. Di-N-butyl Phthalate (84-74-2)			✓												
27B. 2,4-Dinitrotoluene (121-14-2)			✓												
28B. 2,6-Dinitrotoluene (606-20-2)			✓												
29B. Di-N-Octyl Phthalate (117-84-0)			✓												
30B. 1,2-Diphenylhydrazine (*as Azobenzene*) (122-66-7)			✓												
31B. Fluoranthene (206-44-0)			✓												
32B. Fluorene (86-73-7)			✓												
33B. Hexachlorobenzene (87-68-3)			✓												
34B. Hexachlorobutadiene (87-68-3)			✓												
35B. Hexachloro-cyclopentadiene (77-47-4)			✓												
36B. Hexachloroethane (67-72-1)			✓												
37B. Indeno (1,2,3-c-d) Pyrene (193-39-5)			✓												
38B. Isophorone (78-59-1)			✓												
39B. Naphthalene (91-20-3)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
40B. Nitrobenzene (98-95-3)			✓												
41B. N-Nitro-sodimethylamine (62-75-9)			✓												

CONTINUE ON PAGE 7

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)			✓												
2B. Acenaphtylene (208-96-8)			✓												
3B. Anthracene (120-12-7)			✓												
4B. Benzidine (92-87-5)			✓												
5B. Benzo (a) Anthracene (56-55-3)			✓												
6B. Benzo (a) Pyrene (50-32-8)			✓												
7B. 3,4 – Benzofluoranthene (205-99-2)			✓												
8B. Benzo (ghi) Perylene (191-24-2)			✓												
9B. Benzo (k) Fluoranthene (207-08-9)			✓												
10B. Bis (2-Chloroethoxy) Methane (111-91-1)			✓												
11B. Bis (2-Chloroethyl) Ether (111-44-4)			✓												
12B. Bis (2-Chloroisopropyl) Ether (39638-32-9)			✓												
13B. Bis (2-Ethylhexyl) Phthalate (117-81-7)			✓												
14B. 4-Bromophenyl Phenyl Ether (101-55-3)			✓												
15B. Butyl Benzyl Phthalate (85-68-7)			✓												
16B. 2-Chloronaphthalene (91-58-7)			✓												
17B. 4-Chlorophenyl Phenyl Ether (7005-72-3)			✓												
18B. Chrysene (218-01-9)			✓												
19B. Dibenzo (a.h) Anthracene (53-70-3)			✓												
20B. 1,2 – Dichlorobenzene (95-50-1)			✓												
21B. 1,3 – Dichlorobenzene (541-73-1)			✓												

CONTINUE ON PAGE 6

2.00 POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

A. IS ANY POLLUTANT LISTED IN ITEM 1.30 A SUBSTANCE OR A COMPONENT OF A SUBSTANCE WHICH YOU DO OR EXPECT THAT YOU WILL OVER THE NEXT FIVE YEARS USE OR MANUFACTURE AS AN INTERMEDIATE OR FINAL PRODUCT OR BYPRODUCT?

☐ **YES** *(LIST ALL SUCH POLLUTANTS BELOW)* ■ **NO** *(GO TO B)*

B. ARE YOUR OPERATIONS SUCH THAT YOUR RAW MATERIALS, PROCESSES OR PRODUCTS CAN REASONABLE BE EXPECTED TO VARY SO THAT YOUR DISCHARGES OF POLLUTANTS MAY DURING THE NEXT FIVE YEARS EXCEED TWO TIMES THE MAXIMUM VALUES REPORTED IN ITEM 1.30?

☐ **YES** *(COMPLETE C BELOW)* ■ **NO** *(GO TO SECTION 3.00)*

C. IF YOU ANSWERED "YES" TO ITEM B, EXPLAIN BELOW AND DESCRIBE IN DETAIL THE SOURCES AND EXPECTED LEVELS OF SUCH POLLUTANTS THAT YOU ANTICIPATE WILL BE DISCHARGED FROM EACH OUTFALL OVER THE NEXT FIVE YEARS, TO THE BEST OF YOUR ABILIITY AT THIS TIME. CONTINUE ON ADDITIONAL SHEETS IF YOU NEED MORE SPACE.

3.00 CONTRACT ANALYSIS INFORMATION

WERE ANY OF THE ANALYSES REPORTED IN 1.30 PERFORMED BY A CONTRACT LABORATORY OR CONSULTING FIRM?

■ **YES** *(LIST THE NAME, ADDRESS, AND TELEPHONE NUMBER OF, AND ANALYZED BY, EACH SUCH LABORATORY OR FIRM BELOW)*
☐ **NO** *(GO TO SECTION 4.00)*

A. NAME	B. ADDRESS	C. TELEPHONE NUMBER WITH AREA CODE	D. POLLUTANTS ANALYZED *(list)*
Teklab, Inc.	5445 Horseshoe Lake Road,	(618) 344-1005	All Listed
	Collinsville, ILL. 62234		

4.00 CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the 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.

NAME AND OFFICIAL TITLE (TYPE OR PRINT)	TELEPHONE NUMBER WITH AREA CODE
Mike Dwyer, Director Environment, Health, and Safety	(314) 777-9238
SIGNATURE	DATE SIGNED
	2/4/13

INSTRUCTIONS FOR FILLING OUT APPLICATION FOR DISCHARGE PERMIT FORM D – PRIMARY INDUSTRIES

All blanks must be filled in when the applications is submitted to the appropriate Regional Office (see map). The form **must be signed** as indicated.

This application is to be completed only for wastewater facilities from which there is a discharge. Include any facility that it is possible to discharge from even if normally there is no discharge. If this form is not adequate for you to describe your existing operation, the sufficient information should be attached so that an evaluation of the discharge can be made.

1.00 Name of Facility – By what title or name is this facility known locally?

1.10 and 1.20 Self-explanatory.

1.30 GENERAL INSTRUCTIONS. For some pollutants, you may be required to mark "X" in the "Testing Required" column (column 2-A) and test (sample and analyze) and report the levels of the pollutants in your discharge whether or not you expect them to be present in your discharge. For all others, you must mark "X" in either the "Believe Present" column or the "Believe Absent" column (column 2-B or 2-C) based on your best estimate, and test for those which you believe to be present.

Base your determination that a pollutant is present in or absent from your discharge on your knowledge of your raw materials, maintenance chemicals, intermediate and final products and byproducts and any previous analyses known to you of your effluent or of any similar effluent. (For example, if you manufacture pesticides, you should expect those pesticides to be present in contaminated storm water runoff). If you would expect a pollutant to be present solely as a result of its presence in your intake water, you must mark "Believe Present" but you are not required to analyze for that pollutant. Instead, mark an "X" in the "Intake" column.

REPORTING. All levels must be reported as concentration and as total mass. You may report some or all of the required data by attaching separate sheets of paper instead of filling out Table II if the separate sheets contain all the required information in a format which is consistent with Table II in spacing and in identification of pollutants and columns. (For example, the data system used in your GC/MS analysis may be able to print data in the proper format). Use the following abbreviations in the columns headed "Units". (column 4)

CONCENTRATION M

ppm.....parts per million
mg/1.....milligrams per liter
ppb.....parts per billion
µg/1.....micrograms per liter

ASS

lbs.....pounds
ton.....tons (English tons)
mg.....milligrams
g.....grams
kg.....kilograms
T.....tonnes (metric tons)

If you measure only one daily value, complete only the "Maximum Daily Values" columns and insert "1" into the "Number of Analyses" columns (columns 3-A and 3-D). Missouri Department of Natural Resources may require you to conduct additional analyses to further characterize your discharges.

For composite samples, the daily value is the total mass or average concentration found in a composite sample taken over the operating hours of the facility during a 24 hour period; for grab samples, the daily value is the arithmetic or flow-weighted total mass or average concentration found in a series of at least four grab samples taken over the operating hours of the facility during a 24 hour period.

If you measure more than one daily value for a pollutant, determine the average of all values within the last year and report the concentration and mass under the "Long Term Average Values" column (column 3-C), and the total number of daily values under the "Number of Analyses" columns (column 3-D). Also, determine the average of all daily values taken during each calendar month, and report the highest average under the "Maximum 30 Day Value" column (column 3-B)

MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM, WATER POLLUTION BRANCH

FORM C – APPLICATION FOR DISCHARGE PERMIT – MANUFACTURING, COMMERCIAL, MINING, SILVICULTURE OPERATIONS, PROCESS & STORM WATER

FOR AGENCY USE ONLY	
CHECK NO.	
DATE RECEIVED	FEE SUBMITTED

TE: DO NOT ATTEMPT TO COMPLETE THIS FORM BEFORE READING THE ACCOMPANYING INSTRUCTIONS

1.00 NAME OF FACILITY

The Boeing Company - St. Charles

1.10 THIS FACILITY IS NOW IN OPERATION UNDER MISSOURI OPERATING PERMIT NUMBER

MO-0135208

1.20 THIS IS A NEW FACILITY AND WAS CONSTRUCTED UNDER MISSOURI CONSTRUCTION PERMIT NUMBER (COMPLETE ONLY IF THIS FACILITY DOES NOT HAVE AN OPERATING PERMIT).

2.00 LIST THE STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODES APPLICABLE TO YOUR FACILITY (FOUR DIGIT CODE)

A. FIRST 3721 B. SECOND _____

C. THIRD _____ D. FOURTH _____

2.10 FOR EACH OUTFALL GIVE THE LEGAL DESCRIPTION.

OUTFALL NUMBER (LIST) _____ 1/4 _____ 1/4 SEC_____ T_____ R_____ _____ COUNTY

2.20 FOR EACH OUTFALL LIST THE NAME OF THE RECEIVING WATER

OUTFALL NUMBER (LIST)	RECEIVING WATER
001, 002, 003, 004, 005	Missouri River

2.30 BRIEFLY DESCRIBE THE NATURE OF YOUR BUSINESS

Military contractor for the manufacturing and assembly of combat aircraft and missile parts.

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent and treatment units labeled to correspond to the more detailed descriptions in item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, public sewers and outfalls. If a water balance cannot by determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of

1. All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water and storm water runoff.
2. The average flow contributed by each operation.
3. The treatment received by the wastewater.

Continue on additional sheets if necessary.

1. OUTFALL NO.	2. OPERATION(S) CONTRIBUTING FLOW		3. TREATMENT	
(LIST)	A. OPERATION (LIST)	B. AVERAGE FLOW (INCLUDE UNITS) (MAXIMUM FLOW)	A. DESCRIPTION	B. LIST CODES FROM TABLE A
001	Storm Water only	N/A	N/A	N/A
002	Storm Water only	N/A	N/A	N/A
003	Storm Water only	N/A	N/A	N/A
004	Storm Water only	N/A	N/A	N/A
005	Storm Water only	N/A	N/A	N/A

2.40 CONTINUED

C. EXCEPT FOR STORM RUNOFF, LEAKS OR SPILLS, ARE ANY OF THE DISCHARGES DESCRIBED IN ITEMS A OR B INTERMITTENT OR SEASONAL?

☐ **YES** *(COMPLETE THE FOLLOWING TABLE)* ☑ **NO** *(GO TO SECTION 2.50)*

1. OUTFALL NUMBER *(list)*	2. OPERATION(S) CONTRIBUTING FLOW *(list)*	3. FREQUENCY		4. FLOW				C. DURATION *(in days)*
				A. FLOW RATE *(in mgd)*		B. TOTAL VOLUME (specify with units)		
		A. DAYS PER WEEK *(specify average)*	B. MONTHS PER YEAR *(specify average)*	1. LONG TERM AVERAGE	2. MAXIMUM DAILY	4. LONG TERM DAILY	3. MAXIMUM AVERAGE	

2.50 MAXIMUM PRODUCTION

A. DOES AN EFFLUENT GUIDELINE LIMITATION PROMULGATED BY EPA UNDER SECTION 304 OF THE CLEAN WATER ACT APPLY TO YOUR FACILITY?

☐ **YES** *(COMPLETE B.)* ☑ **NO** *(GO TO SECTION 2.60)*

B. ARE THE LIMITATIONS IN THE APPLICABLE EFFLUENT GUIDELINES EXPRESSED IN TERMS OF PRODUCTION (OF OTHER MEASURE OF OPERATION)?

☐ **YES** *(COMPLETE c.)* ☑ **NO** *(GO TO SECTION 2.60)*

C. IF YOU ANSWERED "YES" TO B. LIST THE QUANTITY THAT REPRESENTS AN ACTUAL MEASUREMENT OF YOUR MAXIMUM LEVEL OF PRODUCTION, EXPRESSED IN THE TERMS AND UNITS USED IN THE APPLICABLE EFFLUENT GUIDELINE AND INDICATE THE AFFECTED OUTFALLS.

1. MAXIMUM QUANTITY			2. AFFECTED OUTFALLS *(list outfall numbers)*
A. QUANTITY PER DAY	B. UNITS OF MEASURE	C. OPERATION, PRODUCT, MATERIAL, ETC. *(specify)*	

2.60 IMPROVEMENTS

A. ARE YOU NOW REQUIRED BY ANY FEDERAL, STATE OR LOCAL AUTHORITY TO MEET, ANY IMPLEMENTATION SCHEDULE FOR THE CONSTRUCTION, UPGRADING OR OPERATION OF WASTEWATER TREATMENT EQUIPMENT OR PRACTICES OR ANY OTHER ENVIRONMENTAL PROGRAMS THAT MAY AFFECT THE DISCHARGES DESCRIBED IN THIS APPLICATION? THIS INCLUDES, BUT IS NOT LIMITED TO, PERMIT CONDITIONS, ADMINISTRATIVE OR ENFORCEMENT ORDERS, ENFORCEMENT COMPLIANCE SCHEDULE LETTERS, STIPULATIONS, COURT ORDERS AND GRANT OR LOAN CONDITIONS.

☐ **YES** *(COMPLETE THE FOLLOWING TABLE)* ☑ **NO** *(GO TO 3.00)*

1. IDENTIFICATION OF CONDITION AGREEMENT, ETC.	2. AFFECTED OUTFALLS		3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE	
				A. REQUIRED	B. PROJECTED

B. OPTIONAL: YOU MAY ATTACH ADDITIONAL SHEETS DESCRIBING ANY ADDITIONAL WATER POLLUTION CONTROL PROGRAMS *(OR OTHER ENVIRONMENTAL PROJECTS THAT MAY AFFECT YOUR DISCHARGES)* YOU NOW HAVE UNDER WAY OR ARE YOU PLANNING. INDICATE WHETHER EACH PROGRAM IS NOW UNDER WAY OR PLANNED, AND INDICATE YOUR ACTUAL OR PLANNED SCHEDULES FOR CONSTRUCTION.

☐ **MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED.**

3.00 INTAKE AND EFFLUENT CHARACTERISTICS

A. & B. SEE INSTRUCTIONS BEFORE PROCEEDING – COMPLETE ONE TABLE FOR EACH OUTFALL – ANNOTATE THE OUTFALL NUMBER IN THE SPACE PROVIDED.
NOTE: TABLE 1 IS INCLUDED ON SEPARATE SHEETS NUMBERED FROM PAGE 6 TO PAGE 7.

C. USE THE SPACE BELOW TO LIST ANY OF THE POLLUTANTS LISTED IN PART B OF THE INSTRUCTIONS, WHICH YOU KNOW OR HAVE REASON TO BELIEVE IS DISCHARGED OR MAY BE DISCHARGED FROM ANY OUTFALL. FOR EVERY POLLUTANT YOU LIST, BRIEFLY DESCRIBE THE REASONS YOU BELIEVE IT TO BE PRESENT AND REPORT ANY ANALYTICAL DATA IN YOUR POSSESSION.

1. POLLUTANT	2. SOURCE	1. POLLUTANT	2. SOURCE
Chlorine	Cooling Tower Overflow		
Flouride	Cooling Tower Overflow		
Nitrate-Nitrite	Lawn Fertilizer		
Oil and Grease	Vehicle parking		
Aluminum	Raw Material		
Iron	Raw Material		
Phosphorus	Lawn Fertilizer		
Titanium	Raw Material		

3.10 BIOLOGICAL TOXICITY TESTING DATA

DO YOU HAVE ANY KNOWLEDGE OR REASON TO BELIEVE THAT ANY BIOLOGICAL TEST FOR ACUTE OR CHRONIC TOXICITY HAS BEEN MADE ON ANY OF YOUR DISCHARGES OR ON RECEIVING WATER IN RELATION TO YOUR DISCHARGE WITHIN THE LAST THREE YEARS?

☑ YES (IDENTIFY THE TEST(S) AND DESCRIBE THEIR PURPOSES BELOW.) ☐ NO (GO TO 3.20)

Whole Effluent Toxicity Test performed at Outfall #001. Permit requirement.

3.20 CONTRACT ANALYSIS INFORMATION

WERE ANY OF THE ANALYSES REPORTED PERFORMED BY A CONTRACT LABORATORY OR CONSULTING FIRM?

☑ **YES** *(LIST THE NAME, ADDRESS AND TELEPHONE NUMBER OF AND POLLUTANTS ANALYZED BY EACH SUCH LABORATORY OR FIRM BELOW.)* ☐ **NO** *(GO TO 3.30)*

A. NAME	B. ADDRESS	C. TELEPHONE *(area code and number)*	D. POLLUTANTS ANALYZED *(list)*
AECOM	4303 West LaPorte Avenue, Fort Collins, Colorado, 80521-2154	970-416-0916	WET

3.30 CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the information is true, accurate and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

NAME AND OFFICIAL TITLE (TYPE OR PRINT)	TELEPHONE NUMBER WITH AREA CODE
Mike Dwyer, Director \ Environment, Health, and Safety	(314) 777-9238
SIGNATURE (SEE INSTRUCTIONS)	DATE SIGNED
	2/18/13

PLEASE PRINT OR TYPE. You may report some or all of this information on separate sheet instead of completing these pages.
(Use the same format)
SEE INSTRUCTIONS

FORM C
TABLE 1 FOR 3.00 ITEM A AND B

INTAKE AND EFFLUENT CHARACTERISTICS

OUTFALL NO. 002

PART A – You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT							3. UNITS *(specify if blank)*		4. INTAKE *(optional)*		
	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE *(if available)*		C. LONG TERM AVRG. VALUE *(if available)*		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
A. Biochemical Oxygen Demand (BOD)	<5	<13.75	n/a	n/a	n/a	n/a	1	mg/l	lb			
B. Chemical Oxygen Demand (COD)	121	154	n/a	n/a	67.8	13.6	4	mg/l.	lb			
C. Total organic Carbon (TOC)	6.5	17.9	n/a	n/a	n/a	n/a	1	mg/l	lb			
D. Total Suspended Solids (TSS)	10	27.5	n/a	n/a	n/a	n/a	4	mg/l.	lb			
E. Ammonia *(as N)*	<0.1	0.28	n/a	n/a	n/a	n/a	1	mg/l	lb			
F. Flow	VALUE 0.33		VALUE		VALUE 0.024			MGD.		VALUE		
G. Temperature *(winter)*	VALUE 16		VALUE		VALUE 13		2	°C		VALUE		
H. Temperature *(summer)*	VALUE 23		VALUE		VALUE 19		2	°C		VALUE		
I. pH	MINIMUM 7.0	MAXIMUM 7.8	MINIMUM	MAXIMUM			4	STANDARD UNITS				

PART B – Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2-a for any pollutant, you must provide the results for at least one analysis for that pollutant. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	A. BELIEVED PRESENT	B. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE *(if available)*		C. LONG TERM AVRG. VALUE *(if available)*		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
A. Bromide (24959-67-9)		x												
B. Chlorine Total Residual	x		<0.05	<0.14	n/a	n/a	n/a	n/a	1	mg/l	lb			
C. Color		x												
D. Fecal Coliform		x												
E. Fluoride (16984-48-8)	x		<0.1	<0.28	n/a	n/a	n/a	n/a	1	mg/l	lb			
F. Nitrate—Nitrate *(as N)*	x		0.276	0.76	n/a	n/a	n/a	n/a	1	mg/l	lb			

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	A. BELIEVED PRESENT	B. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE *(if available)*		C. LONG TERM AVRG. VALUE *(if available)*		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
G. Nitrogen Total Organic *(as N)*	x		3.0	8.25	n/a	n/a	n/a	n/a	1	mg/l	lb			
H. Oil and Grease	x		<6	<16.5	n/a	n/a	<6	<1.2	4	mg/l.	lb			
I. Phosphorus *(as P)* Total (7723-14-0)	x		0.295	0.81	n/a	n/a	n/a	n/a	1	mg/l.	lb			
J. Sulfate *(as SO^4)* (14808-79-8)		x												
K. Sulfide *(as S)*		x												
L. Sulfite (as SO^3) (14265-45-3)		x												
M. Surfactants		x												
N. Aluminum Total (7429-90-5)	x		1.31	3.6	n/a	n/a	n/a	n/a	1	mg/l	lb			
O. Barium Total (7440-39-3)		x												
P. Boron Total (7440-42-8)		x												
Q. Cobalt Total (7440-48-4)		x												
R. Iron Total (7439-89-6)	x		1.08	2.97	n/a	n/a	n/a	n/a	1	mg/l	lb			
S. Magnesium Total (7439-95-4)		x												
T. Molybdenum Total (7439-98-7)		x												
U. Manganese Total (7439-96-5)		x												
V. Tin Total (7440-31-5)		x												
W. Titanium Total (7440-32-6)	x		0.034	0.094	n/a	n/a	n/a	n/a	1	mg/l	lb			

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	A. BELIEVED PRESENT	B. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (if available)		C. LONG TERM AVRG. VALUE (if available)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, AND TOTAL PHENOLS														
1M. Antimony, Total (7440-36-9)		X												
2M. Beryllium, Total (7440-41-7)		X												
3M. Magnesium, Total (7439-95-4)		X												
4M. Molybdenum, Total (7439-98-7)		X												
5M. Tin, Total (7440-31-5)		X												
6M. Titanium, Total (7440-32-6)	X		0.034	0.096	n/a	n/a	n/a	n/a	1	mg/l	lb			
7M. Mercury, Total (7439-97-6)		X												
8M. Selenium, Total (7782-49-2)		X												
9M. Thallium, Total (7440-28-0)		X												
10M. Phenols, Total		X												
RADIOACTIVITY														
(1) Alpha Total		X												
(2) Beta Total		X												
(3) Radium Total		X												
(4) Radium 226 Total		X												

MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM, WATER POLLUTION BRANCH

FORM D – APPLICATION FOR DISCHARGE PERMIT PRIMARY INDUSTRIES

FOR AGENCY USE ONLY	
CHECK NO.	
DATE RECEIVED	FEE SUBMITTED

NOTE: DO NOT ATTEMPT TO COMPLETE THIS FORM BEFORE READING THE ACCOMPANYING INSTRUCTIONS

1.00 NAME OF FACILITY

The Boeing Company - St. Charles

1.10 THIS FACILITY IS NOW IN OPERATION UNDER MISSOURI OPERATING PERMIT NUMBER

MO - 135208

This form is to be filled out in addition to forms A and C "Application for Discharge Permit" for the Industries listed below.

INDUSTRY CATEGORY

Adhesives and sealants
Aluminum forming
Auto and other laundries
Battery manufacturing
Coal mining
Coil coating
Copper forming
Electric and electronic compounds
Electroplating
Explosives manufacturing
Foundries
Gum and wood chemicals
Inorganic chemicals manufacturing
Iron and steel manufacturing
Leather tanning and finishing
Landfill
Mechanical products manufacturing
Nonferrous metals manufacturing
Ore mining
Organic chemicals manufacturing
Paint and ink formulation
Pesticides
Petroleum refining
Pharmaceutical preparations
Photographic equipment and supplies
Plastic and synthetic materials manufacturing
Plastic processing
Porcelain enameling
Printing and publishing
Pulp and paperboard mills
Rubber processing
Soap and detergent manufacturing
Steam electric power plants
Textile mills
Timber products processing

APPLICATION FOR DISCHARGE PERMIT
FORM D – PRIMARY INDUSTRIES

TABLE II	
NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	002

1.30 If you are a primary industry and this outfall contains process wastewater, refer to Table A in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-A for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. Mark "X" in column 2-B for each pollutant you know or have reason to believe is present. Mark "X" in column 2-C for each pollutant you believe to be absent. If you mark either columns 2-A or 2-B for any pollutant, you must provide the results of at least one analysis for that pollutant. Note that there are seven pages to this part, please review each carefully. Complete one table (*all seven pages*) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TEST-ING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-9)			✓												
2M. Beryllium, Total (7440-41-7)			✓												
3M. Magnesium Total (7439-95-4)			✓												
4M. Molybdenum Total (7439-98-7)			✓												
5M. Tin Total (7440-31-5)			✓							1	mg/l	lb			
6M. Titanium Total (7440-32-6)		✓		0.034	0.09	n/a	n/a	n/a	n/a	1	mg/l	lb			
7M. Mercury, Total (7439-97-6)			✓												
8M. Selenium, Total (7782-49-2)			✓												
9M. Thallium, Total (7440-28-0)			✓												
10M. Phenols, Total		✓		ND	ND	n/aa	n/a	n/a	n/a	1	mg/l	lb			
DIOXIN															
2,3,7,8 – Tetra – chlorodibenzo-P-Dioxin (1764-01-6)			✓	**DESCRIBE RESULTS**											

CONTINUED FROM PAGE 3

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TES-ING RE-QUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – VOLATILE COMPOUNDS															
1V. Acrolein (107-02-8)			✓												
2V. Acrylonitrile (107-13-1)			✓												
3V. Benzene (71-43-2)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
4V. Bis (*Chloromethyl*) Ether (542-88-1)			✓												
5V. Bromoform (75-25-2)			✓												
6V. Carbon Tetrachloride (56-23-5)			✓												
7V. Chlorobenzene (108-90-7)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
8V. Chlorodibromomethane (124-48-1)			✓												
9V. Chloroethane (75-00-3)			✓												
10V. 2-Chloroethylvinyl Ether (110-75-8)			✓												
11V. Chloroform (67-66-3)			✓												
12V. Dichlorobromomethane (75-27-4)			✓												
13V. Dichloro-difluoromethane (75-71-8)			✓												
14V. 1,1 – Dichloroethane (75-34-3)			✓												
15V. 1,2 – Dichloroethane (107-06-2)			✓												
16V. 1,1 – Dichloroethylene (75-35-4)			✓												
17V. 1,2 – Dichloropropane (78-87-5)			✓												
18V. 1,2 – Dichloropropylene (542-75-6)			✓												
19V. Ethylbenzene (100-41-4)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
20V. Methyl Bromide (74-83-9)			✓												
21V. Methyl Chloride (74-87-3)			✓												

CONTINUE ON PAGE 4

CONTINUED FROM THE FRONT

NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	002

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING RE-QUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC.MS FRACTION – VOLATILE COMPOUNDS *(continued)*															
22V. Methylene Chloride (75-09-2)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
23V. 1,1,2,2 – Tetra-chloroethane (79-34-5)			✓												
24V. Tetrachloroethylene (127-18-4)			✓												
25V. Toluene (108-88-3)		✓		ND	ND	n	n/a	n/a	n/a	1	mg/l	lb			
26V. 1,2 – Trans Dichloroethylene (156-60-5)			✓												
27V. 1,1,1 – Tri – chloroethane (71-55-6)			✓												
28V. 1,1,2 – Tri-chloroethane (79-00-5)			✓												
29V. Trichloro – ethylene (79-01-6)			✓												
30V. Trichloro – fluoromethane (75-69-4)			✓												
31V. Vinyl Chloride (75-01-4)			✓												
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2 – Chlorophenol (95-57-8)			✓												
2A. 2,4 – Dichloro – phenol (120-83-2)			✓												
3A. 2,4 – Dimethyl – phenol (105-67-9)			✓												
4A. 4,6 – Dinitro - O-Cresol (534-52-1)			✓												
5A. 2,4 – Dinitro – phenol (51-28-5)			✓												
6A. 2-Nitrophenol (88-75-5)			✓												
7A. 4-Nitrophenol (100-02-7)			✓												
8A. P – Chloro – M Cresol (59-50-7)			✓												
9A. Pentachloro – phenol (87-86-5_			✓												
10A. Phenol (108-952)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
11A. 2,4,6 – Trichloro-phenol (88-06-2)			✓												

CONTINUE ON PAGE 5

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)			✓												
2B. Acenaphtylene (208-96-8)			✓												
3B. Anthracene (120-12-7)			✓												
4B. Benzidine (92-87-5)			✓												
5B. Benzo (a) Anthracene (56-55-3)			✓												
6B. Benzo (a) Pyrene (50-32-8)			✓												
7B. 3,4 – Benzofluoranthene (205-99-2)			✓												
8B. Benzo (ghi) Perylene (191-24-2)			✓												
9B. Benzo (k) Fluoranthene (207-08-9)			✓												
10B. Bis (2-Chloroethoxy) Methane (111-91-1)			✓												
11B. Bis (2-Chloroethyl) Ether (111-44-4)			✓												
12B. Bis (2-Chloroisopropyl) Ether (39638-32-9)			✓												
13B. Bis (2-Ethylhexyl) Phthalate (117-81-7)			✓												
14B. 4-Bromophenyl Phenyl Ether (101-55-3)			✓												
15B. Butyl Benzyl Phthalate (85-68-7)			✓												
16B. 2-Chloronaphthalene (91-58-7)			✓												
17B. 4-Chlorophenyl Phenyl Ether (7005-72-3)			✓												
18B. Chrysene (218-01-9)			✓												
19B. Dibenzo (a.h) Anthracene (53-70-3)			✓												
20B. 1,2 – Dichlorobenzene (95-50-1)			✓												
21B. 1,3 – Dichlorobenzene (541-73-1)			✓												

CONTINUE ON PAGE 6

CONTINUED FROM THE PAGE 5

NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	002

1. POLLUTANT AND CAS NUMBER (*If available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (*continued*)															
22B. 1, 4-Dichlorobenzene (106-46-7)			✓												
23B. 3, 3'-Dichlorobenzidine (91-94-1)			✓												
24B. Diethyl Phthalate (84-66-2)			✓												
25B. Dimethyl Phthalate (131-11-3)			✓												
26B. Di-N-butyl Phthalate (84-74-2)			✓												
27B. 2,4-Dinitrotoluene (121-14-2)			✓												
28B. 2,6-Dinitrotoluene (606-20-2)			✓												
29B. Di-N-Octyl Phthalate (117-84-0)			✓												
30B. 1,2-Diphenylhydrazine (*as Azobenzene*) (122-66-7)			✓												
31B. Fluoranthene (206-44-0)			✓												
32B. Fluorene (86-73-7)			✓												
33B. Hexachlorobenzene (87-68-3)			✓												
34B. Hexachlorobutadiene (87-68-3)			✓												
35B. Hexachloro-cyclopentadiene (77-47-4)			✓												
36B. Hexachloroethane (67-72-1)			✓												
37B. Indeno (1,2,3-c-d) Pyrene (193-39-5)			✓												
38B. Isophorone (78-59-1)			✓												
39B. Naphthalene (91-20-3)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
40B. Nitrobenzene (98-95-3)			✓												
41B. N-Nitro-sodimethylamine (62-75-9)			✓												

CONTINUE ON PAGE 7

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS *(continued)*															
42B. N-Nitroso N-Propylamine (621-64-7)			✓												
43B. N-Nitro-sodiphenylamine (86-30-6)			✓												
44B. Phenanthrene (85-01-8)			✓												
45B. Pyrene (129-00-0)			✓												
46B. 1,2,4-Tri chlorobenzene (120-82-1)			✓												
GC/MS FRACTION - PESTICIDES															
1P. Aldrin (309-00-2)			✓												
2P. α-BHC (319-84-6)			✓												
3P. β-BHC (319-84-6)			✓												
4P. γ-BHC (58-89-9)			✓												
5P. δ-BHC (319-86-8)			✓												
6P. Chlordane (57-74-9)			✓												
7P. 4,4'-DDT (50-29-3)			✓												
8P. 4,4'-DDE (72-55-9)			✓												
9P. 4,4'-DDD (72-54-8)			✓												
10P. Dieldrin (60-57-1)			✓												
11P. α-Endosulfan (115-29-7)			✓												
12P. β-Endosultan (115-29-7)			✓												
13P. Endosulfan Sulfate (1031-07-8)			✓												
14P. Endrin (72-20-8)			✓												
15P. Endrin Aldehyde (7421-93-4)			✓												
16P. Heptachlor (76-44-8)			✓												

 CONTINUED ON PAGE 8

CONTINUED FROM THE PAGE 7

NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	002

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – PESTICISES *(continued)*															
17P. Heptachlor Epoxide (1024-57-3)			✓												
18P. PCB-1242 (53469-21-9)			✓												
19P. PBC-1254 (11097-69-1)			✓												
20P. PCB-1221 (11104-28-2)			✓												
21P. PCB-1232 (11141-16-5)			✓												
22P. PCB-1248 (12672-29-6)			✓												
23P. PCB-1260 (11096-82-5)			✓												
24P. PCB-1016 (12674-11-2)			✓												
25P. Toxaphene (8001-35-2)			✓												
J. RADIOACTIVITY															
(1) Alpha Total			✓												
(2) Beta Total			✓												
(3) Radium Total			✓												
(4) Radium 226 Total			✓												

2.00 POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

A. IS ANY POLLUTANT LISTED IN ITEM 1.30 A SUBSTANCE OR A COMPONENT OF A SUBSTANCE WHICH YOU DO OR EXPECT THAT YOU WILL OVER THE NEXT FIVE YEARS USE OR MANUFACTURE AS AN INTERMEDIATE OR FINAL PRODUCT OR BYPRODUCT?

☐ **YES** *(LIST ALL SUCH POLLUTANTS BELOW)* ■ **NO** *(GO TO B)*

B. ARE YOUR OPERATIONS SUCH THAT YOUR RAW MATERIALS, PROCESSES OR PRODUCTS CAN REASONABLE BE EXPECTED TO VARY SO THAT YOUR DISCHARGES OF POLLUTANTS MAY DURING THE NEXT FIVE YEARS EXCEED TWO TIMES THE MAXIMUM VALUES REPORTED IN ITEM 1.30?

☐ **YES** *(COMPLETE C BELOW)* ■ **NO** *(GO TO SECTION 3.00)*

C. IF YOU ANSWERED "YES" TO ITEM B, EXPLAIN BELOW AND DESCRIBE IN DETAIL THE SOURCES AND EXPECTED LEVELS OF SUCH POLLUTANTS THAT YOU ANTICIPATE WILL BE DISCHARGED FROM EACH OUTFALL OVER THE NEXT FIVE YEARS, TO THE BEST OF YOUR ABILIITY AT THIS TIME. CONTINUE ON ADDITIONAL SHEETS IF YOU NEED MORE SPACE.

3.00 CONTRACT ANALYSIS INFORMATION

WERE ANY OF THE ANALYSES REPORTED IN 1.30 PERFORMED BY A CONTRACT LABORATORY OR CONSULTING FIRM?

■ **YES** *(LIST THE NAME, ADDRESS, AND TELEPHONE NUMBER OF, AND ANALYZED BY, EACH SUCH LABORATORY OR FIRM BELOW)*
☐ **NO** *(GO TO SECTION 4.00)*

A. NAME	B. ADDRESS	C. TELEPHONE NUMBER WITH AREA CODE	D. POLLUTANTS ANALYZED *(list)*
Teklab, Inc.	5445 Horseshoe Lake Road,	(618) 344-1005	All Listed
	Collinsville, ILL. 62234		

4.00 CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the 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.

NAME AND OFFICIAL TITLE (TYPE OR PRINT)	TELEPHONE NUMBER WITH AREA CODE
Mike Dwyer, Director \ Environment, Health, and Safety	(314) 777-9238
SIGNATURE	DATE SIGNED
	2/18/17

INSTRUCTIONS FOR FILLING OUT APPLICATION FOR DISCHARGE PERMIT FORM D – PRIMARY INDUSTRIES

All blanks must be filled in when the applications is submitted to the appropriate Regional Office (see map). The form **must be signed** as indicated.

This application is to be completed only for wastewater facilities from which there is a discharge. Include any facility that it is possible to discharge from even if normally there is no discharge. If this form is not adequate for you to describe your existing operation, the sufficient information should be attached so that an evaluation of the discharge can be made.

1.00 Name of Facility – By what title or name is this facility known locally?

1.10 and 1.20 Self-explanatory.

1.30 GENERAL INSTRUCTIONS. For some pollutants, you may be required to mark "X" in the "Testing Required" column (column 2-A) and test (sample and analyze) and report the levels of the pollutants in your discharge whether or not you expect them to be present in your discharge. For all others, you must mark "X" in either the "Believe Present" column or the "Believe Absent" column (column 2-B or 2-C) based on your best estimate, and test for those which you believe to be present.

Base your determination that a pollutant is present in or absent from your discharge on your knowledge of your raw materials, maintenance chemicals, intermediate and final products and byproducts and any previous analyses known to you of your effluent or of any similar effluent. (For example, if you manufacture pesticides, you should expect those pesticides to be present in contaminated storm water runoff). If you would expect a pollutant to be present solely as a result of its presence in your intake water, you must mark "Believe Present" but you are not required to analyze for that pollutant. Instead, mark an "X" in the "Intake" column.

REPORTING. All levels must be reported as concentration and as total mass. You may report some or all of the required data by attaching separate sheets of paper instead of filling out Table II if the separate sheets contain all the required information in a format which is consistent with Table II in spacing and in identification of pollutants and columns. (For example, the data system used in your GC/MS analysis may be able to print data in the proper format). Use the following abbreviations in the columns headed "Units". (column 4)

CONCENTRATION M

ppm.....parts per million
mg/1.....milligrams per liter
ppb.....parts per billion
µg/1.....micrograms per liter

ASS

lbs.....pounds
ton.....tons (English tons)
mg.....milligrams
g.....grams
kg.....kilograms
T.....tonnes (metric tons)

If you measure only one daily value, complete only the "Maximum Daily Values" columns and insert "1" into the "Number of Analyses" columns (columns 3-A and 3-D). Missouri Department of Natural Resources may require you to conduct additional analyses to further characterize your discharges.

For composite samples, the daily value is the total mass or average concentration found in a composite sample taken over the operating hours of the facility during a 24 hour period; for grab samples, the daily value is the arithmetic or flow-weighted total mass or average concentration found in a series of at least four grab samples taken over the operating hours of the facility during a 24 hour period.

If you measure more than one daily value for a pollutant, determine the average of all values within the last year and report the concentration and mass under the "Long Term Average Values" column (column 3-C), and the total number of daily values under the "Number of Analyses" columns (column 3-D). Also, determine the average of all daily values taken during each calendar month, and report the highest average under the "Maximum 30 Day Value" column (column 3-B)

MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM, WATER POLLUTION BRANCH

FORM C – APPLICATION FOR DISCHARGE PERMIT – MANUFACTURING, COMMERCIAL, MINING, SILVICULTURE OPERATIONS, PROCESS & STORM WATER

FOR AGENCY USE ONLY	
CHECK NO.	
DATE RECEIVED	FEE SUBMITTED

TE: DO NOT ATTEMPT TO COMPLETE THIS FORM BEFORE READING THE ACCOMPANYING INSTRUCTIONS

1.00 NAME OF FACILITY

The Boeing Company - St. Charles

1.10 THIS FACILITY IS NOW IN OPERATION UNDER MISSOURI OPERATING PERMIT NUMBER

MO-0135208

1.20 THIS IS A NEW FACILITY AND WAS CONSTRUCTED UNDER MISSOURI CONSTRUCTION PERMIT NUMBER (COMPLETE ONLY IF THIS FACILITY DOES NOT HAVE AN OPERATING PERMIT).

2.00 LIST THE STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODES APPLICABLE TO YOUR FACILITY (FOUR DIGIT CODE)

A. FIRST 3721 B. SECOND _____

C. THIRD _____ D. FOURTH _____

2.10 FOR EACH OUTFALL GIVE THE LEGAL DESCRIPTION.

OUTFALL NUMBER (LIST) _____ 1/4 _____ 1/4 SEC_____ T_____ R_____ _____ COUNTY

2.20 FOR EACH OUTFALL LIST THE NAME OF THE RECEIVING WATER

OUTFALL NUMBER (LIST)	RECEIVING WATER
001, 002, 003, 004, 005	Missouri River

2.30 BRIEFLY DESCRIBE THE NATURE OF YOUR BUSINESS

Military contractor for the manufacturing and assembly of combat aircraft and missile parts.

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent and treatment units labeled to correspond to the more detailed descriptions in item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, public sewers and outfalls. If a water balance cannot by determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of

1. All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water and storm water runoff.
2. The average flow contributed by each operation.
3. The treatment received by the wastewater.

Continue on additional sheets if necessary.

1. OUTFALL NO.	2. OPERATION(S) CONTRIBUTING FLOW		3. TREATMENT	
(LIST)	A. OPERATION (LIST)	B. AVERAGE FLOW (INCLUDE UNITS) (MAXIMUM FLOW)	A. DESCRIPTION	B. LIST CODES FROM TABLE A
001	Storm Water only	N/A	N/A	N/A
002	Storm Water only	N/A	N/A	N/A
003	Storm Water only	N/A	N/A	N/A
004	Storm Water only	N/A	N/A	N/A
005	Storm Water only	N/A	N/A	N/A

2.40 CONTINUED

C. EXCEPT FOR STORM RUNOFF, LEAKS OR SPILLS, ARE ANY OF THE DISCHARGES DESCRIBED IN ITEMS A OR B INTERMITTENT OR SEASONAL?

☐ **YES** *(COMPLETE THE FOLLOWING TABLE)* ☑ **NO** *(GO TO SECTION 2.50)*

1. OUTFALL NUMBER *(list)*	2. OPERATION(S) CONTRIBUTING FLOW *(list)*	3. FREQUENCY		4. FLOW				C. DURATION *(in days)*
				A. FLOW RATE *(in mgd)*		B. TOTAL VOLUME (specify with units)		
		A. DAYS PER WEEK *(specify average)*	B. MONTHS PER YEAR *(specify average)*	1. LONG TERM AVERAGE	2. MAXIMUM DAILY	4. LONG TERM DAILY	3. MAXIMUM AVERAGE	

2.50 MAXIMUM PRODUCTION

A. DOES AN EFFLUENT GUIDELINE LIMITATION PROMULGATED BY EPA UNDER SECTION 304 OF THE CLEAN WATER ACT APPLY TO YOUR FACILITY?

☐ **YES** *(COMPLETE B.)* ☑ **NO** *(GO TO SECTION 2.60)*

B. ARE THE LIMITATIONS IN THE APPLICABLE EFFLUENT GUIDELINES EXPRESSED IN TERMS OF PRODUCTION (OF OTHER MEASURE OF OPERATION)?

☐ **YES** *(COMPLETE c.)* ☑ **NO** *(GO TO SECTION 2.60)*

C. IF YOU ANSWERED "YES" TO B. LIST THE QUANTITY THAT REPRESENTS AN ACTUAL MEASUREMENT OF YOUR MAXIMUM LEVEL OF PRODUCTION, EXPRESSED IN THE TERMS AND UNITS USED IN THE APPLICABLE EFFLUENT GUIDELINE AND INDICATE THE AFFECTED OUTFALLS.

1. MAXIMUM QUANTITY			2. AFFECTED OUTFALLS *(list outfall numbers)*
A. QUANTITY PER DAY	B. UNITS OF MEASURE	C. OPERATION, PRODUCT, MATERIAL, ETC. *(specify)*	

2.60 IMPROVEMENTS

A. ARE YOU NOW REQUIRED BY ANY FEDERAL, STATE OR LOCAL AUTHORITY TO MEET, ANY IMPLEMENTATION SCHEDULE FOR THE CONSTRUCTION, UPGRADING OR OPERATION OF WASTEWATER TREATMENT EQUIPMENT OR PRACTICES OR ANY OTHER ENVIRONMENTAL PROGRAMS THAT MAY AFFECT THE DISCHARGES DESCRIBED IN THIS APPLICATION? THIS INCLUDES, BUT IS NOT LIMITED TO, PERMIT CONDITIONS, ADMINISTRATIVE OR ENFORCEMENT ORDERS, ENFORCEMENT COMPLIANCE SCHEDULE LETTERS, STIPULATIONS, COURT ORDERS AND GRANT OR LOAN CONDITIONS.

☐ **YES** *(COMPLETE THE FOLLOWING TABLE)* ☑ **NO** *(GO TO 3.00)*

1. IDENTIFICATION OF CONDITION AGREEMENT, ETC.	2. AFFECTED OUTFALLS		3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE	
				A. REQUIRED	B. PROJECTED

B. OPTIONAL: YOU MAY ATTACH ADDITIONAL SHEETS DESCRIBING ANY ADDITIONAL WATER POLLUTION CONTROL PROGRAMS *(OR OTHER ENVIRONMENTAL PROJECTS THAT MAY AFFECT YOUR DISCHARGES)* YOU NOW HAVE UNDER WAY OR ARE YOU PLANNING. INDICATE WHETHER EACH PROGRAM IS NOW UNDER WAY OR PLANNED, AND INDICATE YOUR ACTUAL OR PLANNED SCHEDULES FOR CONSTRUCTION.

☐ **MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED.**

3.00 INTAKE AND EFFLUENT CHARACTERISTICS

A. & B. SEE INSTRUCTIONS BEFORE PROCEEDING – COMPLETE ONE TABLE FOR EACH OUTFALL – ANNOTATE THE OUTFALL NUMBER IN THE SPACE PROVIDED.
NOTE: TABLE 1 IS INCLUDED ON SEPARATE SHEETS NUMBERED FROM PAGE 6 TO PAGE 7.

C. USE THE SPACE BELOW TO LIST ANY OF THE POLLUTANTS LISTED IN PART B OF THE INSTRUCTIONS, WHICH YOU KNOW OR HAVE REASON TO BELIEVE IS DISCHARGED OR MAY BE DISCHARGED FROM ANY OUTFALL. FOR EVERY POLLUTANT YOU LIST, BRIEFLY DESCRIBE THE REASONS YOU BELIEVE IT TO BE PRESENT AND REPORT ANY ANALYTICAL DATA IN YOUR POSSESSION.

1. POLLUTANT	2. SOURCE	1. POLLUTANT	2. SOURCE
Chlorine	Cooling Tower Overflow		
Flouride	Cooling Tower Overflow		
Nitrate-Nitrite	Lawn Fertilizer		
Oil and Grease	Vehicle parking		
Aluminum	Raw Material		
Iron	Raw Material		
Phosphorus	Lawn Fertilizer		
Titanium	Raw Material		

3.10 BIOLOGICAL TOXICITY TESTING DATA

DO YOU HAVE ANY KNOWLEDGE OR REASON TO BELIEVE THAT ANY BIOLOGICAL TEST FOR ACUTE OR CHRONIC TOXICITY HAS BEEN MADE ON ANY OF YOUR DISCHARGES OR ON RECEIVING WATER IN RELATION TO YOUR DISCHARGE WITHIN THE LAST THREE YEARS?

☑ YES (IDENTIFY THE TEST(S) AND DESCRIBE THEIR PURPOSES BELOW.) ☐ NO (GO TO 3.20)

Whole Effluent Toxicity Test performed at Outfall #001. Permit requirement.

3.20 CONTRACT ANALYSIS INFORMATION

WERE ANY OF THE ANALYSES REPORTED PERFORMED BY A CONTRACT LABORATORY OR CONSULTING FIRM?

☑ **YES** *(LIST THE NAME, ADDRESS AND TELEPHONE NUMBER OF AND POLLUTANTS ANALYZED BY EACH SUCH LABORATORY OR FIRM BELOW.)* ☐ **NO** *(GO TO 3.30)*

A. NAME	B. ADDRESS	C. TELEPHONE *(area code and number)*	D. POLLUTANTS ANALYZED *(list)*
AECOM	4303 West LaPorte Avenue, Fort Collins, Colorado, 80521-2154	970-416-0916	WET

3.30 CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the information is true, accurate and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

NAME AND OFFICIAL TITLE (TYPE OR PRINT)	TELEPHONE NUMBER WITH AREA CODE
Mike Dwyer, Director \ Environment, Health, and Safety	(314) 777-9238
SIGNATURE (SEE INSTRUCTIONS)	DATE SIGNED
	2/18/13

PLEASE PRINT OR TYPE. You may report some or all of this information on separate sheet instead of completing these pages.
(Use the same format)
SEE INSTRUCTIONS

FORM C
TABLE 1 FOR 3.00 ITEM A AND B

INTAKE AND EFFLUENT CHARACTERISTICS

OUTFALL NO. 003

PART A – You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT							3. UNITS *(specify if blank)*		4. INTAKE *(optional)*		
	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE *(if available)*		C. LONG TERM AVRG. VALUE *(if available)*		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
A. Biochemical Oxygen Demand (BOD)	<5	<10.1	n/a	n/a	n/a	n/a	1	mg/l	lb			
B. Chemical Oxygen Demand (COD)	102	206	n/a	n/a	<75.5	<13.6	4	mg/l.	lb			
C. Total organic Carbon (TOC)	4.0	8.1	n/a	n/a	n/a	n/a	1	mg/l.	lb			
D. Total Suspended Solids (TSS)	19	262	n/a	n/a	<12.8	<2.3	4	mg/l.	lb			
E. Ammonia *(as N)*	0.33	0.67	n/a	n/a	n/a	n/a	1	mg/l	lb			
F. Flow	VALUE 0.242		VALUE		VALUE 0.021			MGD		VALUE		
G. Temperature *(winter)*	VALUE 12.2		VALUE		VALUE 11		4	°C		VALUE		
H. Temperature *(summer)*	VALUE 26		VALUE		VALUE 19.5		4	°C		VALUE		
I. pH	MINIMUM 7.0	MAXIMUM 8.4	MINIMUM	MAXIMUM			4	STANDARD UNITS				

PART B – Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2-a for any pollutant, you must provide the results for at least one analysis for that pollutant. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	A. BELIEVED PRESENT	B. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE *(if available)*		C. LONG TERM AVRG. VALUE *(if available)*		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
A. Bromide (24959-67-9)		X												
B. Chlorine Total Residual	X		<0.1	<0.20	n/a	n/a	n/a	n/a	1	mg/l	lb			
C. Color		X												
D. Fecal Coliform		X												
E. Fluoride (16984-48-8)	X		<0.1											
F. Nitrate—Nitrate *(as N)*	X		0.321											

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	A. BELIEVED PRESENT	B. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE *(if available)*		C. LONG TERM AVRG. VALUE *(if available)*		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
G. Nitrogen Total Organic *(as N)*	x		1.67	3.37	n/a	n/a	n/a	n/a	1	mg/l	lb			
H. Oil and Grease	x		<6	12.1	n/a	n/a	n/a	n/a	4	mg/l.	lb			
I. Phosphorus *(as P)* Total (7723-14-0)	x		0.101	0.20	n/a	n/a	n/a	n/a	1	mg/l	lb			
J. Sulfate *(as SO^4)* (14808-79-8)		x												
K. Sulfide *(as S)*		x												
L. Sulfite (as SO^3) (14265-45-3)		x												
M. Surfactants		x												
N. Aluminum Total (7429-90-5)	x		0.887	1.8	n/a	n/a	n/a	n/a	1	mg/l	lb			
O. Barium Total (7440-39-3)		x												
P. Boron Total (7440-42-8)		x												
Q. Cobalt Total (7440-48-4)		x												
R. Iron Total (7439-89-6)	x		0.921	1.9	n/a	n/a	n/a	n/a	1	mg/l	lb			
S. Magnesium Total (7439-95-4)		x												
T. Molybdenum Total (7439-98-7)		x												
U. Manganese Total (7439-96-5)		x												
V. Tin Total (7440-31-5)		x												
W. Titanium Total (7440-32-6)	x		0.0337	0.068	n/a	n/a	n/a	n/a	1	mg/l	lb			

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	A. BELIEVED PRESENT	B. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE *(if available)*		C. LONG TERM AVRG. VALUE *(if available)*		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, AND TOTAL PHENOLS														
1M. Antimony, Total (7440-36-9)		X												
2M. Beryllium, Total (7440-41-7)		X												
3M. Magnesium, Total (7439-95-4)		X												
4M. Molybdenum, Total (7439-98-7)		X												
5M. Tin, Total (7440-31-5)		X												
6M. Titanium, Total (7440-32-6)	X		0.0337	0.068	n/a	n/a	n/a	n/a	1	mg/l	lb			
7M. Mercury, Total (7439-97-6)		X												
8M. Selenium, Total (7782-49-2)		X												
9M. Thallium, Total (7440-28-0)		X												
10M. Phenols, Total		X												
RADIOACTIVITY														
(1) Alpha Total		X												
(2) Beta Total		X												
(3) Radium Total		X												
(4) Radium 226 Total		X												

MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM, WATER POLLUTION BRANCH

FORM D – APPLICATION FOR DISCHARGE PERMIT PRIMARY INDUSTRIES

FOR AGENCY USE ONLY	
CHECK NO.	
DATE RECEIVED	FEE SUBMITTED

NOTE: DO NOT ATTEMPT TO COMPLETE THIS FORM BEFORE READING THE ACCOMPANYING INSTRUCTIONS

1.00 NAME OF FACILITY

The Boeing Company - St. Charles

1.10 THIS FACILITY IS NOW IN OPERATION UNDER MISSOURI OPERATING PERMIT NUMBER

MO - 135208

This form is to be filled out in addition to forms A and C "Application for Discharge Permit" for the Industries listed below.

INDUSTRY CATEGORY

Adhesives and sealants
Aluminum forming
Auto and other laundries
Battery manufacturing
Coal mining
Coil coating
Copper forming
Electric and electronic compounds
Electroplating
Explosives manufacturing
Foundries
Gum and wood chemicals
Inorganic chemicals manufacturing
Iron and steel manufacturing
Leather tanning and finishing
Landfill
Mechanical products manufacturing
Nonferrous metals manufacturing
Ore mining
Organic chemicals manufacturing
Paint and ink formulation
Pesticides
Petroleum refining
Pharmaceutical preparations
Photographic equipment and supplies
Plastic and synthetic materials manufacturing
Plastic processing
Porcelain enameling
Printing and publishing
Pulp and paperboard mills
Rubber processing
Soap and detergent manufacturing
Steam electric power plants
Textile mills
Timber products processing

APPLICATION FOR DISCHARGE PERMIT
FORM D – PRIMARY INDUSTRIES

TABLE II	
NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	003

1.30 If you are a primary industry and this outfall contains process wastewater, refer to Table A in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-A for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. Mark "X" in column 2-B for each pollutant you know or have reason to believe is present. Mark "X" in column 2-C for each pollutant you believe to be absent. If you mark either columns 2-A or 2-B for any pollutant, you must provide the results of at least one analysis for that pollutant. Note that there are seven pages to this part, please review each carefully. Complete one table (*all seven pages*) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TEST-ING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-9)			✓												
2M. Beryllium, Total (7440-41-7)			✓												
3M. Magnesium Total (7439-95-4)			✓												
4M. Molybdenum Total (7439-98-7)			✓												
5M. Tin Total (7440-31-5)			✓							1	mg/l	lb/d			
6M. Titanium Total (7440-32-6)		✓		0.0337	0.068	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
7M. Mercury, Total (7439-97-6)			✓												
8M. Selenium, Total (7782-49-2)			✓												
9M. Thallium, Total (7440-28-0)			✓												
10M. Phenols, Total		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
DIOXIN															
2,3,7,8 – Tetra – chlorodibenzo-P-Dioxin (1764-01-6)			✓	**DESCRIBE RESULTS**											

CONTINUED FROM PAGE 3

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TES-ING RE-QUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – VOLATILE COMPOUNDS															
1V. Acrolein (107-02-8)			✓												
2V. Acrylonitrile (107-13-1)			✓												
3V. Benzene (71-43-2)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
4V. Bis (*Chloromethyl*) Ether (542-88-1)			✓												
5V. Bromoform (75-25-2)			✓												
6V. Carbon Tetrachloride (56-23-5)			✓												
7V. Chlorobenzene (108-90-7)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
8V. Chlorodibromomethane (124-48-1)			✓												
9V. Chloroethane (75-00-3)			✓												
10V. 2-Chloroethylvinyl Ether (110-75-8)			✓												
11V. Chloroform (67-66-3)			✓												
12V. Dichlorobromomethane (75-27-4)			✓												
13V. Dichloro-difluoromethane (75-71-8)			✓												
14V. 1,1 – Dichloroethane (75-34-3)			✓												
15V. 1,2 – Dichloroethane (107-06-2)			✓												
16V. 1,1 – Dichloroethylene (75-35-4)			✓												
17V. 1,2 – Dichloropropane (78-87-5)			✓												
18V. 1,2 – Dichloropropylene (542-75-6)			✓												
19V. Ethylbenzene (100-41-4)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
20V. Methyl Bromide (74-83-9)			✓												
21V. Methyl Chloride (74-87-3)			✓												

CONTINUE ON PAGE 4

CONTINUED FROM THE FRONT

NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	003

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING RE-QUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC.MS FRACTION – VOLATILE COMPOUNDS *(continued)*															
22V. Methylene Chloride (75-09-2)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
23V. 1,1,2,2 – Tetra-chloroethane (79-34-5)			✓												
24V. Tetrachloroethylene (127-18-4)			✓												
25V. Toluene (108-88-3)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
26V. 1,2 – Trans Dichloroethylene (156-60-5)			✓												
27V. 1,1,1 – Tri – chloroethane (71-55-6)			✓												
28V. 1,1,2 – Tri-chloroethane (79-00-5)			✓												
29V. Trichloro – ethylene (79-01-6)			✓												
30V. Trichloro – fluoromethane (75-69-4)			✓												
31V. Vinyl Chloride (75-01-4)			✓												
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2 – Chlorophenol (95-57-8)			✓												
2A. 2,4 – Dichloro – phenol (120-83-2)			✓												
3A. 2,4 – Dimethyl – phenol (105-67-9)			✓												
4A. 4,6 – Dinitro - O-Cresol (534-52-1)			✓												
5A. 2,4 – Dinitro – phenol (51-28-5)			✓												
6A. 2-Nitrophenol (88-75-5)			✓												
7A. 4-Nitrophenol (100-02-7)			✓												
8A. P – Chloro – M Cresol (59-50-7)			✓												
9A. Pentachloro – phenol (87-86-5_			✓												
10A. Phenol (108-952)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
11A. 2,4,6 – Trichloro-phenol (88-06-2)			✓												

CONTINUE ON PAGE 5

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)			✓												
2B. Acenaphtylene (208-96-8)			✓												
3B. Anthracene (120-12-7)			✓												
4B. Benzidine (92-87-5)			✓												
5B. Benzo (a) Anthracene (56-55-3)			✓												
6B. Benzo (a) Pyrene (50-32-8)			✓												
7B. 3,4 – Benzofluoranthene (205-99-2)			✓												
8B. Benzo (ghi) Perylene (191-24-2)			✓												
9B. Benzo (k) Fluoranthene (207-08-9)			✓												
10B. Bis (2-Chloroethoxy) Methane (111-91-1)			✓												
11B. Bis (2-Chloroethyl) Ether (111-44-4)			✓												
12B. Bis (2-Chloroisopropyl) Ether (39638-32-9)			✓												
13B. Bis (2-Ethylhexyl) Phthalate (117-81-7)			✓												
14B. 4-Bromophenyl Phenyl Ether (101-55-3)			✓												
15B. Butyl Benzyl Phthalate (85-68-7)			✓												
16B. 2-Chloronaphthalene (91-58-7)			✓												
17B. 4-Chlorophenyl Phenyl Ether (7005-72-3)			✓												
18B. Chrysene (218-01-9)			✓												
19B. Dibenzo (a.h) Anthracene (53-70-3)			✓												
20B. 1,2 – Dichlorobenzene (95-50-1)			✓												
21B. 1,3 – Dichlorobenzene (541-73-1)			✓												

CONTINUE ON PAGE 6

CONTINUED FROM THE PAGE 5

NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	003

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (*continued*)															
22B. 1, 4-Dichlorobenzene (106-46-7)			✓												
23B. 3, 3'-Dichlorobenzidine (91-94-1)			✓												
24B. Diethyl Phthalate (84-66-2)			✓												
25B. Dimethyl Phthalate (131-11-3)			✓												
26B. Di-N-butyl Phthalate (84-74-2)			✓												
27B. 2,4-Dinitrotoluene (121-14-2)			✓												
28B. 2,6-Dinitrotoluene (606-20-2)			✓												
29B. Di-N-Octyl Phthalate (117-84-0)			✓												
30B. 1,2-Diphenylhydrazine (*as Azobenzene*) (122-66-7)			✓												
31B. Fluoranthene (206-44-0)			✓												
32B. Fluorene (86-73-7)			✓												
33B. Hexachlorobenzene (87-68-3)			✓												
34B. Hexachlorobutadiene (87-68-3)			✓												
35B. Hexachloro-cyclopentadiene (77-47-4)			✓												
36B. Hexachloroethane (67-72-1)			✓												
37B. Indeno (1,2,3-c-d) Pyrene (193-39-5)			✓												
38B. Isophorone (78-59-1)			✓												
39B. Naphthalene (91-20-3)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
40B. Nitrobenzene (98-95-3)			✓												
41B. N-Nitro-sodimethylamine (62-75-9)			✓												

CONTINUE ON PAGE 7

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS *(continued)*															
42B. N-Nitroso N-Propylamine (621-64-7)			✓												
43B. N-Nitro-sodiphenylamine (86-30-6)			✓												
44B. Phenanthrene (85-01-8)			✓												
45B. Pyrene (129-00-0)			✓												
46B. 1,2,4-Tri chlorobenzene (120-82-1)			✓												
GC/MS FRACTION - PESTICIDES															
1P. Aldrin (309-00-2)			✓												
2P. α-BHC (319-84-6)			✓												
3P. β-BHC (319-84-6)			✓												
4P. γ-BHC (58-89-9)			✓												
5P. δ-BHC (319-86-8)			✓												
6P. Chlordane (57-74-9)			✓												
7P. 4,4'-DDT (50-29-3)			✓												
8P. 4,4'-DDE (72-55-9)			✓												
9P. 4,4'-DDD (72-54-8)			✓												
10P. Dieldrin (60-57-1)			✓												
11P. α-Endosulfan (115-29-7)			✓												
12P. β-Endosultan (115-29-7)			✓												
13P. Endosulfan Sulfate (1031-07-8)			✓												
14P. Endrin (72-20-8)			✓												
15P. Endrin Aldehyde (7421-93-4)			✓												
16P. Heptachlor (76-44-8)			✓												

CONTINUED ON PAGE 8

CONTINUED FROM THE PAGE 7

NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	003

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – PESTICISES *(continued)*															
17P. Heptachlor Epoxide (1024-57-3)			✓												
18P. PCB-1242 (53469-21-9)			✓												
19P. PBC-1254 (11097-69-1)			✓												
20P. PCB-1221 (11104-28-2)			✓												
21P. PCB-1232 (11141-16-5)			✓												
22P. PCB-1248 (12672-29-6)			✓												
23P. PCB-1260 (11096-82-5)			✓												
24P. PCB-1016 (12674-11-2)			✓												
25P. Toxaphene (8001-35-2)			✓												
J. RADIOACTIVITY															
(1) Alpha Total			✓												
(2) Beta Total			✓												
(3) Radium Total			✓												
(4) Radium 226 Total			✓												

2.00 POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

A. IS ANY POLLUTANT LISTED IN ITEM 1.30 A SUBSTANCE OR A COMPONENT OF A SUBSTANCE WHICH YOU DO OR EXPECT THAT YOU WILL OVER THE NEXT FIVE YEARS USE OR MANUFACTURE AS AN INTERMEDIATE OR FINAL PRODUCT OR BYPRODUCT?

☐ **YES** *(LIST ALL SUCH POLLUTANTS BELOW)* ■ **NO** *(GO TO B)*

B. ARE YOUR OPERATIONS SUCH THAT YOUR RAW MATERIALS, PROCESSES OR PRODUCTS CAN REASONABLE BE EXPECTED TO VARY SO THAT YOUR DISCHARGES OF POLLUTANTS MAY DURING THE NEXT FIVE YEARS EXCEED TWO TIMES THE MAXIMUM VALUES REPORTED IN ITEM 1.30?

☐ **YES** *(COMPLETE C BELOW)* ■ **NO** *(GO TO SECTION 3.00)*

C. IF YOU ANSWERED "YES" TO ITEM B, EXPLAIN BELOW AND DESCRIBE IN DETAIL THE SOURCES AND EXPECTED LEVELS OF SUCH POLLUTANTS THAT YOU ANTICIPATE WILL BE DISCHARGED FROM EACH OUTFALL OVER THE NEXT FIVE YEARS, TO THE BEST OF YOUR ABILIITY AT THIS TIME. CONTINUE ON ADDITIONAL SHEETS IF YOU NEED MORE SPACE.

3.00 CONTRACT ANALYSIS INFORMATION

WERE ANY OF THE ANALYSES REPORTED IN 1.30 PERFORMED BY A CONTRACT LABORATORY OR CONSULTING FIRM?

■ **YES** *(LIST THE NAME, ADDRESS, AND TELEPHONE NUMBER OF, AND ANALYZED BY, EACH SUCH LABORATORY OR FIRM BELOW)*
☐ **NO** *(GO TO SECTION 4.00)*

A. NAME	B. ADDRESS	C. TELEPHONE NUMBER WITH AREA CODE	D. POLLUTANTS ANALYZED *(list)*
Teklab, Inc.	5445 Horseshoe Lake Road,	(618) 344-1005	All Listed
	Collinsville, ILL. 62234		

4.00 CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the 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.

NAME AND OFFICIAL TITLE (TYPE OR PRINT)	TELEPHONE NUMBER WITH AREA CODE
Mike Dwyer, Director \ Environment, Health, and Safety	(314) 777-9238
SIGNATURE	DATE SIGNED
	2/18/13

INSTRUCTIONS FOR FILLING OUT APPLICATION FOR DISCHARGE PERMIT FORM D – PRIMARY INDUSTRIES

All blanks must be filled in when the applications is submitted to the appropriate Regional Office (see map). The form **must be signed** as indicated.

This application is to be completed only for wastewater facilities from which there is a discharge. Include any facility that it is possible to discharge from even if normally there is no discharge. If this form is not adequate for you to describe your existing operation, the sufficient information should be attached so that an evaluation of the discharge can be made.

1.00 Name of Facility – By what title or name is this facility known locally?

1.10 and 1.20 Self-explanatory.

1.30 GENERAL INSTRUCTIONS. For some pollutants, you may be required to mark "X" in the "Testing Required" column (column 2-A) and test (sample and analyze) and report the levels of the pollutants in your discharge whether or not you expect them to be present in your discharge. For all others, you must mark "X" in either the "Believe Present" column or the "Believe Absent" column (column 2-B or 2-C) based on your best estimate, and test for those which you believe to be present.

Base your determination that a pollutant is present in or absent from your discharge on your knowledge of your raw materials, maintenance chemicals, intermediate and final products and byproducts and any previous analyses known to you of your effluent or of any similar effluent. (For example, if you manufacture pesticides, you should expect those pesticides to be present in contaminated storm water runoff). If you would expect a pollutant to be present solely as a result of its presence in your intake water, you must mark "Believe Present" but you are not required to analyze for that pollutant. Instead, mark an "X" in the "Intake" column.

REPORTING. All levels must be reported as concentration and as total mass. You may report some or all of the required data by attaching separate sheets of paper instead of filling out Table II if the separate sheets contain all the required information in a format which is consistent with Table II in spacing and in identification of pollutants and columns. (For example, the data system used in your GC/MS analysis may be able to print data in the proper format). Use the following abbreviations in the columns headed "Units". (column 4)

CONCENTRATION M

ppm.....parts per million
mg/1.....milligrams per liter
ppb.....parts per billion
µg/1.....micrograms per liter

ASS

lbs.....pounds
ton.....tons (English tons)
mg.....milligrams
g.....grams
kg.....kilograms
T.....tonnes (metric tons)

If you measure only one daily value, complete only the "Maximum Daily Values" columns and insert "1" into the "Number of Analyses" columns (columns 3-A and 3-D). Missouri Department of Natural Resources may require you to conduct additional analyses to further characterize your discharges.

For composite samples, the daily value is the total mass or average concentration found in a composite sample taken over the operating hours of the facility during a 24 hour period; for grab samples, the daily value is the arithmetic or flow-weighted total mass or average concentration found in a series of at least four grab samples taken over the operating hours of the facility during a 24 hour period.

If you measure more than one daily value for a pollutant, determine the average of all values within the last year and report the concentration and mass under the "Long Term Average Values" column (column 3-C), and the total number of daily values under the "Number of Analyses" columns (column 3-D). Also, determine the average of all daily values taken during each calendar month, and report the highest average under the "Maximum 30 Day Value" column (column 3-B)

MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM, WATER POLLUTION BRANCH

FORM C – APPLICATION FOR DISCHARGE PERMIT – MANUFACTURING, COMMERCIAL, MINING, SILVICULTURE OPERATIONS, PROCESS & STORM WATER

FOR AGENCY USE ONLY	
CHECK NO.	
DATE RECEIVED	FEE SUBMITTED

TE: DO NOT ATTEMPT TO COMPLETE THIS FORM BEFORE READING THE ACCOMPANYING INSTRUCTIONS

1.00 NAME OF FACILITY

The Boeing Company - St. Charles

1.10 THIS FACILITY IS NOW IN OPERATION UNDER MISSOURI OPERATING PERMIT NUMBER

MO-0135208

1.20 THIS IS A NEW FACILITY AND WAS CONSTRUCTED UNDER MISSOURI CONSTRUCTION PERMIT NUMBER (COMPLETE ONLY IF THIS FACILITY DOES NOT HAVE AN OPERATING PERMIT).

2.00 LIST THE STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODES APPLICABLE TO YOUR FACILITY (FOUR DIGIT CODE)

A. FIRST 3721 B. SECOND _____

C. THIRD _____ D. FOURTH _____

2.10 FOR EACH OUTFALL GIVE THE LEGAL DESCRIPTION.

OUTFALL NUMBER (LIST) _____ 1/4 _____ 1/4 SEC _____ T _____ R _____ _____ COUNTY

2.20 FOR EACH OUTFALL LIST THE NAME OF THE RECEIVING WATER

OUTFALL NUMBER (LIST)	RECEIVING WATER
001, 002, 003, 004, 005	Missouri River

2.30 BRIEFLY DESCRIBE THE NATURE OF YOUR BUSINESS

Military contractor for the manufacturing and assembly of combat aircraft and missile parts.

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent and treatment units labeled to correspond to the more detailed descriptions in item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, public sewers and outfalls. If a water balance cannot by determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of

1. All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water and storm water runoff.
2. The average flow contributed by each operation.
3. The treatment received by the wastewater.

Continue on additional sheets if necessary.

1. OUTFALL NO.	2. OPERATION(S) CONTRIBUTING FLOW		3. TREATMENT	
(LIST)	A. OPERATION (LIST)	B. AVERAGE FLOW (INCLUDE UNITS) (MAXIMUM FLOW)	A. DESCRIPTION	B. LIST CODES FROM TABLE A
001	Storm Water only	N/A	N/A	N/A
002	Storm Water only	N/A	N/A	N/A
003	Storm Water only	N/A	N/A	N/A
004	Storm Water only	N/A	N/A	N/A
005	Storm Water only	N/A	N/A	N/A

2.40 CONTINUED

C. EXCEPT FOR STORM RUNOFF, LEAKS OR SPILLS, ARE ANY OF THE DISCHARGES DESCRIBED IN ITEMS A OR B INTERMITTENT OR SEASONAL?

☐ **YES** *(COMPLETE THE FOLLOWING TABLE)* ☑ **NO** *(GO TO SECTION 2.50)*

1. OUTFALL NUMBER *(list)*	2. OPERATION(S) CONTRIBUTING FLOW *(list)*	3. FREQUENCY		4. FLOW				C. DURATION *(in days)*
				A. FLOW RATE *(in mgd)*		B. TOTAL VOLUME (specify with units)		
		A. DAYS PER WEEK *(specify average)*	B. MONTHS PER YEAR *(specify average)*	1. LONG TERM AVERAGE	2. MAXIMUM DAILY	4. LONG TERM DAILY	3. MAXIMUM AVERAGE	

2.50 MAXIMUM PRODUCTION

A. DOES AN EFFLUENT GUIDELINE LIMITATION PROMULGATED BY EPA UNDER SECTION 304 OF THE CLEAN WATER ACT APPLY TO YOUR FACILITY?

☐ **YES** *(COMPLETE B.)* ☑ **NO** *(GO TO SECTION 2.60)*

B. ARE THE LIMITATIONS IN THE APPLICABLE EFFLUENT GUIDELINES EXPRESSED IN TERMS OF PRODUCTION (OF OTHER MEASURE OF OPERATION)?

☐ **YES** *(COMPLETE c.)* ☑ **NO** *(GO TO SECTION 2.60)*

C. IF YOU ANSWERED "YES" TO B. LIST THE QUANTITY THAT REPRESENTS AN ACTUAL MEASUREMENT OF YOUR MAXIMUM LEVEL OF PRODUCTION, EXPRESSED IN THE TERMS AND UNITS USED IN THE APPLICABLE EFFLUENT GUIDELINE AND INDICATE THE AFFECTED OUTFALLS.

1. MAXIMUM QUANTITY			2. AFFECTED OUTFALLS *(list outfall numbers)*
A. QUANTITY PER DAY	B. UNITS OF MEASURE	C. OPERATION, PRODUCT, MATERIAL, ETC. *(specify)*	

2.60 IMPROVEMENTS

A. ARE YOU NOW REQUIRED BY ANY FEDERAL, STATE OR LOCAL AUTHORITY TO MEET, ANY IMPLEMENTATION SCHEDULE FOR THE CONSTRUCTION, UPGRADING OR OPERATION OF WASTEWATER TREATMENT EQUIPMENT OR PRACTICES OR ANY OTHER ENVIRONMENTAL PROGRAMS THAT MAY AFFECT THE DISCHARGES DESCRIBED IN THIS APPLICATION? THIS INCLUDES, BUT IS NOT LIMITED TO, PERMIT CONDITIONS, ADMINISTRATIVE OR ENFORCEMENT ORDERS, ENFORCEMENT COMPLIANCE SCHEDULE LETTERS, STIPULATIONS, COURT ORDERS AND GRANT OR LOAN CONDITIONS.

☐ **YES** *(COMPLETE THE FOLLOWING TABLE)* ☑ **NO** *(GO TO 3.00)*

1. IDENTIFICATION OF CONDITION AGREEMENT, ETC.	2. AFFECTED OUTFALLS		3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE	
				A. REQUIRED	B. PROJECTED

B. OPTIONAL: YOU MAY ATTACH ADDITIONAL SHEETS DESCRIBING ANY ADDITIONAL WATER POLLUTION CONTROL PROGRAMS *(OR OTHER ENVIRONMENTAL PROJECTS THAT MAY AFFECT YOUR DISCHARGES)* YOU NOW HAVE UNDER WAY OR ARE YOU PLANNING. INDICATE WHETHER EACH PROGRAM IS NOW UNDER WAY OR PLANNED, AND INDICATE YOUR ACTUAL OR PLANNED SCHEDULES FOR CONSTRUCTION.

☐ **MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED.**

3.00 INTAKE AND EFFLUENT CHARACTERISTICS

A. & B. SEE INSTRUCTIONS BEFORE PROCEEDING – COMPLETE ONE TABLE FOR EACH OUTFALL – ANNOTATE THE OUTFALL NUMBER IN THE SPACE PROVIDED.
NOTE: TABLE 1 IS INCLUDED ON SEPARATE SHEETS NUMBERED FROM PAGE 6 TO PAGE 7.

C. USE THE SPACE BELOW TO LIST ANY OF THE POLLUTANTS LISTED IN PART B OF THE INSTRUCTIONS, WHICH YOU KNOW OR HAVE REASON TO BELIEVE IS DISCHARGED OR MAY BE DISCHARGED FROM ANY OUTFALL. FOR EVERY POLLUTANT YOU LIST, BRIEFLY DESCRIBE THE REASONS YOU BELIEVE IT TO BE PRESENT AND REPORT ANY ANALYTICAL DATA IN YOUR POSSESSION.

1. POLLUTANT	2. SOURCE	1. POLLUTANT	2. SOURCE
Chlorine	Cooling Tower Overflow		
Flouride	Cooling Tower Overflow		
Nitrate-Nitrite	Lawn Fertilizer		
Oil and Grease	Vehicle parking		
Aluminum	Raw Material		
Iron	Raw Material		
Phosphorus	Lawn Fertilizer		
Titanium	Raw Material		

3.10 BIOLOGICAL TOXICITY TESTING DATA

DO YOU HAVE ANY KNOWLEDGE OR REASON TO BELIEVE THAT ANY BIOLOGICAL TEST FOR ACUTE OR CHRONIC TOXICITY HAS BEEN MADE ON ANY OF YOUR DISCHARGES OR ON RECEIVING WATER IN RELATION TO YOUR DISCHARGE WITHIN THE LAST THREE YEARS?

☑ YES (IDENTIFY THE TEST(S) AND DESCRIBE THEIR PURPOSES BELOW.) ☐ NO (GO TO 3.20)

Whole Effluent Toxicity Test performed at Outfall #001. Permit requirement.

3.20 CONTRACT ANALYSIS INFORMATION

WERE ANY OF THE ANALYSES REPORTED PERFORMED BY A CONTRACT LABORATORY OR CONSULTING FIRM?

☑ **YES** *(LIST THE NAME, ADDRESS AND TELEPHONE NUMBER OF AND POLLUTANTS ANALYZED BY EACH SUCH LABORATORY OR FIRM BELOW.)* ☐ **NO** *(GO TO 3.30)*

A. NAME	B. ADDRESS	C. TELEPHONE *(area code and number)*	D. POLLUTANTS ANALYZED *(list)*
AECOM	4303 West LaPorte Avenue, Fort Collins, Colorado, 80521-2154	970-416-0916	WET

3.30 CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the information is true, accurate and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

NAME AND OFFICIAL TITLE (TYPE OR PRINT)	TELEPHONE NUMBER WITH AREA CODE
Mike Dwyer, Director \ Environment, Health, and Safety	(314) 777-9238
SIGNATURE (SEE INSTRUCTIONS)	DATE SIGNED
Mike A Dwyer	3/18/13

PLEASE PRINT OR TYPE. You may report some or all of this information on separate sheet instead of completing these pages.
(Use the same format)
SEE INSTRUCTIONS

FORM C
TABLE 1 FOR 3.00 ITEM A AND B

INTAKE AND EFFLUENT CHARACTERISTICS

OUTFALL NO. 004

PART A – You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT							3. UNITS *(specify if blank)*		4. INTAKE *(optional)*		
	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE *(if available)*		C. LONG TERM AVRG. VALUE *(if available)*		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
A. Biochemical Oxygen Demand (BOD)	<5	<37.5	n/a	n/a	n/a	n/a	1	mg/l	lb			
B. Chemical Oxygen Demand (COD)	168	1260	n/a	n/a	79.5	25	4	mg/l.	lb			
C. Total organic Carbon (TOC)	2.9	21.8	n/a	n/a	n/a	n/a	1	mg/l	lb			
D. Total Suspended Solids (TSS)	130	975	n/a	n/a	32	10.24	4	mg/l.	lb			
E. Ammonia *(as N)*	0.15	1.13	n/a	n/a	n/a	n/a	1	mg/l	lb			
F. Flow	VALUE 0.9		VALUE		VALUE 0.038					VALUE		
G. Temperature *(winter)*	VALUE 15		VALUE		VALUE 11			°C		VALUE		
H. Temperature *(summer)*	VALUE 22		VALUE		VALUE 21		4	°C		VALUE		
I. pH	MINIMUM 6.9	MAXIMUM 8.0	MINIMUM	MAXIMUM				STANDARD UNITS				

PART B – Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2-a for any pollutant, you must provide the results for at least one analysis for that pollutant. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	A. BELIEVED PRESENT	B. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE *(if available)*		C. LONG TERM AVRG. VALUE *(if available)*		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
A. Bromide (24959-67-9)		x												
B. Chlorine Total Residual	x		<0.05	0.375	n/a	n/a	n/a	n/a	1	mg/l	lb			
C. Color		x												
D. Fecal Coliform		x												
E. Fluoride (16984-48-8)	x		<0.1	<0.75	n/a	n/a	n/a	n/a	1	mg/l	lb			
F. Nitrate—Nitrate *(as N)*	x		0.155	1.16	n/a	n/a	n/a	n/a	1	mg/l	lb			

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	A. BELIEVED PRESENT	B. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE *(if available)*		C. LONG TERM AVRG. VALUE *(if available)*		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
G. Nitrogen Total Organic *(as N)*	x		1.15	8.6	n/a	n/a	n/a	n/a	1	mg/l	lb			
H. Oil and Grease	x		<6	45	n/a	n/a	<6	1.9	4	mg/l.	lb			
I. Phosphorus *(as P)* Total (7723-14-0)	x		0.088	0.66	n/a	n/a	n/a	n/a	1	mg/l	lb			
J. Sulfate *(as SO^4)* (14808-79-8)		x												
K. Sulfide *(as S)*		x												
L. Sulfite (as SO^3) (14265-45-3)		x												
M. Surfactants		x												
N. Aluminum Total (7429-90-5)	x		0.805	6.04	n/a	n/a	n/a	n/a	1	mg/l	lb			
O. Barium Total (7440-39-3)		x												
P. Boron Total (7440-42-8)		x												
Q. Cobalt Total (7440-48-4)		x												
R. Iron Total (7439-89-6)	x		0.761	5.7	n/a	n/a	n/a	n/a	1	mg/l	lb			
S. Magnesium Total (7439-95-4)		x												
T. Molybdenum Total (7439-98-7)		x												
U. Manganese Total (7439-96-5)		x												
V. Tin Total (7440-31-5)		x												
W. Titanium Total (7440-32-6)	x		0.0319	0.24	n/a	n/a	n/a	n/a	1	mg/l	lb			

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	A. BELIEVED PRESENT	B. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE *(if available)*		C. LONG TERM AVRG. VALUE *(if available)*		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, AND TOTAL PHENOLS														
1M. Antimony, Total (7440-36-9)		X												
2M. Beryllium, Total (7440-41-7)		X												
3M. Magnesium, Total (7439-95-4)		X												
4M. Molybdenum, Total (7439-98-7)		X												
5M. Tin, Total (7440-31-5)		X												
6M. Titanium, Total (7440-32-6)	X		0.0319	0.24	n/a	n/a	n/a	n/a	1	mg/l	lb			
7M. Mercury, Total (7439-97-6)		X												
8M. Selenium, Total (7782-49-2)		X												
9M. Thallium, Total (7440-28-0)		X												
10M. Phenols, Total		X												
RADIOACTIVITY														
(1) Alpha Total		X												
(2) Beta Total		X												
(3) Radium Total		X												
(4) Radium 226 Total		X												

MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM, WATER POLLUTION BRANCH

FORM D – APPLICATION FOR DISCHARGE PERMIT PRIMARY INDUSTRIES

FOR AGENCY USE ONLY	
CHECK NO.	
DATE RECEIVED	FEE SUBMITTED

NOTE: DO NOT ATTEMPT TO COMPLETE THIS FORM BEFORE READING THE ACCOMPANYING INSTRUCTIONS

1.00 NAME OF FACILITY

The Boeing Company - St. Charles

1.10 THIS FACILITY IS NOW IN OPERATION UNDER MISSOURI OPERATING PERMIT NUMBER

MO - 135208

This form is to be filled out in addition to forms A and C "Application for Discharge Permit" for the Industries listed below.

INDUSTRY CATEGORY

Adhesives and sealants
Aluminum forming
Auto and other laundries
Battery manufacturing
Coal mining
Coil coating
Copper forming
Electric and electronic compounds
Electroplating
Explosives manufacturing
Foundries
Gum and wood chemicals
Inorganic chemicals manufacturing
Iron and steel manufacturing
Leather tanning and finishing
Landfill
Mechanical products manufacturing
Nonferrous metals manufacturing
Ore mining
Organic chemicals manufacturing
Paint and ink formulation
Pesticides
Petroleum refining
Pharmaceutical preparations
Photographic equipment and supplies
Plastic and synthetic materials manufacturing
Plastic processing
Porcelain enameling
Printing and publishing
Pulp and paperboard mills
Rubber processing
Soap and detergent manufacturing
Steam electric power plants
Textile mills
Timber products processing

APPLICATION FOR DISCHARGE PERMIT
FORM D – PRIMARY INDUSTRIES

TABLE II	
NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	004

1.30 If you are a primary industry and this outfall contains process wastewater, refer to Table A in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-A for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. Mark "X" in column 2-B for each pollutant you know or have reason to believe is present. Mark "X" in column 2-C for each pollutant you believe to be absent. If you mark either columns 2-A or 2-B for any pollutant, you must provide the results of at least one analysis for that pollutant. Note that there are seven pages to this part, please review each carefully. Complete one table (*all seven pages*) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER (*If available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-9)			✓												
2M. Beryllium, Total (7440-41-7)			✓												
3M. Magnesium Total (7439-95-4)			✓												
4M. Molybdenum Total (7439-98-7)			✓												
5M. Tin Total (7440-31-5)			✓							1	mg/l	lb			
6M. Titanium Total (7440-32-6)		✓		0.0319	0.24	n/a	n/a	n/a	n/a	1	mg/l	lb			
7M. Mercury, Total (7439-97-6)			✓												
8M. Selenium, Total (7782-49-2)			✓												
9M. Thallium, Total (7440-28-0)			✓												
10M. Phenols, Total		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
DIOXIN															
2,3,7,8 – Tetra – chlorodibenzo-P-Dioxin (1764-01-6)			✓	**DESCRIBE RESULTS**											

CONTINUED FROM PAGE 3

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TES-ING RE-QUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – VOLATILE COMPOUNDS															
1V. Acrolein (107-02-8)			✓												
2V. Acrylonitrile (107-13-1)			✓												
3V. Benzene (71-43-2)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
4V. Bis (*Chloromethyl*) Ether (542-88-1)			✓												
5V. Bromoform (75-25-2)			✓												
6V. Carbon Tetrachloride (56-23-5)			✓												
7V. Chlorobenzene (108-90-7)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
8V. Chlorodibromomethane (124-48-1)			✓												
9V. Chloroethane (75-00-3)			✓												
10V. 2-Chloroethylvinyl Ether (110-75-8)			✓												
11V. Chloroform (67-66-3)			✓												
12V. Dichlorobromomethane (75-27-4)			✓												
13V. Dichloro-difluoromethane (75-71-8)			✓												
14V. 1,1 – Dichloroethane (75-34-3)			✓												
15V. 1,2 – Dichloroethane (107-06-2)			✓												
16V. 1,1 – Dichloroethylene (75-35-4)			✓												
17V. 1,2 – Dichloropropane (78-87-5)			✓												
18V. 1,2 – Dichloropropylene (542-75-6)			✓												
19V. Ethylbenzene (100-41-4)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
20V. Methyl Bromide (74-83-9)			✓												
21V. Methyl Chloride (74-87-3)			✓												

CONTINUE ON PAGE 4

NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	004

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING RE-QUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC.MS FRACTION – VOLATILE COMPOUNDS *(continued)*															
22V. Methylene Chloride (75-09-2)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
23V. 1,1,2,2 – Tetra-chloroethane (79-34-5)			✓												
24V. Tetrachloroethylene (127-18-4)			✓												
25V. Toluene (108-88-3)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
26V. 1,2 – Trans Dichloroethylene (156-60-5)			✓												
27V. 1,1,1 – Tri – chloroethane (71-55-6)			✓												
28V. 1,1,2 – Tri-chloroethane (79-00-5)			✓												
29V. Trichloro – ethylene (79-01-6)			✓												
30V. Trichloro – fluoromethane (75-69-4)			✓												
31V. Vinyl Chloride (75-01-4)			✓												
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2 – Chlorophenol (95-57-8)			✓												
2A. 2,4 – Dichloro – phenol (120-83-2)			✓												
3A. 2,4 – Dimethyl – phenol (105-67-9)			✓												
4A. 4,6 – Dinitro - O-Cresol (534-52-1)			✓												
5A. 2,4 – Dinitro – phenol (51-28-5)			✓												
6A. 2-Nitrophenol (88-75-5)			✓												
7A. 4-Nitrophenol (100-02-7)			✓												
8A. P – Chloro – M Cresol (59-50-7)			✓												
9A. Pentachloro – phenol (87-86-5_			✓												
10A. Phenol (108-952)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
11A. 2,4,6 – Trichloro-phenol (88-06-2)			✓												

CONTINUE ON PAGE 5

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)			✓												
2B. Acenaphtylene (208-96-8)			✓												
3B. Anthracene (120-12-7)			✓												
4B. Benzidine (92-87-5)			✓												
5B. Benzo (a) Anthracene (56-55-3)			✓												
6B. Benzo (a) Pyrene (50-32-8)			✓												
7B. 3,4 – Benzofluoranthene (205-99-2)			✓												
8B. Benzo (ghi) Perylene (191-24-2)			✓												
9B. Benzo (k) Fluoranthene (207-08-9)			✓												
10B. Bis (2-Chloroethoxy) Methane (111-91-1)			✓												
11B. Bis (2-Chloroethyl) Ether (111-44-4)			✓												
12B. Bis (2-Chloroisopropyl) Ether (39638-32-9)			✓												
13B. Bis (2-Ethylhexyl) Phthalate (117-81-7)			✓												
14B. 4-Bromophenyl Phenyl Ether (101-55-3)			✓												
15B. Butyl Benzyl Phthalate (85-68-7)			✓												
16B. 2-Chloronaphthalene (91-58-7)			✓												
17B. 4-Chlorophenyl Phenyl Ether (7005-72-3)			✓												
18B. Chrysene (218-01-9)			✓												
19B. Dibenzo (a.h) Anthracene (53-70-3)			✓												
20B. 1,2 – Dichlorobenzene (95-50-1)			✓												
21B. 1,3 – Dichlorobenzene (541-73-1)			✓												

CONTINUE ON PAGE 6

CONTINUED FROM THE PAGE 5

NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	004

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS *(continued)*															
22B. 1, 4-Dichlorobenzene (106-46-7)			✓												
23B. 3, 3'-Dichlorobenzidine (91-94-1)			✓												
24B. Diethyl Phthalate (84-66-2)			✓												
25B. Dimethyl Phthalate (131-11-3)			✓												
26B. Di-N-butyl Phthalate (84-74-2)			✓												
27B. 2,4-Dinitrotoluene (121-14-2)			✓												
28B. 2,6-Dinitrotoluene (606-20-2)			✓												
29B. Di-N-Octyl Phthalate (117-84-0)			✓												
30B. 1,2-Diphenylhydrazine (*as Azobenzene*) (122-66-7)			✓												
31B. Fluoranthene (206-44-0)			✓												
32B. Fluorene (86-73-7)			✓												
33B. Hexachlorobenzene (87-68-3)			✓												
34B. Hexachlorobutadiene (87-68-3)			✓												
35B. Hexachloro-cyclopentadiene (77-47-4)			✓												
36B. Hexachloroethane (67-72-1)			✓												
37B. Indeno (1,2,3-c-d) Pyrene (193-39-5)			✓												
38B. Isophorone (78-59-1)			✓												
39B. Naphthalene (91-20-3)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
40B. Nitrobenzene (98-95-3)			✓												
41B. N-Nitro-sodimethylamine (62-75-9)			✓												

CONTINUE ON PAGE 7

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS *(continued)*															
42B. N-Nitroso N-Propylamine (621-64-7)			✓												
43B. N-Nitro-sodiphenylamine (86-30-6)			✓												
44B. Phenanthrene (85-01-8)			✓												
45B. Pyrene (129-00-0)			✓												
46B. 1,2,4-Tri chlorobenzene (120-82-1)			✓												
GC/MS FRACTION - PESTICIDES															
1P. Aldrin (309-00-2)			✓												
2P. α-BHC (319-84-6)			✓												
3P. β-BHC (319-84-6)			✓												
4P. γ-BHC (58-89-9)			✓												
5P. δ-BHC (319-86-8)			✓												
6P. Chlordane (57-74-9)			✓												
7P. 4,4'-DDT (50-29-3)			✓												
8P. 4,4'-DDE (72-55-9)			✓												
9P. 4,4'-DDD (72-54-8)			✓												
10P. Dieldrin (60-57-1)			✓												
11P. α-Endosulfan (115-29-7)			✓												
12P. β-Endosultan (115-29-7)			✓												
13P. Endosulfan Sulfate (1031-07-8)			✓												
14P. Endrin (72-20-8)			✓												
15P. Endrin Aldehyde (7421-93-4)			✓												
16P. Heptachlor (76-44-8)			✓												

 CONTINUED ON PAGE 8

CONTINUED FROM THE PAGE 7

NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	004

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – PESTICISES *(continued)*															
17P. Heptachlor Epoxide (1024-57-3)			✓												
18P. PCB-1242 (53469-21-9)			✓												
19P. PBC-1254 (11097-69-1)			✓												
20P. PCB-1221 (11104-28-2)			✓												
21P. PCB-1232 (11141-16-5)			✓												
22P. PCB-1248 (12672-29-6)			✓												
23P. PCB-1260 (11096-82-5)			✓												
24P. PCB-1016 (12674-11-2)			✓												
25P. Toxaphene (8001-35-2)			✓												
J. RADIOACTIVITY															
(1) Alpha Total			✓												
(2) Beta Total			✓												
(3) Radium Total			✓												
(4) Radium 226 Total			✓												

2.00 POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

A. IS ANY POLLUTANT LISTED IN ITEM 1.30 A SUBSTANCE OR A COMPONENT OF A SUBSTANCE WHICH YOU DO OR EXPECT THAT YOU WILL OVER THE NEXT FIVE YEARS USE OR MANUFACTURE AS AN INTERMEDIATE OR FINAL PRODUCT OR BYPRODUCT?

☐ **YES** *(LIST ALL SUCH POLLUTANTS BELOW)* ■ **NO** *(GO TO B)*

B. ARE YOUR OPERATIONS SUCH THAT YOUR RAW MATERIALS, PROCESSES OR PRODUCTS CAN REASONABLE BE EXPECTED TO VARY SO THAT YOUR DISCHARGES OF POLLUTANTS MAY DURING THE NEXT FIVE YEARS EXCEED TWO TIMES THE MAXIMUM VALUES REPORTED IN ITEM 1.30?

☐ **YES** *(COMPLETE C BELOW)* ■ **NO** *(GO TO SECTION 3.00)*

C. IF YOU ANSWERED "YES" TO ITEM B, EXPLAIN BELOW AND DESCRIBE IN DETAIL THE SOURCES AND EXPECTED LEVELS OF SUCH POLLUTANTS THAT YOU ANTICIPATE WILL BE DISCHARGED FROM EACH OUTFALL OVER THE NEXT FIVE YEARS, TO THE BEST OF YOUR ABILIITY AT THIS TIME. CONTINUE ON ADDITIONAL SHEETS IF YOU NEED MORE SPACE.

3.00 CONTRACT ANALYSIS INFORMATION

WERE ANY OF THE ANALYSES REPORTED IN 1.30 PERFORMED BY A CONTRACT LABORATORY OR CONSULTING FIRM?

■ **YES** *(LIST THE NAME, ADDRESS, AND TELEPHONE NUMBER OF, AND ANALYZED BY, EACH SUCH LABORATORY OR FIRM BELOW)*
☐ **NO** *(GO TO SECTION 4.00)*

A. NAME	B. ADDRESS	C. TELEPHONE NUMBER WITH AREA CODE	D. POLLUTANTS ANALYZED *(list)*
Teklab, Inc.	5445 Horseshoe Lake Road,	(618) 344-1005	All Listed
	Collinsville, ILL. 62234		

4.00 CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the 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.

NAME AND OFFICIAL TITLE (TYPE OR PRINT)	TELEPHONE NUMBER WITH AREA CODE
Mike Dwyer, Director \ Environment, Health, and Safety	(314) 777-9238
SIGNATURE	DATE SIGNED
	2/18/17

INSTRUCTIONS FOR FILLING OUT APPLICATION FOR DISCHARGE PERMIT FORM D – PRIMARY INDUSTRIES

All blanks must be filled in when the applications is submitted to the appropriate Regional Office (see map). The form **must be signed** as indicated.

This application is to be completed only for wastewater facilities from which there is a discharge. Include any facility that it is possible to discharge from even if normally there is no discharge. If this form is not adequate for you to describe your existing operation, the sufficient information should be attached so that an evaluation of the discharge can be made.

1.00 Name of Facility – By what title or name is this facility known locally?

1.10 and 1.20 Self-explanatory.

1.30 GENERAL INSTRUCTIONS. For some pollutants, you may be required to mark "X" in the "Testing Required" column (column 2-A) and test (sample and analyze) and report the levels of the pollutants in your discharge whether or not you expect them to be present in your discharge. For all others, you must mark "X" in either the "Believe Present" column or the "Believe Absent" column (column 2-B or 2-C) based on your best estimate, and test for those which you believe to be present.

Base your determination that a pollutant is present in or absent from your discharge on your knowledge of your raw materials, maintenance chemicals, intermediate and final products and byproducts and any previous analyses known to you of your effluent or of any similar effluent. (For example, if you manufacture pesticides, you should expect those pesticides to be present in contaminated storm water runoff). If you would expect a pollutant to be present solely as a result of its presence in your intake water, you must mark "Believe Present" but you are not required to analyze for that pollutant. Instead, mark an "X" in the "Intake" column.

REPORTING. All levels must be reported as concentration and as total mass. You may report some or all of the required data by attaching separate sheets of paper instead of filling out Table II if the separate sheets contain all the required information in a format which is consistent with Table II in spacing and in identification of pollutants and columns. (For example, the data system used in your GC/MS analysis may be able to print data in the proper format). Use the following abbreviations in the columns headed "Units". (column 4)

CONCENTRATION M

ppm.....parts per million
mg/1.....milligrams per liter
ppb.....parts per billion
µg/1.....micrograms per liter

ASS

lbs.....pounds
ton.....tons (English tons)
mg.....milligrams
g.....grams
kg.....kilograms
T.....tonnes (metric tons)

If you measure only one daily value, complete only the "Maximum Daily Values" columns and insert "1" into the "Number of Analyses" columns (columns 3-A and 3-D). Missouri Department of Natural Resources may require you to conduct additional analyses to further characterize your discharges.

For composite samples, the daily value is the total mass or average concentration found in a composite sample taken over the operating hours of the facility during a 24 hour period; for grab samples, the daily value is the arithmetic or flow-weighted total mass or average concentration found in a series of at least four grab samples taken over the operating hours of the facility during a 24 hour period.

If you measure more than one daily value for a pollutant, determine the average of all values within the last year and report the concentration and mass under the "Long Term Average Values" column (column 3-C), and the total number of daily values under the "Number of Analyses" columns (column 3-D). Also, determine the average of all daily values taken during each calendar month, and report the highest average under the "Maximum 30 Day Value" column (column 3-B)

MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM, WATER POLLUTION BRANCH

FORM C – APPLICATION FOR DISCHARGE PERMIT – MANUFACTURING, COMMERCIAL, MINING, SILVICULTURE OPERATIONS, PROCESS & STORM WATER

FOR AGENCY USE ONLY	
CHECK NO.	
DATE RECEIVED	FEE SUBMITTED

TE: DO NOT ATTEMPT TO COMPLETE THIS FORM BEFORE READING THE ACCOMPANYING INSTRUCTIONS

1.00 NAME OF FACILITY

The Boeing Company - St. Charles

1.10 THIS FACILITY IS NOW IN OPERATION UNDER MISSOURI OPERATING PERMIT NUMBER

MO-0135208

1.20 THIS IS A NEW FACILITY AND WAS CONSTRUCTED UNDER MISSOURI CONSTRUCTION PERMIT NUMBER (COMPLETE ONLY IF THIS FACILITY DOES NOT HAVE AN OPERATING PERMIT).

2.00 LIST THE STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODES APPLICABLE TO YOUR FACILITY (FOUR DIGIT CODE)

A. FIRST 3721 B. SECOND _____

C. THIRD _____ D. FOURTH _____

2.10 FOR EACH OUTFALL GIVE THE LEGAL DESCRIPTION.

OUTFALL NUMBER (LIST) _____ 1/4 _____ 1/4 SEC _____ T _____ R _____ _____ COUNTY

2.20 FOR EACH OUTFALL LIST THE NAME OF THE RECEIVING WATER

OUTFALL NUMBER (LIST)	RECEIVING WATER
001, 002, 003, 004, 005	Missouri River

2.30 BRIEFLY DESCRIBE THE NATURE OF YOUR BUSINESS

Military contractor for the manufacturing and assembly of combat aircraft and missile parts.

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent and treatment units labeled to correspond to the more detailed descriptions in item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, public sewers and outfalls. If a water balance cannot by determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of
1. All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water and storm water runoff.
2. The average flow contributed by each operation.
3. The treatment received by the wastewater.

Continue on additional sheets if necessary.

1. OUTFALL NO.	2. OPERATION(S) CONTRIBUTING FLOW		3. TREATMENT	
(LIST)	A. OPERATION (LIST)	B. AVERAGE FLOW (INCLUDE UNITS) (MAXIMUM FLOW)	A. DESCRIPTION	B. LIST CODES FROM TABLE A
001	Storm Water only	N/A	N/A	N/A
002	Storm Water only	N/A	N/A	N/A
003	Storm Water only	N/A	N/A	N/A
004	Storm Water only	N/A	N/A	N/A
005	Storm Water only	N/A	N/A	N/A

2.40 CONTINUED

C. EXCEPT FOR STORM RUNOFF, LEAKS OR SPILLS, ARE ANY OF THE DISCHARGES DESCRIBED IN ITEMS A OR B INTERMITTENT OR SEASONAL?

☐ **YES** *(COMPLETE THE FOLLOWING TABLE)* ☑ **NO** *(GO TO SECTION 2.50)*

1. OUTFALL NUMBER *(list)*	2. OPERATION(S) CONTRIBUTING FLOW *(list)*	3. FREQUENCY		4. FLOW				C. DURATION *(in days)*
				A. FLOW RATE *(in mgd)*		B. TOTAL VOLUME (specify with units)		
		A. DAYS PER WEEK *(specify average)*	B. MONTHS PER YEAR *(specify average)*	1. LONG TERM AVERAGE	2. MAXIMUM DAILY	4. LONG TERM DAILY	3. MAXIMUM AVERAGE	

2.50 MAXIMUM PRODUCTION

A. DOES AN EFFLUENT GUIDELINE LIMITATION PROMULGATED BY EPA UNDER SECTION 304 OF THE CLEAN WATER ACT APPLY TO YOUR FACILITY?

☐ **YES** *(COMPLETE B.)* ☑ **NO** *(GO TO SECTION 2.60)*

B. ARE THE LIMITATIONS IN THE APPLICABLE EFFLUENT GUIDELINES EXPRESSED IN TERMS OF PRODUCTION (OF OTHER MEASURE OF OPERATION)?

☐ **YES** *(COMPLETE c.)* ☑ **NO** *(GO TO SECTION 2.60)*

C. IF YOU ANSWERED "YES" TO B. LIST THE QUANTITY THAT REPRESENTS AN ACTUAL MEASUREMENT OF YOUR MAXIMUM LEVEL OF PRODUCTION, EXPRESSED IN THE TERMS AND UNITS USED IN THE APPLICABLE EFFLUENT GUIDELINE AND INDICATE THE AFFECTED OUTFALLS.

1. MAXIMUM QUANTITY			2. AFFECTED OUTFALLS *(list outfall numbers)*
A. QUANTITY PER DAY	B. UNITS OF MEASURE	C. OPERATION, PRODUCT, MATERIAL, ETC. *(specify)*	

2.60 IMPROVEMENTS

A. ARE YOU NOW REQUIRED BY ANY FEDERAL, STATE OR LOCAL AUTHORITY TO MEET, ANY IMPLEMENTATION SCHEDULE FOR THE CONSTRUCTION, UPGRADING OR OPERATION OF WASTEWATER TREATMENT EQUIPMENT OR PRACTICES OR ANY OTHER ENVIRONMENTAL PROGRAMS THAT MAY AFFECT THE DISCHARGES DESCRIBED IN THIS APPLICATION? THIS INCLUDES, BUT IS NOT LIMITED TO, PERMIT CONDITIONS, ADMINISTRATIVE OR ENFORCEMENT ORDERS, ENFORCEMENT COMPLIANCE SCHEDULE LETTERS, STIPULATIONS, COURT ORDERS AND GRANT OR LOAN CONDITIONS.

☐ **YES** *(COMPLETE THE FOLLOWING TABLE)* ☑ **NO** *(GO TO 3.00)*

1. IDENTIFICATION OF CONDITION AGREEMENT, ETC.	2. AFFECTED OUTFALLS		3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE	
				A. REQUIRED	B. PROJECTED

B. OPTIONAL: YOU MAY ATTACH ADDITIONAL SHEETS DESCRIBING ANY ADDITIONAL WATER POLLUTION CONTROL PROGRAMS *(OR OTHER ENVIRONMENTAL PROJECTS THAT MAY AFFECT YOUR DISCHARGES)* YOU NOW HAVE UNDER WAY OR ARE YOU PLANNING. INDICATE WHETHER EACH PROGRAM IS NOW UNDER WAY OR PLANNED, AND INDICATE YOUR ACTUAL OR PLANNED SCHEDULES FOR CONSTRUCTION.

☐ **MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED.**

3.00 INTAKE AND EFFLUENT CHARACTERISTICS

A. & B. SEE INSTRUCTIONS BEFORE PROCEEDING – COMPLETE ONE TABLE FOR EACH OUTFALL – ANNOTATE THE OUTFALL NUMBER IN THE SPACE PROVIDED.
NOTE: TABLE 1 IS INCLUDED ON SEPARATE SHEETS NUMBERED FROM PAGE 6 TO PAGE 7.

C. USE THE SPACE BELOW TO LIST ANY OF THE POLLUTANTS LISTED IN PART B OF THE INSTRUCTIONS, WHICH YOU KNOW OR HAVE REASON TO BELIEVE IS DISCHARGED OR MAY BE DISCHARGED FROM ANY OUTFALL. FOR EVERY POLLUTANT YOU LIST, BRIEFLY DESCRIBE THE REASONS YOU BELIEVE IT TO BE PRESENT AND REPORT ANY ANALYTICAL DATA IN YOUR POSSESSION.

1. POLLUTANT	2. SOURCE	1. POLLUTANT	2. SOURCE
Chlorine	Cooling Tower Overflow		
Flouride	Cooling Tower Overflow		
Nitrate-Nitrite	Lawn Fertilizer		
Oil and Grease	Vehicle parking		
Aluminum	Raw Material		
Iron	Raw Material		
Phosphorus	Lawn Fertilizer		
Titanium	Raw Material		

3.10 BIOLOGICAL TOXICITY TESTING DATA

DO YOU HAVE ANY KNOWLEDGE OR REASON TO BELIEVE THAT ANY BIOLOGICAL TEST FOR ACUTE OR CHRONIC TOXICITY HAS BEEN MADE ON ANY OF YOUR DISCHARGES OR ON RECEIVING WATER IN RELATION TO YOUR DISCHARGE WITHIN THE LAST THREE YEARS?

☑ YES (IDENTIFY THE TEST(S) AND DESCRIBE THEIR PURPOSES BELOW.) ☐ NO (GO TO 3.20)

Whole Effluent Toxicity Test performed at Outfall #001. Permit requirement.

3.20 CONTRACT ANALYSIS INFORMATION

WERE ANY OF THE ANALYSES REPORTED PERFORMED BY A CONTRACT LABORATORY OR CONSULTING FIRM?

☑ **YES** *(LIST THE NAME, ADDRESS AND TELEPHONE NUMBER OF AND POLLUTANTS ANALYZED BY EACH SUCH LABORATORY OR FIRM BELOW.)* ☐ **NO** *(GO TO 3.30)*

A. NAME	B. ADDRESS	C. TELEPHONE *(area code and number)*	D. POLLUTANTS ANALYZED *(list)*
AECOM	4303 West LaPorte Avenue, Fort Collins, Colorado, 80521-2154	970-416-0916	WET

3.30 CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the information is true, accurate and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

NAME AND OFFICIAL TITLE (TYPE OR PRINT)	TELEPHONE NUMBER WITH AREA CODE
Mike Dwyer, Director \ Environment, Health, and Safety	(314) 777-9238
SIGNATURE (SEE INSTRUCTIONS)	DATE SIGNED
Mike A Dwyer	2/18/13

PLEASE PRINT OR TYPE. You may report some or all of this information on separate sheet instead of completing these pages.
(Use the same format)
SEE INSTRUCTIONS

FORM C
TABLE 1 FOR 3.00 ITEM A AND B

INTAKE AND EFFLUENT CHARACTERISTICS

OUTFALL NO. 005

PART A – You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT							3. UNITS *(specify if blank)*		4. INTAKE *(optional)*		
	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE *(if available)*		C. LONG TERM AVRG. VALUE *(if available)*		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
A. Biochemical Oxygen Demand (BOD)	<5	<12	n/a	n/a	n/a	n/a	1	mg/l	lb			
B. Chemical Oxygen Demand (COD)	82	197	n/a	n/a	58	4.6	4	mg/l.	lb			
C. Total organic Carbon (TOC)	2.3	5.5	n/a	n/a	n/a	n/a	1	mg/l	lb			
D. Total Suspended Solids (TSS)	11	26	n/a	n/a	8.3	0.7	4	mg/l.	lb			
E. Ammonia *(as N)*	0.21	0.50	n/a	n/a	n/a	n/a	1	mg/l	lb			
F. Flow	VALUE 0.288		VALUE		VALUE 0.01			mgd.		VALUE		
G. Temperature *(winter)*	VALUE 12.8		VALUE		VALUE 11			°C		VALUE		
H. Temperature *(summer)*	VALUE 21		VALUE		VALUE 18.9			°C		VALUE		
I. pH	MINIMUM 6.8	MAXIMUM 8.4	MINIMUM	MAXIMUM				STANDARD UNITS				

PART B – Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2-a for any pollutant, you must provide the results for at least one analysis for that pollutant. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	A. BELIEVED PRESENT	B. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE *(if available)*		C. LONG TERM AVRG. VALUE *(if available)*		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
A. Bromide (24959-67-9)		x												
B. Chlorine Total Residual	x		<0.1	<0.24	n/a	n/a	n/a	n/a	1	mg/l	lb			
C. Color		x												
D. Fecal Coliform		x												
E. Fluoride (16984-48-8)	x		<0.1	<0.24	n/a	n/a	n/a	n/a	1	mg/l	lb			
F. Nitrate—Nitrate *(as N)*	x		0.318	0.76	n/a	n/a	n/a	n/a	1	mg/l	lb			

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	A. BELIEVED PRESENT	B. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE *(if available)*		C. LONG TERM AVRG. VALUE *(if available)*		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
G. Nitrogen Total Organic *(as N)*	x		1.99	4.8	n/a	n/a	n/a	n/a	1	mg/l	lb			
H. Oil and Grease	x		<6	14	n/a	n/a	<5.5	0.4	4	mg/l	lb			
I. Phosphorus *(as P)* Total (7723-14-0)	x		0.092	0.22	n/a	n/a	n/a	n/a	1	mg/l	lb			
J. Sulfate *(as SO^4)* (14808-79-8)		x												
K. Sulfide *(as S)*		x												
L. Sulfite (as SO^3) (14265-45-3)		x												
M. Surfactants		x												
N. Aluminum Total (7429-90-5)	x		0.662	1.6	n/a	n/a	n/a	n/a	1	mg/l	lb			
O. Barium Total (7440-39-3)		x												
P. Boron Total (7440-42-8)		x												
Q. Cobalt Total (7440-48-4)		x												
R. Iron Total (7439-89-6)	x		0.662	1.6	n/a	n/a	n/a	n/a	1	mg/l	lb			
S. Magnesium Total (7439-95-4)		x												
T. Molybdenum Total (7439-98-7)		x												
U. Manganese Total (7439-96-5)		x												
V. Tin Total (7440-31-5)		x												
W. Titanium Total (7440-32-6)	x		0.0307	0.074	n/a	n/a	n/a	n/a	1	mg/l	lb			

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	A. BELIEVED PRESENT	B. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE *(if available)*		C. LONG TERM AVRG. VALUE *(if available)*		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, AND TOTAL PHENOLS														
1M. Antimony, Total (7440-36-9)		X												
2M. Beryllium, Total (7440-41-7)		X												
3M. Magnesium, Total (7439-95-4)		X												
4M. Molybdenum, Total (7439-98-7)		X												
5M. Tin, Total (7440-31-5)		X												
6M. Titanium, Total (7440-32-6)	X		0.0307	0.074	n/a	n/a	n/a	n/a	1	mg/l	lb			
7M. Mercury, Total (7439-97-6)		X												
8M. Selenium, Total (7782-49-2)		X												
9M. Thallium, Total (7440-28-0)		X												
10M. Phenols, Total		X												
RADIOACTIVITY														
(1) Alpha Total		X												
(2) Beta Total		X												
(3) Radium Total		X												
(4) Radium 226 Total		X												

MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM, WATER POLLUTION BRANCH

FORM D – APPLICATION FOR DISCHARGE PERMIT PRIMARY INDUSTRIES

FOR AGENCY USE ONLY	
CHECK NO.	
DATE RECEIVED	FEE SUBMITTED

NOTE: DO NOT ATTEMPT TO COMPLETE THIS FORM BEFORE READING THE ACCOMPANYING INSTRUCTIONS

1.00 NAME OF FACILITY

The Boeing Company - St. Charles

1.10 THIS FACILITY IS NOW IN OPERATION UNDER MISSOURI OPERATING PERMIT NUMBER

MO - 135208

This form is to be filled out in addition to forms A and C "Application for Discharge Permit" for the Industries listed below.

INDUSTRY CATEGORY

Adhesives and sealants
Aluminum forming
Auto and other laundries
Battery manufacturing
Coal mining
Coil coating
Copper forming
Electric and electronic compounds
Electroplating
Explosives manufacturing
Foundries
Gum and wood chemicals
Inorganic chemicals manufacturing
Iron and steel manufacturing
Leather tanning and finishing
Landfill
Mechanical products manufacturing
Nonferrous metals manufacturing
Ore mining
Organic chemicals manufacturing
Paint and ink formulation
Pesticides
Petroleum refining
Pharmaceutical preparations
Photographic equipment and supplies
Plastic and synthetic materials manufacturing
Plastic processing
Porcelain enameling
Printing and publishing
Pulp and paperboard mills
Rubber processing
Soap and detergent manufacturing
Steam electric power plants
Textile mills
Timber products processing

APPLICATION FOR DISCHARGE PERMIT
FORM D – PRIMARY INDUSTRIES

TABLE II	
NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	005

1.30 If you are a primary industry and this outfall contains process wastewater, refer to Table A in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-A for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. Mark "X" in column 2-B for each pollutant you know or have reason to believe is present. Mark "X" in column 2-C for each pollutant you believe to be absent. If you mark either columns 2-A or 2-B for any pollutant, you must provide the results of at least one analysis for that pollutant. Note that there are seven pages to this part, please review each carefully. Complete one table (*all seven pages*) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TEST-ING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-9)			✓												
2M. Beryllium, Total (7440-41-7)	—		✓												
3M. Magnesium Total (7439-95-4)		—	✓												
4M. Molybdenum Total (7439-98-7)	—		✓												
5M. Tin Total (7440-31-5)		—	✓												
6M. Titanium Total (7440-32-6)		✓		0.0307	0.074	n/a	n/a	n/a	n/a	1	mg/l	lb			
7M. Mercury, Total (7439-97-6)			✓												
8M. Selenium, Total (7782-49-2)			✓												
9M. Thallium, Total (7440-28-0)			✓												
10M. Phenols, Total		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
DIOXIN															
2,3,7,8 – Tetra – chlorodibenzo-P-Dioxin (1764-01-6)			✓	**DESCRIBE RESULTS**											

CONTINUED FROM PAGE 3

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCENTRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – VOLATILE COMPOUNDS															
1V. Acrolein (107-02-8)			✓												
2V. Acrylonitrile (107-13-1)			✓												
3V. Benzene (71-43-2)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
4V. Bis (*Chloromethyl*) Ether (542-88-1)			✓												
5V. Bromoform (75-25-2)			✓												
6V. Carbon Tetrachloride (56-23-5)			✓												
7V. Chlorobenzene (108-90-7)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
8V. Chlorodibromomethane (124-48-1)			✓												
9V. Chloroethane (75-00-3)			✓												
10V. 2-Chloroethylvinyl Ether (110-75-8)			✓												
11V. Chloroform (67-66-3)			✓												
12V. Dichlorobromomethane (75-27-4)			✓												
13V. Dichloro-difluoromethane (75-71-8)			✓												
14V. 1,1 – Dichloroethane (75-34-3)			✓												
15V. 1,2 – Dichloroethane (107-06-2)			✓												
16V. 1,1 – Dichloroethylene (75-35-4)			✓												
17V. 1,2 – Dichloropropane (78-87-5)			✓												
18V. 1,2 – Dichloropropylene (542-75-6)			✓												
19V. Ethylbenzene (100-41-4)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
20V. Methyl Bromide (74-83-9)			✓												
21V. Methyl Chloride (74-87-3)			✓												

CONTINUE ON PAGE 4

NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	005

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING RE-QUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC.MS FRACTION – VOLATILE COMPOUNDS *(continued)*															
22V. Methylene Chloride (75-09-2)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
23V. 1,1,2,2 – Tetra-chloroethane (79-34-5)			✓												
24V. Tetrachloroethylene (127-18-4)			✓												
25V. Toluene (108-88-3)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb			
26V. 1,2 – Trans Dichloroethylene (156-60-5)			✓												
27V. 1,1,1 – Tri – chloroethane (71-55-6)			✓												
28V. 1,1,2 – Tri-chloroethane (79-00-5)			✓												
29V. Trichloro – ethylene (79-01-6)			✓												
30V. Trichloro – fluoromethane (75-69-4)			✓												
31V. Vinyl Chloride (75-01-4)			✓												
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2 – Chlorophenol (95-57-8)			✓												
2A. 2,4 – Dichloro – phenol (120-83-2)			✓												
3A. 2,4 – Dimethyl – phenol (105-67-9)			✓												
4A. 4,6 – Dinitro - O-Cresol (534-52-1)			✓												
5A. 2,4 – Dinitro – phenol (51-28-5)			✓												
6A. 2-Nitrophenol (88-75-5)			✓												
7A. 4-Nitrophenol (100-02-7)			✓												
8A. P – Chloro – M Cresol (59-50-7)			✓												
9A. Pentachloro – phenol (87-86-5_			✓												
10A. Phenol (108-952)		✓		ND	ND	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
11A. 2,4,6 – Trichloro-phenol (88-06-2)			✓												

CONTINUE ON PAGE 5

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)			✓												
2B. Acenaphtylene (208-96-8)			✓												
3B. Anthracene (120-12-7)			✓												
4B. Benzidine (92-87-5)			✓												
5B. Benzo (a) Anthracene (56-55-3)			✓												
6B. Benzo (a) Pyrene (50-32-8)			✓												
7B. 3,4 – Benzofluoranthene (205-99-2)			✓												
8B. Benzo (ghi) Perylene (191-24-2)			✓												
9B. Benzo (k) Fluoranthene (207-08-9)			✓												
10B. Bis (2-Chloroethoxy) Methane (111-91-1)			✓												
11B. Bis (2-Chloroethyl) Ether (111-44-4)			✓												
12B. Bis (2-Chloroisopropyl) Ether (39638-32-9)			✓												
13B. Bis (2-Ethylhexyl) Phthalate (117-81-7)			✓												
14B. 4-Bromophenyl Phenyl Ether (101-55-3)			✓												
15B. Butyl Benzyl Phthalate (85-68-7)			✓												
16B. 2-Chloronaphthalene (91-58-7)			✓												
17B. 4-Chlorophenyl Phenyl Ether (7005-72-3)			✓												
18B. Chrysene (218-01-9)			✓												
19B. Dibenzo (a.h) Anthracene (53-70-3)			✓												
20B. 1,2 – Dichlorobenzene (95-50-1)			✓												
21B. 1,3 – Dichlorobenzene (541-73-1)			✓												

CONTINUE ON PAGE 6

CONTINUED FROM THE PAGE 5

NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	005

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (*continued*)															
22B. 1, 4-Dichlorobenzene (106-46-7)			✓												
23B. 3, 3'-Dichlorobenzidine (91-94-1)			✓												
24B. Diethyl Phthalate (84-66-2)			✓												
25B. Dimethyl Phthalate (131-11-3)			✓												
26B. Di-N-butyl Phthalate (84-74-2)			✓												
27B. 2,4-Dinitrotoluene (121-14-2)			✓												
28B. 2,6-Dinitrotoluene (606-20-2)			✓												
29B. Di-N-Octyl Phthalate (117-84-0)			✓												
30B. 1,2-Diphenylhydrazine (*as Azobenzene*) (122-66-7)			✓												
31B. Fluoranthene (206-44-0)			✓												
32B. Fluorene (86-73-7)			✓												
33B. Hexachlorobenzene (87-68-3)			✓												
34B. Hexachlorobutadiene (87-68-3)			✓												
35B. Hexachloro-cyclopentadiene (77-47-4)			✓												
36B. Hexachloroethane (67-72-1)			✓												
37B. Indeno (1,2,3-c-d) Pyrene (193-39-5)			✓												
38B. Isophorone (78-59-1)			✓												
39B. Naphthalene (91-20-3)		✓		ND	N	n/a	n/a	n/a	n/a	1	mg/l	lb/d			
40B. Nitrobenzene (98-95-3)			✓												
41B. N-Nitro-sodimethylamine (62-75-9)			✓												

CONTINUE ON PAGE 7

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS *(continued)*															
42B. N-Nitroso N-Propylamine (621-64-7)			✓												
43B. N-Nitro-sodiphenylamine (86-30-6)			✓												
44B. Phenanthrene (85-01-8)			✓												
45B. Pyrene (129-00-0)			✓												
46B. 1,2,4-Tri chlorobenzene (120-82-1)			✓												
GC/MS FRACTION - PESTICIDES															
1P. Aldrin (309-00-2)			✓												
2P. α-BHC (319-84-6)			✓												
3P. β-BHC (319-84-6)			✓												
4P. γ-BHC (58-89-9)			✓												
5P. δ-BHC (319-86-8)			✓												
6P. Chlordane (57-74-9)			✓												
7P. 4,4'-DDT (50-29-3)			✓												
8P. 4,4'-DDE (72-55-9)			✓												
9P. 4,4'-DDD (72-54-8)			✓												
10P. Dieldrin (60-57-1)			✓												
11P. α-Endosulfan (115-29-7)			✓												
12P. β-Endosultan (115-29-7)			✓												
13P. Endosulfan Sulfate (1031-07-8)			✓												
14P. Endrin (72-20-8)			✓												
15P. Endrin Aldehyde (7421-93-4)			✓												
16P. Heptachlor (76-44-8)			✓												

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CONTINUED FROM THE PAGE 7

NPDES # (*IF ASSIGNED*)	OUTFALL NUMBER
M0-135208	005

1. POLLUTANT AND CAS NUMBER (*if available*)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (*optional*)		
	A. TESTING REQUIRED	B. BELIEVED PRESENT	C. BELIEVED ABSENT	A. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (*if available*)		C. LONG TERM AVRG. VALUE (*if available*)		D. NO. OF ANALYSES	A. CONCEN-TRATION	B. MASS	A. LONG TERM AVRG. VALUE		B. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – PESTICISES *(continued)*															
17P. Heptachlor Epoxide (1024-57-3)			✓												
18P. PCB-1242 (53469-21-9)			✓												
19P. PBC-1254 (11097-69-1)			✓												
20P. PCB-1221 (11104-28-2)			✓												
21P. PCB-1232 (11141-16-5)			✓												
22P. PCB-1248 (12672-29-6)			✓												
23P. PCB-1260 (11096-82-5)			✓												
24P. PCB-1016 (12674-11-2)			✓												
25P. Toxaphene (8001-35-2)			✓												
J. RADIOACTIVITY															
(1) Alpha Total			✓												
(2) Beta Total			✓												
(3) Radium Total			✓												
(4) Radium 226 Total			✓												

2.00 POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

A. IS ANY POLLUTANT LISTED IN ITEM 1.30 A SUBSTANCE OR A COMPONENT OF A SUBSTANCE WHICH YOU DO OR EXPECT THAT YOU WILL OVER THE NEXT FIVE YEARS USE OR MANUFACTURE AS AN INTERMEDIATE OR FINAL PRODUCT OR BYPRODUCT?

☐ **YES** *(LIST ALL SUCH POLLUTANTS BELOW)* ■ **NO** *(GO TO B)*

B. ARE YOUR OPERATIONS SUCH THAT YOUR RAW MATERIALS, PROCESSES OR PRODUCTS CAN REASONABLE BE EXPECTED TO VARY SO THAT YOUR DISCHARGES OF POLLUTANTS MAY DURING THE NEXT FIVE YEARS EXCEED TWO TIMES THE MAXIMUM VALUES REPORTED IN ITEM 1.30?

☐ **YES** *(COMPLETE C BELOW)* ■ **NO** *(GO TO SECTION 3.00)*

C. IF YOU ANSWERED "YES" TO ITEM B, EXPLAIN BELOW AND DESCRIBE IN DETAIL THE SOURCES AND EXPECTED LEVELS OF SUCH POLLUTANTS THAT YOU ANTICIPATE WILL BE DISCHARGED FROM EACH OUTFALL OVER THE NEXT FIVE YEARS, TO THE BEST OF YOUR ABILIITY AT THIS TIME. CONTINUE ON ADDITIONAL SHEETS IF YOU NEED MORE SPACE.

3.00 CONTRACT ANALYSIS INFORMATION

WERE ANY OF THE ANALYSES REPORTED IN 1.30 PERFORMED BY A CONTRACT LABORATORY OR CONSULTING FIRM?

■ **YES** *(LIST THE NAME, ADDRESS, AND TELEPHONE NUMBER OF, AND ANALYZED BY, EACH SUCH LABORATORY OR FIRM BELOW)*
☐ **NO** *(GO TO SECTION 4.00)*

A. NAME	B. ADDRESS	C. TELEPHONE NUMBER WITH AREA CODE	D. POLLUTANTS ANALYZED *(list)*
Teklab, Inc.	5445 Horseshoe Lake Road,	(618) 344-1005	All Listed
	Collinsville, ILL. 62234		

4.00 CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the 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.

NAME AND OFFICIAL TITLE (TYPE OR PRINT)	TELEPHONE NUMBER WITH AREA CODE
Mike Dwyer, Director \ Environment, Health, and Safety	(314) 777-9238
SIGNATURE	DATE SIGNED
	2/18/17

INSTRUCTIONS FOR FILLING OUT APPLICATION FOR DISCHARGE PERMIT FORM D – PRIMARY INDUSTRIES

All blanks must be filled in when the applications is submitted to the appropriate Regional Office (see map). The form **must be signed** as indicated.

This application is to be completed only for wastewater facilities from which there is a discharge. Include any facility that it is possible to discharge from even if normally there is no discharge. If this form is not adequate for you to describe your existing operation, the sufficient information should be attached so that an evaluation of the discharge can be made.

1.00 Name of Facility – By what title or name is this facility known locally?

1.10 and 1.20 Self-explanatory.

1.30 GENERAL INSTRUCTIONS. For some pollutants, you may be required to mark "X" in the "Testing Required" column (column 2-A) and test (sample and analyze) and report the levels of the pollutants in your discharge whether or not you expect them to be present in your discharge. For all others, you must mark "X" in either the "Believe Present" column or the "Believe Absent" column (column 2-B or 2-C) based on your best estimate, and test for those which you believe to be present.

Base your determination that a pollutant is present in or absent from your discharge on your knowledge of your raw materials, maintenance chemicals, intermediate and final products and byproducts and any previous analyses known to you of your effluent or of any similar effluent. (For example, if you manufacture pesticides, you should expect those pesticides to be present in contaminated storm water runoff). If you would expect a pollutant to be present solely as a result of its presence in your intake water, you must mark "Believe Present" but you are not required to analyze for that pollutant. Instead, mark an "X" in the "Intake" column.

REPORTING. All levels must be reported as concentration and as total mass. You may report some or all of the required data by attaching separate sheets of paper instead of filling out Table II if the separate sheets contain all the required information in a format which is consistent with Table II in spacing and in identification of pollutants and columns. (For example, the data system used in your GC/MS analysis may be able to print data in the proper format). Use the following abbreviations in the columns headed "Units". (column 4)

CONCENTRATION M

ppm.....parts per million
mg/1.....milligrams per liter
ppb.....parts per billion
µg/1.....micrograms per liter

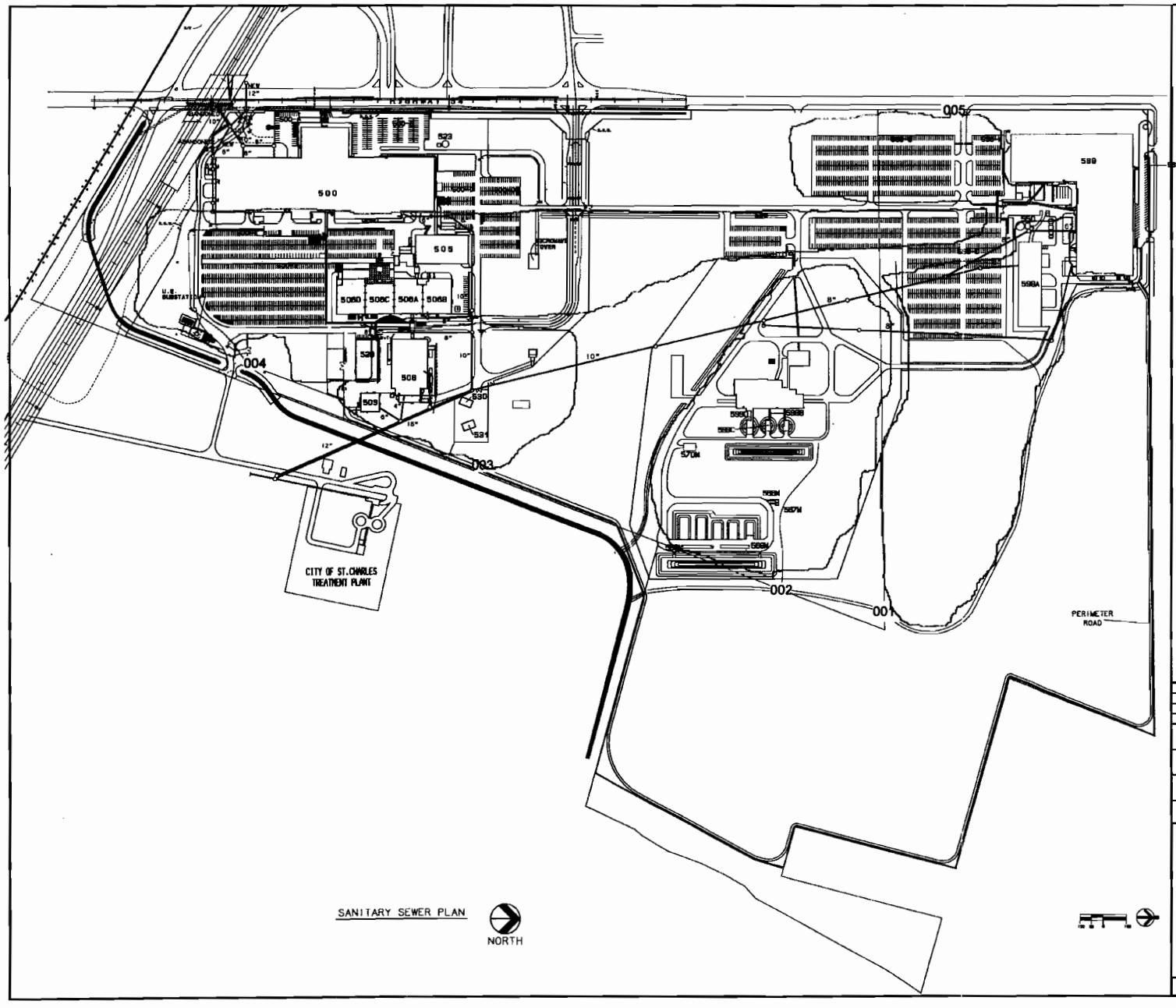
ASS

lbs.....pounds
ton.....tons (English tons)
mg.....milligrams
g.....grams
kg.....kilograms
T.....tonnes (metric tons)

If you measure only one daily value, complete only the "Maximum Daily Values" columns and insert "1" into the "Number of Analyses" columns (columns 3-A and 3-D). Missouri Department of Natural Resources may require you to conduct additional analyses to further characterize your discharges.

For composite samples, the daily value is the total mass or average concentration found in a composite sample taken over the operating hours of the facility during a 24 hour period; for grab samples, the daily value is the arithmetic or flow-weighted total mass or average concentration found in a series of at least four grab samples taken over the operating hours of the facility during a 24 hour period.

If you measure more than one daily value for a pollutant, determine the average of all values within the last year and report the concentration and mass under the "Long Term Average Values" column (column 3-C), and the total number of daily values under the "Number of Analyses" columns (column 3-D). Also, determine the average of all daily values taken during each calendar month, and report the highest average under the "Maximum 30 Day Value" column (column 3-B)



LEGEND

O MANHOLE

PROJECT NUMBER	DATE	PROJECT NUMBER	DATE	PROJECT NUMBER	DATE

MCDONNELL DOUGLAS ELECTRONICS COMPANY

A DIVISION OF

MCDONNELL DOUGLAS CORPORATION

PLANT ENGINEERING
ST. CHARLES, MO. 63301

TRACT V
SANITARY SEWER SITE PLAN

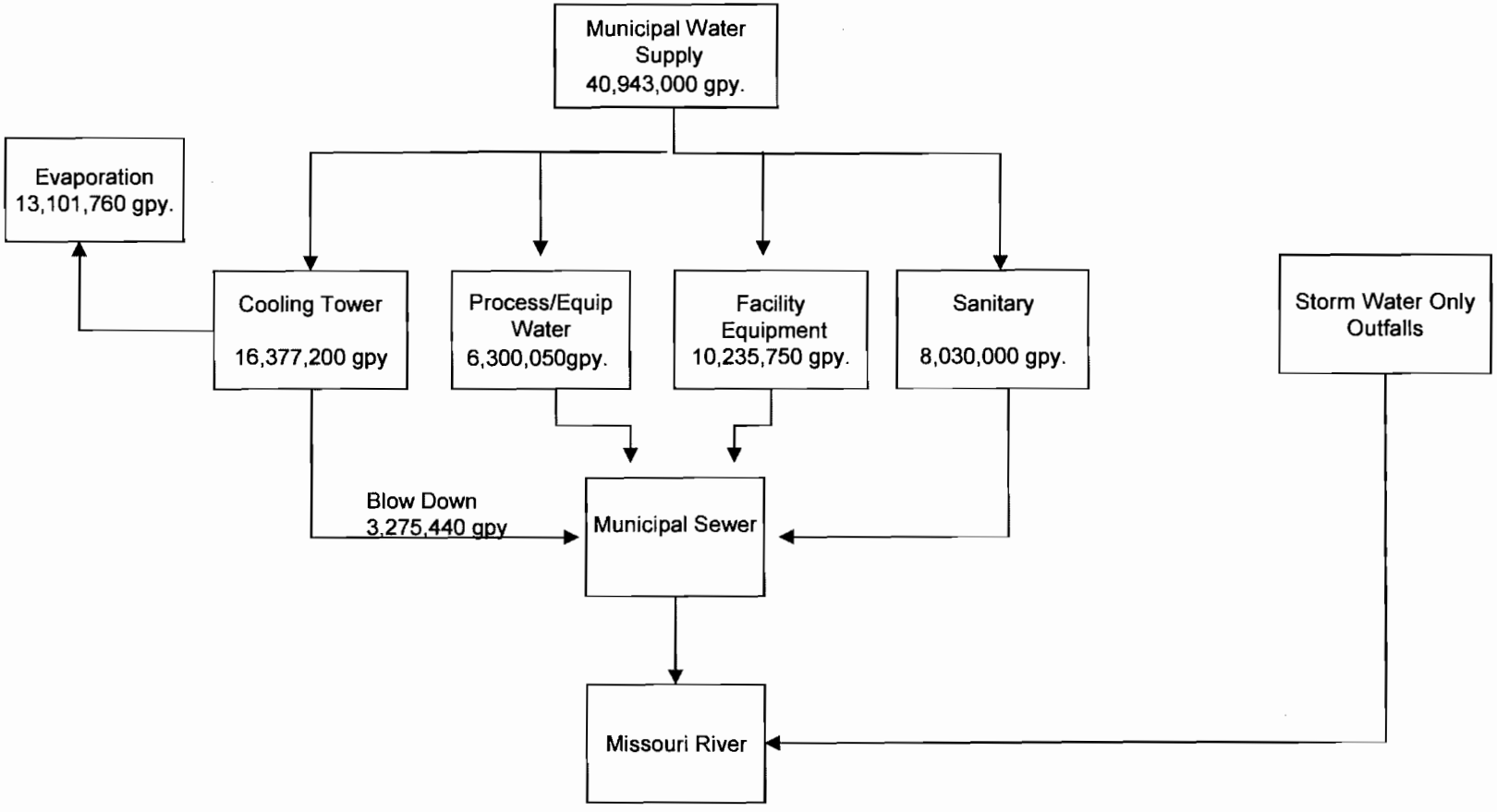
REFERENCE DRAWINGS

APPROVED FOR CONSTRUCTION
BY
DATE

SCALE	1"=200'	DATE
DRAWN	G.LAWRENCE	3-11-91
DESIGN	DON CLAUS	
CHK'D		
APPD		
APPD		
APPD		

RFFO
WO
WORK CONTROL RELEASE

DRAWING NUMBER	SHEET NO.
SEWER	1 of 1

PROJECT .

Boeing - St. Charles
Schematic of Water Flow