

original

Hand Delivered

Dominion Terminal Associates

Dan Wagoner

Superintendent Engineering/Maintenance

P.O. Box 967-A

Newport News, VA 23607

(757) 245-2275

Ext. 305

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FAX: (757) 247-9729

E-mail: dwagoner@dominionterminal.com



May 22, 2006

Virginia Department of Environmental Quality
5636 Southern Boulevard
Virginia Beach, VA 23462

Attention: Ms Debra Thompson
RE: VPDES ID# VA0057576 Renewal Application



Dear Ms Thompson:

Enclosed is the VPDES application for Dominion Terminal Associates. Per your request, I will send, under separate cover, the list of materials stored at our facility.

If you have any questions on the application, please call.

Respectfully yours,

A handwritten signature in black ink that appears to read 'Dan Wagoner'.

Dan Wagoner
Superintendent
Engineering/Maintenance

FORM 1 GENERAL	EPA	U.S. ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION Consolidated Permits Program (Read the "General Instructions" before starting.)	I. EPA I.D. NUMBER FVA 005 7576																																																																																																
LABEL ITEMS		GENERAL INSTRUCTIONS																																																																																																	
I. EPA I.D. NUMBER	III. FACILITY NAME	If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.																																																																																																	
IV. FACILITY MAILING ADDRESS	PLEASE PLACE LABEL IN THIS SPACE																																																																																																		
V. FACILITY LOCATION																																																																																																			
II. POLLUTANT CHARACTERISTICS																																																																																																			
<p>INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.</p> <table border="1"> <thead> <tr> <th colspan="3">SPECIFIC QUESTIONS</th> <th>MARK 'X'</th> <th colspan="3">SPECIFIC QUESTIONS</th> <th>MARK 'X'</th> </tr> <tr> <th>YES</th> <th>NO</th> <th>FORM ATTACHED</th> <th></th> <th>YES</th> <th>NO</th> <th>FORM ATTACHED</th> <th></th> </tr> </thead> <tbody> <tr> <td colspan="3">A. 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VII. SIC CODES (4-digit, in order of priority)

A. FIRST

C 7 4 4 9 1 (specify)

Coal Transhipping Facility

C. THIRD

C 7 (specify)

B. SECOND

C 7 (specify)

D. FOURTH

C 7 (specify)

VIII. OPERATOR INFORMATION

A. NAME

C 8 DOMINION TERMINAL ASSOCIATES (specify)

B. Is the name listed in Item VIII-A also the owner?

 YES NO
66

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)

F = FEDERAL M = PUBLIC (other than federal or state)
S = STATE O = OTHER (specify)
P = PRIVATE

P (specify)

96

D. PHONE (area code & no.)

C A 7 5 7 2 4 5 2 2 7 5
15 16 17 18 19 20 21 22 23 24

E. STREET OR P.O. BOX

PO BOX 967-A

55

F. CITY OR TOWN

C B NEWPORT NEWS (specify)

G. STATE VA
15 16 40 41 42 47 51

IX. INDIAN LAND

Is the facility located on Indian lands?
 YES NO
52

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)

C T I 9 N 0 0 5 7 5 7 6
15 16 17 18 30 15 16 17 18 30

B. UIC (Underground Injection of Fluids)

C T I 9 U N / A
15 16 17 18 30 15 16 17 18 30

C. RCRA (Hazardous Wastes)

C T I 9 R N / A
15 16 17 18 30 15 16 17 18 30

D. PSD (Air Emissions from Proposed Sources)

C T I 9 P N / A
15 16 17 18 30 15 16 17 18 30

E. OTHER (specify)

C T I 9 6 0 9 9 7
15 16 17 18 30 15 16 17 18 30

E. OTHER (specify)

(specify)
VDEQ-Air(specify) Army Corp of Engineers
Oreding Permit

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

Dominion Terminal Associates is a coal transhipping facility. Coal is shipped for domestic and export use.

Under the DEQ Air Permit Reg #60997, DTA is permitted to handle coal, petroleum coke and limestone. The primary product handled is coal.

XIII. CERTIFICATION (see instructions)

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 persons immediately responsible for obtaining the information contained in the application, 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.

A. NAME & OFFICIAL TITLE (type or print)

Daniel R. Wagner
Superintendent Maintenance/Engineering

B. SIGNATURE

DR Wagner

C. DATE SIGNED

5/16/2006

COMMENTS FOR OFFICIAL USE ONLY

C
C
15 16 17 18 19 20 21 22 23 24

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST				B. SECOND			
7	4	4	9	1	7	1	(specify)
15	16	17	18	19	20	21	
C. THIRD				D. FOURTH			
7	1	(specify)	7	1	(specify)	15	
15	16	17	18	19	20	21	

VIII. OPERATOR INFORMATION

A. NAME				B. Is the name listed in Item VII(A) also the owner?			
B DOMINION TERMINAL ASSOCIATES				<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)				D. PHONE (area code & no.)			
F = FEDERAL S = STATE P = PRIVATE	M = PUBLIC (other than federal or state) O = OTHER (specify)	P	(specify)	A	7	5	7
15	16	17	18	19	20	21	22
E. STREET OR P.O. BOX				F. CITY OR TOWN			
PO BOX 967-A				B NEWPORT NEWS			
G. STATE				H. ZIP CODE			
VA				23607			
15	16	40	41	42	43	44	45
IX. INDIAN LAND							
Is the facility located on Indian lands?							
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO							
15	16	32	33	34	35	36	37

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)				D. PSD (Air Emissions from Proposed Sources)			
9	N	0	0	5	7	5	7
15	16	17	18	19	20	21	22
B. UIC (Underground Injection of Fluids)				E. OTHER (specify)			
9	U	N	A	9	6	0	9
15	16	17	18	19	20	21	22
C. RCRA (Hazardous Wastes)				F. OTHER (specify)			
9	R	N	A	9	9	7	0
15	16	17	18	19	20	21	22
(specify) Army Corp of Engineers Operating permit							

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Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

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XIII. CERTIFICATION (see Instructions)

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 persons immediately responsible for obtaining the information contained in the application, 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.

A. NAME & OFFICIAL TITLE (type or print)		B. SIGNATURE		C. DATE SIGNED	
CHARLES E. BRINLEY PRESIDENT & C.O.O.		Charles E. Brinley		5/31/06	
COMMENTS FOR OFFICIAL USE ONLY					
<input type="checkbox"/> C					
<input type="checkbox"/> D					
<input type="checkbox"/> E					

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VII. 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 a receiving water in relation to your discharge within the last 3 years?

YES (Identify the test(s) and describe their purposes below)

NO (go to Section VIII)

Acute Effluent Toxicity Test - *mysidopsis Bahia*

The purpose of the test is to comply with the VPDES permit.

VIII. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in Item V 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 Section IX)

A. NAME	B. ADDRESS	C. TELEPHONE (area code & no.)	D. POLLUTANTS ANALYZED (list)
Universal Laboratories, Inc.	20 Research Drive Hampton, VA 23666	757-865-0880	BOD, COD, TOC, TSS, Ammonia, Temperature, pH, Nitrogen, Phosphorus, Sulfate, Sulfide, Sulfite, Aluminum, Iron, Manganese

IX. CERTIFICATION

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

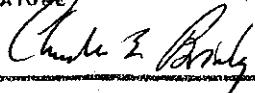
A. NAME & OFFICIAL TITLE (type or print)

CHARLES E. BRINLEY
PRESIDENT & C.O.O.

B. PHONE NO. (area code & no.)

757-245-2275

C. SIGNATURE



D. DATE SIGNED

5/31/06

EPA ID Number (copy from Item 1 of Form 1)

Continued from Page 2

VA 005 7576

VII. Discharge Information

A, B, C, & D: See instructions before proceeding. Complete one set of tables for each outfall. Annotate the outfall number in the space provided.

Tables VII-A, VII-B, and VII-C are included on separate sheets numbered VII-1 and VII-2.

E: Potential discharges not covered by analysis - Is any toxic pollutant listed in table 2F-2, 2F-3 or 2F-4, a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

 Yes (list all such pollutants below) No (go to Section IX)**VIII. 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 a receiving water in relation to your discharge within the last 3 years?

 Yes (list all such pollutants below) No (go to Section IX)

An acute effluent toxicity test - mysidopsis bahia, has been performed in order to comply with the VADES permit. In 2004 and 2005 the results were LC50 > 100%.

IX. Contract Analysis Information

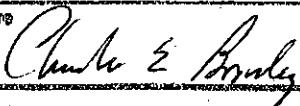
Were any of the analysis reported in item VII performed by a contract laboratory or consulting firm?

 Yes (list the name, address, and telephone number of, and pollutants analyzed by each such laboratory or firm below) No (go to Section X)

A. Name	B. Address	C. Area Code & Phone No.	D. Pollutants Analyzed
Universal Laboratories	20 Research Drive Hampton, VA 23666	757-865-0880	Oil + grease, BOD, COD, TSS, Total nitrogen, Total phosphorus, pH, TPH, Dissolved copper, Dissolved Nickel, and Dissolved Zinc.

X. Certification

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

A. Name & Official Title (type or print) CHARLES E. BRINLEY PRESIDENT & C.O.O.	B. Area Code and Phone No. 757-245-2275
C. Signature 	D. Date Signed 5/31/06



SOURCE: USGS TOPOGRAPHICAL MAP, NEWPORT NEWS SOUTH, VIRGINIA QUADRANGLE, 1994

1 in = 2,000 ft

DATE: 3/28/06

BAY # 04-011

DRAWN BY: SSH

FIGURE 1: VICINITY MAP

DOMINION TERMINAL ASSOCIATES

NEWPORT NEWS, VIRGINIA



CONTINUED FROM THE FRONT

C. Except for storm runoff, leaks, or spills, are any of the discharges described in Items II-A or B intermittent or seasonal?

 YES (complete the following table) NO (go to Section III)

1. OUTFALL NUMBER (list)	2. OPERATION/s CONTRIBUTING FLOW (list)	3. FREQUENCY		4. FLOW				5. DURATION (in days)
		a. DAYS PER WEEK (specify average)	b. MONTHS PER YEAR (specify average)	c. FLOW RATE (in mgd)	d. TOTAL VOLUME (specify with units)	e. LONG TERM AVERAGE	f. MAXIMUM DAILY	

III. PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

 YES (complete Item III-B) NO (go to Section IV)

B. Are the limitations in the applicable effluent guideline expressed in terms of production (or other measure of operation)?

 YES (complete Item III-C) NO (go to Section IV)

C. If you answered "yes" to Item III-B, list the quantity which represents an actual measurement of your level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

1. AVERAGE DAILY PRODUCTION			2. AFFECTED OUTFALLS (list outfall numbers)
a. QUANTITY PER DAY	b. UNITS OF MEASURE	c. OPERATION, PRODUCT, MATERIAL, ETC. (specify)	

IV. 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 which 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 Item IV-B)

1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	2. AFFECTED OUTFALLS		3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE	
	a. NO.	b. SOURCE OF DISCHARGE		c. RE-REQUIRED	d. PRO-JECTED

B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs (or other environmental projects which may affect your discharges) you now have underway or which you plan. Indicate whether each program is now underway or planned, and indicate your actual or planned schedules for construction. MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED

CONTINUED FROM PAGE 2

VA 0057576

V. INTAKE AND EFFLUENT CHARACTERISTICS

A, B, & C: See instructions before proceeding — Complete one set of tables for each outfall — Annotate the outfall number in the space provided.
 NOTE: Tables V-A, V-B, and V-C are included on separate sheets numbered V-1 through V-9.

D. Use the space below to list any of the pollutants listed in Table 2c-3 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
None			

VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

Is any pollutant listed in Item V-C a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

YES (list all such pollutants below)

NO (go to Item VI-B)

CONTINUED FROM THE FRONT

VII. 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 a receiving water in relation to your discharge within the last 3 years?

YES (identify the test(s) and describe their purposes below)

NO (go to Section VIII)

Acute Effluent Toxicity Test - mysidopsis Bahia

The purpose of the test is to comply with the VPDES permit.

VIII CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in Item V 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 Section IX)

A. NAME	B. ADDRESS	C. TELEPHONE (area code & no.)	D. POLLUTANTS ANALYZED (list)
Universal Laboratories, Inc.	20 Research Drive Hampton, VA 23666	757-865-0880	BOD, COD, TOC, TSS, Ammonia, Temperature, pH, Nitrogen, Phosphorus, Sulfate, Sulfide, Sulfite, Aluminum, Iron, Manganese

IX. CERTIFICATION

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

A. NAME & OFFICIAL TITLE (type or print)

Daniel R. Wagoner

Superintendent, Engineering/Maintenance

C. SIGNATURE

D.R. Wagoner

B. PHONE NO. (area code & no.)

757-245-2275

D. DATE SIGNED

5/22/2006

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets (*use the same format*) instead of completing these pages.
SEE INSTRUCTIONS.

EPA I.D. NUMBER (copy from Item 1 of Form 1)

VA0057576

OUTFALL NO.

001

V. INTAKE AND EFFLUENT CHARACTERISTICS (continued from page 3 of Form 2-C)

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						d. NO. OF ANALYSES	3. UNITS (specify if blank)		4. INTAKE (optional)			
	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVERG. VALUE (if available)			b. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		d. NO. OF ANALYSES	
	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS		
a. Biochemical Oxygen Demand (BOD)	<2	<16.9	N/A	N/A	N/A	N/A	1	mg/L	1b/d	N/A	N/A	N/A	
b. Chemical Oxygen Demand (COD)	12	100.9					1	mg/L	1b/d				
c. Total Organic Carbon (TOC)	2.12	17.8					1	mg/L	1b/d				
d. Total Suspended Solids (TSS)	99	832.7	99	832.7	25	210.3	8	mg/L	1b/d				
e. Ammonia (as N)	<0.2	<1.68					1	mg/L	1b/d				
f. Flow	VALUE 2.8235	VALUE 2.8235	VALUE 1.01		>6	MGD		VALUE					
g. Temperature (winter)	VALUE 21.7	VALUE	VALUE		1	°C		VALUE					
h. Temperature (summer)	VALUE 21.7	VALUE	VALUE		1	°C		VALUE					
i. pH	MINIMUM 6	MAXIMUM 8.5	MINIMUM 6.4	MAXIMUM 8.5			5	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 2a for any pollutant which is limited either directly, or indirectly but expressly, in an effluent limitations guideline, you must provide the results of at least one analysis for that pollutant. For other pollutants for which you mark column 2a, you must provide quantitative data or an explanation of their presence in your discharge. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NO. (if available)	2. MARK 'X' IF PRESENT	3. EFFLUENT						d. NO. OF ANALYSES	4. UNITS		5. INTAKE (optional)			
		a. BE PRE- LIEVED AD- SENT		b. MAXIMUM DAILY VALUE (if available)		c. LONG TERM AVERG. VALUE (if available)			b. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		d. 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													
c. Color	X													
d. Fecal Coliform	X													
e. Fluoride (16984-48-8)	X													
f. Nitrate-Nitrite (as N)	X													

ITEM V-B CONTINUED FROM FRONT

1. POLLUT- ANT AND CAS NO. (if available)	2. MARK 'X'	3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
		6. MAXIMUM DAILY VALUE		6. MAXIMUM 30 DAY VALUE		C. LONG TERM AVERG. VALUE (if available)		d. NO. OF ANAL- YSES	8. CONCEN- TRATION	b. MASS	8. LONG TERM AVERAGE VALUE		d. NO. OF ANAL- YSES	
		a. (1) CONCENTRATION	a. (2) MASS	b. (1) CONCENTRATION	b. (2) MASS	c. (1) CONCENTRATION	c. (2) MASS				(1) CONCENTRATION	(2) MASS		
g. Nitrogen, Total Organic (as N)	X	2.3	19.3	2.3	19.3	1.35	11.36	2	mg/L	lb/d	N/A	N/A		
h. Oil and Grease	X													
i. Phosphorus (as P), Total (7723-14-0)	X	0.24	2.02	0.24	2.02	<0.07 +0.62	<0.59	8	mg/L	lb/d				
j. Radioactivity														
(1) Alpha, Total	X													
(2) Beta, Total	X													
(3) Radium, Total	K													
(4) Radium 226, Total	X													
k. Sulfate (as SO ₄) (14808-79-8)	X	615	5172.9					1	mg/L	lb/d				
l. Sulfide (as S)	X	<0.04	<0.34					1	mg/L	lb/d				
m. Sulfite (as SO ₃) (14265-45-3)	X	<0.1	<0.84					1	mg/L	lb/d				
n. Surfactants	X													
o. Aluminum, Total (7429-90-5)	X	0.012	0.101					1	mg/L	lb/d				
p. Barium, Total (7440-39-3)	X													
q. Boron, Total (7440-42-8)	X													
r. Cobalt, Total (7440-48-4)	X													
s. Iron, Total (7439-89-6)	X	0.18	1.5					1	mg/L	lb/d				
t. Magnesium, Total (7439-95-4)	X													
u. Molybdenum, Total (7439-98-7)	X													
v. Manganese, Total (7439-96-6)	X	0.342	2.88					1	mg/L	lb/d				
w. Tin, Total (7440-31-5)	X													
x. Titanium, Total (7440-32-6)	X													

CONTINUED FROM PAGE 3 OF FORM 2-C

VA0057576

001

PART C - If you are a primary industry and this outfall contains process wastewater, refer to Table 2c-2 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. If you are not required to mark column 2-a (*secondary industries, nonprocess wastewater outfalls, and nonrequired GC/MS fractions*), 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 is absent. If you mark column 2a for any pollutant, you must provide the results of at least one analysis for that pollutant. If you mark column 2b for any pollutants, you must provide the results of at least one analysis for that pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2,4-dinitrophenol, or 2-methyl-4, 6-dinitrophenol, you must provide the results of at least one analysis for each of these pollutants which you know or have reason to believe that you discharge in concentrations of 100 ppb or greater. Otherwise, for pollutants for which you mark column 2b, you must either submit at least one analysis or briefly describe the reasons the pollutant is expected to be discharged. Note that there are 7 pages to this part; please review each carefully. Complete one table (all 7 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. RE- QUI- RED	b. 24 HR AVER- AGE PRE- SENT	c. 24 HR AVER- AGE AB- SENT	b. MAXIMUM DAILY VALUE		b. MAXIMUM 24 DAY VALUE (if available)		c. LONG TERM AVERG. VALUE (if applicable)		d. NO. OF ANAL- YSES		e. CONCEN- TRATION	b. MASS	b. LONG TERM AVERAGE VALUE		b. NO. OF ANAL- YSES	
METALS, CYANIDE, AND TOTAL PHENOLS																	
1M. Antimony, Total (7440-36-0)			X														
2M. Arsenic, Total (7440-38-2)			X	<0.005	<0.042									1	mg/L	1b/d	
3M. Beryllium, Total, 7440-41-7)			X														
4M. Cadmium, Total (7440-43-9)			X	<0.005	<0.042									1	mg/L	1b/d	
5M. Chromium, Total (7440-47-3)			X	<0.005	<0.042									1	mg/L	1b/d	
6M. Copper, Total (7440-50-9)			X	0.007	0.0589									1	mg/L	1b/d	
7M. Lead, Total (7439-92-1)			X	<0.005	<0.042									1	mg/L	1b/d	
8M. Mercury, Total (7439-97-6)			X														
9M. Nickel, Total (7440-02-0)			X	0.061	0.505									1	mg/L	1b/d	
10M. Selenium, Total (7782-49-3)			X	0.017	0.143									1	mg/L	1b/d	
11M. Silver, Total (7440-22-5)			X														
12M. Thallium, Total (7440-22-0)			X														
13M. Zinc, Total (7440-56-5)			X	0.076	0.639									1	mg/L	1b/d	
14M. Cyanide, Total (57-12-5)			X														
15M. Phenols, Total			X														
DIOXIN																	
2,3,7,8-Tetra-chlorodibenzo-p-Dioxin (1764-01-6)			X	DESCRIBE RESULTS													

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'		3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	BEST TEST ING. ING. TEST TEST TEST TEST	C. TEST ING. TEST TEST TEST TEST TEST TEST	B. MAXIMUM DAILY VALUE		C. MAXIMUM 30 DAY VALUE (if available)		D. LONG TERM AVERG. VALUE (if available)		E. NO. OF ANAL- YSES	F. CONCEN- TRATION	G. MASS	H. NO. OF ANAL- YSES	I. LONG TERM AVERAGE VALUE (1) CONCEN- TRATION	J. NO. OF ANAL- YSES
		(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS					(1) MASS	(2) MASS	
GC/MS FRACTION - VOLATILE COMPOUNDS														
1V. Acetoin (107-02-8)		X												
2V. Acrylonitrile (107-13-1)		X												
3V. Benzene (71-43-2)		X												
4V. Bis (Chloromethyl) Ether (542-88-1)		X												
5V. Bromoform (75-25-2)		X												
6V. Carbon Tetrachloride (56-23-5)		X												
7V. Chlorobenzene (108-90-7)		X												
8V. Chlorodi-bromomethane (124-48-1)		X												
9V. Chloroethene (75-00-3)		X												
10V. 2-Chloro-ethylvinyl Ether (110-75-2)		X												
11V. Chloroform (67-66-3)		X												
12V. Dichloro-bromomethane (75-27-4)		X												
13V. Dichloro-difluoromethane (75-71-8)		X												
14V. 1,1-Dichloro-ethene (75-34-3)		X												
15V. 1,2-Dichloro-ethane (107-06-2)		X												
16V. 1,1-Dichloro-ethylene (75-35-4)		X												
17V. 1,2-Dichloro-propene (78-37-5)		X												
18V. 1,3-Dichloro-propene (642-75-6)		X												
19V. Ethylbenzene (100-41-6)		X												
20V. Methyl Bromide (74-83-9)		X												
21V. Methyl Chloride (74-67-3)		X												

CONTINUED FROM PAGE V-5

1. POLLUTANT AND CAS NUMBER (If available)	2. MARK 'X'			3. EFFLUENT						4. UNITS			5. INTAKE (optional)		
	TEST	DE- MON- STRATE RE- QUIRE- MENTS	C-SC- RE- PRES- ENT	6. MAXIMUM DAILY VALUE (1) CONCENTRATION (2) MASS		6. MAXIMUM 30 DAY VALUE (1) available (2) CONCENTRATION (3) MASS		7. LONG TERM AVEG. VALUE (1) available (2) CONCENTRATION (3) MASS		8. NO. OF ANAL- YSES	9. CONCEN- TRATION	10. MASS	11. LONG TERM AVERAGE VALUE (1) CONCEN- TRATION (2) MASS	12. NO. OF ANAL- YSES	
GC/MS FRACTION - VOLATILE COMPOUNDS (continued)															
22V. Methylene Chloride (75-09-2)			X												
23V. 1,1,2,3-Tetrachloroethane (78-34-6)			X												
24V. Tetrachloroethylene (127-18-6)			X												
25V. Toluene (108-06-3)			X												
26V. 1,2-Trans-Dichloroethylene (156-62-6)			X												
27V. 1,1,1-Trichloroethane (71-55-6)			X												
28V. 1,1,2-Trichloroethane (79-06-6)			X												
29V. Trichloroethylene (79-01-6)			X												
30V. Trichlorofluoromethane (75-68-4)			X												
31V. Vinyl Chloride (75-01-4)			X												
GC/MS FRACTION - ACID COMPOUNDS															
1A. 2-Chloropheno (95-57-5)			X												
2A. 2,6-Dichloro- phenol (120-83-2)			X												
3A. 2,6-Dimethyl- phenol (105-67-9)			X												
4A. 4,6-Dinitro-O- Cresol (534-52-1)			X												
5A. 2,4-Dinitro- phenol (51-28-5)			X												
6A. 2-Nitrophenol (58-75-5)			X												
7A. 4-Nitrophenol (100-02-7)			X												
8A. p-Chloro-M- Cresol (59-50-7)			X												
9A. Pentachloro- phenol (87-86-5)			X												
10A. Phenol (58-55-2)			X												
11A. 2,4,6-Trichloro- phenol (58-78-3)			X												

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT						4. UNITS			5. INTAKE (optional)		
	TEST ING RE- QUIR- ER	D. OC- CER- LIZED TEST SHEET	C. BE- SERT	B. MAXIMUM DAILY VALUE		B. MAXIMUM 30 DAY VALUE (if available)		C. LONG TERM AVERG. VALUE (if available)		D. NO. OF ANAL- YSES	E. CONCEN- TRATION	F. MASS	G. NO. OF ANAL- YSES	H. LONG TERM AVERAGE VALUE (1) CONCEN- TRATION (2) MASS	I. NO. OF ANAL- YSES
				[1] CONCENTRATION	[2] MASS	[1] CONCENTRATION	[2] MASS	[1] CONCENTRATION	[2] MASS						
GC/MS FRACTION - BASE/NEUTRAL COMPOUNDS															
15. Acenaphthene (83-32-9)			X												
28. Acenaphthylene (208-96-8)			X												
38. Anthracene (120-12-7)			X												
48. Benzidine (92-87-6)			X												
58. Benzo (a) Anthracene (56-65-3)			X												
68. Benzo (c) Pyrrene (50-32-8)			X												
78. 3,4-Benzo- Fluoranthene (205-29-2)			X												
88. Benzo (ghi) Perylene (181-24-2)			X												
98. Benzo (k) Fluorene (207-08-9)			X												
108. Bis (2-Chloro- ethoxy) Methane (111-91-1)			X												
118. Bis (2-Chloro- ethyl) Ether (111-44-6)			X												
128. Bis (2-Chloro- ethyl) Ether (102-60-1)			X												
138. Bis (2-Ethyl- hexyl) Phthalate (117-81-7)			X												
148. 4-Bromo- Phenyl Phenyl Ethan (101-65-3)			X												
158. Butyl Benzyl Phthalate (66-68-7)			X												
168. 4-Chloro- Benzene (91-62-7)			X												
178. 4-Chloro- Benzyl Phenyl Ethan (101-72-3)			X												
188. Chrysene (212-51-6)			X												
198. Dibenzo (a,h) Anthracene (63-70-3)			X												
208. 1,2-Dichloro- benzene (95-50-1)			X												
218. 1,3-Dichloro- benzene (541-73-1)			X												

CONTINUED FROM PAGE V-6

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT								4. UNITS		5. INTAKE (optional)			
	A TEST OR RE- QUIR- ED	B. DE- TER- MINED PER- CENT	C. DE- TER- MINED AMOUNT	5. MAXIMUM DAILY VALUE		6. MAXIMUM 30 DAY VALUE (if available)		7. LONG TERM AVERAGE VALUE (if available)		8. NO. OF ANAL- YSES	9. CONCEN- TRATION	10. MASS	8. LONG TERM AVERAGE VALUE		9. NO. OF ANAL- YSES		
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS						(1) CONCEN- TRATION	(2) MASS		
GC/MS FRACTION - BASE/NEUTRAL COMPOUNDS (continued)																	
22B. 1,4-Dichloro- benzene (106-46-7)		X															
23B. 3,3'-Dichloro- biphenyl (63-96-1)		X															
24B. Diethyl Phthalate (64-66-2)		X															
25B. Diethyl Phthalate (64-66-2)		X															
26B. Diethyl Phthalate (64-66-2)		X															
27B. Di-Al-Butyl Phthalate (28478-3)		X															
27B. 2,4-Dinitro- Biphenyl (121-14-2)		X															
28B. 2,6-Dinitro- toluene (503-20-2)		X															
29B. Di-N-Octyl Phthalate (117-64-0)		X															
30B. 1,2-Diphenyl- hydrazine (a Azo- benzene) (122-65-7)		X															
31B. Fluorene (206-44-0)		X															
32B. Fluorene (206-73-7)		X															
33B. Hexachlorobutadiene (112-74-1)		X															
34B. Hexa- chlorobutadiene (87-63-3)		X															
35B. Hexachloro- cyclopentadiene (77-67-4)		X															
36B. Hexachloro- ethane (67-72-1)		X															
37B. Indeno (1,2,3-cd) Pyrene (183-39-5)		X															
38B. Isophorone (78-59-1)		X															
39B. Naphthalene (91-20-3)		X															
40B. Nitrobenzene (68-95-3)		X															
41B. N-Nitro- sodimethylamine (62-75-9)		X															
42B. N-Nitroso- N-Propylamine (621-64-7)		X															

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT								4. UNITS		5. INTAKE (optional)				
	A. TEST B. 100% C. 100% TEST RE- QUIR- ED TEST PER- CENT	B. 100% TEST RE- QUIR- ED TEST PER- CENT	C. 100% TEST RE- QUIR- ED TEST PER- CENT	D. MAXIMUM DAILY VALUE (if available)		E. MAXIMUM 30 DAY VALUE (if available)		F. LONG TERM AVERG. VALUE (if available)		G. NO. OF ANALYSES		H. CONCENTRATION	I. MASS	J. CONCENTRATION	K. MASS	L. CONCENTRATION	M. MASS	N. CONCENTRATION
GC/MS FRACTION - BASE/NEUTRAL COMPOUNDS (continued)																		
43B. N-Nitro- -sodiphenylamine (86-30-6)			X															
44B. Phenanthrene (65-01-8)			X															
45B. Pyrone (128-09-9)			X															
46B. 1,2,4 - Trichlorobenzene (120-82-3)			X															
GC/MS FRACTION - PESTICIDES																		
1P. Alachlor (102-09-2)			X															
2P. α -SHC (319-33-6)			X															
3P. β -SHC (319-33-7)			X															
4P. γ -SHC (58-53-6)			X															
5P. δ -SHC (319-33-8)			X															
6P. Chlordane (57-74-9)			X															
7P. 4,6-DDT (50-29-3)			X															
8P. 4,6-DDE (72-55-9)			X															
9P. 4,6-DDD (72-54-8)			X															
10P. Dieldrin (50-57-1)			X															
11P. α -Endosulfan (115-29-7)			X															
12P. β -Endosulfan (115-29-7)			X															
13P. Endosulfan Sulfate (1031-07-8)			X															
14P. Endrin (72-20-8)			X															
15P. Endrin Aldehyde (7421-93-4)			X															
16P. Heptachlor (75-44-8)			X															

CONTINUED FROM PAGE V-8

EPA I.D. NUMBER (copy from Item 1 of Form 1) | CUTFALL NUMBER
VA0057576 | 001

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT						4. UNITS			5. INTAKE (optional)			
	TEST ING. RE- C'D.	DE- LIVERED PER CENT	CE- RE- DUCED PER CENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 10 DAY VALUE (if available)		c. LONG TERM AVERG. VALUE (if available)		d. NO. OF ANAL- YSES	a. CONCEN- TRATION	b. MASS	a. LONG TERM AVERAGE VALUE	b. NO. OF ANAL- YSES		
GC/MS FRACTION - PESTICIDES (continued)																
17P. Heptachlor Epoxyde (1024-67-3)			X													
18P. PCB-1242 (59469-21-9)			X													
19P. PCB-1254 (11097-68-1)			X													
20P. PCB-1221 (11104-28-2)			X													
21P. PCB-1232 (11141-16-5)			X													
22P. PCB-1248 (12672-29-6)			X													
23P. PCB-1260 (11098-82-5)			X													
24P. PCB-1016 (12674-11-2)			X													
25P. Toxaphene (8001-35-2)			X													

PAGE V-9

Form
2F
NPDES



United States Environmental Protection Agency
Washington, DC 20460

Application for Permit to Discharge Storm Water Discharges Associated with Industrial Activity

Paperwork Reduction Act Notice
Public reporting burden for this application is estimated to average 28.6 hours per application, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate, any other aspect of this collection of information, or suggestions for improving this form, including suggestions which may increase or reduce this burden to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., SW, Washington, DC 20460, or Director, Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

I. Outfall Location

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

II. 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 which 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.

B. You may attach additional sheets describing any additional water pollution (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and indicate your actual or planned schedules for construction.

III. Site Drainage Map

Attach a site map showing topography (or indicating the outline of drainage areas served by the outfall(s) covered in the application if a topographic map is unavailable) depicting the facility including: each of its intake and discharge structures; the drainage area of each storm water outfall; paved areas and buildings within the drainage area of each storm water outfall; each known past or present areas used for outdoor storage or disposal of significant materials; each existing structural control measure to reduce pollutants in storm water runoff; materials loading and access areas; areas where pesticides, herbicides, soil conditioners and fertilizers are applied; each of its hazardous waste treatment, storage or disposal units (including each area not required to have a RCRA permit which is used for accumulating hazardous waste under 40 CFR 262.34); each well where fluids from the facility are injected underground; springs; and other surface water bodies which receive storm water discharges from the facility.

Continued from the Front

IV. Narrative Description of Pollutant Sources

A. For each outfall, provide an estimate of the area (include units) of impervious surfaces (including paved areas and building roofs) drained to the outfall, and an estimate of the total surface area drained by the outfall.

Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)	Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)
001	73± acres	96± acres			

B. Provide a narrative description of significant materials that are currently or in the past three years have been treated, stored or disposed in a manner to allow exposure to storm water; method of treatment, storage, or disposal; past and present materials management practices employed to minimize contact by these materials with storm water runoff; materials loading and access areas; and the location, manner, and frequency in which pesticides, herbicides, soil conditioners, and fertilizers are applied.

A majority of the facility is used as outside coal storage. Coal is the only material "significant material" stored on-site that is exposed to stormwater. Stormwater on-site flows into ditches with weirs into a series of settling ponds prior to discharge from outfall 001.

As contractor sprays pre-emergent herbicide along the railroad tracks, berms, and ponds. They usually have to come back and ~~apply~~ apply herbicide to weeds that grow anyway.

C. For each outfall, provide the location and a description of existing structural and nonstructural control measures to reduce pollutants in storm water runoff; and a description of the treatment the storm water receives, including the schedule and type of maintenance for control and treatment measures and the ultimate disposal of any solid or fluid wastes other than by discharge.

Outfall Number	Treatment	List Codes from Table 2F-1
001	Sedimentation neutralization	1U 2K

V. Nonstormwater Discharges

A. I certify under penalty of law that the outfall(s) covered by this application have been tested or evaluated for the presence of nonstormwater discharges, and that all nonstormwater discharges from these outfall(s) are identified in either an accompanying Form 2C or Form 2E application for the outfall.

Name and Official Title (type or print)	Signature	Date Signed
Daniel R. Wagner, Superintendent Engineering/Maintenance	DR Wagner	5/22/06

B. Provide a description of the method used, the date of any testing, and the onsite drainage points that were directly observed during a test.

None

VI. Significant Leaks or Spills

Provide existing information regarding the history of significant leaks or spills of toxic or hazardous pollutants at the facility in the last three years, including the approximate date and location of the spill or leak, and the type and amount of material released.

No significant leaks or spills have occurred on-site in the past 3 years.

Continued from Page 2

VA 0057576

VII. Discharge Information

A,B,C, & D: See instructions before proceeding. Complete one set of tables for each outfall. Annotate the outfall number in the space provided.

Tables VII-A, VII-B, and VII-C are included on separate sheets numbered VII-1 and VII-2.

E: Potential discharges not covered by analysis - is any toxic pollutant listed in table 2F-2, 2F-3 or 2F-4, a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

 Yes (list all such pollutants below) No (go to Section IX)**VIII. 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 a receiving water in relation to your discharge within the last 3 years?

 Yes (list all such pollutants below) No (go to Section IX)

An acute effluent toxicity test - mysidopsis bahia, has been performed in order to comply with the VPOES permit. In 2004 and 2005 the results were LC50 > 100%.

IX. Contract Analysis Information

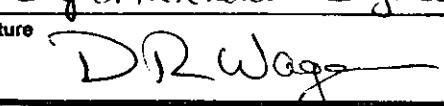
Were any of the analysis reported in item VII performed by a contract laboratory or consulting firm?

 Yes (list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below) No (go to Section X)

A. Name	B. Address	C. Area Code & Phone No.	D. Pollutants Analyzed
Universal Laboratories	20 Research Drive Hampton, VA 23666	757-865-0880	Oil & grease, BOD, COD, TSS, Total Nitrogen, Total Phosphorous, pH, TPH, Dissolved Copper, Dissolved Nickel, and Dissolved Zinc

X. Certification

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

A. Name & Official Title (type or print)	Daniel R. Waggoner Superintendent Engineering/Maintenance	B. Area Code and Phone No.	757-245-2275
C. Signature		D. Date Signed	5/22/2006

VII. Discharge Information (Continued from page 3 of Form 2F)

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.

Pollutant and CAS Number (if available)	Maximum Values (include units)		Average Values (include units)		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During First 20 Minutes	Flow-weighted Composite	Grab Sample Taken During First 20 Minutes	Flow-weighted Composite		
Oil and Grease	< 5 mg/L	N/A			1	
Biological Oxygen Demand (BOD5)	< 2 mg/L				1	
Chemical Oxygen Demand (COD)	12 mg/L				1	Petroleum coke, Coal, limestone
Total Suspended Solids (TSS)	99 mg/L		25 mg/L		8	Petroleum coke, Coal, limestone
Total Nitrogen	2.3 mg/L		1.35 mg/L		2	Petroleum coke, Coal, limestone
Total Phosphorus	< 0.24 mg/L		< 0.07 mg/L		8	Petroleum coke, Coal, limestone
pH	Minimum	Maximum	Minimum	Maximum		

Part B - List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See the instructions for additional details and requirements.

Continued from the Front

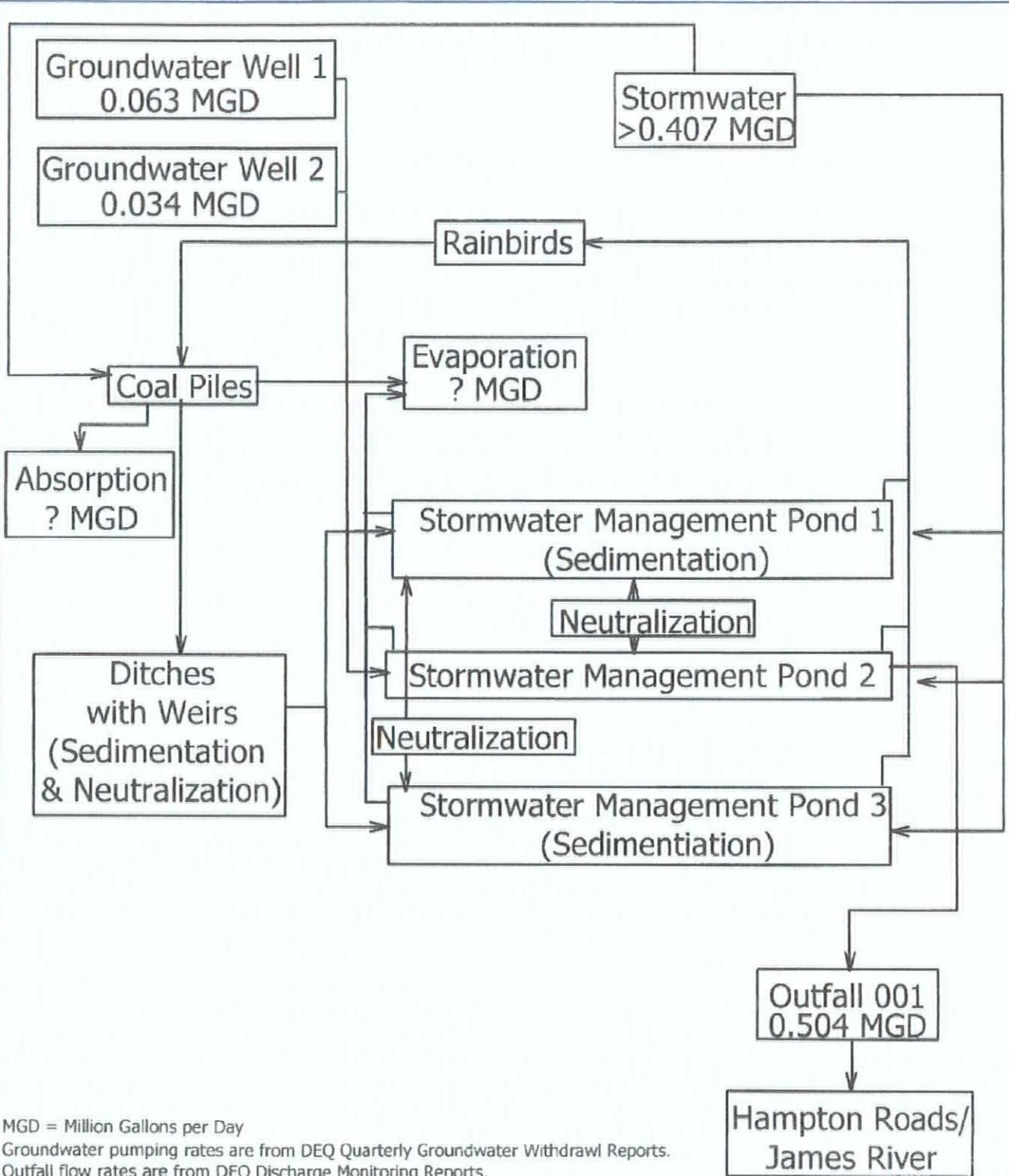
Part C - List each pollutant shown in Tables 2F-2, 2F-3, and 2F-4 that you know or have reason to believe is present. See the instructions for additional details and requirements. Complete one table for each outfall.

Part D - Provide data for the storm event(s) which resulted in the maximum values for the flow weighted composite sample.

Previous data for the storm event(s) which resulted in the maximum values for the flow weighted composite sample.					
1. Date of Storm Event	2. Duration of Storm Event (in minutes)	3. Total rainfall during storm event (in inches)	4. Number of hours between beginning of storm mea- sured and end of previous measurable rain event	5. Maximum flow rate during rain event (gallons/minute or specify units)	6. Total flow from rain event (gallons or specify units)
Unknown, rainfall logs are not kept on-site.					

7. Provide a description of the method of flow measurement or estimate.

Flow is measured using a flow meter.



MGD = Million Gallons per Day

Groundwater pumping rates are from DEQ Quarterly Groundwater Withdrawal Reports.

Outfall flow rates are from DEQ Discharge Monitoring Reports.

Neutralization is performed at various points in the system. The line drawing shows some typical locations.

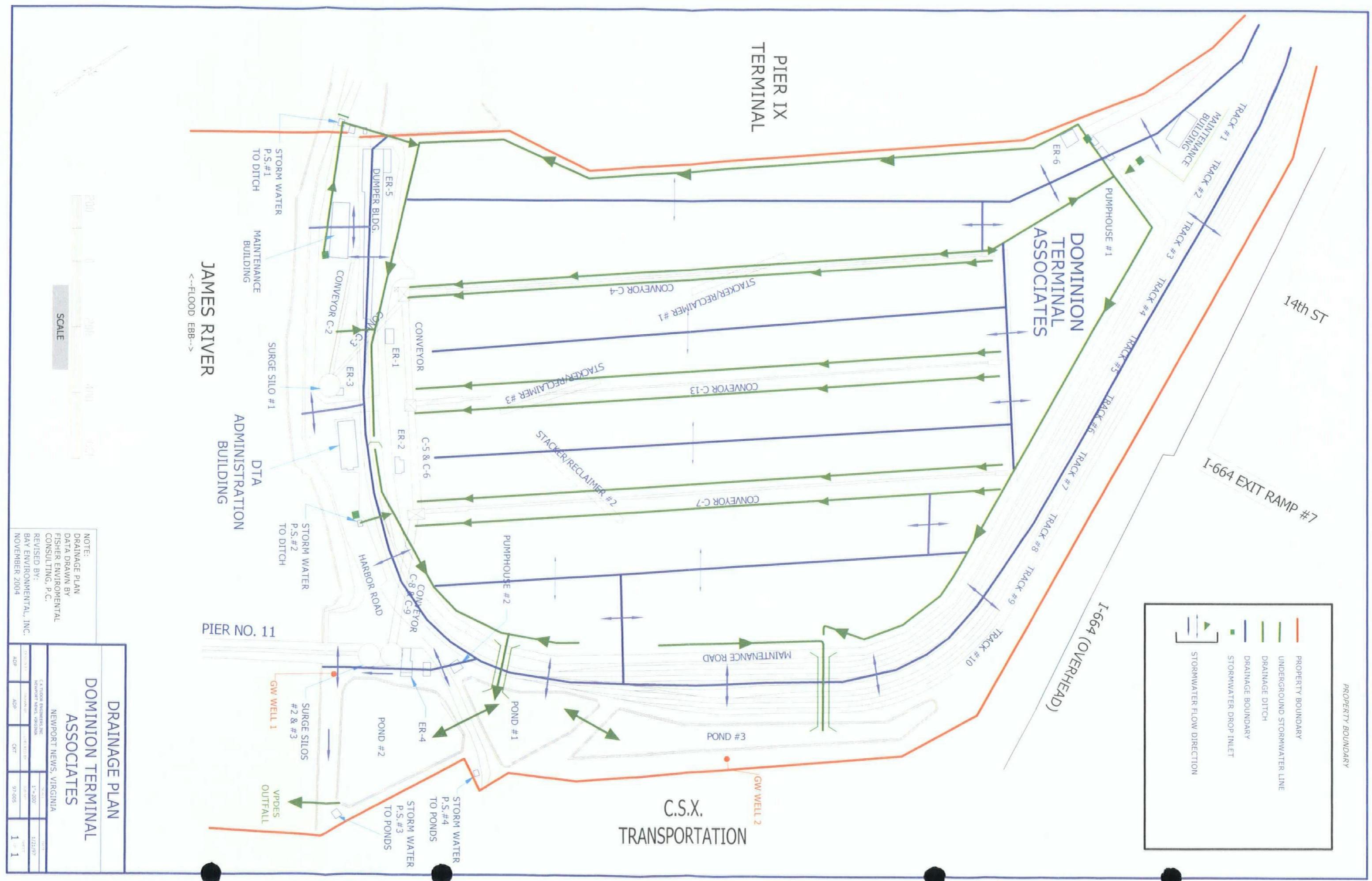
DATE: 3/31/06

BAY # 04-011-

DRAWN BY: SSH

LINE DRAWING
& ESTIMATED WATER BALANCE
DOMINION TERMINAL ASSOCIATES
NEWPORT NEWS, VIRGINIA

BAY
ENVIRONMENTAL, INC.
Environmental Consulting Services
P.O. Box 2666
Chesapeake, Virginia 23327



Chemicals Purchased by DOA

This list represents products purchased, but not all items are currently stored at the facility

itemnum	category	description	unit	binnum	OH Qty
NS	Non-Stock	Items not stocked are ordered as needed, or in the case of bulk lubricants, vendor checks tank levels and tops off tanks as needed.			
9900000001	NS	Acetone	GAL		NA
9900000003	NS	FLUID, TRANSMISSION	DRM		NA
9900000006	NS	Grease - EP0, 400#	DRM		NA
9900000007	NS	Grease, EP0-120#	PL		NA
9900000008	NS	Grease, EP2-35#	PL		NA
9900000010	NS	Lubricant, GEAR TEXACO 85/140 DRUM	DRM		NA
9900000011	NS	OIL, HYDRAULIC 46 AW	DRM		NA
9900000012	NS	OIL, RPM 10 -- DRUM	DRM		NA
9900000013	NS	OIL, RPM 15W40 -- DRUMS	DRM		NA
9900000014	NS	OIL, RPM 30W -- DRUM	DRM		NA
9900000015	NS	Oil, 15W40 - Quarts	EA		NA
9900000017	NS	Oil, Spin #10 -- Drum	DRM		NA
9900000018	NS	PERFORMANCE AW32 - BULK	GAL	ST-5, 10	NA
9900000019	NS	Oil, Locomotive Engine, Zinc Free	DRM		NA
9900000020	NS	OIL, FOR: SUPER SUCKER AW68 -- DRUM	DRM		NA
9900000021	NS	OIL, FOR: SUPER SUCKER TRANSFER CASE REGAL R&O150	DRM		NA
9900000024	NS	LUBRICANT, SWITCH (ACCT #5413)	GAL		NA
9900000026	NS	LUBRICANT, WIRE ROPE	EA		NA
9900000027	NS	OIL, TRANSFORMER	DRM		NA
9900000036	NS	OMNITASK WHITMORE, EP-0, 120#	PL		NA
9900000037	NS	Omnitask, Whitmore EP-0, 400# Drum	DRM		NA
9900000038	NS	LUBE	GAL		NA
9900000039	NS	Grease 400# Texaco	DRM		NA
9900000040	NS	GREASE	PL		NA
9900000041	NS	Grease, Open Gear	EA		NA
9900000042	NS	Grease, Omnitask 400#	EA		NA
9900000044	NS	GREASE, WHITMORE EP2 120#	PL		NA
9900000045	NS	TEXACO DIESEL ENGINE OIL ZINC FREE	GAL	ST-7(13)	NA
9900000046	NS	Texaco Motor Oil 10 W - Bulk	GAL	ST-4	NA
9900000047	NS	Texaco Heavy Duty Motor Oil - 15W40 - Bulk	GAL		NA
9900000048	NS	Exxtrans 30W	GAL	ST-3	NA
9900000049	NS	Texaco Rando HD46 W/Red Dye-Bulk	GAL		NA
9900000050	NS	Texaco Gear Lubricant 85/140 - Bulk	GAL	ST-5	NA
9900000051	NS	CUTTING FLUID, MACHINING & GRINDING (5 GALLON)	GAL	ST-1	NA
9900000052	NS	GREASE, OMNITASK EP0 35#	EA		NA
9900000056	NS	Rando HD46 Bulk Hydraulic oil w/ red dye	GAL	ST-10	NA
9900000057	NS	10W Spin Oil - Bulk	GAL		NA
9900000058	NS	Hydraulic Oil Bulk Performance Plus	GAL		NA
9900000059	NS	EP1 Grease 120#	EA		NA
9900000060	NS	EP2 Grease -14 Oz	EA		NA
9900000064	NS	50% Sodium Hydroxide - Bulk	GAL	ST-25	NA
9900000066	NS	25% Sodium Hydroxide in Drums	DRM		NA
9900000067	NS	25% Sodium Hydroxide in Tote Tanks	GAL		NA
9901000001	NS	UNLEADED GAS	GAL	ST-19	NA
9901000002	NS	Diesel Fuel -- Off road	GAL	ST-18	NA
9901000003	NS	Kerosene	GAL	ST-15	NA
9901000009	NS	CSDFCQC, Diesel Fuel Conditioner	CS		NA
9901000010	NS	Diesel Fuel -- On road Low sulfur	GAL	ST-24	NA
9902000002	NS	Multi Purpose Cleaner	DRM		NA
9902000003	NS	Cleaner	GAL		NA
9902000005	NS	Cleaner Aerosol All Purpose			NA
9902000006	NS	WAX, FLOOR FINISH	GAL		NA
9902000008	NS	Cleaner, Glass	EA		NA
9902000013	NS	CLEANER, SELIG	GAL		NA
9902000015	NS	CLEANER, STAINLESS	EA		NA
9902000016	NS	CLEANER, TRUCK	EA		NA



<u>itemnum</u>	<u>category</u>	<u>description</u>	<u>unit</u>	<u>binnum</u>	<u>OH Qty</u>
9902000018	NS	DRESS UP, FURNITURE PROTECTANT & CONDITIONER	EA		NA
9902000019	NS	DUSTDOWN	DRM		NA
9902000020	NS	GALLON CAN BELZONA CLEANER DEGREASER	GAL		NA
9902000024	NS	REMOVER, SPOT DRI-WHITE	EA		NA
9902000025	NS	REMOVER, WAX SELIG	EA		NA
9902000026	NS	SOAP, SOOTHO SELIG	DZ		NA
9902000028	NS	STRIPPER, BULLY	EA		NA
9902000029	NS	WAX, SOLID GOLD	GAL		NA
9902000030	NS	WAX, 5-STAR, 5 GALLONS	EA		NA
9902000039	NS	Microduster	EA		NA
9902000040	NS	FOAM, GERMICIDAL, SELIG	EA		NA
9902000042	NS	GREENKLEEN CLEANER	DRM		NA
9903000001	NS	CHOCKFAST GRAY COMPOUND (LARGE SIZE)	EA		NA
9903000002	NS	Anchor Bolt Epoxy Grout in 2 gal kit			NA
9904000001	NS	Adhesive Capsule			NA
9904000017	NS	TROWEL GRADE EPOXY FOR CERAMIC CAPS			NA
9905000001	NS	DEVCON MAGIC BOND EPOXY PUTTY	EA		NA
9905000002	NS	DEVCON TITANIM PUTTY	EA		NA
9905000003	NS	RTV, BLACK	EA		NA
9905000010	NS	Latex Pile Binding Agent (Soil Sement)	GAL	ST-16	NA
9905000012	NS	EXCELATOR	EA		NA
9906000001	NS	FREON	EA		NA
9906000002	NS	OIL, AIR CONDITION	EA		NA
9907000001	NS	GAS, PROPANE (FOR: PORTABLE HEATERS)			NA
9908000001	NS	PAINT, ALUMINUM	GAL		NA
9908000002	NS	PAINT, BLUE ENAMEL	GAL		NA
9908000003	NS	PAINT, BLUE, OIL BASE ENAMEL	GAL		NA
9908000004	NS	PAINT, DOVER GREY	GAL		NA
9908000005	NS	PAINT, FLOOR, BATTLESHIP GREY	GAL		NA
9908000006	NS	PAINT, RED	GAL		NA
9908000008	NS	PAINT, YELLOW ENAMEL	GAL		NA
9908000009	NS	PRIMER, PLASTI DIP	GAL		NA
9908000010	NS	PRIMER, DUPONT			NA
9908000011	NS	THINNER, DUPONT	GAL		NA
9908000021	NS	TAR, COAL EPOXY PAINT BLACK, 5 GALLON	EA		NA
9908000022	NS	PAINT, INTERIOR SG, SWANSDOWN	GAL		NA
9908000023	NS	PAINT, LATEX SUPER WHITE	GAL		NA
9908000024	NS	PAINT, ENAMEL QUICK DRY BLACK (ACCT: 6710)	EA		NA
9908000025	NS	PAINT, ENAMEL QUICK DRY SAILOR BLUE (ACCT: 6810)	GAL		NA
9908000026	NS	PAINT LATEX SEMI GLOSS COLOR: MATCH BLUE/UPSTAIRS	GAL		NA
9908000027	NS	PAINT, CAT YELLOW AEROSOL 12 OZ	EA		NA
9909000001	NS	TONER, XEROX COPIER 5028 (2/CARTON)			NA
9910000006	NS	THINNER	GAL		NA
9910000008	NS	SAFETY KLEEN PREMIUM SOLVENT 105	GAL		NA
9911000005	NS	Antifreeze-55 Gal drum ETHYLENE GLYCOL	DRM		NA
9911000007	NS	DIETHYLENE GLYCOL FREEZE PROOFING	DRM		NA
9912000001	NS	Caustic Soda 680#/Drum - 50% Solution	DRM		NA
9912000002	NS	Caustic Soda (700#/DRUM) - 25% Solution	DRM		NA
9912000003	NS	Muriatic Acid 20 -- 31.5%	DRM		NA
9912000004	NS	CAUSTIC SODA, SOLID, BEADS (500#/DRUM)	DRM		NA
9912000005	NS	Beads Caustic 50# BAGS	EA		NA
9912000006	NS	Briquettes, Caustic 100# BAGS	EA		NA
9912000007	NS	POLYMER (PERCOL 267) (450# DRUM @ \$.86/POUND)	DRM		NA
9912000008	NS	WATER TREATMENT			NA
9912000009	NS	SCP7100 (520#/DRUM @ \$1.38/#)	DRM		NA
9912000010	NS	WATER TREATMENT (601#/DRUM @ \$.78/#)	DRM		NA
9912000011	NS	POLYMER (520#/DRUM)	DRM		NA

<u>itemnum</u>	<u>category</u>	<u>description</u>	<u>unit</u>	<u>binnum</u>	<u>OH Qty</u>
STK	Stock	Stock items are controlled by warehouse personnel in an effort to maintain levels of stock.			
9900000002	STK	Oil, Aircraft Hydraulic Oil 5606G	GAL	SC0001	1.00
9900000004	STK	Grease, EP-0 -- 35# Pail	PL	TFLOOR	8.00
9900000005	STK	Fluid, Transmission w/Mercon	EA	F20002	8.00
9900000025	STK	Lubricant, Chain Selig	EA	SC0002	1.00
9900000029	STK	Grease Pinion Spray Type	DRM	SC0003	5.00
9900000030	STK	Oil, Thread Cutting	EA	F10020	4.00
9900000031	STK	Oil Cutting Tap Magic	EA	F10019	6.00
9900000032	STK	Additive Gear Guard, 1 Qt.	EA	F20004	4.00
9900000033	STK	Oil 2 Cycle	EA	F20001	3.00
9900000034	STK	Lube Moly Liebherr	EA	F40024	6.00
9900000035	STK	Lubricant, Wire Pulling (1 Gallon)	EA	F50025	11.00
9900000043	STK	Zoom Spout Oiler	EA	SC0001	3.00
9900000061	STK	Electrical Coating, Scotchkote 3M, 15 oz.	EA	SC0001	1.00
9900000063	STK	Almagard, (50/Case)	EA	SC0002	1.00
990010008	STK	Desiccant, Dry-o-Lite Air Dryer Chemical 50# Bag	EA	A10201	2.00
990040020	STK	Loctite 510	EA	SC0003	8.00
990100004	STK	Gas Additive	EA	SC0003	1.00
990100005	STK	Additive Fuel Injection STP	EA	SC0003	4.00
990100007	STK	Antifreeze, Gas Line Berkible	EA	SC0002	14.00
990200031	STK	Battery, Protective Spray N0-C0	EA	SC0001	3.00
990200032	STK	Cleaner, Battery N0-C0	EA	SC0002	1.00
990200033	STK	Contact, Cleaner, CRC only (Replacement ok per GG)	EA	SC0003	45.00
990200034	STK	Cleaner, PVC	EA	SC0001	3.00
990200035	STK	Cleanser, Ajax	EA	A10115	5.00
990200038	STK	Cable, Cleaner	EA	SC0002	26.00
990400002	STK	Mega Slip	EA	SC0003	0.00
990400003	STK	Cement, PVC	EA	SC0001	4.00
990400004	STK	Loctite	EA	SC0003	2.00
990400005	STK	Loctite, Threadlocker 10 ml	EA	SC0003	2.00
990400006	STK	Loctite, 10 ml	EA	SC0003	4.00
990400007	STK	Loctite Sealant, 50ML	EA	SC0003	1.00
990400008	STK	Loctite (50 ml Bottle)	EA	SC0003	2.00
990400009	STK	Loctite Quick Set Adhesive	EA	SC0003	3.00
990400010	STK	Adhesive Form-a-gasket	EA	F10014	9.00
990400011	STK	Adhesive, Super Weatherstrip	EA	F10013	1.00
990400012	STK	Epoxy Devcon	EA	F10015	2.00
990400013	STK	Bluing Prussian, Permatex	EA	SC0003	6.00
990400014	STK	Caulk, Silicone, Clear, Caulking Gun Size	EA	F20001	8.00
990400015	STK	Gasket Permatex Hi-Temp	EA	F10016	4.00
990400018	STK	Locktite, Quick Metal	EA	SC0003	8.00
990400019	STK	Loctite Removable Threadlocker	EA	SC0003	7.00
990500004	STK	Anti-Seize, Brush On (51003 Spray)	EA	SC0001	7.00
990500005	STK	Compound Pipe	EA	SC0001	6.00
990500007	STK	Compound Thread w/Teflon, Loctite	EA	SC0003	2.00
990500008	STK	Sealant Permatex	EA	SC0001	2.00
990500009	STK	Sealant, Pneumatic & Hydraulic, Loctite	EA	SC0003	7.00
990500011	STK	Wear Flex Brushable	EA	N50007	2.00
990500013	STK	Wearflex, Trowelable, Mega Metal 1# Kits	EA	N40021	5.00
990800013	STK	Fluid Bl. Layout	EA	SC0003	3.00
990800014	STK	Paint, Spray Black	EA	SC0002	2.00
990800015	STK	Paint,Blue Spray	EA	SC0002	6.00
990800016	STK	Paint ,Red	EA	SC0002	1.00
990800017	STK	Primer,Grey	EA	SC0002	0.00
990800018	STK	Paint,Yellow Spray	EA	SC0002	6.00
990800019	STK	Paint, Spray Flourescent Orange	EA	SC0002	11.00
990800020	STK	Paint, White Spray	EA	SC0002	9.00
991000001	STK	Gum Cutter	EA	SC0003	156.00
991000002	STK	Lubricant	EA	SC0003	3.00
991000003	STK	Lubricant	EA	SC0003	4.00
991000004	STK	Degreaser, Electrical Blast Off	EA	SC0003	30.00

<u>itemnum</u>	<u>category</u>	<u>description</u>	<u>unit</u>	<u>binnum</u>	<u>OH Qty</u>
9910000005	STK	Cleaner Degreaser	EA	N30012	1.00
9911000001	STK	Fluid Power Steering Radiator Specialty	EA	SC0003	6.00
9911000002	STK	Fluid Starting	EA	SC0003	9.00
9911000003	STK	Oil Penetrating	EA	SC0003	60.00
9911000004	STK	Anti-Splatter Spray	EA	F40003	2.00

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