FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION WASTEWATER COMPLIANCE INSPECTION REPORT

Facility Name and Physical Address WAF				WAFR	ID		County	Entry Date	Entry Time		
Florida Mine – Trail Ridge FL0				FL000	00051		Bradford	10/24/2017	7 08:30 AM		
5222 Treat	Road										
Starke, Florida 32091 Faci				Facility	Phone #			Exit Date	Exit Time		
(904				(904) 9	964-1200)		10/25/2017	6:15 PM		
LAT	29	О	54	6	46.1	5 "					
Long	82	О	1	4	52.3	5 "					
Name(s) of Fiel	Name(s) of Field Representatives(s) and Title					Certification #	Email		Phone		
Connie Henderson, Environmental Mgr				Mgr	N/A		connie.hend	erson@chemours.co	m (904) 964-1327		
Name & Addre	ess of Permit	tee / De	esignated	l Rep.	Titl	e	Email		Phone		
Nicole T. Newell					Pla	nt Manager	nicole.t.new	ell@chemours.com	(904) 964-1220		
PO Box 753						C					
Starke, Florie	da 32091										
Inspection Typ	e (C	E 1	[San	nples Taken(Y/N)	: N Sample ID#: N/	/A	Samples Split (Y/N): N/A		
☐ Domestic	X Indi	ustria	ıl								

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IC	• •		• '	• ′	= Significant out of Compliance; NA f Compliance Ratings Are Given in		· · · · · · · · · · · · · · · · · · ·
	PERMITS/ORDERS	Areas Mark	EFFLUENT/DISPOSAL				
	1 ERMITS/ORDERS		SELF MONITORING PROGRAM		FACILITY OPERATIONS		EFFECENT/DISTOSAL
IC	1. ♦Permit	IC	3. Laboratory	NC	6. Facility Site Review	NC	9. ♦Effluent Quality
IC	2. ♦Compliance Schedules	NC	4. Sampling	NC	7. Flow Measurement	SC	10. ♦ Effluent Disposal
		NC	5.♦Records & Reports	NC	8.♦ Operation & Maintenance	IC	11. Biosolids/Humate
						IC	12. Groundwater
NE	14. Other						13. ♦SSO Survey

Facility and/or Order Compliance Status:	☐ In-Compliance	□#Out-Of -Compliance		x Significant-Out-Of-Compliance	
Recommended Actions: See 'Corrective Action	on' sections throughout	report.			
Name(s) and Signature(s) of Inspector(s)		District Office/Phone Number		Date	
Herndon Sims			NED/(904) 256-1612		3/12/2018
Jeson Simo					
Name and Signature of Reviewer			District Office/Phone Number		Date
Heather Webber			NED/ (904) 256-1622		3/16/2018
Leather Wester					