DEPARTMENT OF ENVIRONMENTAL QUALITY AIR QUALITY DIVISION

FCE Summary Report

Facility :	FRITZ PRODU	CTS					SRN :	M4547
Location :	255 MARION						District :	Detroit
						*	County :	WAYNE
City: F	RIVER ROUGE	State:	MI	Zip Code :	48218	Comp Status		Non Compliance
Source Class : MAJOR Staff : Jonathan Lamb								
FCE Begin I	Date : 6/22/201	7				FCE Date	Completion	6/22/2018
FCE Begin I Comments		7						6/22/2018

Activity Date	Activity Type	Compliance Status	Comments
06/22/2018	Scheduled Inspection	Non Compliance	Scheduled inspection, FY 2018
05/21/2018	Other	Compliance	2017 MAERS review
12/11/2017	Stack Test	Compliance	Results of testing for dioxin/furan and HCI emission rates received via email on 11/20/17 (hard copy received 11/28/17). Results show an average dioxin/furan emission rate of 5.3x10-5 grains D/F TEQ per ton of feed, below the permit limit of 2.1 x 10-4 grains D/F TEQ per ton of feed. Results show an HCI emission rate of 1.58 lb/hr and 0.25 lb/ton of feed, below the permitted limits of 2.0 lb/hr and 0.40 lb/ton of feed, respectively. Process data collected during testing showed an average chlorine feed rate of 198 lb/hr, average lime feed rate of 22.7 lb/hr, and activated carbon (PAC) feed rate of 2.7 lb/hr, with an average charge rate of 6.2 tons/hr A review of the report performed by Tom Gasloli, AQD-TPU, found the calculations and lab QA to be acceptable.
09/20/2017	Scheduled Inspection	Non Compliance	Targeted inspection, FY 2017. Inspection performed July 20 and September 20, 2017.
09/20/2017	Stack Test Observation	Compliance	Stack testing for HCl and D/F emission rates

List of Partial Compliance Evaluations :

Activity Date	Activity Type	Compliance Status	Comments
09/18/2017	Stack Test	Non Compliance	Results of testing for dioxin/furan (D/F) emission rates, performed on June 30, 2015, by Air/Compliance Consultants, Inc. Results show a D/F emission rate of 9.2x10-4 grains D/F per ton of feed/charge, which exceeds the allowable D/F limit of 2.1 x 10-4 grains D/F per ton of feed/charge.

Name: _____ Date: _____ Supervisor: _____K Page 2 of 2