

**ANNUAL REPORT**

**Prepared for:**

**BLACK & DECKER (U.S.) INC.  
Hampstead, Maryland**

**JULY 1996**

**Prepared by:**

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**W.O. No. 02501-004-001-0200**

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## SECTION 1 INTRODUCTION

This Annual Report has been prepared to meet the requirements of Condition IV.L of the Administrative Consent Order between the State of Maryland Department of the Environment (MDE) and Black & Decker (U.S.) Inc. (April 1995) (Consent Order) and the Addendum to Administrative Consent Order dated 29 June 1995. Specifically, Condition IV.L calls for preparation of an Annual Report containing a summary of the information contained in the Discharge Monitoring Reports (Table 2-3), a summary of all analyses of water samples (Tables 2-4 to 2-7), an explanation of all problems encountered and the manner in which they were resolved (Table 3-1), a performance evaluation of the treatment system (Section 4), and recommendations for continuation of, or changes to, the treatment system (Section 5). This document is one of several which are being prepared in response to the Consent Order; each of these documents are to be submitted to the MDE in accordance with the schedule outlined in the Consent Order. Final versions of the documents are to become part of the Administrative Record for the site which is to be maintained at a public repository in the town of Hampstead.

**SECTION 2**  
**SITE CHARACTERISTICS**

**2.1 HYDRAULIC PROPERTIES**

In accordance with the Consent Order and the Water Appropriation Permit issued to the Black and Decker (U.S.) Inc. Hampstead, Maryland facility, the following pumping and water level information is included for the period of July 1995 through June 1996.

Pumping records showing the total gallons pumped per month of treatment system operation are presented in Table 2-1. Copies of the Withdrawal Reports, for the periods of July through December 1995 and January through June 1996, are included in Appendix A.

Water levels (Water Level Monitoring Report) for wells included in the water level monitoring plan are presented in Table 2-2. Based on the May 1996 water levels, a representative groundwater elevation contour map showing the potentiometric surface under pumping conditions is presented in Figure 2-1. At the time the data was collected, the extraction wells were pumping at a combined rate of approximately 170 gpm.

**2.2 EFFLUENT CHARACTERISTICS**

Effluent characteristics of the NPDES discharge points are recorded monthly on Discharge Monitoring Reports (DMRs) and are submitted to MDE, Water Management Administration, on a quarterly basis. A summary of the sample results from the DMRs is presented in Table 2-3. DMRs for the period of July 1995 through June 1996 are included in Appendix B.

**Table 2-1**  
**Treatment System Pumping Records**  
**(July 1995 through June 1996)**

**Black & Decker**  
**Hampstead, Maryland**

<b>Date</b>	<b>Water Pumped (gallons)</b>
July 1995	7,103,793
August 1995	7,044,689
September 1995	6,639,325
October 1995	6,699,531
November 1995	6,075,298
December 1995	6,725,716
January 1996	6,607,400
February 1996	5,960,999
March 1996	6,962,621
April 1996	6,575,450
May 1996	7,581,928
June 1996	7,191,904

**Table 2-2**  
**Groundwater Elevation Data (July 1995 through June 1996)**  
**Black & Decker**  
**Hampstead, Maryland**

WELL NO.	TOC ELEV.	TOTAL DEPTH	07/28/95		08/21/95		09/29/95		10/23/95	
			DTW	ELEV	DTW	ELEV	DTW	ELEV	DTW	ELEV
EW-1	847.21	55	NA	-	NA	-	NA	-	NA	-
EW-2	849.21	110	84.13	765.08	80.58	768.63	86.13	763.08	89.12	760.09
EW-3	846.64	118	68.11	778.53	66.09	780.55	65.33	781.31	64.56	782.08
EW-4	858.01	97.5	NA	-	NA	-	NA	-	63.97	794.04
EW-5	864.17	98	81.53	782.64	79.74	784.43	81.36	782.81	82.45	781.72
EW-6	831.98	115	69.95	762.03	66.62	765.36	67.93	764.05	69.32	762.66
EW-7	818.38	78	40.78	777.60	41.47	776.91	43.32	775.06	44.56	773.82
EW-8	811.13	98	46.12	765.01	47.62	763.51	50.32	760.81	54.27	756.86
EW-9	811.35	141	78.87	732.48	83.18	728.17	86.16	725.19	88.15	723.20
EW-10	807.74	NA	49.64	758.10	50.58	757.16	52.41	755.33	53.07	754.67
RFW-1A	864.37	78	51.44	812.93	51.46	812.91	52.21	812.16	52.79	811.58
RFW-1B	864.23	200	51.45	812.78	51.41	812.82	52.20	812.03	52.82	811.41
RFW-2A	857.41	35	16.97	840.44	17.29	840.12	19.49	837.92	19.49	837.92
RFW-2B	857.73	75	17.56	840.17	17.87	839.86	20.10	837.63	20.11	837.62
RFW-3B	839.21	153	32.89	806.32	33.71	805.50	34.70	804.51	35.60	803.61
RFW-4A	830.37	62	37.74	792.63	36.98	793.39	37.93	792.44	38.67	791.70
RFW-4B	830.37	120	37.63	792.74	36.86	793.51	37.82	792.55	38.61	791.76
RFW-5A	817.50	30	DRY	-	DRY	-	DRY	-	DRY	-
RFW-6	785.04	120	2.97	782.07	3.08	781.96	3.84	781.20	3.97	781.07
RFW-7	805.14	29	7.98	797.16	7.12	798.02	7.83	797.31	7.63	797.51
RFW-8	860.07	53	DRY	-	DRY	-	DRY	-	DRY	-
RFW-9	858.21	49	26.51	831.70	26.42	831.79	27.96	830.25	28.01	830.20
RFW-10	852.06	58	56.92	795.14	57.33	794.73	57.83	794.23	58.18	793.88
RFW-11A	849.32	72	61.35	787.97	61.58	787.74	61.26	788.06	61.02	788.30
RFW-11B	849.62	116	64.71	784.91	64.88	784.74	64.32	785.30	63.90	785.72
RFW-12B	844.87	264	50.49	794.38	50.80	794.07	51.19	793.68	51.39	793.48
RFW-13	849.11	150	60.84	788.27	60.17	788.94	58.36	790.75	62.12	786.99
RFW-14B	812.39	281	37.80	774.59	39.28	773.11	40.62	771.77	41.64	770.75
RFW-16	856.14	41	DRY	-	DRY	-	DRY	-	DRY	-
RFW-17	834.66	60.5	26.53	808.13	26.66	808.00	27.13	807.53	27.47	807.19
RFW-18	843.67	50	5.17	838.50	5.30	838.37	6.03	837.64	4.66	839.01
RFW-19	858.28	60	7.86	850.42	7.53	850.75	8.42	849.86	7.36	850.92
PH-7	805.94	89	29.87	776.07	31.20	774.74	33.08	772.86	34.05	771.89
PH-9	814.94	98	34.11	780.83	35.84	779.10	37.63	777.31	38.74	776.20
PH-11	820.68	78	42.49	778.19	41.17	779.51	42.01	778.67	42.30	778.38
PH-12	828.35	87	44.44	783.91	45.13	783.22	46.08	782.27	46.75	781.60
B-2	807.68	100	5.61	802.07	6.46	801.22	7.58	800.10	6.45	801.23
B-3	803.02	83	7.64	795.38	7.79	795.23	8.43	794.59	8.94	794.08
Amoco	842.29	NA	24.39	817.90	24.53	817.76	25.01	817.28	25.50	816.79
Hamp. Town #22	NA	NA	0.75	-	2.11	-	0.71	-	0.72	-
Pembroke #1	NA	NA	NA	-	NA	-	NA	-	17.02	-
Pembroke #2	NA	NA	NA	-	NA	-	NA	-	36.15	-
N. Houcks. Rd.	NA	NA	NA	-	NA	-	NA	-	11.90	-
E. Century St.	NA	NA	11.23	-	11.06	-	11.73	-	11.20	-
W. Beckleys. Rd.	NA	NA	53.57	-	53.70	-	56.24	-	54.75	-

ELEV = Elevation (feet above mean sea level)

DTW = Depth to water (feet below top of well casing)

NA = Not Available / Not Accessible



**Table 2-2 (continued)**  
**Groundwater Elevation Data (July 1995 through June 1996)**  
**Black & Decker**  
**Hampstead, Maryland**

WELL NO.	TOC ELEV.	TOTAL DEPTH	11/13/95		12/22/95		1/23/96		2/13/96	
			DTW	ELEV	DTW	ELEV	DTW	ELEV	DTW	ELEV
EW-1	847.21	55	NA	--	NA	--	NA	--	NA	--
EW-2	849.21	110	86.28	762.93	87.21	762.00	87.35	761.86	85.58	763.63
EW-3	846.64	118	64.65	781.99	69.17	777.47	69.31	777.33	50.01	796.63
EW-4	858.01	97.5	63.89	794.12	63.72	794.29	64.03	793.98	61.92	796.09
EW-5	864.17	98	68.78	795.39	71.32	792.85	72.00	792.17	63.57	800.60
EW-6	831.98	115	70.04	761.94	70.44	761.54	70.35	761.63	66.71	765.27
EW-7	818.38	78	44.72	773.66	44.81	773.57	43.96	774.42	45.82	772.56
EW-8	811.13	98	55.61	755.52	55.86	755.27	56.31	754.82	56.54	754.59
EW-9	811.35	141	89.37	721.98	89.64	721.71	89.40	721.95	84.32	727.03
EW-10	807.74	NA	53.81	753.93	52.78	754.96	53.28	754.46	49.77	757.97
RFW-1A	864.37	78	52.12	812.25	51.86	812.51	50.96	813.41	47.17	817.20
RFW-1B	864.23	200	52.09	812.14	51.85	812.38	50.94	813.29	47.19	817.04
RFW-2A	857.41	35	18.36	839.05	16.19	841.22	14.21	843.20	13.41	844.00
RFW-2B	857.73	75	18.98	838.75	16.83	840.90	14.78	842.95	14.04	843.69
RFW-3B	839.21	153	36.77	802.44	34.73	804.48	34.67	804.54	30.91	808.30
RFW-4A	830.37	62	38.62	791.75	38.34	792.03	36.29	794.08	35.22	795.15
RFW-4B	830.37	120	38.43	791.94	38.22	792.15	36.13	794.24	34.97	795.40
RFW-5A	817.50	30	DRY	--	DRY	--	DRY	--	DRY	--
RFW-6	785.04	120	3.55	781.49	4.46	780.58	2.53	782.51	3.01	782.03
RFW-7	805.14	29	7.12	798.02	7.63	797.51	5.86	799.28	5.36	799.78
RFW-8	860.07	53	DRY	--	DRY	--	DRY	--	53.15	806.92
RFW-9	858.21	49	26.82	831.39	NA	--	NA	--	25.51	832.70
RFW-10	852.06	58	54.71	797.35	54.79	797.27	53.86	798.20	50.66	801.40
RFW-11A	849.32	72	60.91	788.41	62.95	786.37	65.95	783.37	53.42	795.90
RFW-11B	849.62	116	63.83	785.79	67.00	782.62	68.86	780.76	52.80	796.82
RFW-12B	844.87	264	51.44	793.43	51.51	793.36	51.94	792.93	49.02	795.85
RFW-13	849.11	150	61.60	787.51	61.71	787.40	60.70	788.41	61.22	787.89
RFW-14B	812.39	281	42.68	769.71	43.63	768.76	41.74	770.65	43.33	769.06
RFW-16	856.14	41	DRY	--	DRY	--	DRY	--	38.84	817.30
RFW-17	834.66	60.5	27.36	807.30	27.42	807.24	27.44	807.22	25.41	809.25
RFW-18	843.67	50	4.00	839.67	4.68	838.99	3.81	839.86	2.91	840.76
RFW-19	858.28	60	6.33	851.95	7.04	851.24	5.98	852.30	4.62	853.66
PH-7	805.94	89	34.06	771.88	33.87	772.07	30.71	775.23	31.00	774.94
PH-9	814.94	98	38.86	776.08	38.93	776.01	37.67	777.27	39.94	775.00
PH-11	820.68	78	41.41	779.27	42.93	777.75	41.24	779.44	40.67	780.01
PH-12	828.35	87	45.93	782.42	46.84	781.51	45.26	783.09	46.61	781.74
B-2	807.68	100	4.56	803.12	5.39	802.29	4.63	803.05	5.95	801.73
B-3	803.02	83	7.99	795.03	8.24	794.78	7.69	795.33	4.49	798.53
Amoco	842.29	NA	25.42	816.87	25.61	816.68	25.43	816.86	23.21	819.08
Hamp. Town #22	NA	NA	NA	--	0.69	--	0.34	--	FROZEN	--
Pembroke #1	NA	NA	15.85	--	16.11	--	15.82	--	12.59	--
Pembroke #2	NA	NA	35.92	--	35.38	--	35.57	--	33.78	--
N. Houcks. Rd.	NA	NA	9.08	--	8.37	--	7.86	--	6.37	--
E. Century St.	NA	NA	10.91	--	10.74	--	10.21	--	FROZEN	--
Lwr. Beckleys. Rd.	NA	NA	54.88	--	54.23	--	56.30	--	49.70	--

ELEV = Elevation (feet above mean sea level)  
DTW = Depth to water (feet below top of well casing)  
NA = Not Available / Not Accessible

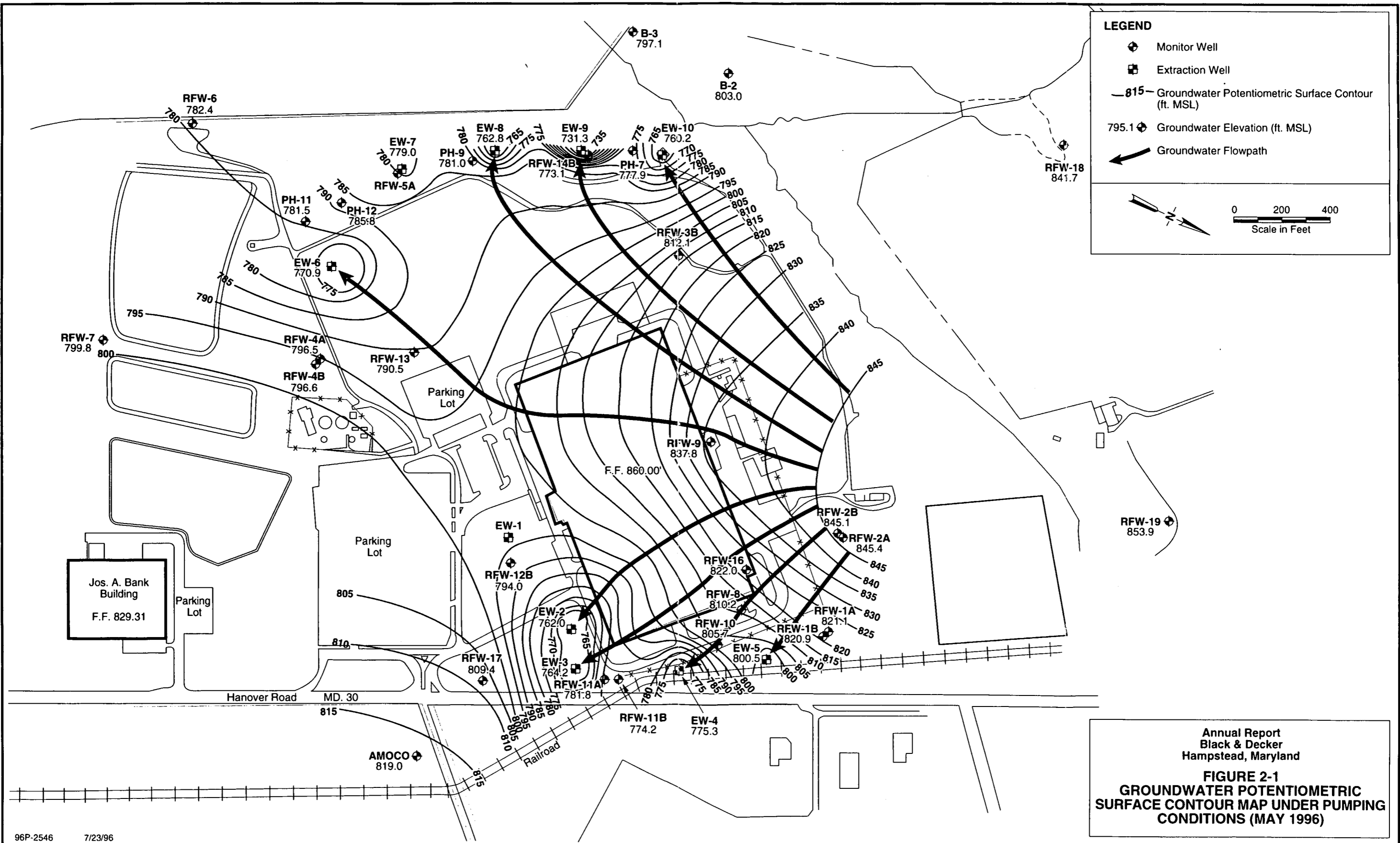
**Table 2-2 (continued)**  
**Groundwater Elevation Data (July 1995 through June 1996)**  
**Black & Decker**  
**Hampstead, Maryland**

WELL NO.	FOC ELEV.	TOTAL DEPTH	3/6/96		4/15/96		5/6/96		6/6/96	
			DTW	ELEV	DTW	ELEV	DTW	ELEV	DTW	ELEV
EW-1	847.21	55	NA	-	NA	-	NA	-		
EW-2	849.21	110	81.76	767.45	87.73	761.48	87.25	761.96	90.50	758.71
EW-3	846.64	118	70.63	776.01	69.63	777.01	82.47	764.17	67.22	779.42
EW-4	858.01	97.5	87.89	770.12	NA	-	82.76	775.25	87.63	770.38
EW-5	864.17	98	65.02	799.15	58.57	805.60	63.67	800.50	76.93	787.24
EW-6	831.98	115	69.86	762.12	69.01	762.97	61.12	770.86	58.26	773.72
EW-7	818.38	78	45.04	773.34	44.73	773.65	39.41	778.97	36.97	781.41
EW-8	811.13	98	55.11	756.02	51.49	759.64	48.68	762.45	50.23	760.90
EW-9	811.35	141	89.31	722.04	87.43	723.92	80.02	731.33	78.72	732.63
EW-10	807.74	NA	48.91	758.83	47.98	759.76	47.54	760.20	46.55	761.19
RFW-1A	864.37	78	47.63	816.74	46.91	817.46	43.30	821.07	44.90	819.47
RFW-1B	864.23	200	47.64	816.59	46.93	817.30	43.36	820.87	44.93	819.30
RFW-2A	857.41	35	13.04	844.37	12.36	845.05	12.03	845.38	12.04	845.37
RFW-2B	857.73	75	13.66	844.07	12.82	844.91	12.67	845.06	12.70	845.03
RFW-3B	839.21	153	31.22	807.99	30.30	808.91	27.13	812.08	28.06	811.15
RFW-4A	830.37	62	35.43	794.94	34.98	795.39	33.90	796.47	34.14	796.23
RFW-4B	830.37	120	35.30	795.07	34.24	796.13	33.81	796.56	33.93	796.44
RFW-5A	817.50	30	DRY	-	DRY	-	DRY	-	DRY	-
RFW-6	785.04	120	3.20	781.84	2.74	782.30	2.63	782.41	2.48	782.56
RFW-7	805.14	29	5.80	799.34	5.73	799.41	5.34	799.80	6.21	798.93
RFW-8	860.07	53	52.14	807.93	48.93	811.14	49.88	810.19	53.98	806.09
RFW-9	858.21	49	24.93	833.28	24.32	833.89	24.23	833.98	23.93	834.28
RFW-10	852.06	58	50.12	801.94	46.35	805.71	48.40	803.66	53.85	798.21
RFW-11A	849.32	72	62.80	786.52	67.56	781.76	67.51	781.81	64.91	784.41
RFW-11B	849.62	116	67.46	782.16	75.48	774.14	75.43	774.19	67.50	782.12
RFW-12B	844.87	264	50.16	794.71	50.91	793.96	50.83	794.04	NA	-
RFW-13	849.11	150	61.03	788.08	60.71	788.40	58.58	790.53	58.98	790.13
RFW-14B	812.39	281	42.41	769.98	40.52	771.87	39.28	773.11	37.98	774.41
RFW-16	856.14	41	38.47	817.67	37.93	818.21	34.18	821.96	35.42	820.72
RFW-17	834.66	60.5	25.81	808.85	25.61	809.05	25.29	809.37	25.49	809.17
RFW-18	843.67	50	3.17	840.50	3.13	840.54	1.97	841.70	2.96	840.71
RFW-19	858.28	60	5.04	853.24	5.14	853.14	4.42	853.86	5.01	853.27
PH-7	805.94	89	29.85	776.09	23.68	782.26	28.04	777.90	27.36	778.58
PH-9	814.94	98	38.96	775.98	38.34	776.60	33.92	781.02	31.48	783.46
PH-11	820.68	78	40.79	779.89	40.00	780.68	39.20	781.48	38.44	782.24
PH-12	828.35	87	46.56	781.79	46.51	781.84	42.51	785.84	40.98	787.37
B-2	807.68	100	5.11	802.57	5.43	802.25	4.68	803.00	4.92	802.76
B-3	803.02	83	6.44	796.58	6.17	796.85	5.96	797.06	6.17	796.85
Amoco	842.29	NA	25.36	816.93	24.31	817.98	23.29	819.00	23.86	818.43
Hamp. Town #22	NA	NA	0.46	-	0.92	-	0.70	-	0.77	-
Pembroke #1	NA	NA	12.43	-	12.62	-	11.61	-	12.00	-
Pembroke #2	NA	NA	33.84	-	33.53	-	32.04	-	32.10	-
N. Houcks. Rd.	NA	NA	6.83	-	7.41	-	6.83	-	7.22	-
E. Century St.	NA	NA	10.51	-	10.83	-	10.41	-	11.12	-
Lwr. Beckleys. Rd.	NA	NA	50.01	-	51.06	-	47.34	-	47.23	-

ELEV = Elevation (feet above mean sea level)

DTW = Depth to water (feet below top of well casing)

NA = Not Available / Not Accessible



Effluent Characteristics Summary (July 1995 through June 1996)

Black & Decker  
Hampstead, Maryland

Discharge Number	Parameter	Units	Permit Limits	DMR DATE					
				July 1995	August 1995	September 1995	October 1995	November 1995	December 1995
001	FLOW average	MGD	NA	*	0.2587	0.1505	0.3146	0.3652	0.0770
	maximum	MGD	NA	*	1.0553	0.4393	1.3077	0.9280	0.2012
	1,1,1-Trichloroethane	ug/l	5	*	ND	ND	ND	ND	ND
	Tetrachloroethylene	ug/l	5	*	ND	ND	ND	ND	ND
	Trichloroethylene	ug/l	5	*	ND	ND	ND	ND	ND
	Total Residual Chlorine	mg/l	<0.1	*	<0.1	<0.1	<0.1	ND	<.01
	Oil & Grease average	mg/l	10	*	ND	ND	ND	ND	ND
	maximum	mg/l	15	*	ND	ND	ND	ND	ND
	pH minimum	STD	6.0	*	6.71	6.49	6.47	7.18	6.85
	maximum	STD	8.5	*	8.07	7.45	7.36	7.62	7.93
BOD	mg/l	15	*	6	3	4	4	8	
TSS	quarterly average	mg/l	20	*	NR	NR	NR	NR	9
	maximum	mg/l	30	*	22	<2	15	7	5
101 (Monitoring Point)	FLOW average	MGD	NA	*	0.411	0.498	0.438	0.435	0.499
	maximum	MGD	NA	*	0.519	0.524	0.459	0.447	0.534
	Fecal Coliform	MPN/100ml	200	*	ND	ND	ND	ND	ND
201 (Monitoring Point)	FLOW average	MGD	NA	0.2292	0.2272	0.2213	0.2161	0.2025	0.2170
	maximum	MGD	NA	0.2415	0.2393	0.2332	0.2331	0.2310	0.2323
	1,1,1-Trichloroethane	ug/l	NA	ND	ND	ND	ND	ND	ND
	Tetrachloroethylene	ug/l	NA	ND	ND	ND	ND	ND	ND
	Trichloroethylene	ug/l	NA	ND	ND	ND	ND	ND	ND

NA = Not Applicable

ND = Not Detected

NR = Not Reported

\* = No flow at Outfall 001 and Outfall 101 during July 1995

Table 2 (continued)  
**Effluent Characteristics Summary (July 1995 through June 1996)**  
**Black & Decker**  
**Hampstead, Maryland**

Discharge Number	Parameter	Units	Permit Limits	DMR DATE						
				January 1996	February 1996	March 1996	April 1996	May 1996	June 1996	
001	FLOW	average	MGD	NA	0.3287	0.2372	0.1618	0.3490	0.2180	0.1863
		maximum	MGD	NA	0.6334	0.4715	0.1946	0.7680	0.3360	0.2743
	1,1,1-Trichloroethane	ug/l	5	ND	ND	ND	ND	ND	ND	
	Tetrachloroethylene	ug/l	5	ND	ND	ND	ND	ND	ND	
	Trichloroethylene	ug/l	5	ND	ND	ND	ND	ND	ND	
	Total Residual Chlorine	mg/l	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	
	Oil & Grease	average	mg/l	10	ND	ND	22	ND	ND	ND
		maximum	mg/l	15	NR	NR	110	ND	ND	ND
	pH	minimum	STD	6.0	7.05	7.01	7.07	7.14	7.09	6.83
		maximum	STD	8.5	7.44	7.70	7.42	8.25	7.42	7.65
	BOD		mg/l	15	4	7	3	3	6	2
TSS	quarterly average	mg/l	20	NR	NR	4.3	NR	NR	12	
	maximum	mg/l	30	5	6	2	4	7	24	
101 (Monitoring Point)	FLOW	average	MGD	NA	0.373	0.342	0.436	0.486	0.467	0.512
		maximum	MGD	NA	0.426	0.430	0.444	0.509	0.502	0.531
	Fecal Coliform	MPN/100ml	200	ND	ND	ND	ND	ND	ND	
201 (Monitoring Point)	FLOW	average	MGD	NA	0.2131	0.2056	0.2246	0.2190	0.2450	0.2400
		maximum	MGD	NA	0.2278	0.2425	0.2385	0.2650	0.2630	0.2720
	1,1,1-Trichloroethane	ug/l	NA	ND	ND	ND	ND	ND	ND	
	Tetrachloroethylene	ug/l	NA	ND	ND	ND	ND	ND	ND	
	Trichloroethylene	ug/l	NA	ND	ND	ND	ND	ND	ND	

NA = Not Applicable

ND = Not Detected

NR = Not Reported

\* = No flow at Outfall 001 and Outfall 101 during July 1995

### 2.3 GROUNDWATER QUALITY DATA

A summary of groundwater analytical results for the third and fourth quarters of 1995 and the first and second quarters of 1996 are included in Tables 2-4, 2-5, 2-6, and 2-7, respectively. Analytical data packages for the second quarter of 1996 are included in Appendix C. Analytical data packages for the remaining quarters are included in the respective Quarterly Groundwater Monitoring Reports.

For the reporting period of July 1995 through June 1996, approximately 1175 lbs of total VOCs were removed from the groundwater. In general, the total VOCs were comprised of TCE (82%), PCE (17%), and a small percentage of 1,2-Dichloroethene and 1,1,1-Trichloroethane.

In general, the volatile organic compounds (VOCs) detected in the highest concentrations were trichloroethene (TCE) and tetrachlorethene (PCE). Those compounds detected at lower concentrations are 1,2-dichloroethene, 1,1,1-trichloroethane, 1,1-dichloroethene, and 1,1,2-trichloroethane. The remainder of VOCs present were detected at levels well below the Federal Maximum Concentration Levels (MCL).

As found in earlier sampling events at the Black & Decker facility, the highest concentrations of TCE are found on the eastern half of the Black & Decker facility in monitor well RFW-16. The highest concentrations of PCE were found in the vicinity of recovery well EW-9.

**Summary of Groundwater Analytical Results -August 1995**  
**Black & Decker**  
**Hampstead, Maryland**

PARAMETER	Units	EW-1	EW-2	EW-3	EW-4	EW-5	EW-6	EW-7	EW-8	EW-9	EW-10	EW-10	RFW-1A	RFW-1B	RFW-2A
			(50)	(25)	(100)	(25)					(10)	(2.5)	(DUP.) (2.5)		
Chloromethane	ug/L	NS	500 U	250 U	1000 U	250 U	10 U	10 U	10 U	100 U	25 U	25 U	10 U	10 U	10 U
Bromomethane	ug/L	NS	500 U	250 U	1000 U	250 U	10 U	10 U	10 U	100 U	25 U	25 U	10 U	10 U	10 U
Vinyl Chloride	ug/L	NS	500 U	250 U	1000 U	250 U	10 U	10 U	10 U	100 U	25 U	25 U	10 U	10 U	10 U
Chloroethane	ug/L	NS	500 U	250 U	1000 U	250 U	10 U	10 U	10 U	100 U	25 U	25 U	10 U	10 U	10 U
Methylene Chloride	ug/L	NS	160 JB	120 U	480 JB	120 U	3 JB	4 JB	5 U	32 JB	3 JB	12 U	4 JB	5 U	5 U
Acetone	ug/L	NS	500 U	250 U	1000 U	250 U	10 U	10 U	10 U	100 U	25 U	25 U	10 U	10 U	10 U
Carbon Disulfide	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
1,1-Dichloroethene	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
1,1-Dichloroethane	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
1,2-Dichloroethene (total)	ug/L	NS	250 U	120 U	500 U	120 U	3 J	23	39	11 J	12 U	12 U	5 U	5 U	5 U
Chloroform	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
1,2-Dichloroethane	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
2-Butanone	ug/L	NS	500 U	250 U	1000 U	250 U	10 U	10 U	10 U	100 U	25 U	25 U	10 U	10 U	10 U
1,1,1-Trichloroethane	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
Carbon Tetrachloride	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
Vinyl Acetate	ug/L	NS	500 U	250 U	1000 U	250 U	10 U	10 U	10 U	100 U	25 U	25 U	10 U	10 U	10 U
Bromodichloromethane	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
1,2-Dichloropropane	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
cis-1,3-Dichloropropene	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
Trichloroethene	ug/L	NS	6300	2400	11000	4600	16	29	20	24 J	12 U	12 U	5 U	5 U	4 J
Dibromochloromethane	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
1,1,2-Trichloroethane	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
Benzene	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
Trans-1,3-Dichloropropene	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
Bromoform	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
4-Methyl-2-pentanone	ug/L	NS	500 U	250 U	1000 U	250 U	10 U	10 U	10 U	100 U	25 U	25 U	10 U	10 U	10 U
2-Hexanone	ug/L	NS	500 U	250 U	1000 U	250 U	10 U	10 U	10 U	100 U	25 U	25 U	10 U	10 U	10 U
Tetrachloroethene	ug/L	NS	130 J	51 J	280 J	91 J	110	77	230	1600	350	350	5 U	5 U	5 U
1,1,2,2-Tetrachloroethane	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
Toluene	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
Chlorobenzene	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
Ethylbenzene	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
Styrene	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U
Xylene (total)	ug/L	NS	250 U	120 U	500 U	120 U	5 U	5 U	5 U	50 U	12 U	12 U	5 U	5 U	5 U

Notes: U = Compound was analyzed for but not detected. Value shown is the method detection limit for quantification.  
 J = Indicates an estimated value.  
 B = Indicates that the analyte was found in the associated blank as well as in the sample.

DUP = Duplicate sample  
 NS = Not sampled  
 (2.5) = Dilution factor.

Table 2 (Continued)  
 Summary of Groundwater Analytical Results - August 1995  
 Black & Decker  
 Hampstead, Maryland

PARAMETER	Units	RFW-2B	RFW-4A (2.5)	RFW-4A (DUP.) (2.5)	RFW-4B (2)	RFW-5A	RFW-6	RFW-7	RFW-8	RFW-9	RFW-10 (50)	RFW-11A	RFW-11B	RFW-12B	RFW-13
Chloromethane	ug/L	10 U	25 U	25 U	20 U	NS	10 U	10 U	NS	10 U	500 U	10 U	10 U	10 U	10 U
Bromomethane	ug/L	10 U	25 U	25 U	20 U	NS	10 U	10 U	NS	10 U	500 U	10 U	10 U	10 U	10 U
Vinyl Chloride	ug/L	10 U	25 U	25 U	20 U	NS	10 U	10 U	NS	10 U	500 U	10 U	10 U	10 U	10 U
Chloroethane	ug/L	10 U	25 U	25 U	20 U	NS	10 U	10 U	NS	10 U	500 U	10 U	10 U	10 U	10 U
Methylene Chloride	ug/L	5 U	17 B	25 B	11 B	NS	5 U	1 J	NS	5 U	370 B	5 U	6 B	6 B	5 U
Acetone	ug/L	10 U	25 U	25 U	20 U	NS	10 U	10 U	NS	10 U	500 U	10 U	10 U	10 U	10 U
Carbon Disulfide	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U
1,1-Dichloroethene	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	2 J	5 U
1,1-Dichloroethane	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U
1,2-Dichloroethene (total)	ug/L	5 U	8 J	7 J	9 J	NS	9	3 J	NS	8	250 U	5 U	5 U	5 U	5 U
Chloroform	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U
1,2-Dichloroethane	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U
2-Butanone	ug/L	10 U	25 U	25 U	20 U	NS	10 U	10 U	NS	10 U	500 U	10 U	10 U	10 U	10 U
1,1,1-Trichloroethane	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U
Carbon Tetrachloride	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U
Vinyl Acetate	ug/L	10 U	25 U	25 U	20 U	NS	10 U	10 U	NS	10 U	500 U	10 U	10 U	10 U	10 U
Bromodichloromethane	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U
1,2-Dichloropropane	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U
cis-1,3-Dichloropropene	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U
Trichloroethene	ug/L	5 U	220	230	83	NS	71	27	NS	40	5800	100	55	4600	6
Dibromochloromethane	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U
1,1,2-Trichloroethane	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U
Benzene	ug/L	5 U	12 U	12 U	10 U	NS	1 J	5 U	NS	3 J	190 J	5 U	5 U	5 U	5 U
Trans-1,3-Dichloropropene	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U
Bromoform	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U
4-Methyl-2-pentanone	ug/L	10 U	25 U	25 U	20 U	NS	10 U	10 U	NS	10 U	500 U	10 U	10 U	10 U	10 U
2-Hexanone	ug/L	10 U	25 U	25 U	20 U	NS	10 U	10 U	NS	10 U	500 U	10 U	10 U	10 U	10 U
Tetrachloroethene	ug/L	5 U	350	370	190	NS	62	1 J	NS	16	190 J	2 J	5 U	100	61
1,1,2,2-Tetrachloroethane	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U
Toluene	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U
Chlorobenzene	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U
Ethylbenzene	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U
Styrene	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U
Xylene (total)	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	5 U	5 U	5 U	5 U

Notes: U = Compound was analyzed for but not detected. Value shown is the method detection limit for quantification.  
 J = Indicates an estimated value.  
 B = Indicates that the analyte was found in the associated blank as well as in the sample.

DUP = Duplicate sample  
 NS = Not sampled  
 (2.5) = Dilution factor.



Table 2 (Continued)  
 Summary of Groundwater Analytical Results - August 1995  
 Black & Decker  
 Hampstead, Maryland

PARAMETER	Units	RFW-16	RFW-17	RFW-18	RFW-19	TOWN #22	TOWN #2	LEISTER DAIRY	LEISTER RES. #1	LEISTER RES. #2	FIELD BLANK	TRIP BLANK
Chloromethane	ug/L	NS	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U
Bromomethane	ug/L	NS	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U
Vinyl Chloride	ug/L	NS	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U
Chloroethane	ug/L	NS	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U
Methylene Chloride	ug/L	NS	5 U	5 U	7 B	5 U	5 U	2 JB	1 JB	2 JB	3 JB	7 B
Acetone	ug/L	NS	10 U	10 U	6 JB	10 U	10 U	10 U	10 U	10 U	10 U	10 U
Carbon Disulfide	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
1,1-Dichloroethene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
1,1-Dichloroethane	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
1,2-Dichloroethene (total)	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
Chloroform	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
1,2-Dichloroethane	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
2-Butanone	ug/L	NS	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U
1,1,1-Trichloroethane	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
Carbon Tetrachloride	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
Vinyl Acetate	ug/L	NS	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U
Bromodichloromethane	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
1,2-Dichloropropane	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
cis-1,3-Dichloropropene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
Trichloroethene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
Dibromochloromethane	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
1,1,2-Trichloroethane	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
Benzene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	6	5 U	5 U	5 U	5 U
Trans-1,3-Dichloropropene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
Bromoform	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
4-Methyl-2-pentanone	ug/L	NS	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U
2-Hexanone	ug/L	NS	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U
Tetrachloroethene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	6	5 U	5 U	5 U	5 U
1,1,2,2-Tetrachloroethane	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
Toluene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
Chlorobenzene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	2 J	5 U	5 U	5 U	5 U
Ethylbenzene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
Styrene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U
Xylene (total)	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U

Notes: U = Compound was analyzed for but not detected. Value shown is the method detection limit for quantification.  
 J = Indicates an estimated value.  
 B = Indicates that the analyte was found in the associated blank as well as in the sample.

DUP = Duplicate sample  
 NS = Not sampled  
 (2.5) = Dilution factor.

2-5  
**Summary of Groundwater Analytical Results - November 1995**  
**Black & Decker**  
**Hampstead, Maryland**

PARAMETER	Units	EW-1	EW-2	EW-3	EW-4	EW-5	EW-5 (DUP.)	EW-6	EW-7	EW-8	EW-9	EW-10	RFW-1A	RFW-1B	RFW-2A
			(50)	(10)	(25)	(50)	(50)				(10)	(2)			
Chloromethane	ug/L	NS	500 U	100 U	250 U	500 U	500 U	10 U	10 U	10 U	100 U	20 U	10 U	10 U	10 U
Bromomethane	ug/L	NS	500 U	100 U	250 U	500 U	500 U	10 U	10 U	10 U	100 U	20 U	10 U	10 U	10 U
Vinyl Chloride	ug/L	NS	500 U	100 U	250 U	500 U	500 U	10 U	10 U	10 U	100 U	20 U	10 U	10 U	10 U
Chloroethane	ug/L	NS	500 U	100 U	250 U	500 U	500 U	10 U	10 U	10 U	100 U	20 U	10 U	10 U	10 U
Methylene Chloride	ug/L	NS	380 B	100 B	180 B	390 B	470 B	3 JB	5 U	7 B	87 B	20 B	2 JB	8 B	3 JB
Acetone	ug/L	NS	500 U	100 U	250 U	500 U	500 U	10 U	10 U	10 U	100 U	20 U	4 JB	10 U	10 U
Carbon Disulfide	ug/L	NS	250 U	50 U	120 U	250 U	250 U	4 J	5 U	5 U	50 U	10 U	5 U	5 U	5 U
1,1-Dichloroethane	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	2 J	5 U	50 U	10 U	5 U	5 U	5 U
1,1-Dichloroethane	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	2 J	5 U	50 U	10 U	5 U	5 U	5 U
1,2-Dichloroethane (total)	ug/L	NS	250 U	50 U	120 U	250 U	250 U	3	18	34	50 U	10 U	5 U	5 U	5 U
Chloroform	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	5 U	5 U	50 U	10 U	5 U	5 U	5 U
1,2-Dichloroethane	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	5 U	5 U	50 U	10 U	5 U	5 U	5 U
2-Butanone	ug/L	NS	500 U	100 U	250 U	500 U	500 U	10 U	10 U	10 U	100 U	20 U	10 U	10 U	10 U
1,1,1-Trichloroethane	ug/L	NS	250 U	50 U	120 U	150 J	130 J	5 U	3 J	5 U	50 U	10 U	5 U	3 J	5 U
Carbon Tetrachloride	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	5 U	5 U	50 U	10 U	5 U	5 U	5 U
Vinyl Acetate	ug/L	NS	500 U	100 U	250 U	500 U	500 U	10 U	10 U	10 U	100 U	20 U	10 U	10 U	10 U
Bromodichloromethane	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	5 U	5 U	50 U	10 U	5 U	5 U	5 U
1,2-Dichloropropane	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	5 U	5 U	50 U	10 U	5 U	5 U	5 U
cis-1,3-Dichloropropene	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	5 U	5 U	50 U	10 U	5 U	5 U	5 U
Trichloroethene	ug/L	NS	5300	1800	3700	5100	5000	19	29	22	17 J	3 J	5 U	5 U	3 J
Dibromochloromethane	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	5 U	5 U	50 U	10 U	5 U	5 U	5 U
1,1,2-Trichloroethane	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	5 U	5 U	50 U	10 U	5 U	5 U	5 U
Benzene	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	5 U	5 U	50 U	10 U	5 U	5 U	5 U
Trans-1,3-Dichloropropene	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	5 U	5 U	50 U	10 U	5 U	5 U	5 U
Bromoform	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	5 U	5 U	50 U	10 U	5 U	5 U	5 U
4-Methyl-2-pentanone	ug/L	NS	500 U	100 U	250 U	500 U	500 U	10 U	10 U	10 U	100 U	20 U	10 U	10 U	10 U
2-Hexanone	ug/L	NS	500 U	100 U	250 U	500 U	500 U	10 U	10 U	10 U	100 U	20 U	10 U	10 U	10 U
Tetrachloroethene	ug/L	NS	130 J	32 J	90 J	140 J	120 J	100	74	200	1100	250	5 U	5 U	5 U
1,1,2,2-Tetrachloroethane	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	5 U	5 U	50 U	10 U	5 U	5 U	5 U
Toluene	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	5 U	5 U	50 U	10 U	5 U	5 U	5 U
Chlorobenzene	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	5 U	5 U	50 U	10 U	5 U	5 U	5 U
Ethylbenzene	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	5 U	5 U	50 U	10 U	5 U	5 U	5 U
Styrene	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	5 U	5 U	50 U	10 U	5 U	5 U	5 U
Xylene (total)	ug/L	NS	250 U	50 U	120 U	250 U	250 U	5 U	5 U	5 U	50 U	10 U	5 U	5 U	5 U

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Table (Continued)  
 Summary of Groundwater Analytical Results - November 1995  
 Black & Decker  
 Hampstead, Maryland

PARAMETER	Units	RFW-2B	RFW-4A (2.5)	RFW-4B (2)	RFW-5A	RFW-6	RFW-7	RFW-8	RFW-9	RFW-10 (50)	RFW-10 (DUP.) (50)	RFW-11A	RFW-11B	RFW-12B	RFW-13
Chloromethane	ug/L	10 U	25 U	20 U	NS	10 U	10 U	NS	10 U	500 U	500 U	10 U	10 U	250 U	10 U
Bromomethane	ug/L	10 U	25 U	20 U	NS	10 U	10 U	NS	10 U	500 U	500 U	10 U	10 U	250 U	10 U
Vinyl Chloride	ug/L	10 U	25 U	20 U	NS	10 U	10 U	NS	10 U	500 U	500 U	10 U	10 U	250 U	10 U
Chloroethane	ug/L	10 U	25 U	20 U	NS	10 U	10 U	NS	10 U	500 U	500 U	10 U	10 U	250 U	10 U
Methylene Chloride	ug/L	2 JB	23 B	19 B	NS	6 B	5 U	NS	4 JB	440 B	390 B	4 JB	1 JB	190 B	3 JB
Acetone	ug/L	10 U	25 U	20 U	NS	8 JB	10 U	NS	10 U	500 U	500 U	10 U	10 U	210 JB	10 U
Carbon Disulfide	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	250 U	5 U	5 U	120 U	5 U
1,1-Dichloroethene	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	250 U	5 U	5 U	120 U	5 U
1,1-Dichloroethane	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	3 J	250 U	250 U	5 U	5 U	120 U	5 U
1,2-Dichloroethene (total)	ug/L	5 U	7 J	9 J	NS	8	2 J	NS	8	250 U	250 U	5 U	5 U	120 U	5 U
Chloroform	ug/L	5 U	12 U	2 J	NS	5 U	5 U	NS	5 U	250 U	250 U	5 U	5 U	120 U	5 U
1,2-Dichloroethane	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	250 U	5 U	5 U	120 U	5 U
2-Butanone	ug/L	10 U	25 U	20 U	NS	10 U	10 U	NS	10 U	500 U	500 U	10 U	10 U	250 U	10 U
1,1,1-Trichloroethane	ug/L	1 J	12 U	10 U	NS	5 U	5 U	NS	2 J	67 J	88 J	5 U	5 U	120 U	5 U
Carbon Tetrachloride	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	250 U	5 U	5 U	120 U	5 U
Vinyl Acetate	ug/L	10 U	25 U	20 U	NS	10 U	10 U	NS	10 U	500 U	500 U	10 U	10 U	250 U	10 U
Bromodichloromethane	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	250 U	5 U	5 U	120 U	5 U
1,2-Dichloropropane	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	250 U	5 U	5 U	120 U	5 U
cis-1,3-Dichloropropene	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	250 U	5 U	5 U	120 U	5 U
Trichloroethene	ug/L	5	220	190	NS	56	13	NS	43	5300	7100	77	57	4200	8
Dibromochloromethane	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	250 U	5 U	5 U	120 U	5 U
1,1,2-Trichloroethane	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	250 U	5 U	5 U	120 U	5 U
Benzene	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	190 J	5 U	5 U	120 U	5 U
Trans-1,3-Dichloropropene	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	250 U	5 U	5 U	120 U	5 U
Bromoform	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	250 U	5 U	5 U	120 U	5 U
4-Methyl-2-pentanone	ug/L	10 U	25 U	20 U	NS	10 U	10 U	NS	10 U	500 U	500 U	10 U	10 U	250 U	10 U
2-Hexanone	ug/L	10 U	25 U	20 U	NS	10 U	10 U	NS	10 U	500 U	500 U	10 U	10 U	250 U	10 U
Tetrachloroethene	ug/L	5 U	340	360	NS	50	5 U	NS	11	150 J	190 J	1 J	5 U	87 J	64
1,1,2,2-Tetrachloroethane	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	250 U	5 U	5 U	120 U	5 U
Toluene	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	250 U	5 U	5 U	120 U	5 U
Chlorobenzene	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	250 U	5 U	5 U	120 U	5 U
Ethylbenzene	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	250 U	5 U	5 U	120 U	5 U
Styrene	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	250 U	5 U	5 U	120 U	5 U
Xylene (total)	ug/L	5 U	12 U	10 U	NS	5 U	5 U	NS	5 U	250 U	250 U	5 U	5 U	120 U	5 U

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Table 2 (continued)  
 Summary of Groundwater Analytical Results - November 1995  
 Black & Decker  
 Hampstead, Maryland

PARAMETER	Units	RFW-16	RFW-17	RFW-18	RFW-19	TOWN #22	TOWN #23	LEISTER DAIRY	LEISTER RES. #1	LEISTER RES. #2	FIELD BLANK	TRIP BLANK
Chloromethane	ug/L	NS	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Bromomethane	ug/L	NS	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Vinyl Chloride	ug/L	NS	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Chloroethane	ug/L	NS	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Methylene Chloride	ug/L	NS	2 JB	3 JB	5 B	7 B	7 B	6 B	6 B	NS	7 B	4 JB
Acetone	ug/L	NS	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Carbon Disulfide	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
1,1-Dichloroethene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
1,1-Dichloroethane	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
1,2-Dichloroethene (total)	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Chloroform	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
1,2-Dichloroethane	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
2-Butanone	ug/L	NS	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
1,1,1-Trichloroethane	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Carbon Tetrachloride	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Vinyl Acetate	ug/L	NS	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Bromodichloromethane	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
1,2-Dichloropropane	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
cis-1,3-Dichloropropene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Trichloroethene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Dibromochloromethane	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
1,1,2-Trichloroethane	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Benzene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Trans-1,3-Dichloropropene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Bromoform	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
4-Methyl-2-pentanone	ug/L	NS	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
2-Hexanone	ug/L	NS	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Tetrachloroethene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5	5 U	NS	5 U	5 U
1,1,2,2-Tetrachloroethane	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Toluene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Chlorobenzene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Ethylbenzene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Styrene	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Xylene (total)	ug/L	NS	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U

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Summary of Groundwater Analytical Results -February 1996  
 Black & Decker  
 Hampstead, Maryland

PARAMETER	Units	EW-1	EW-2	EW-2 (DUP) (50)	EW-3	EW-4	EW-5	EW-6	EW-7	EW-8	EW-9	EW-10	RFW-1A	RFW-1B	RFW-2A
			(50)	(50)			(25)			(2)	(10)	(2)			
Chloromethane	ug/L	NS	500 U	500 U	NS	NS	250 U	10 U	10 U	20 U	100 U	20 U	10 U	10 U	10 U
Bromomethane	ug/L	NS	500 U	500 U	NS	NS	250 U	10 U	10 U	20 U	100 U	20 U	10 U	10 U	10 U
Vinyl Chloride	ug/L	NS	500 U	500 U	NS	NS	250 U	10 U	10 U	20 U	100 U	20 U	10 U	10 U	10 U
Chloroethane	ug/L	NS	500 U	500 U	NS	NS	250 U	10 U	10 U	20 U	100 U	20 U	10 U	10 U	10 U
Methylene Chloride	ug/L	NS	210 JB	360 B	NS	NS	84 JB	9 B	16 B	32 B	25 JB	33 B	4 JB	4 JB	4 JB
Acetone	ug/L	NS	500 U	500 U	NS	NS	250 U	10 U	10 U	20 U	100 U	20 U	10 U	10 U	10 U
Carbon Disulfide	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	5 U	10 U	50 U	10 U	5 U	5 U	5 U
1,1-Dichloroethene	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	2 J	10 U	50 U	10 U	5 U	5 U	5 U
1,1-Dichloroethane	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	3 J	10 U	50 U	10 U	5 U	5 U	5 U
1,2-Dichloroethene (total)	ug/L	NS	250 U	250 U	NS	NS	120 U	3 J	18	35	16 J	10 U	5 U	5 U	5 U
Chloroform	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	5 U	10 U	50 U	10 U	5 U	5 U	5 U
1,2-Dichloroethane	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	5 U	10 U	50 U	10 U	5 U	5 U	5 U
2-Butanone	ug/L	NS	500 U	500 U	NS	NS	250 U	10 U	10 U	20 U	100 U	20 U	10 U	10 U	10 U
1,1,1-Trichloroethane	ug/L	NS	250 U	250 U	NS	NS	60 J	5 U	3 J	10 U	50 U	10 U	5 U	2 J	5 U
Carbon Tetrachloride	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	5 U	10 U	50 U	10 U	5 U	5 U	5 U
Vinyl Acetate	ug/L	NS	500 U	500 U	NS	NS	250 U	10 U	10 U	20 U	100 U	20 U	10 U	10 U	10 U
Bromodichloromethane	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	5 U	10 U	50 U	10 U	5 U	5 U	5 U
1,2-Dichloropropane	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	5 U	10 U	50 U	10 U	5 U	5 U	5 U
cis-1,3-Dichloropropene	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	5 U	10 U	50 U	10 U	5 U	5 U	5 U
Trichloroethene	ug/L	NS	5500	6200	NS	NS	3500	24	28	22	25 J	3 J	5 U	5 U	3 J
Dibromochloromethane	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	5 U	10 U	50 U	10 U	5 U	5 U	5 U
1,1,2-Trichloroethane	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	5 U	10 U	50 U	10 U	5 U	5 U	5 U
Benzene	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	5 U	10 U	50 U	10 U	5 U	5 U	5 U
Trans-1,3-Dichloropropene	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	5 U	10 U	50 U	10 U	5 U	5 U	5 U
Bromoform	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	5 U	10 U	50 U	10 U	5 U	5 U	5 U
4-Methyl-2-pentanone	ug/L	NS	500 U	500 U	NS	NS	250 U	10 U	10 U	20 U	100 U	20 U	10 U	10 U	10 U
2-Hexanone	ug/L	NS	500 U	500 U	NS	NS	250 U	10 U	10 U	20 U	100 U	20 U	10 U	10 U	10 U
Tetrachloroethene	ug/L	NS	140 J	160 J	NS	NS	79 J	110	77	210	1300	180	5 U	5 U	5 U
1,1,2,2-Tetrachloroethane	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	5 U	10 U	50 U	10 U	5 U	5 U	5 U
Toluene	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	5 U	10 U	50 U	10 U	5 U	5 U	5 U
Chlorobenzene	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	5 U	10 U	50 U	10 U	5 U	5 U	5 U
Ethylbenzene	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	5 U	10 U	50 U	10 U	5 U	5 U	5 U
Styrene	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	5 U	10 U	50 U	10 U	5 U	5 U	5 U
Xylene (total)	ug/L	NS	250 U	250 U	NS	NS	120 U	5 U	5 U	10 U	50 U	10 U	5 U	5 U	5 U

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Table 2 (continued)  
 Summary of Groundwater Analytical Results - February 1996  
 Black & Decker  
 Hampstead, Maryland

PARAMETER	Units	RFW-2B	RFW-4A (2.5)	RFW-4A (DUP) (2.5)	RFW-4B (2)	RFW-5A	RFW-6	RFW-7	RFW-8 (10)	RFW-9	RFW-10 (20)	RFW-11A	RFW-11B	RFW-12B (25)	RFW-13
Chloromethane	ug/L	10 U	25 U	25 U	20 U	NS	10 U	10 U	100 U	NS	200 U	10 U	10 U	250 U	10 U
Bromomethane	ug/L	10 U	25 U	25 U	20 U	NS	10 U	10 U	100 U	NS	200 U	10 U	10 U	250 U	10 U
Vinyl Chloride	ug/L	10 U	25 U	25 U	20 U	NS	10 U	10 U	100 U	NS	200 U	10 U	10 U	250 U	10 U
Chloroethane	ug/L	10 U	25 U	25 U	20 U	NS	10 U	10 U	100 U	NS	200 U	10 U	10 U	250 U	10 U
Methylene Chloride	ug/L	4 JB	42 B	35 B	29 B	NS	5 B	10 B	88 B	NS	130 B	4 JB	1 JB	240 B	4 JB
Acetone	ug/L	10 U	25 U	5 J	8 J	NS	10 U	10 U	100 U	NS	200 U	10 U	10 U	250 U	10 U
Carbon Disulfide	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U
1,1-Dichloroethene	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	2 J
1,1-Dichloroethane	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U
1,2-Dichloroethene (total)	ug/L	5 U	7 J	7 J	10 J	NS	8	3 J	50 U	NS	100 U	5 U	5 U	120 U	5 U
Chloroform	ug/L	5 U	12 U	12 U	2 J	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U
1,2-Dichloroethane	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U
2-Butanone	ug/L	10 U	25 U	25 U	20 U	NS	10 U	10 U	100 U	NS	200 U	10 U	10 U	250 U	10 U
1,1,1-Trichloroethane	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	53 J	5 U	5 U	120 U	5 U
Carbon Tetrachloride	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U
Vinyl Acetate	ug/L	10 U	25 U	25 U	20 U	NS	10 U	10 U	100 U	NS	200 U	10 U	10 U	250 U	10 U
Bromodichloromethane	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U
1,2-Dichloropropane	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U
cis-1,3-Dichloropropene	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U
Trichloroethene	ug/L	2 J	190	190	140	NS	52	16	1500	NS	2700	69	37	4400	11
Dibromochloromethane	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U
1,1,2-Trichloroethane	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U
Benzene	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U
Trans-1,3-Dichloropropene	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U
Bromoform	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U
4-Methyl-2-pentanone	ug/L	10 U	25 U	25 U	20 U	NS	10 U	10 U	100 U	NS	200 U	10 U	10 U	250 U	10 U
2-Hexanone	ug/L	10 U	25 U	25 U	20 U	NS	10 U	10 U	100 U	NS	200 U	10 U	10 U	250 U	10 U
Tetrachloroethene	ug/L	5 U	280	280	290	NS	49	5 U	47 J	NS	78 J	2 J	5 U	93 J	88
1,1,2,2-Tetrachloroethane	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U
Toluene	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U
Chlorobenzene	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U
Ethylbenzene	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U
Styrene	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U
Xylene (total)	ug/L	5 U	12 U	12 U	10 U	NS	5 U	5 U	50 U	NS	100 U	5 U	5 U	120 U	5 U

Notes: U = Compound was analyzed for but not detected. Value shown is the method detection limit for quantification.  
 J = Indicates an estimated value.  
 B = Indicates that the analyte was found in the associated blank as well as in the sample.

DUP = Duplicate sample  
 NS = Not sampled  
 (2.5) = Dilution factor.

Table (continued)  
 Summary of Groundwater Analytical Results -February 1996  
 Black & Decker  
 Hampstead, Maryland

PARAMETER	Units	RFW-16 (500)	RFW-17	RFW-18	RFW-19	TOWN #22	TOWN #23	LEISTER DAIRY	LEISTER RES. #1	LEISTER RES. #2	FIELD BLANK	TRIP BLANK
Chloromethane	ug/L	5000 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Bromomethane	ug/L	5000 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Vinyl Chloride	ug/L	5000 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Chloroethane	ug/L	5000 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Methylene Chloride	ug/L	4100 B	5 B	4 JB	4 JB	5 B	5 B	4 JB	5 B	NS	4 JB	8 B
Acetone	ug/L	5000 B	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Carbon Disulfide	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
1,1-Dichloroethene	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
1,1-Dichloroethane	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
1,2-Dichloroethene (total)	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Chloroform	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	1 J
1,2-Dichloroethane	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
2-Butanone	ug/L	5000 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
1,1,1-Trichloroethane	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Carbon Tetrachloride	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Vinyl Acetate	ug/L	5000 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Bromodichloromethane	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
1,2-Dichloropropane	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
cis-1,3-Dichloropropene	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Trichloroethene	ug/L	110000	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Dibromochloromethane	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
1,1,2-Trichloroethane	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Benzene	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Trans-1,3-Dichloropropene	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Bromoform	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
4-Methyl-2-pentanone	ug/L	5000 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
2-Hexanone	ug/L	5000 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Tetrachloroethene	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	4 J	5 U	NS	5 U	5 U
1,1,2,2-Tetrachloroethane	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Toluene	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Chlorobenzene	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Ethylbenzene	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Styrene	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Xylene (total)	ug/L	2500 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U

Notes: U = Compound was analyzed for but not detected. Value shown is the method detection limit for quantification.  
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DUP = Duplicate sample  
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 (2.5) = Dilution factor.

2-7  
**Summary of Groundwater Analytical Results -May 1996**  
**Black & Decker**  
**Hampstead, Maryland**

PARAMETER	Units	EW-1	EW-2 (2.5)	EW-2 (DUP) (2.5)	EW-3	EW-4 (2.5)	EW-5 (2.5)	EW-6	EW-7	EW-8 (2)	EW-9 (10)	EW-10 (2)	RFW-1A	RFW-1B	RFW-2A
Chloromethane	ug/L	NS	250 U	250 U	10 U	250 U	250 U	10 U	10 U	10 U	100 U	10 U	10 U	10 U	10 U
Bromomethane	ug/L	NS	250 U	250 U	10 U	250 U	250 U	10 U	10 U	10 U	100 U	10 U	10 U	10 U	10 U
Vinyl Chloride	ug/L	NS	250 U	250 U	10 U	250 U	250 U	10 U	10 U	10 U	100 U	10 U	10 U	10 U	10 U
Chloroethane	ug/L	NS	250 U	250 U	10 U	250 U	250 U	10 U	10 U	10 U	100 U	10 U	10 U	10 U	10 U
Methylene Chloride	ug/L	NS	36 JB	57 JB	1 JB	78 JB	150 B	2 JB	2 JB	6 B	28 JB	2 JB	5 U	1 JB	1 JB
Acetone	ug/L	NS	250 U	250 U	10 U	250 U	250 U	10 U	10 U	10 U	100 U	10 U	10 U	8 JB	10 U
Carbon Disulfide	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	5 U	5 U	50 U	5 U	5 U	5 U	5 U
1,1-Dichloroethene	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	2 J	5 U	50 U	5 U	5 U	5 U	5 U
1,1-Dichloroethane	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	3 J	5 U	50 U	5 U	5 U	5 U	5 U
1,2-Dichloroethene (total)	ug/L	NS	120 U	120 U	1 J	120 U	120 U	2 J	16	38	18 J	5 U	5 U	5 U	5 U
Chloroform	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	5 U	5 U	50 U	5 U	5 U	5 U	5 U
1,2-Dichloroethane	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	5 U	5 U	50 U	5 U	5 U	5 U	5 U
2-Butanone	ug/L	NS	250 U	250 U	10 U	250 U	250 U	10 U	10 U	10 U	100 U	10 U	10 U	10 U	10 U
1,1,1-Trichloroethane	ug/L	NS	120 U	120 U	5 U	120 U	92 J	5 U	3 J	5 U	50 U	5 U	5 U	2 J	5 U
Carbon Tetrachloride	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	5 U	5 U	50 U	5 U	5 U	5 U	5 U
Vinyl Acetate	ug/L	NS	250 U	250 U	10 U	250 U	250 U	10 U	10 U	10 U	100 U	10 U	10 U	10 U	10 U
Bromodichloromethane	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	5 U	5 U	50 U	5 U	5 U	5 U	5 U
1,2-Dichloropropane	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	5 U	5 U	50 U	5 U	5 U	5 U	5 U
cis-1,3-Dichloropropene	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	5 U	5 U	50 U	5 U	5 U	5 U	5 U
Trichloroethene	ug/L	NS	4300	4400	1700	5400	4000	20	25	20	27 J	2 J	5 U	5 U	3 J
Dibromochloromethane	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	5 U	5 U	50 U	5 U	5 U	5 U	5 U
1,1,2-Trichloroethane	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	5 U	5 U	50 U	5 U	5 U	5 U	5 U
Benzene	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	5 U	5 U	50 U	5 U	5 U	5 U	5 U
Trans-1,3-Dichloropropene	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	5 U	5 U	50 U	5 U	5 U	5 U	5 U
Bromoform	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	5 U	5 U	50 U	5 U	5 U	5 U	5 U
4-Methyl-2-pentanone	ug/L	NS	250 U	250 U	10 U	250 U	250 U	10 U	10 U	10 U	100 U	10 U	10 U	10 U	10 U
2-Hexanone	ug/L	NS	250 U	250 U	10 U	250 U	250 U	10 U	10 U	10 U	100 U	10 U	10 U	10 U	10 U
Tetrachloroethene	ug/L	NS	120 J	110 J	33	140	82 J	84	63	190	1500	170	5 U	2 J	5 U
1,1,2,2-Tetrachloroethane	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	5 U	5 U	50 U	5 U	5 U	5 U	5 U
Toluene	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	5 U	5 U	50 U	5 U	5 U	5 U	5 U
Chlorobenzene	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	5 U	5 U	50 U	5 U	5 U	5 U	5 U
Ethylbenzene	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	5 U	5 U	50 U	5 U	5 U	5 U	5 U
Styrene	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	5 U	5 U	50 U	5 U	5 U	5 U	5 U
Xylene (total)	ug/L	NS	120 U	120 U	5 U	120 U	120 U	5 U	5 U	5 U	50 U	5 U	5 U	5 U	5 U

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Table (continued)  
 Summary of Groundwater Analytical Results - May 1996  
 Black & Decker  
 Hampstead, Maryland

PARAMETER	Units	RFW-2B	RFW-4A (2)	RFW-4B (2)	RFW-5A	RFW-6	RFW-7	RFW-8	RFW-9	RFW-10 (2.5)	RFW-10 (DUP) (2.5)	RFW-11A	RFW-11B	RFW-12B (25)	RFW-13
Chloromethane	ug/L	10 U	20 U	20 U	NS	10 U	10 U	10 U	10 U	31	24 J	7 J	10 U	250 U	10 U
Bromomethane	ug/L	10 U	20 U	20 U	NS	10 U	10 U	10 U	10 U	25 U	25 U	10 U	10 U	250 U	10 U
Vinyl Chloride	ug/L	10 U	20 U	20 U	NS	10 U	10 U	10 U	10 U	25 U	25 U	10 U	10 U	250 U	10 U
Chloroethane	ug/L	10 U	20 U	20 U	NS	10 U	10 U	10 U	10 U	25 U	25 U	10 U	10 U	250 U	10 U
Methylene Chloride	ug/L	1 JB	18 B	22 B	NS	8 B	1 JB	1 JB	1 JB	8 JB	8 JB	2 JB	2 JB	140 B	2 JB
Acetone	ug/L	10 U	20 U	20 U	NS	8 JB	10 U	10 U	5 JB	25 U	25 U	4 JB	5 JB	250 U	4 JB
Carbon Disulfide	ug/L	5 U	10 U	10 U	NS	5 U	5 U	5 U	5 U	12 U	12 U	5 U	5 U	120 U	5 U
1,1-Dichloroethene	ug/L	5 U	10 U	10 U	NS	5 U	5 U	5 U	1 J	12 U	12 U	5 U	5 U	120 U	2 J
1,1-Dichloroethane	ug/L	5 U	10 U	10 U	NS	5 U	5 U	3 J	5 J	12 U	12 U	5 U	5 U	120 U	5 U
1,2-Dichloroethene (total)	ug/L	5 U	6 J	9 J	NS	6	3 J	19	14	12 U	12 U	5 U	5 U	120 U	5 U
Chloroform	ug/L	5 U	10 U	2 J	NS	5 U	5 U	5 U	5 U	12 U	12 U	5 U	5 U	120 U	5 U
1,2-Dichloroethane	ug/L	5 U	10 U	10 U	NS	5 U	5 U	5 U	5 U	12 U	12 U	5 U	5 U	120 U	5 U
2-Butanone	ug/L	10 U	20 U	20 U	NS	10 U	10 U	10 U	10 U	25 U	25 U	10 U	10 U	250 U	10 U
1,1,1-Trichloroethane	ug/L	5 U	10 U	10 U	NS	5 U	5 U	7	3 J	12 U	12 U	5 U	5 U	120 U	5 U
Carbon Tetrachloride	ug/L	5 U	10 U	10 U	NS	5 U	5 U	5 U	5 U	12 U	12 U	5 U	5 U	120 U	5 U
Vinyl Acetate	ug/L	10 U	20 U	20 U	NS	10 U	10 U	10 U	10 U	25 U	25 U	10 U	10 U	250 U	10 U
Bromodichloromethane	ug/L	5 U	10 U	10 U	NS	5 U	5 U	5 U	5 U	12 U	12 U	5 U	5 U	120 U	5 U
1,2-Dichloropropane	ug/L	5 U	10 U	10 U	NS	5 U	5 U	5 U	5 U	12 U	12 U	5 U	5 U	120 U	5 U
cis-1,3-Dichloropropene	ug/L	5 U	10 U	10 U	NS	5 U	5 U	5 U	5 U	12 U	12 U	5 U	5 U	120 U	5 U
Trichloroethene	ug/L	5 U	210	180	NS	40	17	930	44	420	440	72	50	4500	12
Dibromochloromethane	ug/L	5 U	10 U	10 U	NS	5 U	5 U	5 U	5 U	12 U	12 U	5 U	5 U	120 U	5 U
1,1,2-Trichloroethane	ug/L	5 U	10 U	10 U	NS	5 U	5 U	2 J	5 U	12 U	12 U	5 U	5 U	120 U	5 U
Benzene	ug/L	5 U	10 U	10 U	NS	5 U	5 U	5 U	5 U	12 U	12 U	5 U	5 U	120 U	5 U
Trans-1,3-Dichloropropene	ug/L	5 U	10 U	10 U	NS	5 U	5 U	5 U	5 U	12 U	12 U	5 U	5 U	120 U	5 U
Bromoform	ug/L	5 U	10 U	10 U	NS	5 U	5 U	5 U	5 U	12 U	12 U	5 U	5 U	120 U	5 U
4-Methyl-2-pentanone	ug/L	10 U	20 U	20 U	NS	10 U	10 U	10 U	10 U	25 U	25 U	10 U	10 U	250 U	10 U
2-Hexanone	ug/L	10 U	20 U	20 U	NS	10 U	10 U	10 U	10 U	25 U	25 U	10 U	10 U	250 U	10 U
Tetrachloroethene	ug/L	5 U	290	310	NS	36	5 U	64	21	10 J	11 J	1 J	5 U	99 J	92
1,1,2,2-Tetrachloroethane	ug/L	5 U	10 U	10 U	NS	5 U	5 U	5 U	5 U	12 U	12 U	5 U	5 U	120 U	5 U
Toluene	ug/L	5 U	10 U	10 U	NS	5 U	5 U	5 U	5 U	12 U	12 U	5 U	5 U	120 U	5 U
Chlorobenzene	ug/L	5 U	10 U	10 U	NS	5 U	5 U	5 U	5 U	12 U	12 U	5 U	5 U	120 U	5 U
Ethylbenzene	ug/L	5 U	10 U	10 U	NS	5 U	5 U	5 U	5 U	12 U	12 U	5 U	5 U	120 U	5 U
Styrene	ug/L	5 U	10 U	10 U	NS	5 U	5 U	5 U	5 U	12 U	12 U	5 U	5 U	120 U	5 U
Xylene (total)	ug/L	5 U	10 U	10 U	NS	5 U	5 U	5 U	5 U	12 U	12 U	5 U	5 U	120 U	5 U

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DUP = Duplicate sample  
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 (2.5) = Dilution factor.

Table 2 (continued)  
 Summary of Groundwater Analytical Results - May 1996  
 Black & Decker  
 Hampstead, Maryland

PARAMETER	Units	RFW-16	RFW-17	RFW-18	RFW-19	TOWN #22	TOWN #23	LEISTER DAIRY	LEISTER RES. #1	LEISTER RES. #2	FIELD BLANK	TRIP BLANK
Chloromethane	ug/L	10 U	10 U	8 JB	7 JB	10 U	10 U	10 U	10 U	NS	10 U	5 JB
Bromomethane	ug/L	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Vinyl Chloride	ug/L	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Chloroethane	ug/L	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Methylene Chloride	ug/L	2 JB	1 JB	2 JB	2 JB	2 JB	10 B	4 JB	2 JB	NS	2 JB	3 JB
Acetone	ug/L	10 U	4 JB	10 U	10 U	4 JB	4 JB	10 U	10 U	NS	23 B	8 JB
Carbon Disulfide	ug/L	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
1,1-Dichloroethene	ug/L	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
1,1-Dichloroethane	ug/L	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
1,2-Dichloroethene (total)	ug/L	3 J	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Chloroform	ug/L	1 J	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
1,2-Dichloroethane	ug/L	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
2-Butanone	ug/L	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
1,1,1-Trichloroethane	ug/L	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Carbon Tetrachloride	ug/L	3 J	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Vinyl Acetate	ug/L	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Bromodichloromethane	ug/L	10	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
1,2-Dichloropropane	ug/L	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
cis-1,3-Dichloropropene	ug/L	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Trichloroethene	ug/L	180000	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Dibromochloromethane	ug/L	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
1,1,2-Trichloroethane	ug/L	210	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Benzene	ug/L	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Trans-1,3-Dichloropropene	ug/L	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Bromoform	ug/L	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
4-Methyl-2-pentanone	ug/L	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
2-Hexanone	ug/L	10 U	10 U	10 U	10 U	10 U	10 U	10 U	10 U	NS	10 U	10 U
Tetrachloroethene	ug/L	15	5 U	5 U	5 U	5 U	5 U	3 J	5 U	NS	5 U	5 U
1,1,2,2-Tetrachloroethane	ug/L	4 J	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Toluene	ug/L	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Chlorobenzene	ug/L	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Ethylbenzene	ug/L	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Styrene	ug/L	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U
Xylene (total)	ug/L	5 U	5 U	5 U	5 U	5 U	5 U	5 U	5 U	NS	5 U	5 U

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 B = Indicates that the analyte was found in the associated blank as well as in the sample.

DUP = Duplicate sample  
 NS = Not sampled  
 (2.5) = Dilution factor.

**SECTION 3**  
**OPERATION AND MAINTENANCE OF THE TREATMENT SYSTEM**

A summary of the maintenance activities which were undertaken with the extraction and treatment system during the reporting period (July 1995 through June 1996) is provided in Table 3-1. This table is comprehensive in summarizing significant maintenance events or activities, while not including those activities considered unworthy of note (such as replacement of light bulbs, lubrication of moving parts as appropriate, or other routine activities).

**Table 3-1**  
**Treatment System Maintenance Activities (July 1995 through June 1996)**  
**Black & Decker**  
**Hampstead, Maryland**

Date	Event	Corrective Action
October 1995	EW-6 shutdown.	Replaced ground in EW-6.
October 1995	EW-6 shutdown.	Replaced ground and rewired EW-6 to prevent future occurrence.
November 1995	EW-4 shutdown due to decreased flow.	Planning to install low level switch during 1st quarter 1996, as soon as weather permits.
November 1995	Blower # 2 shutdown.	Replaced sail switch on blower # 2.
November 1995	EW-5 shutdown.	Rewired EW-5.
January 1996	EW-3 shutdown.	Checked electrical connections; removed pump. Determined a broken pump shaft and ordered a new pump and motor.
February 1996	EW-3 operational.	Replaced EW-3 pump.
February 1996	Bad mechanical seal in air stripper pump.	Replaced seal and new shaft in P-12 pump at air stripper.
February 1996	EW-4 operational.	Installed new pump and low level switch.
June 1996	Remove temporary air emission control for air stripper.	Fiberglass gas pipe removed from side of stripper. Electric heater and carbon filters taken out of service.

**SECTION 4**  
**TREATMENT SYSTEM PERFORMANCE EVALUATION**

During the reporting period of July 1995 to June 1996, water levels were on a monthly basis. Each month, water levels are evaluated to determine if an effective capture zone is maintained. Pumping rates are adjusted, as necessary, to ensure hydraulic control across the site without excessive drawdown. Significant drawdown has been observed in both shallow and deeper monitor wells throughout the long-term pumping of the extraction well system, indicating that considerable interconnection exists between the shallow and deeper groundwater.

As evidenced by the groundwater potentiometric surface contour map (see Figure 2-1), groundwater flow is still principally to the southwest, with some components to the south and east. However, depressions in the potentiometric surface, due to the pumping of the extraction wells, are evident on the map and the flow lines indicate that direction of groundwater flow is toward the extraction wells. The system as presently configured is successful in meeting the objective of capture of groundwater flow on site, prohibiting the potential off site migration of contaminated groundwater. The system is also successful in treating the collected groundwater to remove the VOCs from the water. The treated discharge does not show the presence of VOCs.

**SECTION 5**  
**RECOMMENDATIONS**

As discussed in Section 5, the treatment system has created a hydraulic boundary preventing off-site migration of groundwater. Operation of the extraction system as currently configured will continue, adjusting pumping rates as necessary according to the amount of groundwater recharge. Operation of the treatment system as currently configured will also continue, because the treatment system is fully effective in removing VOCs from the extracted groundwater.

**APPENDIX A**  
**WITHDRAWAL REPORTS**

MARYLAND DEPARTMENT OF THE ENVIRONMENT  
WATER MANAGEMENT ADMINISTRATION  
2500 BROENING HIGHWAY  
BALTIMORE, MARYLAND 21224

December 1 1995

Regarding Water Appropriation and Use Permit CL66G029(06)

Make Name/Address Changes Below

BLACK & DECKER (U.S.) INC.  
626 HANOVER PIKE  
ATTN; EARL WEDDLE  
HAMPSTEAD, MD 21074-

Dear Permittee:

As a condition of your Maryland Water Appropriation and Use Permit you are required to report your water withdrawal every six months. Complete and return this form no later than January 31, 1996. If you have any questions concerning this form, please telephone the Water Rights Division at (410) 631-3591.

1995 SEMI-ANNUAL GROUND WATER WITHDRAWAL REPORT

1. Check the method used to determine your withdrawal amounts:  
(X) Flow Meter ( ) Elapsed Time Indicator  
( ) Other (Explain)
2. Enter the number of gallons of water withdrawn for each month.  
- If you have multiple intakes under this permit, please add together the monthly totals for all intakes.  
- Do not list continuous meter readings, hours pumped, or gallons in mgd.  
- Indicate a "0" for each month with no withdrawal.

July	1995	<u>7,103,793</u>	October	1995	<u>6,699,531</u>
August	1995	<u>7,044,689</u>	November	1995	<u>6,075,298</u>
September	1995	<u>6,639,325</u>	December	1995	<u>6,725,716</u>
Total:		<u>40,288,352</u>			

3. Please sign and date this form.

Submitted By: Earl Weddle Earl Weddle Date: 01/16/96

Title: Water Superintendent Telephone Number: 410-239-5528

4. Make address corrections on the top of this form.  
Please contact this office if ownership has changed.
5. Return this form in the enclosed envelope (Postage Required).



MARYLAND DEPARTMENT OF THE ENVIRONMENT  
WATER MANAGEMENT ADMINISTRATION  
WATER RIGHTS DIVISION  
2500 BROENING HIGHWAY  
BALTIMORE, MARYLAND 21224

June 10, 1996

Regarding Water Appropriation and Use Permit CL66G029(06)

Make Name/Address Changes Below

BLACK & DECKER (U.S.) INC.  
626 HANOVER PIKE  
ATTN; EARL WEDDLE  
HAMPSTEAD, MD 21074

Dear Permittee:

As a condition of your Maryland Water Appropriation and Use Permit you are required to report your water withdrawal every six months. Complete and return this form no later than July 31, 1996. If you have any questions concerning this form, please telephone the Water Rights Division at (410) 631-3591.

1996 SEMI-ANNUAL GROUND WATER WITHDRAWAL REPORT

1. Check the method used to determine your withdrawal amounts:  
(X) Flow Meter ( ) Elapsed Time Indicator  
( ) Other (Explain)
2. Enter the number of gallons of water withdrawn for each month.
  - If you have multiple intakes under this permit, please add together the monthly totals for all intakes.
  - Do not list continuous meter readings, hours pumped, or gallons in mgd.
  - Indicate a "0" for each month with no withdrawal.

January	1996	<u>6,607,400</u>	April	1996	<u>6,575,450</u>
February	1996	<u>5,960,999</u>	May	1996	<u>7,581,928</u>
March	1996	<u>6,962,621</u>	June	1996	<u>7,191,904</u>
		Total:			<u>40,880,302</u>

3. Please sign and date this form.

Submitted By: Earl Weddle Date: 07/10/96  
Title: Water Superintendent Telephone Number: 410-239-5528

4. Make address corrections on the top of this form.  
Please contact this office if ownership has changed.
5. Return this form in the enclosed envelope (Postage Required).

**APPENDIX B**  
**DISCHARGE MONITORING REPORTS**

PERMITTEE ADDRESS (Include Facility Name if different)

NATIONAL POLLUTANT DISCHARGE MINIMATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form OMD 004 Approved 9-30-85

NAME **BLACK & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER			001 DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	07	01		95	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT			MGD							
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT								CONTINUOUS/MEASURED
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT							ppb			
	PERMIT REQUIREMENT						5			1/MONTH	GRAB
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT							ppb			
	PERMIT REQUIREMENT						5			1/MONTH	GRAB
TRICHLOROETHYLENE	SAMPLE MEASUREMENT							ppb			
	PERMIT REQUIREMENT						5			1/MONTH	GRAB
TOTAL RESIDUAL CHLORINE	SAMPLE MEASUREMENT							mg/l			
	PERMIT REQUIREMENT						<0.1			1/MONTH	GRAB
OIL & GREASE	SAMPLE MEASUREMENT							mg/l			
	PERMIT REQUIREMENT					10	15			1/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	<i>LaVere N. Grimes</i>	TELEPHONE	DATE		
LaVere N. Grimes Facilities Manager			410-239-5555	95	08	10
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*No flow at outfall 001 for entire month of July.*

PERMITTEE NAME AND ADDRESS (Include Facility Name if different)

NATIONAL POLLUTANT DISCHARGE MONITORING SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved OMD No. 3-30-85

NAME **BLACK & DECKER (U.S.) INC.**  
 ADDRESS **826 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY \_\_\_\_\_  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER			001 DISCHARGE NUMBER		
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
95	07	01	95	07	31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
pH	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT				6.0		8.5	STD		2/WEEK	GRAB
BOD	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						15	mg/l		1/MONTH	GRAB
TOTAL SUSPENDED SOLIDS	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT					20	30	mg/l		1/MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	TELEPHONE	DATE			
<b>LaVere N. Grimes</b> Facilities Manager		<i>LaVere N. Grimes</i>	410-239-5555	95	08	15
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*No flow at outfall 001 for entire month of July.*

PERMITTEE NAME AND ADDRESS (Include Facility Name/Address if different)

NATIONAL POLLUTANT DISCHARGE PERMIT SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved OMB No. 4010-004 9-30-85

NAME **BECKER & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE  
 HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

83-DP-0022 PERMIT NUMBER	101 DISCHARGE NUMBER												
MONITORING PERIOD													
FROM	TO												
<table border="1"> <tr><th>YEAR</th><th>MO</th><th>DAY</th></tr> <tr><td>95</td><td>07</td><td>01</td></tr> </table>	YEAR	MO	DAY	95	07	01	<table border="1"> <tr><th>YEAR</th><th>MO</th><th>DAY</th></tr> <tr><td>95</td><td>07</td><td>31</td></tr> </table>	YEAR	MO	DAY	95	07	31
YEAR	MO	DAY											
95	07	01											
YEAR	MO	DAY											
95	07	31											

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-43) QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT			MGD						
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT							CONTINUOUS/MEASURED
FECAL COLIFORM	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT					200			1/WEEK	GRAB
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  <b>LaVere N. Grimes Facilities Manager</b>	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	TELEPHONE		DATE		
		<i>LaVere N. Grimes</i>	741-239-5555	95	08	15
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*No flow at outfall 101 for entire month of July.*

Facility Name/Location (different)

DISCHARGE MONITORING REPORT (DMR)

OMB No. 2030-0062  
Approval # 30-85

NAME **BLAINE DECKER (U.S.) INC.**  
ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**

93-DP-0022  
PERMIT NUMBER

201  
DISCHARGE NUMBER

FACILITY  
LOCATION **CARROLL COUNTY**

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
95	07	01		95	07	31
(10-31)	(12-31)	(14-31)		(10-31)	(12-31)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (48-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-43) QUALITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-66)	SAMPLE TYPE (68-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.2292	0.2415	MGD					0	Continuous Measured	
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT								CONTINUOUS/MEASURED
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT					ND		ppb	0	1/10 month grab	
	PERMIT REQUIREMENT					N/A				1/MONTH GRAB	
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT					ND		ppb	0	1/10 month grab	
	PERMIT REQUIREMENT					N/A				1/MONTH GRAB	
TRICHLOROETHYLENE	SAMPLE MEASUREMENT					ND		ppb	0	1/10 month grab	
	PERMIT REQUIREMENT					N/A				1/MONTH GRAB	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
**LaVere N. Grimes**  
Facilities Manager  
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 35 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)

*LaVere N. Grimes*  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE  
**410-239-5555**

DATE  
95 08 15

AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME AND ADDRESS (Include Facility Name if different)

NAME **W & DECKER (U.S.) INC.**  
 ADDRESS **826 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

NATIONAL POLLUTANT DISCHARGE MONITORING SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

93-DP-0022 (12-16) PERMIT NUMBER  
 001 (17-19) DISCHARGE NUMBER  
 MONITORING PERIOD  
 FROM YEAR MO DAY TO YEAR MO DAY  
 95 08 01 TO 95 08 31

Form Approved OMD No. 2040 Approval expires 9-30-85

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (48-53)			(4 Card Only) QUALITY OR CONCENTRATION (48-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-66)	SAMPLE TYPE (68-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.2587	1.0563	MGD					0	Continuous Measured	CONTINUOUS/MEASURED
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT								
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT					ND	ppb	0	1/month	grab	
	PERMIT REQUIREMENT					5					
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT					ND	ppb	0	1/month	grab	
	PERMIT REQUIREMENT					5					
TRICHLOROETHYLENE	SAMPLE MEASUREMENT					ND	ppb	0	1/month	grab	
	PERMIT REQUIREMENT					5					
TOTAL RESIDUAL CHLORINE	SAMPLE MEASUREMENT					<0.1	mg/l	0	1/4 month	grab	
	PERMIT REQUIREMENT					<0.1					
OIL & GREASE	SAMPLE MEASUREMENT					ND	mg/l	0	1/month	grab	
	PERMIT REQUIREMENT					10 15					

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
**LaVere N. Grimes**  
 Facilities Manager  
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1316 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)

*LaVere N. Grimes*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE **410-239-5555**  
 DATE **95 09 14**  
 AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME (Include Facility Name if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

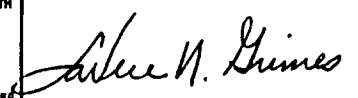
Form Approved. OMD No. 2040-001 Approval expires 9-30-85

NAME **BLACK & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER	001 DISCHARGE NUMBER												
MONITORING PERIOD													
FROM	TO												
<table border="1"> <tr><th>YEAR</th><th>MO</th><th>DAY</th></tr> <tr><td>95</td><td>08</td><td>01</td></tr> </table>	YEAR	MO	DAY	95	08	01	<table border="1"> <tr><th>YEAR</th><th>MO</th><th>DAY</th></tr> <tr><td>95</td><td>08</td><td>31</td></tr> </table>	YEAR	MO	DAY	95	08	31
YEAR	MO	DAY											
95	08	01											
YEAR	MO	DAY											
95	08	31											

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (45-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-43)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
pH	SAMPLE MEASUREMENT				6.71				STD	0	2/week	Grab
	PERMIT REQUIREMENT				6.0			8.5			2/WEEK	GRAB
BOD	SAMPLE MEASUREMENT							6	mg/l	0	1/month	Grab
	PERMIT REQUIREMENT							15			1/MONTH	GRAB
TOTAL SUSPENDED SOLIDS	SAMPLE MEASUREMENT							22	mg/l	0	1/month	Grab
	PERMIT REQUIREMENT							20			1/MONTH	GRAB
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 3 years)		TELEPHONE	DATE		
LaVere N. Grimes Facilities Manager			410-239-5555	95	09	14
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)



PERMITTEE NAME (Include Facility Name) (1-10)

NATIONAL POLLUTANT DISCHARGE ESTIMATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved OMD No. 2040 Approval expires 9-30-85

NAME **BECK & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022  
 PERMIT NUMBER

101  
 DISCHARGE NUMBER

MONITORING PERIOD  
 FROM YEAR MO DAY TO YEAR MO DAY  
 95 08 01 TO 95 08 31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (52-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.411	0.519	MGD					0	Continuous Measured	
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT								
FECAL COLIFORM	SAMPLE MEASUREMENT					ND	MPN/100ml	0	1/week	grab	
	PERMIT REQUIREMENT					200					
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
**LaVere N. Grimes**  
 Facilities Manager  
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 16 USC 1001 AND 33 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)

*LaVere N. Grimes*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE  
 410-239-5555  
 DATE  
 95 09 14  
 AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Facility Name/Location (different)

DISCHARGE MONITORING REPORT (DMR)

Form Approved  
 OMD No. 2040-00  
 Approval expires

NAME **BLAUGHER DECKER (U.S.) INC.**  
 ADDRESS **828 HARROVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022  
 PERMIT NUMBER

201  
 DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
95	08	01		95	08	31
(10-31)	(10-31)	(10-31)		(10-31)	(10-31)	(10-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (40-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (30-43) QUALITY OR CONCENTRATION (40-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-69)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
FLOW	SAMPLE MEASUREMENT	0.2272	0.2393	MGD				0	Continuous Measured		
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT								
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT					ND	ppb	0	1/month grab		
	PERMIT REQUIREMENT					N/A					
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT					ND	ppb	0	1/month grab		
	PERMIT REQUIREMENT					N/A					
TRICHLOROETHYLENE	SAMPLE MEASUREMENT					ND	ppb	0	1/month grab		
	PERMIT REQUIREMENT					N/A					
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
**LaVere N. Grimes**  
**Facilities Manager**  
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1310 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)

*LaVere N. Grimes*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE  
**410-239-5555**  
 DATE  
**95 09 14**  
 AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE ADDRESS (Include Facility Name if different)

NATIONAL POLLUTANT DISCHARGE MONITORING SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved OMD No. 2040 Approval expires 1-85

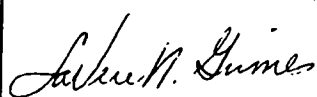
NAME BLACK & DECKER (U.S.) INC.  
 ADDRESS 626 HANOVER PIKE  
 HAMPSTEAD, MARYLAND 21074  
 FACILITY  
 LOCATION CARROLL COUNTY

93-DP-0022 PERMIT NUMBER  
 001 DISCHARGE NUMBER

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	09	01		95	09	30

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-69)	SAMPLE TYPE (69-70)
		AVERAGE (48-53)	MAXIMUM (54-57)	UNITS (58-61)	MINIMUM (38-43)	AVERAGE (46-53)	MAXIMUM (54-61)			
FLOW	SAMPLE MEASUREMENT	0.1505	0.4393	MGD				0	Continuous Measured	
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT						CONTINUOUS/MEASURED	
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT					ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT					5			1/MONTH GRAB	
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT					ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT					5			1/MONTH GRAB	
TRICHLOROETHYLENE	SAMPLE MEASUREMENT					ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT					5			1/MONTH GRAB	
TOTAL RESIDUAL CHLORINE	SAMPLE MEASUREMENT					<0.1	mg/l	0	3/month grab	
	PERMIT REQUIREMENT					<0.1			1/MONTH GRAB	
OIL & GREASE	SAMPLE MEASUREMENT					ND	mg/l	0	1/month grab	
	PERMIT REQUIREMENT					10	15		1/MONTH GRAB	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1318 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE			
LaVere N. Grimes Facilities Manager			410-239-5555	95	10	10	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME ADDRESS (Include Facility Name) (If different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved OMD No. 2040-0 Approval expires 03

NAME **W & DECKER (U.S.) INC.**  
 ADDRESS **628 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER	001 DISCHARGE NUMBER
MONITORING PERIOD	
FROM	TO
YEAR MO DAY 95 09 01	YEAR MO DAY 95 09 30

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (48-53)			(4 Card Only) QUALITY OR CONCENTRATION (48-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-66)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
pH	SAMPLE MEASUREMENT				6.49		7.45		STD	0	2/week	grab
	PERMIT REQUIREMENT				6.0		8.5				2/WEEK	GRAB
BOD	SAMPLE MEASUREMENT						3		mg/l	0	1/month	grab
	PERMIT REQUIREMENT						15				1/MONTH	GRAB
TOTAL SUSPENDED SOLIDS	SAMPLE MEASUREMENT					< 2 + 2 RM 26	< 2		mg/l	0	1/month	grab
	PERMIT REQUIREMENT					20	30				1/MONTH	GRAB
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
**LaVere N. Grimes**  
**Facilities Manager**  
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1318 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  
*LaVere N. Grimes*

TELEPHONE  
**410-239-5555**  
 DATE  
 95 10 10  
 AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE ADDRESS (Include Facility Name if different)

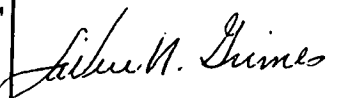
NATIONAL POLLUTANT DISCHARGE ESTIMATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved OMD No. 2040-0 Approval expires

NAME **BLACK & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER	101 DISCHARGE NUMBER				
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
95	09	01	95	09	30
(10-31)	(22-23)	(24-30)	(10-31)	(20-30)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (48-53)			(4 Card Only) QUALITY OR CONCENTRATION (48-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	0.498	0.524	MGD				0	Continuous Measured	CONTINUOUS/MEASURED
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT							
FECAL COLIFORM	SAMPLE MEASUREMENT					ND	MPN/100ml	0	1/week	grab
	PERMIT REQUIREMENT					200				
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)				 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE	DATE		
LaVere N. Grimes Facilities Manager	TYPED OR PRINTED		410-239-5555	95			10	10		
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)										

PERMITTEE ADDRESS (Include Facility Name on it different)

NATIONAL POLLUTANT DISCHARGE INFORMATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved OMD No. 2040-007 Approval expires 9-30-85

NAME **BLACK & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER	201 DISCHARGE NUMBER
MONITORING PERIOD	
FROM	TO
YEAR MO DAY	YEAR MO DAY
95 09 01	95 09 30
(18-21)	(18-21)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (48-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-43)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	0.2213	0.2332	MGD				0	Continuous Measured	CONTINUOUS/MEASURED
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT							
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT					ND	ppb	0	1/month	grab
	PERMIT REQUIREMENT					N/A				
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT					ND	ppb	0	1/month	grab
	PERMIT REQUIREMENT					N/A				
TRICHLOROETHYLENE	SAMPLE MEASUREMENT					ND	ppb	0	1/month	grab
	PERMIT REQUIREMENT					N/A				
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <b>LaVere N. Grimes Facilities Manager</b>	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>LaVere N. Grimes</i>	TELEPHONE		DATE		
			410-239-5555	95	10	10	
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE ADDRESS (Include Facility Name if different)

NATIONAL POLLUTANT DISCHARGE MONITORING SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

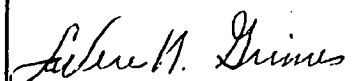
Form Approved OMB No. 4004-004 Expires 9-30-85

NAME **BERCK & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER	001 DISCHARGE NUMBER
MONITORING PERIOD	
FROM	TO
YEAR MO DAY	YEAR MO DAY
95 10 01	95 10 31
(20-21) (22-23) (24-25)	(26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.3146	1.3077	MGD					0	Continuous	Measured
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT								CONTINUOUS/MEASURED
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT						ND	ppb	0	1/month	grab
	PERMIT REQUIREMENT						5			1/MONTH	GRAB
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT						ND	ppb	0	1/month	grab
	PERMIT REQUIREMENT						5			1/MONTH	GRAB
TRICHLOROETHYLENE	SAMPLE MEASUREMENT						ND	ppb	0	1/month	grab
	PERMIT REQUIREMENT						5			1/MONTH	GRAB
TOTAL RESIDUAL CHLORINE	SAMPLE MEASUREMENT						<0.1	mg/l	0	3/month	grab
	PERMIT REQUIREMENT						<0.1			1/MONTH	GRAB
OIL & GREASE	SAMPLE MEASUREMENT						ND	mg/l	0	1/month	grab
	PERMIT REQUIREMENT					10	15			1/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 16 USC 1001 AND 33 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE			
LaVere N. Grimes Facilities Manager			410-239-5555	95	11	28	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE ADDRESS (Include Facility Name) (If different)

NATIONAL POLLUTANT DISCHARGE MONITORING SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved OMB No. 9-30-85

NAME **BLACK & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER	001 DISCHARGE NUMBER																		
MONITORING PERIOD																			
FROM	TO																		
<table border="1"> <tr><th>YEAR</th><th>MO</th><th>DAY</th></tr> <tr><td>95</td><td>10</td><td>01</td></tr> <tr><td>(20-31)</td><td>(22-33)</td><td>(24-35)</td></tr> </table>	YEAR	MO	DAY	95	10	01	(20-31)	(22-33)	(24-35)	<table border="1"> <tr><th>YEAR</th><th>MO</th><th>DAY</th></tr> <tr><td>95</td><td>10</td><td>31</td></tr> <tr><td>(26-37)</td><td>(28-29)</td><td>(30-31)</td></tr> </table>	YEAR	MO	DAY	95	10	31	(26-37)	(28-29)	(30-31)
YEAR	MO	DAY																	
95	10	01																	
(20-31)	(22-33)	(24-35)																	
YEAR	MO	DAY																	
95	10	31																	
(26-37)	(28-29)	(30-31)																	

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-66)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
pH	SAMPLE MEASUREMENT				6.47				STD	0	2/week	grab
	PERMIT REQUIREMENT				6.0						2/WEEK	GRAB
BOD	SAMPLE MEASUREMENT							4	mg/l	0	1/month	grab
	PERMIT REQUIREMENT							15			1/MONTH	GRAB
TOTAL SUSPENDED SOLIDS	SAMPLE MEASUREMENT							15	mg/l	0	1/month	grab
	PERMIT REQUIREMENT							20			1/MONTH	GRAB
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	TELEPHONE	DATE			
<b>LaVere N. Grimes</b> Facilities Manager		<i>LaVere N. Grimes</i>	410-239-5555	95	11	28
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)



PERMITTEE NAME AND ADDRESS (Include Facility Name if different)

NATIONAL POLLUTANT DISCHARGE MONITORING SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved by EPA  
 OMB No. 4004  
 Approval Expires 9-30-83

NAME **BANK & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER  
 101 DISCHARGE NUMBER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
95	10	01	95	10	31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	0.438	0.459	MGD				0	Continuous Measured	CONTINUOUS/MEASURED
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT							
FECAL COLIFORM	SAMPLE MEASUREMENT					ND	MPN/100ml	0	1/week	grab
	PERMIT REQUIREMENT					200				
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  <b>LaVere N. Grimes</b> <b>Facilities Manager</b>	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1310 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	TELEPHONE	DATE			
		410-239-5555	95	11	28	
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>LaVere N. Grimes</i>	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Facility Name/Location (different)

DISCHARGE MONITORING REPORT (DMR)

UMD No. Approval 30-85

NAME **BL DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER  
 201 DISCHARGE NUMBER

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	10	01		95	10	31
	(20-27)	(28-31)	(24-31)		(28-31)	(28-31)	(20-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.2161	0.2331	MGD					0	Continuous Measured	
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT							CONTINUOUS/MEASURED	
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT						ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT						N/A			1/MONTH GRAB	
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT						ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT						N/A			1/MONTH GRAB	
TRICHLOROETHYLENE	SAMPLE MEASUREMENT						ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT						N/A			1/MONTH GRAB	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

**LaVere N. Grimes**  
**Facilities Manager**

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1318 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)

*LaVere N. Grimes*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

410-239-5555

DATE

95 11 28

AREA CODE

NUMBER

YEAR

MO

DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE ADDRESS (Include Facility Name if different)

NATIONAL POLLUTANT DISCHARGE MINIMATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved  
OMB No. 40-004  
April 1973  
Expires 9-30-85

NAME **BLACK & DECKER (U.S.) INC.**  
ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
FACILITY  
LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER	001 DISCHARGE NUMBER
MONITORING PERIOD	
FROM	TO
YEAR MO DAY 95 11 01	YEAR MO DAY 95 11 30
(16-21)	(22-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (48-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-69)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.3652	0.9280	MGD					0	Continuous Measured	CONTINUOUS/MEASURED
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT								
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT						ND	ppb	0	1/month	grab
	PERMIT REQUIREMENT						5			1/MONTH	GRAB
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT						ND	ppb	0	1/month	grab
	PERMIT REQUIREMENT						5			1/MONTH	GRAB
TRICHLOROETHYLENE	SAMPLE MEASUREMENT						ND	ppb	0	1/month	grab
	PERMIT REQUIREMENT						5			1/MONTH	GRAB
TOTAL RESIDUAL CHLORINE	SAMPLE MEASUREMENT						ND	mg/l	0	4/month	grab
	PERMIT REQUIREMENT						<0.1			1/MONTH	GRAB
OIL & GREASE	SAMPLE MEASUREMENT						ND	mg/l	0	1/month	grab
	PERMIT REQUIREMENT					10	15			1/MONTH	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)				TELEPHONE		DATE			
LaVere N. Grimes Facilities Manager						410-239-5555		95	12	12	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME AND ADDRESS (Include Facility Name) (if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved. OMD No. 2040-004 Approval expires

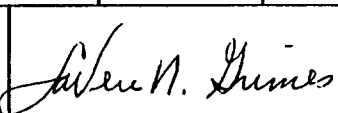
NAME **BLACK & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

(2-14) **93-DP-0022** (17-19) **001**  
 PERMIT NUMBER DISCHARGE NUMBER  
 MONITORING PERIOD  
 FROM YEAR MO DAY TO YEAR MO DAY  
**95 11 01** TO **95 11 30**  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (48-61)			(4 Card Only) QUALITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
pH	SAMPLE MEASUREMENT				7.18		7.62	STD	0	2/week	grab
	PERMIT REQUIREMENT				6.0		8.5			2/WEEK	GRAB
BOD	SAMPLE MEASUREMENT						4	mg/l	0	1/month	grab
	PERMIT REQUIREMENT						15			1/MONTH	GRAB
TOTAL SUSPENDED SOLIDS	SAMPLE MEASUREMENT						7	mg/l	0	1/month	grab
	PERMIT REQUIREMENT					20	30			1/MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1310 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE			
LaVere N. Grimes Facilities Manager			410-239-5555	95	12	12	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME AND ADDRESS (Include Facility Name/Address if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved OMD No. 2040- Approval expires

NAME **B & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

83-DP-0022 PERMIT NUMBER	101 DISCHARGE NUMBER												
MONITORING PERIOD													
FROM	TO												
<table border="1"> <tr><th>YEAR</th><th>MO</th><th>DAY</th></tr> <tr><td>95</td><td>11</td><td>01</td></tr> </table>	YEAR	MO	DAY	95	11	01	<table border="1"> <tr><th>YEAR</th><th>MO</th><th>DAY</th></tr> <tr><td>95</td><td>11</td><td>30</td></tr> </table>	YEAR	MO	DAY	95	11	30
YEAR	MO	DAY											
95	11	01											
YEAR	MO	DAY											
95	11	30											

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (48-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-43) (48-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	0.435	0.447	MGD				0	Continuous Measured	CONTINUOUS/MEASURED
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT							
FECAL COLIFORM	SAMPLE MEASUREMENT					ND	MPN/100ml	0	1/week	grab
	PERMIT REQUIREMENT					200				
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <b>LaVere N. Grimes Facilities Manager</b>	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>LaVere N. Grimes</i>	TELEPHONE		DATE		
			AREA CODE	NUMBER	YEAR	MO	DAY
TYPED OR PRINTED			410-239-5555	95	12	12	

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Facility Name/Location (if different)

DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-004  
Approval expires

NAME **BL... DECKER (U.S.) INC.**  
 ADDRESS **626... OVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022  
PERMIT NUMBER

201  
DISCHARGE NUMBER

MONITORING PERIOD			MONITORING PERIOD		
YEAR	MO	DAY	YEAR	MO	DAY
95	11	01	95	11	30

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	0.2025	0.2310	MGD				0	Continuous Measured	
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT						CONTINUOUS/MEASURED	
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT					ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT					N/A			1/MONTH GRAB	
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT					ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT					N/A			1/MONTH GRAB	
TRICHLOROETHYLENE	SAMPLE MEASUREMENT					ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT					N/A			1/MONTH GRAB	
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <b>LaVere N. Grimes Facilities Manager</b>	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 23 USC 1316 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	TELEPHONE <b>410-238-5555</b>	DATE <b>95 12 12</b>		
			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>LaVere N. Grimes</i>	AREA CODE	NUMBER

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME AND ADDRESS (include Facility Name/Address if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved OMD No. 2040- Approval expires

NAME **B & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER	001 DISCHARGE NUMBER
MONITORING PERIOD	
FROM	TO
YEAR MO DAY 95 12 01	YEAR MO DAY 95 12 31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (48-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.0770	0.2012	MGD					0	Continuous Measured	
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT							CONTINUOUS/MEASURED	
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT						ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT						5			1/MONTH GRAB	
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT						ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT						5			1/MONTH GRAB	
TRICHLOROETHYLENE	SAMPLE MEASUREMENT						ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT						5			1/MONTH GRAB	
TOTAL RESIDUAL CHLORINE	SAMPLE MEASUREMENT						<0.1	mg/l	0	3/month grab	
	PERMIT REQUIREMENT						<0.1			1/MONTH GRAB	
OIL & GREASE	SAMPLE MEASUREMENT						ND	mg/l	0	1/month grab	
	PERMIT REQUIREMENT						10	15		1/MONTH GRAB	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1310 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)						TELEPHONE		DATE		
LaVere N. Grimes Facilities Manager							410-239-5555		96	01	03
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT						AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME (Include Facility Name/L... different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved. OMD No. 2040-004 Approval expires 5

NAME **BL... & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER  
 001 DISCHARGE NUMBER

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	12	01		95	12	31
	(20-21)	(12-31)	(01-31)		(20-21)	(12-31)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (48-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-69)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
pH	SAMPLE MEASUREMENT				6.85				0	2/week	grab
	PERMIT REQUIREMENT				6.0			8.5			
BOD	SAMPLE MEASUREMENT							8	0	1/month	grab
	PERMIT REQUIREMENT							15			
TOTAL SUSPENDED SOLIDS	SAMPLE MEASUREMENT					9		5	0	1/month	grab
	PERMIT REQUIREMENT					20		30			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	TELEPHONE	DATE			
<b>LaVere N. Grimes</b> Facilities Manager		410-239-5555	96	01	03	
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)



DISCHARGE MONITORING REPORT (DMR)

Form Approved  
 OMB No. 2040-0040  
 Approval expires

NAME **W. & DECKER (U.S.) INC.**  
 ADDRESS **SNOWY PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

83-DP-0022  
 PERMIT NUMBER

101  
 DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
95	12	01		95	12	31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (40-52) QUANTITY OR LOADING (54-57)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (48-53) (54-61)				NO. EX (62-65)	FREQUENCY OF ANALYSIS (66-69)	SAMPLE TYPE (70-73)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.499	0.534	MGD					0	Continuous Measured	CONTINUOUS/MEASURED
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT								
FECAL COLIFORM	SAMPLE MEASUREMENT					ND		MPN/ 100ml	0	1/week grab	1/WEEK GRAB
	PERMIT REQUIREMENT					200					
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
**LaVere N. Grimes**  
**Facilities Manager**  
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HERIN AND SWORE ON MY HONOR AS AN INDIVIDUAL IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I DO AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 33 USC 1001 AND 33 USC 6319 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of 6 months and 3 years)

*LaVere N. Grimes*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE  
**410-239-5595**  
 DATE  
**96 01 03**  
 AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

JAN 04 '96 01:48PM FACILITIES DEPT.

NAME **BLAUGHER DECKER (U.S.) INC.**  
 ADDRESS **626 WILSON AVENUE PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022  
 PERMIT NUMBER

201  
 DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
95	12	01		95	12	31
<small>(10-31)</small>	<small>(12-31)</small>	<small>(12-31)</small>		<small>(12-31)</small>	<small>(12-31)</small>	<small>(12-31)</small>

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (48-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-69)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	0.2170	0.2323	MGD				0	Continuous Measured	CONTINUOUS/MEASURED
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT							
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT					ND	ppb	0	1/month	grab
	PERMIT REQUIREMENT					N/A				
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT					ND	ppb	0	1/month	grab
	PERMIT REQUIREMENT					N/A				
TRICHLOROETHYLENE	SAMPLE MEASUREMENT					ND	ppb	0	1/month	grab
	PERMIT REQUIREMENT					N/A				
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
**LaVere N. Grimes**  
**Facilities Manager**  
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 19 USC 1001 AND 33 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)

TELEPHONE  
**410-239-5555**  
 DATE  
**96 01 03**  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  
 AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Facility Name/Location (if different)

DISCHARGE MONITORING REPORT (DMR)

OMB No. 2060-0040  
Approval # 90-85

NAME **B. DECKER (U.S.) INC.**  
 ADDRESS **820 SNOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY \_\_\_\_\_  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER			001 DISCHARGE NUMBER		
MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
96	01	01	96	01	31
(20-31)	(20-31)	(20-31)	(20-31)	(20-31)	(20-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (48-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (48-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.3287	0.6334	MGD					0	Continuous Measured	
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT								CONTINUOUS/MEASURED
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT						ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT						5			1/MONTH GRAB	
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT						ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT						5			1/MONTH GRAB	
TRICHLOROETHYLENE	SAMPLE MEASUREMENT						ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT						5			1/MONTH GRAB	
TOTAL RESIDUAL CHLORINE	SAMPLE MEASUREMENT						<0.1	mg/l	0	2/month grab	
	PERMIT REQUIREMENT						<0.1			1/MONTH GRAB	
OIL & GREASE	SAMPLE MEASUREMENT						ND	mg/l	0	1/month grab	
	PERMIT REQUIREMENT					10	15			1/MONTH GRAB	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1318 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)				TELEPHONE		DATE			
LaVere N. Grimes Facilities Manager						410-239-5555		96	02	13	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME AND ADDRESS (include Facility Name/Location if different)

DISCHARGE MONITORING REPORT (DMR)

UNIT NO. 1045  
Approval, expires 85

NAME **B. DECKER (U.S.) INC.**  
 ADDRESS **628 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER	001 DISCHARGE NUMBER
MONITORING PERIOD	
YEAR MO DAY	YEAR MO DAY
96 01 01	96 01 31
(20-31) (22-33) (24-26)	(26-32) (28-30) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
pH	SAMPLE MEASUREMENT				7.05		7.44	STD	0	2/week	grab
	PERMIT REQUIREMENT				6.0		6.5			2/WEEK	GRAB
BOD	SAMPLE MEASUREMENT						4	mg/l	0	1/month	grab
	PERMIT REQUIREMENT						15			1/MONTH	GRAB
TOTAL SUSPENDED SOLIDS	SAMPLE MEASUREMENT						5	mg/l	0	1/month	grab
	PERMIT REQUIREMENT					20	30			1/MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and or maximum Imprisonment of between 6 months and 5 years)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
LaVere N. Grimes Facilities Manager		<i>LaVere N. Grimes</i>	410-239-5555	96	02	13
TYPED OR PRINTED		AREA CODE NUMBER	YEAR	MO	DAY	

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NAME **B. & DECKER (U.S.) INC.**  
 ADDRESS **ROVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

(8-10) (17-19)

93-DP-0022 PERMIT NUMBER	101 DISCHARGE NUMBER
-----------------------------	-------------------------

MONITORING PERIOD

FROM	TO																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>YEAR</th> <th>MO</th> <th>DAY</th> </tr> <tr> <td style="text-align: center;">96</td> <td style="text-align: center;">01</td> <td style="text-align: center;">01</td> </tr> <tr> <td style="text-align: center;"><small>(10-31)</small></td> <td style="text-align: center;"><small>(12-31)</small></td> <td style="text-align: center;"><small>(14-31)</small></td> </tr> </table>	YEAR	MO	DAY	96	01	01	<small>(10-31)</small>	<small>(12-31)</small>	<small>(14-31)</small>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>YEAR</th> <th>MO</th> <th>DAY</th> </tr> <tr> <td style="text-align: center;">96</td> <td style="text-align: center;">01</td> <td style="text-align: center;">31</td> </tr> <tr> <td style="text-align: center;"><small>(10-31)</small></td> <td style="text-align: center;"><small>(12-31)</small></td> <td style="text-align: center;"><small>(10-31)</small></td> </tr> </table>	YEAR	MO	DAY	96	01	31	<small>(10-31)</small>	<small>(12-31)</small>	<small>(10-31)</small>
YEAR	MO	DAY																	
96	01	01																	
<small>(10-31)</small>	<small>(12-31)</small>	<small>(14-31)</small>																	
YEAR	MO	DAY																	
96	01	31																	
<small>(10-31)</small>	<small>(12-31)</small>	<small>(10-31)</small>																	

Approval expires 12-30-83

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (46-53) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.373	0.426	MGD					0	Continuous Measured	CONTINUOUS/MEASURED
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT								
FECAL COLIFORM	SAMPLE MEASUREMENT					ND		MPN/ 100ml	0	1/week	grab
	PERMIT REQUIREMENT					200				1/WEEK	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

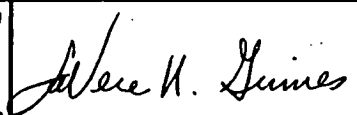
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC 1001 AND 22 USC 1910 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)		TELEPHONE	DATE
LaVere N. Grimes Facilities Manager			410-239-5555	96 02 13
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE NUMBER	YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

ADDRESS 628 ... VER PIKE  
 H ... AD, MARYLAND 21074  
 FACILITY  
 LOCATION CARROLL COUNTY

93-DP-0022  
 PERMIT NUMBER  
 201  
 CHARGE NUMBER  
 MONITORING  
 FROM YEAR MO DAY TO YEAR MO DAY  
 96 01 01 TO 96 01 31  
 (10-31) (11-31) (12-31) (1-31) (2-31) (3-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (48-53) QUANTITY OR LOADING (84-81)			(4 Card Only) (38-43) QUALITY OR CONCENTRATION (48-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
FLOW	SAMPLE MEASUREMENT	0.2131	0.2278	MGD				0	Continuous Measured		
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT						CONTINUOUS/MEASURED		
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT					ND	ppb	0	1/month grab		
	PERMIT REQUIREMENT					N/A			1/MONTH GRAB		
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT					ND	ppb	0	1/month grab		
	PERMIT REQUIREMENT					N/A			1/MONTH GRAB		
TRICHLOROETHYLENE	SAMPLE MEASUREMENT					ND	ppb	0	1/month grab		
	PERMIT REQUIREMENT					N/A			1/MONTH GRAB		
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 23 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)			 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE		
LaVere N. Grimes Facilities Manager							410-239-5555		96 02 13		
TYPED OR PRINTED		AREA CODE		NUMBER		YEAR	MO	DAY			

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMIT NO. / ADDRESS (include Facility Name if different)

NATIONAL POLLUTANT DISCHARGE MONITORING SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form A OMD No. 4 Approved 9-30-85

NAME **BLACK & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER	001 DISCHARGE NUMBER												
MONITORING PERIOD													
FROM	TO												
<table border="1"> <tr><th>YEAR</th><th>MO</th><th>DAY</th></tr> <tr><td>96</td><td>02</td><td>01</td></tr> </table>	YEAR	MO	DAY	96	02	01	<table border="1"> <tr><th>YEAR</th><th>MO</th><th>DAY</th></tr> <tr><td>96</td><td>02</td><td>29</td></tr> </table>	YEAR	MO	DAY	96	02	29
YEAR	MO	DAY											
96	02	01											
YEAR	MO	DAY											
96	02	29											

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-69)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.2372	0.4715	MGD					0	Continuous Measured	
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT								CONTINUOUS/MEASURED
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT						ND	ppb	0	1/month	grab
	PERMIT REQUIREMENT						5			1/MONTH	GRAB
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT						ND	ppb	0	1/month	grab
	PERMIT REQUIREMENT						5			1/MONTH	GRAB
TRICHLOROETHYLENE	SAMPLE MEASUREMENT						ND	ppb	0	1/month	grab
	PERMIT REQUIREMENT						5			1/MONTH	GRAB
TOTAL RESIDUAL CHLORINE	SAMPLE MEASUREMENT						<0.1	mg/l	0	3/month	grab
	PERMIT REQUIREMENT						<0.1			1/MONTH	GRAB
OIL & GREASE	SAMPLE MEASUREMENT						ND	mg/l	0	1/month	grab
	PERMIT REQUIREMENT						10			1/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <b>LaVere N. Grimes Facilities Manager</b>	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 19 USC 1001 AND 33 USC 1310 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>LaVere N. Grimes</i>	TELEPHONE	DATE			
			410-239-5555	96	03	05	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE ADDRESS (Include Facility Name, location if different)

NATIONAL POLLUTANT DISCHARGE MONITORING SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved OMD No. 2 Approval, expires 10-85

NAME **BLACK & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY \_\_\_\_\_  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER			001 DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
96	02	01		96	02	29
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
pH	SAMPLE MEASUREMENT				7.01				0	2/week	grab
	PERMIT REQUIREMENT				6.0					2/WEEK	GRAB
BOD	SAMPLE MEASUREMENT						7		0	1/month	grab
	PERMIT REQUIREMENT						15			1/MONTH	GRAB
TOTAL SUSPENDED SOLIDS	SAMPLE MEASUREMENT						6		0	1/month	grab
	PERMIT REQUIREMENT					20	30			1/MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <b>LaVere N. Grimes Facilities Manager</b> <small>TYPED OR PRINTED</small>	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1310 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>LaVere N. Grimes</i>	TELEPHONE	DATE		
			410-239-5555	96	03	05
AREA CODE	NUMBER	YEAR	MO	DAY		

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)



PERMITTEE ADDRESS (Include Facility Name if different)

NATIONAL POLLUTANT DISCHARGE MONITORING SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved by EPA OMD No. 833-018 Approval Expires 9-30-83

NAME **BLACK & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER			101 DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	96	02	01		96	02	29
	(10-81)	(11-81)	(12-81)		(01-82)	(02-82)	(03-82)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.342	0.430	MGD					0	Continuous Measured	
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT								CONTINUOUS/MEASURED
FECAL COLIFORM	SAMPLE MEASUREMENT					ND	MPN/ 100ml	0	1/week	grab	
	PERMIT REQUIREMENT					200					1/WEEK
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)				TELEPHONE		DATE			
LaVere N. Grimes Facilities Manager						410-239-5555		96	03	05	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

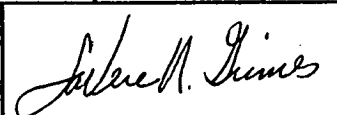
DISCHARGE MONITORING REPORT (DMM)

Approval expires 10-85

County name (if different)  
 NAME **BECK & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER	201 DISCHARGE NUMBER																		
MONITORING PERIOD																			
FROM	TO																		
<table border="1"> <tr><th>YEAR</th><th>MO</th><th>DAY</th></tr> <tr><td>96</td><td>02</td><td>01</td></tr> <tr><td>(20-21)</td><td>(22-23)</td><td>(24-25)</td></tr> </table>	YEAR	MO	DAY	96	02	01	(20-21)	(22-23)	(24-25)	<table border="1"> <tr><th>YEAR</th><th>MO</th><th>DAY</th></tr> <tr><td>96</td><td>02</td><td>29</td></tr> <tr><td>(26-27)</td><td>(28-29)</td><td>(30-31)</td></tr> </table>	YEAR	MO	DAY	96	02	29	(26-27)	(28-29)	(30-31)
YEAR	MO	DAY																	
96	02	01																	
(20-21)	(22-23)	(24-25)																	
YEAR	MO	DAY																	
96	02	29																	
(26-27)	(28-29)	(30-31)																	

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (48-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-43) QUALITY OR CONCENTRATION (44-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
FLOW	SAMPLE MEASUREMENT	0.2056	0.2425	MGD					0	Continuous Measured		
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT							CONTINUOUS/MEASURED		
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT						ND	ppb	0	1/month grab		
	PERMIT REQUIREMENT						N/A			1/MONTH GRAB		
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT						ND	ppb	0	1/month grab		
	PERMIT REQUIREMENT						N/A			1/MONTH GRAB		
TRICHLOROETHYLENE	SAMPLE MEASUREMENT						ND	ppb	0	1/month grab		
	PERMIT REQUIREMENT						N/A			1/MONTH GRAB		
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 23 USC 1316 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)				 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			TELEPHONE		DATE		
LaVere N. Grimes Facilities Manager								410-239-5555	96	03	05	
TYPED OR PRINTED					AREA CODE	NUMBER	YEAR	MO	DAY			

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE ADDRESS (include Facility Name/Location if different)

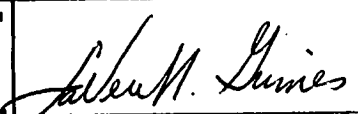
NATIONAL POLLUTANT DISCHARGE INFORMATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved OMD No. Approval Expires 9-30-85

NAME **BLACK & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY \_\_\_\_\_  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER			001 DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
96	03	01		96	03	31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.1618	0.1946	MGD					0	Continuous Measured	
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT							CONTINUOUS/MEASURED	
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT						ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT						5			1/MONTH GRAB	
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT						ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT						5			1/MONTH GRAB	
TRICHLOROETHYLENE	SAMPLE MEASUREMENT						ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT						5			1/MONTH GRAB	
TOTAL RESIDUAL CHLORINE	SAMPLE MEASUREMENT						<0.1	mg/l	0	4/month grab	
	PERMIT REQUIREMENT						<0.1			1/MONTH GRAB	
OIL & GREASE	SAMPLE MEASUREMENT					22	110	mg/l	1	3/month grab	
	PERMIT REQUIREMENT					10	15			1/MONTH GRAB	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1316 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)							TELEPHONE	DATE		
LaVere N. Grimes Facilities Manager								410-239-5555	96	04	04
TYPED OR PRINTED								SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Oil & Grease violation handled as required.

PERMITTEE/ADDRESS (Include Facility Name, Location if different)

NATIONAL POLLUTANT DISCHARGE INFORMATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved OMB No. 2030-0047 Approval expires 03-30-85

NAME **BLACK & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER			001 DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	96	03	01		96	03	31

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
pH	SAMPLE MEASUREMENT				7.07		7.42		0	2/week	grab
	PERMIT REQUIREMENT				6.0		8.5				
BOD	SAMPLE MEASUREMENT						3		0	1/month	grab
	PERMIT REQUIREMENT						15				
TOTAL SUSPENDED SOLIDS	SAMPLE MEASUREMENT					4.3	2		0	1/month	grab
	PERMIT REQUIREMENT					20	30				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  <b>LaVere N. Grimes</b> Facilities Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)	TELEPHONE		DATE		
		410-239-5555		96	04	04
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>LaVere N. Grimes</i>	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Facility Name/Location (if different)

DISCHARGE MONITORING REPORT (DMR)

Form Approved  
 OMD No. 2040-00  
 Approval expires

NAME **BLU DECKER (U.S.) INC.**  
 ADDRESS **826 HARVEY PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER (2-18)  
 101 DISCHARGE NUMBER (17-19)

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
96	03	01		96	03	31
(10-31)	(22-22)	(24-23)		(22-27)	(22-28)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (48-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-66)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.436	0.444	MGD					0	Continuous Measured	
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT							CONTINUOUS/MEASURED	
FECAL COLIFORM	SAMPLE MEASUREMENT					ND	MPN/100ml	0	1/week	grab	
	PERMIT REQUIREMENT					200					1/WEEK
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
**LaVere N. Grimes**  
**Facilities Manager**  
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 3 years)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  
*LaVere N. Grimes*

TELEPHONE  
 410-239-5555  
 DATE  
 96 04 04  
 AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NAME **BLA... DECKER (U.S.) INC.**  
 ADDRESS **826... ER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

(2-14) **93-DP-0022**  
 PERMIT NUMBER


(17-19) **201**  
 LARGE NUMBER

Approval expires 9-30-93

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
96	03	01		96	03	31
(20-27)	(28-31)	(32-35)		(36-43)	(44-47)	(48-51)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (48-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	0.2246	0.2385	MGD				0	Continuous Measured	
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT						CONTINUOUS/MEASURED	
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT						ND	0	1/month grab	
	PERMIT REQUIREMENT						N/A		1/MONTH GRAB	
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT						ND	0	1/month grab	
	PERMIT REQUIREMENT						N/A		1/MONTH GRAB	
TRICHLOROETHYLENE	SAMPLE MEASUREMENT						ND	0	1/month grab	
	PERMIT REQUIREMENT						N/A		1/MONTH GRAB	
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1319 (Penalties under those statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
LaVere N. Grimes Facilities Manager			410-239-5555	96 04 04
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name unless different)

NATIONAL POLLUTANT DISCHARGE EXAMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved by GSA  
GSA FPMR (41 CFR) 101-11.6  
OMB No. 2040-0047  
Approval Date 9-30-85

NAME **BECK & DECKER (U.S.) INC.**  
ADDRESS **626 HANOVER PIKE  
HAMPSTEAD, MARYLAND 21074**  
FACILITY  
LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER	001 DISCHARGE NUMBER
MONITORING PERIOD	
FROM	TO
YEAR MO DAY 96 04 01	YEAR MO DAY 96 04 30
(20-21)	(22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.349	0.768	MGD					0	Continuous Measured	
	PERMIT REQUIREMENT	NO LIMIT	NO LIMIT								CONTINUOUS/MEASURED
1,1,1-TRICHLOROETHANE	SAMPLE MEASUREMENT						ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT						5			1/MONTH GRAB	
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT						ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT						5			1/MONTH GRAB	
TRICHLOROETHYLENE	SAMPLE MEASUREMENT						ND	ppb	0	1/month grab	
	PERMIT REQUIREMENT						5			1/MONTH GRAB	
TOTAL RESIDUAL CHLORINE	SAMPLE MEASUREMENT						< 0.1	mg/l	0	4/month grab	
	PERMIT REQUIREMENT						< 0.1			1/MONTH GRAB	
OIL & GREASE	SAMPLE MEASUREMENT							mg/l	0	1/month grab	
	PERMIT REQUIREMENT					10	15			1/MONTH GRAB	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <b>LaVere N. Grimes Facilities Manager</b>	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1310 (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>LaVere N. Grimes</i>	TELEPHONE	DATE			
			410-239-5555	96	05	08	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE ADDRESS (Include Facility Name if different)

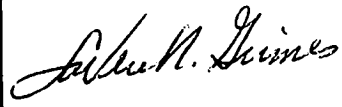
NATIONAL POLLUTANT DISCHARGE MONITORING SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

OMB No. 2070-0185 Approval

NAME **BLACK & DECKER (U.S.) INC.**  
 ADDRESS **626 HANOVER PIKE**  
**HAMPSTEAD, MARYLAND 21074**  
 FACILITY  
 LOCATION **CARROLL COUNTY**

93-DP-0022 PERMIT NUMBER	001 DISCHARGE NUMBER
MONITORING PERIOD	
FROM	TO
YEAR MO DAY 96 04 01	YEAR MO DAY 96 04 30
(20-21)	(22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
pH	SAMPLE MEASUREMENT				7.14			8.25	STD	0	2/week	grab
	PERMIT REQUIREMENT				6.0			8.5			2/WEEK	GRAB
BOD	SAMPLE MEASUREMENT							3	mg/l	0	1/month	grab
	PERMIT REQUIREMENT							15			1/MONTH	GRAB
TOTAL SUSPENDED SOLIDS	SAMPLE MEASUREMENT							4	mg/l	0	1/month	grab
	PERMIT REQUIREMENT						20	30			1/MONTH	GRAB
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED 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 SEE 18 USC 1001 AND 33 USC 1319 (Penalties under these statutes may include fines up to \$10,000 and or maximum Imprisonment of between 6 months and 5 years)				 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			TELEPHONE	DATE			
LaVere N. Grimes Facilities Manager								410-239-5555	96	05	08	
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY						

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)