

Certified Mail: Return Receipt Requested (7010 0290 0000 3114 1441)

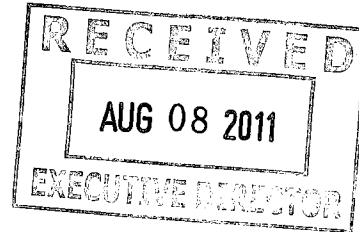
July 29, 2011

Air Section Manager
Texas Commission on Environmental Quality
Region 12
5425 Polk Avenue, Suite H
Houston, Texas 77023-1486

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AUG 11 2011

COMPLIANCE & ENFORCEMENT



RE: Rhodia Inc.
Baytown, Texas
Title 5 Semi-Annual Deviation Report
Permit No.: O-01610
Account No.: HG-0696-Q

Dear Air Section Manager:

Please find attached the semi-annual Title V deviation report for the Rhodia Baytown, Texas facility which covers the period from January 25, 2011 to July 24, 2011.

If there are any questions, please contact me at (713) 924-1484.

Sincerely,

Samuel E. Keen, PE
Environmental Engineer

RECEIVED

MAR 11 2013

**TCEQ
CENTRAL FILE ROOM**

Attachments

cc: Executive Director, TCEQ, Austin ✓

Chief, Air Branch
USEPA
Region 6
1445 Ross Avenue, Suite 1200
Dallas, TX 75202-2733



Form OP-CRO1
Certification by Responsible Official
Federal Operating Permit Program

All initial permit application, permit revision, renewal, and reopening submittals requiring certification must be accompanied by this form. Updates to site operating permit (SOP) and temporary operating permit (TOP) applications (other than public notice verification materials) must be certified prior to authorization of public notice for the draft permit. Updates to general operating permit (GOP) applications must be certified prior to receiving an authorization to operate under a GOP.

I. IDENTIFYING INFORMATION		
A. Account No.: HG-0696-Q	B. RN: 100211317	C. CN: 600125330
D. Permit No.: O-01610	E. Project No.: 1610	
F. Area Name: Baytown Plant		
G. Company Name: Rhodia Inc.		
II. CERTIFICATION TYPE <i>(Please mark the appropriate box[es])</i>		
A. <input type="checkbox"/> Responsible Official:		
B. <input checked="" type="checkbox"/> Duly Authorized Representative:		
C. <input type="checkbox"/> Designated Representative <i>(Title IV acid rain sources only):</i>		
D. <input type="checkbox"/> Alternate Designated Representative <i>(Title IV acid rain sources only):</i>		
III. SUBMITTAL TYPE <i>(Place an "X" in the appropriate box) (Only one response can be accepted per form)</i>		
<input type="checkbox"/> SOP/TOP Initial Permit Application		<input type="checkbox"/> Update to Permit Application
<input type="checkbox"/> GOP Initial Permit Application		<input checked="" type="checkbox"/> Other: <u>Semi-Annual Title V Deviation Report</u>
<input type="checkbox"/> Permit Revision, Renewal, or Reopening		
IV. CERTIFICATION OF TRUTH, ACCURACY, AND COMPLETENESS		
This certification does not extend to information which is designated by the TCEQ as information for reference only.		
I, <u>William McConnell</u> , certify that I am the <u>DAR</u> and that, based on information <i>(Name printed or typed)</i> <i>(RO, DAR, DR, and/or ADR)</i>		
and belief formed after reasonable inquiry, the statements and information dated during the time period in IV.1. below, OR on a specific date(s) in IV.2. below, are true, accurate, and complete:		
<i>Note: Enter EITHER a Time Period OR Specific Date(s) for each certification.</i>		
1. Time Period: From <u> </u> to <u> </u> <i>Start Date*</i> <i>End Date*</i>		
OR		
2. Specific Dates: <u>7/29/11</u> <i>Date 1*</i> <i>Date 2*</i> <i>Date 3*</i> <i>Date 4*</i> <i>Date 5*</i> <i>Date 6*</i> <i>Date 7*</i> <i>Date 8*</i>		
* The start and end dates of the "Time Period," or "Specific Dates" 2-8, should only be completed when the box for "Update to Permit Application" in Section III of this form, is marked or a submittal package has multiple dates recorded in the documentation. A Time Period may not be used if the "Submittal Type" in Section III of this form, is "Other" and the specific material being certified is an "Annual Compliance Certification," a "Monitoring Report," "Progress Report," "Deviation Report," or "Test Report".		
Signature: <u>William J. McConnell</u>	Signature Date: <u>7/29/11</u>	
Title: <u>Plant Manager</u>		

Texas Operating Permit Deviation Report Form

Company Name		Rhodia Inc.				Account No.	HG-0696-Q		
Area Name		Baytown Plant				Operating Permit No.	O-01610		
Report Period Began on		1/25/11		And Ended on		7/24/11		Report Submittal Date	7/29/2011
Operating Permit Requirement for Which Deviations are Being Reported									
ID Number (Rq'd if Applicable)		Permit Provision No. (Rq'd If Applicable)	Pollutant (Rq'd if Applicable)	Regulatory Requirement (Citation Rq'd if Applicable)	Type of Requirement (Rq'd)	SOP or GOP Index Number (See Instructions)	Monitoring Requirements (Rq'd as Applicable)		
Unit ID	Group ID						Citation	Frequency	
1		Permit 9565, SC 1	SO ₂	30 TAC 116.110(a)	Standard				

Details of Deviations from Above Referenced Requirement							
(Note: All elements, except Event No. are Required for Each Period of Deviation)							
Event No. (Optional)	Deviation Period				# Of Devs	Cause of Deviation	Corrective Action Taken to Remedy or Mitigate Deviation Situation
	Start		End				
	Date	Time	Date	Time			
IR-ECO-BT-2011-10	2/5/11	12:30	2/5/11	13:36	1	Unit trip caused VOC and SO2 emissions from scrubber	Restore power and operation to furnace
IR-ECO-BT-2011-12	2/7/11	10:00	2/7/11	10:45	1	Unit trip due to blower oil leak	Repair leak and restart unit
IR-ECO-BT-2011-16	2/22/11	10:50	2/22/11	14:20	1	Leak in converter shell	Repair and monitor leak
IR-ECO-BT-2011-21	3/7/11	8:50	3/7/11	16:10	1	Leak in converter shell	Repair and monitor leak
IR-ECO-BT-2011-24	4/21/11	8:20	4/21/11	10:50	1	Pinhole SO2 leak from analyzer on main gas blower	Repair analyzer and monitor
IR-ECO-BT-2011-26	4/25/11	13:00	4/25/11	13:01	1	Furnace puff due to high pressure	Restore feeds and normalize operations
Total Deviations:					6		

Texas Operating Permit Deviation Report Form

Company Name		Rhodia Inc.				Account No.		HG-0696-Q	
Area Name		Baytown Plant				Operating Permit No.		O-01610	
Report Period Began on		1/25/11		And Ended on		7/24/11		Report Submittal Date	
								7/29/2011	
Operating Permit Requirement for Which Deviations are Being Reported									
ID Number (Rq'd if Applicable)		Permit Provision No. (Rq'd If Applicable)	Pollutant (Rq'd if Applicable)	Regulatory Requirement (Citation Rq'd if Applicable)	Type of Requirement (Rq'd)	SOP or GOP Index Number (See Instructions)	Monitoring Requirements (Rq'd as Applicable)		
Unit ID	Group ID						Citation		Frequency
1		Permit 9565, SC 1	SO ₂	30 TAC 116.110(a)	Standard				

Details of Deviations from Above Referenced Requirement							
(Note: All elements, except Event No. are Required for Each Period of Deviation)							
Event No. (Optional)	Deviation Period				# Of Devs	Cause of Deviation	Corrective Action Taken to Remedy or Mitigate Deviation Situation
	Start		End				
	Date	Time	Date	Time			
IR-ECO- BT-2011-27	4/26/11	10:15	4/26/11	14:15	1	SO2 leak on vent line	Repair and monitor leak
IR-ECO- BT-2011-28	6/16/11	7:00	6/16/11	15:00	1	Unit down for maintenance	Repair maintenance quickly and restore feeds
IR-ECO- BT-2011-32	7/15/11	8:07	7/15/11	8:47	1	Loss of feeds to furnace followed by blower trip	Restore feeds and restart blower
IR-ECO- BT-2011-33	7/19/11	11:15	7/19/11	15:20	1	Caustic scrubber used for vent system while performing tests	Complete testing and restore vents to furnace
Total Deviations:					4		

Texas Operating Permit Deviation Report Form

Company Name		Rhodia Inc.			Account No.		HG-0696-Q	
Area Name		Baytown Plant			Operating Permit No.		O-01610	
Report Period Began on		1/25/11	And Ended on		7/24/11	Report Submittal Date		7/29/2011
Operating Permit Requirement for Which Deviations are Being Reported								
ID Number (Rq'd if Applicable)		Permit Provision No. (Rq'd If Applicable)	Pollutant (Rq'd if Applicable)	Regulatory Requirement (Citation Rq'd if Applicable)	Type of Requirement (Rq'd)	SOP or GOP Index Number (See Instructions)	Monitoring Requirements (Rq'd as Applicable)	
Unit ID	Group ID						Citation	Frequency
1		Permit 9565, SC 1	VOC	30 TAC 115.112 (a) (1)	Standard			

Details of Deviations from Above Referenced Requirement (Note: All elements, except Event No. are Required for Each Period of Deviation)							
Event No. (Optional)	Deviation Period				# Of Devs	Cause of Deviation	Corrective Action Taken to Remedy or Mitigate Deviation Situation
	Start		End				
	Date	Time	Date	Time			
IR-ECO-BT-2011-10	2/5/11	12:30	2/5/11	13:36	1	Unit trip caused VOC and SO2 emissions from scrubber	Restore power and operation to furnace
IR-ECO-BT-2011-12	2/7/11	10:00	2/7/11	10:45	1	Unit trip due to blower oil leak	Repair leak and restart unit
IR-ECO-BT-2011-14	2/13/11	6:40	2/13/11	6:55	1	Unit upset due to low natural gas pressure	Restore gas flow and restore feeds to furnace
IR-ECO-BT-2011-17	2/17/11	17:30	2/18/11	21:00	1	Acid leak caused unit to go down for maintenance	Perform repair on pump and restore unit
IR-ECO-BT-2011-28	6/16/11	7:00	6/16/11	15:00	1	Unit down for maintenance	Repair maintenance quickly and restore feeds
IR-ECO-BT-2011-32	7/15/11	8:07	7/15/11	8:47	1	Loss of feeds to furnace followed by blower trip	Restore feeds and restart blower
Total Deviations:					6		

Texas Operating Permit Deviation Report Form

Company Name		Rhodia Inc.			Account No.		HG-0696-Q	
Area Name		Baytown Plant			Operating Permit No.		O-01610	
Report Period Began on		1/25/11	And Ended on		7/24/11	Report Submittal Date		7/29/2011
Operating Permit Requirement for Which Deviations are Being Reported								
ID Number (Rq'd if Applicable)		Permit Provision No. (Rq'd If Applicable)	Pollutant (Rq'd if Applicable)	Regulatory Requirement (Citation Rq'd if Applicable)	Type of Requirement (Rq'd)	SOP or GOP Index Number (See Instructions)	Monitoring Requirements (Rq'd as Applicable)	
Unit ID	Group ID						Citation	Frequency
1		Permit 9565, SC 1	VOC	30 TAC 115.112 (a) (1)	Standard			

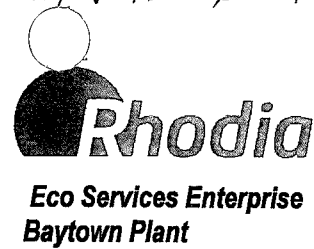
Details of Deviations from Above Referenced Requirement							
(Note: All elements, except Event No. are Required for Each Period of Deviation)							
Event No. (Optional)	Deviation Period				# Of Devs	Cause of Deviation	Corrective Action Taken to Remedy or Mitigate Deviation Situation
	Start		End				
	Date	Time	Date	Time			
IR-ECO- BT-2011- 33	7/19/11 1	11:15	7/19/11	15:20	1	Caustic scrubber used for vent system while performing tests	Complete testing and restore vents to furnace
Total Deviations:					1		

Texas Operating Permit Deviation Report Form

Company Name		Rhodia Inc.			Account No.		HG-0696-Q	
Area Name		Baytown Plant			Operating Permit No.		O-01610	
Report Period Began on		1/25/11	And Ended on		7/24/11	Report Submittal Date		7/29/2011
Operating Permit Requirement for Which Deviations are Being Reported								
ID Number (Rq'd if Applicable)		Permit Provision No. (Rq'd If Applicable)	Pollutant (Rq'd if Applicable)	Regulatory Requirement (Citation Rq'd if Applicable)	Type of Requirement (Rq'd)	SOP or GOP Index Number (See Instructions)	Monitoring Requirements (Rq'd as Applicable)	
Unit ID	Group ID						Citation	Frequency
1		Permit 9565, SC 13	SO2 & SO3	30 TAC 112.6(c)	Monitoring			

Details of Deviations from Above Referenced Requirement							
(Note: All elements, except Event No. are Required for Each Period of Deviation)							
Event No. (Optional)	Deviation Period				# Of Devs	Cause of Deviation	Corrective Action Taken to Remedy or Mitigate Deviation Situation
	Start		End				
	Date	Time	Date	Time			
IR-ECO-BT-2011-19	3/3/11	9:50	3/3/11	11:50	1	CEMS was out of service due to stack Cylinder Gas Audit. Alternative Monitoring Plan was initiated.	CGA was completed in a timely manner, and stack CEMS was restored to normal operation
IR-ECO-BT-2011-20	3/4/11	9:00	3/4/11	13:15	1	CEMS was out of service due to replacement of filters. This activity was found to be necessary during the previous day's CGA.	Replacement was completed quickly, and stack CEMS was restored to normal operation
Total Deviations:					2		

AIRV/HG 0696Q/RN 180211317/01610/PA



Certified Mail: Return Receipt Requested (7010 0290 0000 3114 1328)

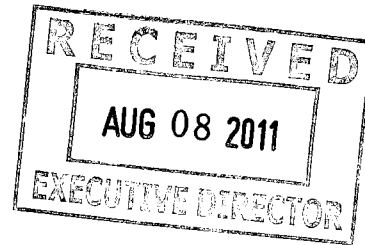
RECEIVED

July 29, 2011

AUG 11 2011

Air Section Manager
Texas Commission on Environmental Quality
Region 12
5425 Polk Avenue, Suite H
Houston, Texas 77023-1486

COMPLIANCE & ENFORCEMENT



RE: Rhodia Inc.
Baytown, Texas
Title 5 Annual Certification Report
Permit No.: O-01610
Account No.: HG-0696-Q

RECEIVED

MAR 11 2013

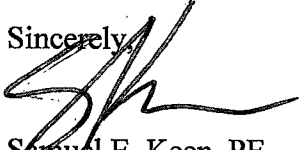
TCEQ
CENTRAL FILE ROOM

Dear Air Section Manager:

Please find attached the annual Title V certification report for the Rhodia Baytown, Texas facility which covers the period from July 25, 2010 to July 24, 2011.

If there are any questions, please contact me at (713) 924-1484.

Sincerely,


Samuel E. Keen, PE
Environmental Engineer

Attachments

cc: Executive Director, TCEQ, Austin ✓

Chief, Air Branch
USEPA
Region 6
1445 Ross Avenue, Suite 1200
Dallas, TX 75202-2733

Rhodia Inc.
Baytown Plant
3439 Park Street
P.O. Box 3331
Baytown, TX 77522-3331



Form OP-CRO1
Certification by Responsible Official
Federal Operating Permit Program

All initial permit application, permit revision, renewal, and reopening submittals requiring certification must be accompanied by this form. Updates to site operating permit (SOP) and temporary operating permit (TOP) applications (other than public notice verification materials) must be certified prior to authorization of public notice for the draft permit. Updates to general operating permit (GOP) applications must be certified prior to receiving an authorization to operate under a GOP.

I. IDENTIFYING INFORMATION		
A. Account No.: HG-0696-Q	B. RN: 100211317	C. CN: 600125330
D. Permit No.: O-01610	E. Project No.: 1610	
F. Area Name: Baytown Plant		
G. Company Name: Rhodia Inc.		
II. CERTIFICATION TYPE <i>(Please mark the appropriate box[es])</i>		
A. <input type="checkbox"/> Responsible Official:		
B. <input checked="" type="checkbox"/> Duly Authorized Representative:		
C. <input type="checkbox"/> Designated Representative <i>(Title IV acid rain sources only)</i> :		
D. <input type="checkbox"/> Alternate Designated Representative <i>(Title IV acid rain sources only)</i> :		
III. SUBMITTAL TYPE <i>(Place an "X" in the appropriate box) (Only one response can be accepted per form)</i>		
<input type="checkbox"/> SOP/TOP Initial Permit Application		<input type="checkbox"/> Update to Permit Application
<input type="checkbox"/> GOP Initial Permit Application		<input checked="" type="checkbox"/> Other: <u>Annual Title V Certification</u>
<input type="checkbox"/> Permit Revision, Renewal, or Reopening		
IV. CERTIFICATION OF TRUTH, ACCURACY, AND COMPLETENESS		
This certification does not extend to information which is designated by the TCEQ as information for reference only.		
I, <u>William McConnell</u> , certify that I am the <u>DAR</u> and that, based on information <i>(Name printed or typed)</i> <u>(RO, DAR, DR, and/or ADR)</u>		
and belief formed after reasonable inquiry, the statements and information dated during the time period in IV.1. below, OR on a specific date(s) in IV.2. below, are true, accurate, and complete:		
<i>Note: Enter EITHER a Time Period OR Specific Date(s) for each certification.</i>		
1. Time Period: From <u> </u> to <u> </u> <i>Start Date*</i> <i>End Date*</i>		
OR		
2. Specific Dates: <u>7/29/11</u> <i>Date 1*</i> <i>Date 2*</i> <i>Date 3*</i> <i>Date 4*</i> <i>Date 5*</i> <i>Date 6*</i> <i>Date 7*</i> <i>Date 8*</i>		
* The start and end dates of the "Time Period," or "Specific Dates" 2-8, should only be completed when the box for "Update to Permit Application" in Section III of this form, is marked or a submittal package has multiple dates recorded in the documentation. A Time Period may not be used if the "Submittal Type" in Section III of this form, is "Other" and the specific material being certified is an "Annual Compliance Certification," a "Monitoring Report," "Progress Report," "Deviation Report," or "Test Report".		
Signature: <u><i>William McConnell</i></u>	Signature Date: <u>7/29/11</u>	
Title: <u>Plant Manager</u>		



TCEQ Core Data Form

TCEQ Use Only

For detailed instructions regarding completion of this form, please read the Core Data Form Instructions or call 512-239-5175.

SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided)			
<input type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application)			
<input type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)		<input checked="" type="checkbox"/> Other Title V Annual Certification Form	
2. Attachments Describe Any Attachments: (ex. Title V Application, Waste Transporter Application, etc.)			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
3. Customer Reference Number (if issued)		4. Regulated Entity Reference Number (if issued)	
CN 600125330		RN 100211317	
Follow this link to search for CN or RN numbers in Central Registry**			

SECTION II: Customer Information

5. Effective Date for Customer Information Updates (mm/dd/yyyy)		4/29/2009	
6. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check only <u>one</u> of the following:			
<input type="checkbox"/> Owner		<input type="checkbox"/> Operator	
<input type="checkbox"/> Occupational Licensee		<input type="checkbox"/> Responsible Party	
<input checked="" type="checkbox"/> Owner & Operator		<input type="checkbox"/> Voluntary Cleanup Applicant	
<input type="checkbox"/> Other: _____			
7. General Customer Information			
<input type="checkbox"/> New Customer		<input type="checkbox"/> Update to Customer Information	
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State)		<input type="checkbox"/> Change in Regulated Entity Ownership	
		<input checked="" type="checkbox"/> No Change**	
**If "No Change" and Section I is complete, skip to Section III – Regulated Entity Information.			
8. Type of Customer:			
<input checked="" type="checkbox"/> Corporation		<input type="checkbox"/> Individual	
<input type="checkbox"/> City Government		<input type="checkbox"/> Sole Proprietorship- D.B.A	
<input type="checkbox"/> County Government		<input type="checkbox"/> Federal Government	
<input type="checkbox"/> State Government			
<input type="checkbox"/> Other Government		<input type="checkbox"/> General Partnership	
<input type="checkbox"/> Limited Partnership		<input type="checkbox"/> Other: _____	
9. Customer Legal Name (If an individual, print last name first: ex: Doe, John) <i>If new Customer, enter previous Customer below</i> <i>End Date:</i>			
Rhodia Inc.			
10. Mailing Address:			
8 Cedar Brook			
City		Cranbury	
State		NJ	
ZIP		08512	
ZIP + 4		7500	
11. Country Mailing Information (if outside USA)		12. E-Mail Address (if applicable)	
13. Telephone Number		14. Extension or Code	
(609) 860-4000			
		15. Fax Number (if applicable)	
		(609) 409-2845	
16. Federal Tax ID (9 digits)		17. TX State Franchise Tax ID (11 digits)	
223539954		12235399545	
18. DUNS Number (if applicable)		19. TX SOS Filing Number (if applicable)	
002959810			
20. Number of Employees		21. Independently Owned and Operated?	
<input type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input checked="" type="checkbox"/> 501 and higher		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

SECTION III: Regulated Entity Information

22. General Regulated Entity Information (If "New Regulated Entity" is selected below this form should be accompanied by a permit application)			
<input type="checkbox"/> New Regulated Entity		<input type="checkbox"/> Update to Regulated Entity Name	
<input type="checkbox"/> Update to Regulated Entity Information		<input checked="" type="checkbox"/> No Change** (See below)	
**If "NO CHANGE" is checked and Section I is complete, skip to Section IV, Preparer Information.			
23. Regulated Entity Name (name of the site where the regulated action is taking place)			
Rhodia Inc.			

24. Street Address of the Regulated Entity: (No P.O. Boxes)	3439 Park St						
	City	Baytown	State	TX	ZIP	77520	ZIP + 4
25. Mailing Address:	P.O. Box 3331						
	City	Baytown	State	TX	ZIP	77522	ZIP + 4 3331
26. E-Mail Address:							
27. Telephone Number	28. Extension or Code		29. Fax Number (if applicable)				
(281) 691-6500			(281) 427-1527				
30. Primary SIC Code (4 digits)	31. Secondary SIC Code (4 digits)	32. Primary NAICS Code (5 or 6 digits)		33. Secondary NAICS Code (5 or 6 digits)			
2819		325188					
34. What is the Primary Business of this entity? (Please do not repeat the SIC or NAICS description.)							
Manufacture of sulfuric acid							

Questions 34 – 37 address geographic location. Please refer to the instructions for applicability.

35. Description to Physical Location:						
36. Nearest City	County		State		Nearest ZIP Code	
Baytown	Harris		TX		77520	
37. Latitude (N) In Decimal:	38. Longitude (W) In Decimal:					
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds	
29	44	51	95	0	07	

39. TCEQ Programs and ID Numbers Check all Programs and write in the permits/registration numbers that will be affected by the updates submitted on this form or the updates may not be made. If your Program is not listed, check other and write it in. See the Core Data Form instructions for additional guidance.

<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Industrial Hazardous Waste	<input type="checkbox"/> Municipal Solid Waste
<input checked="" type="checkbox"/> New Source Review – Air	<input type="checkbox"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS	<input type="checkbox"/> Sludge
9565, 56534				
<input type="checkbox"/> Stormwater	<input checked="" type="checkbox"/> Title V – Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil	<input type="checkbox"/> Utilities
	001610			
<input type="checkbox"/> Voluntary Cleanup	<input type="checkbox"/> Waste Water	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:

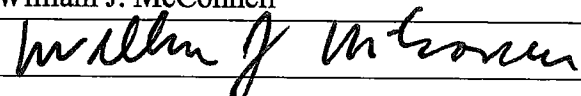
SECTION IV: Preparer Information

40. Name:	Samuel E. Keen, PE	41. Title:	Environmental Engineer
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(713) 924-1484		(713) 835-3261	sam.keen@us.rhodia.com

SECTION V: Authorized Signature

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 9 and/or as required for the updates to the ID numbers identified in field 39.

(See the Core Data Form instructions for more information on who should sign this form.)

Company:	Rhodia Inc.	Job Title:	Plant Manager
Name (In Print):	William J. McConnell	Phone:	(713) 924-1401
Signature:		Date:	7/29/11



**Texas Commission on Environmental Quality
Federal Operating Permit Form
Permit Compliance Certification – PCC (Part 1)**

Permit Holder Name	Rhodia Inc.	Customer Number	CN600125330
Area Name	Baytown Plant	Account Number	HG-0696-Q
Operating Permit Number	O - 01610	Report Submittal Date	7/29/2011
Certification Period Start Date	7/25/2010	End Date	7/24/2011

I. Certification of Continuous Compliance with Permit Terms and Conditions (Indicate response by placing a 'x' in the appropriate column for each of the following questions)	Response:	
	Yes	No
With the possible exception of those permit terms and conditions identified in the 'Summary of Deviations' found using, at a minimum, but not limited to, the continuous or intermittent compliance method data from monitoring, recordkeeping, reporting, or testing required by the permit and any other credible evidence or information, was the permit holder in continuous compliance with all the terms and conditions of the permit over the Certification Period?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

II. Summary of Deviations (Indicate response by placing a 'x' in the appropriate column for each of the following questions)	Response:	
	Yes	No
<p>A. Were there any deviations from any permit requirements during the Certification Period that have <i>previously</i> been reported to the agency?</p> <p>If the answer to this question is 'Yes', please complete and attach Part 2 to this submittal.</p> <p><i>Important Note:</i> If previously submitted reports did not contain specific information on monitoring methods, frequency and the total number of deviations experienced over the entire certification period, then use form DevRep to provide that information.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>B. Were there any deviations from any terms or conditions of the permit during the Certification Period that are <i>currently</i> being submitted to the agency?</p> <p>If the answer to this question is 'Yes', please include the relevant reports along with this page.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>



**Texas Commission on Environmental Quality
Federal Operating Permit Form
PCC – Monitoring Options Selected (Part 3)**

Permit Holder Name	Rhodia Inc.	Customer Number	CN600125330
Area Name	Baytown Plant	Account Number	HG-0696-Q
Operating Permit Number	O-01610	Report Submittal Date	7/29/2011
Certification Period Start Date	7/25/2010	End Date	7/24/2011

ID Number		Regulatory Requirement (Rule or Permit No. and Prov.)	Pollutant Monitored	SOP or GOP Index Number	Monitoring Option Used	Dates		Description/Comments
Unit ID	Group ID				Specific Citation	Begin	End	
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Not Applicable. No Monitoring Options Allowed by Permit

AIR V / HG 06912Q / RN 100211317 / PA
O-01610



Eco Services Enterprise
Baytown Plant

Certified Mail: Return Receipt Requested (7010 0290 0000 3114 2158)

February 18, 2011

Air Section Manager
Texas Commission on Environmental Quality
Region 12
5425 Polk Avenue, Suite H
Houston, Texas 77023-1486

RECEIVED

FEB 24 2011

AIR PERMITS DIVISION

RE: Rhodia Inc.
Baytown, Texas
Title 5 Deviation Report
Permit No.: O-01610
Account No.: HG-0696-Q

Dear Air Section Manager:

Please find attached the semi-annual deviation report for the Rhodia Baytown, Texas facility which covers the period from June 25, 2010 to January 24, 2011.

If there are any questions, please contact me at (713) 924-1484.

Sincerely,

Samuel E. Keen, P.E.
Environmental Engineer

Attachments

cc: Executive Director, TCEQ, Austin ✓

RECEIVED

FEB 09 2011

TCEQ
CENTRAL FILE ROOM

Rhodia Inc.
Baytown Plant
3439 Park Street
P.O. Box 3331
Baytown, TX 77522-3331



**Form OP-CRO1
Certification by Responsible Official
Federal Operating Permit Program**

All initial permit application, permit revision, renewal, and reopening submittals requiring certification must be accompanied by this form. Updates to site operating permit (SOP) and temporary operating permit (TOP) applications (other than public notice verification materials) must be certified prior to authorization of public notice for the draft permit. Updates to general operating permit (GOP) applications must be certified prior to receiving an authorization to operate under a GOP.

I. IDENTIFYING INFORMATION		
A. Account No.: HG-0696-Q	B. RN: 100211317	C. CN: 600125330
D. Permit No.: O-01610	E. Project No.: 1610	
F. Area Name: Baytown Plant		
G. Company Name: Rhodia Inc.		
II. CERTIFICATION TYPE <i>(Please mark the appropriate box[es])</i>		
A. <input type="checkbox"/> Responsible Official:		
B. <input checked="" type="checkbox"/> Duly Authorized Representative:		
C. <input type="checkbox"/> Designated Representative <i>(Title IV acid rain sources only)</i> :		
D. <input type="checkbox"/> Alternate Designated Representative <i>(Title IV acid rain sources only)</i> :		
III. SUBMITTAL TYPE <i>(Place an "X" in the appropriate box) (Only one response can be accepted per form)</i>		
<input type="checkbox"/> SOP/TOP Initial Permit Application	<input type="checkbox"/> Update to Permit Application	
<input type="checkbox"/> GOP Initial Permit Application	x Other: <u> Title V Deviation Report </u>	
<input type="checkbox"/> Permit Revision, Renewal, or Reopening		
IV. CERTIFICATION OF TRUTH, ACCURACY, AND COMPLETENESS		
This certification does not extend to information which is designated by the TCEQ as information for reference only.		
I, <u>William McConnell</u> , certify that I am the <u>DAR</u> and that, based on information <i>(Name printed or typed)</i> <u>(RO, DAR, DR, and/or ADR)</u>		
and belief formed after reasonable inquiry, the statements and information dated during the time period in IV.1. below, OR on a specific date(s) in IV.2. below, are true, accurate, and complete:		
<i>Note: Enter EITHER a Time Period OR Specific Date(s) for each certification.</i>		
1. Time Period: From <u>7/25/2010</u> to <u>1/24/2011</u> <i>Start Date* End Date*</i>		
OR		
2. Specific Dates: <u> Date 1* Date 2* Date 3* Date 4* Date 5* Date 6* Date 7* Date 8* </u>		
* The start and end dates of the "Time Period," or "Specific Dates" 2-8, should only be completed when the box for "Update to Permit Application" in Section III of this form, is marked or a submittal package has multiple dates recorded in the documentation. A Time Period may not be used if the "Submittal Type" in Section III of this form, is "Other" and the specific material being certified is an "Annual Compliance Certification," a "Monitoring Report," "Progress Report," "Deviation Report," or "Test Report".		
Signature: <u></u>	Signature Date: <u>2/21/11</u>	
Title: _____		



TCEQ Core Data Form

TCEQ Use Only

For detailed instructions regarding completion of this form, please read the Core Data Form Instructions or call 512-239-5175.

SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided)			
<input type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application)			
<input type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)		<input checked="" type="checkbox"/> Other Title V Deviation Report	
2. Attachments Describe Any Attachments: (ex. Title V Application, Waste Transporter Application, etc.)			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
3. Customer Reference Number (if issued)		4. Regulated Entity Reference Number (if issued)	
CN 600125330		RN 100211317	

SECTION II: Customer Information

5. Effective Date for Customer Information Updates (mm/dd/yyyy)		4/29/2009	
6. Customer Role (Proposed or Actual) – as it relates to the <u>Regulated Entity</u> listed on this form. Please check only <u>one</u> of the following:			
<input type="checkbox"/> Owner		<input type="checkbox"/> Operator	
<input type="checkbox"/> Occupational Licensee		<input type="checkbox"/> Responsible Party	
<input checked="" type="checkbox"/> Owner & Operator		<input type="checkbox"/> Voluntary Cleanup Applicant	
<input type="checkbox"/> Other: _____			
7. General Customer Information			
<input type="checkbox"/> New Customer		<input type="checkbox"/> Update to Customer Information	
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State)		<input checked="" type="checkbox"/> No Change**	
**If "No Change" and Section I is complete, skip to Section III – Regulated Entity Information.			
8. Type of Customer:		<input checked="" type="checkbox"/> Corporation	
<input type="checkbox"/> City Government		<input type="checkbox"/> Individual	
<input type="checkbox"/> County Government		<input type="checkbox"/> Sole Proprietorship- D.B.A	
<input type="checkbox"/> Federal Government		<input type="checkbox"/> State Government	
<input type="checkbox"/> Other Government		<input type="checkbox"/> General Partnership	
<input type="checkbox"/> Limited Partnership		<input type="checkbox"/> Other: _____	
9. Customer Legal Name (If an individual, print last name first: ex: Doe, John)			End Date:
Rhodia Inc.			
10. Mailing Address:			
8 Cedar Brook			
City	State	ZIP	ZIP + 4
Cranbury	NJ	08512	7500
11. Country Mailing Information (if outside USA)		12. E-Mail Address (if applicable)	
13. Telephone Number		14. Extension or Code	
(609) 860-4000			
		15. Fax Number (if applicable)	
		(609) 409-2845	
16. Federal Tax ID (9 digits)		17. TX State Franchise Tax ID (11 digits)	
223539954		12235399545	
		18. DUNS Number (if applicable)	
		002959810	
19. TX SOS Filing Number (if applicable)			
20. Number of Employees		21. Independently Owned and Operated?	
<input type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input checked="" type="checkbox"/> 501 and higher		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

SECTION III: Regulated Entity Information

22. General Regulated Entity Information (If "New Regulated Entity" is selected below this form should be accompanied by a permit application)			
<input type="checkbox"/> New Regulated Entity		<input type="checkbox"/> Update to Regulated Entity Name	
<input type="checkbox"/> Update to Regulated Entity Information		<input checked="" type="checkbox"/> No Change** (See below)	
**If "NO CHANGE" is checked and Section I is complete, skip to Section IV, Preparer Information.			
23. Regulated Entity Name (name of the site where the regulated action is taking place)			
Rhodia Inc.			

24. Street Address of the Regulated Entity: (No P.O. Boxes)	3439 Park St						
	City	Baytown	State	TX	ZIP	77520	ZIP + 4
25. Mailing Address:	P.O Box 3331						
	City	Baytown	State	TX	ZIP	77522	ZIP + 4 3331
26. E-Mail Address:							
27. Telephone Number	28. Extension or Code			29. Fax Number (if applicable)			
(281) 691-6500				(281) 427-1527			
30. Primary SIC Code (4 digits)	31. Secondary SIC Code (4 digits)	32. Primary NAICS Code (5 or 6 digits)		33. Secondary NAICS Code (5 or 6 digits)			
2819		325188					
34. What is the Primary Business of this entity? (Please do not repeat the SIC or NAICS description.)							
Manufacture of sulfuric acid							

Questions 34 – 37 address geographic location. Please refer to the instructions for applicability.

35. Description to Physical Location:					
36. Nearest City	County		State		Nearest ZIP Code
Baytown	Harris		TX		77520
37. Latitude (N) In Decimal:		38. Longitude (W) In Decimal:			
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
29	44	51	95	0	07

39. TCEQ Programs and ID Numbers Check all Programs and write in the permits/registration numbers that will be affected by the updates submitted on this form or the updates may not be made. If your Program is not listed, check other and write it in. See the Core Data Form Instructions for additional guidance.

<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Industrial Hazardous Waste	<input type="checkbox"/> Municipal Solid Waste
<input checked="" type="checkbox"/> New Source Review – Air	<input type="checkbox"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS	<input type="checkbox"/> Sludge
9565, 56534				
<input type="checkbox"/> Stormwater	<input checked="" type="checkbox"/> Title V – Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil	<input type="checkbox"/> Utilities
	001610			
<input type="checkbox"/> Voluntary Cleanup	<input type="checkbox"/> Waste Water	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:

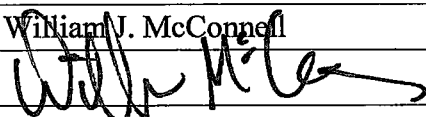
SECTION IV: Preparer Information

40. Name:	Floyd Dickerson	41. Title:	Environmental Manager
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(713) 924-1408		(713) 835-3261	floyd.dickerson@us.rhodia.com

SECTION V: Authorized Signature

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 9 and/or as required for the updates to the ID numbers identified in field 39.

(See the Core Data Form instructions for more information on who should sign this form.)

Company:	Rhodia Inc.	Job Title:	Plant Manager
Name (In Print):	William J. McConnell	Phone:	(713) 924-1401
Signature:		Date:	2/21/11

Texas Operating Permit Deviation Report Form

Company Name		Rhodia Inc.			Account No.	HG-0696-Q		
Area Name		Baytown Plant			Operating Permit No.	O-01610		
Report Period Began on		7/25/10	And Ended on		1/24/10	Report Submittal Date	2/18/11	
Operating Permit Requirement for Which Deviations are Being Reported								
ID Number (Rq'd if Applicable)		Permit Provision No. (Rq'd If Applicable)	Pollutant (Rq'd if Applicable)	Regulatory Requirement (Citation Rq'd if Applicable)	Type of Requirement (Rq'd)	SOP or GOP Index Number (See Instructions)	Monitoring Requirements (Rq'd as Applicable)	
Unit ID	Group ID						Citation	Frequency
EMSSCRUBSTK		Permit 56534, Special Condition 10		30 TAC 101.201	Standards			

Details of Deviations from Above Referenced Requirement							
(Note: All elements, except Event No. are Required for Each Period of Deviation)							
Event No. (Optional)	Deviation Period				# Of Devs	Cause of Deviation	Corrective Action Taken to Remedy or Mitigate Deviation Situation
	Start		End				
	Date	Time	Date	Time			
IR-ECO-BT-2011-9	1/24/11	4:00	1/24/11	9:13	1	pH in scrubber was recorded as out of range	Flow to scrubber was increased in order to restore proper pH, and pH was remeasured
Total Deviations:					1		

Texas Operating Permit Deviation Report Form

Company Name	Rhodia Inc.	Account No.	HG-0696-Q
Area Name	Baytown Plant	Operating Permit No.	O-01610
Report Period Began on	7/25/10	And Ended on	1/24/11
		Report Submittal Date	2/18/2011

Operating Permit Requirement for Which Deviations are Being Reported

ID Number (Rq'd if Applicable)		Permit Provision No. (Rq'd If Applicable)	Pollutant (Rq'd if Applicable)	Regulatory Requirement (Citation Rq'd if Applicable)	Type of Requirement (Rq'd)	SOP or GOP Index Number (See Instructions)	Monitoring Requirements (Rq'd as Applicable)	
Unit ID	Group ID						Citation	Frequency
1		Permit 9565, SC 1	SO ₂	30 TAC 116.110(a)	Standard			

Details of Deviations from Above Referenced Requirement (Note: All elements, except Event No. are Required for Each Period of Deviation)

Event No. (Optional)	Deviation Period				# Of Devs	Cause of Deviation	Corrective Action Taken to Remedy or Mitigate Deviation Situation
	Start		End				
	Date	Time	Date	Time			
IR-ECO-BT-2010-25	7/26/10	15:05	7/26/10	15:35	1	Furnace lost feeds and released SO ₂	Restore feeds and return to normal operation
IR-ECO-BT-2010-27	7/29/10	5:30	7/30/10	9:31	1	Unit out of service for maintenance outage	Perform planned maintenance in a quick manner, and return unit to service
IR-ECO-BT-2010-36	9/8/10	6:03	9/8/10	9:30	1	Pinhole converter duct leak	Isolate and repair pinhole leak
IR-ECO-BT-2010-38	9/21/10	8:00	9/21/10	11:33	1	Process gas leak from burner	Isolate and repair leak from burner
IR-ECO-BT-2010-40	10/5/10	9:17	10/6/10	9:28	1	Unit down for repairs	Operate quickly to ensure minimal emissions, bring unit back to normal operation
IR-ECO-BT-2010-44	11/3/10	7:30	11/4/10	8:45	1	Unit down for repairs	Operate quickly to ensure minimal emissions, bring unit back to normal operation
Total Deviations:					6		

Texas Operating Permit Deviation Report Form

Company Name		Rhodia Inc.			Account No.	HG-0696-Q	
Area Name		Baytown Plant			Operating Permit No.	O-01610	
Report Period Began on		7/25/10	And Ended on		1/24/11	Report Submittal Date	2/18/2011
Operating Permit Requirement for Which Deviations are Being Reported							
ID Number (Rq'd if Applicable)		Permit Provision No. (Rq'd If Applicable)	Pollutant (Rq'd if Applicable)	Regulatory Requirement (Citation Rq'd if Applicable)	Type of Requirement (Rq'd)	SOP or GOP Index Number (See Instructions)	Monitoring Requirements (Rq'd as Applicable)
Unit ID	Group ID					Citation	Frequency
1		Permit 9565, SC 1	SO ₂	30 TAC 116.110(a)	Standard		

Details of Deviations from Above Referenced Requirement							
(Note: All elements, except Event No. are Required for Each Period of Deviation)							
Event No. (Optional)	Deviation Period				# Of Devs	Cause of Deviation	Corrective Action Taken to Remedy or Mitigate Deviation Situation
	Start		End				
	Date	Time	Date	Time			
IR-ECO-BT-2010-45	11/16/10	16:08	11/16/10	17:20	1	Positive furnace pressure caused momentary release of SO ₂	Furnace pressure was restored
IR-ECO-BT-2010-46	11/23/10	15:30	11/23/10	17:10	1	Gauge repair caused release of SO ₂	Repair was performed and system brought to normal
Total Deviations:					2		

Texas Operating Permit Deviation Report Form

Company Name	Rhodia Inc.	Account No.	HG-0696-Q
Area Name	Baytown Plant	Operating Permit No.	O-01610
Report Period Began on	7/25/10	And Ended on	1/24/2011
		Report Submittal Date	2/18/11

Operating Permit Requirement for Which Deviations are Being Reported

ID Number (Rq'd if Applicable)		Permit Provision No. (Rq'd if Applicable)	Pollutant (Rq'd if Applicable)	Regulatory Requirement (Citation Rq'd if Applicable)	Type of Requirement (Rq'd)	SOP or GOP Index Number (See Instructions)	Monitoring Requirements (Rq'd as Applicable)	
Unit ID	Group ID						Citation	Frequency
1		Permit 9565, SC 1	VOC	30 TAC 115.112 (a) (1)	Standard			

Details of Deviations from Above Referenced Requirement

(Note: All elements, except Event No. are Required for Each Period of Deviation)

Event No. (Optional)	Deviation Period				# Of Devs	Cause of Deviation	Corrective Action Taken to Remedy or Mitigate Deviation Situation
	Start		End				
	Date	Time	Date	Time			
IR-ECO-BT-2010-27	7/29/10	5:30	7/30/10	9:31	1	Unit out of service for maintenance outage	Perform planned maintenance in a quick manner, and return unit to service
IR-ECO-BT-2010-40	10/5/10	9:17	10/6/10	9:28	1	Unit down for repairs	Operate quickly to ensure minimal emissions, bring unit back to normal operation
IR-ECO-BT-2010-44	11/3/10	7:30	11/4/10	8:45	1	Unit down for repairs	Operate quickly to ensure minimal emissions, bring unit back to normal operation
Total Deviations:					3		