



Form Approved
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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
Washington, D.C. 20460

NPDES Compliance Inspection Report

Section A: National Data System Coding

Transaction Code	NPDES	yr/mo/day	Inspec. Type	Inspector	Fac Type
1 <input type="checkbox"/> N <input type="checkbox"/> 2 <input type="checkbox"/> 5 <input type="checkbox"/> 3 <input type="checkbox"/> A <input type="checkbox"/> R <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 2 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 8 <input type="checkbox"/> 1 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 0 <input type="checkbox"/> 7 <input type="checkbox"/> 0 <input type="checkbox"/> 4 <input type="checkbox"/> 1 <input type="checkbox"/> 6 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> R <input type="checkbox"/> 19 <input type="checkbox"/> S <input type="checkbox"/> 20 <input type="checkbox"/> 1 <input type="checkbox"/>					
Remarks					
<input type="checkbox"/> A <input type="checkbox"/> F <input type="checkbox"/> I <input type="checkbox"/> N <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> - <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 2 <input type="checkbox"/> 9 <input type="checkbox"/>					
Inspection Work Days	Facility Evaluation Rating	BI	QA	-----Reserved-----	
67 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 69	70 <input type="checkbox"/> N <input type="checkbox"/>	71 <input type="checkbox"/> N <input type="checkbox"/>	72 <input type="checkbox"/> N <input type="checkbox"/>	73 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	74 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 75 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 80

Section B: Facility Data

Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number) Heber Springs Water & Sewer 1174 By-Pass Road Heber Springs, AR 72543	Entry Time /Date 0947 / April 16, 2007	Permit Effective Date July 1, 2002
	Exit Time/Date 1200 / April 16, 2007	Permit Expiration Date June 30, 2007
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) Mr. Steve Upton / Operator-Lab Tech / 501-362-3375 / 501-362-3338 Mr. Donald Knight / Water and Sewer Manager / 501-362-3422	Other Facility Data	
Name, Address of Responsible Official/Title/Phone and Fax Number Mr. Donald Knight / Water and Sewer Manager / 501-362-3422 1101 Front Street Heber Springs, AR 72543	Contacted Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Section C: Areas Evaluated During Inspection (S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

S	Permit	N	Flow Measurement	N	Operations & Maintenance	N	Sampling
N	Records/Reporting Eval.	N	Self-Monitoring Program	N	Sludge Handling/Disposal	N	Pollution Prevention
S	Facility Site Review	N	Compliance Schedules	N	Pretreatment	N	Multimedia
S	Effluent/Receiving Waters	N	Laboratory	N	Storm Water	N	Other: Effluent Limits

Section D: Summary of Findings/Comments (Attach additional sheets if necessary)

A reconnaissance level inspection was performed on April 16, 2007, at the request of Ms. Marysia Jastrzebski, the ADEQ NPDES Permit writer for this facility. The referenced permit is being renewed and significant changes have been requested by the permittee. Present were Bruce Kirkpatrick, ADEQ Inspector, Ms. Jastrzebski, Mr. Steve Upton, Mr. Donald Knight and r; Mr. Fred Oswald of Oswald Engineering, the Facility's Consulting Engineer. The facility site review revealed no problems with the maintenance and operation of the facility. No problems were noted during the visual inspection of the plant effluent and the receiving stream.

Name(s) and Signature(s) of Inspector(s): Bruce Kirkpatrick 	Agency/Office/Telephone/Fax ADEQ / Jasper / *70-446-6170 / 870-446-2181	Date June 15, 2007
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date