



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

Form Approved
OMB No. 2040-0003

NPDES Compliance Inspection Report

Section A: National Data System Coding

Transaction Code	NPDES	Yr/Mo/Day	Inspec. Type	Inspector	Fac. Type
1 N 2 5 3 A R 0 0 3 3 7 2 3 11 12 0 7 1 2 1 2 17 18 I 19 S 20 2					
Remarks					
Inspection Work Days	Facility Evaluation Rating	BI	QA	-----Reserved-----	
67 69	70 4	71 N	72 N	73	74 75 80

Section B: Facility Data

Name and Location of Facility Inspected (<i>For industrial users discharging to POTW, also include POTW name and NPDES permit number</i>) Milbank Industries 195 Prescolite Drive El Dorado, AR 71730	Entry Time/Date 9:55/12/12/07	Permit Effective Date
	Exit Time/Date 10:20/12/12/07	Permit Expiration Date
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) John Pepper/Pretreatment Coordinator/City of El Dorado	Other Facility Data	
Name, Address of Responsible Official/Title/Phone and Fax Number Tom Galbraith Milbank Industries 195 Precolite Drive El Dorado, AR 71730	Contacted Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

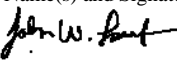
Section C: Areas Evaluated During Inspection

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

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

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

This inspection done as part of a Pretreatment Compliance Inspection of the City of El Dorado Wastewater Treatment Facility

Name(s) and Signature(s) of Inspector(s)  John W. Lamb	Agency/Office/Telephone/Fax AR Dept. of Environmental Quality/ El Dorado 870-862-0680, Fax 870-862-3509	Date 14 January 2008
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date

POTW Pretreatment Program

Industrial Site Visit

Name of Industry: Milbank Industries


Industry Contacts: Tom Galbraith

Type of Industry: Manufacture of electrical boxes from stamping and forming

Date of Visit: 12 December 2007

- | | | | |
|--|---|--|---|
| 1. Significant industrial user: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Determined |
| 2. Pretreatment equipment or procedures? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 3. Pretreatment equipment maintained and operational? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 4. Hazardous waste generated or stored? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> N/A |
| 5. Proper solid waste disposal? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 6. Solvent management/TTO control? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> N/A |
| 7. Suitable sampling location? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 8. Appropriate self-monitoring procedures / equipment? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> N/A |
| 9. Adequate spill prevention? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> N/A |
| 10. Industry familiar with limits and requirements? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |

Additional Comments: The POTW does all the sampling and analysis for this industry.

Visit Conducted By: John W. Lamb  Date: 14 January 2008