SEPA	IENTAL PROTECTION AGE	NCY	Form Approved OMB No. 2040-0003 Approval Expires 7-31-85
NPDES Complianc	,	on Report	
S	ection A: National Da	ata System Coding	
Transaction Code         NPDES           1         N         2         5         3         A         R         0         0         2         0         3	<b>0 3</b> 11 12		Inspec. TypeInspectorFac Type18I19S202
0 0 2 C	Remar	rks	
Inspection Work Days Facility Evaluation	Rating BI	QA	Reserved
67 69 70 N	71 <b>N</b>	72 N 73 74 75	80
	Section B: Fac	cility Data	
Name and Location of Facility Inspected (For industrial user also include POTW name and NPDES permit number)	s discharging to POTW,	, Entry Time /Date 0915 on 12-1-06	Permit Effective Date
	D .	0913 011 12-1-00	3-1-04
<u>Arkansas Surgical Hospital</u> - located at 5210 Northsh in North Little Rock, AR	ore Drive,	Exit Time/Date 1000 on 12-1-06	Permit Expiration Date
			12-31-07
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fa	ax Number(s)		Other Facility Data
Joe Lancaster – Chief Engineer / 501-748-8093			
Name, Address of Responsible Official/Title/Phone and Fax Lyndell H. Weaks / 501-748-8017 5201 Northshore Drive North Little Rock, AR 72118	Number	<u>Contacted</u> Yes No <b>x</b>	
	ction C: Areas Evaluat M = Marginal, U = 1	<b>ed During Inspection</b> Unsatisfactory, N = Not Evaluated)	
- Permit - Flow Measurem	ient -	Operations & Maintenance	Sampling
- Records/Reports - Self-Monitoring	Program -	Sludge Handling/Disposal	Pollution Prevention
- Facility Site Review - Compliance Sci	hedules Y	Pretreatment -	Multimedia
- Effluent/Receiving Waters - Laboratory	-	Storm Water -	Other:
Section D: Summary	of Findings/Comment	s (Attach additional sheets if necessar	y)
This new IU is a non categorical SIU. T and cleaning. There is no laundry servi time. No problems were found during t	ce or cafeteria.		e e
Name(s) and Signature(s) of Inspector(s)	Agency/Office/Tele	ephone/Fax	Date
Eric M. Fleming /	ADEQ / Little Rock	/ (501)-682-0659	12-1-06
Signature of Management QA Reviewer	Agency/Office/Pho	one and Fax Numbers	Date

# POTW Pretreatment Program

Industrial Site Visit

Na	me of Industry: <u>Arkansas Surgical Hospita</u>	al		
Inc	lustry Contacts: Lyndell H. Weaks / 501-	748-8017		
Ty	pe of Industry: <u>Medical facility</u>			
Da	te and time of visit: <u>12-1-06 @ 0915</u>			
1.	Significant industrial user:	<u> </u>	No	Not Determined
2.	Pretreatment equipment or procedures?	Yes	<u>x</u> No	N/A
3.	Pretreatment equipment maintained and operational?	Yes	No	<u>x</u> N/A
4.	Hazardous waste generated or stored?	Yes	<u>x</u> No	N/A
5.	Proper solid waste disposal?	<u>x</u> Yes	No	N/A
6.	Solvent management/TTO control?	Yes	No	<u>x</u> N/A
7.	Suitable sampling location?	<u>x</u> Yes	No	N/A
8.	Appropriate self-monitoring procedures / equipment?	<u>x</u> Yes	No	N/A
9.	Adequate spill prevention?	Yes	No	<u>x</u> N/A
10	. Industry familiar with limits and requirements?	Yes	<u> </u>	N/A
Ad	ditional Comments:			

This IU is a new non categorical SIU. Wastewater is generated from washing and cleaning. There is no laundry service or cafeteria. There are no pretreatment units in place at this time. No problems were found during this site visit. The facility needs to be more aware of the reporting requirements of their IU Permit. A file review found that bi-annual metals sampling was performed in a different month than is required. I also found that required NC response letters are not submitted in a timely manner.

Visit Conducted By:

SEPA UNITED STATES ENVIRON Washing	IMENTAL PROTECTIC	DN AGENCY								ON	1B No	5. 20	roved 40-00 es 7-3	
NPDES Compliand		ction	Repo	ort	1									
	Section A: Nation	nal Data S	ystem Cod	ding										
Transaction Code         NPDES           1         N         2         5         3         A         R         0         0         2         0         3	<b>0 3</b> 11	12 <b>0</b>	yr/ 6 1	/mo/d 2	lay <b>0</b>	1	17	Ins 18	pec. Ty	•	- i	oecto S	1	ac Type
0 0 2 C		Remarks												
Inspection Work Days Facility Evaluation	n Rating	BI	QA						Reserv	ed				
67 69 70 <b>N</b>	71	<b>N</b> 72	<b>N</b> 73			74	75							80
	Section	B: Facility	Data											
Name and Location of Facility Inspected (For industrial use also include POTW name and NPDES permit number)	ers discharging to H	POTW,	Entry Tiı 1015 on						Perr	nit Ef	fectiv	/e Da	ite	
		0	1013 011	12-1	-00					3-	1-04			
<u>Blue Beacon Truckwash -</u> located south of the Gallo in North Little Rock, AR	oway Exit on I-4	0,	Exit Tim 1045 on						Perr	nit Ex	rpirat	ion I	Date	
										12-3	31-07			
Name(s) of On-Site Representative(s)/Title(s)/Phone and H	Fax Number(s)							Ot	her Fac	cility I	Data			
Walter Nixon – Manager / 501-945-7023								1						
Name, Address of Responsible Official/Title/Phone and Fa Walter Nixon – Manager / 501-945-7023 P.O. Box 17923 North Little Rock, AR 72117	x Number		Yes <b>x</b>		acted No		-							
	ection C: Areas Ev ry, M = Marginal,					aluat	ted)							
Permit - Flow Measurer	ment	- Ope	erations & M	lainte	nance			-	Samp	oling				
- Records/Reports - Self-Monitoring	; Program	- Slu	dge Handlin	ng/Dis	posal			-	Pollu	tion F	reve	ntior	1	
- Facility Site Review - Compliance Se	chedules	Y Pr	etreatmen	t			-	-	Multi	imedi	a			
- Effluent/Receiving Waters - Laboratory			orm Water					-	Other	r:				
Section D: Summary	v of Findings/Com	iments (At	tach additio	onal	sheets	; if ne	ecessa	ary)						
This IU is a non categorical SIU. Wast commercial trucks, and their engines. for pH adjustment. Sediment and grit annually. There were no problems not	A large floo are disposed	r drain 1 of at a	acts as	a se	edin ial l	nen	tati	on	trap.	So	da	ash	is u	ised
Name(s) and Signature(s) of Inspector(s)	Agency/Office	e/Telephor	ne/Fax						Date	:				
Eric M. Fleming / Eric M. Fleming /														
	ADEQ / Little	Rock / (50	01)-682-06	559					12-1	-06				
	ADEQ / Little	Rock / (50	01)-682-06	559					12-1	-06				

## POTW Pretreatment Program

Industrial Site Visit

Na	me of Industry: <u>Blue Beacon Truckwash</u>			
Inc	lustry Contacts: <u>Walter Nixon – Manager</u>	/ 501-945-7023		
Ty	pe of Industry: <u>Commercial truckwash</u>			
Da	te and time of visit: <u>12-1-06 @ 1015</u>			
1.	Significant industrial user:	<u>x</u> Yes	No	Not Determined
2.	Pretreatment equipment or procedures?	<u> </u>	No	N/A
3.	Pretreatment equipment maintained and operational?	<u>x</u> Yes	No	N/A
4.	Hazardous waste generated or stored?	Yes	<u>x</u> No	N/A
5.	Proper solid waste disposal?	<u>x</u> Yes	No	N/A
6.	Solvent management/TTO control?	Yes	No	<u>x</u> N/A
7.	Suitable sampling location?	<u>x</u> Yes	No	N/A
8.	Appropriate self-monitoring procedures / equipment?	<u>x</u> Yes	No	N/A
9.	Adequate spill prevention?	<u>x</u> Yes	No	N/A
10	. Industry familiar with limits and requirements?	<u>x</u> Yes	No	N/A
Ad	ditional Comments:			

This IU is a non categorical SIU. Wastewater is generated from prewashing, washing, and rinsing of commercial trucks, and their engines. A large floor drain acts as a sedimentation trap. Soda ash is used for pH adjustment. Sediment and grit are disposed of at a commercial landfill. 300 tons are disposed of annually. There were no problems noted at the time of this inspection.

Visit Conducted By:

€EPA					Form Approved OMB No. 2040-0003
UNITED STATES ENVIRONM	ENTAL PR	OTE	CTION AGENCY		Approval Expires 7-31-85
	n, D.C. 2046	-			
NPDES Complian			Report		
	Section A: National		-		
Transaction Code NPDES			yr/mo/day	Insp	ec. Type Inspector Fac Type
1 N 2 5 3 A R 0 0 2 0 3		12 0 marks	<b>6 1 1 3 0</b> 17	18	P 19 S 20 1
0 0 2 C					
Inspection Work Days Facility Evaluation		1 1	QA	R	eserved
67 69 70 <b>N</b>	71 N	<b>N</b> 72	<b>N</b> 73 74 75		80
	Section B:	Facility I	Data		
Name and Location of Facility Inspected (For industrial users di include POTW name and NPDES permit number)	ischarging to POTW,	also	Entry Time /Date		Permit Effective Date
North Little Rock Wastewater Utility – located at 7400 Baucur	n Pike		0900 on 11-30-06		1-1-03
in North Little Rock, AR			Exit Time/Date		Permit Expiration Date
	• • • •		1100 on 12-1-06		12-31-08
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Nu Rick Roll – Superintendent of Operations / 501-945-7186 Ed Toland – Pretreatment Specialist / 501-945-7186 Mitch Foreman – Senior Industrial Technician / 501-945-7186	mber(s)			Othe	er Facility Data
Name, Address of Responsible Official/Title/Phone and Fax Nur	nber				
Gary Mills - Utility Manager / (501)-945-7186 7400 Baucum Pike North Little Rock, AR 72117			Contacted Yes No X		
	ection C: Areas Eval ory, M = Marginal, U		ring Inspection sfactory, N = Not Evaluated)		
S Permit N Flow Measurem	ent N	N Ope	erations & Maintenance	N	Sampling
N Records/Reports N Self-Monitorin		N Slu	dge Handling/Disposal	N	Pollution Prevention
N         Facility Site Review         N         Compliance Sch			F		Multimedia
N Effluent/Receiving Waters N Laboratory					Other:
	-		ach additional sheets if necessary		
See attached PCI fo	rm dated 1	1-30-(	be for further detai	IS.	
Name(s) and Signature(s) of Inspector(s)	Agency/Office/Te	elephone/	Fax		Date
Eric M. Fleming /	ADEQ / Little F	Rock / 501	1-682-0659		11-30-06
Signature of Reviewer	Agency/Office/P	hone and	l Fax Numbers		Date

EPA Form 3560-3 (Rev. 9-94) Previous editions are obsolete.

#### ARKANSAS DEPARTMENT OF ENVIRONMENTA

#### PRETREATMENT COMPLIANCE INSPECTION (PCI) REPORT

Name of Municipality: <u>North Little Rock Wastewater Utility</u>
AFIN Number: <u>60-00274</u>
NPDES Permit Number(s): _AR0020303, AR0020320,AR0038288
Program Tracked under NPDES Permit Number: <u>AR0020303</u>
Fact Sheet Preparation Date:
Date of Last <b>PCI</b> /Audit: October 26, 27, 2005
Date of Last Annual Report: March 1, 2006
Name of Inspector: Eric M. Fleming
Date PCI Performed: November 30, 2006 and December 1, 2006
Name, Title, and Telephone Number of Facility Representative: Rick Roll, Superintendent of Operations - (501)-945- 7186
Name and Title of Other Participants:
Ed Toland, Pretreatment Specialist, Mitch Foreman Senior Industrial Technician
Number of IUs Visited: 2

Name(s) of IUs Visited: Arkansas Surgical Hospital, Blue Beacon Truckwash

AN IU SITE VISIT FORM SHOULD BE COMPLETED FOR EACH IU VISITED

Form approved July 1989

#### A. INDUSTRIAL USER SURVEY

1.	List any Significant Industrial Users (SIUs) which have been added or deleted from the program since the last audit or inspection. Deluxe Media Services will close in March 2007.
2.	Has ADEQ or EPA been notified of these changes? yes
3.	HAS THE INDUSTRIAL USER SURVEY BEEN KEPT UPDATED? yes
4.	What procedures are being used to update the IU Survey? Water usage records, and new sewer connections
5.	Total number of Significant Industrial Users, according to the definition used by the POTW. (This number must be greater than or equal to the answer to question 6) <u>16</u>
6.	Number of Categorical Industrial Users: 2
7.	How does the POTW determine the appropriate categorical standards to apply to an IU? <u>SIC codes, Federal Register, 40 CFR Regulations</u>
8.	List all categorical IUs discharging under the approved (such

8. List all categorical IUs discharging under the approved (such program. Include the name of the IU, the regulatory category as Metal Finishing), and the regulated process (phosphating, zinc plating, etc.) Additional listings can be made in the comments section if necessary.

Name of IU: Koppers	Category: Timber Products	Regulated Process: Wood preservation
	SIC 2491 (a)(b)	Pressure treatment of raw wood products
Deluxe Media Services, Inc	Metal Finishing	Electroplating
	SIC 3471-12	

#### B. LOCAL LIMITS

1.	IS THE PO BY ADEQ O		CAL LIMITS WHICH	HAVE BEEN APPE	ROVED
2.		any apparent p noted at this	roblems with the time.	local limits.	
3.	sludge per requirement	rformed by the nts of the app	scans of POTW ir POTW? Does this roved program (as t III of the NPDE	s fulfill the s described in	ent, and
			Requireme	ent in	
Poll	utant:	Frequency:	Permit:	Program:	Comments:
Meta Ir	ls: fluent:	l qtr	l qtr	n/a	
Εf	fluent:	1 qtr	1 qtr	n/a	
	Sludge:	1 qtr	1 qtr	n/a	
-	nics: fluent:	l yr	l yr	n/a	
Εf	fluent:	1 yr	1 yr	n/a	
	Sludge:	1 yr	1 yr	n/a	

4. Have there been any inhibitions or upsets at the POTW (since the last PCI of Audit) which were believed to be caused by industrial discharges? If so, describe the action taken by the City to ensure that the incident would not recur. Were these actions effective?

There were no inhibitions or upsets in the past year.

#### C. INDUSTRIAL USER CONTROL MECHANISM

- 1. Is the POTW using the type of control mechanism (permit, agreement, etc.) required by the approved program? yes
- How many IU permits (or other control documents) have been issued? 16
- 3. DO ALL <u>SIGNIFICANT</u> <u>IUS</u> HAVE CURRENT (UNEXPIRED) CONTROL DOCUMENTS? IF NOT, LIST ALL UNPERMITTED SIUS, THE DATE OF EXPIRATION OF THEIR PREVIOUS PERMIT (IF APPLICABLE), AND THE REASON FOR DELAY IN ISSUING THE REQUIRED DOCUMENT.

	yes
4.	Does the control document contain the following items?
	An expiration date: _yes
	Discharge limitations: yes
	If the program requires self-monitoring by the IUs, do the Permits contain:
	IU self-monitoring requirements: yes
	IU reporting requirements: yes
5.	Indicate which of the following recommended standard conditions are contained in the control documents:
	Sample location: Yes
	Type of sample: Yes
	Monitoring frequency: yes
	Bypass prohibition: yes
	Right of entry: yes
	Nontransferability: yes
	Revocation clause: yes
	Penalty Provisions: yes
	Slug load notification:yesNotification of process change:yes
	Yee

# D. MONITORING OF IUS BY POTW

1.	Indicate current inspe requirement below:	ection and sampling frequenc	y and program
		Current frequency:	Program Requirement:
	Sampling:		
	categorical IUs	twice/month	Once/month
	other SIUs Inspection:	twice/month	Once/year
	categorical IUs	Once/year	Once/year
	other SIUs	Once/year	Once/year
2.	HAS EACH SIU BEEN INSE REQUIRED BY THE APPROV	PECTED AND SAMPLED AT THE FR VED PROGRAM? <u>NO</u>	EQUENCY
3.	Are inspections annour	nced or unannounced?	
	Mostly unannounced ~		
4.	Are records kept of ea	ach inspection?	res
5.	Does the inspection re the following:	eport contain an adequate de	scription of
	Date and time of inspe	ection: yes	
	Officials present:	yes	
	Inspection of chemical	storage areas: <u>yes</u>	
	Description of regulat discharge location of	ted processes, categorical w these waste streams:	aste streams, and ves
	Inspection of the pret	reatment facilities:	res
	Review of self-monitor	ring records: yes	
	Observation of IU self	-monitoring procedures:	yes
	Verification that appr	coved analytical techniques	are used: yes
	Verification of IU flo	w measurement (where requir	ed): yes
6.	Overall adequacy of in	aspection documentation:	yes

7. DOES THE POTW SAMPLE IUS FOR ALL POLLUTANTS REGULATED IN THEIR PERMITS? (IT IS NOT NECESSARY TO SAMPLE FOR ALL **POLLUTANTS EVERY TIME, BUT IT MUST BE DONE PERIODICALLY).** yes

- 8. Are analyses performed in accordance with EPA-approved methods (40 CFR 136)? yes
- 9. Are sampling and flow monitoring equipment properly maintained? yes
- 10. Is the POTW keeping proper field notes and chain of custody forms? \_yes
- 11. Is the sampling location representative of the discharge to the collection system? yes
- 12. Are sampling locations identified in POTW records? yes
- 13. Are sampling services available in an emergency? yes
- 14. What are the POTW's procedures for tracking receipt and review of IU reports, such as BMR's, semi-annual reports, progress reports, bypass reports, and self-monitoring reports? Dates for all reports are listed and tracked on computer
- 15. ARE SELF-MONITORING REPORTS REVIEWED TO VERIFY THAT ANALYSES WERE PERFORMED FOR ALL REGULATED PARAMETERS, AND TO EVALUATE COMPLIANCE WITH EFFLUENT LIMITS? Yes
- 16. IF VIOLATIONS ARE FOUND IN REPORTS, DOES THE POTW RESPOND TO ALL VIOLATIONS? yes

17. What are the POTW's procedures for following up violations?

See the POTW ERP for details.

18. HAS THE POTW REVIEWED BMRS FOR COMPLIANCE WITH 40 CFR
403.12(b)?: yes

Review a Baseline Monitoring Report from the POTW's file, and indicate which of the following items can be identified in the BMR: Name and address: yes \_\_\_\_\_ Other environmental permits held: yes Description of operations: \_yes Process flow diagrams: yes Flow measurements: yes Measurements of regulated pollutants: yes Certification of compliance by the IU: yes Compliance schedule (if needed): yes \_\_\_\_\_ 19. Additional comments on the POTW's inspection and sampling procedures: None

# E. Enforcement

	STANDARDS AN	ND REQUIREMENTS?	No	
		e POTW respond to the N ERP for details Mitations:	e following violati	ons?
	Late reports	;:		
	Unpermitted	discharges:		
	Slug loads c	or spills:		
			L USER (DATED AUGUS	/
	1985)? yes			
	1985)? yes List the SIU Violator wit enforcement	Js which have met the thin the last 12 mon action which has be n is required, please	e criteria for Sign ths, and describe t en taken by the POT	ificant he W. If
	1985)? yes List the SIU Violator wit enforcement construction has been pla	Js which have met the thin the last 12 mon action which has be h is required, pleas aced on an enforceab	e criteria for Sign ths, and describe t en taken by the POT e indicate whether le compliance sched	ificant he W. If the IU
	1985)? yes List the SIU Violator wit enforcement construction has been pla	Js which have met the thin the last 12 mon action which has been i is required, please	e criteria for Sign ths, and describe t en taken by the POT e indicate whether le compliance sched	ificant he W. If the IU
	1985)? yes List the SIU Violator wit enforcement construction has been pla	Is which have met the chin the last 12 mon action which has be h is required, pleas aced on an enforceab violators noted in t	e criteria for Sign ths, and describe t en taken by the POT e indicate whether le compliance sched he past year.	ificant he W. If the IU ule.
	1985)? yes List the SIU Violator wit enforcement construction has been pla significant v	Js which have met the chin the last 12 mon- action which has been is required, please aced on an enforceab violators noted in t Type of	e criteria for Sign ths, and describe t en taken by the POT e indicate whether le compliance sched he past year. Enforcement	ificant he W. If the IU ule. Compliance
	1985)? yes List the SIU Violator wit enforcement construction has been pla significant v	Js which have met the chin the last 12 mon- action which has been is required, please aced on an enforceab violators noted in t Type of	e criteria for Sign ths, and describe t en taken by the POT e indicate whether le compliance sched he past year. Enforcement	ificant he W. If the IU ule. Compliance
-	1985)? yes List the SIU Violator wit enforcement construction has been pla significant v	Js which have met the chin the last 12 mon- action which has been is required, please aced on an enforceab violators noted in t Type of	e criteria for Sign ths, and describe t en taken by the POT e indicate whether le compliance sched he past year. Enforcement	ificant he W. If the IU ule. Complianc
·	1985)? yes List the SIU Violator wit enforcement construction has been pla significant v	Js which have met the chin the last 12 mon- action which has been is required, please aced on an enforceab violators noted in t Type of	e criteria for Sign ths, and describe t en taken by the POT e indicate whether le compliance sched he past year. Enforcement	ificant he W. If the IU ule. Complianc

5. Comments on the POTW's enforcement procedures:

	See below.						
F.	POTW'S PRETREATMENT ORGANIZATION STRUCTURE						
1.	Is the program structure essentially the same as that presented in the approved pretreatment program? yes						
2.	Are staffing levels adequate?yes						
3.	Are the responsible officials familiar with the approved program?yes						
G.	MULTIJURISDICTIONAL ISSUES						
1.	List any IUs which are located outside of the jurisdictional area of the POTW: none						
2.	Does the POTW have adequate procedures for controlling IUs located outside its jurisdictional area? yes						
3.	Does the POTW have copies of permits for IUs in other cities?						
4.	Have any of these IUs met the criteria for Significant Violator? If so, have they been published by the POTW in its annual list of Significant Violators? <u>n/a</u>						
5.	Comments on multijurisdictional issues: <u>none</u>						

#### H. EVALUATION AND COMMENTS

Several small items were noted during this inspection. When a				
pH violation is found at an IU, the ERP states that the IU				
will be called and notified of the non compliance pH. I found				
that at times the facility was called but a "message to call				
me back" was listed on the report. It never stated that a				
return call was made or that the IU was actually notified of				
the non compliance. This was noted during the file review of				
Blue Beacon.				

I found the following problems during a review of

The Arkansas Surgical Hospital files. Wording may need to				
be changed in the permits regarding the condition that flow				
monitoring equipment be calibrated at least bi-annually to				
ensure accuracy to 10%. A lot of the IU's use the CAW water				
meter as there flow measurement device. If the IU does this				
they cannot meet the permit condition that the meter be				
calibrated bi-annually. I found that the annual inspection at				
Arkansas Surgical Hospital was not performed in the year from				
September 1, 2005 to September 1, 2006. A BOD sample was				
analyzed on 10-23-06. A review of the benchsheets revealed that				
the sample was not checked for chlorine, nor was the sample				
seeded. The facility was to perform their bi-annual metals				
sampling in February. The sample was collected on March 1, 2006.				
On March 14, 2006, the POTW sent the IU a non compliance letter				
concerning the non submittal of the bi-annual metals sampling.				
The IU was to have responded in 15 days. A response was never				
received.				

Other files that were reviewed were Deluxe Media Services, Central Arkansas Veterans Hospital, and St. Vincents Medical Center North.

## PRETREATMENT COMPLIANCE INSPECTION

IU SITE VISIT FORM

Name of Industry: Blue Beacon Truckwash					
POTW Name: Faulkner Lake POTW					
Industry Contacts: Walter Nixon, Manager					
Date and Time of Visit: 12-1-06 @1015					
Description of Manufacturing Process: Truckwash					
Sources of Process Wastewater: Washing and rinsing operations, of truck exteriors and engines.					
Categorical Industry? no					
Basis for Limits:n/a					
Point of Application: <u>n/a</u>					
Description of Pretreatment Equipment and Procedures: Sedimentation traps, and pH adjustment.					
Spill Prevention and Solvent Management Procedures: Chemicals are located in a chemical storage building.					

Sampling Location and Equipment: A sampling port and a refrigerated composite sampler.

#### PRETREATMENT COMPLIANCE INSPECTION

IU SITE VISIT FORM

Name of Industry: Arkansas Surgical Hospital POTW Name: White Oak Bayou POTW Industry Contacts: Joe Lancaster - Chi<u>ef Engineer</u> Date and Time of Visit: 12-1-06 @ 0915 Description of Manufacturing Process: Medical facility Sources of Process Wastewater: Washing and cleaning operations. Categorical Industry? no

Basis for Limits: n/a

Point of Application: n/a

Description of Pretreatment Equipment and Procedures: There is no pretreatment equipment at the facility.

Spill Prevention and Solvent Management Procedures: n/a

Sampling Location and Equipment:

A sampling building with a refrigerated sampler are on site.

# PPETS CODE SHEET

# PRETREATMENT COMPLIANCE INSPECTION (PCI)

CODE

INSPECTOR'S NAME:	Eric M. Fleming	
NAME OF FACILITY:	North Little Rock Wastewater Utility	_
PERMIT NUMBER USED TO TRACK PROGRAM:	AR0020303	NPID
DATE OF PCI:	11-30-06 to 12-1-06	DTIA

# PPETS WENDB DATA ELEMENTS

NUMBER OF SIGNIFICANT IUS (SIUS):	16	SIUS
NUMBER OF CATEGORICAL IUS:	2	CIUS
SIUS NOT SAMPLED OR INSPECTED BY POTW:	1	NOIN
SIUS WITHOUT CONTROL MECHANISM:	0	NOCM
SIUS IN SIGNIFICANT NONCOMPLIANCE WITH STANDARDS OR REPORTING:	0	PSNC
SIUS IN SIGNIFICANT NONCOMPLIANCE WITH SELF-MONITORING REQUIREMENTS:	0	MSNC
SIUS IN SIGNIFICANT NONCOMPLIANCE WITH SELF-MONITORING AND NOT	0	
INSPECTED OR SAMPLED BY POTW:		SNIN

L QUALITY