**SEPA** 

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

Washington, D.C. 20460

# **NPDES Compliance Inspection Report**

Form Approved OMB No. 2040-0003 Approval Expires 7-31-85

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Section A: National Data System Coding																							
1	Transaction Code											i i											
 	Remarks     A   F   I   N																						
	Inspection Work Days Facility Evaluation Rating BI QAReserved																						
	67 2 69 70 3 71 N 72 N 73 74 75												80				0						
	Section B: Facility Data																						
Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number)  Entry Time /Date 1030 on 8/24/06												Permit Effective Date April 1, 2004											
Hot Springs Power Company, LLC 410 Henderson Road off of Hwy. 270 West of Hot Springs, AR  Exit Time/Date 1440 on 8/24/06												Permit Expiration Date March 31, 2009											
Nan	ne(s) of On-Site	Representa	tive(s)/Tit	le(s)/I	Phone an	nd Fax	Number	r(s)										Othe	er Facilit	ty Data			
Da	vid Mailoux –	Operation	ıs Mgr. –	<u>501</u> -	<u>467-3</u> 2	32 <u>ex</u> t	104																
	ne, Address of F					l Fax N	lumber							_									
410	Henderson I	Road		- <b>T</b> U/'	-3434							Ves		Contac									
Ma	Malvern, Arkansas 72104  Yes X No L																						
Section C: Areas Evaluated During Inspection  (S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)																							
S	Permit			U	Flow M	<b>1</b> easur	ement			M	Оре	erations &	& M	Iainte	enance	e	N		CSO/SSO				
S	Records/Rep	orts		S	Self-M	Ionitor	ring Pro	gram		S Sludge Handling/Disposal N						<b>Pollution Prevention</b>							
S	Facility Site	Review		S	Comp	liance	Schedu	les		N	Pretreatment				N		Multimedia						
S	Effluent/Rec	eiving Wat	ers	U	Labor	atory				N	N Storm Water						M	[	Other:	DMR'	s		
Section D: Summary of Findings/Comments (Attach additional sheets if necessary)																							
Permittee is not performing duplicate analysis on pH.  Permittee is not performing self checks on the flow measuring device to ensure its accuracy.  Permittee has not developed written SOP's for in house labs analysis and sampling.  DMR's were reviewed for the last quarter.																							
Name(s) and Signature(s) Agency/Office/Telephone/Fax Date																							
1/0 24																	5/31/06						
21111	Jim McSwain ADEQ / Hot Springs / 501-520-0541 / 501-520- 5978 5/31/06																						
Signature of Reviewer						A	Agency/Office/Phone and Fax Numbers									Date							

	PERMIT NO. AR0049611						
SECTION A - PERMIT VERIFICATION							
PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS DETAILS:  B S M U NA (	FURTHER EXPLANATION ATTACHED No						
1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE	■Y□N □NA						
2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES	□Y□N ■NA						
3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT	■Y□N □NA						
4. ALL DISCHARGES ARE PERMITTED	■Y□N □NA						
SECTION B - RECORDKEEPING AND REPORTING EVALUATION							
RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT.  DETAILS:   S M U NA (F	FURTHER EXPLANATION ATTACHED <b>No</b> )						
1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRs.	■Y□N □NA						
2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE.	■S □M □U □NA						
a) DATES, TIME(S) AND LOCATION(S) OF SAMPLING	■ Y□N □NA						
b) NAME OF INDIVIDUAL PERFORMING SAMPLING	■Y□N□N/A						
c) ANALYTICAL METHODS AND TECHNIQUES.	■Y□N □NA						
d) RESULTS OF ANALYSES AND CALIBRATIONS.	■Y□N □NA						
e) DATES AND TIMES OF ANALYSES.	■Y □N □NA						
f) NAME OF PERSON(S) PERFORMING ANALYSES.	■Y□N □NA						
3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE.	■S □M □U □NA						
4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR.	■S □M □U □NE						
5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA.	■Y□N□NA						
SECTION C - OPERATIONS AND MAINTENANCE							
TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED. □ S ■ M □ U □ NA (FU DETAILS:	RTHER EXPLANATION ATTACHED <b>NO</b> )						
1. TREATMENT UNITS PROPERLY OPERATED.	■S□M□U □NA						
2. TREATMENT UNITS PROPERLY MAINTAINED	■S □M □U □NA						
3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED.	□S□M□U ■NA						
4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE.	■S□M□U □NA						
5. ALL NEEDED TREATMENT UNITS IN SERVICE.	■S□M□U □NA						
6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED.	■S□M□U □NA						
7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED.	■S□M□U □NE						
8. OPERATION AND MAINTENANCE MANUAL AVAILABLE.	■Y□N□NA						
STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED.	□Y■N□NA						
PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED.	■Y□N□NE						

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SECTION C - OPERATIONS AND MAINTENANCE (CONT'D)	
9. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR? IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED? HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS?	□ Y ■ N □ NA □ Y □ N ■ NA □ Y □ N ■ NA
10.HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT? IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT?	□ Y ■ N □ NA □ Y □ N ■ NA
SECTION D - SELF-MONITORING	
PERMITTEE SELF-MONITORING MEETS PERMIT REQUIREMENTS.	ON ATTACHED <b>No</b> ).
1. SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT.	■Y □N □NA
2. LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES.	■Y □N □NA
3. FLOW PROPORTIONED SAMPLES OBTAINED WHEN REQUIRED BY PERMIT.	■Y □N □NA
4. SAMPLING AND ANALYSES COMPLETED ON PARAMETERS SPECIFIED IN PERMIT.	■Y □N □NA
5. SAMPLING AND ANALYSES PERFORMED AT FREQUENCY SPECIFIED IN PERMIT.	■Y □N □NA
6. SAMPLE COLLECTION PROCEDURES ADEQUATE	■Y □N □NA
a) SAMPLES REFRIGERATED DURING COMPOSITING.	■Y □N □NA
b) PROPER PRESERVATION TECHNIQUES USED.	■Y □N □NA
c) CONTAINERS AND SAMPLE HOLDING TIMES CONFORM TO 40 CFR 136	■Y □N □NA
7. IF MONITORING AND ANALYSES ARE PERFORMED MORE OFTEN THAN REQUIRED BY PERMIT, ARE THE RESULTS REPORTED IN PERMITTEE'S SELF-MONITORING REPORT?	□Y □N ■NA
SECTION E - FLOW MEASUREMENT	
PERMITTEE FLOW MEASUREMENT MEETS PERMIT REQUIREMENTS. ☐ S ☐ M ■ U ☐ NA (FURTIDETAILS:	HER EXPLANATION ATTACHED <b>No</b> )
PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED.  TYPE OF DEVICE <u>V notch weir</u>	■Y □N □NA
2. FLOW MEASURED AT EACH OUTFALL AS REQUIRED.	■Y □N □NA
3. SECONDARY INSTRUMENTS (TOTALIZERS, RECORDERS, ETC.) PROPERLY OPERATED AND MAINTAINED.	■Y □N □NA
4. CALIBRATION FREQUENCY ADEQUATE. (DATE OF LAST CALIBRATION_) RECORDS MAINTAINED OF CALIBRATION PROCEDURES. CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE.  Permittee is not performing self checks.	■Y □N □NA ■Y □N □NE □Y ■N □NA
5. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE.	■Y □N □NA
6. HEAD MEASURED AT PROPER LOCATION.	■Y □N □NA
7. FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES.	■Y □N □NA
SECTION F – LABORATORY	
PERMITTEE LABORATORY PROCEDURES MEET PERMIT REQUIREMENTS. □ S □ M ■ U □ NA (FURT DETAILS:	THER EXPLANATION ATTACHED No
1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(b) FOR SLUDGES)	■Y □N □NA

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SECTION F – LABORATORY (CONT'D)											
2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED ☐ Y ☐ N ■ NA											
3. SATISFACTORY C	■S □ M □ U □ NA										
4. QUALITY CONTRO	■S □ M □ U □ NA										
5. DUPLICATE SAMPLES ARE ANALYZED. 10 % OF THE TIME. No duplicates for pH. □ Y ■ N □ NA											
6. SPIKED SAMPLES ARE ANALYZED. 10 % OF THE TIME.											
7. COMMERCIAL LAE	■Y□I	■Y□N □NA									
LAB NAME Arkansas Analytical LAB ADDRESS Little Rock, Arkansas PARAMETERS PERFORMED TSS, Oil and Grease											
SECTION G - EFFLUENT/RECEIVING WATERS OBSERVATIONS.   S  M U NA (FURTHER EXPLANATION ATTACHED No ).											
Based on visual observations only.											
OUTFALL NO.	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOAT SOL.	COLOR	OTHER				
001	None	None	None	None	None	Clear					
01A	None	None	None	None	None	Clear					
01B	01B None None		None	None	None	Clear					
Comments:											
SECTION H - SLUDGE DISPOSAL											
SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS. □ S □ M □ U ■ NA (FURTHER EXPLANATION ATTACHED No ).  DETAILS: See Attachment Page 7 of 7.											
1. SLUDGE MANAGE	MENT ADEQUATE TO	O MAINTAIN EFFLUEN	IT QUALITY.			□S□M□U	J ■ NA				
2. SLUDGE RECORD	OS MAINTAINED AS R	EQUIRED BY 40 CFR :	503.			□S□M□l	J ■ NA				
3. FOR LAND APPLIE	ED SLUDGE, TYPE OF	LAND APPLIED TO:	N/A (e.g., FOREST,	AGRICULTURAL, PUB	LIC CONTACT SITE)						
SECTION I - SAMPLING INSPECTION PROCEDURES (FURTHER EXPLANATION ATTACHED No.).											
1. SAMPLES OBTAINED THIS INSPECTION. ■ Y □ N □ NA											
2. TYPE OF SAMPLE OBTAINED N/A											
GRAB X COMPOSITE SAMPLE METHOD FREQUENCY											
3. SAMPLES PRESERVED. ■Y□N□NA											
4. FLOW PROPORTIONED SAMPLES OBTAINED. □ Y □ N ■ NA											
5. SAMPLE OBTAINE	ED FROM FACILITY'S	SAMPLING DEVICE.				■Y□N	N 🗆 NA				
6. SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE. ■ Y □ N □ NA											
7. SAMPLE SPLIT WITH PERMITTEE. □ Y □ N ■ NA											
8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED.											
9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT. ■ Y □ N □ NA											

Attachment # 1

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#### **DMR Calculation Check**

Reporting Period: from  $\underline{06}$   $\underline{07}$   $\underline{01}$  to  $\underline{06}$   $\underline{07}$   $\underline{31}$ 

year month day year month day

Parameter Checked: TSS 1/7 Grab

#### **Quantity**

Mo. Avg.mg/L7-dayMax.Reported Value:5.0 mg/L9.2 mg/LCalculated Value:4.96 mg/L9.2 mg/LPermit Value:30 mg/L100 mg/L

If calculated value does not equal reported value, explain:

## Hot Springs Power, LLC

410 Henderson Road, Malvern, Arkansas

Phone: 501-467-3232

### - CERTIFICATE OF ANALYSIS -

Our Lab#: 2006-2349

Your Sample ID: Hot Springs Power 001

Sample Type: Report Date: 05-Sep-06

<u>TSS</u> Totalsuspendedsolids mg/L 8/30/2006 1.00 Oil & Grease Oil and Grease 8/25/2006 1.4 mg/L < Field pH SU 8.77 8/24/2006 Water temperature 30.0 °C 8/24/2006