



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

NPDES Compliance Inspection Report

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

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"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 3 <input type="checkbox"/> 9 <input type="checkbox"/> 7 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 0 <input type="checkbox"/> 6 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> C <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"/> 0 <input type="checkbox"/> 4 <input type="checkbox"/> - <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 5 <input type="checkbox"/> 5 <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"/> 3 <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 75 <input type="checkbox"/> <input type="checkbox"/> <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) City of Rogers Wastewater Treatment Plant 4300 S Rainbow Road Rogers, AR 72757	Entry Time /Date 9:00 a.m./12-13-06	Permit Effective Date 11-1-2006
	Exit Time/Date 4:30 p.m./12-13-06	Permit Expiration Date 2-28-2011
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) Mike Lawrence/ Plant Manager/479-273-7378/479/273-7627 Louanne Diffin/Environmental Services Coordinator/479-273-7378/479-273-7627	Other Facility Data Effluent Parshall Flume GPS outfall OO1: N36-18-13.1 W094-12-51.3	
Name, Address of Responsible Official/Title/Phone and Fax Number McAlister/Water and Wastewater Superintendent/479-273-7378/479/273-7627 City of Rogers P.O. Box 338 Rogers, AR 72757	Tom 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)

<input type="checkbox"/> S	Permit	<input type="checkbox"/> U	Flow Measurement	<input type="checkbox"/> S	Operations & Maintenance	<input type="checkbox"/> S	Sampling
<input type="checkbox"/> S	Records/Reports	<input type="checkbox"/> M	Self-Monitoring Program	<input type="checkbox"/> S	Sludge Handling/Disposal	<input type="checkbox"/> N	Pollution Prevention
<input type="checkbox"/> S	Facility Site Review	<input type="checkbox"/> N	Compliance Schedules	<input type="checkbox"/> N	Pretreatment	<input type="checkbox"/> N	Multimedia
<input type="checkbox"/> S	Effluent/Receiving Waters	<input type="checkbox"/> S	Laboratory	<input type="checkbox"/> N	Storm Water	<input type="checkbox"/> S	Other: Effluent Limits

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

Discharge monitoring reports for September, October, and November of 2006 were reviewed for Outfall 001. Discharge monitoring report and related data for November was reviewed for Outfall 001. The facility was within their limits for discharge limitations and monitoring requirements. Calibrations checks were not being calculated correctly. Repeat violation.

Name(s) and Signature(s) of Inspector(s) Alison West 	Agency/Office/Telephone/Fax Arkansas Dept. of Environmental Quality/ Springdale/501-682-0744	Date January 4, 2007
John Fazio	Arkansas Dept. of Environmental Quality/ Springdale/501-682-0744	
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date

PERMIT NO.: AR0043397

SECTION A - PERMIT VERIFICATIONPERMIT SATISFACTORILY ADDRESSES OBSERVATIONS
DETAILS: 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. S M U NA (FURTHER EXPLANATION ATTACHED No)
DETAILS:

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 NA

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 NA3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE. **Contract Laboratory** 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.
DETAILS: S M U NA (FURTHER EXPLANATION ATTACHED No)

1. TREATMENT UNITS PROPERLY OPERATED.

 S M U NA

2. TREATMENT UNITS PROPERLY MAINTAINED.

 S M U NA3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED. **2 Generators, 3 EQ Basins** S M U NA4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE. **Wonderware/SCADA Computer Program** S M U NA

5. ALL NEEDED TREATMENT UNITS IN SERVICE.

 S M U NA6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED. **2-IV's, 4-III's, 1-II, 4-I's** S M U NA7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED. **(Non 92-500)** 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

PERMIT NO.: AR0043397

SECTION C - OPERATIONS AND MAINTENANCE (CONT'D)

9. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR? Y N NA
 IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED? Y N NA
 HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS? Y N NA
10. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT? Y N NA
 IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT? Y N NA

SECTION D - SAMPLING

PERMITTEE Sampling MEETS PERMIT REQUIREMENTS. S M U NA (FURTHER EXPLANATION ATTACHED No).
 DETAILS: **Outfall 001**

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 (FURTHER EXPLANATION ATTACHED No)
 DETAILS: Outfall 001. Flow calibration checks were not being calculated correctly.

1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED. Y N NA
 TYPE OF DEVICE 2 Foot Parshall Flume
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 (4-21-06) **Ultra Sonic Transducer** Y N NA
 RECORDS MAINTAINED OF CALIBRATION PROCEDURES. Y N NA
 CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE. 1/Week Y N NA
5. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE. **Minor 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 (FURTHER EXPLANATION ATTACHED No)
 DETAILS:

1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(b) FOR SLUDGES) Y N NA

PERMIT NO.: AR0043397

SECTION C - OPERATIONS AND MAINTENANCE (CONT'D)

9. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR? Y N NA
 IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED? Y N NA
 HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS? Y N NA
10. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT? Y N NA
 IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT? Y N NA

SECTION D - SAMPLING

PERMITTEE Sampling MEETS PERMIT REQUIREMENTS. S M U NA (FURTHER EXPLANATION ATTACHED No).
 DETAILS: **Outfall 002**

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 (FURTHER EXPLANATION ATTACHED No)
 DETAILS: **Outfall 002**

1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED. Y N NA
 TYPE OF DEVICE **No Manual Flow Device**
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 (**10-3-06**) Y N NA
 RECORDS MAINTAINED OF CALIBRATION PROCEDURES. Y N NA
 CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE. **N/A, No Manual Flow Device** 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 (FURTHER EXPLANATION ATTACHED No)
 DETAILS:

1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(b) FOR SLUDGES) Y N NA

PERMIT NO.: AR0043397

SECTION F - LABORATORY (CONT'D)

- 2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED Y N NA
- 3. SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT. S M U NA
- 4. QUALITY CONTROL PROCEDURES ADEQUATE. S M U NA
- 5. DUPLICATE SAMPLES ARE ANALYZED, 10-100 % OF THE TIME (except for TRC, D.O. and pH) Y N NA
- 6. SPIKED SAMPLES ARE ANALYZED, 10-100 % OF THE TIME. Y N NA
- 7. COMMERCIAL LABORATORY USED. Y N NA

LAB NAME LNS Environmental Services Arkansas Analytical
 LAB ADDRESS 903 N Browser Road, Suite 230 Richadson, TX 75081 11701 530 Building 1, Ste. 115 Little Rock, AR 72209
 PARAMETERS PERFORMED Sludge Metals, PCB's, and Soil Analysis Biomonitoring

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	Trace	None	Clear	

Comments: Outfall OO2 had no discharge at the time of inspection.

SECTION H - SLUDGE DISPOSAL

SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS. S M U NA (FURTHER EXPLANATION ATTACHED No).

DETAILS:

- 1. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY. S M U NA
- 2. SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503. S M U NA
- 3. FOR LAND APPLIED SLUDGE, TYPE OF LAND APPLIED TO: Agriculture (e.g., FOREST, AGRICULTURAL, PUBLIC 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 _____ COMPOSITE SAMPLE _____ METHOD _____ FREQUENCY _____
- 3. SAMPLES PRESERVED. Y N NA
- 4. FLOW PROPORTIONED SAMPLES OBTAINED. Y N NA
- 5. SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE. Y 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. Y N NA
- 9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT. Y N NA

FLOW CALCULATION SHEET

Field Data: Date 12-13-06 Time 10:10 a.m.

Head in Inches 16.5" = 1.375 ft

Type & Size of Primary Flow Measurement Device

2 Foot Parshall Flume

Name & Model of Secondary Flow Measurement Device

Ultrasonic Transducer read by an Allen Bradley Program Logic Controller with Wonder Ware Softworks

Recorded Flow at date & time listed above 8.75 MGD

Flows are calculated from flow charts taken from the ISCO Open Channel Flow Measurement Handbook-5th Edition

$$\frac{8.75 - 8.422}{8.422} = .0389$$

$$\% \text{ error} = \frac{(\text{recorded value} - \text{calculated value})}{\text{calculated value}} \times 100$$

$$\% \text{ error} = \frac{.0389}{1} \times 100$$

$$\% \text{ error} = 3.89$$

<10% error, so OK

Attachment #2

AR0043397

DMR Calculation Check

Reporting Period: From 06 11 01 To 06 11 31
Year Month Day Year Month Day

Parameter Checked: Fecal Coliform

	Loading Mass Mo. Avg. -lbs/ day	Avg.-mg/l	Concentration Monthly 7-day Avg. -mg/l
Reported Value:	-	26	34.8
Calculated Value:	-	26	34.8
Permit Value:	-	200	400

If calculated value does not equal reported value, explain:

ADEQ

ARKANSAS
Department of Environmental Quality

January 5, 2007

Tom McAlister, Water and Wastewater Superintendent
City of Rogers
P.O. Box 338
Rogers, AR 72757

RE: AFIN: 04-00155

NPDES Permit No.: AR0043397

Dear Mr. McAlister:

On December 13, 2006, John Fazio, District Field Inspector, and I performed a routine compliance evaluation inspection of the waste water treatment facility in accordance with the provisions of the federal Clean Water Act, the Arkansas Water and Air Pollution Control Act, and the regulations promulgated there under. This inspection revealed the following violation:

Calibration checks were being calculated incorrectly. Repeat violation. This is in violation of Part II, C, 2.

The above item requires your immediate attention. Please submit a written response to this finding to the NPDES Enforcement Section of this Department when the violation has been corrected. This response should contain documentation describing the course of action taken to correct the item noted. This corrective action should be completed as soon as possible. The written response is due by **January 25, 2007**.

If I can be any assistance, please contact me at 501-682-0744.

Sincerely,



Alison West
District Field Inspector
Water Division

cc: NPDES Branch

WATER DIVISION

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY
PRETREATMENT COMPLIANCE INSPECTION (PCI) REPORT

Name of Municipality: City of Rogers

AFIN Number: 04-00155

NPDES Permit Number(s): AR0043397

Program Tracked under NPDES Permit Number: AR0043397

Fact Sheet Preparation Date: 8-15-06

Date of Last PCI/Audit: 4-26-06/6-21 through 23/04

Date of Last Annual Report: 2-1-06

Name of Inspector: Alison West/John Fazio

Date PCI Performed: 12-14-06

Name, Title, and Telephone Number of Facility Representative:
Louanne Diffin/Environmental Services Coordinator/479-273-7378
Bob Winnes/Environmental Compliance Specialist/479-273-7378

Name and Title of Other Participants: N/A

Number of IUs Visited: 2

Name(s) of IUs Visited: Ozark Mountain Poultry and Model Laundry
and Dry Cleaners.

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

**NOTE: ANY QUESTION PRINTED IN ALL CAPS AND BOLD PRINT INDICATED
A REGULATORY REQUIREMENT AND MUST BE ANSWERED FOR THE PCI REPORT
TO BE COMPLETE. A NO ANSWER TO ONE OF THESE QUESTIONS SHOULD
RESULT IN AN UNSATISFACTORY RATING.**

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. No SIU's have been added or deleted since the last inspection.
2. Has ADEQ or EPA been notified of these changes? NA
3. **HAS THE INDUSTRIAL USER SURVEY BEEN KEPT UPDATED?** Yes
4. What procedures are being used to update the IU Survey? Industry user waste survey forms, industry user questionnaire forms, site visits. The Chamber of Commerce sends a list of new companies. The city receives new connections from the Water Department.
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) 12
6. Number of Categorical Industrial Users: 5
7. How does the POTW determine the appropriate categorical standards to apply to an IU? Inspections, site visits, BMRs, industry user survey form, Federal Register 40 CFR, telephone book, ADEQ website.
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:	Category:	Regulated Process:
Bekeart	Metal Finishing	Plating, Coating
Mafco	Metal Finishing	Phosphating
Preformed Line	Aluminum Forming	Quench and rinse
Superior Industries	Metal Finishing	Phosphating
Kennametal	Metal Finishing	Phosphating

B. LOCAL LIMITS

1. IS THE POTW APPLYING LOCAL LIMITS WHICH HAVE BEEN APPROVED BY ADEQ OR EPA? NA

2. Describe any apparent problems with the local limits.
NA

3. How often are pollutant scans of POTW influent, effluent, and sludge performed by the POTW? Does this fulfill the requirements of the approved program (as described in the fact sheet) and part III of the NPDES permit?

Pollutant:	Frequency:	Requirement in		Comments:
		Permit:	Program:	
Metals:				
Influent:	<u>11 times a year</u>	<u>Once/Quarter</u>	<u>NA</u>	<u>NA</u>
Effluent:	<u>11 times a year</u>	<u>Once/Quarter</u>	<u>NA</u>	<u>NA</u>
Sludge:	<u>6/year</u>	<u>Quarterly</u>	<u>NA</u>	<u>NA</u>
Organics:				
Influent:	<u>Once/Year</u>	<u>Once/Year</u>	<u>NA</u>	<u>NA</u>
Effluent:	<u>Once/Year</u>	<u>Once/Year</u>	<u>NA</u>	<u>NA</u>
Sludge:	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>

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?
No

C. INDUSTRIAL USER CONTROL MECHANISM

1. Is the POTW using the type of control mechanism (permit, agreement, etc.) required by the approved program? Yes, Permit

2. How many IU permits (or other control documents) have been issued? 13 (12 SIU's, and 1 Non SIU)

3. DO ALL SIGNIFICANT IUS 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?
Permits for Ozark Mountain Poultry and Model Laundry were checked.
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: Yes

Notification of process change: Yes

D. MONITORING OF IUS BY POTW

1. Indicate current inspection and sampling frequency and program requirement below:

	Current frequency:	Program Requirement:
Sampling:		
categorical IUs	<u>1/YR</u>	<u>1/YR</u>
other SIUs	<u>1/YR</u>	<u>1/YR</u>
Inspection:		
categorical IUs	<u>1/YR</u>	<u>1/YR</u>
other SIUs	<u>1/YR</u>	<u>1/YR</u>

2. HAS EACH SIU BEEN INSPECTED AND SAMPLED AT THE FREQUENCY REQUIRED BY THE APPROVED PROGRAM? Yes

3. Are inspections announced or unannounced? Unannounced

4. Are records kept of each inspection? Yes

5. Does the inspection report contain an adequate description of the following:

Date and time of inspection: Yes

Officials present: Yes

Inspection of chemical storage areas: Yes

Description of regulated processes, categorical waste streams, and discharge location of these waste streams: Yes

Inspection of the pretreatment facilities: Yes

Review of self-monitoring records: Yes

Observation of IU self-monitoring procedures: Yes

Verification that approved analytical techniques are used: Yes

Verification of IU flow measurement (where required): No, but require IU's to service and calibrate flow devices 1/year.

6. Overall adequacy of inspection documentation: Good

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)? No, duplicates are not being conducted on pH at Ozark Mountain Poultry and Model Laundry.

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? pH was not being collected at the final discharge to the collection system at Model Laundry.

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? All reports, etc are logged in upon receipt, reviewed, and filed. The data is inputted to the computer tracking system.

15. ARE SELF-MONITORING REPORTS REVIEWED TO VERIFY THAT ANALYSES WERE PERFORMED FOR ALL REGULATED PARAMETERS, AND TO EVALUATE COMPLIANCE WITH EFFLUENT LIMITS? Yes, by Louanne Diffin and Bob Winnes. Information is entered into two programs in the computer. The report is filed in the I.U. file.

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?
Follows enforcement response plan.

18. **HAS THE POTW REVIEWED BMRS FOR COMPLIANCE WITH 40 CFR 403.12(b)?** **No new categoricals since the last inspection.**

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: **N/A**

Other environmental permits held: **N/A**

Description of operations: **N/A**

Process flow diagrams: **N/A**

Flow measurements: **N/A**

Measurements of regulated pollutants: **N/A**

Certification of compliance by the IU: **N/A**

Compliance schedule (if needed): **N/A**

19. Additional comments on the POTW's inspection and sampling procedures: **None.**

5. Comments on the POTW's enforcement procedures:

None.

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: **No**

2. Does the POTW have adequate procedures for controlling IUs located outside its jurisdictional area? **N/A**

3. Does the POTW have copies of permits for IUs in other cities? **N/A**

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? **N/A**

5. Comments on multijurisdictional issues: **N/A**

H. EVALUATION AND COMMENTS

The facility's documents were well organized. The city was not enforcing conditions of the industry user's permits at Ozark Mountain Poultry, Inc and Model Laundry and Dry Cleaners on sampling and duplicates of pH. Duplicates were not being conducted on pH. Model Laundry and Dry Cleaners were not keeping documentation on sampling and analysis as required in Part II, Section C, 6 of their permit. Also, according to Art Stout, pH was being collected continuous with no recorder where sulfuric acid is being added rather than the final treatment. According to the industry's permit, a grab sample must be collected for pH.

PRETREATMENT COMPLIANCE INSPECTION

IU SITE VISIT FORM

Name of Industry: Model Laundry and Dry Cleaners

POTW Name: City of Rogers

Industry Contacts: Steve Ash and Art Stout

Date and Time of Visit: 8:35 a.m/12-14-06

Description of Manufacturing Process:
Wash and finish soiled linens, uniforms, and other apparel.
Laundry and dry clean apparel.

Sources of Process Wastewater:
Detergents, bleaches, alkali, soaps, and softeners are used in
liquid form in the wash area. Waste from the washers is sent to
pretreatment. Dry cleaning operation has no discharge.

Categorical Industry? No

Basis for Limits: N/A

Point of Application: N/A

Description of Pretreatment Equipment and Procedures:
Facility utilizes chemical addition, flow equalization, oil and
grease separation, air floatation, and screening for
pretreatment.

Spill Prevention and Solvent Management Procedures:
Facility has a slug control plan.

Sampling Location and Equipment:
Samples are taken on the lower side of the final discharge weir
of the pretreatment unit prior to discharge. Facility uses
American Sigma 24 hour composite sampler.

PRETREATMENT COMPLIANCE INSPECTION

IU SITE VISIT FORM

Name of Industry: Ozark Mountain Poultry

POTW Name: City of Rogers

Industry Contacts: Jack Greenfield

Date and Time of Visit: 10:25 a.m./12-14-06

Description of Manufacturing Process:
Poultry is received in ice packs. Poultry is deboned by hand, cut up, weighed, and repackaged as boneless pieces. Product is stored until shipped.

Sources of Process Wastewater:
Waste consists of chicken particles, oil, grease, and detergents from cleaning.

Categorical Industry? No

Basis for Limits: NA

Point of Application: NA

Description of Pretreatment Equipment and Procedures:
Process water flows to a settling tank and pumped to a rotary screen. The water is pumped into an EQ tank before going to a DAF tank. The sludge is collected by TRS.

Spill Prevention and Solvent Management Procedures:
Slug control plan and pollution prevention plan in place to prevent occurrences of spills and slugs.

Sampling Location and Equipment:
The sampler is located along the southwest corner of the facility. The monitoring facility consists of a parshall flume with an ISCO Model 4230 bubbler flow meter.

PPETS CODE SHEET

PRETREATMENT COMPLIANCE INSPECTION (PCI)

		CODE
INSPECTOR'S NAME:	<u>Alison West/John Fazio</u>	
NAME OF FACILITY:	<u>City of Rogers</u>	
PERMIT NUMBER USED TO TRACK PROGRAM:	<u>AR0043397</u>	NPID
DATE OF PCI:	<u>12-14-06</u>	DTIA

PPETS WENDB DATA ELEMENTS

NUMBER OF SIGNIFICANT IUS (SIUS):	<u>12</u>	SIUS
NUMBER OF CATEGORICAL IUS:	<u>5</u>	CIUS
SIUS NOT SAMPLED OR INSPECTED BY POTW:	<u>0</u>	NOIN
SIUS WITHOUT CONTROL MECHANISM:	<u>0</u>	NOCM
SIUS IN SIGNIFICANT NONCOMPLIANCE WITH STANDARDS OR REPORTING:	<u>0</u>	PSNC
SIUS IN SIGNIFICANT NONCOMPLIANCE WITH SELF-MONITORING REQUIREMENTS:	<u>1</u>	MSNC
SIUS IN SIGNIFICANT NONCOMPLIANCE WITH SELF-MONITORING AND NOT INSPECTED OR SAMPLED BY POTW:	<u>0</u>	SNIN

ADEQ

ARKANSAS
Department of Environmental Quality

January 5, 2007

Tom McAlister, Water and Wastewater Superintendent
City of Rogers
P.O. Box 338
Rogers, AR 72757

RE: AFIN: 04-00155

NPDES Permit No.: AR0043397

Dear Mr. McAlister:

On December 14, 2006, John Fazio, District Field Inspector, and I, performed a routine pretreatment compliance evaluation inspection of the waste water treatment facility in accordance with the provisions of the federal Clean Water Act, the Arkansas Water and Air Pollution Control Act, and the regulations promulgated thereunder. This inspection revealed the following violation:

The city is not enforcing conditions of the industrial user permits regarding sampling and duplicates for pH. At the time of inspection, it was observed duplicates were not being conducted on pH at Model Laundry and Dry Cleaners as well as Ozark Mountain Poultry, Inc. At Model Laundry and Dry Cleaners, we were informed that the pH sample was continuous with no recorder rather than a grab sample. According to Art Stout, pH is being checked where sulfuric acid is being added rather than at the final treatment. Also, Model Laundry and Dry Cleaners were not meeting the conditions of their permit in Part II, Section C, 6 where the industry is required to keep records of sampling and analysis.

The above item requires your immediate attention. Please submit a written response to this finding to the NPDES Enforcement Section of this Department when the violation has been corrected. This response should contain documentation describing the course of action taken to correct the item noted. This corrective action should be completed as soon as possible. The written response is due by **January 25, 2007.**

If I can be any assistance, please contact me at 501-682-0744.

Sincerely,



Alison West
District Field Inspector
Water Division

cc: NPDES Branch



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

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

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	4	3	3	9	7	11	12	0	6	1	2	1	4	17	18	P	19	S	20	2	
Remarks																													
A	F	I	N	0	4	-	0	0	1	5	5																		
Inspection Work Days				Facility Evaluation Rating				BI		QA		-----Reserved-----																	
67				69	70	N	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>) City of Rogers Wastewater Treatment Plant 4300 S. Rainbow Rogers, AR 72757		Entry Time /Date 7:30 a.m./12-14-06	Permit Effective Date 11-1-2006
		Exit Time/Date 4:00 p.m./12-14-06	Permit Expiration Date 2-28-2011
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) Louanne Diffin/Environmental Services Coordinator/479-273-7378/479-273-7627 Bob Winnes/Environmental Compliance Specialist/479-273-7378/479-273-7627			Other Facility Data
Name, Address of Responsible Official/Title/Phone and Fax Number McAlister/Water and Wastewater Superintendent/479-273-7378/479-273-7627 City of Rogers P.O. Box 338 Rogers, AR 72757		Tom	
		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)

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

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

City was not enforcing conditions of industry user's permit on sampling and duplicates for pH at Ozark Mountain Poultry, Inc and at Model Laundry and Dry Cleaners.

Name(s) and Signature(s) of Inspector(s) Alison West <i>Alison West</i>	Agency/Office/Telephone/Fax Arkansas Dept. of Environmental Quality/ Springdale/501-682-0744	Date January 5, 2006
John Fazio	Arkansas Dept. of Environmental Quality/ Springdale/501-682-0744	
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date



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

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NPDES Compliance Inspection Report

Section A: National Data System Coding

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Remarks																													
Inspection Work Days						Facility Evaluation Rating						BI		QA		-----Reserved-----													
67						69										71	N	72	N	73									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>) Pel-Freeze Arkansas, LLC 404 North Arkansas St. Rogers, AR	POTW: City of Rogers	Entry Time /Date 4-26-06 3:50 PM		Permit Effective Date N/A	
		Exit Time/Date 4-26-06 4:25 PM		Permit Expiration Date N/A	

Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) Carolyn Wendel/Environmental Coordinator/479-636-4361		Other Facility Data	
Name, Address of Responsible Official/Title/Phone and Fax Number David Dubbell/President/479-636-4361 Pel-Freeze Arkansas, LLC 404 North Arkansas St. Rogers, AR 72756		Contacted _____ Yes No	

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/Reports	N	Self-Monitoring Program	N	Sludge Handling/Disposal	N	Pollution Prevention
N	Facility Site Review	N	Compliance Schedules	Y	Pretreatment	N	Multimedia
N	Effluent/Receiving Waters	N	Laboratory	N	Storm Water	N	Other:

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

None.

Name(s) and Signature(s) of Inspector(s) Dale Washam Alison West	Agency/Office/Telephone/Fax ADEQ/Mammoth Springs/(870) 625-7477/(870)625-7699 ADEQ/Springdale/(479) 927-3257, Ext 12/(479) 927-3261	Date 5-3-06
Signature of Management QA Reviewer	Agency/Office/Phone and Fax Numbers	Date

POTW Pretreatment Program

Industrial Site Visit

Name of Industry: Pel-Freeze Arkansas, LLC

Industry Contacts: Carolyn Wendel, Environmental Coordinator

Type of Industry: Meat Processing

Date of Visit: 4-26-06

- 1. significant industrial user: X yes no not determined
- 2. pretreatment equipment or procedures? yes X no n/a
- 3. pretreatment equipment maintained and operational? yes X no n/a
- 4. hazardous waste generated or stored? X yes no n/a
- 5. proper solid waste disposal? X yes no n/a
- 6. solvent management/tto control yes no X n/a
- 7. suitable sampling location? X yes no n/a
- 8. appropriate self-monitoring procedures/equipment? X yes no n/a
- 9. adequate spill prevention? X yes no n/a
- 10. industry familiar with limits and requirements? X yes no n/a

Additional Comments:

Visit Conducted by (signature): Alison West and Dale Washam Date: 5-3-06

ACI: X-2430



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

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

NPDES Compliance Inspection Report

Section A: National Data System Coding

Transaction Code			NPDES											yr/mo/day				Inspec. Type	Inspector		Fac Type								
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Remarks																													
0	0	2	C																										
Inspection Work Days				Facility Evaluation Rating				BI		QA		-----Reserved-----																	
67				69	70	N	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> Superior Industries International, Inc 1301 N. Dixieland Road Rogers, AR		Entry Time /Date 4-26-06 1:45 PM		Permit Effective Date N/A	
POTW: City of Rogers		Exit Time/Date 4-26-06 3:35 PM		Permit Expiration Date N/A	
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) John Fisher/Environmental Engineer/479-631-8037				Other Facility Data	
Name, Address of Responsible Official/Title/Phone and Fax Number John Fisher/Environmental Engineer/479-631-8037 1301 N. Dixieland Road Rogers, AR 72756				Contacted Yes <input checked="" type="checkbox"/> No	

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/Reports	N	Self-Monitoring Program	N	Sludge Handling/Disposal	N	Pollution Prevention
N	Facility Site Review	N	Compliance Schedules	Y	Pretreatment	N	Multimedia
N	Effluent/Receiving Waters	N	Laboratory	N	Storm Water	N	Other:

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

Contract lab does all sampling and analysis for the industry.

Name(s) and Signature(s) of Inspector(s) Dale Washam Alison West		Agency/Office/Telephone/Fax ADEQ/Mammoth Springs/(870) 625-7477/(870)625-7699 ADEQ/Springdale/(479) 927-3257, Ext 12/(479) 927-3261		Date 5-3-06	
Signature of Management QA Reviewer		Agency/Office/Phone and Fax Numbers		Date	

POTW Pretreatment Program

Industrial Site Visit

Name of Industry: Superior Industries International, Inc

Industry Contacts: John Fisher, Environmental Engineer

Type of Industry: Metal Finishing

Date of Visit: 4-26-06

1. significant industrial user: X yes no not determined
2. pretreatment equipment or procedures? X yes no n/a
3. pretreatment equipment maintained and operational? X yes no n/a
4. hazardous waste generated or stored? X yes no n/a
5. proper solid waste disposal? X yes no n/a
6. solvent management/tto control X yes no n/a
7. suitable sampling location? X yes no n/a
8. appropriate self-monitoring procedures/equipment? X yes no n/a
9. adequate spill prevention? X *yes no n/a
10. industry familiar with limits and requirements? X yes no n/a

Additional Comments: **There were areas within the facility where there were not any spill prevention measures for chemical storage. It is strongly recommended that this be improved.**

Visit Conducted by (signature): Alison West and Dale Washam Date: 5-3-06

ACI:X-2430