**≎**EPA

Form Approved OMB No. 2040-0003

	NPDES											
Section A: National Data System Coding												
1	Transaction Code											
	67 69		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 Fayetteville-Paul R. Noland WWTP							Entry Time/Date 9:30 a.m./12-10-08		Permit Effective Date June 1, 2006			
	ON. Fox Hunter Road etteville, AR 72701			Exit Time/Date 3:30 p.m./12-10-08		Permit Expiration Date May 31, 2011						
Duy	ne(s) of On-Site Representative(s)/Tit en Tran/Plant Manager/479-443-32 Luther/Operations/479-433-3292/	Oth	er Facility Data									
Dav City 113	ne, Address of Responsible Official/T id Jurgens/Water and Wastewater of Fayetteville W. Mountain etteville, AR 72201			Contacted Yes □ No ☑								
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 P	'rogram	ogram Slu		udge Handling/Disposal		<b>Pollution Prevention</b>			
			Compliance Scheo	e Schedules		Pretreatment			Multimedia			
	Effluent/Receiving Waters		Laboratory			Sto	orm Water		Other:			
		Se	ction D: Summary	of Findings/Com	ments	s (Att	tach additional sheets if necessary)					
This EPA-lead Compliance Evaluation Inspection was conducted by David Long, USEPA, and Alison West, ADEQ, on December 10, 2008. We were accompanied by John Fazio, ADEQ District Field Inspector.  No violations were noted during the inspection.												
The following issue was observed: Heavy solids were being discharged from the final clarifiers. However, the sand filters removed most of the solids prior to final discharge.												
Nar Alis	ne(s) and Signature(s) of Inspector(s)  on West		Agency/Office/Telephone/Fax AR Dept. of Environmental Quality-Fayetteville 479-267-0811, ext. 12; 479-267-0819 (fax)					Date 12/30/08				
Sign	nature of Reviewer		Agency/Office/Phone and Fax Numbers					Date				