



Form Approved  
OMB No. 2040-0003

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

## 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	5	6	0	2	11	12	0	9	0	3	1	7	17	18	R	19	S	20	1	
Remarks																													
Inspection Work Days						Facility Evaluation Rating						BI		QA		-----Reserved-----													
67						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> ) <b>City of Trumann WWTP</b> <b>Hwy. 69 North 1/4 Mile N. of Hwy 198</b> <b>Trumann, AR</b> <b>Poinsett Co.</b>	Entry Time/Date <b>1045 3/17/2009</b>	Permit Effective Date <b>11/1/2003</b>
	Exit Time/Date <b>11:15 3/17/2009</b>	Permit Expiration Date <b>10/31/2008</b>
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) <b>Scotty Jones/Manager/870-284-0418</b>	Other Facility Data	
Name, Address of Responsible Official/Title/Phone and Fax Number <b>Scotty Jones/Manager/870-284-0418</b> <b>City of Trumann WWTP</b> <b>106 E. Main St.</b> <b>Trumann, AR 72472</b>	Contacted Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

### Section C: Areas Evaluated During Inspection

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

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

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

This reconnaissance inspection was conducted in response to a complaint alleging the sewer system had been overflowing and discharging directly into a ditch.

No evidence of recent illicit discharges or overflows was noted. See the attached complaint report for additional information.

No letter will be sent.

Name(s) and Signature(s) of Inspector(s) <b>Brent L. Walker</b> <i>Brent L. Walker</i>	Agency/Office/Telephone/Fax <b>AR Dept. of Environmental Quality-Jonesboro</b> <b>(870) 935-7221 ext. 12/(870) 935-4715 (Fax)</b>	Date <b>June 9, 2009</b>
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date