

December 16 2009

Steve Mallett, Utilities Manager City of Hot Springs P.O. Box 700 Hot Springs, Arkansas 71901

RE: AFIN: 26-00145 NPDES Permit No.: AR0033880

Dear Mr. Mallett:

On December 4, 2009, I performed a routine pretreatment compliance inspection 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 that you were in compliance with the terms of your permit.

If I can be of any assistance, please contact me at 501-520-0541.

Sincoroly

Jim McSwain

District 7 Field Inspector

Water Division

cc: Water Division Enforcement Section

Water Division Permits Section

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY Form Approved Washington, D.C. 20460 OMB No. 2040-0003 **ŞEPA NPDES Compliance Inspection Report** Section A: National Data System Coding NPDES Yr/Mo/Day Inspec. Type Fac. Type Transaction Code Inspector 12 P Remarks Inspection Work Days Facility Evaluation Rating ΒI QA -Reserved-70 **N** N N 72 74 75 80 Section B: Facility Data Name and Location of Facility Inspected (For industrial users discharging to POTW, also Entry Time/Date Permit Effective Date include POTW name and NPDES permit number) 1330 on 12/03/09 February 1, 2008 **City of Hot Springs** 0810 on 12/4/09 located approximately 1 mile off of Shady Grove Road Exit Time/Date Permit Expiration Date at the end of Davidson Drive 1650 on 12/3/09 January 31, 2013 1610 on 12/4/09 Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) Other Facility Data Dennis Brunson, Pretreatment Coordinator, 501-262-1881, fax 501-262-0339 Bill Garner, Pretreatment Asst. Ron Wacaster, WW Plant Manager Name, Address of Responsible Official/Title/Phone and Fax Number Steve Mallett, Utilities Director, 501-321-6810 Contacted P.O. Box 700 No 🗹 Hot Springs, Arkansas 71901 **Section C: Areas Evaluated During Inspection** $(S = Satisfactory, \ M = Marginal, \ U = Unsatisfactory, \ \overset{_}{N} = Not \ Evaluated)$ Permit Flow Measurement **Operations & Maintenance** Sampling Records/Reports **Self-Monitoring Program** Sludge Handling/Disposal **Pollution Prevention** \mathbf{S} **Facility Site Review Compliance Schedules Pretreatment** Multimedia **Effluent/Receiving Waters** Other: DMR'S Laboratory Storm Water Section D: Summary of Findings/Comments (Attach additional sheets if necessary) No violations noted during this inspection.

Name(s) and Signature(s) of Inspectors) Jim McSwain Agency/Office/Telephone/Fax AR Dept. of Environmental Quality – Hot Springs Field Office – 501-520-0541 – Fax 501-520-5978 December 8, 2009 Signature of Reviewer Agency/Office/Phone and Fax Numbers Date

Form approved July 1989

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY

PRETREATMENT COMPLIANCE INSPECTION (PCI) REPORT

Name of Municipality: | City of Hot Springs AFIN Number: | 26-00145 NPDES Permit Number(s): | AR0033880 Program Tracked under NPDES Permit Number: | AR0033880 Fact Sheet Preparation Date: Date of Last PCI/Audit: | 8/25/08 Date of Last Annual Report: | 6/26/08 Name of Inspector: | Jim McSwain Date PCI Performed: | 12/3/09 - 12/4/09 Name, Title, and Telephone Number of Facility Representative: Dennis Brunson, Pretreatment Coordinator, 501-262-1881 Bill Garner - Pretreatment Asst. Name and Title of Other Participants: | Ron Wacaster - WW Plant Mgr. Number of IUs Visited: 5 Name(s) of IUs Visited: | Alliance Rubber, Triumph Fabrications, Triumph Airborne Structures, Wacaster Oil, Mid-America Distillations. 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.

Α.	INDUSTRIAL USER SUP	RVEY			
1.	List any Significa	ant Industrial Users (S	SIUS) which have		
		eted from the program s			
		one			
	_				
2.	Has ADEQ or EPA be	een notified of these of	changes? N/A		
3.	HAS THE INDUSTRIAL	L USER SURVEY BEEN KEPT	UPDATED? Yes		
L					
4.		re being used to update			
		New Industry Information			
	Prior to utility h	ely on large industries	s to contact the POIW		
	Prior to utility i	iook-up.			
5.	Total number of St	ignificant Industrial (Isers, according to		
<u> </u>		ed by the POTW. (This			
		qual to the answer to o			
		<u>.</u>	· /		
6.	Number of Categori	ical Industrial Users:	3		
7.					
	standards to apply to an IU? Federal Regulations				
8.	List all categoric	cal IUs discharging und	der the approved (such		
		the name of the IU, th			
		g), and the regulated p			
		.) Additional listings			
			can be made in the		
	comments section				
Nam	e of IU:	Category:	Regulated Process:		
TT-0-1	umph Fabrications	Metal Finishing	Amadi - ima		
	umph Airborn	Metal Finishing	Anodizing		
	American Dist.	Waste Oil Treatment	Anodizing Used Oil Recovery		
mid	American Disc.	Mabce Off Hearmene	obed oil Recovery		

B. LOCAL LIMITS

1. IS THE PORT OF	OTW APPLYING L OR EPA? Yes	OCAL LIMITS W	HICH HAVE BEEN	N APPROVED
2. Describe	any apparent	problems with	the local lim	nits.
sludge p requirem	n are pollutan erformed by th ents of the ap sheet) and pa	e POTW? Does proved progra	this fulfill m (as describe	the ed in
Pollutant:	Frequency:	Require Permit:		Comments:
Metals: Influent:	1/Qtr	1/Qtr	1/Qtr	
Effluent:	1/Qtr	1/Qtr	1/Qtr	
Sludge:	1/Qtr	1/Qtr	1/Qtr	
Organics: Influent:	1/Year	1/Year	1/Year	
Effluent:	1/Year	1/Qtr	1/Qtr	
Sludge:	1/Year	1/Qtr	1/Qtr	
(since to caused by action t	re been any in he last PCI of y industrial d aken by the Ci r. Were these	Audit) which ischarges? I ty to ensure	were believed f so, describe that the incid	to be the
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
2.	How many IU permits (or other control documents) have been
	issued? 9
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?
	An expiration date: Yes
	Discharge limitations: Yes
	If the program requires self-monitoring by the IUs, do the
	Permits contain: Yes
	IU self-monitoring requirements: Yes
	IU reporting requirements: Yes
_	
5.	Indicate which of the following recommended standard
	conditions are contained in the control documents:
	Cannala la national War
	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
l	INOCITION OF PLOCESS CHANGE. IES

D.	MONITORING OF IUS BY POTW						
1.	Indicate current in	Indicate current inspection and sampling frequency and program				ram	
	requirement below:						
			Current frequency:		Program :	Requi	rement:
	Sampling:						
	categorical IUs		1/Qtr		2/Year		
	other SIUs		1/Qtr		2/Year		
	Inspection:						
	categorical IUs		1/Year		1/Year		
	other SIUs		1/Year		1/Year		
				•			
2.	HAS EACH SIU BEEN I	N	SPECTED AND SAMPLED A	T THE	FREQUENC	Y	
	REQUIRED BY THE APP	R	OVED PROGRAM? Yes				
3.	Are inspections ann	.0	unced or unannounced?		Both		
4.	Are records kept of		each inspection?	Yes			
5.	Does the inspection report contain an adequate description of						
	the following: Yes						
	Date and time of in	S	pection: Yes				
	Officials present:		Yes				
	Inspection of chemi	С	al storage areas: Ye	es			
		_					
			ated processes, catego			tream	ms, and
	discharge location	0	f these waste streams	: Ye	s		
	Inspection of the p	r	etreatment facilities	: Ye	s		
	D	_					
	Review of self-moni	τ	oring records: Yes				
		_	1 £		37.0		
	observation of 10 s	е	lf-monitoring procedu	res.	Yes		
	Morification that a	r	proved analytical tecl	hni~:	00 020 ::-	. 50	Voc
	verillication that a	Р	brosed anaraticat tech	штqu	es are us	eu.	Yes
	Vorification of T	£	low measurement (where	0 700	uirod\.	V	
	AELITICACION OF 10	Т	TOW MEASULEMENT (WHERE	e red	uirea).	Yes	
6	Overall adominate of		inspection documentat:	ior:	Dogumen	L 46.	
6.	all required eleme			TOII.	Documen	r 60.	vers
	all required eleme	#1	ICS.				

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		
10.	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? Permittee uses an audit chart on the 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?
	24 hour notification by phone and written response within
	5 days.
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
1.0	7.11'.' 1 POTTA
19.	Additional comments on the POTW's inspection and sampling
	procedures: Inspection and sampling procedure meat the
	required elements of the permit.

Ε.	. Enforcement						
1.							
	ADEQUATELY	Α	DDRESS EVERY IU V	/I	OLATION OF PRETR	ΕZ	ATMENT
	STANDARDS 2	AN	D REQUIREMENTS?	Y	es		
2.	. How does the POTW respond to the following violations?						
	Effluent 1	im	itations: Phone	Ca	11		
	Late repor	ts	: Phone Call; Le	tt	er		
			<u> </u>				
	Unpermitte	d	discharges: Phon	e	Call; Letter		
			<u>.</u>				
	Slug loads	0	r spills: Phone	Ca	all; Letter; Not:	if	y ADEQ Insp.
3.	IS THE LIST OF SIGNIFICANT VIOLATORS PUBLISHED BY THE POTW						
	DEVELOPED IN ACCORDANCE WITH EPA REGION VI CRITERIA FOR						
	SIGNIFICAN'	Г	VIOLATING INDUST	RI.	AL USER (DATED A	UC	SUST 22,
	1985)? Yes	;					
4.	. List the SIUs which have met the criteria for Significant						
	Violator within the last 12 months, and describe the						the
	enforcemen	t	action which has	b	een taken by the	: I	POTW. If
	constructi	on	is required, pla	ea	se indicate whet	he	er the IU
	has been p	la	ced on an enforce	ea.	ble compliance s	cł	nedule.
	1						
			Type of		Enforcement		Compliance
	Name:		Violation:		Action:		Deadline:
Nor	ie						

5.	Comments on the POTW's enforcement procedures:
	Seems to be adequate
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:
	N/A
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

ADEQ Water NPDES Inspection	AFIN: 26-00145	Permit #: AR0033880

Н.	EVALUATION AND COMMENTS					
37 -	30-4	*** - 7 - 1 - 2			11.2	Assessment Asses
NO	Major	Violations	notea	auring	tnis	inspection.

Name of Industry: Alliance Rubber
POTW Name: Hot Springs
Industry Contacts: Trevor Hamilton
Date and Time of Visit: 12/3/09 @ 1505 hrs
Description of Manufacturing Process:
Manufacturing of rubber bands
Sources of Process Wastewater:
Contact cooling water
Categorical Industry? NO
Basis for Limits: Oil & Grease, Metals (local limits)
Point of Application: End of Process
Description of Pretreatment Equipment and Procedures:
DAF Unit and filter press. (waste is dispose via land fill)
Spill Prevention and Solvent Management Procedures:
SPCC Plan
Sampling Location and Equipment:
Manhole located at the west side of the building. Automatic
Composite sampler is used by a contracted lab.

Name of Industry: Triumph Fabrications
POTW Name: Hot Springs
Industry Contacts: Jason Halley
Date and Time of Visit: 12/4/09 @ 0920 hrs.
Description of Manufacturing Process:
Anodized metal finisher. Fabrication and milling of airplane
parts
Sources of Process Wastewater:
Air Scrubber Water and Rinse operations used after etching baths
Categorical Industry? YES
Basis for Limits: Anodizing (local limits)
Point of Application: End of Process
Description of Pretreatment Equipment and Procedures:
Polymer addition, flocculation, clarification, ph adjustment.
Sludge Press. Waste is classified as a Haz-Waste due to Cr.
Spill Prevention and Solvent Management Procedures:
Well developed SPCC and Safety plan
Sampling Location and Equipment:
Isco automatic sampler located at the discharge site.

Name of Industry: Triumph Airborne Structures, Inc							
POTW Name: Hot Springs							
101W Name: Mot springs							
Industry Contacts: Ed Albritton							
Date and Time of Visit: 12/4/09 @ 1030 hrs.							
Date and Time Of Visit. 12/4/09 @ 1030 Hrs.							
Description of Manufacturing Process:							
Anodized metal finisher. Fabrication and milling of airplane							
parts							
Sources of Process Wastewater:							
Air Scrubber Water and Rinse operations used after etching baths							
Categorical Industry? YES							
Basis for Limits: Anodizing (local limits)							
Point of Application: End of Process							
Description of Pretreatment Equipment and Procedures:							
Polymer addition, flocculation, clarification, ph adjustment.							
Sludge Press. Waste is classified as a Haz-Waste due to Cr.							
Spill Prevention and Solvent Management Procedures:							
SPCC and Safety plan							
Sampling Location and Equipment:							
Composite sampler is used by a contracted lab. Samples taken at							
The manhole just outside of the discharge point.							

Name of Industry: Wacaster Oil Company							
POTW Name: Hot Springs							
Industry Contacts: Scott Wacaster							
Date and Time of Visit: 12/4/09 @ 1230 hrs.							
Description of Manufacturing Process:							
Bulk Fuel Station.							
Sources of Process Wastewater:							
Rain water within the containment.							
Categorical Industry? <u>no</u>							
Basis for Limits: Oil and Grease							
Point of Application: End of Process							
Description of Pretreatment Equipment and Procedures: Oil Water Separator							
Spill Prevention and Solvent Management Procedures:							
SPCC and Safety plan							
Sampling Location and Equipment:							
Do Not Discharge to the city. Permit is for precautionary							
purposes only.							

Name of Industry: Mid America Distillations, Inc.						
POTW Name: Hot Springs						
Industry Contacts: Keith Mangham						
Date and Time of Visit: 12/4/09 @ 1340 hrs.						
Description of Manufacturing Process:						
Petroleum refining, Amine Distillation and Distribution of oil.						
Sources of Process Wastewater:						
Recycling of used oils and purification of industrial chemicals.						
Categorical Industry? Yes						
Basis for Limits: Oil and Grease, Glycols, Amines						
Point of Application: End of Process						
Description of Pretreatment Equipment and Procedures: Oil Water Separator						
Spill Prevention and Solvent Management Procedures:						
SPCC and Safety plan						
Sampling Location and Equipment:						
Composite sampler is used by a contracted lab taken at their						
discharge point.						

PPETS CODE SHEET

PRETREATMENT COMPLIANCE INSPECTION (PCI)

			CODE
INSPECTOR'S NAME:	Ji		
	~ 1.		
NAME OF FACILITY:	City o	f Hot Springs	
PERMIT NUMBER USED			
TO TRACK PROGRAM:	Α	R0033880	NPID
			IVI ID
DATE OF PCI:	Decer	mber 4, 2009	DTIA
	PPETS WENDB DATA	A ELEMENTS	
NUMBER OF SIGNIFICA	NT TIIS (STIIS):	9	SIUS
NOTION OF BIGNIFICE	100 (0100)		5105
NUMBER OF CATEGORIC	AL IUS:	3	CIUS
SIUS NOT SAMPLED OR	INSPECTED BY		
POTW:		0	NOIN
SIUS WITHOUT CONTRO	L MECHANISM:	0	NOCM
SIUS IN SIGNIFICANT	NONCOMDITANCE		
WITH STANDARDS OR R		0	PSNC
MITIT DIMINDINDO OK K	THE OWN TING.	•	EDIAC
SIUS IN SIGNIFICANT	' NONCOMPLIANCE		
WITH SELF-MONITORIN	G REQUIREMENTS:	0	MSNC
SIUS IN SIGNIFICANT	' NONCOMPLIANCE		
WITH SELF-MONITORIN			
INSPECTED OR SAMPLE	D BY POTW:	N/A	SNIN

	UNITED STATES ENVIRONMENTAL PROTECTION AGENCY Washington, D.C. 20460										Form Approved OMB No. 2040-0003	
NPDES Compliance Inspection Report												
									stem Coding		1	
Transaction Code NPDES Yr/Mo/Day Inspec. Type												
Remarks 0 0 5 C												
Inspection Work Days Facility Evaluation Rating BI QA QA 70 N 71 N 72 N 73 74 75											Reserved	
					Se	ection B	: Faci	ility I	Data		_	
incl	ne and Location of Facility Inspected ude POTW name and NPDES permi			users disc	charging to	o POTW	, also		Entry Time/Date 1505 on 12/3/09		Permit Effective Date February 1, 2008	
loca	<u>iance Rubber</u> ated on Carpenter Damn Road ju Hot Springs, AR	st so	uth of the	oy-pass					Exit Time/Date 1540 on 12/3/09		Permit Expiration Date January 31, 2013	
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) Trevor Hamilton – Facility Manager Other Facility Data										her Facility Data		
210 Carpenter Road									Contacted Yes ✓ No □			
			(S = S)						ring Inspection sfactory, N = Not Evaluated)			
-	Permit	-	Flow Me	asureme	nt		-	Ope	erations & Maintenance	-	Sampling	
-	Records/Reports	•	Self-Mor	itoring I	Program		-	Sluc	dge Handling/Disposal	-	Pollution Prevention	
-	Facility Site Review	-	Complia	nce Sche	dules		Y	Pre	treatment	-	Multimedia	
-	Effluent/Receiving Waters	-	Laborate				-		rm Water	-	Other:	
		Se	ection D: Su	ımmary	of Finding	gs/Com	ments	(Att	ach additional sheets if necessar	y)		
See attached IU site visit form and PCI form												
					1 .	10.00					T.	
Na: Jin	me(s) and Signature(s) of Inspector) -			Agency/ AR I	Dept. of	Envir	onm	ental Quality – Hot Springs Fiel	d	Date	
	1/2	_				Offic	e – 50	1-520	0-0541 – Fax 501-520-5978		12/8/09	
	U											
Sig	nature of Reviewer				Agency	/Office/	Phone	and Fax Numbers Date				

POTW Pretreatment Program Industrial Site Visit

Name of Industry: <u>Alliance Rubber Company</u>							
Industry Contacts: <u>Trevor Hamilton, Facility M</u>	<u>lanager</u>						
Type of Industry: Rubber band manufacturing							
Date of Visit: <u>12/3/09 at 1505</u>							
1. Significant industrial user:	☑ Yes □ No	□Not Determined					
2. Pretreatment equipment or procedures?	☑ Yes □ No	□N/A					
3. Pretreatment equipment maintained and operational?	☑ Yes □ No	□N/A					
4. Hazardous waste generated or stored?	□Yes ☑No	□N/A					
5. Proper solid waste disposal?	☑ Yes □ No	$\square_{\mathbf{N}/\mathbf{A}}$					
6. Solvent management/TTO control?	□Yes ☑No	$\square_{N/A}$					
7. Suitable sampling location?	☑ Yes □No	$\square_{\mathbf{N}/\mathbf{A}}$					
8. Appropriate self-monitoring procedures / equipment?	☑ Yes □ No	$\square_{\mathbf{N}/\mathbf{A}}$					
9. Adequate spill prevention?	☑ Yes □ No	$\square_{\mathbf{N}/\mathbf{A}}$					
10. Industry familiar with limits and requirements?	☑ Yes □ No	$\square_{\mathbf{N}/\mathbf{A}}$					
Additional Comments: Facility was in compliance with their limits and requirements.							
Visit Conducted By: Jim McSwain	Date:	12/3/09					

,	UNITED STATES ENVIRONMENTAL PROTECTION AGENCY Washington, D.C. 20460 NPDES Compliance Inspection Report									rm Approved No. 2040-0003	
	NPDE										
			Section A: Natio	nal Data S	System Coding	g		_			
1	Transaction Code N 2 5 3 A R 0	NPDES 0 3 3 8	Yr/N 9 1	Mo/Day 2 0	4 1		pec. Type I	Inspector Fac. Type S 20 2			
	0 0 5 C										
	Inspection Work Days 67 69	Facility Evaluation F	Rating 71	L L	QA		74 7	ı	Reserved	80	
			Section 1	B: Facility	Data				_		
incl	ne and Location of Facility Inspected (Faculte POTW name and NPDES permit number 1.5.1.		charging to POTV	W, also	Entry Time 0920 on 12				Permit Effecti February 1, 2		
192	umph Fabrications 3 Central Avenue Hot Springs, AR				Exit Time/I 1010 on 12				Permit Expirate January 31, 2		
Nar	ne(s) of On-Site Representative(s)/Title(son Halley, Manager	s)/Phone and Fax Nun	mber(s)		•			Otl	ner Facility Data		
Jaso 192	ne, Address of Responsible Official/Title on Halley 3 Central Avenue Springs, Arkansas		Yes		_						
		\mathbf{Sec} $(\mathbf{S} = \mathbf{Satisfactor})$	ction C: Areas Evry, M = Marginal,	valuated D , U = Unsa	Ouring Inspectisfactory, N =	ction = Not Eva	luated)				
-	Permit -	Flow Measureme	ent	- O _l	perations & N	Maintena	nce	Sampling			
-	Records/Reports -	Self-Monitoring	Program		udge Handlin	ng/Dispos	al	-	- Pollution Prevention		
-	Facility Site Review -	Compliance Sche	edules		etreatment			-	- Multimedia		
_	Effluent/Receiving Waters -	Laboratory Section D: Summary	of Findings/Con		orm Water ttach addition	nal sheets	s if necess	arv)	Other:		
	Section D: Summary of Findings/Comments (Attach additional sheets if necessary) See attached IU site visit form and PCI form										
Na: Jin	me(s) and Signature(s) of Inspectors) McSwain			f Environ	mental Qualit			ield	Date		
	- Arriva		Offi	ce – 501-5	20-0541 – Fax	x 501-520)-5978		12/8/09		
Sig	nature of Reviewer		Agency/Office	e/Phone and	d Fax Number	rs			Date		

POTW Pretreatment Program Industrial Site Visit

Na	Name of Industry: Alliance Rubber Company								
Inc	Industry Contacts: Jason Halley, Manager								
Ту	Type of Industry: Fabrication and Milling of aircraft parts								
Da	Date of Visit: <u>12/4/09 at 0920</u>								
1.	Significant industrial user:	✓Yes	□No	□Not Determined					
2.	Pretreatment equipment or procedures?	Y es	□No	$\square_{\mathbf{N}/\mathbf{A}}$					
3.	Pretreatment equipment maintained and operational?	✓Yes	□No	$\square_{\mathbf{N}/\mathbf{A}}$					
4.	Hazardous waste generated or stored?	Y es	□No	$\square_{\mathbf{N}/\mathbf{A}}$					
5.	Proper solid waste disposal?	Y es	□No	$\square_{\mathbf{N}/\mathbf{A}}$					
6.	Solvent management/TTO control?	Y es	□No	$\square_{\mathbf{N}/\mathbf{A}}$					
7.	Suitable sampling location?	Y es	□No	□N/A					
8.	Appropriate self-monitoring procedures / equipment?	✓Yes	□No	$\square_{\mathbf{N}/\mathbf{A}}$					
9.	Adequate spill prevention?	Y es	□No	$\square_{\mathbf{N}/\mathbf{A}}$					
10.	Industry familiar with limits and requirements?	 ✓Yes	□No	$\square_{\mathbf{N}/\mathbf{A}}$					
Ad	Additional Comments: Facility was in compliance with their limits and requirements.								
Vis	Visit Conducted By: Jim McSwain Date: 12/4/09								

	UNITED STATES ENVIRONMENTAL PROTECTION AGENCY Washington, D.C. 20460														pproved 2040-00						
'	NPDES Compliance Inspection Report																				
											ystem Codin										
										Fac. Type											
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	Inspection Work Days Facility Evaluation Rating BI QA Reserved———————————————————————————————————											80									
									n B: Fa												
incl	ne and Location of Facility Inspected and NPDES permin comph Airborne Structures, Inc.			trial u	sers d	lischar	rging	to PO	TW, als	0	Entry Tim 1030 on 1								ive Da 2008		
App	prox. 1 mile north on Hwy. 227 Hot Springs, AR										Exit Time 1105 on 1								tion I 2013		
	ne(s) of On-Site Representative(s)/T	itle(s)	/Phon	e and I	Fax N	umber	r(s)								О	ther Fac	cility	Data	ı		
Ed 2	Albritton, Maintenance Mgr. / (501)	262-1	555																		
Nan	ne, Address of Responsible Official/	Title/l	Phone	and Fa	ax Nu	ımber															
Ed .	Allbriton, Manager / (501) 262-1555											Cont	acted								
	Centennial Drive										Г	_	No	7							
поі	Springs, Arkansas, 71913										Yes	_	No L	4							
			(S = Sa							uring Inspe- sfactory, N		Evalu	iated)	ļ						
-	Permit	-	Flo	w Mea	surei	ment			-	Op	erations &	Main	tenan	ce	-	Sampling					
-	Records/Reports	-	Self	f-Moni	itorin	g Pro	gram	ì	-	Slu	dge Handli	ng/Di	isposa	l	-	Pollu	ution	Pre	venti	on	
-	Facility Site Review	-	i	nplian					Y		etreatment				-	Mul	time	dia			
-	Effluent/Receiving Waters	-	Lal	orato	ry				-	Sto	rm Water				-	Othe	er:				
		Se	ction	D: Su	mmai	ry of I	Findi	ngs/Co	ommen	ts (At	tach additio	nal s	heets i	f neces	sary)	1					
	See attached IU site visit form and PCI form																				
Na: Jim	me(s) and Signature(s) of Inspector) •				A		Dept		ironn	Fax iental Qual 0-0541 – Fa				ield	Date 12/8					
						+		<u>U</u>	ce – 3	·U1-32	U-UJ-11 — F	iA 30.	540-	2710		14/0	707				
Sig	nature of Reviewer					A	Ageno	cy/Offi	ice/Pho	ne and	Fax Numbe	ers				Dat	te				

POTW Pretreatment Program Industrial Site Visit

Name of Industry: <u>Triumph Airborne Structures, Inc.</u>								
Industry Contacts: Ed Albritton, Maint. Mgr.								
Γype of Industry: Milling of aircraft parts								
Date of Visit: <u>12/4/09 at 1030</u>								
1. Significant industrial user:	☑ Yes □ No □ Not Determined							
2. Pretreatment equipment or procedures?	✓Yes □No □N/A							
3. Pretreatment equipment maintained and operational?	✓Yes □No □N/A							
4. Hazardous waste generated or stored?	✓Yes □No □N/A							
5. Proper solid waste disposal?	✓Yes □No □N/A							
6. Solvent management/TTO control?	✓Yes □No □N/A							
7. Suitable sampling location?	✓Yes □No □N/A							
8. Appropriate self-monitoring procedures / equipment?	✓Yes □No □N/A							
9. Adequate spill prevention?	✓Yes □No □N/A							
10. Industry familiar with limits and requirements?	✓Yes □No □N/A							
Additional Comments: Facility was in complian	nce with their limits and requirements.							
Visit Conducted Ry: Iim McSwain	Date: 12/4/09							

	UNITE	Form Approved OMB No. 2040-0003						
•	SEPA NPDES (
		Section A: Nation	al Data Sy	ystem Coding				
1	Transaction Code N 2 5 3 A R 0 0 0 0 5 C	Insp	ec. Type Inspector Fac. Type 19 S 20 2					
	Inspection Work Days Faci	ility Evaluation Rating F	QA	R	Reserved			
	67 69	70 N 71	N 72	N 73 74 75		80		
		Section B	: Facility	Data				
incli	ne and Location of Facility Inspected (For indude POTW name and NPDES permit number)		, also	Entry Time/Date 1230 on 12/4/09		Permit Effective Date February 1, 2008		
118	<u>caster Oil Company</u> Belding Ave. Iot Springs, AR			Exit Time/Date 1310 on 12/4/09		Permit Expiration Date January 31, 2013		
Nan N/A	ne(s) of On-Site Representative(s)/Title(s)/Pho	one and Fax Number(s)			Othe	er Facility Data		
Scot 134	ne, Address of Responsible Official/Title/Phon t Wacaster, Owner Greenwood Springs, Arkansas 71903		Contacted Yes No ✓					
		Section C: Areas Eva (S = Satisfactory, M = Marginal, V						
-	Permit - F	low Measurement	- Op	erations & Maintenance	-	Sampling		
-	Records/Reports - Se	elf-Monitoring Program	- Slu	dge Handling/Disposal	-	Pollution Prevention		
-	Facility Site Review - C	Compliance Schedules	Y Pre	etreatment	-	Multimedia		
-	_	Laboratory		rm Water		Other:		
Section D: Summary of Findings/Comments (Attach additional sheets if necessary) See attached IU site visit form and PCI form								
Nar Jim	me(s) and Signature(s) of Inspector(s) McSwain	Agency/Office/\(\) AR Dept. of	Environn	Fax nental Quality – Hot Springs Field 0-0541 – Fax 501-520-5978	ı	Date		
		Offic	e – 301 - 32	U-U3-41 — FAX 3U1-32U-37/0		12/8/09		
Sign	nature of Reviewer	Agency/Office/	Phone and	Fax Numbers		Date		

POTW Pretreatment Program Industrial Site Visit

Name of Industry: <u>Wacaster Oil Company</u>							
Industry Contacts: Scott Wacaster, Owner							
Гуре of Industry: Bulk Fuel Storage							
Date of Visit: <u>12/4/09 at 1230</u>							
1. Significant industrial user:	☑Yes ☐No ☐Not Determined						
2. Pretreatment equipment or procedures?	✓Yes □No □N/A						
3. Pretreatment equipment maintained and operational?	✓Yes □No □N/A						
4. Hazardous waste generated or stored?	□Yes ☑No □N/A						
5. Proper solid waste disposal?	✓Yes □No □N/A						
6. Solvent management/TTO control?	□Yes ☑No □N/A						
7. Suitable sampling location?	✓Yes □No □N/A						
8. Appropriate self-monitoring procedures / equipment?	✓Yes □No □N/A						
9. Adequate spill prevention?	✓Yes □No □N/A						
10. Industry familiar with limits and requirements?	✓Yes □No □N/A						
Additional Comments: Facility was in compliance with their limits and requirements.							
Visit Conducted By: <u>Jim McSwain</u>	Date:12/4/09						

	UNITED STATES ENVIRONMENTAL PROTECTION AGENCY Washington, D.C. 20460											Form Approved OMB No. 2040-0003											
	NPDES Compliance Inspection Report																						
Section A: National Data System Coding																							
1																spec. Type Inspector Fac. Type I 19 S 20 2							
Remarks 0 0 5 C																							
	Inspection Work Days Facility Evaluation Rating BI 67 N 71 N 72						72	QA							Reserved								
Section B: Facility Data																							
incl	Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number) Entry Time/Date 1340 on 12/4/09												Permit Effective Date February 1, 2008										
Off	Mid American Distillation, Inc. Off of Hwy 270 on Mid America Road in Hot Springs, AR									Exit Time/Date 1420 on 12/4/09							Permit Expiration Date January 31, 2013						
											Other Facility Data												
Kei P.O	Name, Address of Responsible Official/Title/Phone and Fax Number Keith Mangham, Manager P.O. Box 2880 Hot Springs, Arkansas 71914									Yo	Contacted Yes No 🗹												
Section C: Areas Evaluated During Inspection (S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)																							
-	Permit	-	Flow	Measu	reme	nt	erations & Maintenance						-	Sampling									
-	Records/Reports	-	Self-M	Ionito						Slu	ndge Handling/Disposal -						-	Pollution Prevention					
-	Facility Site Review	-	1	liance	Sche	dules			Y		treatment					-	Multimedia						
-	Effluent/Receiving Waters	- Se	Labor	•	nary /	of Find	lings/	Com	- ment		rm Wate	m Water ch additional sheets if necessary				ccarv	-	Other:					
See attached IU site visit form and PCI form																							
Name(s) and Signature(s) of Inspectors) Jim McSwain						Agency/Office/Telephone/Fax AR Dept. of Environmental Quality – Hot Springs Field Office – 501-520-0541 – Fax 501-520-5978								Date 12/8/09									
								THE SECOND IN THE SECOND SECON															
Signature of Reviewer						Ager	ncy/O	/Phon	e and	Fax Numbers						Date							

POTW Pretreatment Program Industrial Site Visit

Name of Industry: Mid America Distillation, Inc.								
Industry Contacts: Keith Mangham, Manager								
Type of Industry: <u>Fuel Recycling</u>								
Date of Visit: <u>12/4/09 at 1340</u>								
1. Significant industrial user:	☑ Yes □ No	□Not Determined						
2. Pretreatment equipment or procedures?	☑ Yes □ No	$\square_{\mathbf{N}/\mathbf{A}}$						
3. Pretreatment equipment maintained and operational?	☑ Yes □ No	$\square_{\mathbf{N}/\mathbf{A}}$						
4. Hazardous waste generated or stored?	☑ Yes □ No	□N/A						
5. Proper solid waste disposal?	☑ Yes □ No	□N/A						
6. Solvent management/TTO control?	☑ Yes □ No	□N/A						
7. Suitable sampling location?	☑ Yes □ No	□N/A						
8. Appropriate self-monitoring procedures / equipment?	✓Yes □No	□n/a						
9. Adequate spill prevention?	☑ Yes □ No	□N/A						
10. Industry familiar with limits and requirements?	✓Yes □No	□n/a						
Additional Comments: Facility was in compliance with their limits and requirements.								
Visit Conducted By: Jim McSwain	Date:	12/4/09						