UNITED STATES ENVIRONMENTAL PROTECTION AGENCY Washington, D.C. 20460											Form Approved OMB No. 2040-0003												
'	SEPA NPDES Compliance Inspection Report																						
Section A: National Data System Coding																							
Transaction Code											Туре												
]												
Inspection Work Days Facility Evaluation Rating BI QA																							
Section B: Facility Data																							
incl	include POTW name and NPDES permit number) 1030											Entry Time/Date 1030 on 12/4/09					Permit Effective Date February 1, 2008						
Approx I mile north on HWV 727									Exit Time/Date 1105 on 12/4/09					Permit Expiration Date January 31, 2013									
	Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) Other Facility Data																						
Ed A	Ed Albritton, Maintenance Mgr. / (501) 262-1555																						
Nan	Name, Address of Responsible Official/Title/Phone and Fax Number																						
Ed A	Allbriton, Manager / (501) 262-1555											Con	tacted										
115 Centennial Drive																							
Hot Springs, Arkansas, 71913 Yes No No																							
Section C: Areas Evaluated During Inspection (S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)																							
-	Permit							erations & Maintenance -					-	Sampling									
-	Records/Reports	- Self-Monitoring Program -					S	udge Handling/Disposal -					-	Pollution Prevention									
-	Facility Site Review	•	Coı	nplian	ice Sc	e Schedules Y Pro					etreatment					-	- Multimedia						
-	Effluent/Receiving Waters	-	Lal	orato	ry				-	S	orm Water	rm Water -					- Other:						
		Section D: Summary of Findings/Comments (Attach additional sheets if necessary))													
See attached IU site visit form and PCI form																							
Name(s) and Signature(s) of Inspectors) Jim McSwain						A		R Dept		viron	mental Qua	Fax ental Quality – Hot Springs Field 0-0541 – Fax 501-520-5978					Date 12/8/09						
								Office = 501-520-0541 = 1 dx 501-520-5710								I MI U U J							
Signature of Reviewer							Agen	cy/Off	rice/Pho	ne an	Fax Numbers					Date							

POTW Pretreatment Program Industrial Site Visit

Name of Industry: <u>Triumph Airborne Structures, Inc.</u>										
Industry Contacts: Ed Albritton, Maint. Mgr.										
Type 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									
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	ce with their lin	nits and requirements.								
Visit Conducted By: Jim McSwain	Date:	12/4/09								