

 <p style="text-align: center;">UNITED STATES ENVIRONMENTAL PROTECTION AGENCY Washington, D.C. 20460</p> <h2 style="text-align: center;">NPDES Compliance Inspection Report</h2>	Form Approved OMB No. 2040-0003
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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	4	3	2	1	11	12	0	9	1	2	1	6	17	18	I	19	S	20	2	
Remarks																													
0	0	4	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>) Claridge Products City Of Harrison POTW(AR0034321)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">Entry Time/Date 1345 hrs /12-16-09</td> <td style="width:50%;">Permit Effective Date IU - n/a</td> </tr> <tr> <td>Exit Time/Date 1445 hrs /12-16-09</td> <td>Permit Expiration Date IU - n/a</td> </tr> </table>	Entry Time/Date 1345 hrs /12-16-09	Permit Effective Date IU - n/a	Exit Time/Date 1445 hrs /12-16-09	Permit Expiration Date IU - n/a
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Exit Time/Date 1445 hrs /12-16-09	Permit Expiration Date IU - n/a				
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) Harry Wagoner, Maintenance Supervisor / 870-743-2200	Other Facility Data				
Name, Address of Responsible Official/Title/Phone and Fax Number Harry Wagoner, Maintenance Supervisor / 870-743-2200 PO Box 910 Harrison, AR 72602	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)			
Permit	Flow Measurement	Operations & Maintenance	Sampling
Records/Reports	Self-Monitoring Program	Sludge Handling/Disposal	Pollution Prevention
Facility Site Review	Compliance Schedules	Pretreatment	Multimedia
Effluent/Receiving Waters	Laboratory	Storm Water	Other:

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

A NPDES Industrial User Inspection was performed on 12/16/09 in conjunction with a Pretreatment Compliance Inspection of the City of Harrison's Pretreatment Program. The inspection did not reveal any violations. The inspection revealed that the industry had a very cooperative relationship with the City and that it was doing a good job of pre-treating its waste stream to the City.

Name(s) and Signature(s) of Inspector(s) Bruce Kirkpatrick 	Agency/Office/Telephone/Fax AR Dept. of Environmental Quality-Jasper PHONE# 870-446-6170/FAX# 870-446-2181	Date 12/21/09
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date

POTW Pretreatment Program

Industrial Site Visit

Name of Industry: Claridge Products

Industry Contacts: Harry Wagoner

Type of Industry: Manufactures dry-erase boards, lecterns, corkboards and other classroom equipment

Date of Visit: 12/16/09

- | | | | |
|--|---|--|---|
| 1. Significant industrial user: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Determined |
| 2. Pretreatment equipment or procedures? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 3. Pretreatment equipment maintained and operational? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 4. Hazardous waste generated or stored? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> N/A |
| 5. Proper solid waste disposal? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 6. Solvent management/TTO control? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 7. Suitable sampling location? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 8. Appropriate self-monitoring procedures / equipment? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 9. Adequate spill prevention? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 10. Industry familiar with limits and requirements? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |

Additional Comments: none

Visit Conducted By: Bruce Kirkpatrick Date: 12/16/09