

June 14, 2011

Mr. Sammy Bates, Environmental Coordinator, R.E.M.
Rernington Arms Company, Inc
PO Box 400
Lonoke, AR 72086

AFIN: 43-00024, NPDES Permits No: AROOOI163, ARG250014, and ARR00A251,
Routine Compliance Inspection

Dear Mr. Bates:

On June 11, 2009, Steve Johnson, Inspector Supervisor, Water Division and I performed a routine compliance inspection of the above referenced facility in accordance with the provisions of the Federal Clean Water Act, the Arkansas Water and Air Pollution Control Act, and the regulations promulgated thereunder. The inspection revealed the following:

NPDES Permit AROOOI163 – The following items were noted:

1. The activated sludge (domestic wastewater) treatment plant appeared to be overloaded with solids. The mixed liquor suspended solids concentration was around 4,000 mg/l according to your operator and the sludge blanket in the clarifier was less than 2 feet from the bottom of the weirs. At the time of the inspection, solids were bulking over the weir in one location. This is a violation of Part III,B.1.a. of the permit which requires the facility to be properly operated and maintained at all times. Consideration should be given to more frequent wasting from this facility to keep the sludge age and food to microorganism ratio at optimum levels. Solids management is one of the primary causes of problem at activated sludge plants.
2. The recent floods have resulted in the death of the cattails in your constructed wetlands. The required vegetation in the constructed wet lands must be replanted. Additionally, there were a few willow trees in the wetland cells that will need to be removed. This is a violation of Part III,B.1.a. of the permit which requires the facility to be properly operated and maintained at all times.
3. I am also somewhat concerned about excessive chlorination at this facility. It was noted that chlorine tablets were being used in the tablet chlorinator and in the effluent weir trough. While excess chlorination should be removed in the constructed wetlands, please be aware the chlorine can affect the vegetation in the wetland cells.

Mr. Sammy Bates, Remington **Arms**, Inc.
June 14, 2011
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4. A review of DMR calculations reveals that fecal coliform is being reported to the tenth of a colony per 100 ml. In March 2011, you reported a monthly average of 5.5 colonies per 100 ml. The calculated geometric mean for the month of March

NPDES Permit ARG250014 – No violations were noted.

NPDES Permit ARR00A251 – The pH sample collected during the first half of this year exceeded the holding time of 15 minutes. The sample was collected on April 4, 2011 and analyzed by American Interplex on April 5, 2011. As we discussed, you will probably have to run pH samples in house because of the nature of these stormwater samples. If you initiate in house monitoring for stormwater pH values, please be sure to implement a full QA/QC program for the test. This includes doing duplicate analysis.

Construction Permit AR0001163C – A review of the file reveals the Department has not received a construction complete report. Paragraph 2 of this permit requires a construction complete report signed by an engineer licensed in the state of Arkansas be submitted within 30 days of the completion of construction.

The above items require your immediate attention. Please submit a written response to these findings to Cindy Garner, Water Division Enforcement Branch Manager. This response should be mailed to the address below. This response should contain documentation describing the course of action taken to correct each item noted. This corrective action should be completed as soon as possible, and the written response with all necessary documentations (i.e. picture) is due by June 24, 2011.

If I can be any assistance, please contact me at benson@adeq.state.ar.us or 501-683-0827.

Sincerely,



Dennis Benson
District 9 Field Inspector
Water Division

cc: Water Division Enforcement Branch
Water Division Permits Branch

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
Washington, D.C. 20460Form Approved
OMB No. 2040-0003
Approval Expires 7-31-85

NPDES Compliance Inspection Report

Section A: National Data System Coding

Transaction Code	NPDES										Yr/Mo/Day				Inspec. Type	Inspector	Fac. Type	
1 <input type="text" value="N"/> 2 <input type="text" value="5"/> 3 <input type="text" value="A"/> <input type="text" value="R"/> <input type="text" value="G"/> 2 <input type="text" value="5"/> 0 <input type="text" value="0"/> 1 <input type="text" value="4"/> 11 <input type="text" value="1"/> 12 <input type="text" value="1"/> 1 <input type="text" value="0"/> 6 <input type="text" value="0"/> 9 17 <input type="text" value="18"/> C 19 <input type="text" value="S"/> 20 <input type="text" value="2"/>																		
Remarks																		
Inspection Work Days				Facility Evaluation Rating				BI	QA	-----				Reserved-----				
67 <input type="text" value=" "/> <input type="text" value=" "/> <input type="text" value=" "/> <input type="text" value=" "/> 69	70 <input type="text" value=" "/> <input style="border: 1px solid black; width: 1.5em; height: 1.5em; text-align: center; vertical-align: middle;" type="text" value="3"/> 71 <input type="text" value=" "/> <input style="border: 1px solid black; width: 1.5em; height: 1.5em; text-align: center; vertical-align: middle;" type="text" value="N"/> 72 <input type="text" value=" "/> <input style="border: 1px solid black; width: 1.5em; height: 1.5em; text-align: center; vertical-align: middle;" type="text" value="N"/> 73 <input type="text" value=" "/> <input type="text" value=" "/> 74 <input type="text" value=" "/> 75 <input type="text" value=" "/> 80	71 <input type="text" value=" "/> <input style="border: 1px solid black; width: 1.5em; height: 1.5em; text-align: center; vertical-align: middle;" type="text" value="N"/> 72 <input type="text" value=" "/> <input style="border: 1px solid black; width: 1.5em; height: 1.5em; text-align: center; vertical-align: middle;" type="text" value="N"/> 73 <input type="text" value=" "/> <input type="text" value=" "/> 74 <input type="text" value=" "/> 75 <input type="text" value=" "/> 80	74 <input type="text" value=" "/> 75 <input type="text" value=" "/> 80	74 <input type="text" value=" "/> 75 <input type="text" value=" "/> 80	74 <input type="text" value=" "/> 75 <input type="text" value=" "/> 80	74 <input type="text" value=" "/> 75 <input type="text" value=" "/> 80	74 <input type="text" value=" "/> 75 <input type="text" value=" "/> 80	74 <input type="text" value=" "/> 75 <input type="text" value=" "/> 80	74 <input type="text" value=" "/> 75 <input type="text" value=" "/> 80	74 <input type="text" value=" "/> 75 <input type="text" value=" "/> 80	74 <input type="text" value=" "/> 75 <input type="text" value=" "/> 80	74 <input type="text" value=" "/> 75 <input type="text" value=" "/> 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)	Entry Time/Date 09:15 AM ON 6/9/11	Permit Effective Date 12/1/07	
Remington Arms Company, Inc – From North Little Rock go east on I-40 towards Lonoke. Take the Remington Road exit off of I-40 (~18 miles east of NLR). Plant is at southwest corner of I-40 and Remington Road.(Highway 15)	Exit Time/Date 11:37 AM ON 6/9/11	Permit Expiration Date 11/30/12	
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) Mr. Sammy Bates, Environmental Coordinator, R.E.M.	Other Facility Data		
Name, Address of Responsible Official/Title/Phone and Fax Number Charles P. Rink, Jr. Plant Manager PO Box 400 Lonoke, AR 72086 501-676-3161			
Contacted Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			

Section C: Areas Evaluated During Inspection

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

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

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

No violations were noted at the time of the inspection

Name(s) and Signature(s) of Inspector(s) Dennis Benson	Agency/Office/Telephone/Fax AR Dept. of Environmental Quality- (501) 683-0827/(501) 682-0910 (Fax)	Date 06/09/11
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date

SECTION A: PERMIT VERIFICATION

PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS

S M U NA NE

DETAILS:

1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE: Y N NA NE

2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES: Y N NA NE

3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT: Y N NA NE

4. ALL DISCHARGES ARE PERMITTED: Y N NA NE

SECTION B: RECORDKEEPING AND REPORTING EVALUATION

RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT

S M U NA NE

DETAILS:

1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRS: Y N NA NE

2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE: S M U NA NE

a. DATES AND TIME(S) OF SAMPLING: Y N NA NE

b. EXACT LOCATION(S) OF SAMPLING: Y N NA NE

c. NAME OF INDIVIDUAL PERFORMING SAMPLING: Y N NA NE

d. ANALYTICAL METHODS AND TECHNIQUES: Y N NA NE

e. RESULTS OF CALIBRATIONS: Y N NA NE

f. RESULTS OF ANALYSES: Y N NA NE

g. DATES AND TIMES OF ANALYSES: Y N NA NE

h. NAME OF PERSON(S) PERFORMING ANALYSES: Y N NA NE

3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE: S M U NA NE

4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR: S M U NA NE

5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA: Y N NA NE

SECTION C: OPERATIONS AND MAINTENANCE

TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED

S M U NA NE

DETAILS:

1. TREATMENT UNITS PROPERLY OPERATED: S M U NA NE

2. TREATMENT UNITS PROPERLY MAINTAINED: S M U NA NE

3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED: S M U NA NE

4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE: S M U NA NE

5. ALL NEEDED TREATMENT UNITS IN SERVICE: S M U NA NE

6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED: S M U NA NE

7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED: S M U NA NE

8. OPERATION AND MAINTENANCE MANUAL AVAILABLE: Y N NA NE

9. STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED: Y N NA NE

10. PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED: Y N NA NE

11. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR: Y N NA NE

12. IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED: Y N NA NE

13. HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS: Y N NA NE

14. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT: Y N NA NE

15. IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT: Y N NA NE

SECTION D: SAMPLING

PERMITTEE SAMPLING MEETS PERMIT REQUIREMENTS		<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:		
1. SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
2. LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
3. FLOW PROPORTIONED SAMPLES OBTAINED WHEN REQUIRED BY PERMIT:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
4. SAMPLING AND ANALYSES COMPLETED ON PARAMETERS SPECIFIED IN PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
5. SAMPLING AND ANALYSES PERFORMED AT FREQUENCY SPECIFIED IN PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
6. SAMPLE COLLECTION PROCEDURES ADEQUATE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
a. SAMPLES REFRIGERATED DURING COMPOSITING:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
b. PROPER PRESERVATION TECHNIQUES USED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
c. CONTAINERS AND SAMPLE HOLDING TIMES CONFORM TO 40 CFR 136:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
7. IF MONITORING IS PERFORMED MORE OFTEN THAN REQUIRED ARE RESULTS REPORTED ON THE DMR:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	

SECTION E: FLOW MEASUREMENT

PERMITTEE FLOW MEASUREMENT MEETS PERMIT REQUIREMENTS		<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS: <u>Noncontact cooling water with consistent flow</u>		
1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED: <u>TYPE OF DEVICE:</u>	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
2. FLOW MEASURED AT EACH OUTFALL AS REQUIRED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
3. SECONDARY INSTRUMENTS (TOTALIZERS, RECORDERS, ETC.) PROPERLY OPERATED AND MAINTAINED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
4. CALIBRATION FREQUENCY ADEQUATE:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
5. RECORDS MAINTAINED OF CALIBRATION PROCEDURES:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
6. CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
7. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
8. FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
9. HEAD MEASURED AT PROPER LOCATION:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	

SECTION F: LABORATORY

PERMITTEE LABORATORY PROCEDURES MEET PERMIT REQUIREMENTS		<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:		
1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(B) FOR SLUDGES) :	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
3. SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
4. QUALITY CONTROL PROCEDURES ADEQUATE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
5. DUPLICATE SAMPLES ARE ANALYZED \geq 10% OF THE TIME:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
6. SPIKED SAMPLES ARE ANALYZED \geq 10% OF THE TIME:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
7. COMMERCIAL LABORATORY USED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
a. LAB NAME: <u>American Interplex</u>		
b. LAB ADDRESS:		
c. PARAMETERS PERFORMED: <u>COD, TSS, O&G, pH</u>		
8. BIOMONITORING PROCEDURES ADEQUATE:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
a. PROPER ORGANISMS USED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
b. PROPER DILUTION SERIES FOLLOWED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
c. PROPER TEST METHODS AND DURATION:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
d. RETESTS AND/OR TRE PERFORMED AS REQUIRED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	

SECTION G: EFFLUENT/RECEIVING WATERS OBSERVATIONS

BASED ON VISUAL OBSERVATIONS ONLY

S M U NA NE**DETAILS:**

OUTFALL #:	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOATING SOLIDS	COLOR	OTHER
001	None	none	none	none	none	none	none

SECTION H: SLUDGE DISPOSAL

SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS

S M U NA NE**DETAILS:**

1. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY: S M U NA NE
2. SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503: S M U NA NE
3. FOR LAND APPLIED SLUDGE, TYPE OF LAND APPLIED TO: (E.G., FOREST, AGRICULTURAL, PUBLIC CONTACT SITE):

SECTION I: SAMPLING INSPECTION PROCEDURES

SAMPLE RESULTS WITHIN PERMIT REQUIREMENTS

S M U NA NE**DETAILS:**

1. SAMPLES OBTAINED THIS INSPECTION: Y N NA NE
2. TYPE OF SAMPLE: GRAB: COMPOSITE: METHOD: FREQUENCY:
3. SAMPLES PRESERVED: Y N NA NE
4. FLOW PROPORTIONED SAMPLES OBTAINED: Y N NA NE
5. SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE: Y N NA NE
6. SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE: Y N NA NE
7. SAMPLE SPLIT WITH PERMITTEE: Y N NA NE
8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED: Y N NA NE
9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT: Y N NA NE

SECTION J: STORM WATER POLLUTION PREVENTION PLAN

STORM WATER MANAGEMENT MEETS PERMIT REQUIREMENTS

S M U NA NE**DETAILS:**

1. SWPPP UPDATED AS NEEDED: DATE OF LAST UPDATE: Y N NA NE
2. SITE MAP INCLUDING ALL DISCHARGES AND SURFACE WATERS: Y N NA NE
3. POLLUTION PREVENTION TEAM IDENTIFIED: Y N NA NE
4. POLLUTION PREVENTION TEAM PROPERLY TRAINED: Y N NA NE
5. LIST OF POTENTIAL POLLUTANT SOURCES: Y N NA NE
6. LIST OF POTENTIAL SOURCES AND PAST SPILLS AND LEAKS: Y N NA NE
7. ALL NON-STORM WATER DISCHARGES ARE AUTHORIZED: Y N NA NE
8. LIST OF STRUCTURAL BMPs: Y N NA NE
9. LIST OF NON-STRUCTURAL BMPs: Y N NA NE
10. BMPs PROPERLY OPERATED AND MAINTAINED: Y N NA NE
11. INSPECTIONS CONDUCTED AS REQUIRED: Y N NA NE

FLOW CALCULATION SHEET
NCCW has a consistent flow from unit operation.

Date: _____ Time: _____

Head in Inches: _____ Feet: _____

Type & Size of Primary Flow Measurement Device:

Name & Model of Secondary Flow Measurement Device:

Recorded Flow at Date & Time Listed Above: _____ (Facility Flow Meter)

Calculated Flow at Date & Time Listed Above:

(Flow is calculated using flow charts in: ISCO Open Channel Flow Measurement Handbook-5th Edition)

$$\% \text{ Error} = \frac{\text{Recorded Value} - \text{Calculated Value}}{\text{Calculated Value}} \times 100$$

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$$\% \text{ Error} = \frac{\text{Recorded Value} - \text{Calculated Value}}{\text{Calculated Value}} \times 100$$

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$$\% \text{ Error} = \frac{\text{Recorded Value} - \text{Calculated Value}}{\text{Calculated Value}} \times 100$$

Comments:

DMR Calculation Check

Reporting Period: From 11 Year 04 Month 01 Day To 11 Year 04 Month 30 Day

Parameter Checked: COD

	Loading		Concentration	
	Mass		Monthly	
Mo.	Daily	Avg. -	Max-	Mo. Avg. - mg/l
	lbs/day	lbs/day		Daily Max. - mg/l
Reported Value:	<u>N/A</u>	<u>N/A</u>	<u><10</u>	<u><10</u>
Calculated Value:	<u>N/A</u>	<u>N/A</u>	<u><10</u>	<u><10</u>
Permit Value:	<u>N/A</u>	<u>N/A</u>	<u>50</u>	<u>75</u>

If calculated value does not equal reported value, explain:

Remington®

Water Division Enforcement Branch Manager
Arkansas Department of Environmental Quality
5301 Northshore Drive
North Little Rock, AR 72118-5317

AFIN: 43-00024, NPDES Permits No: AR0001163, ARG250014, and ARR00A251

To Whom It May Concern:

On June 11, 2011 Mr. Dennis Benson, Inspector and Steve Johnson, Inspector Supervisor conducted a routine compliance evaluation inspection of the Remington Arms ammunition plant. The following items were noted during the inspection and these have been addressed by Remington as follows:

AR0001163

1. The activated sludge (domestic wastewater) treatment plant appeared to be overloaded with solids. The mixed liquor suspended solids concentration was around 4,000 mg/l according to your operator and the sludge blanket in the clarifier was less than 2 feet from the bottom of the weirs. At the time of the inspection, solids were bulking over the weir in one location. This is a violation of Part III,B.1.a. of the permit which requires the facility to be properly operated and maintained at all times. Consideration should be given to more frequent wasting from this facility to keep the sludge age and food to microorganism ratio at optimum levels. Solids management is one of the primary causes of problem at activated sludge plants.

Approximately 20,000 gallons of solids were disposed of off site on Monday, June 20. The operator has been instructed to reinstate weekly 30 minute settleability tests (see log sheet) and to waste sludge as required to prevent excess solids in the clarifier.

2. The recent floods have resulted in the death of the cattails in your constructed wetlands. The required vegetation in the constructed wet lands must be replanted. Additionally, there were a few willow trees in the wetland cells that will need to be removed. This is a violation of Part III,B.1.a. of the permit which requires the facility to be properly operated and maintained at all times. **Remington is in the process of identifying and contracting with a landscape contractor to replant the cattails and remove the willows. This will be accomplished ASAP.**

3. I am also somewhat concerned about excessive chlorination at this facility. It was noted that chlorine tablets were being used in the tablet chlorinator and in the effluent weir trough. While excess chlorination should be removed in the constructed wetlands, please be aware the chlorine can affect the vegetation in the wetland cells.

The wastewater treatment operator was instructed to discontinue the use of chlorine tablets in the weir trough.

4. A review of DMR calculations reveals that fecal coliform is being reported to the tenth of a colony per 100 ml. In March 2011, you reported a monthly average of 5.5 colonies per 100 ml. The calculated geometric mean for the month of March

Fecal Coliform will be reported in whole numbers only in the future.

5. **NPDES Permit ARG250014** – No violations were noted.
6. **NPDES Permit ARR00A251** – The pH sample collected during the first half of this year exceeded the holding time of 15 minutes. The sample was collected on April 4, 2011 and analyzed by American Interplex on April 5, 2011. As we discussed, you will probably have to run pH samples in house because of the nature of these stormwater samples. If you initiate in house monitoring for stormwater pH values, please be sure to implement a full QA/QC program for the test. This includes doing duplicate analysis.

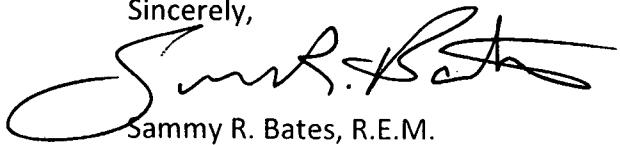
Stormwater pH will be done at the time the sample is collected and QA/QC data will be logged on the chain of custody used for the sample (see attached blank chain-of-custody form)

7. **Construction Permit AR0001163C** – A review of the file reveals the Department has not received a construction complete report. Paragraph 2 of this permit requires a construction complete report signed by an engineer licensed in the state of Arkansas be submitted within 30 days of the completion of construction.

See attached letter submitted to ADEQ January 6, 2011 from Rex Robbins, FTN stating the construction activities have been completed. Please note that the letter is dated January 6, 2010, which is a common dating error at the beginning of a new year, but the file extension at the bottom of the letter correctly denotes it is 1-6-2011.

I trust the responses outlined above in bold italics to the items noted during the inspection are satisfactory. If you have any questions or require more information please do not hesitate to contact me.

Sincerely,



Sammy R. Bates, R.E.M.

Environmental Coordinator, Remington Arms



water resources / environmental consultants

3 Innwood Circle, Suite 220 • Little Rock, AR 72211-2449 • (501) 225-7779 • Fax (501) 225-6738

January 6, 2010

Ms. Cindy Garner
Water Division - Enforcement Section
Arkansas Department of Environmental Quality
5301 Northshore Drive
North Little Rock, AR 72118

RE: Remington Arms Company - Construction Permit
NPDES Permit No. AR0001163C
FTN No. 6425-045

Dear Ms. Garner:

On behalf of the Remington Arms Company (Remington), we are submitting this certification regarding the completion of construction activities at the Remington facility located near Lonoke, as covered by the referenced construction permit. The permit was primarily concerned with the conversion of an existing diversion (equalization) tank into an activated sludge treatment unit.

FTN has made an inspection visit to the site and reviewed the installation. The installation of the system is complete and was constructed in compliance with the plans and specifications prepared by FTN Associates, Ltd. and submitted to the Arkansas Department of Environmental Quality (ADEQ) with the construction permit application.

If you have any questions or comments relating to this certification, please do not hesitate to contact me or Nick Siria at (501) 225-7779.

Kindest regards,
FTN Associates Ltd.

A handwritten signature in black ink that reads 'Rex Robbins'.

Rex M. Robbins, PE
Senior Project Manager

RMR/rml

CC: Sammy Bates (Remington)

R:\WP_FILES\6425-045\CORRESPONDENCE\L-C GARNER 01-06-11\L-C GARNER 01-06-11.DOC

A handwritten signature 'HCS' is enclosed within a black-outlined oval.

SETTLEABILITY TEST



8600 Kanis Road
 Little Rock, AR 72204-2322
 (501) 224-5060
 FAX (501) 224-5072

CHAIN OF CUSTODY / ANALYSIS REQUEST FORM

Client:			PO No.		NO OF	ANALYSES REQUESTED										PAGE OF				
						SAMPLE MATRIX												AIC CONTROL NO:		
Project Reference:			W A T O R E S		B O T T L E S											AIC PROPOSAL NO:				
			G R A B C O M P E R S												Carrier:					
Project Manager:			G R A B C O M P E R S		B O T T L E S											Received on Ice (4°C)?				
			W A T O R E S												YES NO					
Sampled By:			G R A B C O M P E R S		B O T T L E S											Remarks				
			G R A B C O M P E R S																	
AIC No.			Sample Identification		Date/Time Collected	G R A B C O M P E R S		B O T T L E S											Field pH calibration on _____ @ _____ Buffer:	
			Container Type		Preservative		G = Glass P = Plastic		V = VOA vials		H = HCl to pH2		T = Sodium Thiosulfate							
															NO = none S = Sulfuric acid pH2 N = Nitric acid pH2		B = NaOH to pH12		Z = Zinc acetate	
Turnaround Time Requested: (Please circle) NORMAL or EXPEDITED IN _____ DAYS Expedited results requested by: _____ Who should AIC contact with questions: _____ Phone: _____ Fax: _____ Report Attention to: _____ Report Address to: _____									Relinquished By: _____			Date/Time		Received By: _____		Date/Time				
									Relinquished By: _____			Date/Time		Received in Lab By: _____		Date/Time				
Comments: _____																				
5/01		FORM 0060																		

Remington.®

Remington Arms Company, Inc.
2592 Arkansas Hwy. 15N
P.O. Box 400
Lonoke, AR 72086-0400

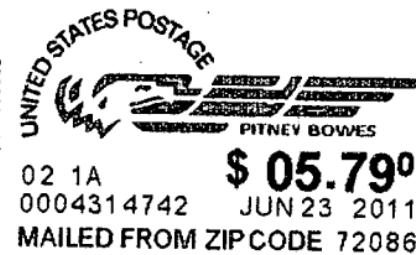
RETURN SERVICE REQUESTED

0765 6906 0000 0572 9002



0765 6906 0000 0572 9002

ADEQ, NPDES Enforcement
5301 Northshore Drive
North Little Rock, AR 72118



www.remington.com

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