

ADEQ

ARKANSAS
Department of Environmental Quality

October 4, 2016

John Morgan
Arkansas Electric Cooperative
PO Box 194208
Little Rock, AR 72219

RE: Magnet Cove Generating Station Inspection
AFIN: 30-00337 Permit No.: ARR000955

Dear Mr. Morgan,

On August 25, 2016, I performed an Industrial Stormwater 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. A copy of the inspection report is enclosed for your records.


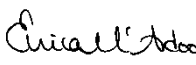

No violations were noted at the time of the inspection. Please refer to the attached inspection report for any comments.

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

Sincerely,



Erica McAdoo
District 9 Field Inspector
Office of Water Quality

 A R K A N S A S Department of Environmental Quality		WATER DIVISION INSPECTION REPORT				
		AFIN: 30-00337		PERMIT #: ARR000955		DATE: 8/25/2016
		COUNTY: 30 Hot Spring		PDS #: 093114		MEDIA: WN
		GPS LAT: 34.4299 LONG: -92.8342 LOCATION: General Area				
FACILITY INFORMATION			INSPECTION INFORMATION			
NAME: Magnet Cove Generating Station LOCATION: 410 Henderson Rd CITY: Malvern			FACILITY TYPE: 2 - Industrial	INSPECTOR ID#: 27312 S - State		
			FACILITY EVALUATION RATING: 5 - Satisfactory		INSPECTION TYPE: Industrial Stormwater	
			DATE(S): 8/25/2016	ENTRY TIME: 10:00	EXIT TIME: 12:30	PERMIT EFFECTIVE DATE: 7/1/2014 PERMIT EXPIRATION DATE: 6/30/2019
RESPONSIBLE OFFICIAL			FAYETTEVILLE SHALE RELATED: N			
NAME / TITLE: John Morgan / COMPANY: Arkansas Electric Cooperative MAILING ADDRESS: PO Box 194208 CITY, STATE, ZIP: Little Rock AR 72219 PHONE & EXT. / FAX: 501-467-3233 / EMAIL: john.morgan@aecc.com			FAYETTEVILLE SHALE VIOLATIONS: N			
CONTACTED DURING INSPECTION: Yes			INSPECTION PARTICIPANTS			
			NAME/TITLE/PHONE/FAX/EMAIL/ETC.: Rob Smith, Plant Manager John Morgan Casey Vickerson Clark Baker, ADEQ			
AREA EVALUATIONS						
(S=Satisfactory, M=Marginal, U=Unsatisfactory, N=Not Applicable/Evaluated)						
S	PERMIT	N	FLOW MEASUREMENT	S	STORMWATER	
S	RECORDS/REPORTS	N	LABORATORY	S	FACILITY SITE REVIEW	
S	OPERATION & MAINTENANCE	S	EFFLUENT/RECEIVING WATER	S	SELF-MONITORING PROGRAM	
N	SAMPLING	N	SLUDGE HANDLING/DISPOSAL	N	PRETREATMENT	
**	OTHER:					
SUMMARY OF FINDINGS						
No violations were observed during this inspection.						
GENERAL COMMENTS						
INSPECTOR'S SIGNATURE:  Erica McAdoo				DATE: 9/25/2016		
SUPERVISOR'S SIGNATURE:  Clark Baker				DATE: 10/3/2016		

Inspection Form Legend:

S = Satisfactory, M = Marginal, U = Unsatisfactory, Y = Yes, N = No, NI = Not Implemented, NA = Not Applicable, NE = Not Evaluated –

If Y and a NI are check it means it is in the SWPPP but not implemented in the field which is a violation.

SECTION A: PERMIT VERIFICATION	
PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS	<input checked="" type="checkbox"/> S " M " U " NA " NE
1.CORRECT NAME AND MAILING ADDRESS OF PERMITTEE:	<input checked="" type="checkbox"/> Y " N " NA " NE
2.NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES:	<input checked="" type="checkbox"/> Y " N " NA " NE
3.NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT:	<input checked="" type="checkbox"/> Y " N " NA " NE
4.ALL DISCHARGES ARE PERMITTED:	<input checked="" type="checkbox"/> Y " N " NA " NE
Comments:	
SECTION B: STORM WATER POLLUTION PREVENTION PLAN EVALUATION	
PERMITTEE SWPPP MEETS PERMIT REQUIRMENTS	<input checked="" type="checkbox"/> S " M " U " NA " NE
1. Is the SWPPP available for review by ADEQ? (Part 4.4)	<input checked="" type="checkbox"/> Y " N " NI " NA " NE
2. Has SWPPP been updated since 07/01/2014, or later if required? (Part 4.1, Part 4.5)	<input checked="" type="checkbox"/> Y " N " NI " NA " NE
3. Does the SWPPP contain facility name, general permit tracking number, facility physical address, and SIC and NAICS codes? (Part 4.2.1)	<input checked="" type="checkbox"/> Y " N " NI " NA " NE
4. Pollution Prevention Team	
A. Does the SWPPP identify specific individuals or positions?(Part 4.2.2)	<input checked="" type="checkbox"/> Y " N " NI " NA " NE
B. Does the SWPPP outline the responsibilities of each member of the Pollution Prevention Team? (Part 4.2.2)	<input checked="" type="checkbox"/> Y " N " NI " NA " NE
5. Does the SWPPP contain a facility description (process diagram, general layout, storage of raw materials, the flow of goods and materials through the facility and seasonal variations)? (Part 4.2.3)	<input checked="" type="checkbox"/> Y " N " NI " NA " NE
6. Does the facility site map contain the following items?	
A) The size of the property in acres? (Part 4.2.3.1)	<input checked="" type="checkbox"/> Y " N " NI " NA " NE
B) The location and extent of significant structures and impervious surfaces? (Part 4.2.3.2)	<input checked="" type="checkbox"/> Y " N " NI " NA " NE
C) The direction of stormwater flow using arrows? (Part 4.2.3.3)	<input checked="" type="checkbox"/> Y " N " NI " NA " NE
D) The locations of all existing structural control measures? (Part 4.2.3.4)	<input checked="" type="checkbox"/> Y " N " NI " NA " NE
E) The locations of all receiving wasters in the immediate vicinity of the facility? (Part 4.2.3.5)	<input checked="" type="checkbox"/> Y " N " NI " NA " NE
F) The locations of all stormwater conveyances including ditches, pipes, and swales? (Part 4.2.3.6)	<input checked="" type="checkbox"/> Y " N " NI " NA " NE
G) The locations of potential pollutant sources? (Part 4.2.3.7)	<input checked="" type="checkbox"/> Y " N " NI " NA " NE
H) The locations of all stormwater monitoring points? (Part 4.2.3.8)	<input checked="" type="checkbox"/> Y " N " NI " NA " NE
I) The locations of stormwater inlets and outfalls with unique identification code for each outfall with indications if one or more outfall is being treated as "substantially identical" and an approximate outline of the areas draining to each outfall? (Part 4.2.3.9)	<input checked="" type="checkbox"/> Y " N " NI " NA " NE
J) Where the stormwater discharges to municipal separate storm sewer system (MS4), if applicable? (Part 4.2.3.10)	" Y " N " NI <input checked="" type="checkbox"/> NA " NE
K) The locations and descriptions of all non-stormwater discharges identified in the SWPPP? (Part 4.2.3.11)	<input checked="" type="checkbox"/> Y " N " NI " NA " NE
L) The locations of the following activities if they are exposed to precipitation? (Part 4.2.3.12)	<input checked="" type="checkbox"/> Y " N " NI " NA " NE
Fueling Stations	<input checked="" type="checkbox"/> Y " N " NI " NA " NE
Vehicle and equipment maintenance and/or cleaning areas	" Y " N " NI <input checked="" type="checkbox"/> NA " NE
Loading and unloading areas	" Y " N " NI <input checked="" type="checkbox"/> NA " NE
Locations used for the treatment, storage, or disposal of waste	" Y " N " NI <input checked="" type="checkbox"/> NA " NE
Liquid storage tanks	" Y " N " NI <input checked="" type="checkbox"/> NA " NE
Processing and storage areas	" Y " N " NI <input checked="" type="checkbox"/> NA " NE
Immediate access roads and rail lines used or traveled by carriers of raw materials, manufactured products, waste material, or by-products used or created by the facility	" Y " N " NI <input checked="" type="checkbox"/> NA " NE
Transfer areas for substances in bulk	" Y " N " NI <input checked="" type="checkbox"/> NA " NE
Machinery	" Y " N " NI <input checked="" type="checkbox"/> NA " NE
M) The locations and sources of run-on to the site from adjacent property that contains significant quantities of pollutants? (Part 4.2.3.13)	" Y " N " NI <input checked="" type="checkbox"/> NA " NE

7. A description of potential pollutant sources	
A) A list of industrial activities exposed to stormwater (Part 4.2.4.1)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
B) A list of pollutants associated with each identified activity, including all significant materials that have been handled, treated, stored, or disposed, and that have been exposed to stormwater in the 3 years prior to the SWPPP date (Part 4.2.4.2)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
C) Locations where spills/leaks could occur that may contribute pollutants to stormwater discharges and the corresponding outfall(s) (Part 4.2.4.3)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
D) A list of significant spills and significant leaks of toxic or hazardous pollutants that have occurred in areas exposed to precipitation or drained to a stormwater conveyance for three years prior to the SWPPP date (Part 4.2.4.3)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
E) Measures to identify and eliminate Non-stormwater Discharges (Part 4.2.4.4)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
F) Certification that outfalls have been tested for illicit Non-stormwater Discharges (Part 4.2.4.4)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
G) Location of storage piles containing salt used for deicing or other commercial or industrial purposes (Part 4.2.4.5)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
H) A summary of existing discharge sampling data (Part 4.2.4.6)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
8. Measures and Controls (Part 4.2.5)	
A) Does SWPPP describe stormwater controls appropriate for the facility?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
B) Have the selected controls been implemented?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
9. Documentation of:	
A) Good Housekeeping (Part 4.2.6.1.1)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
B) Preventative Maintenance (Part 4.2.6.1.2)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
C) Spills and Response Procedures (Part 4.2.6.1.3)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
D) Employee Training (Part 4.2.6.1.4)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
E) Monitoring – Benchmark, ELG, other (Part 4.2.6.2.1)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
F) Sample Location(s), Parameters, Limits, and Procedures (Part 4.2.6.2.2)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
G) Inspections (Part 4.2.6.3)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
a. Routine	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
b. Comprehensive	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
c. Name of Inspector	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
d. Schedule for Inspections	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
e. Specific items inspected, including outfalls	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
10. Does stormwater discharge to a 303(d) listed or TMDL stream? (Part 4.2.7.1)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
If yes, are additional requirement met?	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
11. Does stormwater direct discharge to an ERW, NSW, or ESW? (Part 4.2.7.2)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
If yes, are additional requirement met?	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
12. Is the SWPPP signed and certified? (Part 4.2.8)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE

Comments::

SECTION C: MONITORING & INSPECTIONS

PERMITTEE MONITORING MEETS PERMIT REQUIRMENTS	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
1. Is the facility one of the four Effluent Guideline Facilities in the Permit? (Cement MFG, Fertilizer MFG, Steam Electric coal pile, Paving and Roofing Materials, or Airport Deicing)(Part 3.3.1)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
A) Are all outfalls from the regulated process being sampled? (Part 3.3.2)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
B) If coal pile run off is monitored, are all other stormwater flows excluded? (Part 3.3.1)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
C) If airport with annual jet departures ≥ 1000, is effluent limit met? (Part 3.3.1)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
B) If airport, is at least 60% of deicing fluid collected? (Part 3.3.1)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
2. Which of the monitoring categories is this facility subject to: (Parts 1.5, 3.4)	
A) Are samples being collected for each monitoring period (annually)? (Part 3.6)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
B) Are samples being collected from the location specified in the NOI and SWPPP (Part 3.7)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
C) Has the permittee determined that some of the outfalls are similar? (Part 3.8.1)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
Are the conditions on the ground still the same as documented for the similar outfalls (Part 3.8.1)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
D) Are all parameters for the monitoring category being sampled and analyzed? (Part 3.4)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
E) Were the samples collected during a measureable storm event? (Part 3.8.2.2)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
F) Were the samples properly preserved and analyzed? (Part 3.8.2.4)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE

G) Are the sample locations suitable for the collection of a representative sample? (Part 3.8.2)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
3. Has any of the monitoring revealed an exceedance of the benchmark values for this facility?(Part 3.12.1)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
A) Has a process to develop a corrective action plan been started within 30 days of exceedances? (Part 3.12.1)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
B) Is the exceedance attributed to natural background pollutant level? (Part 3.12.2)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
C) If the exceedance is naturally occurring, has the Department been notified? (Part 3.12.2.3)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
4. Inspections (Part 5.1)	
A) Visual Site Inspections (minimum 4/year) (Part 5.1.1)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
B) At least one visual inspection conducted during a rain event	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
C) Inspections recorded and include: date of inspection, person doing inspection; major observations, and corrective actions required.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
D) Comprehensive Site Compliance Evaluation (Annual) (Part 5.1.2)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE

Comments:

SECTION D: RECORD KEEPING

PERMITTEE RECORD KEEPING AND REPORTING MEETS PERMIT REQUIRMENTS	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
1. Has SWAR for the previous year of monitoring been completed? (Part 5.2.4)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
Include sample results, lab reports, chain of custody?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
Significant findings of inspections?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
Summary of corrective action plans?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
2. Is the SWAR signed? (Part 5.2.4.5)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
3. Is permittee keeping copies of inspections? (Part 5.2.1)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE

Comments:

SECTION E: FACILITY TOUR

PERMITTEE FACILITY TOUR MEETS PERMIT REQUIRMENTS	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
1. Any evidence of spills or leaks that have not been properly cleaned up as required by the SWPPP?	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
2. Any evidence of erosion or un-stabilized ground?	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
3. Any controls, structures, or storage areas that are not as identified in the SWPPP?	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
4. Any non-stormwater discharges <u>not</u> identified in the SWPPP? (see Part 1.6 of permit for list of allowable non-stormwater discharges)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
5. Any non-stormwater discharges that are not allowed under this permit? (see Part 1.6 of permit for list of allowable non-stormwater discharges)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
6. Are BMPs being properly operated and maintained? (Part 7.17)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
7. Are housekeeping procedures being implemented and are they sufficient?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
8. Toxicity testing recommended? (Part 6)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N

Comments:

Water Division Photographic Evidence Sheet			
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Location:	Magnet Cove Generating Station		
Photographer:	Erica McAdoo, ADEQ Inspector	Date:	8/25/2016
		Time:	1100
Witness:		Photo #:	1
Description:	Stormwater Pond		



Photographer:	Erica McAdoo, ADEQ Inspector	Date:	8/25/2016
		Time:	1100
Witness:		Photo #:	2
Description:	Example of stormwater drainage		

