



 A R K A N S A S Department of Environmental Quality		WATER DIVISION INSPECTION REPORT					
		AFIN: 70-00473		PERMIT #: AR0047384		DATE: 2/6/2017	
		COUNTY: 70 Union		PDS #: 095665		MEDIA: WN	
		GPS LAT: 33.159614 LONG: -92.443849 LOCATION: Entrance					
FACILITY INFORMATION			INSPECTION INFORMATION				
NAME: Anthony Forest Products Company – Urbana Sawmill LOCATION: 1236 Urbana Road CITY: EI Dorado, AR 71730			FACILITY TYPE: 2 - Industrial	INSPECTOR ID#: 101531 S - State			
RESPONSIBLE OFFICIAL NAME / TITLE: Derek Ratchford / Area Manager COMPANY: Anthony Forest Products Company, LLC MAILING ADDRESS: P.O. Box 724 CITY, STATE, ZIP: Strong AR 71765 PHONE & EXT. / FAX: 870-962-3206 / 870-962-3320 EMAIL: Derek.Ratchford@canfor.com CONTACTED DURING INSPECTION: Yes			FACILITY EVALUATION RATING: 4 - Satisfactory		INSPECTION TYPE: Compliance Evaluation		
			DATE(S): 2/6/2017	ENTRY TIME: 09:30	EXIT TIME: 14:00	PERMIT EFFECTIVE DATE: 6/1/2012	
			PERMIT EXPIRATION DATE: 5/31/2017				
			FAYETTEVILLE SHALE RELATED: N				
FAYETTEVILLE SHALE VIOLATIONS: N							
INSPECTION PARTICIPANTS							
NAME/TITLE/PHONE/FAX/EMAIL/ETC.: Randy Evans/EHS Manager/870-962-3206/Randy.Evans@canfor.com Amanda Gallagher/GBMc Environmental Engineer/501-847-7077/agallagher@gbmcassoc.com Tobin Fulmer/ADEQ D8 Water Inspector							
AREA EVALUATIONS							
(S=Satisfactory, M=Marginal, U=Unsatisfactory, N=Not Applicable/Evaluated)							
S	PERMIT	M	FLOW MEASUREMENT	N	STORMWATER		
S	RECORDS/REPORTS	S	LABORATORY	S	FACILITY SITE REVIEW		
S	OPERATION & MAINTENANCE	N	EFFLUENT/RECEIVING WATER	S	SELF-MONITORING PROGRAM		
S	SAMPLING	N	SLUDGE HANDLING/DISPOSAL	N	PRETREATMENT		
**	OTHER:						
SUMMARY OF FINDINGS							
1.) The flow device at Outfall 001 is not maintained to provide an accurate volume of monitored discharges (see Photo 1). This is a violation of permit condition Part III. (C.) (2.). SEE FLOW DEVICE COMMENTS							

GENERAL COMMENTS

On February 6, 2017 I performed an inspection at Anthony Forest Products Company – Urbana Sawmill. The inspection was completed with Randy Evans, EHS Manager, and Amanda Gallagher, Environmental Engineer with GBMc. GBMc is a consulting agency that is contracted to conduct pH and DO sampling and receiving the samples from Outfall 001 that are collected by Mr. Evans. GBMc transports the samples to American Interplex Laboratory in Little Rock, AR for analysis. Sampling is taking place at the frequency and on the effluent characteristics required in Part IA. The facility has had effluent violations at Outfall 001 for Fecal Coliform Bacteria (FCB) and GBMc has conducted site investigations to attempt to discover the source of the violations. The facility believes that the FCB violations are produced from faulty or inadequate treatment from septic units on the property. An ARG550000 permit has been approved for the facility and a Norweco Singular 960 Aerobic Treatment Unit with chlorination will be installed to provide adequate treatment to domestic waste (see separate inspection report for permit ARG550540). Therefore, treated domestic waste will no longer be discharge to Outfall 001 and will be removed during permit renewal in an effort to cease the FCB violations at Outfall 001. Also, boiler blowdown is also no longer discharged to Outfall 001 and will be removed in the permit renewal.

FLOW DEVICE COMMENTS:

During the inspection, I observed materials in the weir box and roots growing up and through the V-notch weir used to measure flow at Outfall 001 (see Photo 1). The flow device needs to be maintained to be free of turbulence and materials that would affect the flow measurement. An image of the weir properly maintained will be required as a response to this violation.

INSPECTOR'S SIGNATURE:  Michael Young	DATE: 2/7/2017
SUPERVISOR'S SIGNATURE:  Kerri McCabe	DATE: 3/3/2017

SECTION A: PERMIT VERIFICATION	
PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. ALL DISCHARGES ARE PERMITTED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
SECTION B: RECORDKEEPING AND REPORTING EVALUATION	
RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRS:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
a. DATES AND TIME(S) OF SAMPLING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
b. EXACT LOCATION(S) OF SAMPLING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
c. NAME OF INDIVIDUAL PERFORMING SAMPLING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
d. ANALYTICAL METHODS AND TECHNIQUES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
e. RESULTS OF CALIBRATIONS:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
f. RESULTS OF ANALYSES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
g. DATES AND TIMES OF ANALYSES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
h. NAME OF PERSON(S) PERFORMING ANALYSES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA: <u>Concentration only limitation.</u>	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
SECTION C: OPERATIONS AND MAINTENANCE	
TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. TREATMENT UNITS PROPERLY OPERATED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
2. TREATMENT UNITS PROPERLY MAINTAINED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED: <u>Treatment unit is entirely gravity fed.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
5. ALL NEEDED TREATMENT UNITS IN SERVICE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED: <u>Contract operators hired for maintenance.</u>	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
8. OPERATION AND MAINTENANCE MANUAL AVAILABLE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
9. STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
10. PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
11. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
12. IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
13. HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
14. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
15. IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> 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 checked="" type="checkbox"/> Y <input type="checkbox"/> N <input 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 checked="" type="checkbox"/> Y <input type="checkbox"/> N <input 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 type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED: __ TYPE OF DEVICE: <u>V-notch weir</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input 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: <u>Roots and other materials in weir.</u>	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
8. FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
9. HEAD MEASURED AT PROPER LOCATION:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input 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: <u>8600 Kanis Road Little Rock, AR</u>	
c. PARAMETERS PERFORMED: <u>All except pH and DO</u>	
8. BIOMONITORING PROCEDURES ADEQUATE:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
a. PROPER ORGANISMS USED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
b. PROPER DILUTION SERIES FOLLOWED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
c. PROPER TEST METHODS AND DURATION:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
d. RETESTS AND/OR TRE PERFORMED AS REQUIRED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE

SECTION G: EFFLUENT/RECEIVING WATERS OBSERVATIONS							
BASED ON VISUAL OBSERVATIONS ONLY						<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE	
DETAILS:							
OUTFALL #:	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOATING SOLIDS	COLOR	OTHER
001	No Discharge	No Discharge	No Discharge	No Discharge	No Discharge	No Discharge	--
SECTION H: SLUDGE DISPOSAL							
SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS						<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE	
DETAILS: <u>Sludge is maintained in the two-cell system.</u>							
1. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY:						<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE	
2. SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503:						<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> 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						<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
DETAILS:							
1. SAMPLES OBTAINED THIS INSPECTION:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
2. TYPE OF SAMPLE: <input type="checkbox"/> GRAB:___ <input type="checkbox"/> COMPOSITE:___ METHOD:___ FREQUENCY:___							
3. SAMPLES PRESERVED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
4. FLOW PROPORTIONED SAMPLES OBTAINED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
5. SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
6. SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
7. SAMPLE SPLIT WITH PERMITTEE:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
SECTION J: STORM WATER POLLUTION PREVENTION PLAN							
STORM WATER MANAGEMENT MEETS PERMIT REQUIREMENTS						<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
DETAILS:							
1. SWPPP UPDATED AS NEEDED:___ DATE OF LAST UPDATE:___						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
2. SITE MAP INCLUDING ALL DISCHARGES AND SURFACE WATERS:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
3. POLLUTION PREVENTION TEAM IDENTIFIED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
4. POLLUTION PREVENTION TEAM PROPERLY TRAINED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
5. LIST OF POTENTIAL POLLUTANT SOURCES:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
6. LIST OF POTENTIAL SOURCES AND PAST SPILLS AND LEAKS:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
7. ALL NON-STORM WATER DISCHARGES ARE AUTHORIZED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
8. LIST OF STRUCTURAL BMPS:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
9. LIST OF NON-STRUCTURAL BMPS:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
10. BMPS PROPERLY OPERATED AND MAINTAINED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
11. INSPECTIONS CONDUCTED AS REQUIRED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	

DMR Calculation Check

Reporting Period: From 2015 01 01 To 2015 01 31
 Year Month Day Year Month Day

Parameter Checked: TSS

	Loading Mass Mo. Avg. - lbs/day	Concentration Monthly Mo. Avg. - mg/l	7-day Avg. - mg/l
Reported Value:	<u>N/A</u>	<u>16.5</u>	<u>17.0</u>
Calculated Value:	<u>N/A</u>	<u>16.5</u>	<u>17.0</u>
Permit Value:	<u>N/A</u>	<u>35</u>	<u>53</u>

If calculated value does not equal reported value, explain:

Equal

Water Division Photographic Evidence Sheet			
Location:	Anthony Forest Products Company – Urbana Sawmill		
Photographer:	Michael Young	Date:	02/06/2017
Witness:	Randy Evans; Amanda Gallagher; Tobin Fulmer	Time:	11:49
		Photo #:	1
Description:	Debris and roots in weir cause turbulence and inaccurate flow measurements.		
			

Figure 1. Overview of Anthony Forest Company – Urbana Sawmill. Indicated are the processing areas of the facility, the wet deck area, and the treatment cells. Also indicated is the location of Outfall 001. There is a pond on the south-side of the facility that is indicated that previously operated as a wet deck pond, but there is currently no process water being discharged from this pond. The pond is now Outfall 009 and monitored under permit ARR000977.



From: [Young, Michael](#)
To: [McConnell, Melissa](#)
Subject: FW: Anthony Forest Products Company Inspections (Union Co)
Date: Thursday, March 16, 2017 10:36:55 AM
Attachments: [image001.png](#)

Melissa,

Would you please attach this e-mail to WID's 21749, 21750 and 21752?

Thank you,

Michael Young
District 8 Inspector
El Dorado Field Office
ADEQ Water Division
Cell Phone: 501-837-2073
youngm@adeq.state.ar.us

From: Young, Michael
Sent: Thursday, March 16, 2017 10:34 AM
To: 'Amanda Gallagher'
Cc: 'Randy.Evans@canfor.com'
Subject: RE: Anthony Forest Products Company Inspections (Union Co)

Amanda,

A two-week extension from the due date of March 20, 2017 is granted. The response will be due April 3, 2017.

As a reminder, if the corrective measure for the response to the "summary of Findings" will take longer than the required due-date, please provide a timeframe of completion.

Thank you,

Michael Young
District 8 Inspector
El Dorado Field Office
ADEQ Water Division
Cell Phone: 501-837-2073
youngm@adeq.state.ar.us

From: Amanda Gallagher [<mailto:agallagher@gbmcassoc.com>]
Sent: Thursday, March 16, 2017 10:29 AM
To: Young, Michael
Cc: 'Randy.Evans@canfor.com'
Subject: FW: Anthony Forest Products Company Inspections (Union Co)

Michael,

On behalf of Anthony Forest, I would like to request at least a two week extension on the required response to the inspection. Due to the intricacy of the findings and the potential required long term actions, additional time is necessary to adequately address the inspection findings. Thank you for your time.

Amanda Gallagher, P.E.
GBMc & Associates
219 Brown Lane
Bryant, AR 72022
Phone: (501) 847-7077

From: McCabe, Kerri [<mailto:MCCABE@adeq.state.ar.us>]
Sent: Monday, March 06, 2017 10:46 AM
To: Derek.Ratchford@canfor.com; Randy.Evans@canfor.com; Amanda Gallagher <agallagher@gbmcassoc.com>
Cc: Young, Michael <youngm@adeq.state.ar.us>
Subject: Anthony Forest Products Company Inspections (Union Co)

Please find attached the inspection reports submitted by Inspector Young. Thank you.

Kerri McCabe

Inspector Supervisor
ADEQ – Water Division
Field Services – Inspection Branch

Office – (501) 682-0642
Work Cell – (501) 352-5641
Fax – (501) 682-0880
5301 Northshore Drive
North Little Rock, AR 72118-5317



From: [Amanda Gallagher](#)
To: [Water-Inspection-Report](#)
Cc: [Young, Michael](#); [Evans, Randy](#)
Subject: Anthony-Urbana March 2017 ADEQ Inspection Response
Date: Monday, April 03, 2017 3:31:35 PM
Attachments: [Anthony Urbana ADEQ Inspection March 2017 Response \(2\).pdf](#)

To Whom It May Concern:

On behalf of Anthony Forest Products Company, LLC – Urbana Sawmill, please find attached the required response to ADEQ’s Compliance Evaluation Inspection performed on February 06, 2017.

Amanda Gallagher, P.E.
GBMc & Associates
219 Brown Lane
Bryant, AR 72022
Phone: (501) 847-7077

April 03, 2017

Mr. Michael Young
District 8 Field Inspector
Water Division
Arkansas Department of Environmental Quality
5301 Northshore Drive
North Little Rock, AR 72118

RE: Anthony Forest Products Company, LLC Compliance Inspection Response
AFIN: 70-00473
NPDES Permit No. AR0047384, Permit Tracking No. ARR000977, Permit
Tracking No. ARG550398, and Permit Tracking No. ARG550540

Dear Mr. Young:

On February 06, 2017, ADEQ conducted a routine compliance evaluation inspection at Anthony Forest Products Company, LLC – Urbana Sawmill (Anthony – Urbana). A copy of this compliance inspection report and letter was received by Anthony-Urbana on March 06, 2017. The inspection report listed one finding associated with NPDES Permit No. AR0047384, seven findings associated with General Permit Tracking No. ARR000977, four findings associated with General Permit Tracking No. ARG550398, and no findings associated with General Permit Tracking No. ARG550540. The letter also requested that a written response to the findings including corrective actions be submitted by April 03, 2017. Anthony-Urbana's responses are as follows:

NPDES Permit No. AR0047384:

ADEQ Finding No. 1:

The flow device at Outfall 001 is not maintained to provide adequate volume of monitored discharges. Materials were observed in the weir box and roots growing up and through the V-notch weir.

Anthony-Urbana Response:

Vines, roots, and debris have been removed from the weir and weir box. Pictures showing the above described corrective actions can be found in Attachment 1.

General Permit Tracking No. ARR000977:

ADEQ Finding No. 1:

The facility has kiln ash pile with no control measures that is contributing to pollution of UT of Woodard Creek.

Anthony-Urbana Response:

Anthony-Urbana understands the need for appropriate control measures for the kiln ash pile in order to minimize exposure and manage storm water runoff in a manner that minimizes the discharge of potential pollutants off site.

The amount of kiln ash stored onsite varies throughout the year. Anthony-Urbana is constantly investigating new uses for the kiln ash in order to minimize the amount of kiln ash stored onsite.

Silt fence has been added to the downstream side of the kiln ash pile as a temporary control measure. Pictures showing the above described corrective action can be found in Attachment 2.

Anthony-Urbana is evaluating options for additional control measures and a long term storage solution in order to control runoff from the kiln ash pile. Options being considered include:

- Installation of a concrete or earthen berm with an outlet structure around the current biochar pile.
- Moving the storage location of the kiln ash pile away from a drainage path and install appropriate controls (berm with outlet). I.e. north end of the wet deck.

However, due to unknown future facility modifications, a final decision has not been feasible.

ADEQ Finding No. 2:

The facility has contributed kiln ash bottom deposits to UT of Woodard Creek through insufficient control measures

Anthony-Urbana Response:

See Anthony-Urbana Response to ADEQ Finding No. 1.

ADEQ Finding No. 3:

The facility is not making and effort to minimize exposure of the kiln ash pile, which is contributing to pollution of UT of Woodward Creek from Outfall 011.

Anthony-Urbana Response:

See Anthony-Urbana Response to ADEQ Finding No. 1.

First ADEQ Finding No. 4:

Oil sheen was observed in the ditch draining to Outfall 003 from the kiln area. The facility needs to adequately use good housekeeping measures and maintain all equipment to prevent the discharge of pollutants in stormwater discharged to receiving waters.

Anthony-Urbana Response:

Equipment associated with the kilns were found to be a potential source for the oil sheen. Kiln equipment (motor, chain, lumber carts, etc) requires significant amount of lubrication due to repetitive use and the hot kiln environment. In future, employees will be trained to only use the amount of grease necessary on equipment associated with the kiln. Any spills will be immediately cleaned up and reported to the EHS manager.

The forklifts used to place lumber in the kiln were also found to be a potential source for the oil sheen. Forklifts are currently maintained once/month. However, they are still apt to have leaks due to heavy usage. Anthony-Urbana is in the process of replacing older forklifts, which are more apt to have more frequent leaks. In future, leaks from a fork lift will be immediately cleaned up and the forklift will be maintained in a timely manner in order to fix the leak.

Oil booms have been placed in the drainage ditch leading to Outfall 003, as can be seen in the picture found in Attachment 3. The kiln area and drainage ditch leading to Outfall 003 will be monitored weekly by the EHS manager to ensure good housekeeping practices are being maintained and the oil booms are properly maintained.

Please note that the exact location of the oil and grease noted on the ground that was noted in Photo No. 12 of the ADEQ inspection could not be determined. Attachment 3 contains pictures of the area taken during the quarterly inspection of the general area of the kilns.

Second ADEQ Finding No. 4:

Erosion and sediment controls are not being utilized in the ditch that drains Outfall 008.

Anthony-Urbana Response:

This ditch is normally vegetated. However, the ditch was cleaned out as part of a major facility cleanup. Natural vegetation is currently being re-established. Rip-rap will be placed in areas where vegetation cannot be established. Pictures showing the above described corrective action can be found in Attachment 4.

During 2017, Anthony-Urbana also plans to re-route stormwater from the Outfall 008 drainage basin to the old wet deck pond associated with Outfall 009. The pond will allow any bark or other solids to settle out and not be discharged offsite.

ADEQ Finding No. 5:

The facility is not managing runoff at Outfall 011 in a manner to minimize the pollutants discharged to UT of Woodward Creek.

Anthony-Urbana Response:

See Anthony-Urbana Response to ADEQ Finding No. 1.

ADEQ Finding No. 6:

Sampling of Outfall 011 is not taking place and it has the greatest exposure to significant sources of pollution (kiln ash).

Anthony-Urbana Response:

The facility samples in accordance with the current ADEQ Notice of Coverage (NOC). The NOC states that Outfalls 003, 007, and 008 will be sampled while Outfalls 002, 004, 005, 006, and 009-012 are considered similar. The outfalls which are sampled and the ones that are considered similar was last "approved" by ADEQ. The SWPPP includes the required documentation on how the similar outfall determinations were made. Thus, Anthony Forest is meeting the requirements of Part 3.8 of the general permit and feels that this does not constitute a permit violation.

However pursuant to the ADEQ inspection, Anthony did review the similar outfall evaluation and determined that due to recent facility changes that Outfall 011 is no longer similar to Outfall 003 based on a consideration of industrial activity, significant materials and management practices, and activities within the area drained by the outfall. Outfall 011 will be sampled along with Outfalls 003, 007, and 008. Notification of this change has been made to ADEQ – Office of Water Quality Permits Section in order to update ADEQ records and the Notice of Coverage.

General Permit Tracking No. ARG550398:

ADEQ Finding No. 1:

The influent tank had excessive solids.

Anthony-Urbana Response:

Per the operation and maintenance manual, the pretreatment chamber of the Norweco System is expected to have some floatable solids. The system was inspected/maintenanced on February 17th and March 20th and was determined to be in proper working order. The floatable solids and sludge levels in the system will be monitored in the future and pumped out when necessary.

ADEQ Finding No. 2:

The chlorine contact tube did not have any chlorine tablets.

Anthony-Urbana Response:

Chlorine tablets have been added to the system. This was verified during a site visit on March 15, 2017. A picture showing the above described actions can be found in Attachment 5.

ADEQ Finding No. 3:

The facility could not provide forms from the ADEQ website used to evaluate the system a minimum of four times per year.

Anthony-Urbana Response:

The ADEQ maintenance form will be utilized in the future. The system was last maintained on March 20, 2017. The completed ADEQ maintenance form can be found in Attachment 6.

ADEQ Finding No. 4:

Twenty-four hour reporting for violations of Monthly Average or a Daily Maximum discharge limitation for any of the pollutants listed in Part II are not being reported by the facility.

Anthony-Urbana Response:

Any future permit limit excursion will be reported within 24 hours of the known excursion in accordance with Part 6.4 of the general permit.

We appreciate ADEQ's concerns in this matter. We trust our responses satisfy the inspection findings. Please do not hesitate to me at (870) 962-3206 or Amanda Gallagher with GBMc at (501) 847-7077 should you have any questions or need additional information regarding this issue.

Respectfully submitted,
Anthony Forest Products Company, LLC

A handwritten signature in blue ink, appearing to be 'Anthony Urbana', is written over the typed name and company name.

*Mr. M. Young - ADEQ
April 03, 2017
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Randy Evans
EH&S Manager

Attachment

cc: Amanda Gallagher – GBM^c & Associates

Attachment 1

Outfall 001 Photo

Photograph of Outfall 001 weir.



Attachment 2

Outfall 011 Photos

Photograph 1 of silt fence installed down gradient of the kiln ash pile.



Photograph 2 of silt fence installed down gradient of the kiln ash pile.



Photograph 3 of silt fence installed down gradient of the kiln ash pile.



Photograph 4 of silt fence installed down gradient of the kiln ash pile.



Attachment 3

Outfall 003 Photos

Photograph showing oils booms that were placed in the drainage ditch leading to Outfall 003.



Photograph showing area in the vicinity of the kilns where excess grease has been observed.



Attachment 4

Outfall 008 BMP Photos

Photograph showing the upper part of the ditch leading to Outfall 008. Vegetation has been established in the lower part of the ditch and starting to grow in the upper portion.



Attachment 5

ARG55 Photos

The following photograph shows chlorine tablets that were added to the ARG55 treatment system.



Attachment 6

ARG55 Maintenance Form for 1st Quarter 2017

Arkansas Department of Environmental Quality

5301 Northshore Drive, North Little Rock, AR 72118

Permit Tracking No.: ARG550398
Date of Evaluation 3/20/2017

ARG550000 Individual Treatment System Evaluation

Part 1 General Information

Permittee: <i>Campbell</i>	County: <i>Union</i>	Phone Number: <i>870 962-3300</i>
Site Location (911 Address): <i>1335 Wilson Rd</i>	City: <i>Union Ark</i>	State Zip

Part 2 Assessment

Items:	Description: In the space below, list any deficiency assessed and/or action(s) taken.
1 Electrical <input checked="" type="checkbox"/>	
2 Pump(s) <input checked="" type="checkbox"/>	
3 Discharge Route <input checked="" type="checkbox"/>	
4 Chlorinator <input checked="" type="checkbox"/>	
5 Contact Chamber <input checked="" type="checkbox"/>	
6 Clean Outs <input checked="" type="checkbox"/>	
7 Sludge Depth <input checked="" type="checkbox"/>	<i>12" of Sludge</i>
8 Other Components <input type="checkbox"/>	

Part 3 Sludge Removal

1 Solids Removal Service	2 License Number	3 Date of Service
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Part 4 Certification

I certify that I have conducted all applicable assessments listed above and have taken the appropriate action to maintain the proper function of the above listed system in accordance with the Individual Treatment System General Permit ARG550000.

Signature <i>Renee Campbell</i>	Date <i>3-20-17</i>
Typed/Printed Name <i>Renee Campbell</i>	License Number <i>5W 56</i> (Min. Class II License)
	Phone Number <i>870 962-3300</i>

