

# ADEQ

ARKANSAS  
Department of Environmental Quality

November 19, 2018

Manish Dalvi  
Owens Corning Composite Materials, LLC  
5520 Planters Road  
Fort Smith, AR 72916

RE: **Owens Corning Comp. Materials Inspection**  
**AFIN: 66-00294** **NPDES Permit No.: ARR00A832**

Dear Mr. Dalvi:

On October 18, 2018, 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.

**Please refer to the “Summary of Findings” section of the attached inspection report and provide a written response for each violation that was noted.** This response should be mailed to the attention of the Office of Water Quality Compliance Branch at the address at the bottom of this letter or e-mailed to [Water-Inspection-Report@adeq.state.ar.us](mailto:Water-Inspection-Report@adeq.state.ar.us). 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 documentation (i.e., photos) is due by **December 3, 2018**.

If I can be of any assistance, please contact me at [dannielle.gray@adeq.state.ar.us](mailto:dannielle.gray@adeq.state.ar.us) or (479) 968-7339 ext.11.

Sincerely,



Dannielle Gray  
District 4 Field Inspector  
Office of Water Quality



ARKANSAS  
Department of Environmental Quality

## WATER DIVISION INSPECTION REPORT

AFIN: 66-00294	PERMIT #: ARR00A832	DATE: 10/17/2018
COUNTY: 66 Sebastian	PDS #: 105497	MEDIA: WN
GPS LAT: 35.305311 LONG: -94.371830 LOCATION: Entrance		

FACILITY INFORMATION	INSPECTION INFORMATION
NAME: <b>Owens Corning Comp. Materials</b> LOCATION: <b>5520 Planters Road</b> CITY: <b>Fort Smith</b>	FACILITY TYPE: <b>2 - Industrial</b> INSPECTOR ID#: <b>71330 S - State</b> FACILITY EVALUATION RATING: <b>N</b> INSPECTION TYPE: <b>Industrial Stormwater</b> DATE(S): <b>10/17/2018</b> ENTRY TIME: <b>11:15</b> EXIT TIME: <b>14:00</b> PERMIT EFFECTIVE DATE: <b>7/1/2014</b> PERMIT EXPIRATION DATE: <b>6/30/2019</b>
RESPONSIBLE OFFICIAL	FAYETTEVILLE SHALE RELATED: <b>N</b> FAYETTEVILLE SHALE VIOLATIONS: <b>N</b>
NAME / TITLE: <b>Manish Dalvi /</b> COMPANY: <b>Owens Corning Composite Materials, LLC</b> MAILING ADDRESS: <b>5520 Planters Road</b> CITY, STATE, ZIP: <b>Fort Smith AR 72916</b> PHONE & EXT. / FAX: <b>479-648-5327 /</b> EMAIL: <b>manish.dalvi@owenscorning.com</b> CONTACTED DURING INSPECTION: <b>***</b>	INSPECTION PARTICIPANTS
	NAME/TITLE/PHONE/FAX/EMAIL/ETC.: <b>Ed Ford/ Plant Leader/479-646-2564/ed.ford@owenscorning.com</b> <b>Roger Watson/Maintenance Leader/479-648-5343/roger.t.watson@owenscorning.com</b>

### AREA EVALUATIONS

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

**	PERMIT	**	FLOW MEASUREMENT	**	STORMWATER
**	RECORDS/REPORTS	**	LABORATORY	**	FACILITY SITE REVIEW
**	OPERATION & MAINTENANCE	**	EFFLUENT/RECEIVING WATER	**	SELF-MONITORING PROGRAM
**	SAMPLING	**	SLUDGE HANDLING/DISPOSAL	**	PRETREATMENT
<b>S</b>	<b>OTHER: Industrial Stormwater</b>				

### SUMMARY OF FINDINGS

The following violations were noted during inspection:

1. Contact information and the Responsible Official have not been updated as required. This is a violation of Part 2.6 of the permit. The permittee submitted a change of authorization form as required via email on October 30, 2018. No further action is required for this item.
2. Permitted outfall coordinates are incorrect (see Figure 1 below). This is a violation of Part 2.3.5 of the permit.
3. Good housekeeping practices are implemented at this facility. However, both "pole barns" were used to store chemicals and neither of these staging areas contained adequate Best Management Practices (BMPs) to reduce pollutant risks. This is a violation of Part 3.1.2 of the permit. Specifically, the following items must be addressed:
  - a. The covered structure used to store dry chemicals near the wastewater treatment facility has a gap between the floor and the walls where dry chemical can spill out of the covered area onto the ground. This was observed during inspection (see Photo 12 below).
  - b. The covered structure used to store fuel in fuel cans and flammable lockers has a gap between the floor and the walls where a spill would flow directly to the ditch and then to Outfall 001.
4. Calibration records are being kept as required for pH meter calibration. However, these records do not include the time that the calibration was conducted. This is a violation of Part 3.8.2.4 of the permit.
5. Inspections are being conducted monthly. However, the inspection form does not indicate whether or not a minimum of one inspection a year was conducted during a rain event. This is a violation of Part


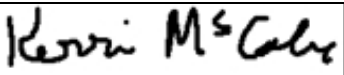
**GENERAL COMMENTS**

I inspected this facility with the above referenced inspection participants on October 18, 2018. Inspection consisted of a facility assessment and a records audit. Mr. Ford was present during the opening and closing portions of the inspection, while Mr. Watson attended me through the entirety of the inspection.

Facility assessment revealed that this facility was very clean. The stormwater program developed and implemented was very thorough. The majority of the stormwater that flows over the site is directed via in-ground pipes and channels to an onsite wastewater pretreatment plant. Stormwater that is not directed to the treatment plant is directed to Outfalls 001 and 002.

Stormwater pollution risks onsite include used oil storage, waste bins, a tank farm (with five tanks), a compactor, and a metal storage bin. With the exception of the items mentioned in Violation #3 above, nothing of concern was noted during facility assessment.

Records were complete and well-organized. Facility personnel were well-versed in the program and able to answer questions quickly and adequately. Outfall coordinates permitted are incorrect for Outfall 001. Field verified coordinates for Outfall 001 are 35.303775, -94.371980. An outfall modification form must be submitted as noted above.

INSPECTOR'S SIGNATURE:  Dannielle Gray	DATE: 11/1/2018
SUPERVISOR'S SIGNATURE:  Kerri McCabe	DATE: 11/15/2018



<b>7. A description of potential pollutant sources</b>	
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 checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input 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 checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input 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 type="checkbox"/> NA <input checked="" 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
<b>8. Measures and Controls (Part 4.2.5)</b>	
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
<b>9. Documentation of:</b>	
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 checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input 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)	V1
A) Are samples being collected for each monitoring period (annually)? (Part 3.6)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input 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 checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
C) Has the permittee determined that some of the outfalls are similar? (Part 3.8.1)	<input type="checkbox"/> Y <input checked="" 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 type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input checked="" 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 checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input type="checkbox"/> NE
F) Were the samples properly preserved and analyzed? (Part 3.8.2.4)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NI <input type="checkbox"/> NA <input 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 checked="" type="checkbox"/> Y <input 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 checked="" type="checkbox"/> Y <input 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
<b>4. Inspections (Part 5.1)</b>	
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 type="checkbox"/> Y <input checked="" 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:**

Exceedances noted in 2010 sampling event; corrective action plan implemented; no further exceedances observed.

**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:**

**Office of Water Quality Photographic Evidence Sheet**

Location:	<b>Owens Corning Comp. Materials</b>		
Photographer:	<b>Dannielle Gray</b>	Date:	<b>10/18/2018</b>
Time:	<b>1254</b>	Witness:	<b>none</b>
Photo #:	<b>1</b>	Description:	<b>Outfall 002</b>



Photographer:	<b>Dannielle Gray</b>	Date:	<b>10/18/2018</b>
Time:	<b>1254</b>	Witness:	<b>none</b>
Photo #:	<b>2</b>	Description:	<b>Drainage to Outfall 002</b>



**Office of Water Quality Photographic Evidence Sheet**

Location:	<b>Owens Corning Comp. Materials</b>		
Photographer:	<b>Dannielle Gray</b>	Date:	<b>10/18/2018</b>
Time:	<b>1257</b>	Witness:	<b>none</b>
Photo #:	<b>3</b>	Description:	<b>Outfall 001</b>



Photographer:	<b>Dannielle Gray</b>	Date:	<b>10/18/2018</b>
Time:	<b>1257</b>	Witness:	<b>none</b>
Photo #:	<b>4</b>	Description:	<b>Immediately down flow of Outfall 001; vegetated swale prior to runoff leaving site.</b>



Office of Water Quality Photographic Evidence Sheet

Location:	<b>Owens Corning Comp. Materials</b>		
Photographer:	<b>Dannielle Gray</b>	Date:	<b>10/18/2018</b>
Time:	<b>1258</b>	Witness:	<b>none</b>
Photo #:	<b>5</b>	Description:	<b>Compactors and waste bin angled toward pretreatment collection inlet.</b>



Photographer:	<b>Dannielle Gray</b>	Date:	<b>10/18/2018</b>
Time:	<b>1302</b>	Witness:	<b>none</b>
Photo #:	<b>6</b>	Description:	<b>Liquid storage adjacent to pretreatment collection inlet.</b>



Office of Water Quality Photographic Evidence Sheet

Location:	<b>Owens Corning Comp. Materials</b>		
Photographer:	<b>Dannielle Gray</b>	Date:	<b>10/18/2018</b>
Witness:	<b>none</b>	Time:	<b>1303</b>
Description:	<b>Tank farm</b>	Photo #:	<b>7</b>



Photographer:	<b>Dannielle Gray</b>	Date:	<b>10/18/2018</b>
Witness:	<b>none</b>	Time:	<b>1303</b>
Description:	<b>Collection pump in tank farm secondary containment directs stormwater and potential spills to pretreatment plant.</b>		



Office of Water Quality Photographic Evidence Sheet

Location:	<b>Owens Corning Comp. Materials</b>		
Photographer:	<b>Dannielle Gray</b>	Date:	<b>10/18/2018</b>
Witness:	<b>none</b>	Time:	<b>1305</b>
		Photo #:	<b>9</b>
Description:	<b>Waste bins staged to drain to pretreatment collection system.</b>		



Photographer:	<b>Dannielle Gray</b>	Date:	<b>10/18/2018</b>
Witness:	<b>none</b>	Time:	<b>1310</b>
		Photo #:	<b>10</b>
Description:	<b>Earthen berm around pretreatment plant.</b>		



Office of Water Quality Photographic Evidence Sheet

Location:	<b>Owens Corning Comp. Materials</b>		
Photographer:	<b>Dannielle Gray</b>	Date:	<b>10/18/2018</b>
Time:	<b>1313</b>	Witness:	<b>none</b>
Photo #:	<b>11</b>	Description:	
<b>Pole barn where dry chemicals are staged.</b>			



Photographer:	<b>Dannielle Gray</b>	Date:	<b>10/18/2018</b>
Time:	<b>1312</b>	Witness:	<b>none</b>
Photo #:	<b>12</b>	Description:	
<b>Dry chemical pushed through pole barn wall onto ground behind barn.</b>			



Office of Water Quality Photographic Evidence Sheet

Location:	<b>Owens Corning Comp. Materials</b>		
Photographer:	<b>Dannielle Gray</b>	Date:	<b>10/18/2018</b>
Time:	<b>1316</b>	Witness:	<b>none</b>
Photo #:	<b>13</b>	Description:	<b>Used oil storage</b>



Photographer:	<b>Dannielle Gray</b>	Date:	<b>810/18/2018</b>
Time:	<b>1320</b>	Witness:	<b>none</b>
Photo #:	<b>14</b>	Description:	<b>Fuel and flammables storage inside pole barn.</b>



Figure 1. Google Earth image (not dated) showing facility overview and permitted outfall locations.



Figure 2. Google Earth image (not dated) showing field verified outfall coordinates.



**From:** [Watson, Roger T.](#)  
**To:** [Water-Inspection-Report](#)  
**Cc:** [Gray, Danielle](#); [Ford, Ed](#)  
**Subject:** RE: Official Response Storm Water Inspection Owens Corning Comp. Materials Inspection AFIN: 66-00294, NPDES Permit No.: ARR00A832  
**Date:** Tuesday, November 27, 2018 12:33:59 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[Request for Change of Authorization #2.pdf](#)  
[Stormwater Compliance Inspection \( Monthly\).pdf](#)  
[Official Response Storm Water Inspection.docx](#)  
[Storm Water Sample 10-31-18.pdf](#)  
[M23669\\_black\\_text.pdf](#)  
[outfall\\_modification\\_form AFIN\\_66-00294.pdf](#)

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Attention: Office of Water Quality Compliance Branch  
Included are documents in regards to Industrial Storm Water Inspection  
Conducted at Owens Corning Composite Materials on 10-18-2018

If you should have any questions please call,  
Roger Watson  
(479) 648-5343

**Roger Watson**

Maintenance Leader CMRP

Non-Wovens-Americas | Fort Smith Mat Line

P: 479-648-5343 | M: 479-414-3596

[roger.t.watson@owenscorning.com](mailto:roger.t.watson@owenscorning.com)



**COMPOSITES**

*Make Impossible Things*

5520 Planters Road  
Fort Smith, AR 72916

[www.owenscorning.com](http://www.owenscorning.com)



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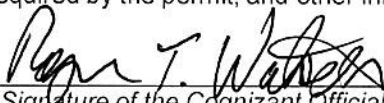
**REQUEST FOR CHANGE OF AUTHORIZATION  
(CERTIFICATION AND SIGNATORY REQUIREMENTS)**

NPDES Permit Number: ARR 00A832 Facility Name: Owens Corning Fort Smith Mat Line

- Type of Change: (check one)
- New Cognizant Official (or duly authorized representative) (sections 1 and 2)
  - New Responsible Official (complete section 2 only)
  - Both (sections 1 and 2)
  - Additional Cognizant Official (or duly authorized representative) (sections 1 and 2)

1. **NEW COGNIZANT OFFICIAL** (or duly authorized representative) (See 122.22(b); the individual, authorized by the ranking official in writing, as **having responsibility for the overall operation** of the regulated facility or activity responsibility, or having overall responsibility for environmental matters for the company.)

The ranking official hereby designates the following **individual** as the cognizant official, (duly authorized representative), for signing the permit required reports, etc., including Discharge Monitoring Reports (DMR) required by the permit, and other information requested by the Director:

  
\_\_\_\_\_  
Signature of the Cognizant Official (Duly Authorized Representative)

Roger T Watson  
\_\_\_\_\_  
Name (First Name, MI, Last Name) Typed or Printed

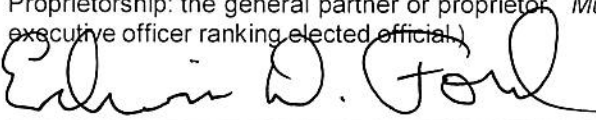
5520 Planters Road Fort Smith, AR, 72916  
\_\_\_\_\_  
Mailing Address City, State, and Zip

Maintenance Leader (479) 648-5343  
\_\_\_\_\_  
Title A/C Phone Fax

Email Address: roger.t.watson@owenscorning.com

By signature below, the responsible official certifies that the above named **individual** is qualified to act as the duly authorized representative under the provisions of 40 CFR 122.22(b).

2. **RESPONSIBLE OFFICIAL** (**Note:** The responsible official is the person authorized to sign the permit application i/a/w 40 CFR 122.22(a). For a Corporation: it is the responsible corporate officer. Partnership or Sole Proprietorship: the general partner or proprietor. Municipality, State, Federal or other Public Agency: the principal executive officer ranking elected official.)

  
\_\_\_\_\_  
Signature of the Responsible Official

11/26/18  
\_\_\_\_\_  
Date

Edwin D Ford  
\_\_\_\_\_  
Name (First Name, MI, Last Name) Typed or Printed

5520 Planters Road Fort Smith, Arkansas, 72916  
\_\_\_\_\_  
Mailing Address City, State, and Zip

Plant Leader (479) 648-5322  
\_\_\_\_\_  
Title A/C Phone Fax

Email Address: Ed.Ford@owenscorning.com

**Certification:** I certify under penalty of law that this document and all attachments were prepared under my direct supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Will the Responsible Official also be the person signing submittals?  Yes  No

Stormwater Compliance Inspection (1)  
CRITICAL ENVIRONMENTAL TAKS  
Storm Water Pollution Prevention Plan Pg. 32

ATTENTION: ITEMS 1 & 2 TO BE COMPLETED BY EHS LEADER

Was this PM done during an actual rain event? \_\_\_\_\_ (Yes/NO)

Was rainfall event enough to cause ditches to run? \_\_\_\_\_ (Yes/NO)

1. Records (To be completed by EHS Leader)
  - A. Stormwater management plan up-to-date & on file ?
  - B. Annual inspection reports on file ?
  - C. Spill reports on file ?
  
2. Spill Prevention & Response (To be completed by EHS Leader)
  - A. MSDS's on file & up-to-date ?
  - B. Spill prevention control & counter measure plan on file & up-to-date ?
  - C. Employees properly trained in the plants stormwater management goals & practices ?
  - D. Adequate traffic controls to prevent vehicle traffic on non-paved areas ?
  - E. Any manufacturing systems added since last evaluation ?
  - F. If yes to item E, have they been evaluated for stormwater contamination risk ?
  
3. Record Hazardous waste kit zip tie # \_\_\_\_\_  
Record spill kit absorbent zip tie # \_\_\_\_\_
  
4. Facility Inspection (To be completed by Maintenance Technician)
  - A. Grounds properly maintained & free of debris ?
  - B. Drainage ditches free of contaminants ?
  - C. Creek bed free of debris, oil & contaminants ?
  - D. Creek bed free of non-stormwater discharges ?
  - E. Front loading dock free of debris & contaminants ?
  - F. Rear loading docks free of debris & contaminants ?
  - G. Wet Chop / chemical truck pit clean & free of standing water ?
  - H. Tank farm unloading area free of debris, spills & water ?
  - I. Piping exposed to environment properly maintained & no leaks ?
  - J. Empty tote-tank storage free of debris, spills & water ?
  - K. Full tote-tank storage free of debris, spills & water ?
  - L. Trash & recycling hopper storage area free of debris & liquid

contamination ?

- M. Used oil storage area free of debris, spills & leaks ?
  - N. Used oils storage have bungs installed ?
  - O. Propane storage area free of debris & leaks ?
  - P. Pole barns properly maintained, including material storage & Housekeeping ?
  - Q. Adequate supply (1 pallet) of oil-dry stocked in WWT pole barn for emergency use ?
  - R. Scrap metal bins free of non-metal debris, ground around ara clean ?
  - S. Grounds have adequate ground cover to prevent erosion ?
  - T. Are parking area, including truck parking free of debris & contaminates ?
  - U. Save-all dumpster spill containment area free of debris, spills & water ?
5. Explain any "NO" answers below along with item reference number.

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6. West ditch storm water containment valve.
- a. Inspect valve for damage
  - b. Physically close the valve and make sure it works properly
  - c. Put a light coat of lubricant on teh valve stem.  
!! Wipe away all excess lubricant!!!
7. Binder area sump overflow
- a. Ensure that the binder sump overflow hole is free from debris and obstructions. Use a pipe to clean this overflow hole out. Make sure that the hole is COMPLETELY open.  
(this overflow hole is located on the South side of the sump)

This inspection is required by our Stormwater Management Plan in compliance with environmental laws. The statements made above are true and accurate to the best of my knowledge. The completed document will be stored in the environmental file cabinet in the EHS leader's office for official compliance reporting.

Signature (Maint. Technician):

---

Date:

---

Signature (EHS Leader):

---

Date:

---

Failure to complete and document this task must be communicated immediately to the Planner or EHS Leader

revision 10-22-15



Owens Corning Composite Materials  
5520 Planters Road  
Fort Smith, AR 72916

November 27, 2018

Arkansas Department of Environmental Quality  
Attention: Water Quality Compliance Branch  
5301 Northshore Dr.  
North Little Rock, AR 72118

Re: *Owens Corning Composite Materials, LLC (AFIN: 66-00294)*  
*Industrial Storm Water Discharge Permit AR00A832*  
*Written Response to Storm Water Compliance Inspection*

Dear ADEQ:

Please find enclosed the Written Response to Water Division Inspection Report for Owens Corning Composite Materials LLC conducted on 10/17/2018.

In response to Summary of Findings:

1. Contact Information and Responsible Official have not been updated;  
*Owens Corning Response- Change of Authorization form was submitted via email on 10/30/2018, but after reviewing the form submitted was incorrect. A new change of authorization form is included in this official response.*
2. Permitted Outfall coordinates are incorrect:  
*Owens Corning Response- Outfall Modification Request is included in this official response.*
3. Good Housekeeping Practices and Pole Barn BMP's:
  - a. WWT Pole Barn has a gap between floor and walls where dry chemical could spill out and onto ground.  
*Owens Corning Response- Work Ordered Entered into SAP System to Add Boards inside barn to prevent spills from leaving pole barn. To be completed by Jan 30,2019.*
  - b. Covered Structure where fuel cans are stored has a gap between floor and wall where a spill could flow directly to ditch.  
*Owens Corning Response- Work Ordered Entered into SAP System to Add Boards inside barn to prevent spills from leaving pole barn. To be completed by Jan 30,2019.*
4. Calibrations Records are being kept as required for pH meter calibration but do not indicate time of day.  
*Owens Corning Response- Form created to record calibration of pH meter used in measuring Storm Water Discharge Samples created and in use. Copy of form submitted to ADEQ in email on 11/1/2018 and included in this official response.*

5. Inspections being conducted monthly, but the form does not indicate whether a minimum of one inspection is conducted during a rain event.  
*Owens Corning Response- SAP Work Order form has been updated to include check box for rain event inspection.*

Thank you for your assistance with this matter. Please call me at (479) 648-5343 if you have any questions concerning these results.

Sincerely,  
OWENS CORNING COMPOSITE MATERIALS

*Roger Watson*

Roger Watson  
Maintenance Leader

Enclosure:  
Change of Authorization Form  
Outfall Modification Request Form with Map  
Owens Corning Calibration Record Form  
Owens Corning Monthly Storm Water Inspection Form

Email  
Cc: [Dannielle.gray@adeq.state.ar.us](mailto:Dannielle.gray@adeq.state.ar.us)  
[Ed.Ford@owenscorning.com](mailto:Ed.Ford@owenscorning.com)

# Storm Water Sample Collection

DATE: 10-31-18

OPERATOR: Roger Watson

TIME OUTFALL #1 SAMPLE TAKEN:

9:22
------

( PH MUST BE TAKEN Within 15 Minutes)

TIME OUTFALL#1 PH TAKEN:

9:28
------

**Ph Reading Outfall #1**

7.62
------

**Temp.**

17.6 C
--------

TIME OUTFALL #2 SAMPLE TAKEN:

9:35
------

( PH MUST BE TAKEN Within 15 Minutes)

TIME OUTFALL#2 PH TAKEN:

9:42
------

**Ph Reading Outfall #2**

8.57
------

**Temp.**

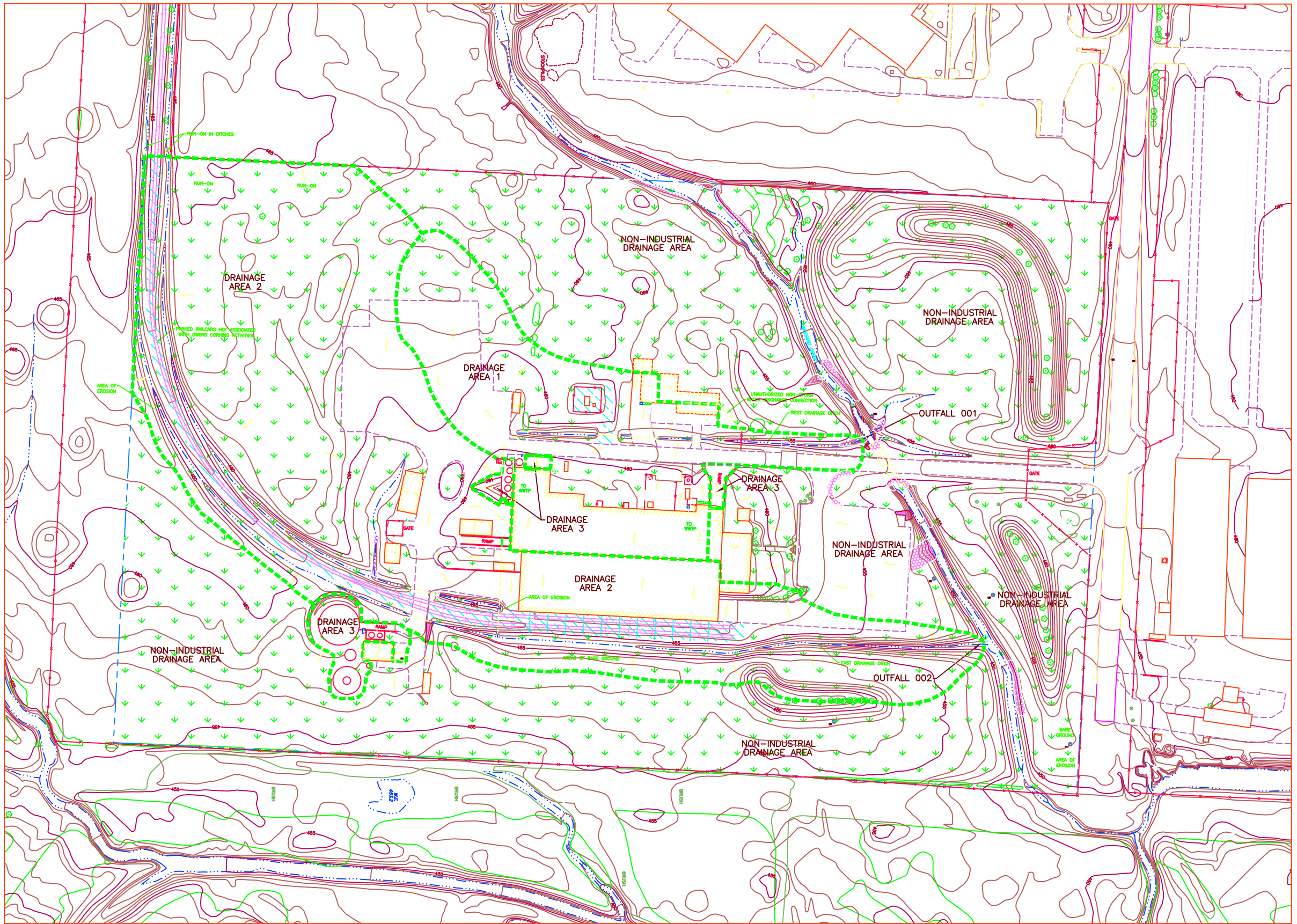
17.8 C
--------

PH DAILY METER CALIBRATION

	Time	BUFFER	BUFFER	INITIALS	SLOPE
	7:27	7.02	10.03	RTW	94.70%
<b>Buffer Exp Dates</b>		<b>May-20</b>	<b>Mar-19</b>		

Comments:

Outfall # 1: Turbidity- Translucent with a slight brown tint, no visible signs of debris or solids. Outfall #2 - Turbidity- Translucent with slight brown tint, no visible signs of debris or solids. No others samples of any kind were read with the Ph Meter after the calibraion at 7:27 am, Only the 2 storm water samples were read.



DRAINAGE AREA 1	SQ. FT.	ACRES	PERCENT
IMPERVIOUS	99,704	2.3	56.7
PERVIOUS	76,080	1.7	43.3
TOTAL	175,784	4.0	100.0

DRAINAGE AREA 2	SQ. FT.	ACRES	PERCENT
IMPERVIOUS	122,399	2.8	24.1
PERVIOUS	385,938	8.8	75.9
TOTAL	508,337	11.6	100.0

DRAINAGE AREA 3	SQ. FT.	ACRES	PERCENT
IMPERVIOUS	14,867	0.3	66.0
PERVIOUS	7,673	0.2	34.0
TOTAL	22,540	0.5	100.0

FACILITY PROPERTY	SQ. FT.	ACRES	PERCENT
TOTAL	1,659,810	38.1	100

**LEGEND**

- DRAINAGE AREA BOUNDARY
- SHEET/SURFACE FLOW
- STORM SEWER
- UNDERGROUND ROOF DRAIN PIPE
- CURBING
- TRENCH DRAIN
- CATCH BASIN
- RIP-RAP
- TREE/BUSH
- BUILDING/ROOF
- GRASS
- GRAVEL
- PAVEMENT

SCALE: 1"=80' CONTOUR INTERVAL = 1'  
DATE OF PHOTOGRAPHY 1-18-8005



date	by	app	rev	description	date	by	app	rev	description	date	by	app	rev	description
01-11-08	RCC	CAM	-	ORIGINAL ISSUE										

This plan or drawing shall be used only with reference to contracts or proposals of Owens Corning.

Building detailed work not including utilities shall be used without written permission from Owens Corning.

related drawings: M23670, M23671

scale: 1"=80'

date: 10-07-08

drawn: RON COFFMAN

checked: RON COFFMAN

engineer: CLIFF MERRITT

approved: \_\_\_\_\_

project: STIM STORM WATER PLANS

location: 40 FORT SMITH AR

sheet: 1 of 1

system: 015 SITE SERVICES

category: Y ENVIRONMENTAL PERMITS

process: STIM STORM WATER PLANS

drawing title: DRAINAGE AREAS AND OUTFALLS

drawing type: G CA, PLOT PLAN

drawing disc: C CIVIL

drawing size: D

revision: M23669

OUTFALL MODIFICATION FORM

The enclosed form may be used to request modifications of outfalls covered under NPDES general permit ARR000000 for discharges of stormwater associated with industrial activity (except from construction activity). The numbering of outfalls should be sequential and begin with Outfall 001 (i.e. if Outfall 001 is deleted, Outfall 002 will become Outfall 001). Attach additional pages to modify more than one outfall.

Outfall Modification Type: Add (Skip Section II) [ ] Remove (Skip Section III) [ ] Move [x]

Permit Tracking No. ARR00A832 AFIN: 66-00294

I. FACILITY INFORMATION:

Permittee: Owens Corning Composite Materials Contact Name: Roger Watson
Facility Name: Owens Corning Composite Materials Phone Number: 479-648-5343
Facility City: Fort Smith Zip: 72916 Email Address: roger.t.watson@owenscorning.com
Mailing Address: 5520 Planters Road
City: Fort Smith State: AR Zip: 72916

II. CURRENT OUTFALL INFORMATION:

Outfall: 001
Outfall Latitude: 35 degrees 18 minutes 17 seconds
Outfall Longitude: -94 degrees 22 minutes 15 seconds
Receiving Stream:

III. NEW OUTFALL INFORMATION:

Outfall: 001
Outfall Latitude: 35 degrees 18 minutes 13.59 seconds
Outfall Longitude: -94 degrees 22 minutes 19.1274 seconds
Receiving Stream: Massard Creek

IV. CONSULTANT INFORMATION (if applicable):

Consultant Contact Name: Company:
Consultant Phone Number: Email Address:

V. SIGNATORY REQUIREMENTS:

"I certify under penalty of law that this document and all attachments were prepared under my direction, or supervision, in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Responsible/Cognizant Official Printed Name: Roger Watson Title: Maintenance Leader
Responsible/Cognizant Official Signature: [Signature] Date: 11/27/18

ATTACH A SITE MAP SHOWING THE NAME AND LOCATION OF EVERY OUTFALL THAT WILL BE COVERED UNDER YOUR EXISTING GENERAL PERMIT AFTER THIS MODIFICATION.

# ADEQ

ARKANSAS  
Department of Environmental Quality

December 12, 2018

Edwin D. Ford  
Owens Corning  
5520 Planters Rd  
Fort Smith, AR 72916

**RE: Owens Corning - Response to Inspection (Sebastian Co)**  
**AFIN: 66-00294 NPDES Permit No.: ARR00A832**

Dear Mr. Ford:

I have reviewed the response pertaining to my October 17, 2018 inspection of the Owens Corning Composite Materials facility in Fort Smith, AR. The information provided sufficiently addresses the violations referenced in my inspection report. At this time, the Department has no further comment concerning this particular inspection. Acceptance of this response by the Department does not preclude any future enforcement action deemed necessary at this site or any other site.

If we need further information concerning this matter, we will contact you. Thank you for your attention to this matter. Should you have any questions, feel free to contact me at (479) 968-7339 extension 11 or you may e-mail me at [dannielle.gray@adeq.state.ar.us](mailto:dannielle.gray@adeq.state.ar.us).

Sincerely,



Dannielle Gray  
District 4 Field Inspector  
Office of Water Quality

CC: Roger Watson, Maintenance Leader, [roger.t.watson@owenscorning.com](mailto:roger.t.watson@owenscorning.com)