



ARKANSAS

ENERGY & ENVIRONMENT

April 12, 2022

Tommy D. Smith, Vice President-Manufacturing
Georgia-Pacific Crossett LLC
P.O. Box 3333
Crossett, AR 71635

Via E-mail to: Tommy.Smith2@gapac.com, sarah.ross@gapac.com, rachel.johnson2@gapac.com

RE: Georgia-Pacific Crossett LLC Inspection (Ashley Co)
AFIN: 02-00013 NPDES Permit No.: AR0001210

Dear Mr. Smith:

On February 2, 2022, I performed a Compliance Evaluation 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 inspection report for any comments.

If I can be of any assistance, please contact me at youngm@adeq.state.ar.us or (501) 837-2073.

Sincerely,

A handwritten signature in black ink, appearing to read 'Michael Young'.

Michael Young
Inspector, Office of Water Quality
5301 Northshore Drive, North Little Rock, AR, 72118


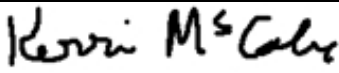
 <p>ENVIRONMENTAL QUALITY</p>	OFFICE OF WATER QUALITY INSPECTION REPORT				
	AFIN: 02-00013	PERMIT #: AR0001210	DATE: 2/2/2022		
	COUNTY: 02 Ashley	PDS #: 119786	MEDIA: WN		
	GPS LAT: 33.135624 LONG: -91.966954 LOCATION: Entrance				
FACILITY INFORMATION		INSPECTION INFORMATION			
NAME: Georgia-Pacific Crossett LLC LOCATION: 100 Mill Supply Road CITY: Crossett, AR 71635		FACILITY TYPE: 2 - Industrial INSPECTOR ID#: 101531 S - State FACILITY EVALUATION RATING: 5 - Satisfactory INSPECTION TYPE: Compliance Evaluation DATE(S): 2/2/2022 ENTRY TIME: 09:58 EXIT TIME: 12:51 PERMIT EFFECTIVE DATE: 11/1/2010 PERMIT EXPIRATION DATE: 10/31/2015			
RESPONSIBLE OFFICIAL		FAYETTEVILLE SHALE RELATED: N			
NAME: / TITLE Tommy D. Smith / Vice President-Manufacturing COMPANY: Georgia-Pacific Crossett LLC MAILING ADDRESS: P.O. Box 3333 CITY, STATE, ZIP: Crossett AR 71635 PHONE & EXT: / FAX: 870-415-6363 / EMAIL: Tommy.Smith2@gapac.com CONTACTED DURING INSPECTION: No		FAYETTEVILLE SHALE VIOLATIONS: N			
		INSPECTION PARTICIPANTS			
		NAME/TITLE/PHONE/FAX/EMAIL/ETC.: Rachel Johnson/Environmental Compliance/870-415-6362/rachel.johnson2@gapac.com Sarah Ross/Environmental and Compliance Leader/870-415-6363/sarah.ross@gapac.com			
AREA EVALUATIONS (S=Satisfactory, M=Marginal, U=Unsatisfactory, N=Not Applicable/Evaluated)					
S	PERMIT	S	FLOW MEASUREMENT	S	STORMWATER
S	RECORDS/REPORTS	S	LABORATORY	S	FACILITY SITE REVIEW
S	OPERATION & MAINTENANCE	S	EFFLUENT/RECEIVING WATER	S	SELF-MONITORING PROGRAM
S	SAMPLING	S	SLUDGE HANDLING/DISPOSAL	S	PRETREATMENT
**	OTHER:				
SUMMARY OF FINDINGS					
No violations observed at the time of inspection.					

GENERAL COMMENTS

On February 2, 2022, I performed an inspection at Georgia-Pacific Crossett LLC with the above participants. GP-Crossett manufactures paper products and has a treatment system consisting of a screen, a single clarifier, equalization by a surge basin, biological treatment by an aerated stabilization basin (ASB), and carbon dioxide for pH adjustment prior to sampling at Outfall 001. Following Outfall 001, there is polishing treatment in Mossy Lake and at Outfall SMS 002 prior to discharge at the Ouachita River (see Figure 1). On October 14, 2019, operations were reduced at the facility in which the bleached board machines, woodyard, pulp mill, chemical recovery, and solid fuel boilers were shut-down and plan to be decommissioned. A pending sell of the resins plant to Bakelite was received by DEQ - OWQ - Permits Branch February 8, 2022. This inspection consisted of a facility evaluation. A records review was not performed as GP-Crossett is sending all sampling information to DEQ - OWQ - Enforcement Branch due to an internal audit.

Facility Evaluation:

Wastewater from the GP-Crossett facility is combined into a piped discharge that enters an earthen ditch prior to the screen and clarifier (see Photos 1-2). Large floatables are collected in the screen (see Photo 3) and the wastewater is discharged to the clarifier using a gate control (see Photo 4). I observed the water in the clarifier to have a blue color and very little odor (see Photos 5-6) and we continued to the sludge press where solids are dried and collected for landfilling (see Photo 7). A request has been submitted to close the abandoned ash basins that are no longer utilized (see Photos 8-10) and Sarah Ross, GP-Crossett Environmental and Compliance Leader, stated that the old material will be used to fill the basin and there were some concerns odors could be created. We continued passed the equalization basin that was not being utilized currently and I observed the gates for the basin (see Photo 11-12). Prior to the ASB but after clarification, there is a pipe from the City of Crossett that discharges municipal wastewater to the GP-Crossett wastewater stream (see Photo 13). Aerators were in operation in the ASB and the clarity of the water has increased dramatically over the past inspections (see Photos 14-15). Carbon dioxide is being used as a pH control prior to Outfall 001 and pH adjustment is automatic based upon continuous internal pH monitoring (see Photo 16). Inside a small building, I observed the refrigerated composite vessel (see Photo 17) and the composite sampler was in operation and capable of collecting flow-weighted samples as required by the permit (see Photo 18). Flow is collected with a totalizer (see Photo 19) that collects flow at the 8 ft. Parshall flume (see Photo 20). I performed an instantaneous flow check of the totalizer using the printed flow chart in the building (see Photo 21). We were unable to continue to Mossy Lake and the outfall at SMS 002 due to poor road conditions at the time of inspection.

INSPECTOR'S SIGNATURE:  Michael Young	DATE: 3/2/2022
SUPERVISOR'S SIGNATURE:  Kerri McCabe	DATE: 4/12/2022

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: <u>Resin Plant being purchased</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input 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:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input 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:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input 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:	<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 checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
SECTION E: FLOW MEASUREMENT	
PERMITTEE FLOW MEASUREMENT MEETS PERMIT REQUIREMENTS	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED: <u>Yes</u> TYPE OF DEVICE: <u>8' Parshall Flume</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: <u>Totalizer</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. CALIBRATION FREQUENCY ADEQUATE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
5. RECORDS MAINTAINED OF CALIBRATION PROCEDURES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
6. CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
7. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE:	<input checked="" type="checkbox"/> Y <input 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 checked="" type="checkbox"/> Y <input type="checkbox"/> N <input 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: Summit Environmental Technologies/Environ/American Interplex/Test America	
b. LAB ADDRESS: <u>3310 Win Street Cuyahoga Falls, OH 44223/Brentwood, TN/Savannah, GA</u>	
c. PARAMETERS PERFORMED: <u>AOX, Dioxin, Chloroform, Chlorinated Phenolics/WET Testing/Metals, Nutrients, Pesticides/Color</u>	
8. BIOMONITORING PROCEDURES ADEQUATE:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
a. PROPER ORGANISMS USED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
b. PROPER DILUTION SERIES FOLLOWED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
c. PROPER TEST METHODS AND DURATION:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
d. RETESTS AND/OR TRE PERFORMED AS REQUIRED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

SECTION G: EFFLUENT/RECEIVING WATERS OBSERVATIONS							
BASED ON VISUAL OBSERVATIONS ONLY						<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE	
DETAILS:							
OUTFALL #:	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOATING SOLIDS	COLOR	OTHER
001	N	N	N	N	N	Light tannins	--
SECTION H: SLUDGE DISPOSAL							
SLUDGE DISPOSAL 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. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY:						<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE	
2. SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503:						<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input 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	

FLOW CALCULATION SHEET

Date: **2-2-2022** Time: **11:58**

Head in Inches: **7** Feet: **0.58**

Type & Size of Primary Flow Measurement Device: **8' Parshall Flume**

Name & Model of Secondary Flow Measurement Device:

Date of last Calibration of Secondary Flow Device: **Weekly**

Recorded Flow at Date & Time Listed Above: **9.7** (Facility Flow Meter)

Calculated Flow at Date & Time Listed Above: **9.7**

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

% Error =	Recorded Value	-	Calculated Value	X 100
	Calculated Value			

% Error =	9.7	-	9.7	X 100
	9.7			

% Error =	0	X 100
	0	

% Error =	0	X 100
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% Error =	0	%
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Comments: **No error.**

Office of Water Quality Photographic Evidence Sheet

Location:	Georgia-Pacific Crossett LLC		
Photographer:	Michael Young	Date:	02/02/2022
Witness:		Time:	10:35
		Photo #:	1
Description:	Wastewater discharged from covered pipe for treatment.		



Photographer:	Michael Young	Date:	02/02/2022
Witness:		Time:	10:36
		Photo #:	2
Description:	Wastewater from the GP-Crossett facility flowing toward the clarifier.		



Office of Water Quality Photographic Evidence Sheet

Location:	Georgia-Pacific Crossett LLC		
Photographer:	Michael Young	Date:	02/02/2022
Witness:		Time:	10:36
		Photo #:	3
Description:	Screen prior to the clarifier that collects large materials.		



Photographer:	Michael Young	Date:	02/02/2022
Witness:		Time:	10:38
		Photo #:	4
Description:	Gates to control flow to clarifier following screen.		



Office of Water Quality Photographic Evidence Sheet

Location:	Georgia-Pacific Crossett LLC		
Photographer:	Michael Young	Date:	02/02/2022
Witness:		Time:	10:38
		Photo #:	5
Description:	Clarifier with wastewater from GP-Crossett facility.		



Photographer:	Michael Young	Date:	02/02/2022
Witness:		Time:	10:38
		Photo #:	6
Description:	Clarifier with wastewater from GP-Crossett facility.		



Office of Water Quality Photographic Evidence Sheet

Location:	Georgia-Pacific Crossett LLC		
Photographer:	Michael Young	Date:	02/02/2022
Witness:		Time:	10:47
		Photo #:	7
Description:	Solids removed from clarifier and dried through sludge press.		



Photographer:	Michael Young	Date:	02/02/2022
Witness:		Time:	10:51
		Photo #:	8
Description:	Abandoned ash basin that is no longer in use.		



Office of Water Quality Photographic Evidence Sheet

Location:	Georgia-Pacific Crossett LLC		
Photographer:	Michael Young	Date:	02/02/2022
Witness:		Time:	10:52
		Photo #:	9
Description:	Abandoned ash basin that is no longer in use.		



Photographer:	Michael Young	Date:	02/02/2022
Witness:		Time:	10:52
		Photo #:	10
Description:	Abandoned ash basin that is no longer in use.		



Office of Water Quality Photographic Evidence Sheet

Location:	Georgia-Pacific Crossett LLC				
Photographer:	Michael Young	Date:	02/02/2022	Time:	11:11
Witness:				Photo #:	11
Description:	Gates used to control discharge from stormwater detention basin.				



Photographer:	Michael Young	Date:	02/02/2022	Time:	11:12
Witness:				Photo #:	12
Description:	Flow from the stormwater retention basin.				



Office of Water Quality Photographic Evidence Sheet

Location:	Georgia-Pacific Crossett LLC		
Photographer:	Michael Young	Date:	02/02/2022
Witness:		Time:	11:33
		Photo #:	13
Description:	Discharge pipe of municipal wastewater from the City of Crossett wastewater ponds.		



Photographer:	Michael Young	Date:	02/02/2022
Witness:		Time:	11:44
		Photo #:	14
Description:	View of the aerators in operation in the ASB.		



Office of Water Quality Photographic Evidence Sheet

Location:	Georgia-Pacific Crossett LLC		
Photographer:	Michael Young	Date:	02/02/2022
Time:	11:44	Witness:	
Photo #:	15	Description: Clarity of the ASB pond has been exceptionally improved.	



Photographer:	Michael Young	Date:	02/02/2022
Time:	11:53	Witness:	
Photo #:	16	Description: Carbon dioxide utilized for pH adjustment.	



Office of Water Quality Photographic Evidence Sheet

Location:	Georgia-Pacific Crossett LLC		
Photographer:	Michael Young	Date:	02/02/2022
Witness:		Time:	11:55
		Photo #:	17
Description:	Collection vessel for composite sampler inside refrigerator.		



Photographer:	Michael Young	Date:	02/02/2022
Witness:		Time:	11:55
		Photo #:	18
Description:	Composite sampler communicating with flow device for flow-weighted sampling.		



Office of Water Quality Photographic Evidence Sheet

Location:	Georgia-Pacific Crossett LLC		
Photographer:	Michael Young	Date:	02/02/2022
Witness:		Time:	11:56
		Photo #:	19
Description:	Totalizer for flow measurements at Outfall 001.		

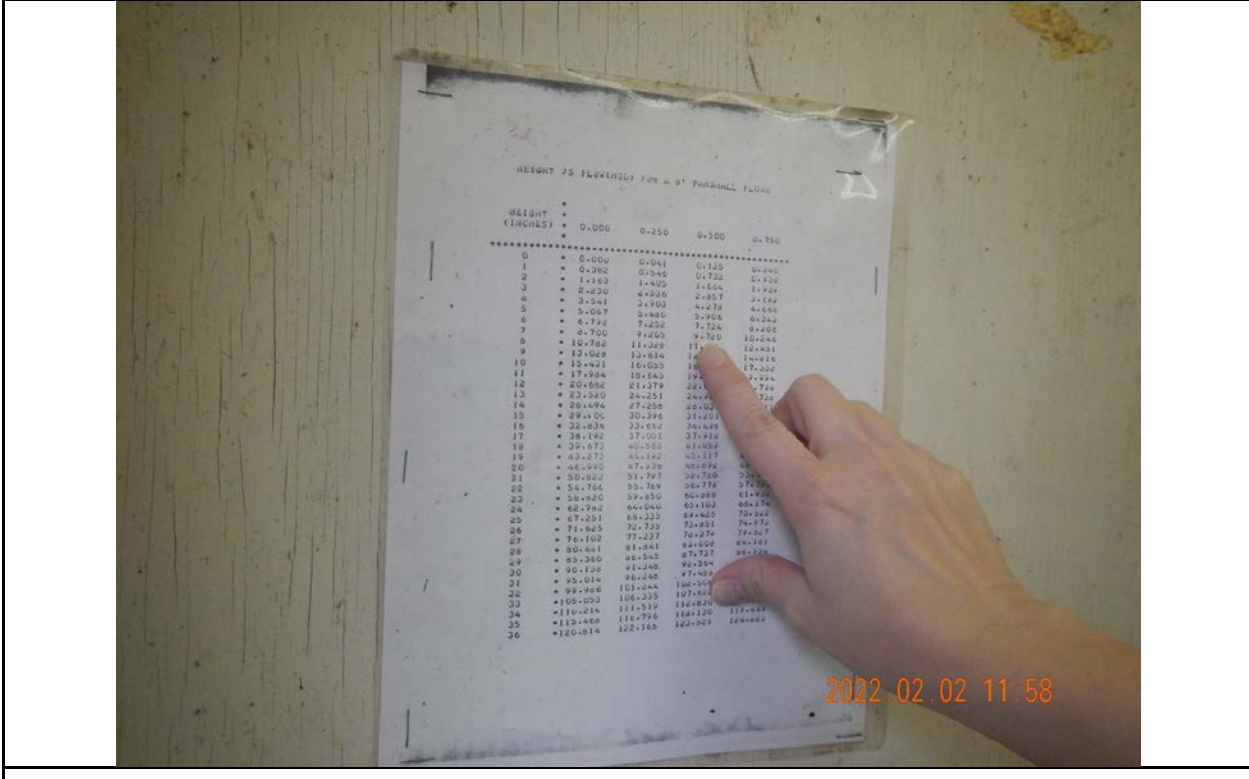


Photographer:	Michael Young	Date:	02/02/2022
Witness:		Time:	11:57
		Photo #:	20
Description:	Instantaneous pH meter utilized for pH adjustments.		



Office of Water Quality Photographic Evidence Sheet

Location:	Georgia-Pacific Crossett LLC		
Photographer:	Michael Young	Date:	02/02/2022
Witness:		Time:	11:58
		Photo #:	21
Description:	Flow chart used to provide instantaneous flow for the flume.		



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Figure 1. Overview of the locations of the GP-Crossett facility: screen and clarifier, abandoned ash basin, ASB, and Outfall 001. Mossy Lake and SMS 002 are also indicated, but they were not accessible at the time of the inspection.

