| Permit Number: A | AR 0051454 |
|--------------------|------------|
| AFIN 60- | |
| Industrial Sector: | NIA |
| | Basic 4 |

DMR Review Form

| Annual Report Received? | Yes | ☐ No |
|----------------------------------|-------------|------|
| Are All Parameters Okay? | Yes | No |
| Parameters exceeding the benchma | ark values: | * 6 |

| Pollutant | Reported Value | Benchmark Value | Outfall # | Period |
|------------------|----------------|-----------------|-----------|--------|
| pH | 9.6 | 6.0-9.0 | 006 | 156 |
| TSS | 1092 | 100 | 007 | 1st |
| ott | 9,3 | 6.0-9.0 | 002 | 1st |
| N . | | | | |
| | | | | |
| | | - | | |
| | | | | |
| | | | | |
| | | | | |
| Carrie V Account | | | | |
| | | | | |
| | | | | |

| Hatturine Yachung 2/1/12 Engineer Signature / Date |
|---|
| Thursday of the |
| Engineer Signature / Date |
| |
| 2/1/12 Kay |
| Date information was entered into database |
| 2/1/2 |
| Date letter was completed |

Outlined the Corrective actions V

CC: David Ramsey

F34D2

Arkansas Department of Environmental Quality (ADEQ) 5301 Northshore Drive North Little Rock, AR 72118-5317

Industrial Stormwater General Permit (ARR000000) Annual Report Form

| | 1 2 |
|---|-----------------|
| Permit No. ARR-00 <u>5</u> <u>1</u> <u>4</u> <u>5</u> <u>4</u> | |
| Permittee Name: Paul River, Gene | eral Manger |
| Facility Name: Caterpillar Inc. | 1 34 1 |
| Facility Physical Address (<u>not</u> mai 9201 Faulkner Lake Road | iling address): |
| Facility City: North Little Rock | Zip Code: 72117 |

| Facility Contact Name: Katina Stephens | Title: EHS Professional | |
|--|---|--|
| Facility Contact Phone Number (501) 955-5240 | Facility Contact Email: stephens_katina@cat.com | |
| Reporting Period: January 1 st to December 31 st 2011 (Year) | | |

This Form may be used to submit your annual report to ADEQ. All facilities must submit a signed annual report each year on or before **January 31**st. DMRs for each monitored outfall must be submitted with the annual report. Retain a copy of your submitted report onsite.

1. Benchmarks Exceeded

| Did the facility exceed the benchmark for any parameter during the previou 31 st)? Note : If a parameter was sampled at a discharge point more than once the reported and evaluated individually: | | |
|--|------------------|--|
| Yes | JAN 31 2012 | |
| No - Complete Section 2, 3, 5 and 6. | MR 22376 | |
| Include any additional comments here: | Ву | |
| Benchmarks were exceeded in Jan Jul. 2011 for Outfall 002 & 006 for pH, | and 007 for TTS. | |
| | | |

2. Evaluations and Inspections

Facilities are required to complete a minimum of 4 visual site inspections and 1 comprehensive site compliance evaluation per year. Please include the dates of these inspections below. If more than the minimum number of inspections and evaluations were completed, please just include dates for 4 visual site inspections and 1 comprehensive site compliance evaluation.

| Visual Site Inspection #1 Date | Mar.31, 2011 |
|---|---------------|
| Visual Site Inspection #2 Date | Jun. 29, 2011 |
| Visual Site Inspection #3 Date | Aug. 8, 2011 |
| Visual Site Inspection #4 Date | Nov. 7, 2011 |
| Comprehensive Site Compliance Evaluation Date | Nov. 9, 2011 |
| | |

3. Stormwater Problems Identified At the Facility

Instructions: Based on the best available information, briefly describe any potential or actual stormwater pollution problem(s) you identified during the previous calendar year (Jan 1st – Dec 31st) comprehensive site evaluation and quarterly visual site inspections.

- Sources of available information may also include (but may not be limited to): SWPPP reviews, audits made by consultants or providers of technical assistance, inspection reports or other notification made by federal/state/local authorities, visual observations, and/or your facility's monthly site inspections (self-inspections).
- For each problem identified, provide the date you discovered the problem (estimate if necessary).
- Do not include problems discovered through stormwater sampling. This information is covered in Section 4.
- If no problems were identified, put N/A for Not Applicable.

| Date Problem Discovered: Aug. 08, 2011 Describe the Problem: Parts positioned in front of the storm water outfalls | | |
|--|-----------------------|--|
| Date Problem Discovered: | Describe the Problem: | |
| Date Problem Discovered: | Describe the Problem: | |
| Date Problem Discovered: | Describe the Problem: | |

4. Corrective Actions Planned or Taken

| Instructions: Complete this section for each pollutant parameter (e.g., turbidity, copper) that exceeded a |
|---|
| benchmark during the previous calendar year (Jan – Dec). If the parameter benchmark value is exceeded, |
| the facility must investigate the cause of each parameter exceedance and determine a corrective action plan. |
| To do this, indicate below in which sampling period an exceedance occurred. If more than one sample was taken at a sample location, indicate all sample results that exceeded the benchmark. Note: If the facility |
| exceeded the benchmark for more than one parameter (e.g., turbidity & zinc), make additional copies of |
| Section 4 and complete one for each parameter. |
| Pollutant Parameter: TTS benchmark was exceeded during the following sampling period (check all that |
| apply): ☑ 1 st Sampling period (January-June) ☐ 2 nd Sampling Period (July-December) |
| For the each pollutant parameter exceeding the benchmark_summarize below any corrective actions plan completed during the previous calendar year and include the dates you completed the corrective actions. |
| Outfall 007 was tested on Feb. 1, 2011, TTS result = 1092.00 mg/L. Outfall 007 was sampled after a large amount of snowfall; the facility used construction equipment (motor graders) to move snow in certain areas to clear the sidewalks. We believed the accumulated snow melt was deposited near outfall 007 creating the increase of TTS. The facility reviewed the SWPPP and could not find any issues with the SWPPP. A note was made that the facility should pay close attention were the accumulated snow is place. The facility resampled the out fall on Aug. 24, 2011. The results were as followed: 007 TTS = 12.0 mg/L |
| For the each pollutant parameter exceeding the benchmark summarize any corrective actions plan initiated during the previous calendar year, but have not yet been completed. Identify the date you expect to complete corrective actions. |
| |

4. Corrective Actions Planned or Taken

| Instructions: Complete this section for each pollutant benchmark during the previous calendar year (Jan – De the facility must investigate the cause of each parameter. To do this, indicate below in which sampling period an taken at a sample location, indicate all sample results exceeded the benchmark for more than one parameter. Section 4 and complete one for each parameter. | ec). If the parameter benchmark value is exceeded, rexceedance and determine a corrective action plan. exceedance occurred. If more than one sample was that exceeded the benchmark. Note: If the facility |
|---|--|
| Pollutant Parameter: pH benchmark was exceeded dapply): | uring the following sampling period (check all that |
| 1st Sampling period (January-June) | 2 nd Sampling Period (July-December) |
| For the each pollutant parameter exceeding the bench completed during the previous calendar year and include | |
| Outfall 002, and 006, were sampled on Feb. 2, 2011. The 9.6. These outfall were sampled after large amount of states that was placed on the pavement to melt the ice that the salt used to melt the ice was being stored near thouside and is now storing the salt on the inside of the bresampled, the results were as follows: Outfall $002 = 7.5$ | nowfall. We believe the reason for the high pH was combined with snowfall run off. We also discovered hese outfalls. The facility has removed the salt from uilding. On May 2, 2011 the outfalls were |
| For the each pollutant parameter exceeding the benchm during the previous calendar year, but have not yet complete corrective actions. | |

5. Are the DMRs included with this report? Yes No .

6. Certification by Permittee

"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."

| RICHARD BARCH | EHS MANAGER | 1/30/2012 |
|---------------|-------------|-----------|
| Printed Name | Title | Date |
| Signature* | en . | _ |
| / | | |

- * Federal regulations require this report to be signed by the following person, or a duly authorized representative:
 - A. In the case of corporations, by a principal executive officer of at least the level of vice president.
 - B. In the case of a partnership, by a general partner of a partnership.
 - C. In the case of sole proprietorship, by the proprietor.
 - D. In the case of a municipality, state, federal, or other public facility: by either a principal executive officer or ranking elected official.

A person is a duly authorized representative only if:

- 1. The authorization is made in writing by a person described above and submitted to ADEQ.
- 2. The authorization specifies either an individual or a position having responsibility for the overall operation of the regulated facility, such as the position of plant manager, superintendent, position of equivalent responsibility, or an individual or position having overall responsibility for environmental matters.

Please return the signed document to the address below. Make sure you retain a copy for your records.

Arkansas Department of Environmental Quality Water Division, General Permits Section 5301 Northshore Dr.
North Little Rock, AR 72118
Water.Permit.Application@adeq.state.ar.us

RENE' MEINTS

REPORT OF NON-COMPLIANCE WITH EFFLUENT LIMITATIONS

PERMITEE: CATERPILLAR, INC. 002

PERMIT:

REPORTING PERIOD: JAN - JUN 2011

REPORT DATE: JULY 2011

| PARAMETER (S) | NPDES MIN | NPDES AVG | NPDES MAX | RESULT REPORTED | DATE OF EXCURSION |
|---------------|--------------|--------------|--------------|--------------------|-------------------|
| pH S.U. | | | 9.00 | 9.3 | 02/01/11 |
| | | | | | |

COMMENTS:

In 2/1/2011 CAT had a non compliant outfall. Cat retrested the outfall on 5/2/2011. Both outfalls averaged together = 8.4 pH. Cat sixt documentation to ADEQ for the reason for Non-compliance.

See DMR results.

PRINCIPAL EXECUTIVE OFFICER

TITLE

DATE

CATERPILLAR, INC.

EHS Manager

07/21/2011

RENE' MEINTS

REPORT OF NON-COMPLIANCE WITH EFFLUENT LIMITATIONS

PERMITEE: CATERPILLAR, INC. 006

PERMIT:

REPORTING PERIOD: JAN - JUN 2011

REPORT DATE: JULY 2011

| PARAMETER(S) | NPDES MIN | NPDES AVG | NPDES MAX | RESULT REPORTED | DATE OF EXCURSION |
|--------------|--------------|--------------|--------------|--------------------|-------------------|
| pH S.U. | | | 9.00 | 9.6 | 02/01/11 |
| | | | | | |

COMMENTS:

On 2/1/2011 CAT had a non compliant outfall. On 5/2/2011 CAT retested the outfall both outfalls averaged 8.6 ph. CAT sent documentation report for non-compliance to ADEQ.

See DMR reports for results.

PRINCIPAL EXECUTIVE OFFICER

DATE

CATERPILLAR, INC.

EHS Manager

07/21/2011

TO

Environmental Services Company 13715 W. Markham - 72211 P.O. Box 55146 Little Rock, AR 72115

Form Approved OMB No. 2(40-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

ADDRESS:

9201 FAULKNER LAKE ROAD NORTH LITTLE ROCK, AR 72117

FACILITY:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

LOCATION: 9201 FAULKNER LAKE ROAD

NORTH LITTLE ROCK, AR 72117

ATTN: JON HARRISON/KATINA STEPHENS

MONITORING PERIOD MM/DD/YYYY FROM 01/01/2011

AR0051454

PERMIT NUMBER

MM/DD/YYYY 06/30/2011

001-S

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 72117

MINOR

(501) 221-2565

001-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

| PARAMETER | ALC: U | QUAN | TITY OR LOADING | G | QI | UALITY OR CON | CENTRATION | | NO. EX | FREQUENCY OF ANALYSIS | SAMPLE TYPE |
|--|-----------------------|--------|-----------------|-------|---------|---------------|-----------------------|-------|-----------|--------------------------|----------------|
| | (6) HA - 162 | VALUE | VALUE | UNITS | VALUE | VALUE | VALUE | UNITS | | | |
| Oxygen demand, chem, (low level) (COD) | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | | 33.90 | mg/L | 0 | 1/61/ | GRAB |
| 00335 1 0 Effluent Gross | PERMIT REQUIREMENT | | ****** | | ***** | ***** | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| рН | SAMPLE MEASUREMENT | , | | | 841 | | 8.1 | SĽ | 0 | 1/6M | GRAB |
| 00400 1 0 Effluent Gross | PERMIT REQUIREMENT | 472457 | 10140 | ***** | MINIMUM | *1444 | MUMIXAM | SU | | Once Every 5 Months | GRAB |
| Solids, total suspended | SAMPLE MEASUREMENT | | ***** | | ***** | | <1.0 | mg/L | 0 | 1/6M | GRAB |
| 00530 1 0 Effluent Gross | PERMIT REQUIREMENT | ****** | nno | ***** | ****** | 40+40+ | Reg. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAR |
| Oll & Grease | SAMPLE MEASUREMENT | ***** | passas | ***** | ****** | ***** | 1.600 | mg/L | 0 | 1/6M | GRAB |
| 00556 1 0 Effluent Gross | PERMIT REQUIREMENT | ***** | 100000 | 04444 | 40+443 | ***** | Reg. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |

TELEPHONE DATE NAME/TITLE PRINCIPAL EXECUTIVE OFFICER KICHARD BARCH EHS Manager TYPED OR PRINTED SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT NUMBER MM/DD/YYYY AREA Code

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

AR0051454

PERMIT NUMBER

Environmental Services Company 13715 W. Markham - 72211 P.O. Box 55146 Little Rock, AR 72115

Form Approved OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

ADDRESS:

9201 FAULKNER LAKE ROAD

NORTH LITTLE ROCK, AR 72117

FACILITY:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

LOCATION: 9201 FAULKNER LAKE ROAD

ATTN: JON HARRISON/KATINA STEPHENS

NORTH LITTLE ROCK, AR 72117

FROM

DISCHARGE NUMBER MONITORING PERIOD

MM/DD/YYYY MM/DD/YYYY

TO 12/31/2011 07/01/2011

001-\$

DMR Mailing ZIP CODE:

72117

MINOR

(501) 221-2565

001-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

| PARAMETER | | QUAN | TITY OR LOADING | 3 | QI | JALITY OR CON | CENTRATION | | NO. EX | FREQUENCY OF ANALYSIS | |
|--|-----------------------|---------|-----------------|--------|---------|---------------|-----------------------|-------|-----------|--------------------------|------|
| | | VALUE | VALUE | UNITS | VALUE | VALUE | VALUE | UNITS | | | |
| Oxygen demand, chem. (low level) (COD) | SAMPLE MEASUREMENT | ***** | ***** | ****** | ***** | 144949 | 69.20 | mg/L | 0 | 1/6MO | GRAB |
| 00335 1 0 Effluent Gross | PERMIT REQUIREMENT | ******* | ***** | ****** | ,,,,,,, | **** | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| pH | SAMPLE MEASUREMENT | ***** | ***** | ****** | 7.6 | 4418** | 7.6 | SU | 0 | 1/6MO | GRAB |
| 00400 1 0 Effluent Gross | PERMIT REQUIREMENT | 304344 | ***** | ***** | MINIMUM | ***** | MUMIXAM | SU | | Once Every 6 Months | GRAB |
| Solids, total suspended | SAMPLE MEASUREMENT | ***** | ***** | ***** | 123474 | ***** | ∠1.0 | mg/L | 0 | 1/6MO | GRAB |
| 00530 1 0 Effluent Gross | PERMIT REQUIREMENT | 407444 | ****** | ****** | ****** | A41A6+ | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| Oil & Grease | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | ***** | 1.80 | mg/L | 0 | 1/6MO | GRAB |
| 00556 1 0 Effluent Gross | PERMIT REQUIREMENT | ***** | ****** | ***** | ***** | 111777 | Reg. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Paul Rivera Plant Mg TYPED OR PRINTED

I certify under penelty of law that this descences and all utachments were prepared under my direction in apprecision in accordance within a system despited to entire the qualitate personnel property galler and extracted the information authoritied. Theselven my output of the personnel personnel parties and extracted the information by output of the personnel personnel me manage the system, or those personnel streetly inspectable for gathering the information, the information information is not the best of my hammeling and belief, then, accurate and complete if now more into the one of my personnel penalties for a value in the first own controlled and penalties for a value in the first own controlled and penalties for a value in the first own and the first own and the first own and the penalties of the case impressed and the first own and the penalties of the case impressed in the first own and the first own and the first own and the penalties of the case impressed in the first own and the first own and the penalties of the case impressed in the first own and the first own an

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE 501.2282740 23/2012 NUMBER MWDDYYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

TO

P.O. Box 55146 Little Rock, AR 72115

Environmental Services Company 13715 W. Markham - 72211

Form Approved

72117

CMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

ADDRESS: 9201 FAULKNER LAKE ROAD NORTH LITTLE ROCK, AR 72117

FACILITY: CATERPILLAR, INC., NORTH AMERICAN MOTOR G

LOCATION: 9201 FAULKNER LAKE ROAD

ATTN: JON HARRISON/KATINA STEPHENS

NORTH LITTLE ROCK, AR 72117

FROM

MONITORING PERIOD MM/DD/YYYY

01/01/2011

AR0051454

PERMIT NUMBER

MM/DD/YYYY 06/30/2011

002-S

DISCHARGE NUMBER

DMR Mailing ZIP CODE:

MINOR

(501) 221-2565

002-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

| PARAMETER | | QUAN. | TITY OR LOADING | 3 | QI | JALITY OR CON | CENTRATION | | NO. EX | FREQUENCY OF ANALYSIS | SAMPLE TYPE |
|--|-----------------------|--|-----------------|--------|--------------|---------------|-----------------------|-------|-----------|--------------------------|----------------|
| | The state of | VALUE | VALUE | UNITS | VALUE | VALUE | VALUE | UNITS | | | |
| Oxygen demand, chem. (low level) (COD) | SAMPLE MEASUREMENT | ****** | 2,1800 | | 44724 | 73.220 | 19.30 | mg/L | 0 | 1/6M | GRAB |
| 00335 1 0 Effluent Gross | PERMIT REQUIREMENT | 414161 | 111111 | ****** | 144144 | ****** | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| рН | SAMPLE MEASUREMENT | | ***** | | 7.5 | 725424 | 9.3 | SU | 1 | 2/6M | GRAB |
| 00400 1 0 Effluent Gross | PERMIT REQUIREMENT | 194144 | ***** | ***** | 6 MINIMUM | 304044 | 9 MUMIXAM | SU | | Once Every 6 Months | GRAB |
| Solids, total suspended | SAMPLE MEASUREMENT | ***** | 400000 | ***** | ***** | ***** | 8.0 | mg/L | 0 | 1/6M | GRAB |
| 00530 1 0 Effluent Gross | PERMIT REQUIREMENT | ***** | 255215 | ****** | 1/141/1 | \$1422¢ | Reg. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| Oil & Grease | SAMPLE MEASUREMENT | ***** | ****** | | ***** | | 4.200 | mg/L | 0 | 1/6M | GRAB |
| 00556 1 0 Effluent Gross | PERMIT REQUIREMENT | PR & S & S & S & S & S & S & S & S & S & | ******* | P#200A | tratus | 220224 | Reg. Mon. DAILY MX | mg/L | = 1 | Once Every 8 Months | GRAB |

| | | 1611 | TE | LEPHONE | DATE |
|------------------------------|---|--|----------------|---------|------------|
| RICHARD BARCH EHS Moncret | endman (to reformation schemical lives do not enquire of the primes or persects who instruge the come, or home persons thereby the respectful for governing time indicatation, the adequation of the intervention and helicity, time, acceptate and complete U on on our that there we propriously positive to our own that there we propriously positive to our own they there is formation, to help up to provide the other personance it for the province of the contract of the province | | 50/2 | 282140 | 07/21/2011 |
| TYPED OR PRINTED | sofahiya (| SIGNATURE OF PRINCIPAL EXECUTIVE OFFICE AUTHORIZED AGENT | R OR AREA Gode | NUMBER | MM/DD/YYYY |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Environmental Services Company 13715 W. Markham - 72211 P.O. Box 55146 Little Rock, AR 72115 (501) 221-2565

Form Approved OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

ADDRESS:

9201 FAULKNER LAKE ROAD NORTH LITTLE ROCK, AR 72117

FACILITY:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

LOCATION: 9201 FAULKNER LAKE ROAD

ATTN: JON HARRISON/KATINA STEPHENS

NORTH LITTLE ROCK, AR 72117

FROM

AR0051454

PERMIT NUMBER

MONITORING PERIOD MM/DD/YYYY MM/DD/YYYY TO 12/31/2011 07/01/2011

002-S

DISCHARGE NUMBER

DMR Mailing ZIP CODE:

72117

MINOR

002-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

| PARAMETER. | | QUAN | TITY OR LOADIN | G | Q | UALITY OR CON | CENTRATION | | NO. EX | FREQUENCY OF ANALYSIS | SAMPLE |
|--|-----------------------|---------|----------------|--------|---------|---------------|-----------------------|-------|------------|--------------------------|--------|
| | State State | VALUE | VALUE | TINITS | VALUE | VALUE | v ¥₽'n₽ | UNITS | . . | | |
| Oxygen demand, chem. (low level) (COD) | SAMPLE MEASUREMENT | 404040 | **** | ***** | ***** | ***** | 28.10 | mg/L | 0 | 1/6MO | GRAB |
| 00335 1 0 Effluent Gross | PERMIT REQUIREMENT | traver. | ****** | ***** | 209420 | ***** | Reg. Mon. DAILY MX | mg/L | | Once Every 6 Month | GRAB (|
| pH | SAMPLE MEASUREMENT | | | ***** | 6.8 | ***** | 6.8 | s.u. | 0 | 1/6MO | GRAB |
| 00400 1 0 Effluent Gross | PERMIT REQUIREMENT | 474.44 | ***** | #/day | MINIMUM | 204844 | MUMIXAM | SU | | Once Every 6 Months | GRAB |
| Solids, total suspended | SAMPLE MEASUREMENT | ****** | 694964 | ***** | ***** | ****** | 21.0 | mg/L | 0 | 1/6MO | GRAB |
| 00530 1 0 Effluent Gross | PERMIT REQUIREMENT | ****** | 741171 | #/day | ***** | P44444 | Req. Mon. DAILY MX | mg/L | | Once Every 6 | GRAB |
| Oil & Grease | SAMPLE MEASUREMENT | ***** | ***** | 400400 | ***** | ****** | Z1.40 | mg/L | 0 | 1/6MO | GRAB |
| 00556 1 0 Effluent Gross | PERMIT REQUIREMENT | A3++43 | 44000 | ****** | 410047 | ***** | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Paul TYPED OR PRINTED

I certify under penalty of faw that the document and all attachments were prepared under my direction or supervision in accombine with a covern designed to acone that qualified penalmed proporty gather and extrators the unformation advented. Based on my inquiry of the person or persons who amongs the system, or those persons durintly responsible for gathering the assistance, the notes action advanted is,

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR **AUTHORIZED AGENT**

TELEPHONE DATE 501.22.8.2740 23 2017 NUMBER MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

TO

Environmental Services Company 13715 W. Markham - 72211 P.O. Box 55146 Little Rock, AR 72115 (501) 221-2565

Form Approved OMB No. 2010-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

ADDRESS:

9201 FAULKNER LAKE ROAD NORTH LITTLE ROCK, AR 72117

FACILITY:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

ATTN: JON HARRISON/KATINA STEPHENS

LOCATION: 9201 FAULKNER LAKE ROAD NORTH LITTLE ROCK, AR 72117

FROM

MONITORING PERIOD MM/DD/YYYY 01/01/2011

AR0051454

PERMIT NUMBER

MM/DD/YYYY 06/30/2011

003-S

DISCHARGE NUMBER

DMR Mailing ZIP CODE:

72117

MINOR

003-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

| PARAMETER | TO CELET | QUAN' | TITY OR LOADING | 3 | Ql | JALITY OR CON | CENTRATION | | NO. EX | FREQUENCY OF ANALYSIS | SAMPLE TYPE |
|--|-----------------------|---------|-----------------|--------|---------|---------------|-----------------------|-------|-----------|--------------------------|----------------|
| | VF-4712-12 | VALUE | VALUE | UNITS | VALUE | VALUE | VALUE | UNITS | | | 0.20 |
| Oxygen demand, chem. (low level) (COD) | SAMPLE MEASUREMENT | ***** | ***** | | ***** | ***** | 25.50 | mg/L | 0 | 1/6M | GRAB |
| 00335 1 0 Effluent Gross | PERMIT REQUIREMENT | ***** | ****** | ***** | ****** | ***** | Reg. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| pH | SAMPLE MEASUREMENT | 40400 | 400000 | | 8.6 | ***** | 8.6 | su | 0 | 1/6M | GRAB |
| 00400 1 0 Effluent Gross | PERMIT REQUIREMENT | 440441) | 1071) | ***** | MINIMUM | 410440 | 9 MUMIXAM | SU | | Once Every 6 Months | GRAB |
| Solids, total suspended | SAMPLE MEASUREMENT | 18000 | ***** | | ***** | ***** | 10.0 | mg/L | 0 | 1/6M | GRAB |
| 00530 1 0 Effluent Gross | PERMIT REQUIREMENT | 146419 | 154444 | ****** | 1,000 | ******** | Req. Mcn. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| Oil & Grease | SAMPLE MEASUREMENT | 44400 | ***** | | ***** | | <1.400 | mg/L | 0 | 1/6M | GRAB |
| 00556 1 0 Effluent Gross | PERMIT REQUIREMENT | *10*** | ****** | ***** | eseber | 84-24- | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |

| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER | I sentily under penalty of how that the document and all after beauty twee prepared under my direction or interestions in recondence with a system designed to obtain that qualified personnel property gather and | / | 41 | TEL | EPHONE | DATE |
|--|---|----------|---|-----------|--------|------------|
| 7 | explaint the information information filtered on my majory of the person or persons this imangle the common or their private departs in suppossible for partnering the information. In the referentiated by, to their hard to be known to the partners of the | | ture. | 50/2 | 282740 | 07/21/2011 |
| TYPED OR PRINTED | provides for submitting false in exemption, including the postability of face and impreservement for landshing similations. | SIGNATUR | E OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | A4EA Code | NUMBER | милорууу |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Environmental Services Company 13715 W. Markham - 72211 P.O. Box 55146

Little Rock, AR 72115 (501) 221-2565

Form Approved OMB No. 2040-C004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

ADDRESS:

9201 FAULKNER LAKE ROAD NORTH LITTLE ROCK, AR 72117

ATTN: JON HARRISON/KATINA STEPHENS

FACILITY: CATERPILLAR, INC., NORTH AMERICAN MOTOR G

LOCATION: 9201 FAULKNER LAKE ROAD

NORTH LITTLE ROCK, AR 72117

MONITORING PERIOD MM/DD/YYYY FROM 07/01/2011

AR0051454

PERMIT NUMBER

MM/DD/YYYY TO 12/31/2011

003-S

DISCHARGE NUMBER

DMR Mailing ZIP CODE:

MINOR

003-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

72117

| PARAMETER | | QUAN | TITY OR LOADING | 3 | QI | JALITY OR CON | ICENTRATION | | NO. EX | FREQUENCY OF ANALYSIS | SAMPLE TYPE |
|--|-----------------------|--------|-----------------|--------|---------|---------------|-----------------------------|-------|-----------|--------------------------|----------------|
| | | VALUE | VALUE | UNITS | VALUE | VALUE | VALUE | UNITS | | | |
| Oxygen demand, chem. (low level) (COD) | SAMPLE MEASUREMENT | | ***** | 227500 | 240924 | 212241 | 32.70 | mg/L | 0 | 1/6MO | GRAB |
| 00335 1 0 Effluent Gross | PERMIT REQUIREMENT | 427320 | ***** | ***** | ***** | 54444 | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| рН | SAMPLE MEASUREMENT | ***** | ***** | ***** | 7.2 | ***** | 7.2 | S.U. | 0 | 1/6MO | GRAB |
| 00400 1 0 Effluent Gross | PERMIT REQUIREMENT | 649644 | ***** | ***** | WINIMUM | 20184 | MUMIXAM | SÜ | | Once Every 6 Months | GRAB |
| Solids, total suspended | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | ***** | 2.0 | mg/L | 0 | 1/6MO | GRAB |
| 00530 1 0 Effluent Gross | PERMIT REQUIREMENT | ****** | ***** | ***** | ****46 | 4444 | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRA8 |
| Oil & Grease | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | ***** | \(\lambda_{1.40} \) | mg/L | 0 | 1/6MO | GRAB |
| 00556 1 0 Effluent Gross | PERMIT REQUIREMENT | ***** | A>444A | ***** | ***** | ***** | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER TYPED OR PRINTED

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 501.228.2740 NUMBER AREA Cod

DATE 23 12012 MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

004-5

DISCHARGE NUMBER

Environmental Services Company 13715 W. Markham - 72211 P.O. Box 55146 Little Rock, AR 72115 (501) 221-2565

Form Approved OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

ADDRESS:

9201 FAULKNER LAKE ROAD NORTH LITTLE ROCK, AR 72117

FACILITY: CATERPILLAR, INC., NORTH AMERICAN MOTOR G

LOCATION: 9201 FAULKNER LAKE ROAD

ATTN: JON HARRISON/KATINA STEPHENS

NORTH LITTLE ROCK, AR 72117

FROM

MONITORING PERIOD MM/DD/YYYY MM/DD/YYYY 06/30/2011 01/01/2011 TO

AR0051454

PERMIT NUMBER

DMR Mailing ZIP CODE:

MINOR

004-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

72117

| PARAMETER | | QUANT | TTY OR LOADING | 3 | QI | UALITY OR CON | CENTRATION | | NO. EX | FREQUENCY OF ANALYSIS | SAMPLE TYPE |
|---|-----------------------|--------|----------------|--------|---------|---------------|-----------------------|-------|-----------|--------------------------|----------------|
| | 1.34.6 | VALUE | VALUE | UNITS | VALUE | VALUE | VALUE | UNITS | 1000 | | |
| Oxygen demand, chem. (low level) (COD) | SAMPLE MEASUREMENT | ***** | 44.55. | | ***** | 4 | 27.3 | mg/L | 0 | 1/6M | GRAB |
| 00335 1 0 Effluent Gross | PERMIT REQUIREMENT | | 401100 | ****** | | ****** | Reg. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| рН | SAMPLE MEASUREMENT | | 941114 | ***** | 8.8 | ***** | 8.8 | su | 0 | 1/6M | GRAB |
| 00400 1 0 Effluent Gross | PERMIT REQUIREMENT | • | -11.11 | ***** | MINIMUM | ****** | 9 MUMIXAM | SU | | Once Every 6 Months | GRAB |
| Solids, total suspended | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 102000 | 20 | mg/L | 0 | 1/6M | GRAB |
| 00530 1 0 Effluent Gross | PERMIT REQUIREMENT | ***** | ****** | ****** | ***** | 14114 | Reg. Mcn. DAILY MX | mg/L | roll | Once Every 6 Months | GRAB |
| Oil & Grease | SAMPLE MEASUREMENT | | ***** | ****** | | ****** | <1.4 | mg/L | 0 | 1/6M | GRAB |
| 00556 1 0 Effluent Gross | PERMIT REQUIREMENT | *13*** | \$00,000 | 465549 | ***** | ****** | Req. Mon. DAILY MX | mg/L | 12 | Once Every 6 Months | GRAB |

| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER | I could send a periods of the their their decrease and of other tree in our proposed under on discussion or sugar new proposed under one discussion of the country of the personnel respects guides and | 1 | . / | TEL | EPHONE | DATE |
|--|--|--------|--|-----------|--------|------------|
| RICHARD BAKCH | evaluate the arternation subsected. Based orient mentry of the person or present who enumge the avatane, or flows persons deserbly empowable for gathering the information, the information subsenting to, to the best of my knowledge and before love, accusing and complete. I are assure that there are significant | / | anne | 5012 | 282740 | 07/21/2011 |
| TYPED OR PRINTED | pendies for salmsting false information, including the penalogist, of face and imperimented tendencing tradeform | SIGNAT | URE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | AREA Code | NUMBER | MM/DDMYYY |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

AR0051454

PERMIT NUMBER

07/01/2011

Environmental Services Company 13715 W. Markham - 72211 P.O. Box 55146 Little Rock, AR 72115 (501) 221-2565

Form Approved OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

ADDRESS:

9201 FAULKNER LAKE ROAD

NORTH LITTLE ROCK, AR 72117

FACILITY:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

LOCATION: 9201 FAULKNER LAKE ROAD

NORTH LITTLE ROCK, AR 72117

ATTN: JON HARRISON/KATINA STEPHENS

FROM

004-5 DISCHARGE NUMBER

MONITORING PERIOD MM/DD/YYYY MM/DD/YYYY

TO

12/31/2011

DMR Mailing ZIP CODE:

MINOR

004-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

72117

| PARAMETER | | QUAN | TITY OR LOADING | 3 | QI | JALITY OR CON | CENTRATION | | NO. | FREQUENCY OF ANALYSIS | SAMPLE TYPE |
|--|------------------------|---------|-----------------|--------|---------|---------------|-----------------------|-------|-----|------------------------|----------------|
| | | VALUE | VALUE | UNITS | VALUE | VALUE | VALUE | UNITS | | | 1.00 |
| Oxygen demand, chem. (low level) (COD) | SAMPLE MEASUREMENT | babasa | Agnies | **** | ***** | **** | 42 | mg/L | 0 | 1/6MO | GRAB |
| 00335 1 0 Effluent Gross | PERMIT REQUIREMENT | vactak | 313530 | ***** | A19A41 | PAASA | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| pH | SAMPLE MEASUREMENT | SEPRES | | 4,0440 | 8.3 | 6.00.444 | 8.3 | SU | 0 | 1/6MO | GRAB |
| 00400 1 0 Effluent Gross | PERMIT | ANDLA | 1-)3-1 | and. | MINIMUM | wino | MUMIXAM | 3 | | Once Every 6 Months | GRAB |
| Solids, total suspended | SAMPLE. MEASUREMENT | | *:daaindä | | peckés | ***** | د1.0 | mg/L | 0 | 1/6mo | GRAB |
| 00530 1 0 Effluent Gross | PERMIT | ARAPIA | 4***** | abhabb | Albaha. | , | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| Oll & Grease | SAMPLE | ***** | 461419 | ****** | Annada | Alexand | 1.5 | mg/L | 0 | 1/6MO | GRAB ' |
| 00556 1 0 Effluent Gross | PERMIT | ALLEY A | 411541 | ***** | stises | AAA44 | Reg. Mon. DAILY MX | mg/L | 757 | Once Every 6 Months | GRAB |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Paul Rivera + TYPED OR PRINTED

Elin SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT TELEPHONE DATE 23/2012 0.74 NUMBER MAUDDAYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Environmental Services Company 13715 W. Markham - 72211 P.O. Box 55146

Form Approved OMB Na. 2040-0004

72117

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

ADDRESS: 9201 FAULKNER LAKE ROAD NORTH LITTLE ROCK, AR 72117

FACILITY: CATERPILLAR, INC., NORTH AMERICAN MOTOR G

ATTN: JON HARRISON/KATINA STEPHENS

LOCATION: 9201 FAULKNER LAKE ROAD NORTH LITTLE ROCK, AR 72117

FROM

MONITORING PERIOD MM/DD/YYYY TO 01/01/2011

AR0051454

PERMIT NUMBER

MM/DD/YYYY 06/30/2011

005-5

DISCHARGE NUMBER

DMR Mailing ZIP CODE:

MINOR

Little Rock, AR 72115 (501) 221-2565

005-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

| PARAMETER | ASSISSI | QUAN' | TITY OR LOADING | G | QI | JALITY OR CON | CENTRATION | | NO. | FREQUENCY OF ANALYSIS | SAMPLE |
|--|-----------------------|--------|-----------------|--------|-----------|---------------|-----------------------|-------|-------|--------------------------|--------|
| | Wallet . | VALUE | VALUE | UNITS | VALUE | VALUE | VALUE | UNITS | | | |
| Oxygen demand, chem. (low level) (COD) | SAMPLE MEASUREMENT | | ****** | | ***** | -11-06- | 43.40 | mg/L | 0 | 1/6M | GRAB |
| 00335 1 0 Effluent Gross | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | ***** | Req. Mon. DAILY MX | mg/L | ter. | Once Every 6 Months | GRAB |
| рН | SAMPLE MEASUREMENT | 400304 | ***** | ••••• | 9.0 | ***** | 9.0 | su | 0 | 1/6M | GRAB |
| 00400 1 0 Effluent Gross | PERMIT REQUIREMENT | *4>40 | ****** | 244114 | MINIMUM 6 | 200210 | MAXIMUM | SU | Eu | Once Every 6 Months | GRAB |
| Solids, total suspended | SAMPLE MEASUREMENT | | | | ••••• | ****** | 54.0 | mg/L | 0 | 1/6M | GRAB |
| 00530 1 0 Effluent Gross | PERMIT REQUIREMENT | ****** | ***** | ,,,,,, | ****** | ****** | Reg. Mon. DAILY MX | mg/L | 無效 | Once Every 6 Months | GRAB |
| Oll & Grease | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***12** | ***** | <1.4 | mg/L | 0 | 1/6M | GRAB |
| 00556 1 0 Effluent Gross | PERMIT REQUIREMENT | ***** | ****** | ****** | 402024 | ****** | Req. Mon. DAILY MX | mg/L | N. H. | Once Every 6 Months | GRAB |

| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER | Leavist under penalts of his shot the constraint and off-otted enters were proposed under my discussion in open power in accordance with a section designed to enter that qualified personnel properly patter and | / | 101. | TEL | EPHONE | DATE |
|--|--|--------|---|-----------|--------|------------|
| RICHALD BARCH | evidents the relinantion attention. Hased onto stepper of the person or pensors who manage the orston, or those persons discretify represented for patterning the information, the information inheritant plants the best of my knowledge and belief, too, occurring and complete I am energe that there are significant. | | aun | 5012 | 282740 | 07/21/2011 |
| TYPED ORPRINTED | transfers on securing time movements, increasing the providents on time and representation between the provider | SIGNAT | URE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | ANEA Cude | NUMBER | MM/DD/YYY |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Environmental Services Company 13715 W. Markham - 72211 P.O. Box 55146 Little Rock, AR 72115

Form Approved OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location If Different)

NAME:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

ADDRESS: 9201 FAULKNER LAKE ROAD NORTH LITI'LE ROCK, AR 72117

FACILITY:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

LOCATION: 9201 FAULKNER LAKE ROAD

NORTH LITTLE ROCK, AR 72117

ATTN: JON HARRISON/KATINA STEPHENS

FROM

AR0051454

PERMIT NUMBER

MONITORING PERIOD MM/DD/YYYY 07/01/2011 TO

MM/DD/YYYY 12/31/2011

005-S

DISCHARGE NUMBER

DMR Mailing ZIP CODE:

72117

MINOR

(501) 221-2565

005-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

| PARAMETER | | QUAN | TITY OR LOADING | 3 | Q | UALITY OR COM | CENTRATION | | NO. | FREQUENCY OF ANALYSIS | SAMPLE |
|--|-----------------------|--------------|--|--------|---------|---------------|-----------------------|-------|-----|--------------------------|--------|
| | | VALUE | VALUE | UNITS | VALUE | VALUE | VALUE | UNITS | | | |
| Oxygen demand, chem. (low level) (COD) | SAMPLE MEASUREMENT | ***** | ***** | ***** | ****** | 117431 | 41.90 | mg/L | 0 | 1/6MO | GRAB |
| 00335 1 0 Effluent Gross | PERMIT REQUIREMENT | PAYSON | ************************************** | ***** | ***** | ***** | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| pH | SAMPLE MEASUREMENT | APRAD | ***** | ***** | 7.4 | ***** | 7.4 | S.U. | 0 | 1/6MO | GRAB |
| 00400 1 0 Effluent Gross | PERMIT REQUIREMENT | A \$*** A ** | ***** | ***** | MINIMUM | 200000 | MAXIMUM | SU | | Once Every 6 Months | GRAB |
| Solids, total suspended | SAMPLE MEASUREMENT | ***** | ***** | | ***** | ***** | ∠1.0 | mg/L | 0 | 1/6MO | GRAB |
| 00530 1 0 Effluent Gross | PERMIT REQUIREMENT | ***** | ***** | ****** | ***** | ,,,,,, | Req. Mon. DAILY MX | mg/L | | Once Every 8 Months | GRAB |
| Oil & Grease | SAMPLE MEASUREMENT | ***** | A***** | | ***** | ***** | ∠1.40 | mg/L | 0 | 1/6MO | GRAB |
| 00556 1 0 Effluent Gross | PERMIT REQUIREMENT | ***** | 20420 | ***** | ***** | Roptok | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |

TELEPHONE DATE NAME/TITLE PRINCIPAL EXECUTIVE OFFICER 23/2012 501.228,2740 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT AREA Code NUMBER MM/DD/YYYY TYPED OR PRINTED

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Environmental Services Company 13715 W. Markham - 72211 P.O. Box 55146 Little Rock, AR 72115 (501) 221-2565

Form Approved OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

ADDRESS:

9201 FAULKNER LAKE ROAD NORTH LITTLE ROCK, AR 72117

FACILITY:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

LOCATION: 9201 FAULKNER LAKE ROAD NORTH LITTLE ROCK, AR 72117

ATTN: JON HARRISON/KATINA STEPHENS

AR0051454 PERMIT NUMBER

FROM

006-S DISCHARGE NUMBER

MONITORING PERIOD MM/DD/YYYY

TO

07/01/2011

MM/DD/YYYY 12/31/2011

DMR Mailing ZIP CODE:

72117

MINOR

006-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

| PARAMETER | | QUAN | TITY OR LOADING | 3 | QI | UALITY OR COM | CENTRATION | | NO. EX | FREQUENCY OF ANALYSIS | SAMPLE |
|--|-----------------------|-----------------|-----------------|--------|---------|---------------|-----------------------|-------|-----------|--------------------------|--------|
| | | VALUE | VALUE | UNITS | VALUE | VALUE | VALUE | UNITS | | | |
| Oxygen demand, chem. (low level) (COD) | SAMPLE MEASUREMENT | ***** | ***** | 270304 | ••••• | ***** | 38.50 | mg/L | 0 | 1/6MO | GRAB |
| 00335 1 0 Effluent Gross | PERMIT REQUIREMENT | ***** | A11424 | ***** | ****** | ****** | Reg. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| pН | SAMPLE MEASUREMENT | ***** | ****** | A>>>> | 7.5 | ***** | 7.5 | s.u. | 0 | 1/6 MO | GRAB |
| 00400 1 0 Effluent Gross | PERMIT REQUIREMENT | ***** | ALCORP | ***** | MINIMUM | ***** | MUMIXAM | SU | | Once Every 6 Months | GRAB |
| Solids, total suspended | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | ****** | 7.0 | mg/L | 0 | 1/6MO | GRAB |
| 00530 1 0 Effluent Gross | PERMIT REQUIREMENT | 11 /1111 | ***** | ***** | 4,,,,, | ***** | Req. Man. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| Oil & Grease | SAMPLE MEASUREMENT | , | ***** | ,,,,,, | ••••• | 44444 | L1.40 | mg/L | 0 | 1/6MO | GRAB |
| 00556 1 0 Effluent Gross | PERMIT REQUIREMENT | ****** | ***** | ****** | ***** | ***** | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |

| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER | I certify under peakily of Jay that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to avoite that qualified personnel properly gather and | / | 66- | TELE | EPHONE | DATE |
|--|--|-------------|--|-----------|--------|------------|
| D. I Diverson In | evaluate the information schemical based on my integrap of the person of persons who incompare the gradient, on those persons directly responsible for gathering the information of when itself as in the feet of my kinwidelige and before, time, accounts, and complete. I am owige that there are upratiqual resulties for an interplate a few information, including the provide by office and improposure in the Anniverse. | | euc | 501.22 | 8 2740 | 1/23/2012 |
| TYPED OR PRINTED | roughous Loginous to mississing the attornissing bis buttering in the ages imbressaure or yubside leagues to mississing the continue of the c | SIGNATURE O | F PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | AREA Code | NUMBER | MM/DD/YYYY |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

CATERPILLAR, INC., NORTH AMERICAN MOTOR G NAME:

9201 FAULKNER LAKE ROAD NORTH LITTLE ROCK, AR 72117 ADDRESS:

FACILITY: CATERPILLAR, INC., NORTH AMERICAN MOTOR G

LOCATION: 9201 FAULKNER LAKE ROAD NORTH LITTLE ROCK, AR 72117

ATTN: JON HARRISON/KATINA STEPHENS

FROM

AR0051454

PERMIT NUMBER

MONITORING PERIOD MM/DD/YYYY MM/DD/YYYY 01/01/2011 TO 06/30/2011

006-S

DISCHARGE NUMBER

Environmental Services Company 13715 W. Markham - 72211

P.O. Box 55146

OMB No. 2040-0004

Little Rock, AR 72115 (501) 221-2565

DMR Mailing ZIP CODE: 72117

MINOR

006-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

| PARAMETER | | QUAN | TITY OR LOADING | G | QI | UALITY OR CON | CENTRATION | | NO. EX | FREQUENCY OF ANALYSIS | SAMPLE |
|---|-----------------------|--------|-----------------|--------|---------|---------------|-----------------------|-------|-----------|--------------------------|--------|
| | | VALUE | VALUE | UNITS | VALUE | VALUE | VALUE | UNITS | | | |
| Oxygen demand, chem. (low level) (COD) | SAMPLE MEASUREMENT | ***** | ***** | | ***** | | 32.6 | mg/L | 0 | 1/6M | GRAB |
| 00335 1 0 Effluent Gross | PERMIT REQUIREMENT | ****** | ****** | DADEAD | ****** | ****** | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| рН | SAMPLE MEASUREMENT | | ****** | ***** | 7.5 | *** | 9.6 | su | 1 | 27/6M | GRAB |
| 00400 1 0 Effluent Gross | PERMIT REQUIREMENT | 879364 | ****** | ***** | MINIMUM | ****** | MUMIXAM | SU | 1 | Once Every 6 Months | GRAB |
| Solids, total suspended | SAMPLE MEASUREMENT | ***** | ***** | | | ****** | 41.0 | mg/L | 0 | 1/6M | GRAB |
| 00530 1 0 Effluent Gross | PERMIT REQUIREMENT | 10000 | 2-42-03 | ***** | Arabes | ****** | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| Oll & Grease | SAMPLE MEASUREMENT | | ***** | | ***** | ***** | <1.4 | mg/L | 0 | 1/6M | GRAB |
| 00556 1 0 Effluent Gross | PERMIT REQUIREMENT | ANGLES | pappos | ***** | 4>5111 | ritter | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |

| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER | I write under penalts of him that the document and all attachments were prepared in his my diseasest of supervision in accordance with a system despited to assure that gradified personnel properly getter and | / | 1.1. | TEL | EPHONE | DA | TE |
|--|--|---|--|-------------|--------|--------|--------|
| FICHALD BARRY EHS Manager | evaluate the extremation indicated. Hand-size yet requiry of the planes or parents take manyle the solution, or lines provised solution responsible for gardening the indicated and the level of my learning and belief, thus, are trade overplate I am in more that there are specifically predicted to reduce together the production of the contraction of the c | _ | TURE OF PRINCIPAL EXECUTIVE OFFICER OR | | 282790 | 07/2 | 1/2011 |
| TYPED OR PRINTED | v vialationes. | | AUTHORIZED AGENT | ARF A Cride | NUMBER | MIM/DD | NYYYY |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

ADDRESS:

9201 FAULKNER LAKE ROAD NORTH LITTLE ROCK, AR 72117

FACILITY:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

LOCATION: 9201 FAULKNER LAKE ROAD

NORTH LITTLE ROCK, AR 72117

ATTN: JON HARRISON/KATINA STEPHENS

AR0051454 PERMIT NUMBER

FROM

007-S DISCHARGE NUMBER

MONITORING PERIOD MM/DD/YYYY MM/DD/YYYY 07/01/2011 TO 12/31/2011

Environmental Services Company

13715 W. Markham - 72211 P.O. Box 55146

Farm Approved OMB No. 2040-0004

Little Rock, AR 72115 (501) 221-2565

> DMR Mailing ZIP CODE: 72117

MINOR

007-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

| PARAMETER | | QUAN' | TITY OR LOADING | 3 | QI | UALITY OR CON | CENTRATION | | NO. EX | FREQUENCY OF ANALYSIS | |
|--|-----------------------|--------|-----------------|--------|---------|---------------|-----------------------|-------|-----------|--------------------------|------|
| | | VALUE | VALUE | UNITS | VALUE | VALUE | VALUE | UNITS | | | |
| Oxygen demand, chem. (low level) (COD) | SAMPLE MEASUREMENT | ***** | ***** | | ***** | ***** | 27.0 | mg/L | 0 | 1/6MO | GRAB |
| 00335 1 0 Effluent Gross | PERMIT REQUIREMENT | *1**** | 44444 | ,,,,,, | ***** | ***** | Reg. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| рН | SAMPLE MEASUREMENT | ***** | **** | ***** | 7.4 | ***** | 7.4 | s.u. | 0 | 1/6MO | GRAB |
| 00400 1 0 Effluent Gross | PERMIT REQUIREMENT | ••••• | 31404 | ***** | MINIMUM | ****** | MAXIMUM | SU | | Once Every 6 Months | GRAB |
| Solids, total suspended | SAMPLE MEASUREMENT | ***** | ***** | ***** | ****** | ***** | 12.0 | mg/L | 0 | 1/6MO | GRAB |
| 00530 1 0 Effluent Gross | PERMIT REQUIREMENT | ***** | ***** | | ••••• | 311111 | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| Oil & Grease | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | ***** | 41.40 | mg/L | 0 | 1/6MO | GRAB |
| 00556 1 0 Effluent Gross | PERMIT REQUIREMENT | 404424 | 20000 | ****** | , t | ****** | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |

| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER | I certify under penalty of law that this document and all attachments were prepared number my direction or supervision in accordance with a system designed to assure that qualified personnel property garber and | / | 161 | TEL | EPHONE | D. | ATE |
|--|---|--------|---|-----------|---------|------|--------|
| | evaluate the information submitted Based on my inquiry of the person or persons who instraige the scatem, or those persons discretely responsible for gathering the orientation, the information abundled by bythe beat of my harm-being and helicit, time accessate, and complete I not some that there are significant personal responsibility about minimalities, method up the providition of fine and imprisonment to district, the providing the continuities are the continuities are the continuities of the continuities of the continuities are the continuities of the | | 12111 | 501.2 | 28 2740 | 1 23 | 2012 |
| TYPED OR PRINTED | Supplicat. | SIGNAT | URE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | AREA Code | NUMBER | MM/D | ΥΥΥΥΩΙ |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Offerent)

NAME:

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

ADDRESS:

9201 FAULKNER LAKE ROAD NORTH LITTLE ROCK, AR 72117

FACILITY: CATERPILLAR, INC., NORTH AMERICAN MOTOR G

LOCATION: 9201 FAULKNER LAKE ROAD NORTH LITTLE ROCK, AR 72117

ATTN: JON HARRISON/KATINA STEPHENS

AR0051454 PERMIT NUMBER

FROM

007-5 DISCHARGE NUMBER

MONITORING PERIOD MM/DD/YYYY MM/DD/YYYY 01/01/2011 TO 06/30/2011

Environmental Services Company 13715 W. Markham - 72211 Form Approved P.O. Box 55146 OMB No. 2040-0004 Little Rock, AR 72115 (501) 221-2565

DMR Mailing ZIP CODE:

72117

MINOR

007-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

| PARAMETER | | QUAN | TITY OR LOADING | 3 | QI | JALITY OR CON | CENTRATION | | NO. | FREQUENCY OF ANALYSIS | SAMPLE |
|--|-----------------------|--------|-----------------|--------|--------------|---------------|-----------------------|-------|-----|--------------------------|--------|
| | 1835 | VALUE | VALUE | UNITS | VALUE | VALUE | VALUE | UNITS | | | |
| Oxygen demand, chem. (low level) (COD) | SAMPLE MEASUREMENT | ***** | ***** | | A**A** | ***** | 96.5 | mg/L | 0 | 1/6M | GRAB |
| 00335 1 0 Effluent Gross | PERMIT REQUIREMENT | ••••• | | ***** | ••••• | ***** | Req. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |
| рН | SAMPLE MEASUREMENT | ····· | *abeja | | 8.1 | | 8.1 | su | 0 | 1/6M | GRAB |
| 00400 1 0 Effluent Gross | PERMIT REQUIREMENT | | 111/211 | ****** | MINIMUM 6 | *> | MUMIXAM | SU | | Once Every 6 Months | GRAB |
| Solids, total suspended | SAMPLE MEASUREMENT | | ,,,,,, | | 471451 | ***** | 1092 | mg/L | 0 | 1/6M | GRAB |
| 00530 1 0 Effluent Gross | PERMIT REQUIREMENT | | ***** | ****** | ***** | | Reg. Mon. DAILY MX | mg/L | Ы | Once Every 6 Months | GRAB |
| Oil & Grease | SAMPLE MEASUREMENT | | ***** | ***** | ***** | ***** | (1.4 | mg/L | 0 | 1/6M | GRAB |
| 00556 1 0 Effluent Gross | PERMIT REQUIREMENT | b11043 | 40144 | ****** | \$21040 | > | Reg. Mon. DAILY MX | mg/L | | Once Every 6 Months | GRAB |

| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER | I worth make pertain at less that this decembed and all alterbraces were prepared under any about two or important in accordance with a no view designed to assure that qualified per travel properly patter and graduate for information or attention the mention of the private or pattern who intempered | | 1.1. | TE | LEPHONE | | DAT | E |
|--|---|----------|--|-----------|---------|----|--------|-------|
| | exceeds the information extended to these down in a years of the person of persons who interpret the exceeds at these persons determine the appointed for pulsaring the anticontains, the minimization represented to the first day of the horse-backs and formation, from a country and computer. For more that there are dispulsation for production to account a place or representation to a change the procuration of their and improvement of the hypothy- arity and the second approach of the change the procuration of their and improvement of the hypothy- | | mu | | 28 2140 | 57 | 121 | 12011 |
| TYPED OR PRINTED | Link Avent | SIGNATUR | RE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | AREA Gode | NUMBER | 1 | MM/DDA | **** |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

The following monitoring requirements shall be in addition to those on the Discharge Monitoring Report (DMR):

| | OUTFALL NUMBER_ | 001 |
|---|--|-----------------------------------|
| DATE OF STORM EVENT SAMPLED: | - | 2/1/11 |
| DURATION OF EVENT: | _ | 6 hours |
| ESTIMATE OF RAINFALL EVENT: | 11 <u>.</u> | Z.IZ Inches |
| TIME SINCE LAST MEASURABLE EVENT | (i.e., > 0.1 in.) | > 30 days |
| ESTIMATE OF TOTAL VOLUME DISCHAR | GED: _ | 1,500 gallons |
| By signature below, I certify that I have of the certification on the DMR form and III.B.9 of the general storm water perm information submitted in these additions conditions of such certification. | described in further it. Furthermore, I be | detail in Part elieve that the |
| Printed Name of Official | _ | |
| Signature | _ | |
| 2/1/11 | | |

Date

| | OUTFALL NUMBER | 001 |
|---|--|---------------------------------------|
| DATE OF STORM EVENT SAMPLED: | | atober 18, 2011 |
| DURATION OF EVENT: | | ろ. 5 hours |
| ESTIMATE OF RAINFALL EVENT: | | 0.65 inches |
| TIME SINCE LAST MEASURABLE EVENT | (i.e., > 0.1 in.) | <u>(</u> days |
| ESTIMATE OF TOTAL VOLUME DISCHAR | GED: | 210 gallons |
| By signature below, I certify that I have of the certification on the DMR form and III.B.9 of the general storm water perminformation submitted in these additions conditions of such certification. Ned Ryerson Printed Name of Official October 18, 2011 Date | described in furthe it. Furthermore, I t | er detail in Part pelieve that the |

| _ | OUTFALL NUMBER_ | 002 | |
|--|--|------------------------|---------------|
| DATE OF STORM EVENT SAMPLED: | _ | 2/:/ | 11 |
| DURATION OF EVENT: | <u></u> | 6 | hours |
| ESTIMATE OF RAINFALL EVENT: | _ | 2.12 | inches |
| TIME SINCE LAST MEASURABLE EVENT | (i.e., > 0.1 in.) | 730 | days |
| ESTIMATE OF TOTAL VOLUME DISCHAR | GED: | 1600 | gallons |
| By signature below, I certify that I have of the certification on the DMR form and III.B.9 of the general storm water perminformation submitted in these additional conditions of such certification. Dand Callett Printed Name of Official Signature Date | described in further it. Furthermore, I be | detail in lieve tha | Part t the |

| | OUTFALL NUMBER | 2 | |
|--|-------------------------|----------|---------|
| DATE OF STORM EVENT SAMPLED: | _ | 8/24/ | 111 |
| DURATION OF EVENT: | _ | 1.5 | hours |
| ESTIMATE OF RAINFALL EVENT: | | .9 | inches |
| TIME SINCE LAST MEASURABLE EVEN | T (i.e., > 0.1 in.) | | days |
| ESTIMATE OF TOTAL VOLUME DISCHA | ARGED: | 1,000 | gallons |
| of the certification on the DMR form an III.B.9 of the general storm water per information submitted in these addition conditions of such certification. Pand Callent Printed Name of Official Signature | mit. Furthermore, I bel | ieve tha | t the |
| | | | |

| | OUTFALL NUMBER | 003 | |
|---|---|---------------------|---------------|
| DATE OF STORM EVENT SAMPLED: | | 2/1/ | 111 |
| DURATION OF EVENT: | 39 <u></u> | 6 | hours |
| ESTIMATE OF RAINFALL EVENT: | - | 2.12 | inches |
| TIME SINCE LAST MEASURABLE EVENT | (i.e., > 0.1 in.) | >30 | days |
| ESTIMATE OF TOTAL VOLUME DISCHAR | GED: | 1,600 | gallons |
| By signature below, I certify that I have of the certification on the DMR form and III.B.9 of the general storm water perm information submitted in these additions conditions of such certification. | l described in further de it. Furthermore, I belie | etail in eve tha | Part t the |
| Printed Name of Official | | | |
| Signature | _ | | |
| . Signature | | | |
| 2/1/10 | | | |
| Date | | | |

The following monitoring requirements shall be in addition to those on the Discharge Monitoring Report (DMR):

OUTFALL NUMBER__

| DATE OF STORM EVENT SAMPLED: | <u> 8/24,</u> | 111 |
|---|-----------------------------|----------------|
| DURATION OF EVENT: | 1.5 | hours |
| ESTIMATE OF RAINFALL EVENT: | .9 | inches |
| TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.) | | days |
| ESTIMATE OF TOTAL VOLUME DISCHARGED: | 1,000 | gallons |
| By signature below, I certify that I have read and understa of the certification on the DMR form and described in furthe III.B.9 of the general storm water permit. Furthermore, I information submitted in these additional monitoring require conditions of such certification. | er detail in believe tha | Part it the |
| Printed Name of Official | | |
| Dea Callet | | |
| Signature | | |
| 8/24/11 | | |
| Date | | |

| | OUTFALL NUMBER | 004 |
|--|---|---------------------------------------|
| DATE OF STORM EVENT SAMPLED: | 40 | 2/1/11 |
| DURATION OF EVENT: | ** | 6 hours |
| ESTIMATE OF RAINFALL EVENT: | | 2.12 inches |
| TIME SINCE LAST MEASURABLE EVENT | Γ (l.e., > 0.1 in.) | 230 days |
| ESTIMATE OF TOTAL VOLUME DISCHA | RGED: | 4,000 gallons |
| By signature below, I certify that I have of the certification on the DMR form an III.B.9 of the general storm water per information submitted in these addition conditions of such certification. | nd described in furthe mit. Furthermore, I | er detail in Part believe that the |
| Daniel Callet | | |
| Printed Name of Official | | |
| Dea Cathet | | |
| Signature | | * [|
| 2/1/11 | | |
| Date | | |

| O | UTFALL NUMBER | 004 |
|---|--|---------------------------------------|
| DATE OF STORM EVENT SAMPLED: | C | ctoper 18, 2011 |
| DURATION OF EVENT: | | 3.5 hours |
| ESTIMATE OF RAINFALL EVENT: | | 0.65 inches |
| TIME SINCE LAST MEASURABLE EVENT (i.e | e., > 0.1 in.) | 6 days |
| ESTIMATE OF TOTAL VOLUME DISCHARGE | D: | 210 gallons |
| By signature below, I certify that I have re of the certification on the DMR form and de III.B.9 of the general storm water permit. Information submitted in these additional reconditions of such certification. Necl Ryerson Printed Name of Official | escribed in furthe Furthermore, I b | er detail in Part pelieve that the |
| Ned Rue — Signature | | |
| October 18, 2011 Date | _ | |

| | OUTFALL NUMBER | 005 |
|---|------------------------|------------------|
| DATE OF STORM EVENT SAMPLED: | | 2/1/11 |
| DURATION OF EVENT: | | 6 hours |
| ESTIMATE OF RAINFALL EVENT: | | Z.1Z inches |
| TIME SINCE LAST MEASURABLE EV | /ENT (i.e., > 0.1 in.) | >30 days |
| ESTIMATE OF TOTAL VOLUME DISC | CHARGED: | 1560 gallon |
| of the certification on the DMR form III.B.9 of the general storm water information submitted in these add conditions of such certification. | permit. Furthermore, I | believe that the |
| Printed Name of Official | | |
| Pea Callet Signature | | |
| Signature | | |
| 2/1/11 | · | |
| Date | | |

| | OUTFALL NUMBER 5 |
|--|---|
| DATE OF STORM EVENT SAMPLED: | 8/24/11 |
| DURATION OF EVENT: | 1.5 hours |
| ESTIMATE OF RAINFALL EVENT: | - 9 inches |
| TIME SINCE LAST MEASURABLE EVENT (| (i.e., > 0.1 in.) <u>days</u> |
| ESTIMATE OF TOTAL VOLUME DISCHAR | GED: 500 gallons |
| By signature below, I certify that I have of the certification on the DMR form and III.B.9 of the general storm water permi information submitted in these additional conditions of such certification. Printed Name of Official Signature | described in further detail in Part it. Furthermore, I believe that the |
| 8/Z4/U | <u> </u> |

| OUT | TFALL NUMBER 006 | |
|---|----------------------------|---------|
| DATE OF STORM EVENT SAMPLED: | - 2/4 | 111 |
| DURATION OF EVENT: | 6 | hours |
| ESTIMATE OF RAINFALL EVENT: | 2.12 | inches |
| TIME SINCE LAST MEASURABLE EVENT (i.e., | , > 0.1 in.) | days |
| ESTIMATE OF TOTAL VOLUME DISCHARGED | 5,000 | gallons |
| of the certification on the DMR form and des III.B.9 of the general storm water permit. F information submitted in these additional motonditions of such certification. Paud Callant | urthermore, I believe that | at the |
| Printed Name of Official | | |
| Dea Callet | | |
| Signature | | |
| 2/1/11 | | |
| Date | | |

| | OUTFALL NUMB | ER6 |
|--|---|--|
| DATE OF STORM EVENT SAMPLED | : | 8/24/11 |
| DURATION OF EVENT: | | /5 hours |
| ESTIMATE OF RAINFALL EVENT: | | ? inches |
| TIME SINCE LAST MEASURABLE E | VENT (i.e., > 0.1 in.) | days |
| ESTIMATE OF TOTAL VOLUME DIS | CHARGED: | 4,000 gallons |
| By signature below, I certify that I of the certification on the DMR for III.B.9 of the general storm water information submitted in these adconditions of such certification. | m and described in furt permit. Furthermore, | ther detail in Part I believe that the |
| Printed Name of Official | | |
| Signature | | |
| 8/24/11 | | |
| Date | | |

| OUTFALL NUMBER | 2 007 | |
|---|---|-----------------------|
| (* ₁ | 2/1/ | /// |
| | 6 | hours |
| | 2.12 | inches |
| (i.e., > 0.1 in.) | 730 | days |
| RGED: | 2,000 | gallons |
| d described in furth nit. Furthermore, I | er detail in believe tha | Part t the |
| | | |
| | (i.e., > 0.1 in.) RGED: The read and understand described in further it. Furthermore, I | (i.e., > 0.1 in.) アラ。 |

| OUTFALL NUMBER | R7 |
|---|---------------------------------------|
| DATE OF STORM EVENT SAMPLED: | 8/24/11 |
| DURATION OF EVENT: | 1.5 hours |
| ESTIMATE OF RAINFALL EVENT: | .9 inches |
| TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.) | days |
| ESTIMATE OF TOTAL VOLUME DISCHARGED: | 1,500 gallons |
| By signature below, I certify that I have read and understated of the certification on the DMR form and described in furth III.B.9 of the general storm water permit. Furthermore, I information submitted in these additional monitoring required conditions of such certification. Dand Callett Printed Name of Official Signature | er detail in Part believe that the |
| | |

ADEQ



Front Desk Hand Delivery Receipt

Documents Received:

Date:

Corporate Office 13715 West Markham Little Rock, AR 72211 Tel. (501)221-2565 Fax (501)221-1341 Northwest Arkansas Branch 1107 Century Avenue Springdale, AR 72762

Tel. (479)750-1170 Fax (479)750-1172

Control Number: 1108010482

Customer Name : CATERPILLAR, INC. - OUTFALL 007

Sample Time : 1037

Collected By: DWC Delivery By : DWC

Customer Number: 2687

Sample Date : 08/24/11

Sample Type : GRAB STORMWATER

Work Order :

Report Date : 08/29/11

Sample From : OUTFALL 007

Purchase Order :

| | Lá | aboratory Analysis | | | | Quality 7 | Assurance |
|------------------------|--|----------------------------|-------|----------|-------------------------|--------------------|------------------|
| Analysis Date Time By | Parameter | Result | Notes | Ouantity | Method | Precision % RPD | Accuracy Recover |
| 08/28 1200 NTR | Chemical Oxygen Demand, L Oil & Grease, Total | 27.00 mg/L < 1.400 mg/L | | | EPA 410.4 EPA 1664 A | 3.54 | 91.9 91.5 |
| 08/24 1041 DWC | рн | 7.4 S.U. | | | SM 18 4500 H+B | 0.00 | N/A |
| 08/25 1515 NTR | Solids, Total Suspended | 12.0 mg/L | | | SM 18th 2540 D | 4.08 | N/A |

* QA data shown is from a different sample or standard on the same date.

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

Env mental Services Company, Inc. Corporate Office

13715 West Markham

P.O. Box 55146

Little Rock, AR 72211

Little Rock, AR 72215

website: www.esclabs.com



Environmental Services Company, Inc. Northwest Branch 1107 Century Springdale, AR 72764

CHAIN OF CUSTODY

Phone: 501-221-2565 Fax: 501-221-1341 Phone 479-750-1170 Fax: 479-750-1172 Client Information **Project Information** Requested Parameters Caterpillar, Inc. Company Name: Permit/Project #: Address: 9201 Faulkner Lake Road Purchase Order #: North Little Rock, AR 72117 Work Order # Telephone: Sampler Name(s): 501-955-5240 FAX: stephens katina@cat.com pH(23.), TSS(28.), (21.) and Signature(s): Contact: Ms. Katina Stephens COD(6.0) Oil & grease ESC Client Number: 2687 Sample Identification Sample Collection Sample Containers 쓰 Identification ESC Control # Date Matrix Volume Preservative # Time Type Type 1108010482 X Outfall 007 B/24/11 Grab 1 Liter H2SO4 1025 Stormwater Glass X 1037 Grab Stormwater Plastic 1 Liter ≤ 6 Deg C X Grab Stormwater **Plastic** 1 Liter H2SO4 Relinquished By: (Signature and Printed Name) Date Received By: (Signature and Printed Name) **Custody Seals:** Used? Intact? Relinquished By: (Signature and Printed Name) Received By: (Signature and Printed Name) Turnaround: Regular Special Received for Lab By: (Signature and Printed Name) Were samples properly preserved: Date Date Time Yes (O 20.5 1205 No Cool all samples to < 6 degrees C with ice. Flow Data Field Test Time Analyst Result Result Units Analyst: pH: 1041 Dusc 7.4 7.4 5.0%. Comments: Time: Reading: Units: This Document is Page / of Chlorinated? Y N Fecal Start:



Corporate Office 13715 West Markham Little Rock, AR 72211 Tel. (501)221-2565 Fax (501)221-1341

Northwest Arkansas Branch 1107 Century Avenue Springdale, AR 72762 Tel. (479) 750-1170 Fax (479) 750-1172

Control Number: 1108010481

Customer Name : CATERPILLAR, INC. - OUTFALL 006

Customer Number: 2686

Report Date : 08/29/11

Sample Date : 08/24/11

Sample Time : 1023

Sample Type : GRAB WWATER Sample From : OUTFALL 006 Collected By: DWC Delivery By : DWC

Work Order :

Purchase Order :

| | <u>I</u> | Laboratory Analysis | , | | | Quality A | Assurance |
|---------------------|---------------------------|---------------------|---------|----------|----------------|-----------|-----------|
| Analysis | | | | | | Precision | Accuracy |
| <u>Date Time By</u> | <u> Parameter</u> | Result | Notes _ | Quantity | Method | % RPD | % Recover |
| 08/28 1200 NTR | Chemical Oxygen Demand, L | 38.50 mg/L | | | EPA 410.4 | 3.54 | 91.9 |
| 08/21 1100 NTR | Oil & Grease, Total | < 1.400 mg/L | | | EPA 1664 A | 0.27 | 91.5 |
| 08/24 1025 DWC | Нд | 7.5 S.U. | | | SM 18 4500 H+B | 0.00 | N/A |
| 08/25 1515 NTR | Solids, Total Suspended | $7.0~{ m mg/L}$ | | | SM 18th 2540 D | 4.08 | N/A |

* OA data shown is from a different sample or standard on the same date.

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

Env mental Services Company, Inc.
Corporate Office

13715 West Markham

P.O. Box 55146

Fax: 501-221-1341

Little Rock, AR 72211

Phone: 501-221-2565

Little Rock, AR 72215

website: www.esclabs.com

(ESE)

Environmental Services Comp. .y, Inc.
Northwest Branch
1107 Century
Springdale, AR 72764

CHAIN OF CUSTODY

Phone 479-750-1170 Fax: 479-750-1172

| | Client Information | | | | Pro | ject Inf | ormation | | | | | Rec | uestec | Param | neters |
|-------------------------------------|---|----------|-----------|--|----------------------|--------------|--------------|--------------------|----------------------|----|-----------|--------------------|----------------------|----------------------------|--------|
| Company Name: Address: Telephone: | Caterpillar, Inc. 9201 Faulkner Lal North Little Rock, 501-955-5240 | AR 72117 | | Permit/Pr Purchase Work Ord Sampler I | Order #: er # | | Dand | (ath | <i>J</i> | | | | | | |
| FAX: Contact: ESC Client Number: | stephens katina@ Ms. Katina Stephe 2686 | | | and Signa | ature(s): | | fod | Coller | A | | Ise (21.) | pH(23.), TSS(28.), | (6.0) | | |
| Sample Id | lentification | | Sample | Collection | | | Sample | Containers | s | | grease | 3.) | COD(6.0) | | |
| Identification | ESC Control # | Date | Time | Туре | Matrix | Туре | Volume | Preserva | ative | # | Oil & | pH(2 | LR | | |
| Outfall 006 | 1108010481 | 3/24/11 | 1203 | Grab | Stormwater | Glass | 1 Liter | H2SO4 | | 1 | X | | | | |
| | | | 1023 | Grab | Stormwater | Plastic | 1 Liter | ≤ 6 Deg C | | 1 | | X | | | |
| | | | | Grab | Stormwater | Plastic | 1 Liter | H2SO4 | | 1 | | | х | | |
| | | | | | | | | | | | | | | | |
| Relinquished By. (Signature and P | rinted Name) | Date | Time | Received By: (\$ | ignature and Printed | Name) | | Date | Tim | le | Custo | ody Se | eals: | | |
| Relinquished By: (Signature and P | | Date | Time | | ignature and Printed | | | Date | Tim | | Regu | around Ilar | 8 | Intact? | |
| Relinquished By: (Signature and P | Dad Callet | 8/24/11 | Time /203 | Received for Lab | By: (Signature and | Printed Name | Field Test | Date 8 /24/10 Time | Tim /20 Analys | 3 | | Yes | les proper Result | ly preserved No Unit | |
| Comments: | | | | | Analyst: Time: | | pH: | 1025 | 126 | | | \$ | 7.5 | | |
| | | | | | Reading: Units: | | | | | | | | | | |
| | | | | | Chlorinated? | YN | Fecal Start: | | | | This | Doc | ument is | s Page_(| of_ |



Corporate Office 13715 West Markham Little Rock, AR 72211 Tel. (501)221-2565 Fax (501)221-1341 Northwest Arkansas Branch 1107 Century Avenue Springdale, AR 72762

Tel. (479) 750-1170 Fax (479) 750-1172

Control Number: 1108010480

Customer Name : CATERPILLAR, INC. - OUTFALL 005

Sample Date : 08/24/11 Sample Time : 1014

Collected By: DWC Delivery By : DWC

Customer Number: 2685

Work Order :

Report Date : 08/29/11

Sample Type : GRAB STORMWATER Sample From : OUTFALL 005

Purchase Order :

| | | Laboratory Analysis | | | Quality i | Assurance |
|----------------|---------------------------|---------------------|----------------|----------------|-----------|-----------|
| Analysis | | | | | Precision | Accuracy |
| Date Time By | Parameter | Result | Notes Ouantity | Method | _ % RPD | % Recove |
| | Chemical Oxygen Demand, L | 41.90 mg/L | | EPA 410.4 | 3.54 | 91.9 |
| | Oil & Grease, Total | < 1.400 mg/L | | EPA 1664 A | 0.26 | 92.7 |
| 08/24 1017 DWC | | 7.4 S.U. | | SM 18 4500 H+B | 0.00 | N/A |
| | Solids, Total Suspended | < 1.0 mg/L | | SM 18th 2540 D | 4.08 | N/A |

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

^{*} OA data shown is from a different sample or standard on the same date.

Env mental Services Company, Inc.
Corporate Office

13715 West Markham

Phone: 501-221-2565

P.O. Box 55146

Fax: 501-221-1341

Little Rock, AR 72211 Little Ro

Little Rock, AR 72215

website: www.esclabs.com

Environmental Services Company, Inc.
Northwest Branch
1107 Century
Springdale, AR 72764

CHAIN OF CUSTODY

Phone 479-750-1170 Fax: 479-750-1172

| Client Information | | | | 1000 | Pro | ject Inf | ormation | | | | | Rec | ueste | d Param | neters |
|---|---|--------------|--------------|---|-------------------------------|--------------|--------------|-------------------------|------------|-----|-----------------------|--------------------|--------------|----------------------------|--------|
| Company Name: Address: Telephone: FAX: | Caterpillar, Inc. 9201 Faulkner La North Little Rock, 501-955-5240 stephens katina@ | AR 72117 | | Permit/Properties Purchase Work Ord Sampler N | Order #: er # | | Paul | Cisto | int | | | | | | |
| Contact: ESC Client Number: | Ms. Katina Stephe | | | and Signa | iture(s): | _A | Dia | Cathe | 1 | | grease (21.) | pH(23.), TSS(28.), | COD(6.0) | | |
| Sample Id | lentification | | Sample | Collection | | | Sample | Containers | 3 | | & gre | 23.), | 00 | | |
| Identification | ESC Control # | Date | Time | Туре | Matrix | Туре | Volume | Preserva | tive | # | Ö | pH(| 4 | | |
| Outfall 005 | 1108010 480 | 8/24/11 | 1014 | Grab | Stormwater | Glass | 1 Liter | H2SO4 | | 1 | X | | | | |
| | | / / | | Grab | Stormwater | Plastic | 1 Liter | ≤ 6 Deg C | | 1 | | X | | | |
| | | | | Grab | Stormwater | Plastic | 1 Liter | H2SO4 | | 1 | | | х | | |
| | | | | | | | | | | | | | | | |
| Relinquished By: (Signature and P | rinted Name) | Date | Time | Received By: (S | ignature and Printed | Name) | | Date | Tim | 18 | | ody Se | pals: | 1-1-10 | |
| Relinquished By: (Signature and P | | Date | Time | Received By: (S | ignature and Printed | Name) | | Date | Tim | | Used Turna Regu | around | 7 | Intact? Special | |
| Relinquished By: (Signature and P | rinted Name) Du a Callux rees C with ice. | Date 2/24/11 | Time 1205 | Received for Lab | By: (Signature and | Printed Name | Field Test | Date E/24/11 Time | Tim /22 | :57 | | Yes | coles proper | ly preserved No Unit | |
| Comments: | | | | | Analyst: Time: Reading: | | pH: | 1617 | Dal | | '7. | | 7. Y | 5 4 | |
| | | | | | Units: | | | | | | | | | | |
| | | THE PARTY OF | | | Chlorinated? | YN | Fecal Start: | 4 | | 4 | This | Doc | ument i | s Page | 6f |



Corporate Office 13715 West Markham Little Rock, AR 72211 Tel. (501)221-2565 Fax (501)221-1341

Northwest Arkansas Branch 1107 Century Avenue Springdale, AR 72762 Tel. (479)750-1170 Fax (479)750-1172

Control Number: 1110010428

Customer Name : CATERPILLAR, INC. - OUTFALL 004

Customer Number: 2684 Report Date : 10/21/11 Sample Date : 10/18/11

Sample Time : 1147 Sample Type : GRAB STORMWATER

Sample From : OUTFALL 004

Collected By: NTR

Delivery By : NTR Work Order :

Purchase Order :

| | | Laboratory Analysis | | | | Quality 2 | Assurance |
|----------------|---------------------------|---------------------|-------|-----------|----------------|-----------|-----------|
| Analysis | | | | | | Precision | Accuracy |
| Date Time By | Parameter | Result | Notes | Ouantity | Method | % RPD | % Recover |
| 10/21 0820 NTR | Chemical Oxygen Demand, L | 42.00 mg/L | | 451111 57 | EPA 410.4 | 0.50 | 99.3 |
| 10/20 1700 AJR | Oil & Grease, Total | 1.500 mg/L | | | EPA 1664 A | 4.32 | 95.5 |
| 10/18 1151 NTR | рН | 8.3 S.U. | | | SM 18 4500 H+B | 0.00 | N/A |
| 10/18 1600 NTR | Solids, Total Suspended | < 1.0 mg/L | | | SM 18th 2540 D | 0.00 | N/A |
| 10/18 1151 NTR | Temperature | 19.10 °C | | | SM 18th 2550 B | 0.00 | N/A |

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

^{*} QA data shown is from a different sample or standard on the same date.

imental Services Company, Inc. En' **Corporate Office**

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Little Rock, AR 72211

Little Rock, AR 72215

website: www.esclabs.com

Environmental Services Con Northwest Branch 1107 Century Springdale, AR 72764

CHAIN OF CUSTODY

y, Inc.

| Phone: 501-221-2565 | Fax: 501-221-1341 | | CI | HAIN (| OF CUS | STO | DY | | Phone | 479 | 9-750 | -117 | 0 1 | Fax: 479- | 750-11 | 72 |
|--------------------------------------|--|-------------------|-------------|------------------|----------------------|-------------|--------------|---------------------|------------|-----|--------------------------|-------------------|----------|-------------|--------|----|
| | Client Information | | | | Pro | ject In | formation | | | | | Rec | uest | ed Para | mete | rs |
| Company Na <u>me:</u> Address: | Caterpillar, Inc. 9201 Faulkner Lak | e Road | | Permit/Pr | | | | | | | | | | | | T |
| | North Little Rock, | | | Work Ord | | | | | | | | | | | | |
| Telephone: | 501-955-5240 | | M.C. | Sampler I | Name(s): | Ne | d T.R | yersa | 7 | | | | | | | |
| FAX: | stephens katina@ | cat.com | | 1 | | | | 7 | | | 1 | | | | - 7 | |
| Contact: | Ms. Katina Stephe | ns | | and Signa | ature(s): | 7 | 291. | 2m2 - | _ | | (21.) | 28.), | | - 1 1 | | |
| ESC Client Number: | 2684 | | | | `` | | -121 | 8 | | | se (| .28(| 6.0) | | | |
| Sample Ide | entification | | Sample | Collection | | | Sample | Container | s | | grease | 3.), T | COD(6.0) | | | |
| Identification | ESC Control # | Date | Time | Туре | Matrix | Туре | Volume | Preserva | ative | # | Oil & | pH(23.), TSS(28.) | LR O | | | |
| Outfall 004 | 1110010428 | 1078-11 | 1145 | Grab | Stormwater | Glass | 1 Liter | H2SO4 | | 1 | х | | | | | T |
| | | i | 1 | Grab | Stormwater | Plastic | 1 Liter | ≤ 6 Deg C | | 1 | | X | | | | T |
| | | | | Grab | Stormwater | Plastic | 1 Liter | H2SO4 | | 1 | | | х | | | |
| | | | | - | | | | | | | | | | | | + |
| | | | | | | | | | | | | | | | + | + |
| | | | | | | | | | | | | | | | | |
| A contract of | | | | | | | | | | | | | | | | + |
| elinquished By: (Signature and Prin | ited Name) | Date | Time | Received By: (S | ignature and Printed | Name) | | Date | Tim | 10 | Custo | | als: | | | |
| elinquished By: (Signature and Print | ted Name) | Date | Time | Received By: (S | ignature and Printed | Name) | | Date | Tim | | Used? Turna Regula | round | | Intact | | 1 |
| elinguished By teignature and Prin | ed Pur | Date / 0-7 8 - 1/ | Time 13W | Received for Lab | By: (Signature and | Printed Nam | 9) | Date 1 0-18 -7 (| Tim (3) | 10 | Were | | les prop | erly preser | | 1 |
| ool all samples to 6 degree | es C with ide.) | | | | Flow Da | | Field Test | Time | Analys | | Resu | - | Result | | nits | |
| omments: | | | | | Analyst: Time: | | pH: | 1151 | No | | 8. | | | SU | | |
| | | | | | Reading: | | temp - | 1151 | N | 12 | 19. | 4 | - | 0, | | |
| | | | | | Units: | | | | | | | | | | | |
| | | | | | Chlorinated? | YN | Fecal Start: | | | | This | Doc | ument | is Page |) of / | |



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Northwest Arkansas Branch 1107 Century Avenue Springdale, AR 72762 Tel. (479) 750-1170 Fax (479) 750-1172

Control Number: 1108010479

Customer Name : CATERPILLAR, INC. - OUTFALL 003

Customer Number: 2683 Report Date : 08/29/11 Sample Date : 08/24/11

Sample Time : 1001

Sample Type : GRAB STORMWATER Sample From : OUTFALL 003

Collected By: DWC Delivery By : DWC

Work Order : Purchase Order :

Laboratory Analysis Quality Assurance Analysis Precision Accuracy Date Time By Ouantity % RPD Parameter Result Notes Method % Recover 08/28 1200 NTR Chemical Oxygen Demand, L 32.70 mg/L 3.54 EPA 410.4 91.9 08/21 1100 NTR Oil & Grease, Total $< 1.400 \, \text{mg/L}$ EPA 1664 A 0.26 92.7 08/24 1002 DWC pH 7.2 S.U. SM 18 4500 H+B 0.00 N/A 08/25 1515 NTR Solids, Total Suspended 2.0 mg/L SM 18th 2540 D 4.08 N/A

* QA data shown is from a different sample or standard on the same date.

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

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Little Rock, AR 72211 Little Rock, AR 72215

website: www.esclabs.com



Environmental Services Com, ., y, Inc. **Northwest Branch** 1107 Century Springdale, AR 72764

CHAIN OF CUSTODY

| Phone: 501-221-2565 | Fax: 501-221-1341 | | CI | HAIN (| OF CUS | STO | DY | Į. | Phone | 479 | -750 |)-117 | '0 F | ax: 479 | -750- | 1172 |
|---------------------------------------|---|------------|--------------|------------------|----------------------|-------------|--------------|--------------|-----------|-----|---------------|-------------------|-----------|-----------|--------------|--------|
| | Client Information | | | | Pro | ject Inf | ormation | | | | | Rec | ueste | ed Pai | rame | ters |
| Company Name: | Caterpillar, Inc. | 44-7-1 | | Permit/Pr | oject #: | | | | | | | | | | | |
| Address: | 9201 Faulkner Lal | ke Road | | Purchase | Order #: | | | /02 Dag | CHANGE IN | | | | | | | |
| | North Little Rock, | AR 72117 | e e e e e e | Work Ord | ler# | | 1 5 | | | | | | | | | |
| Telephone: | 501-955-5240 | | | Sampler I | | ; | Din. N | Calle | 1 | | | | | | | |
| FAX: | stephens katina@ | cat.com | | - (in) | - : | - " | Lucion | 100,1100 | | | | | | | | |
| Contact: | Ms. Katina Stephe | | | and Signa | ture(s): | | 120 | alle 9 | , | | (21.) | (8.) | | | | |
| ESC Client Number: | 2683 | | | | | - 4 | 1-20 | ci (feet) | | | se (2 | SS(2 | 0.0 | | | |
| Sample Ide | A CALLED TO THE REAL PROPERTY. | | Sample | Collection | | | Sample | Container | s | | grease | 3.), T | COD(6.0) | | | |
| Identification | ESC Control # | Date | Time | Туре | Matrix | Туре | Volume | | _ | # | Oil & | pH(23.), TSS(28.) | R | | | |
| Outfall 003 | 1108010479 | 8/24/11 | 1001 | Grab | Stormwater | Glass | 1 Liter | H2SO4 | | 1 | x | | | | | 7 |
| | | | | Grab | Stormwater | Plastic | 1 Liter | ≤ 6 Deg C° | | 1 | | X | | | | |
| | | | l. | Grab | Stormwater | Plastic | 1 Liter | H2SO4 | 7 | 1 | | | x | | | |
| | | | | | | | | | | | | | | | | |
| | | il. | best - 112 | | | | | | | | | | | | | |
| | | 100 | | | | | | -17 | 11 22 4 | | | | | | | |
| | I was to see the see of | E-107-E-10 | | | | 272.711 | J | | | | | | | | | |
| | PARTIES AND | | | | | | | from the | | | | | | | | 0 |
| | | | | | | - | F- F- 0.25 | | | | | | | | | |
| Relinquished By: (Signature and Print | ted Name) | Date | Time | Received By: (S | ignature and Printed | Name) | _ | Date | Tin | ne | | ody Se | als: | | | |
| Relinquished By: (Signature and Print | ted Name) | Date | Time | Received By: (S | ignature and Printed | Name) | | Date | Tin | ne | Used Turns | 1? around | : | Inta | ot? | |
| | | 222 | | | | | | | 5 | - 1 | Regu | | d | Spe | | |
| Relinquished By: (Signature and Print | | 2 /24/11 | Time 1265 | Received for Lab | By (Signature and | Printed Nam | /lust | Date 6/24/1. | Tin | | Were | Yes | ples prop | erly pres | erved: No | \neg |
| Cool all samples to ≤ 6 degree | es C with ice. | | | 1 | Flow Da | | Field Test | Time | Analy | | Res | ult | Result | | Units | |
| Comments: | | | | | Analyst: | | рН: | 1002 | 000 | C | 7. | 2 | 72 | | 5'4. | |
| recientaries de la Santia | | | | | Reading: | | | | | | | | | | | |
| | | | | | Units: | | | | | | | | | | | |
| | | | | | Chlorinated? | YN | Fecal Start: | | | | This | Doc | cument | is Pag | e_cof | • |



Corporate Office 13715 West Markham Little Rock, AR 72211 Tel. (501)221-2565 Fax (501)221-1341 Northwest Arkansas Branch 1107 Century Avenue Springdale, AR 72762

Tel. (479) 750-1170 Fax (479) 750-1172

Control Number: 1108010478

Customer Name : CATERPILLAR, INC. - OUTFALL 002

Customer Number: 2682 Report Date : 08/29/11 Sample Date : 08/24/11

Sample Time : 0950

Sample Type : GRAB STORMWATER Sample From : OUTFALL 002

Collected By: DWC Delivery By : DWC

Work Order : Purchase Order :

| | <u>L</u> | aboratory Analysis | | | Quality 2 | Assurance |
|---------------------|---------------------------|--------------------|----------------|----------------|-----------|-----------|
| Analysis | | | | | Precision | Accuracy |
| <u>Date Time By</u> | Parameter | Result | Notes Quantity | Method | % RPD | % Recover |
| | Chemical Oxygen Demand, L | 28.10 mg/L | | EPA 410.4 | 3.54 | 91.9 |
| 08/21 1100 NTR | Oil & Grease, Total | < 1.400 mg/L | | EPA 1664 A | 0.26 | 92.7 |
| 08/24 0952 DWC | рН | 6.8 S.U. | | SM 18 4500 H+B | 0.00 | N/A |
| 08/25 1515 NTR | Solids, Total Suspended | < 1.0 mg/L | | SM 18th 2540 D | 4.08 | N/A |

* QA data shown is from a different sample or standard on the same date.

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Little Rock, AR 72215 website: www.esclabs.com



Environmental Services Comp. .,y, Inc. **Northwest Branch** 1107 Century Springdale, AR 72764

CHAIN OF CUSTODY

Phone 479-750-1170 Fax: 479-750-1172

| | Client Information | | | | Pro | ject Inf | formation | VIA EDV | | | | Rec | queste | ed F | ara | met | ers |
|---|---|----------|--------|--|------------------------------|-------------|-------------------|--------------|--------------|----|--------------|--------------------|----------|--------|-------------------|------------|-----|
| Company Name: Address: Telephone: FAX: | Caterpillar, Inc. 9201 Faulkner La North Little Rock, 501-955-5240 stephens katina@ | AR 72117 | | Permit/Pr Purchase Work Ord Sampler I | oject #: Order #: er # | | Pand De d | | و چ | | | | | | | | |
| Contact: ESC Client Number: | Ms. Katina Stephe | | | and Signa | iture(s): | - | De a | Callet | _ | | grease (21.) | pH(23.), TSS(28.), | COD(6.0) | | | | |
| Sample Id | entification | | Sample | Collection | | | Sample | Container | s | | & gre | 23.), | 000 | | | | |
| Identification | ESC Control # | Date | Time | Туре | Matrix | Туре | Volume | Preserva | ative | # | Ö | Hd | 当 | | | | |
| Outfall 002 | 1108010478 | 8/24/11 | 0950 | Grab | Stormwater | Glass | 1 Liter | H2SO4 | | 1 | X | | | | | | |
| | | | | Grab | Stormwater | Plastic | 1 Liter | ≤ 6 Deg C | | 1 | | X | | | | | |
| | | | | Grab | Stormwater | Plastic | 1 Liter | H2SO4 | | 1 | | | X | 1 | _ | 1 | |
| | | | | | | | | | | | | | | + | | | + |
| | | | | | | | | | | | | | | | | | |
| Relinquished By: (Signature and Pr | inted Name) | Date | Time | Received By: (S | ignature and Printed | Name) | | Date | Tim | | | ody Se | als: | | | Ţ | |
| Relinquished By: (Signature and Pr | | Date | Time | Control of the Control | ignature and Printed | | | Date | Tim | 18 | Regu | around | 6 | | Intact? Specia | . [| + |
| Relinquished By: (Signature and Proceedings of the Cool and Samples to ≤ 6 degree | Pud Gillet | 8/24/1 | 1205 | Received for Lab | By. (Signature and | Printed Nam | (/hand | Date 8/24/11 | | 5 | | Yes | k) | erly p | N | • | ュ |
| Comments: | ees o with ide. | | | | Analyst: Time: | ia | Field Test pH: | 752 | Analys Du | _ | Resu | | Result | 8 | | nits ((| |
| | | | | | Reading: Units: | | | | | | | 1 | | 1 | | | |
| | | | | | Chlorinated? | Y N | Fecal Start: | | | | This | Doc | ument | is F | age | /of | ′ |



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1107 Century Avenue
Springdale, AR 72762

Tel. (479)750-1170 Fax (479)750-1172

Control Number: 1110010427

Customer Name : CATERPILLAR, INC. - OUTFALL 001

Customer/Permit No.: 2681 / AR0051454

Report Date : 10/21/11

Sample Date : 10/18/11

Sample Time : 1113

Sample Type : GRAB STORMWATER Sample From : OUTFALL 001 Collected By: NTR Delivery By : NTR

Work Order :

Purchase Order :

| | <u></u> | aboratory Analysis | | | Quality 1 | Assurance |
|---------------------|---------------------------|--------------------|--------------|----------------|-----------|-----------|
| Analysis | _ | | | | Precision | Accuracy |
| <u>Date Time By</u> | <u>Parameter</u> | Result Not | tes Ouantity | Method | % RPD | % Recover |
| 10/21 0820 NTR | Chemical Oxygen Demand, L | 69.20 mg/L | | EPA 410.4 | 0.50 | 99.3 |
| 10/20 1700 AJR | Oil & Grease, Total | 1.800 mg/L | | EPA 1664 A | 4.32 | 95.5 |
| 10/18 1114 NTR | рн | 7.6 S.U. | | SM 18 4500 H+B | 0.00 | N/A |
| 10/18 1600 NTR | Solids, Total Suspended | < 1.0 mg/L | | SM 18th 2540 D | 0.00 | N/A |
| 10/18 1114 NTR | Temperature | 19.40 °C | | SM 18th 2550 B | 0.00 | N/A |

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Signature

Environmental Services Co., Inc.

^{*} QA data shown is from a different sample or standard on the same date.

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P.O. Box 55146

Little Rock, AR 72211 Little Rock, AR 72215

website: www.esclabs.com

CHAIN OF CHETODY

Environmental Services Con Northwest Branch 1107 Century Springdale, AR 72764

y, Inc.

| Phone: 501-221-2565 | Fax: 501-221-1341 | | CI | HAIN (| OF CUS | 510 | DY | 1 | Phone | 479 | -750 | -117 | 0 F | ax: 479- | 750-1 | 172 |
|---------------------------------------|---|------------------|--------|------------------|----------------------|-------------|--------------|---------------|--------|-----|----------------|-------------------|-------------|-------------|-------|-----|
| | Client Information | | | | Pro | ject Inf | formation | | | | | Req | ueste | d Para | met | ers |
| Company Name: | Caterpillar, Inc. | | | Permit/Pr | oject #: | | | | | | | | | | | |
| Address: | 9201 Faulkner Lak | e Road | - 1 | Purchase | Order #: | | | | | | | | | 1.1 | Н | |
| | North Little Rock, | AR 72117 | | Work Ord | er# | | | | | | 1 | | | | | 1 |
| Telephone: | 501-955-5240 | | | Sampler ! | Name(s): | | led To | Riers | Jan | | | | | 1.1 | | 1 |
| Email: | stephens katina@ | cat.com | | | | | | -1 | | | 1 | 7 1 | | 1.4 | | |
| Contact: | Ms. Katina Stephe | | | and Signa | nture(s): | | 201 | Que - | _ | | £ | 28.), | | | | 1 |
| ESC Client Number: | 2681 | | | | | | 1-00 | 0 | | | grease (21.) | .88 | 0.0 | 1.4 | | |
| Sample Ide | entification | | Sample | Collection | | | Sample | Container | s | 7 | grea | 3.), T | LR(6 | | | |
| Identification | ESC Control # | Date | Time | Туре | Matrix | Туре | Volume | | | # | Oil & | pH(23.), TSS(28.) | COD LR(6.0) | | | |
| Outfall 001 | 1110010427 | 10-18-11 | 1113 | Grab | Stormwater | Glass | 1 Liter | H2SO4 | | 1 | Х | | | | | + |
| | 1 | 1 | 1 | Grab | Stormwater | Plastic | 1 Liter | ≤ 6 Deg C | | 1 | Ä | х | | | 1 | + |
| | | 1 | | Grab | Stormwater | Plastic | 1 Liter | H2SO4 | - | 1 | | | х | + | | 1 |
| | | | | 7.02 | Otominator | 7 Idollo | 1 Eiter | TIZOU T | | - | | - | ~ | | | + |
| | | | | | | | | | | | | 1 | | + | | + |
| | | | | | | | | | | | | | | + | 1 | + |
| | | | | | | | | | | | | | | | + | + |
| | | 1 | | | | | | | | | | | | ++ | + | + |
| | | 200 | 7 | | | | | | | | | | \vdash | ++ | + | + |
| Relinquished By: (Signature and Print | ted Name) | Date | Time | Received By: (S | ignature and Printed | Name) | | Date | Tim | ne | Custo | dy Se | als: | | | _ |
| 2 il | - IN | Dele | | 10-1-10-10 | 18:11 | | | | | | Used | | X | Intact | | _ |
| Relinquished By: (Signature and Print | | Date | Time | Received By: (S | ignature and Printed | Name) | | Date | Tim | 10 | Turna Regul | | X | Speci | al T | 1 |
| Relinquished By (Signature and Print | ted Name) | Date 10-18-11 | 1300 | Received for Lab | By: (Signature and | Printed Nam | e) | Date /0-18-1/ | /30 | | Were | | | erly preser | | 1 |
| Cool all samples to ≤ 6 degree | es C with ice. | | | | Flow Da | ta / | Field Test | Time | Analys | st | Resu | lt | Result | L | nits | |
| Comments: | 41-44 (41-41-41-41-41-41-41-41-41-41-41-41-41-4 | | | | Analyst: Time: | | pH: | 1114 | Nr | _ | 7.6 | | 7.6 | S | نر | |
| | | | | | Reading: | - 1 | temp i | 1114 | No | 12_ | 19. | 4 | 19.6 | 4 6 | | - |
| | | | | - 3 | Units: | | | 23.50 | | | | | | | - | |
| | | | | | Chlorinated? | YN | Fecal Start: | | | | This | Doc | ument | is Page | of I | 1 |



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Tel. (479)750-1170 Fax (479)750-1172

Control Number: 1102010184 Customer Name : CATERPILLAR, INC. - OUTFALL 007 Sample Date : 02/01/11 Sample Time : 1141

Collected By: DWC Delivery By : DWC

Customer Number: 2687

Sample Type : GRAB STORMWATER

Work Order :

Report Date : 02/08/11

Sample From : OUTFALL 007

Purchase Order :

| | Lal | oratory Analysis | L | | Quality A | Assurance |
|----------------|---------------------------|------------------|----------------|----------------|-----------|------------|
| Analysis | | | | war to the | Precision | Accuracy |
| Date Time By | Parameter | Result | Notes Ouantity | Method | ~ % RPD | % Recovery |
| 02/03 1300 NTR | Chemical Oxygen Demand, L | 96.50 mg/L | | EPA 410.4 | 1.39 | 100.7 * |
| 02/03 1700 NTR | Oil & Grease, Total | < 1.400 mg/L | | EPA 1664 A | 0.53 | 97.0 * |
| 02/01 1145 DWC | pH | 8.1 S.U. | | SM 18 4500 H+B | 0.00 | N/A * |
| 02/03 1325 NTR | Solids, Total Suspended | 1092.00 mg/L | | SM 18th 2540 D | 0.00 | N/A * |
| 02/01 1145 DWC | Temperature | 9.00 °C | | SM 18th 2550 B | 0.00 | N/A * |

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

^{*} QA data shown is from a different sample or standard on the same date.

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website: www.esclabs.com

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Environmental Services Cor Northwest Branch 1107 Century Springdale, AR 72764

CHAIN OF CUSTODY

Phone 479-750-1170 Fax: 479-750-1172

| | | | | | Pro | ject Inf | ormation | | | | | Req | uest | ed Pa | rame | ters | | |
|---|--|----------|--------|--|------------------------------|---|--------------|----------------------------|--------|---------------|------------|--------------------|----------|---------|--------|-----------------|------------------------|---|
| Company Name: Address: Telephone: FAX: Contact: | | AR 72117 | | Permit/Properties Purchase Work Ord Sampler No | Order #: er # Name(s): | | Pand | Chi 1 h | 1 | | (21.) | (28.). | 0 | | | | | |
| ESC Client Number: | 2687 | | | | | 2 | 4 | | | | grease | , TSS | COD(6.0) | | | | | |
| Sample Id | entification ESC Control # | Date | Sample | Collection | Matrix | Tyme | Sample (| | | # | OII & gr | pH(23.), TSS(28.), | LR CO | | Ш | | | |
| Outfall 007 | 1102010184 | 2/1/1 | 1141 | Grab | Stormwater | Type | 1 Liter | H2SO4 | ative | 1 | Х | ā. | - | | Н | + | | |
| | | 7/ | 7.71 | Grab | Stormwater | Plastic | 1 Liter | ≤ 6 Deg C | | 1 | | X | | | \Box | | | |
| | | | | Grab | Stormwater | Plastic | 1 Liter | H2SO4 | | 1 | | | х | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| Relinquished By: (Signature and Pr | A DESIGNATION OF THE PARTY OF T | Date | Time | | ignature and Printed | | | Date | Tim | | Custo | | | Int | act? | | | |
| Relinquished By: (Signature and Pri | inquished By. (Signature and Printed Name) Date Time Inquished By. (Signature and Printed Name) Date Time 1315 | | Time | Received for Lab By: (Signature a | | Received By: (Signature and Printed Name Received for Lab By: (Signature and Printed | | Signature and Printed Name | | Date = /1/11 | Tim 131 | • | Regul | lar | p | Sp perly pre | ecial served: No | 극 |
| Cool all samples to ≤ 6 degree | ees C with ice. | | 0.0 | War. | Flow Da | ita | Field Test | Time | Analys | $\overline{}$ | Resu | | Resul | | Units | | | |
| Comments: | mments: | | | Analyst: Time: Reading: | | pH: Temp | 1145 | 70 | | 8. | 0 | 8. | 4 | 5,11 | 1 | | | |
| | | | | | Units: Chlorinated? | V N | Fecal Start: | 201 | - | | Thie | Doc | rimer | t is Pa | ne / n | f . | | |



Springdale, AR 72762 1107 Century Avenue Northwest Arkansas Branch

Coffected By: DWC

Tel. (501)221-2565 Fax (501)221-1341 Little Rock, AR 72211 13715 West Markham Corporate Office

Control Number: 1102010183

Sample Date : 02/01/11 Tel. (479)750-1170 Fax (479)750-1172

| | rae Order : order : | MOTK O | 107 RAB STORMWATER UTFALL 006 | D: ed/ | T əlqma2 300 T əlqma2 T əlqma2 | | Customer Name: 02 |
|--|--|---|-------------------------------------|-----------|--|--|----------------------------|
| Assurance Accuracy & Recovery 100.7 * 97.0 * N/A * N/A * | Precision * REPO * RED 1.39 0.00 0.00 0.00 | Method SM 18 4500 H+B SM 18 4500 H+B SM 18th 2540 D SM 18th 2550 B | Ouantity | Notes (D) | ### A PARIVATE SIENT AND | Parameter Chemical Oxygen Demand, L Oil & Grease, Total PH Solids, Total Suspended Temperature | Analysis Date Time By |

(b) Exceeds Permit Limits for Maximum Concentration * QA data shown is from a different sample or standard on the same date.

the start of the analytical batch in which the specific sample was included. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136,

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imental Services Company, Inc. Er. Corporate Office

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P.O. Box 55146

Little Rock, AR 72211

Little Rock, AR 72215

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Environmental Services Con Northwest Branch 1107 Century

Springdale, AR 72764

y, Inc.

CHAIN OF CUSTODY Phone: 501-221-2565 Fax: 501-221-1341 Phone 479-750-1170 Fax: 479-750-1172 **Project Information** Client Information Requested Parameters Company Name: Permit/Project #: Caterpillar, Inc. Address: 9201 Faulkner Lake Road Purchase Order #: North Little Rock, AR 72117 Work Order # Telephone: 501-955-5240 Sampler Name(s): FAX: stephens katina@cat.com pH(23.), TSS(28.), (21.) Contact: Ms. Katina Stephens and Signature(s): COD(6.0) **ESC Client Number:** Oil & grease 2686 Sample Identification Sample Collection Sample Containers 04 Identification **ESC Control #** Date Time Type Matrix Volume Preservative # Type +200 Outfall 006 1102010182 Grab X H2SO4 Stormwater Glass 1 Liter 1107 Grab Stormwater **Plastic** 1 Liter < 6 Deg C Grab Stormwater **Plastic** 1 Liter H2SO4 Relinquished By: (Signature and Printed Name) Received By: (Signature and Printed Name) Custody Seals: Used? Intact? Relinquished By: (Signature and Printed Name) Received By: (Signature and Printed Name) Date urnaround Regular Special Time Received for Lab By: (Signature and Printed Name) Were samplés properly preserved: Just Yes No Cool all samples to < 6 degrees C with ice. Flow Data Field Test Analyst Time Result Result Units 76 Comments: Analyst: TRUC 1100 5.0% Time: TEW Dave 4.10 1108 ec. Reading: Units: Chlorinated? Y N Fecal Start: This Document is Page / of ...



Sample Time : 0949

Sample From : OUTFALL 006

Sample Type : GRAB STORMWATER

Tel. (479) 750-1170 Fax (479) 750-1172 Springdale, AR 72762 1107 Century Avenue Northwest Arkansas Branch

* A\N

% Recovery

Accuracy

00.0

Purchase Order:

Delivery By : DWC

Collected By: DWC

MOCK Order:

Ouality Assurance

Tel. (501)221-2565 Fax (501)221-1341 Little Rock, AR 72211 13715 West Markham Corporate Office

Sample Date: 05/02/11

CUSTOMET Name : CATERPILLAR, INC. - OUTFALL 006

Parameter

Customer Number : 2686

COUCTOL Number: 1105010162

Report Date : 05/04/11

02\03 0320 DMC

Date Time By

Analysis

SM 18 4500 H+B Notes Method Ouantity & RPD Precision Laboratory Analysis

* QA data shown is from a different sample or standard on the same date.

the start of the analytical batch in which the specific sample was included. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136.

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1107 Century
Springdale, AR 72764

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Phone 479-750-1170 Fax: 479-750-1172

| The state of the s | | | | | Pro | ject Inf | ormation | | | T | Red | uested | Parame | ters |
|--|---|---------------------|--------|--|---|----------|-------------------|--|----------|------|------|-------------|-------------------------|------|
| Company Name: Address: Telephone: FAX: Contact: ESC Client Number: | Caterpillar, Inc. 9201 Faulkner Lak North Little Rock, A 501-955-5240 stephens katina@ Ms. Katina Stephe 2686 | AR 72117 cat.com | | Permit/Pro Purchase Work Ord Sampler N and Signa | oject #: Order #: er # lame(s): | | David Ded | Catlon | <i>i</i> | | | | | |
| | entification | | Sample | Collection | | | Sample (| Container | s | [33] | | | | |
| Identification | ESC Control # | Date | Time | Туре | Matrix | Туре | Volume | TO 100 TO | | # E | | | | |
| Outfall 006 | 1105010162 | 5/2/11 | 0949 | Grab | Stormwater | Plastic | 1 Liter | ≤ 6 Deg C | - 1 | 1 X | | | | |
| | | | | | | | | | | | | | | |
| Relinquished By: (Signature and Pri | | Date | Time | 100 N 100 N | gnature and Printed | | | Date | Time | Use | 77 | | Intact? | |
| elinquished By. (Signature and Pri | | Date | Time | | gnature and Printed By: (Signature and | | 4 | Date | Time | Reg | | | Special y preserved: | |
| telinquished By: (Signature and Pri | 111.0223 | Date | Time | | Cut 1 | Did (| allet | 15/2/11 | 1100 | | Yes | | No | |
| Cool all samples to ≤ 6 degre Comments: | ees C with ice. | | - P. | 1 | Flow Da | ata | Field Test pH: | 71me | Analyst | | sult | Result 7. ゴ | Units ろ. ひ. | |
| | | | | | Time: Reading: Units: | | | | | | | | | |
| | | | | | Chlorinated? | YN | Fecal Start: | | | Thi | s Do | cument is | Page / o | f |



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Northwest Arkansas Branch 1107 Century Avenue Springdale, AR 72762 Tel. (479)750-1170 Fax (479)750-1172

Control Number: 1102010182

Customer Name : CATERPILLAR, INC. - OUTFALL 005

Sample Date : 02/01/11

Collected By: DWC

Customer Number: 2685

Sample Time : 1129

Delivery By : DWC

Report Date : 02/08/11

Sample Type : GRAB STORMWATER Sample From : OUTFALL 005

Work Order :

Purchase Order :

| | | Laboratory Analysis | | | | Quality 2 | Assurance |
|----------------|---------------------------|---------------------|-------|----------|----------------|-----------|------------|
| Analysis | | | | | | Precision | Accuracy |
| Date Time By | Parameter | Result | Notes | Ouantity | Method | % RPD | % Recovery |
| 02/03 1300 NTR | Chemical Oxygen Demand, L | 43.40 mg/L | | | EPA 410.4 | 1.39 | 100.7 * |
| 02/03 1700 NTR | Oil & Grease, Total | < 1.400 mg/L | | | EPA 1664 A | 0.53 | 97.0 * |
| 02/01 1133 DWC | рН | 9.0 S.U. | | | SM 18 4500 H+B | 0.00 | N/A * |
| 02/03 1325 NTR | Solids, Total Suspended | 54.00 mg/L | | | SM 18th 2540 D | 0.00 | N/A * |
| 02/01 1133 DWC | Temperature | 9.00 °C | | | SM 18th 2550 B | 0.00 | N/A * |

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

^{*} QA data shown is from a different sample or standard on the same date.

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Environmental Services Cor. **Northwest Branch** 1107 Century Springdale, AR 72764 y, Inc.

| Phone: 501-221-2565 | Fax: 501-221-1341 | | CI | HAIN (| OF CUS | 3101 | Y | F | hone | 479- | 750- | -117 | 0 | Fax: | 479-7 | 750-1 | 172 |
|---|--------------------|----------|-----------|------------------|----------------------|----------|--------------|-----------|-------|---------------|----------|---|-------|-----------------|--------|----------|-----|
| | Client Information | | | | Pro | ject Inf | ormation | | | | | Req | ues | ted | Para | met | ers |
| Company Name: | Caterpillar, Inc. | | | Permit/Pr | oject #: | | | | | | | | | | | | |
| Address: | 9201 Faulkner Lak | e Road | | Purchase | Order #: | | | | | | | | | | | | |
| | North Little Rock, | AR 72117 | | Work Ord | er# | | | | | | | | | | | | |
| Telephone: | 501-955-5240 | | | Sampler N | Name(s): | 7 | David | (hille | 1 | | | | | j | | | |
| FAX: | stephens katina@ | cat.com | 3 | 100 | | | | | | | | | | | | | |
| Contact: | Ms. Katina Stepher | ns | | and Signa | iture(s): | A | led 1 | a the | 4 | | (21.) | (28.) | | | | | |
| ESC Client Number: | 2685 | | 13.12 | | | 7 | | | | | grease (| TSS(| (6.0) | | | | 1.7 |
| Sample Ide | entification | | Sample | Collection | | | Sample (| Container | s | | gre | 23.), | 00 | | | | |
| Identification | ESC Control # | Date | Time | Туре | Matrix | Туре | Volume | Preserva | ative | # | ē | PH(C | | | | | |
| Outfall 005 | 1102010182 | 2/1/11 | 1129 | Grab | Stormwater | Glass | 1 Liter | H2SO4 | | 1 | X | | | | | | |
| | | | | Grab | Stormwater | Plastic | 1 Liter | ≤ 6 Deg C | | 1 | | X | | | | | |
| | 1 | | | Grab | Stormwater | Plastic | 1 Liter | H2SO4 | | 1 | | | X | | 1 | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | J | | | | | Ш | | | | | | |
| | | | | | | | | | - 9 | | | | | | | | |
| | | | | | - 2 - 4 | | + | | | | | | | | | | |
| | | | | | acu | | | N essa | | | 10 | | | | | | |
| | | | | | | 20.75 | - 9 | Villa | | | | | | | | | |
| Relinquished By: (Signature and Prin | nted Name) | Date | Time | Received By: (S | ignature and Printed | Name) | | Date | Tin | ne | | | als: | | | | - |
| Relinquished By: (Signature and Prin | ited Name) | Date | Time | Received By: (S | ignature and Printed | Name) | | Date | Tin | ne | | | : | | Intact | | _ |
| | | | | | | | | | _ | | | | | | | | |
| Relinquished By: (Signature and Prin | Ded Callet | Z/1/11 | Time (3/5 | Received for Lab | By: (Signature and | | a last | 2/1/11 | 13/ | | | Yes | AC) | орепу | | | 7 |
| Coal all samples to ≤ 6 degrees C with ice. | | ,,, | | t | Flow Da | | Field Test | Time | Analy | | Resu | Requested P (1) (23) (23) (23) (23) (23) (23) (23) (23 | | | | | |
| Comments: | | | | | Analyst: | 12000 | pH: | 1133 | Du | $\overline{}$ | 3. | 0 | 9. | No Units C S Uc | | | |
| | | | | | Time: | | TOP | 1133 | 700 | | 7 | 0 | | - | | <u>C</u> | |
| | | | | | Reading: Units: | | | | | | _ | | | | | | |
| | | | | | Chlorinated? | Y N | Fecal Start: | | | | This | Doc | ume | nt is | Page | (of | |



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Northwest Arkansas Branch 1107 Century Avenue Springdale, AR 72762 Tel. (479)750-1170 Fax (479)750-1172

Control Number: 1102010181

Customer Name : CATERPILLAR, INC. - OUTFALL 004

Sample Date : 02/01/11

Collected By: DWC

Customer Number: 2684

Sample Time : 1122

Delivery By : DWC Work Order :

Report Date : 02/08/11

Sample Type : GRAB STORMWATER Sample From : OUTFALL 004

Purchase Order :

| | Lab | oratory Analysis | | | | Quality A | Assurance |
|-----------------------|---------------------------|------------------|---------|----------|----------------|-----------------|-------------------|
| Analysis Date Time By | Parameter | Result | Notes _ | Ouantity | Method | Precision % RPD | Accuracy Recovery |
| 02/03 1300 NTR | Chemical Oxygen Demand, L | 27.30 mg/L | | | EPA 410.4 | 1.39 | 100.7 * |
| 02/03 1700 NTR | Oil & Grease, Total | < 1.400 mg/L | | | EPA 1664 A | 0.53 | 97.0 * |
| 02/01 1123 DWC | рН | 8.8 S.U. | | | SM 18 4500 H+B | 0.00 | N/A * |
| 02/03 1325 NTR | Solids, Total Suspended | 20.00 mg/L | | | SM 18th 2540 D | 0.00 | N/A * |
| 02/01 1123 DWC | Temperature | 9.00 °C | | • | SM 18th 2550 B | 0.00 | N/A * |

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

^{*} QA data shown is from a different sample or standard on the same date.

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ıy, Inc.

CHAIN OF CUSTODY

Phone: 501-221-2565 Phone 479-750-1170 Fax: 479-750-1172 Fax: 501-221-1341 Client Information **Project Information** Requested Parameters Company Name: Caterpillar, Inc. Permit/Project #: Address: 9201 Faulkner Lake Road Purchase Order #: North Little Rock, AR 72117 Work Order # Telephone: 501-955-5240 Sampler Name(s): stephens katina@cat.com FAX: pH(23.), TSS(28.), Oil & grease (21.) Contact: Ms. Katina Stephens and Signature(s): COD(6.0) **ESC Client Number:** 2684 Sample Identification Sample Containers Sample Collection 2 Volume Preservative Identification **ESC Control #** Date Time Type Matrix Type X Outfall 004 1122 Grab **H2SO4** Stormwater Glass 1 Liter 1102010181 X ≤6 Deg C Grab Stormwater Plastic 1 Liter Grab Stormwater Plastic 1 Liter H2SO4 Custody Seals: Relinquished By: (Signature and Printed Name) Received By: (Signature and Printed Name) Used? Intact? Turnaround: Relinquished By: (Signature and Printed Name) Received By: (Signature and Printed Name) Date 10 Special Regular Received for Lab By: (Signature and Printed Name) Were samples properly preserved: Relinquished By: (Signature and Printed Name) (alhy 2/1/11 1 /her Cul 3/5 Yes 🔾 No Cool all samples to < 6 degrees C with ice. Flow Data Result Units Field Test Time Analyst Result Analyst: 5.41. Comments: 1123 DWG Time: TELET 1/23 Duc 7.0 20 60 Reading: Units: This Document is Page _of / Chlorinated? Y N Fecal Start:



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Control Number: 1102010180

Customer Name : CATERPILLAR, INC. - OUTFALL 003

Sample Date : 02/01/11 Sample Time : 1118

Collected By: DWC

Customer Number: 2683

Delivery By : DWC

Report Date : 02/08/11

Sample Type : GRAB STORMWATER Sample From : OUTFALL 003

Work Order : Purchase Order :

| | La | boratory Analysis | | | | Quality A | Assurance |
|--------------------------|---------------------------|-------------------|-------------|--|----------------|-----------------|-------------------|
| Analysis Date Time By | Parameter | Result | Notes | Ouantity | Method | Precision % RPD | Accuracy Recovery |
| 02/03 1300 NTR | Chemical Oxygen Demand, L | 25.50 mg/L | C. Interest | THE POWER IN THE PARTY OF THE P | EPA 410.4 | 1.39 | 100.7 * |
| 02/03 1700 NTR | Oil & Grease, Total | < 1.400 mg/L | | | EPA 1664 A | 0.53 | 97.0 * |
| 02/01 1120 DWC | рн | 8.6 S.U. | | | SM 18 4500 H+B | 0.00 | N/A * |
| 02/03 1325 NTR | Solids, Total Suspended | 10.00 mg/L | | | SM 18th 2540 D | 0.00 | N/A * |
| 02/01 1120 DWC | Temperature | 9.00 °C | | | SM 18th 2550 B | 0.00 | N/A |

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

^{*} QA data shown is from a different sample or standard on the same date.

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y, Inc.

Springdale, AR 72764

| Phone: 501-221-2565 | Fax: 501-221-1341 | | CH | HAIN (| OF CUS | STOI | ŊΥ | P | hone | 479- | 750 | -117 | 0 Fa | x: 479 | -750-1 | 172 | |
|--|--------------------|----------|------------|--------------------|----------------------|----------|--------------|--|-------|------|-------|-------|--------|--------|-------------|--------------|--|
| · 一个一个 | Client Information | | | | Pro | ject Inf | ormation | | | | | Req | ueste | Par | amet | ers | |
| Company Name: | Caterpillar, Inc. | | | Permit/Pr | oject #: | | | | | | | | | | | | |
| Address: | 9201 Faulkner Lak | e Road | | Purchase | Order #: | | | | | | | | | | | | |
| (II) | North Little Rock, | AR 72117 | | Work Ord | er# | | | | | | | | | | | | |
| Telephone: | 501-955-5240 | | - 25 | Sampler I | Name(s): | - ; | David | (a/6 | 1 | | | | | | | | |
| FAX: | stephens katina@ | cat.com | | | | | 0 | | | | | 1 | | | | | |
| Contact: | Ms. Katina Stephe | ns | | and Signa | ture(s): | 1 | In a | Caller | 1 | - 9 | 21.) | (28.) | | | | | |
| ESC Client Number: | 2683 | | | | | T | | | | | | TSS | (0.0) | | | | |
| Sample Ide | entification | | Sample | Collection | and the | | Sample (| Containers | S | | | 3.), | | | | - 19 | |
| Identification | ESC Control # | Date | Time | Туре | Matrix | Туре | Volume | Preserva | ative | # | | pH(2 | 꿈 | | | | |
| Outfall 003 | 1118 | Grab | Stormwater | Glass | 1 Liter | H2SO4 | | 1 | X | | | | | | | | |
| | 110 2010180 | 11 | | Grab | Stormwater | Plastic | 1 Liter | ≤ 6 Deg C* | | 1 | | X | | | 177 | | |
| | | | | Grab | Stormwater | Plastic | 1 Liter | H2SO4 | | 1 | | | x | | | | |
| | | | Terrior . | | | | | | | | | | | | | | |
| | | 1 | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | 750 | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | - | | | | | | 1 | | | | | | | | |
| Relinquished By: (Signature and Prin | nted Name) | Date | Time | Received By: (S | ignature and Printed | Name) | | Date | Tim | | 11111 | | als: | - Int- | , F | - | |
| Relinquished By: (Signature and Printed Name) Date 1 | | | Time | Received By: (S | ignature and Printed | Name) | _ | Date | Tim | | | | : | intac | ar | | |
| | | | | | D . 111 | | 2-1- | - | | • | 777 | | | | | | |
| Relinquished By: (Signature and Prin | Zfi fie | 1315 | | By: (Signature and | of Can | That | 2/1/11 | Time Custody Seals: Used? Time Turnaround: Regular Were samples properly 13/15 Yes Analyst Result Result | | No T | | | | | | | |
| Cool all samples to ≤ 6 degrees C with ice. | | | | · · | Flow Da | | Field Test | Time | Analy | st | | | Result | | Units | | |
| Comments: | | | | | Analyst: | | pH: | 1120 | | | | _ | | | _ | | |
| | | | | | Time: | 7.00 | Teus | 1126 | Nu |)c | 1 | .0 | 7.0 | 100 | - | - | |
| | - | | | | Reading: Units: | - | | | | | | | | + | | | |
| | | | | | Chlorinated? | YN | Fecal Start: | | 1 | | This | Do | cument | is Pag | Units S. U. | | |
| | | | | | | | | | | _ | _ | _ | | | | | |



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Northwest Arkansas Branch 1107 Century Avenue Springdale, AR 72762 Tel. (479) 750-1170 Fax (479) 750-1172

Control Number: 1102010179

Customer Name : CATERPILLAR, INC. - OUTFALL 002

Customer Number: 2682 Report Date : 02/08/11 Sample Date : 02/01/11

Sample Time : 1114 Sample Type : GRAB STORMWATER

Sample From : OUTFALL 002

Collected By: DWC Delivery By : DWC

Work Order :

Purchase Order :

| | Lab | oratory Analysis | | | | Quality A | Assurance |
|-----------------------|---------------------------|------------------|--|-----------------|----------------|-----------------|-------------------|
| Analysis Date Time By | Parameter | Result | Notes | Ouantity | Method | Precision % RPD | Accuracy Recovery |
| | Chemical Oxygen Demand, L | 19.30 mg/L | The state of the s | en fektilikuske | EPA 410.4 | 1.39 | 100.7 * |
| | Oil & Grease, Total | 4.200 mg/L | | | EPA 1664 A | 0.53 | 97.0 * |
| 02/01 1116 DWC | На | 9.3 S.U. | (b) | | SM 18 4500 H+B | 0.00 | N/A * |
| 02/03 1325 NTR | Solids, Total Suspended | 8.00 mg/L | 337550 | | SM 18th 2540 D | 0.00 | N/A * |
| 02/01 1116 DWC | | 9.00 °C | | | SM 18th 2550 B | 0.00 | N/A * |

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

^{*} QA data shown is from a different sample or standard on the same date.

⁽b) Exceeds Permit Limits for Maximum Concentration

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Environmental Services Cor. Northwest Branch 1107 Century Springdale, AR 72764 y, Inc.

CHAIN OF CUSTODY

Phone 479-750-1170 Fax: 479-750-1172 Phone: 501-221-2565 Fax: 501-221-1341 Client Information Project Information Requested Parameters Permit/Project #: Company Name: Caterpillar, Inc. Purchase Order #: Address: 9201 Faulkner Lake Road Work Order # North Little Rock, AR 72117 Telephone: 501-955-5240 Sampler Name(s): FAX: stephens katina@cat.com TSS(28.), (21.) od Colle Contact: and Signature(s): Ms. Katina Stephens COD(6.0) Oil & grease **ESC Client Number:** 2682 pH(23.), Sample Identification Sample Collection Sample Containers Volume # **ESC Control #** Preservative Identification Date Time Type Matrix Type X Outfall 002 1102010179 1114 Grab Stormwater Glass 1 Liter H2SO4 ≤ 6 Deg C X Grab Plastic 1 Liter Stormwater X Grab 1 Liter H2SO4 Stormwater Plastic Custody Seals: Relinquished By: (Signature and Printed Name) Received By: (Signature and Printed Name) Date Used? Intact? Relinquished By: (Signature and Printed Name) Received By: (Signature and Printed Name) Date Regular Special Were samples properly preserved: Received for Lab By: (Signature and Printed Name) Relinquished By: (Signature and Printed Name) 6/61 Yes (2) No Color all samples to ≤ 6 degrees C with ice. Flow Data Field Test Time Analyst Result Result Units 9.3 pH: 1116 DUC 5.4. Comments: Analyst: Time: Tews 1116 Truse 9.0 00 Reading:

Units:

Chlorinated? Y N

Fecal Start:



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Corporate Office 13715 West Markham Little Rock, AR 72211 Tel. (501)221-2565 Fax (501)221-1341

Northwest Arkansas Branch 1107 Century Avenue Springdale, AR 72762 Tel. (479)750-1170 Fax (479)750-1172

Control Number: 1105010161

Customer Name : CATERPILLAR, INC. - OUTFALL 002

Sample Date : 05/02/11 Sample Time : 0943

Collected By: DWC

Customer Number: 2682

Delivery By : DWC Work Order :

Report Date : 05/04/11

Sample Type : GRAB STORMWATER Sample From : OUTFALL 002

Purchase Order :

| | | Laboratory Analysis | 3 | | | Ouality A | <u>Assurance</u> |
|----------------|-----------|---------------------|-------|--------------|----------------|-----------|-----------------------|
| Analysis | | | | | | Precision | Accuracy |
| Date Time By | Parameter | Result | Notes | Ouantity | Method | _ % RPD | <pre>% Recovery</pre> |
| 05/02 0944 DWC | DH . | 7 5 5 17 | | - | SM 18 4500 H+B | חמח ו | N/A |

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

^{*} QA data shown is from a different sample or standard on the same date.

E onmental Services Company, Inc. **Corporate Office**

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.ny, Inc. Springdale, AR 72764

| Phone: 501-221-2565 | Fax: 501-221-1341 | | CI | MIN | DE CO | 310 | וט | 1 | hone | 479- | 750-11 | 70 Fa | IX: 479-7 | 50-11/2 | į. |
|---|--------------------|----------|---------|----------------------------------|----------------------|-------------|--|-----------|--------|--------|----------------------|------------|-------------|---------|----|
| | Client Information | | | Pro | oject Inf | ormation | | | | Re | questec | J Parar | neters | | |
| Company Name: | Caterpillar, Inc. | | | Permit/Pr | oject #: | | | | 10. | | | | | | |
| Address: | 9201 Faulkner Lak | e Road | | Purchase | Order #: | 11/1 | | | | | | | | | |
| | North Little Rock, | AR 72117 | | Work Ord | er# | | de la companya de la | major t | | | | 1 1 | | | |
| Telephone: | 501-955-5240 | | | Sampler N | Name(s): | 7 | Dand | Chiller | 1 | | | | | | |
| FAX: | stephens katina@ | cat.com | | | | | Dece ! | | | | | | | | |
| Contact: | Ms. Katina Stephe | ns | | and Signa | ture(s): | | Maca C | Liles | - | | | 1 1 | | | |
| ESC Client Number: | 2682 | | | | | 7 | | | | | | | 1 1 | | |
| Sample Id | entification | | Sample | Collection | | | Sample | Container | s | | 23. | | | | |
| Identification | ESC Control # | Date | Time | Туре | Matrix | Туре | Volume | Preserva | ative | # | H C | | | | |
| Outfall 002 | 1105010161 | 5/2/11 | 0943 | Grab | Stormwater | Plastic | 1 Liter | ≤ 6 Deg C | | 1 | X | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | 60 |
| | | | | _0.0 | | | | | | | | | | | |
| | | | | | | | | 2m | | | | | | | 1 |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | ===1 | | | | | | |
| | | | | | | | | | | | | | | | |
| Relinquished By: (Signature and Pri | inted Name) | Date | Time | Received By: (S | gnature and Printed | Name) | | Date | Tin | ne | Custody S Used? | eals: | Intact? | | |
| elinquished By: (Signature and Printed Name) Date | | Date | Time | Received By: (S | ignature and Printed | Name) | | Date | Tan | | Turnarour Regular | id: | Specia | | |
| Relinquished By: (Signature and Pri | inted Name) | Date | Time | Received for Lab | By: (Signature and | Printed Nam | riest | 5/2/11 | Tin | | Were san Yes | ples prope | rly preserv | | |
| Cool all samples to ≤ 6 degrees C with ice. | | | | Flow Data Field Test Time Analys | | | | st | Result | Result | U | nits | | | |
| Comments: | | | | | Analyst: | | pH: | 0944 | ne | 10 | 7.5 | 7.5 | · 5. | 11. | |
| | | | B - 3/2 | | Reading: | | | | | | | | | Acres. | |
| And the second second | | | 12 | | Units: | | | | | | | | | | |
| | | | | | Chlorinated? | YN | Fecal Start: | | | | This Do | cument i | is Page | of ' | |

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Northwest Arkansas Branch 1107 Century Avenue Springdale, AR 72762 Tel. (479)750-1170 Fax (479)750-1172

Control Number: 1102010178

Customer Name : CATERPILLAR, INC. - OUTFALL 001

Customer/Permit No.: 2681 / AR0051454

Report Date : 02/08/11

Sample Date : 02/01/11

Sample Time : 1145

Sample Type : GRAB STORMWATER Sample From : OUTFALL 001

Collected By: DWC Delivery By : DWC

Work Order :

Purchase Order :

| | Laboratory Analysis | | | | | Quality Assurance | |
|-----------------------|---------------------------|-------------|-------|----------|----------------|-------------------|---------------------|
| Analysis Date Time By | Parameter | Result | Notes | Ouantity | Method | Precision % RPD | Accuracy % Recovery |
| 02/03 1300 NTR | Chemical Oxygen Demand, L | 33.90 mg/L | | - | EPA 410.4 | 1.39 | 100.7 |
| | Oil & Grease, Total | 1.600 mg/L | | | EPA 1664 A | 0.53 | 97.0 * |
| 02/01 1147 DWC | рН | 8.1 S.U. | | | SM 18 4500 H+B | 0.00 | N/A |
| 02/03 1325 NTR | Solids, Total Suspended | < 1.00 mg/L | | | SM 18th 2540 D | 0.00 | N/A |
| 02/01 1147 DWC | Temperature | 9.00 °C | | | SM 18th 2550 B | 0.00 | N/A * |

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^{*} QA data shown is from a different sample or standard on the same date.

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Phone 479-750-1170 Fax: 479-750-1172 Phone: 501-221-2565 **Project Information** Client Information Requested Parameters Company Name: Permit/Project #: Caterpillar, Inc. Address: 9201 Faulkner Lake Road Purchase Order #: North Little Rock, AR 72117 Work Order # 501-955-5240 Telephone: Sampler Name(s): Email: stephens katina@cat.com pH(23.), TSS(28.), Oil & grease (21.) Contact: Ms. Katina Stephens and Signature(s): COD LR(6.0) ESC Client Number: 2681 Sample Identification Sample Containers Sample Collection Identification **ESC Control #** Date Time Type Matrix Type Volume Preservative 1143 Outfall 001 1102010178 Grab 1 Liter H2SO4 Stormwater Glass X Grab ≤ 6 Deg C Stormwater **Plastic** 1 Liter Grab Plastic 1 Liter H2SO4 Stormwater Relinquished By: (Signature and Printed Name) Received By: (Signature and Printed Name) Custody Seals: Used? Intact? Relinquished By: (Signature and Printed Name) Turnaround: Date Received By: (Signature and Printed Name) 10 Regular Special Were samples properly preserved: Relinquished By: (Signature and Printed Name) Time Received for Lab By (Signature and Printed Name) 365 alles 1315 Yes 😕 No Cool all samples to ≤ 6 degrees C with ice. Field Test Time Analyst Result Result Units 14.7 Sell pH: 8.1 Comments: Analyst: Dusc Time: temp TOUC' 8.0 Reading: Units: This Document is Page / of/ Chlorinated? Y N Fecal Start:

