



Caterpillar Inc.

100 NE Adams Street
Peoria, Illinois 61629

January 31, 2013

VIA EXPRESS MAIL

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

Re: Caterpillar Inc., North Little Rock Facility, Permit No. AR-0051454

To Whom It May Concern:

Enclosed please find the original 2012 Industrial Stormwater General Permit (ARR000000) Annual Report Form for the Caterpillar Inc., North Little Rock facility.

Please contact me at your convenience with any questions or concerns.

Sincerely,

Jodi Belt
Paralegal

Legal Services Division
Telephone: (309) 494-2603

**Arkansas Department of Environmental
Quality (ADEQ)**

**5301 Northshore Drive
North Little Rock, AR 72118-5317**

***Industrial Stormwater General Permit
(ARR000000) Annual Report Form***

Permit No. AR-00 <u>5 1 4 5 4</u>	
Permittee Name: Caterpillar Inc.	
Facility Name: North Little Rock	
Facility Physical Address (<u>not</u> mailing address): 9201 Faulkner Lake Rd.	
Facility City: North Little Rock	Zip Code: 72117

Facility Contact Name: Justin Ganschow	Title: Environmental Coordinator
Facility Contact Phone Number 501-228-2764	Facility Contact Email: Ganschow_Justin_R@cat.com
Reporting Period: January 1 st to December 31 st <u>2012</u> (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 31st**. 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 previous calendar year (Jan 1st – Dec 31st)? **Note:** If a parameter was sampled at a discharge point more than once then all the samples needs to be reported and evaluated individually:

Yes - Complete Sections 2, 3, 4, 5 and 6.

No - Complete Section 2, 3, 5 and 6.

Include any additional comments here:

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	3-15-12
Visual Site Inspection #2 Date	5-2-12
Visual Site Inspection #3 Date	7-2-12
Visual Site Inspection #4 Date	12-13-12
Comprehensive Site Compliance Evaluation Date	11-14-12

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: April 17, 2012 **Describe the Problem:** Unintentional release of pre-treated wastewater as described in May 18, 2012, submittal to ADEQ (Ms. Michelle Bolenbaugh). Caterpillar took immediate corrective action to stop the release, made infrastructure improvements to prevent recurrence, and performed a water quality analysis using applicable water quality criteria to confirm the absence of any impact to human health or the environment.

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: benchmark was exceeded during the following sampling period (check all that apply):

1st Sampling period (January-June)

2nd 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.

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.

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."

Paul Rivera

Facility Manager

Printed Name

Title

Date

Signature*



*** 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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Environmental Services Company
13715 W. Markham - 72211
P.O. Box 55146
Little Rock, AR 72115
(501) 281-2666
DMR # 60-01529
Form Approved
OMB No. 2040-0004
ZIP CODE: 72117
MINOR

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, GENERAL MANAGER

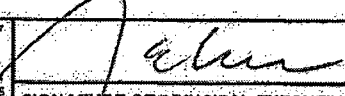
AR0051454	001-S
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
FROM 07/01/2012	TO 12/31/2012

001-SEMI-ANNUAL STORMWATER
External Outfall

No Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen demand, chem. (low level) (COD) 00335 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.18	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
pH 00400 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	7.5	*****	7.5	SU	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	6 MINIMUM	*****	9 MAXIMUM	SU		Once Every 6 Months	GRAB
Solids, total suspended 00530 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	6.0	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
Oil & grease 00556 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	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 under my direction or supervision in accordance with a system designed to ensure 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.	TELEPHONE	DATE
RICHARD BARCH TYPED OR PRINTED			501-228-2140
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	MM/DD/YYYY
SEMI-ANNUAL REPORTING (JAN-JUN) (JUL-DEC) 60-01529		AREA Code	NUMBER

Environmental Services Company, Inc.

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: 1208010487	Sample Date : 08/31/12	Collected By: DWC
Customer Name : CATERPILLAR, INC. - OUTFALL 001	Sample Time : 1003	Delivery By : DWC
Customer/Permit No. : 2681 / AR0051454	Sample Type : GRAB STORMWATER	Work Order :
Report Date : 09/13/12	Sample From : OUTFALL 001	Purchase Order :

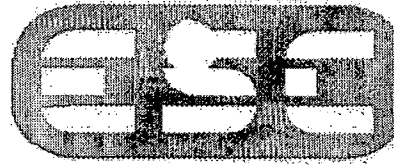
<u>Laboratory Analysis</u>						<u>Quality Assurance</u>		
Analysis			Result	Notes	Quantity	Method	Precision	Accuracy
Date	Time	By					Parameter	% RPD
09/06	0815	DWC	Chemical Oxygen Demand, L	7.18 mg/L		EPA 410.4	5.62	101.0 *
09/04	0730	NTR	Oil & Grease, Total	< 1.400 mg/L		EPA 1664 A	2.17	96.0 *
08/31	1004	DWC	pH	7.5 S.U.		SM 18 4500 H+B	0.00	N/A *
09/04	1410	DWC	Solids, Total Suspended	6.00 mg/L		SM 18th 2540 D	8.70	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.

Signature Neil J. Poy
 Environmental Services Co., Inc.

Environmental 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

Phone: 501-221-2565 Fax: 501-221-1341

CHAIN OF CUSTODY

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

Client Information				Project Information							Requested Parameters								
Company Name: Caterpillar, Inc.				Permit/Project #:							Oil & grease (21.)	PH(23), TSS(28)	COD LR(60)						
Address: 9201 Faulkner Lake Road				Purchase Order #:															
North Little Rock, AR 72117				Work Order #:															
Telephone: 501-955-5240				Sampler Name(s): <i>David Catlett</i>															
Email: stephens_katina@cat.com				and Signature(s): <i>David Catlett</i>															
Contact: Ms. Katina Stephens																			
ESC Client Number: 2681																			
Sample Identification		Sample Collection				Sample Containers													
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#										
Outfall 001	1208010487	8/31/12	1003	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							
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Custody Seals:		Used? <input type="checkbox"/>		Intact? <input type="checkbox"/>							
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Turnaround:		Regular <input checked="" type="checkbox"/>		Special <input type="checkbox"/>							
Relinquished By: (Signature and Printed Name)		Date	Time	Received for Lab By: (Signature and Printed Name)		Date	Time	Were samples properly preserved:		Yes <input checked="" type="checkbox"/>		No <input type="checkbox"/>							
Cool all samples to ≤ 6 degrees C with ice.				Flow Data		Field Test		Time	Analyst	Result	Result	Units							
Comments:				Analyst:		pH:		1004	DWC	7.5	7.5	5.6							
				Time:															
				Reading:															
				Units:															
				Chlorinated? Y N		Fecal Start:								This Document is Page 1 of 1					

LM

STORM WATER GENERAL PERMIT
ADDITIONAL MONITORING REQUIREMENTS

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

Caterpillar 8-487

OUTFALL NUMBER 001

DATE OF STORM EVENT SAMPLED: 8/31/12

DURATION OF EVENT: 20 hours

ESTIMATE OF RAINFALL EVENT: 2 inches

TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.) 10 days

ESTIMATE OF TOTAL VOLUME DISCHARGED: 20,400 gallons

By signature below, I certify that I have read and understand the conditions of the certification on the DMR form and described in further detail in Part III.B.9 of the general storm water permit. Furthermore, I believe that the information submitted in these additional monitoring requirements meets all conditions of such certification.

David Collett
Printed Name of Official

David Collett
Signature

8/31/12
Date

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Environmental Services Company Approved
13715 W. Markham - 72211 OMB No. 2040-0004
P.O. Box 55146
Little Rock, AR 72115
(501) 221-1111 ZIP CODE: 72117
MINOR

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, GENERAL MANAGER

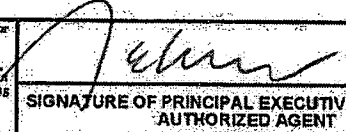
AR0051454	002-S
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
FROM 07/01/2012	TO 12/31/2012

002-SEMI-ANNUAL STORMWATER
External Outfall

No Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen demand, chem. (low level) (COD) 00335 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	12.1	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
pH 00400 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	7.3	*****	7.3	SU	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	6 MINIMUM	*****	9 MAXIMUM	SU		Once Every 6 Months	GRAB
Solids, total suspended 00530 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	9.0	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
Oil & grease 00556 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<1.4	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER RICHARD BARCH TYPED OR PRINTED	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.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE	DATE
			501-728-2740	01/14/2013
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here). SEMI-ANNUAL REPORTING (JAN-JUN) (JUL-DEC) 60-01529		AREA Code	NUMBER	MM/DD/YYYY

Environmental Services Company, Inc.

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: 1208010488	Sample Date : 08/31/12	Collected By: DWC
Customer Name : CATERPILLAR, INC. - OUTFALL 002	Sample Time : 1012	Delivery By : DWC
Customer Number : 2682	Sample Type : GRAB STORMWATER	Work Order :
Report Date : 09/13/12	Sample From : OUTFALL 002	Purchase Order :

<u>Laboratory Analysis</u>							<u>Quality Assurance</u>	
<u>Analysis</u>			<u>Result</u>	<u>Notes</u>	<u>Quantity</u>	<u>Method</u>	<u>Precision</u>	<u>Accuracy</u>
<u>Date</u>	<u>Time</u>	<u>By</u>					<u>Parameter</u>	<u>% RPD</u>
09/06	0815	DWC	Chemical Oxygen Demand, L	12.10 mg/L		EPA 410.4	5.62	101.0 *
09/04	0730	NTR	Oil & Grease, Total	< 1.400 mg/L		EPA 1664 A	2.17	96.0 *
08/31	1013	DWC	pH	7.3 S.U.		SM 18 4500 H+B	0.00	N/A *
09/04	1410	DWC	Solids, Total Suspended	9.00 mg/L		SM 18th 2540 D	8.70	N/A *

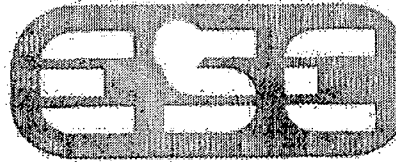
* QA data shown is from a different sample or standard on the same date.

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.

Signature _____

Neil Rye
 Environmental Services Co., Inc.

Environmental 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

Phone: 501-221-2565 Fax: 501-221-1341

CHAIN OF CUSTODY

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

Client Information						Project Information					Requested Parameters										
Company Name: Caterpillar, Inc.						Permit/Project #:					Oil & grease (21)	pH(23), TSS(26)	LR COD(6.0)								
Address: 9201 Faulkner Lake Road						Purchase Order #:															
North Little Rock, AR 72117						Work Order #:															
Telephone: 501-955-5240						Sampler Name(s): <i>David Catlett</i>															
FAX: stephens_katina@cat.com						and Signature(s): <i>D. Catlett</i>															
Contact: Ms. Katina Stephens						ESC Client Number: 2682															
Sample Identification			Sample Collection			Sample Containers															
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#												
Outfall 002	1208010488	8/31/12	1212	Grab	Stormwater	Glass	1 Liter	H2SO4	1	X											
	1	1	1	Grab	Stormwater	Plastic	1 Liter	≤ 6 Deg C	1		X										
				Grab	Stormwater	Plastic	1 Liter	H2SO4	1			X									
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Custody Seals:		Used?	Intact?										
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Turnaround:		Regular	Special										
Relinquished By: (Signature and Printed Name)		Date	Time	Received for Lab By: (Signature and Printed Name)		Date	Time	Were samples properly preserved:		Yes	No										
Cool all samples to ≤ 6 degrees C with ice.						Flow Data	Field Test	Time	Analyst	Result	Result	Units									
Comments:						Analyst:	pH:	1015	DWC	7.3	7.3	5.0									
						Time:															
						Reading:															
						Units:															
						Chlorinated? Y: N	Fecal Start:						This Document is Page <u>of 2</u>								

STORM WATER GENERAL PERMIT
ADDITIONAL MONITORING REQUIREMENTS

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

Caterpillar 8-488

OUTFALL NUMBER 002

DATE OF STORM EVENT SAMPLED: 8/31/12

DURATION OF EVENT: 20 hours

ESTIMATE OF RAINFALL EVENT: 2 inches

TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.) 10 days

ESTIMATE OF TOTAL VOLUME DISCHARGED: 20,400 gallons

By signature below, I certify that I have read and understand the conditions of the certification on the DMR form and described in further detail in Part III.B.9 of the general storm water permit. Furthermore, I believe that the information submitted in these additional monitoring requirements meets all conditions of such certification.

David Callout
Printed Name of Official

D. Callout
Signature

8/31/12
Date

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Environmental Services Company, Inc. Approved
13715 W. Markham - 72211 CMB No. 2040-0004
P.O. Box 55146
Little Rock, AR 72115
(501) 221-2565
DMR Mailing ZIP CODE: 72117
MINOR

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

NAME: CATERPILLAR, INC., NORTH AMERICAN MOTOR C
ADDRESS: 9201 FAULKNER LAKE ROAD
NORTH LITTLE ROCK, AR 72117
FACILITY: CATERPILLAR, INC., NORTH AMERICAN MOTOR C
LOCATION: 9201 FAULKNER LAKE ROAD
NORTH LITTLE ROCK, AR 72117
ATTN: JON HARRISON, GENERAL MANAGER

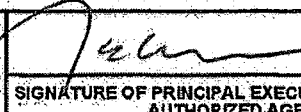
AR0051454	003-S
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
FROM 07/01/2012	TO 12/31/2012

003-SEMI-ANNUAL STORMWATER
External Outfall

No Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen demand, chem. (low level) (COD) 00335 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 3.0	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
pH 00400 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	7.7	*****	7.7	SU	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	6 MINIMUM	*****	9 MAXIMUM	SU		Once Every 6 Months	GRAB
Solids, total suspended 00530 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3.0	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
Oil & grease 00556 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1.4	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER RICHARD BARCH TYPED OR PRINTED	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 persons 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.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			501-228-2140	01/14/2013
			AREA Code	NUMBER
				MMDDYYYY

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

SEMI-ANNUAL REPORTING (JAN-JUN) (JUL-DEC) 60-01529

Environmental Services Company, Inc.

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: 1208010489	Sample Date : 08/31/12	Collected By: DWC
Customer Name : CATERPILLAR, INC. - OUTFALL 003	Sample Time : 1015	Delivery By : DWC
Customer Number : 2683	Sample Type : GRAB STORMWATER	Work Order :
Report Date : 09/13/12	Sample From : OUTFALL 003	Purchase Order :

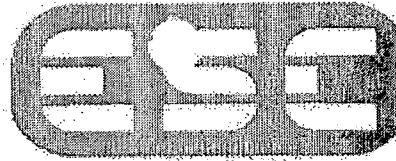
<u>Laboratory Analysis</u>						<u>Quality Assurance</u>			
<u>Analysis</u>						<u>Precision</u>	<u>Accuracy</u>		
<u>Date</u>	<u>Time</u>	<u>By</u>	<u>Parameter</u>	<u>Result</u>	<u>Notes</u>	<u>Quantity</u>	<u>Method</u>	<u>% RPD</u>	<u>% Recovery</u>
09/06	0815	DWC	Chemical Oxygen Demand, L	< 3.00 mg/L			EPA 410.4	5.62	101.0 *
09/04	0730	NTR	Oil & Grease, Total	< 1.400 mg/L			EPA 1664 A	2.17	96.0 *
08/31	1016	DWC	pH	7.7 S.U.			SM 18 4500 H+B	1.38	N/A *
09/04	1410	DWC	Solids, Total Suspended	3.00 mg/L			SM 18th 2540 D	10.53	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.

Signature 
 Environmental Services Co., Inc.

Environmental 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

Phone: 501-221-2565 Fax: 501-221-1341

CHAIN OF CUSTODY

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

Client Information				Project Information							Requested Parameters									
Company Name: Caterpillar, Inc.				Permit/Project #:							Oil & grease (21.)	pH(23.), TSS(28.)	LR COD(6.0)							
Address: 9201 Faulkner Lake Road				Purchase Order #:																
North Little Rock, AR 72117				Work Order #:																
Telephone: 501-955-5240				Sampler Name(s): <i>Dred Catalyst</i>																
FAX: stephens_katina@cat.com				and Signature(s): <i>Dred Catalyst</i>																
Contact: Ms. Katina Stephens																				
ESC Client Number: 2683																				
Sample Identification		Sample Collection				Sample Containers														
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#											
Outfall 003	1208010489	8/12/12	1315	Grab	Stormwater	Glass	1 Liter	H2SO4	1	X										
	1	1	1	Grab	Stormwater	Plastic	1 Liter	≤ 6 Deg C	1		X									
				Grab	Stormwater	Plastic	1 Liter	H2SO4	1			X								
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Custody Seals:		Used?	Intact?									
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Turnaround:		Regular	Special									
Relinquished By: (Signature and Printed Name)		Date	Time	Received for Lab By: (Signature and Printed Name)		Date	Time	Were samples properly preserved:		Yes	No									
Cool all samples to ≤ 6 degrees C with ice.										Flow Data:	Field Test	Time	Analyst	Result	Result	Units				
Comments:										Analyst:	pH:	1016	TWC	7.7	7.7	J.H.				
										Time:										
										Reading:										
										Units:										
										Chlorinated? Y N	Fecal Start:					This Document is Page 1 of 1				

LM

STORM WATER GENERAL PERMIT
ADDITIONAL MONITORING REQUIREMENTS

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

Categorization 8-489

OUTFALL NUMBER 003

DATE OF STORM EVENT SAMPLED: 8/31/12

DURATION OF EVENT: 20 hours

ESTIMATE OF RAINFALL EVENT: 2 inches

TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.) 10 days

ESTIMATE OF TOTAL VOLUME DISCHARGED: 20,400 gallons

By signature below, I certify that I have read and understand the conditions of the certification on the DMR form and described in further detail in Part III.B.9 of the general storm water permit. Furthermore, I believe that the information submitted in these additional monitoring requirements meets all conditions of such certification.

David Callow

Printed Name of Official

David Callow

Signature

8/31/12

Date

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Environmental Services Company
13715 W. Markham - 72211
P.O. Box 55146
Little Rock, AR 72115
(501) 221-2565
DMR Mailing ZIP CODE: 72117
MINOR

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

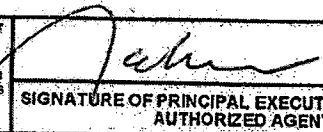
NAME: CATERPILLAR, INC., NORTH AMERICAN MOTOR C
ADDRESS: 9201 FAULKNER LAKE ROAD
NORTH LITTLE ROCK, AR 72117
FACILITY: CATERPILLAR, INC., NORTH AMERICAN MOTOR C
LOCATION: 9201 FAULKNER LAKE ROAD
NORTH LITTLE ROCK, AR 72117
ATTN: JON HARRISON, GENERAL MANAGER

AR0051454	004-S
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
FROM 07/01/2012	TO 12/31/2012

004-SEMI-ANNUAL STORMWATER
External Outfall

No Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen demand, chem. (low level) (COD) 00335 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	8.99	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
pH 00400 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	8.2	*****	8.2	SU	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	6 MINIMUM	*****	9 MAXIMUM	SU		Once Every 6 Months	GRAB
Solids, total suspended 00530 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	21.0	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
Oil & grease 00556 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<1.4	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER RICHARD BIRCH TYPED OR PRINTED	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.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			5012282740	01/14/2013
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)		AREA Code	NUMBER	MM/DD/YYYY

SEMI-ANNUAL REPORTING (JAN-JUN) (JUL-DEC) 60-01529

Environmental Services Company, Inc.

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: 1208010490
 Customer Name : CATERPILLAR, INC. - OUTFALL 004
 Customer Number : 2684
 Report Date : 09/13/12

Sample Date : 08/31/12
 Sample Time : 1017
 Sample Type : GRAB STORMWATER
 Sample From : OUTFALL 004

Collected By: DWC
 Delivery By : DWC
 Work Order :
 Purchase Order :

<u>Laboratory Analysis</u>						<u>Quality Assurance</u>		
<u>Analysis</u>			<u>Result</u>	<u>Notes</u>	<u>Quantity</u>	<u>Method</u>	<u>Precision</u>	<u>Accuracy</u>
<u>Date</u>	<u>Time</u>	<u>By</u>					<u>Parameter</u>	<u>% RPD</u>
09/06	0815	DWC	Chemical Oxygen Demand, L	8.99 mg/L		EPA 410.4	5.62	101.0 *
09/04	0730	NTR	Oil & Grease, Total	< 1.400 mg/L		EPA 1664 A	2.17	96.0 *
08/31	1019	DWC	pH	8.2 S.U.		SM 18 4500 H+B	1.38	N/A *
09/04	1410	DWC	Solids, Total Suspended	21.00 mg/L		SM 18th 2540 D	10.53	N/A *

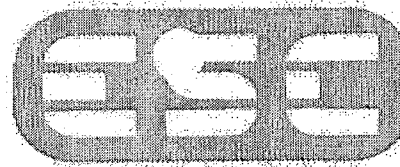
* QA data shown is from a different sample or standard on the same date.

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.

Signature _____


 Environmental Services Co., Inc.

Environmental 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

Phone: 501-221-2565 Fax: 501-221-1341

CHAIN OF CUSTODY

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

Client Information				Project Information						Requested Parameters								
Company Name: Caterpillar, Inc.				Permit/Project #:						Oil & grease (21.)	pH(23), TSS(28)	LR COD(6.0)						
Address: 9201 Faulkner Lake Road				Purchase Order #:														
North Little Rock, AR 72117				Work Order #:														
Telephone: 501-955-5240				Sampler Name(s): <i>Dud Callant</i>														
FAX: stephens_katina@cat.com				and Signature(s): <i>Dud Callant</i>														
Contact: Ms. Katina Stephens				ESC Client Number: 2684														
Sample Identification		Sample Collection				Sample Containers												
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#									
Outfall 004	1208010490	8/31/12	1017	Grab	Stormwater	Glass	1 Liter	H2SO4	1	X								
	1	1	1	Grab	Stormwater	Plastic	1 Liter	≤ 6 Deg C	1		X							
				Grab	Stormwater	Plastic	1 Liter	H2SO4	1			X						
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Custody Seals:		Used?	Intact?							
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Turnaround:		Regular	Special							
Relinquished By: (Signature and Printed Name)		Date	Time	Received for Lab By: (Signature and Printed Name)		Date	Time	Were samples properly preserved:		Yes	No							
Cool all samples to ≤ 6 degrees C with ice.																		
Comments:				Flow Data	Field Test	Time	Analyst	Result	Result	Units								
				Analyst:	pH:	1019	DWC	8.2	8.2	3.0								
				Time:														
				Reading:														
				Units:														
				Chlorinated? Y N	Fecal Start:						This Document is Page <u> </u> of <u> </u>							

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STORM WATER GENERAL PERMIT
ADDITIONAL MONITORING REQUIREMENTS

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

Interpiller 8-420

OUTFALL NUMBER 204

DATE OF STORM EVENT SAMPLED: 8/31/12

DURATION OF EVENT: 20 hours

ESTIMATE OF RAINFALL EVENT: 2 inches

TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.) 10 days

ESTIMATE OF TOTAL VOLUME DISCHARGED: 40,500 gallons

By signature below, I certify that I have read and understand the conditions of the certification on the DMR form and described in further detail in Part III.B.9 of the general storm water permit. Furthermore, I believe that the information submitted in these additional monitoring requirements meets all conditions of such certification.

David Calvert

Printed Name of Official

David Calvert

Signature

8/31/12

Date

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Environmental Services Company
13715 W. Markham - 72211
P.O. Box 55146
Little Rock, AR 72115
(501) 291-2665
DMR No. 2040-0004
ZIP CODE: 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
LOCATION: 9201 FAULKNER LAKE ROAD
NORTH LITTLE ROCK, AR 72117
ATTN: JON HARRISON, GENERAL MANAGER

AR0051454
PERMIT NUMBER

005-S
DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2012	12/31/2012

FROM

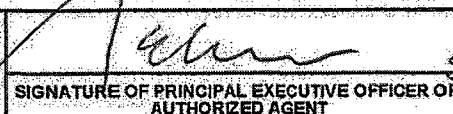
TO

MINOR

005 SEMI-ANNUAL STORMWATER
External Outfall

No Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX.	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen demand, chem. (low level) (COD) 00335 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	28.0	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
pH 00400 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	8.2	*****	8.2	SU	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	8 MINIMUM	*****	9 MAXIMUM	SU		Once Every 6 Months	GRAB
Solids, total suspended 00530 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	20.0	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
Oil & grease 00566 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 1/4	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER RICHARD BARCH TYPED OR PRINTED	I certify under penalty of law that this document and all statements 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 fines and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			501 228 2740	01/14/2013
			AREA Code	NUMBER
				MM/DD/YYYY

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

SEMI-ANNUAL REPORTING (JAN-JUN) (JUL-DEC) 69-01529

Environmental Services Company, Inc.

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: 1208010492
 Customer Name : CATERPILLAR, INC. - OUTFALL 005
 Customer Number : 2685
 Report Date : 09/13/12

Sample Date : 08/31/12
 Sample Time : 1022
 Sample Type : GRAB STORMWATER
 Sample From : OUTFALL 005

Collected By: DWC
 Delivery By : DWC
 Work Order :
 Purchase Order :

Laboratory Analysis

<u>Analysis</u>							<u>Quality Assurance</u>		
<u>Date</u>	<u>Time</u>	<u>By</u>	<u>Parameter</u>	<u>Result</u>	<u>Notes</u>	<u>Quantity</u>	<u>Method</u>	<u>Precision</u>	<u>Accuracy</u>
								<u>% RPD</u>	<u>% Recovery</u>
09/06	0815	DWC	Chemical Oxygen Demand, L	28.00 mg/L			EPA 410.4	5.62	101.0 *
09/04	0730	NTR	Oil & Grease, Total	< 1.400 mg/L			EPA 1664 A	2.17	96.0 *
08/31	1024	DWC	pH	8.2 S.U.			SM 18 4500 H+B	0.00	N/A *
09/04	1410	DWC	Solids, Total Suspended	20.00 mg/L			SM 18th 2540 D	10.53	N/A *

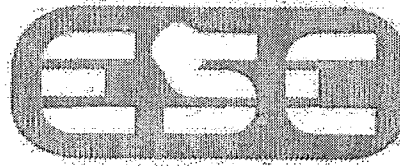
* QA data shown is from a different sample or standard on the same date.

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.

Signature _____

Red 2 Day
 Environmental Services Co., Inc.

Environmental 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

Phone: 501-221-2565 Fax: 501-221-1341

CHAIN OF CUSTODY

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

Client Information				Project Information							Requested Parameters								
Company Name: Caterpillar, Inc.				Permit/Project #:							Oil & grease (21.)	pH(23), TSS(28.)	LR COD(60)						
Address: 9201 Faulkner Lake Road				Purchase Order #:															
North Little Rock, AR 72117				Work Order #:															
Telephone: 501-955-5240				Sampler Name(s): <i>Dad Callant</i>															
FAX: stephens_katina@cat.com				and Signature(s): <i>Dad Callant</i>															
Contact: Ms. Katina Stephens																			
ESC Client Number: 2685																			
Sample Identification		Sample Collection				Sample Containers													
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#										
Outfall 005	1208010492	8/3/12	1022	Grab	Stormwater	Glass	1 Liter	H2SO4	1	X									
	1	1	1	Grab	Stormwater	Plastic	1 Liter	≤ 6 Deg C	1		X								
				Grab	Stormwater	Plastic	1 Liter	H2SO4	1			X							
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)			Date	Time	Custody Seals:										
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)			Date	Time	Used? <input type="checkbox"/> Intact? <input type="checkbox"/>										
Relinquished By: (Signature and Printed Name)		Date	Time	Received for Lab By: (Signature and Printed Name)			Date	Time	Turnaround:										
<i>Dad Callant Dad Callant</i>		8/3/12	1300	<i>Dad Callant Dad Callant</i>			8/3/12	1300	Regular <input checked="" type="checkbox"/> Special <input type="checkbox"/>										
Cool all samples to ≤ 5 degrees C with ice.										Were samples properly preserved:									
										Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>									
Comments:						Flow Data	Field Test	Time	Analyst	Result	Result	Units							
						Analyst:	pH:	1024	TWC	8.2	8.2	5.6							
						Time:													
						Reading:													
						Units:													
						Chlorinated? Y N	Fecal Start:						This Document is Page 1 of 1						

STORM WATER GENERAL PERMIT
ADDITIONAL MONITORING REQUIREMENTS

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

Caterpillar 8-492

OUTFALL NUMBER 005

DATE OF STORM EVENT SAMPLED: 8/31/12

DURATION OF EVENT: 20 hours

ESTIMATE OF RAINFALL EVENT: 2 inches

TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.) 10 days

ESTIMATE OF TOTAL VOLUME DISCHARGED: 20,400 gallons

By signature below, I certify that I have read and understand the conditions of the certification on the DMR form and described in further detail in Part III.B.9 of the general storm water permit. Furthermore, I believe that the information submitted in these additional monitoring requirements meets all conditions of such certification.

David Callant
Printed Name of Official

David Callant
Signature

8/31/12
Date

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Environmental Services Company
13715 W. Markham - 72211
P.O. Box 55146
Little Rock, AR 72115
(501) 221-2565
DMR Mailing ZIP CODE: 72117
MINOR

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, GENERAL MANAGER

AR0051454	006-S
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
FROM 07/01/2012	TO 12/31/2012

006-SEMI-ANNUAL STORMWATER
External Outfall

No Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen demand, chem. (low level) (COD) 00335 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	25.4	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
pH 00400 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	7.7	*****	7.7	SU	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	6 MINIMUM	*****	9 MAXIMUM	SU		Once Every 6 Months	GRAB
Solids, total suspended 00530 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	57.0	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
Oil & grease 00556 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<1.4	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	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 under my direction or supervision in accordance with a system designed to assure that qualified persons 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 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 providing false data.	TELEPHONE	DATE
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code

RICHARD BARCH
501 228-2740
01/14/2013

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

SEMI-ANNUAL REPORTING (JAN-JUN) (JUL-DEC) 60-01529

Environmental Services Company, Inc.

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: 1208010493
 Customer Name : CATERPILLAR, INC. - OUTFALL 006
 Customer Number : 2686
 Report Date : 09/13/12

Sample Date : 08/31/12
 Sample Time : 1032
 Sample Type : GRAB STORMWATER
 Sample From : OUTFALL 006

Collected By: DWC
 Delivery By : DWC
 Work Order :
 Purchase Order :

Laboratory Analysis

Analysis							Quality Assurance		
Date	Time	By	Parameter	Result	Notes	Quantity	Method	Precision	Accuracy
								% RPD	% Recovery
09/06	0815	DWC	Chemical Oxygen Demand, L	25.40 mg/L			EPA 410.4	5.62	101.0 *
09/04	0730	NTR	Oil & Grease, Total	< 1.400 mg/L			EPA 1664 A	2.17	96.0 *
08/31	1035	DWC	pH	7.7 S.U.			SM 18 4500 H+B	0.00	N/A *
09/04	1410	DWC	Solids, Total Suspended	57.00 mg/L			SM 18th 2540 D	10.53	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.

Signature _____


 Environmental Services Co., Inc.

STORM WATER GENERAL PERMIT
ADDITIONAL MONITORING REQUIREMENTS

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

Category 1/2 8-493

OUTFALL NUMBER 006

DATE OF STORM EVENT SAMPLED: 8/31/12

DURATION OF EVENT: 20 hours

ESTIMATE OF RAINFALL EVENT: 2 inches

TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.) 10 days

ESTIMATE OF TOTAL VOLUME DISCHARGED: 680,000 gallons

By signature below, I certify that I have read and understand the conditions of the certification on the DMR form and described in further detail in Part III.B.9 of the general storm water permit. Furthermore, I believe that the information submitted in these additional monitoring requirements meets all conditions of such certification.

David Collett
Printed Name of Official

David Collett
Signature

8/31/12
Date

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Environmental Services Co. m Approved
13715 W. Markham - 72211 USEPA 2040-0004
P.O. Box 55148
Little Rock, AR 72115
(501) 221-2565
DMR MAILING ZIP CODE: 72117
MINOR

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, GENERAL MANAGER

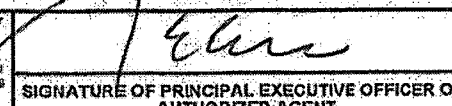
AR0051454	007-S
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
FROM 07/01/2012	TO 12/31/2012

007-SEMI-ANNUAL STORMWATER
External Outfall

No Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen demand, chem. (low level) (COD) 00335 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	44.9	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
pH 00400 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	7.3	*****	7.3	SU	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	8 MINIMUM	*****	9 MAXIMUM	SU		Once Every 6 Months	GRAB
Solids, total suspended 00530 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	8.0	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
Oil & grease 00556 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<1.4	mg/L	0	1/6M	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER RICHARD BARCH TYPED OR PRINTED	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 ensure 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.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE		DATE
			AREA Code	NUMBER	MM/DD/YYYY
			501-228-2140	1/30/2013	

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

REGULATORY REPORTING (JAN-JUN) (JUL-DEC) 60-01529

Environmental Services Company, Inc.

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: 1208010494
 Customer Name : CATERPILLAR, INC. - OUTFALL 007
 Customer Number : 2687
 Report Date : 09/13/12

Sample Date : 08/31/12
 Sample Time : 1035
 Sample Type : GRAB STORMWATER
 Sample From : OUTFALL 007

Collected By: DWC
 Delivery By : DWC
 Work Order :
 Purchase Order :

Laboratory Analysis

Analysis			Result	Notes	Quantity	Method
Date	Time	By	Parameter			
09/06	0815	DWC	Chemical Oxygen Demand, L	44.90 mg/L		EPA 410.4
09/04	0730	NTR	Oil & Grease, Total	< 1.400 mg/L		EPA 1664 A
08/31	1037	DWC	pH	7.3 S.U.		SM 18 4500 H+B
09/04	1410	DWC	Solids, Total Suspended	8.00 mg/L		SM 18th 2540 D

Quality Assurance

Precision % RPD	Accuracy % Recovery
5.62	101.0
2.17	96.0 *
1.38	N/A
10.53	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.

Signature _____

Neil R. King
 Environmental Services Co., Inc.

STORM WATER GENERAL PERMIT
ADDITIONAL MONITORING REQUIREMENTS

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

Caterpillar 8-494

OUTFALL NUMBER 007

DATE OF STORM EVENT SAMPLED: 8/31/12

DURATION OF EVENT: 20 hours

ESTIMATE OF RAINFALL EVENT: 2 inches

TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.) 10 days

ESTIMATE OF TOTAL VOLUME DISCHARGED: 682,000 gallons

By signature below, I certify that I have read and understand the conditions of the certification on the DMR form and described in further detail in Part III.B.9 of the general storm water permit. Furthermore, I believe that the information submitted in these additional monitoring requirements meets all conditions of such certification.

David Calvert
Printed Name of Official

David Calvert
Signature

8/31/12
Date

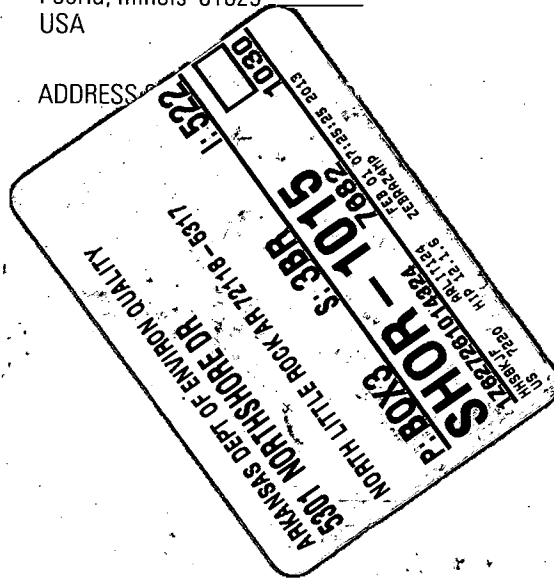
CATERPILLAR®

100 NE Adams Street
Peoria, Illinois 61629-
USA

6485

Caterpillar Inc.

ADDRESS



CATERPILLAR®

100 NE Adams Street
Peoria, Illinois 61629
USA

Caterpillar Inc.

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

Shipper's Name:

Jodi Belt

Shipper's Maildrop:

AB6485

Box _____ of _____

CORPORATE MAIL CENTER
(309) 675-6772
CATERPILLAR
100 NE ADAMS ST
PEORIA IL 61629-0002

1 LBS 1 OF 1

SHIP TO:
(309) 494-2603
ARKANSAS DEPT OF ENVIRON QUALITY
5301 NORTHSORE DR
NORTH LITTLE ROCK AR 72118-5317

AR 722 9-21

UPS NEXT DAY AIR 1

TRACKING #: 1Z 627 261 01 4324 7682

BILLING: P/P

REF 1:01J0987704802601

WS 16.0.23 36.0A 01/2013

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