CATERPILLAR

Caterpillar Inc. North Little Rock Facility 9201 Faulkner Lake Road North Little Rock, AR 72117

May 21, 2013

Permits Enforcement Branch Water Division Arkansas Department of Environmental Quality 5301 Northshore Drive North Little Rock, AR 72118-5317

NPDES Enforcement Branch:

The following report contains our January-July 2013 DMR for NPDES Permit number AR0051454. The oil & grease benchmark parameters exceeded at stormwater outfall numbers 001 and 004 on 4/18/13. An investigation and SWPPP review was conducted, as required by the permit. Outfalls 001 and 004 were resampled during a storm event on 5/10/13 and were within the benchmark parameter values. The exact cause of the exceedance was undetermined, but BMPs have been put in place. The investigation report will be included with the annual comprehensive report.

If you have any questions, please do not hesitate to contact me.

Kind regards,

Justin R Ganschow, CHMM

Environment, Health & Safety Supervisor

North Little Rock

Earthmoving Division

Caterpillar Inc.

Ganschow_Justin_R@cat.com

Desk 501.228.2764

Cell 309.297.0032

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, GENERAL MANAGER

AR0051454 PERMIT NUMBER

001-S DISCHARGE NUMBER

	MONITORING PERIOD										
	MM/DD/YYYY		MM/DD/YYYY								
FROM	01/01/2013	то	06/30/2013								

DMR Mailing ZIP CODE:

72117

MINOR

001-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

PARAMETER	L	QUANT	TITY OR LOADING	3	QUALITY OR CONCENTRATION					FREQUENCY OF ANALYSIS	SAMPLE TYPE
	·	VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen demand, chem. (low level) (COD)	SAMPLE MEASUREMENT	****	*****	*****	****	*****	16.00	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	*****	****	*****	7.6	*****	7.6	SU	0	1/6M	GRAB
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	教物收拾物业	***	*****	6 MINIMUM	*****	9 MAXIMUM	SU		Once Every 6 Months	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	*****	****	*****	*****	*****	5.0	mg/L	0	1/6M	GRAB
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	**************************************	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
Oil & grease	SAMPLE MEASUREMENT	****	*****	*****	*****	*****	80.0	mg/L	0	1/6M	GRAB
00556 1 0 Effluent Gross	PERMIT REQUIREMENT	****	****	*****	*****	****	Reg. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB

Justin Garschow EHS Manager 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 ma swave that there are significant penalties for submitting false information, including the pessibility of fine and imprisonment for knowing

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE 501-228-2764 5-22-2013 AREA Code NUMBER MM/DD/YYYY

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

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: 1304010611

Customer Name : CATERPILLAR, INC. - OUTFALL 001

Sample Date : 04/18/13 Sample Time : 1403

Collected By: DWC

Customer/Permit No.: 2681 / AR0051454

Delivery By : DWC

Sample Type : GRAB STORMWATER

Work Order :

Report Date : 04/29/13

Sample From : OUTFALL 001

Purchase Order :

3 3	Quality A					
Analysis					Precision	Accuracy
<u>Date Time By</u>	<u> Parameter</u>		Notes - Ouantity	Method	% RPD	<pre>% Recovery</pre>
	Chemical Oxygen Demand, L	16.00 mg/L		EPA 410.4	6.56	86.9 *
	Oil & Grease, Total	80.000 mg/L		EPA 1664 A	5.97	99.0 *
04/18 1404 DWC	рН	7.6 S.U.		SM 18 4500 H+B	0.00	N/A
04/19 1310 ACF	Solids, Total Suspended	5.00 mg/L		SM 18th 2540 D	0.00	N/A *
04/18 1404 DWC	Temperature	10.10 °C		SM 18th 2550 B	0.99	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.

Signature

Environmental Service's Co., Inc.

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

Exprimental Services Company, Inc. Corporate Office

13715 West Markham Little Rock, AR 72211 P.O. Box 55146

Little Rock, AR 72215

website: www.esclabs.com

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



Environmental Services Cor Northwest Branch 1107 Century Springdale, AR 72764

CHAIN OF CUSTODY

	Client Information				Pro	ject Info	ormation	-		T	Rec	ues	ted	Par	ame	eter	s
Company Name: Address:	Caterpillar, Inc. 9201 Faulkner Lak	e Road	•	Permit/Pro	-		·										
	North Little Rock, A	R 72117		Work Orde				13.11	·	-							
Telephone:	501-955-5240 stephens katina@	cat com		Sampler N	ame(s):		and	Callon	w/	-							
Contact:	Ms. Katina Stepher			and Signat	ture(s):	A)-a (allul		(21.)							
ESC Client Numbe	r: 2681		•							grease	<u>_</u>	LR(6.0)					ŀ
Sample	Identification		Sample	Collection			Sample (Containers	;	& gre	TSS(28.),	J.R.					
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preserva	tive #		TSS	COD					
Outfall 001	1304010611	4/18/13	1403	Grab	Stormwater	Glass	1 Liter	Cool ≤ 6° C, H2SO4 to pH <2	1	х							
		1	1	Grab	Stormwater	Plastic	1 Liter	Cool ≤ 6° C	1		X						
		/	/	Grab	Stormwater	Plastic	1 Liter	Cool ≤ 6° C, H2SO4 to pH <2	1			X					
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Relinquished By: (Signature ar	nd Printed Name)	Date	Time	Received By: (Si	gnature and Printed	l Name)		Date	Time	Turi	naroun Jular		1 1	Spe		 	 1
Relinquished By: (Signature ar		Date 4/18/13	Time /600	Received for Lab	By: (Signature and		Mut	Date 4/18/13	Time /6 0c	We		ples pr	roperty	•]
~				(Flow Da	ata	Field Test		Analyst	Re		Res			Unit	s	<u> </u>
Comments:		<u> </u>			Analyst: Time:		pH: feus	1404	1263		26		60,Z	S.U	J. 'C		
Field Service Hours:			<u> </u>		Reading:	<u> </u>	7EU S	7,70-7	1200	1	41'	1	<u>, </u>	 	<u>ب</u>		
					Units:												
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STORM WATER GENERAL PERMIT ADDITIONAL MONITORING REQUIREMENTS

	OUTFALL NUMBER	è/	-611
DATE OF STORM EVENT SAMPLED:		4/18/13	
DURATION OF EVENT:		/ hours	
ESTIMATE OF RAINFALL EVENT:	÷		
TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.)	≤ days	
ESTIMATE OF TOTAL VOLUME DISCHARG	GED:	.0010 gallons	<u> </u>
By signature below, I certify that I have of the certification on the DMR form and III.B.9 of the general storm water permit information submitted in these additional conditions of such certification. Dord Carllow!	described in further. Furthermore, I l	er detail in Part Delieve that the	
Printed Name of Official			
Signature	-	· .	
<u> </u>	-		

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, GENERAL MANAGER

AR0051454 PERMIT NUMBER

FROM

002-S DISCHARGE NUMBER

MONIT	ORING	PERIOD
MM/DD/YYYY		MM/DD/YYYY
01/01/2013	то	06/30/2013

DMR Mailing ZIP CODE:

72117

MINOR

002-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

PARAMETER		QUAN	QUANTITY OR LOADING			UALITY OR CONC	ENTRATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS				
Oxygen demand, chem. (low level) (COD)	SAMPLE MEASUREMENT	****	物油水水水	*****	*****	*****	29.60	mg/L	0	1/6M	GRAB .	
00335 1 0 Effluent Gross	PERMIT REQUIREMENT	****	*****	****	******	*****	Reg. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB	
рН	SAMPLE MEASUREMENT	****	*****	****	7.5	****	7.5	su	0	1/6M	GRAB	
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	****	****	*****	6 MINIMUM	****	9 MAXIMUM	SU		Once Every 6 Months	GRAB	
Solids, total suspended	SAMPLE MEASUREMENT	*****	****	*****	*****	****	< 1.0	mg/L	0	1/6M	GRAB	
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	****	****	*****	*****	****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB	
Oil & grease	SAMPLE MEASUREMENT	****	非对非主 业	****	****	****	8.80	mg/L	0	1/6M	GRAB	
00556 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	****	*****	Req. Mon. DAILY MX	mg/L.		Once Every 6 Months	GRAB	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Ganschow EHS M 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 property 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 5-22-2013 AREA Code NUMBER MM/DD/YYYY

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

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: 1304010612

Customer Name : CATERPILLAR, INC. - OUTFALL 002

Sample Date : 04/18/13 Sample Time: 1412

Collected By: DWC Delivery By : DWC

Customer Number: 2682

Sample Type : GRAB STORMWATER

Work Order :

Report Date : 04/29/13

Sample From : OUTFALL 002

Purchase Order :

	Quality A	ssurance					
Analysis				•		Precision	Accuracy
<u>Date Time By</u>	<u>Parameter</u>	Result	Notes _	Ouantity	Method	% RPD	% Recovery
	Chemical Oxygen Demand, L	29.60 mg/L			EPA 410.4	6.56	86.9 *
04/25 1500 ACF	Oil & Grease, Total	8.800 mg/L			EPA 1664 A	5.97	99.0 *
04/18 1413 DWC	рН	7.5 S.U.			SM 18 4500 H+B	0.00	N/A *
04/19 1310 ACF	Solids, Total Suspended	< 1.00 mg/L			SM 18th 2540 D	0.00	N/A *
04/18 1413 DWC	Temperature	10.00 °C			SM 18th 2550 B	0.99	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

Services Co., Inc.

Enternmental Services Company, Inc. Corporate Office

13715 West Markham

P.O. Box 55146

Little Rock, AR 72211 Little Rock, AR 72215

website: www.esclabs.com

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



Environmental Services Con Northwest Branch 1107 Century Springdale, AR 72764

CHAIN OF CUSTODY

	Client Information]	Pro	ject Inf	ormation			Т	R	equ	iest	ed	Par	ame	eters	
Company Name:	Caterpillar, Inc.			Permit/Pro	ject #:							Ť	T					
Address:	9201 Faulkner Lak	e Road		Purchase	Order #:													
	North Little Rock, A	AR 72117	-	Work Orde	er#			·••								, !		
Telephone:	501-955-5240			Sampler N	lame(s):		Paurel	(a)	1001	ヿ								
FAX:	stephens katina@	cat.com			. ,													
Contact:	Ms. Katina Stephe	ns		and Signat	ture(s):		1201	(all	A	$\exists i$	(21.)							
ESC Client Number:	2682			1	()	C		2000		ᅰ`	g		(0.9)	-				
Sample Id	dentification		Sample	Collection			Sample	Containers		┪	grease	(87)	COD(6.0)					
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	1			8 2		품					
Outfall 002	1304010612	4/18/13	1412	Grab	Stormwater	Glass	1 Liter	Cool ≤ 6° C, H2SO4 to pH <2		一	x		\neg					
	/	1	/	Grab	Stormwater	Plastic	1 Liter	Cool ≤ 6° C	;	1		\mathbf{x}^{\dagger}	寸					
	/	/	/	Grab	Stormwater	Plastic	1 Liter	Cool ≤ 6° C, H2SO4 to pH <2		1			x					
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Relinquisped by: (Signature and P		Date 4/18/13	Time /600	Received for Lab	By: (Signature and	Printed Name		Date 4/18/1=	Time		Vere s Y	-	es pro	perly	prese	erved: No		1
(W	-(Flow Da		Field Test	Time	Analys		Result	_	Resu	it		Unit	s	<u> </u>
Comments:					Analyst:		pH:	1413	DWG	2	7	T	7-	Ö	S.U			
Field One death laws					Time:		Temp.	1413	DWG	<u> </u>	10.0	2	10.	0	0	<u> </u>		
Field Service Hours:		110	•	.	Reading: Units:			<u> </u>		+		\dashv						
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STORM WATER GENERAL PERMIT ADDITIONAL MONITORING REQUIREMENTS

	OUTFALL NUMBER 2 - 6	12
DATE OF STORM EVENT SAMPLED:	4/18/13	
DURATION OF EVENT:	4 hours	
ESTIMATE OF RAINFALL EVENT:	/ inches	
TIME SINCE LAST MEASURABLE EVENT	(i.e., > 0.1 in.) <u> </u>	
ESTIMATE OF TOTAL VOLUME DISCHAR	GED: 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. Dand Carlow Printed Name of Official	described in further detail in Part t. Furthermore, I believe that the	
Signature	-	
Signature		
4/18/13		
Date		

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, GENERAL MANAGER

AR0051454 PERMIT NUMBER

003-S DISCHARGE NUMBER

	MONITORING PERIOD												
•	MM/DD/YYYY		MM/DD/YYYY										
FROM	01/01/2013	то	06/30/2013										

DMR Mailing ZIP CODE:

72117

MINOR

003-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

PARAMETER	1 1 1	QUANT	TITY OR LOADING	3	QI	JALITY OR CON	CENTRATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
•	ŀΓ	VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen demand, chem. (low level) (COD)	SAMPLE MEASUREMENT	****	****	*****	****	* ****	26.80	mg/L	0	1/6M	GRAB
00335 1 0 Effluent Gross	PERMIT REQUIREMENT	****	****	*****	****	****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
Н	SAMPLE MEASUREMENT	*****	****	*****	7.8	****	7.8	SU	0	1/6M	GRAB
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	****	*****	6 MINIMUM	****	9 MAXIMUM	SU		Once Every 6 Months	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	****	*****	*****	*****	***	19.0	mg/L	0	1/6M	GRAB
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	****	*****	*****	****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
Oil & grease	SAMPLE MEASUREMENT	****	****	*****	*****	****	7.2	mg/L	0	1/6M	GRAB
00556 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	****	*****	****	****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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 inquisy of the person or persons who meange 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 pessibility of fine and imprisonment for knowing

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

TELEPHONE DATE 501-228-2764 5-22-2017 AREA Code NUMBER MM/DD/YYYY

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

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: 1304010613

Customer Name : CATERPILLAR, INC. - OUTFALL 003

Sample Date : 04/18/13 Sample Time : 1420

Collected By: DWC Delivery By : DWC

Customer Number: 2683

Sample Type : GRAB STORMWATER

Work Order :

Report Date : 04/29/13

Sample From : OUTFALL 003

Purchase Order :

		<u>Laboratory Analysis</u>		Quality 1	<u>Assurance</u>
Analysis				Precision	Accuracy
<u>Date Time By</u>	Parameter	<u>Result</u> <u>Notes</u>	Ouantity Method	% RPD	% Recovery
	Chemical Oxygen Demand, L	26.80 mg/L	EPA 410.4	6.56	86.9 *
04/25 1500 ACF	Oil & Grease, Total	7.200 mg/L	EPA 1664 A	5.97	99.0 *
04/18 1422 DWC		7.8 S.U.	SM 18 4500 H+B	0.00	N/A *
04/19 1310 ACF	Solids, Total Suspended	19.00 mg/L	SM 18th 2540 D	0.00	N/A *
04/18 1422 DWC	Temperature	10.30 °C	SM 18th 2550 B	0.99	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.

Signature

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

Econmental Services Company, Inc. Corporate Office

13715 West Markham

P.O. Box 55146

Little Rock, AR 72211

Little Rock, AR 72215

website: www.esclabs.com

Phone: 501-221-2565

Fax: 501-221-1341



Environmental Services Cor Northwest Branch 1107 Century Springdale, AR 72764

CHAIN OF CUSTODY

	C	Client Information				Pro	ject Inf	ormation			Т	Re	ques	sted	Par	ame	eters	s
Company Nam	ne:	Caterpillar, Inc.			Permit/Pro	-						T	Ì	;				
Address: _	· · ·	9201 Faulkner Lak			Purchase						4							
		North Little Rock, A	AR 72117		Work Ord	er#					_		1					
Telephone: _	-	501-955-5240			Sampler N	lame(s):		Pand	Wille	<u> </u>								
FAX:		stephens_katina@	cat.com															
Contact:		Ms. Katina Stepher	ns		and Signa	ture(s):	R	Da a	Callus	1	[21.)							
ESC Client Nu	mber:	2683			1	. ,	7				Se (6.0)					
San	nple Iden	tification		Sample	Collection			Sample (Containers	3	grease	28.),	COD(6.0)				-	
Identifica	tion	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preserva	ative	# 8 8	TSS(28.),	LR.					
Outfall (003	1304010613	4/18/13	1420	Grab	Stormwater	Glass	1 Liter	Cool ≤ 6° C, H2SO4 to pH <2		1 X		\top					
			1		Grab	Stormwater	Plastic	1 Liter	Cool ≤ 6° C	;	1	X						
<u> </u>		(/	/	Grab	Stormwater	Plastic	1 Liter	Cool ≤ 6° C, H2SO4 to pH <2		1		X					
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Danse (alute and Printed	Name) Dand Callal	Date 4/18/15	Time / 600	Received for Lab	By: (Signature and	Printed Name	illas	Date 4/18/13	Time / 600		re sam Yes		roperly		erved: No		
					l Flow Data Field Test Time Analyst				Re	sult	Res	ult		Units	 ;			
Comments:					Analyst: pH: 1922 Dw(7.8			S.U						
Field Service Hour	s:	· · · · · · · · · · · · · · · · · · ·		•	· ·	Time: Reading:		Temp	1422	DW	<u>e /</u>	4.3	18	e Z	<i>a</i> (<u> </u>		
	-					Units:					+		\vdash		\vdash			
					* **			Fecal Start:			. Th	is Do	cume	nt is	Pag	<u>е ८</u> с	of	



STORM WATER GENERAL PERMIT ADDITIONAL MONITORING REQUIREMENTS

	OUTFALL NUMBE	R3	
DATE OF STORM EVENT SAMPLED:		4/18	113
DURATION OF EVENT:	. •	4	<u>hours</u>
ESTIMATE OF RAINFALL EVENT:		/	<u>inches</u>
TIME SINCE LAST MEASURABLE EVENT ((i.e., > 0.1 in.)	. 3	days
ESTIMATE OF TOTAL VOLUME DISCHARG	GED:	1040	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 permitinformation submitted in these additional conditions of such certification.	described in furth t. Furthermore, I	er detail in P believe that	art the
David Callows			
Printed Name of Official			
De Calut			
Signature	-		
4/18/13 Date	, 		

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, GENERAL MANAGER

AR0051454 PERMIT NUMBER

FROM

004-S DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY MM/DD/YYYY

01/01/2013 TO 06/30/2013

DMR Mailing ZIP CODE:

72117

MINOR

004-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

PARAMETER		QUAN1	TITY OR LOADING	3	Q	UALITY OR CON	CENTRATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	1 . 1	VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen demand, chem. (low level) (COD)	SAMPLE MEASUREMENT	****	****	*****	*****	*****	. 7.35	mg/L	0	1/6M	GRAB
00335 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
pH .	SAMPLE MEASUREMENT	*****	*****	*****	7.6	*****	7.6	SU	0	1/6M	GRAB
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	****	*****	*****	6 MINIMUM	我长女女女	9 MAXIMUM	SU		Once Every 6 Months	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	****	<1.0	mg/L	0	1/6M	GRAB
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	****	****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
Oil & grease	SAMPLE MEASUREMENT	****	*****	****	****	*****	1618.90	mg/L	1	1/6M	GRAB
00556 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	****	****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB

Justin Coaschow EAS Manager

TYPED OR PRINTED

I certify under penalty of haw 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 inquity of the person or persons who mange 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 complets. I ma waves 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

STU1-228-2764 S-22-2013

AREA COde NUMBER MM/DD/YYYY

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

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: 1304010614

Customer Name : CATERPILLAR, INC. - OUTFALL 004

Sample Date : 04/18/13 Sample Time : 1425

Collected By: DWC

Customer Number: 2684

Delivery By : DWC

Report Date : 04/29/13

Sample Type : GRAB STORMWATER Sample From : OUTFALL 004

Work Order : Purchase Order :

· .	<u>I</u>	aboratory Analysis			•	Quality A	ssurance
Analysis						Precision	Accuracy
<u>Date Time By</u>	<u> Parameter</u>	Result	Notes -	Ouantity	Method	% RPD	% Recovery
04/26 1600 DWC	Chemical Oxygen Demand, L	7.35 mg/L		<u>-</u>	EPA 410.4	6.56	86.9 *
04/25 1500 ACF	Oil & Grease, Total	1618.900 mg/L			EPA 1664 A	5.97	99.0 *
04/18 1427 DWC	рН	7.6 S.U.			SM 18 4500 H+B	0.00	N/A *
04/19 1310 ACF	Solids, Total Suspended	< 1.00 mg/L			SM 18th 2540 D	0.00	N/A
04/18 1427 DWC		10.00 °€			SM 18th 2550 B	0.99	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.

Signature

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

Empinental Services Company, Inc. Corporate Office

13715 West Markham

P.O. Box 55146

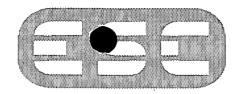
Little Rock, AR 72211

Little Rock, AR 72215

website: www.esclabs.com

Phone: 501-221-2565 Fa

Fax: 501-221-1341



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

CHAIN OF CUSTODY

Filone. 501-221-2505	Fax. 501-221-1541		<u> </u>							9 479-750-1170 Fax: 479-750-1172						
	Client Information				Pro	ject Info	ormation				Rec	uestec	l Paran	neters		
Company Name:	Caterpillar, Inc.			Permit/Pro	ject #:											
Address:	9201 Faulkner Lake	Road		Purchase (Order #:											
	North Little Rock, A	R 72117		Work Orde	er#					1						
Telephone:	501-955-5240			Sampler N	ame(s):		Darad	Carllo	u I	1						
FAX:	stephens katina@d	cat.com			.,		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			1						
Contact:	Ms. Katina Stepher	ıs	-14	and Signat	ture(s):		Andl	ant		[2]						
ESC Client Number:	2684			1	\-\	- 2		,		se ((0.9)				
Sample Id	entification		Sample	Collection	5		Sample Containers			grease	28.)	COD(6.0)				
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume			- ∞ ⊝	TSS(28.),	씸				
Outfall 004	1304010614	4/18/13	1425	Grab	Stormwater	Glass	1 Liter	Cool < 6° C, H2SO4 to pH <2	1	x			1			
,	/	,,,,,,	• /	Grab	Stormwater	Plastic	1 Liter	Cool ≤ 6° C	1		X					
	1	/	/	Grab	Stormwater	Plastic	1 Liter	Cool ≤ 6° C, H2SO4 to pH <2		T		x	1.			
						, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 2.1.0.					$\stackrel{\sim}{\vdash}$				
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10 hr							· .			H			+			
			<u> </u>									 	++			
Relinquished By: (Signature and Pri		Date	Time	Received By: (Si	gnature and Printed	Name)	<u> </u>	Date	Time	Custo	ody S	eals:	Intact?			
Relinquished By: (Signature and Pri	inted Name)	Date	Time	Received By: (Si	gnature and Printed	Name)		Date .	Time		aroun	d:	Special			
Relinquished By: (Signature and Pri	inted Name)	Date	Time	Received/for Lab By: (Signature and Printed Name) Date Time		Date Time		Date Time		Regu Were			rly preserve			
Dia Cent !	Dad Callet	4/18/13	1600	A-al	I Flow Da		illes	4/18/13	1600	D-1	Yes	ص ا	No			
Comments:	ents:				Analyst:	ala .	Field Test pH:	Time 1427	Analyst	Res		Result	S.U.	nits		
				`	Time:	•	Temp	1427	Dwe		0	10.0	°C			
Field Service Hours:					Reading: Units:		 			-		 	 			
			 		Office.	-	Fecal Start:			This	s Do	L cument i	is Page_	Cof C		



STORM WATER GENERAL PERMIT ADDITIONAL MONITORING REQUIREMENTS

	OUTFALL NUMBER	4 -61	4
DATE OF STORM EVENT SAMPLED:		4/18/13	
DURATION OF EVENT:	· -	4 hours	
ESTIMATE OF RAINFALL EVENT:	· -	/ inches	
TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.)	5 days	
ESTIMATE OF TOTAL VOLUME DISCHARG	GÉD: _	,0080 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 permit information submitted in these additional conditions of such certification.	described in further Furthermore, I be	detail in Part elieve that the	
David Calland			
Printed Name of Official			
Signature	-	٠.	
4 //8 //3 Date	_	. •	

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, GENERAL MANAGER

AR0051454 PERMIT NUMBER

FROM

005-S DISCHARGE NUMBER

MONITORING PERIOD											
MM/DD/YYYY		MM/DD/YYYY									
01/01/2013	то	06/30/2013									

DMR Mailing ZIP CODE:

72117

MINOR

005-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

PARAMETER		QUAN	TITY OR LOADING	3	Q	UALITY OR CON	CENTRATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen demand, chem. (low level) (COD)	SAMPLE MEASUREMENT	****	****	*****	****	*****	21.50	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	****	****	*****	7.6	****	7.6	su	0	1/6M	GRAB
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	****	*****	*****	6 MINIMUM	大声大声音音	9 MAXIMUM	SU		Once Every 6 Months	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	****	****	****	*****	*****	€1.0	mg/L	0	1/6M	GRAB
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	法杂款收收	*****	*****	*****	****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
Oil & grease	SAMPLE MEASUREMENT	****	****	****	****	****	3.2	mg/L	0	1/6M	GRAB
00556 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Justin Genschow EHS Manager 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 substitutions.

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

TELEPHONE DATE 501-228-2764 5-22-2013 AREA Code NUMBER MM/DD/YYYY

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

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: 1304010616

Customer Name : CATERPILLAR, INC. - OUTFALL 005

Sample Date : 04/18/13 Sample Time : 1432

Collected By: DWC Delivery By : DWC

Customer Number: 2685

Sample Type : GRAB STORMWATER

Work Order :

Report Date : 04/29/13

Sample From : OUTFALL 005

Purchase Order :

		Laboratory Analysis				Quality A	ssurance
Analysis						Precision	Accuracy
<u>Date Time By</u>	<u>Parameter</u>	Result	Notes _	Ouantity	<u> Method</u>	% RPD	% Recovery
	Chemical Oxygen Demand, L	21.50 mg/L			EPA 410.4	6.56	86.9 *
04/25 1500 ACF	Oil & Grease, Total	3.200 mg/L			EPA 1664 A	5.97	99.0 *
04/18 1434 DWC	рН	7.6 S.U.			SM 18 4500 H+B	0.00	N/A *
04/19 1310 ACF	Solids, Total Suspended	< 1.00 mg/L			SM 18th 2540 D	0.00	N/A *
04/18 1434 DWC	Temperature	10.30 °C			SM 18th 2550 B	0.99	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.

Signature

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

Empinmental Services Company, Inc. Corporate Office

13715 West Markham

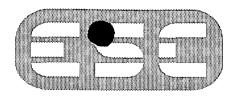
P.O. Box 55146

Little Rock, AR 72211 Li

Little Rock, AR 72215

website: www.esclabs.com

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



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

CHAIN OF CUSTODY

	Client Information				Pro	ject Inf	ormation					Reg	ues	ted	ed Parameters			s
Company Name: Address:	Caterpillar, Inc. 9201 Faulkner Lak	e Road		Permit/Pro	-													
,	North Little Rock, A			Work Orde						\neg								
Telephone:	501-955-5240			Sampler N	lame(s):		Pand	Carl	ert									
FAX:	stephens katina@	cat.com																
Contact:	Ms. Katina Stepher	าร	·	and Signa	ture(s):		Ind (Callut	?		(21.)							
ESC Client Number:	2685					40					Še		COD(6.0)					
Sample Id	lentification		Sample	Collection			Sample (Containers	S		& gre	TSS(28.),	8					
Identification	ESC Control #	Date	Time	Type Matrix Type Volume Preservative #				#	ë	TSS	씸							
Outfall 005	1304010645	4/18/13	1432	Grab Stormwater Glass 1 Liter Gool ≤ 6° C, H2SO4 to pH <2 1				X										
	616		/	Grab Stormwater Plastic 1 Liter Cool ≤ 6° C				1		Х								
	, .	/		Grab	Stormwater	Plastic	1 Liter	Cool ≤ 6° C, H2SO4 to pH <2		1			X					
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		Date	Time	Received by. (Si	gnature and Frinted	i Name)		Date	Time	1	Used	ody Se	iais.	1	Inta	ct?	_	1
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Relinquished By: (Signature and Pr	rinted Name) Pad (with)	Date 4/68/63	Time 1600		By: (Signature and			Date 4 / 18/13	Time			samp Yes	ples pr	operly		erved: No		1
1		7 7 - 7	7 4 20	Flow Data Field Test Time Analyst					Resu		Resu	ult	_	Units	 s	<u></u>		
Comments:		<u></u> .		Analyst: pH: 1484 DWG						ج) درا	-2	-6	S.U					
Field Service Hours:	· · · · · · · · · · · · · · · · · · ·				Time: Reading:		Tenys	1434	DW	<u>c</u>	10	2.3	10	<u>, Z</u>		<u> </u>		
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STORM WATER GENERAL PERMIT ADDITIONAL MONITORING REQUIREMENTS

	OUTFALL NUMBE	R 5 -616
DATE OF STORM EVENT SAMPLED:		4/18/13
DURATION OF EVENT:	•	/ hours
ESTIMATE OF RAINFALL EVENT:		inches
TIME SINCE LAST MEASURABLE EVENT	(i.e., > 0.1 in.)	5_days
ESTIMATE OF TOTAL VOLUME DISCHAR	GED:	
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 additiona conditions of such certification.	described in further. Furthermore, I	er detail in Part believe that the
Dand Callow		
Printed Name of Official		
Signature		
Signature	-	•
40 Le /12		
Date		·

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

CATERPILLAR, INC., NORTH AMERICAN MOTOR G

FACILITY:

LOCATION: 9201 FAULKNER LAKE ROAD

NORTH LITTLE ROCK, AR 72117

ATTN: JON HARRISON, GENERAL MANAGER

AR0051454 PERMIT NUMBER

FROM

006-S DISCHARGE NUMBER

MONITORING PERIOD MM/DD/YYYY MM/DD/YYYY то 01/01/2013 06/30/2013

DMR Mailing ZIP CODE:

72117

MINOR

006-SEMI-ANNUAL STORMWATER

External Outfall

No Discharge

PARAMETER		QUAN	TITY OR LOADING	G	Q	UALITY OR CON	CENTRATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	1		
Oxygen demand, chem. (low level) (COD)	SAMPLE MEASUREMENT	*****	***	****	*****	*****	24.0	mg/L	0	1/6M	GRAB
00335 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
pH	SAMPLE MEASUREMENT	****	****	****	7.3	***	7.3	SU	0 0	1/6M	GRAB
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6 MINIMUM	*****	9 MUMIXAM	SU		Once Every 6 Months	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	****	*****	*****	*****	****	44.00	mg/L	0	1/6M	GRAB
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
Oil & grease	SAMPLE MEASUREMENT	****	****	*****	*****	*****	2.5	mg/L	0	1/6M	GRAB
00556 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER _ EHS Manager 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 memage 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 disprisonment for knowing

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

TELEPHONE DATE 501-228-2764 5-22-2013 AREA Code NUMBER MM/DD/YYYY

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

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: 1304010615

Customer Name : CATERPILLAR, INC. - OUTFALL 006

Sample Date : 04/18/13 Collected By: DWC

Customer Number: 2686

Sample Time : 1438

Delivery By : DWC

Report Date : 04/29/13

Sample Type : GRAB STORMWATER Sample From : OUTFALL 006

Work Order : Purchase Order :

		Laboratory Analysis			Quality A	ssurance
Analysis					Precision	Accuracy
<u>Date Time By</u>	Parameter	Result	Notes <u>Ouantity</u>	Method	% RPD	% Recovery
		24.00 mg/L		EPA 410.4	6.56	86.9 *
04/25 1500 ACF	Oil & Grease, Total	2.500 mg/L		EPA 1664 A	5.97	99.0 *
04/18 1439 DWC	∸	7.3 S.U.		SM 18 4500 H+B	0.00	N/A *
04/19 1310 ACF	Solids, Total Suspended	44.00 mg/L		SM 18th 2540 D	0.00	N/A *
04/18 1439 DWC	Temperature	9.90 °℃		SM 18th 2550 B	0.99	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.

Signature

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

Emnmental Services Company, Inc. Corporate Office

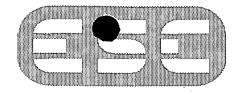
13715 West Markham

P.O. Box 55146

Little Rock, AR 72211 Little Rock, AR 72215

website: www.esclabs.com

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



Environmental Services Cor Northwest Branch 1107 Century Springdale, AR 72764

CHAIN OF CUSTODY

	Client Information				Pro	ject Info	ormation					Req	ues	ted	Par	ame	eter	<u>.</u>
Company Name:	Caterpillar, Inc.			Permit/Pro	ject #:											:		
Address:	9201 Faulkner Lake	Road		Purchase	Order #:											,		
	North Little Rock, A	R 72117		Work Orde	er#													
Telephone:	501-955-5240		· · · · · · · · · · · · · · · · · · ·	Sampler N			TZ: 1	Carlle	. /									
FAX:	stephens katina@c	rat com	······································		iamo(0).		zana.	(acoro		\dashv								
Contact:	Ms. Katina Stephen			and Signa	turo(c):	 	// /	1.1.	?		(21.)							l
ESC Client Number:	2686	15		and Signa	lure(5).		ra o	Lam			e (2		6					l
			Commis	Callaction		Comple Containers					grease	()	COD(6.0)					ļ
 	lentification			Collection			T	le Containers			8	TSS(28.),						}
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preserva	tive	#		12	꿈	<u> </u>	<u> </u>		<u> </u>	
Outfall 006	1304010615	4/18/17	1438	Grab	Stormwater	Glass	1 Liter	H2SO4 to pH <2 1			X	_	<u> </u>	<u> </u>		<u> </u>	<u> </u>	ļ
	/	•)		Grab Stormwater Plastic 1 Li				Cool ≤ 6° C	;	1		Х						
	/		-	Grab Stormwater Plastic 1			1 Liter	Cool ≤ 6° C, H2SO4 to pH <2		1			X					
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Relinquished By: (Signature and Pi	rinted Name)	Date	Time	Received By: (Si	gnature and Printed	Name)	1	Date	Tim	е	Custo	ody S∈	eals:					
		_									Used		P	<u> </u>	Inta	ct?		
Relinquished By: (Signature and Pr	rinted Name)	Date	Time	Received By: (Si	gnature and Printed	l Name)		Date	Tim		Turna Regu	around	d: 5-	1	Spe	cial	$\overline{}$	1
Relinquished By: (Signature and Pr	rinted Name) Carllut	Date 4/18/13	Time / 600		By: (Signature and	Printed Nam	e) the	Date 4/18/13	Tim	е	Were				y prese			
C				<u> </u>	Flow Da		Field Test	Time	Analys	st	Resu	ult	Resi	ult		Unit	s	
Comments:							рН:	1439	Du	$\overline{}$		3		23		5.4	<u>. </u>	
Field Service Houirs:					Time: Temp 1434			Du	<u>,c</u>	e <i>9.5</i>		10	.0	 	<u>C</u>			
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STORM WATER GENERAL PERMIT ADDITIONAL MONITORING REQUIREMENTS

	OUTFALL NUMBER_	6 -615
DATE OF STORM EVENT SAMPLED:	-	4/18/13
DURATION OF EVENT:	· · · · · · · · · · · · · · · · · · ·	hours</td
ESTIMATE OF RAINFALL EVENT:		/ inches
TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.) _	⊙ days
ESTIMATE OF TOTAL VOLUME DISCHARO	GED: _	,0213 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 permit information submitted in these additional conditions of such certification. David Callow	described in further. Furthermore, I be	detail in Part lieve that the
Printed Name of Official	- ·	
La Caral Signature	· · · · · · · · · · · · · · · · · · ·	· .
4/18/13	•	
Date	·	

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, GENERAL MANAGER

AR0051454 PERMIT NUMBER

FROM

007-S **DISCHARGE NUMBER**

MONITORING PERIOD											
MM/DD/YYYY		MM/DD/YYYY									
01/01/2013] то	06/30/2013									

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	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	1		
Oxygen demand, chem. (low level) (COD)	SAMPLE MEASUREMENT	****	****	*****	****	*****	61.40	mg/L	0	1/6M	GRAB
00335 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	****	****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
pH	SAMPLE MEASUREMENT	*****	****	****	7.4	*****	7.4	mg/L	0	1/6M	GRAB
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	****	*****	6 MINIMUM	****	9 MAXIMUM	SU		Once Every 6 Months	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	****	****	*****	*****	*****	11.00	mg/L	0	1/6M	GRAB
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	****	*****	*****	****	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB
Oil & grease	SAMPLE MEASUREMENT	*****	****	*****	****	*****	6.80	mg/L	0 .	1/6M	GRAB
00556 1 0 Effluent Gross	PERMIT REQUIREMENT	****	*****	*****	在宋本文文章	*****	Req. Mon. DAILY MX	mg/L		Once Every 6 Months	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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 property 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 501-228-2764 5-22-2013 AREA Code NUMBER MM/DD/YYYY

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

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: 1304010617

Customer Name : CATERPILLAR, INC. - OUTFALL 007

Customer Number : 2687 Report Date : 04/29/13 Sample Date : 04/18/13 Sample Time : 1448

Sample Type : GRAB STORMWATER Sample From : OUTFALL 007 Collected By: DWC Delivery By: DWC

Work Order : Purchase Order :

	<u>Li</u>	aboratory Analysis			· · · · · · · · · · · · · · · · · · ·	Quality A	Assurance
Analysis						Precision	Accuracy
<u>Date Time By</u>	Parameter	Result	Notes _	Ouantity	Method	% RPD	% Recovery
	Chemical Oxygen Demand, L	61.40 mg/L			EPA 410.4	6.56	86.9 *
04/25 1500 ACF	Oil & Grease, Total	6.800 mg/L			EPA 1664 A	5.97	99.0 *
04/18 1451 DWC	рН	7.4 S.U.			SM 18 4500 H+B	0.00	N/A *
04/19 1310 ACF	Solids, Total Suspended	11.00 mg/L		•	SM 18th 2540 D	0.00	N/A *
04/18 1451 DWC	Temperature	9.90 °℃			SM 18th 2550 B	0.99	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.

Signature

Environmental Services Co., Inc.

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

nmental Services Company, Inc.
Corporate Office

13715 West Markham

P.O. Box 55146

Little Rock, AR 72211

Little Rock, AR 72215

website: www.esclabs.com

Phone: 501-221-2565

Fax: 501-221-1341



Environmental Services Cor Northwest Branch 1107 Century Springdale, AR 72764

CHAIN OF CUSTODY

	Client Information					Project Information								Requested Parameters								
				· .	Pro	ject Info	ormation			∤-	F	₹eq	<u>ues</u> f	ted	Para	ame	ters	<u>; </u>				
Company Name:	Caterpillar, Inc.			Permit/Pro	ject #:							1				ł						
Address:	9201 Faulkner Lak	e Road		Purchase	Order #:					.		l										
	North Little Rock, A	R 72117		Work Orde	er#							l										
Telephone:	501-955-5240		· •	Sampler N	ame(s):		David Callan															
FAX:	stephens katina@	cat.com					yana (will					- 1				.						
Contact:	Ms. Katina Stepher	ns		and Signat	:ure(s):		//_d	Call		\exists	(2)											
ESC Client Number:	2687			1				l m					69									
Sample Id	lentification		Sample	Collection			Sample Containers				greas	28.),	COD(6.0)									
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume			# 8	ğ 5		LR O			l						
Outfall 007	1304010617	4/18/13	1448	1	Grab Stormwater Glas			Cool < 6° C, H2SO4 to pH <2			x											
	,	/ /	1	Grab	1 Liter 1 Liter	Cool ≤ 6° C 1				х						\exists						
		/	/	Grab Stormwater Plastic Grab Stormwater Plastic			1 Liter	Cool ≤ 6° C, H2SO4 to pH <2			7		х	$\neg \uparrow$				\neg				
				- Ciub	Otomiwater	Tiastic	1 Liter	712504 to pi1 42		╁	\dashv		\cap									
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Relinquished By: (Signature and Pr	rinted Name) Pad Callat	Date 4/18/13	Time / 6@0	Received for Lab	By: (Signature and	Printed Name	Max	Date 4/18/13	Time	e V	Vere		oles pro	operly	prese							
C				C	Flow Da	ita	Field Test	Time	Analys	st F	esu	lt	Resu	ılt		Units						
Comments:			-		Analyst:		pH:	1451	Dar						7.1		7.		S.U.			
Field Service Hours:					Time: Reading:		Temp	1451	DW	C	9.	7	9.	9	e C							
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STORM WATER GENERAL PERMIT ADDITIONAL MONITORING REQUIREMENTS

	OUTFALL NUMBER	7 -617
DATE OF STORM EVENT SAMPLED:		4/18/13
DURATION OF EVENT:		4 hours
ESTIMATE OF RAINFALL EVENT:		inches
TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.)	days
ESTIMATE OF TOTAL VOLUME DISCHARG	ED:	0.0213 gallons
By signature below, I certify that I have not the certification on the DMR form and III.B.9 of the general storm water permit information submitted in these additional conditions of such certification.	described in furthe . Furthermore, I b	r detail in Part selieve that the
Daviel Calloud		
Printed Name of Official		
Dea Callet		
7 Signature		·
4/18/13 Date	. ·	

Corporate Office 13715 West Markhan Little Rock, AR 722 Tel. (501)221-2565 Fax (50	211	•	⁻ 1	Northwest Arkansa 1107 Century A Springdale, AR . (479)750-1170 Fax	venue 72762				
Control Number: 1305010357 Customer Name : CATERPILLAR, INC OUT Customer/Permit No. : 2681 / AR0051454 Report Date : 05/14/13	FALL 0	Fallon	≅R	Delive: Work O	cted By: KATINA STEPHE ery By : TMO Order : ase Order :				
Analysis <u>Date Time By Parameter</u> 05/13 1800 NTR Oil & Grease, Total	. <u>Lab</u>	Fellow-up Samples CUTEU #001+004		<u>Method</u> EPA 1664 A	Ouality As Precision % RPD 1.81	Ssurance Accuracy % Recovery 96.5			
in) }		·						
	•								
* QA data shown is from a different s	sample or sta	ndard on the same da	ite.						

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

Environmental Services Company, Inc. Corporate Office

13715 West Markham

P.O. Box 55146

Little Rock, AR 72211

Little Rock, AR 72215

- 1

website: www.esclabs.com



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

Phone: 501-221-2565	Fax: 501-221-1341		CH	IAIN C	AIN OF CUSTODY Pho								O.	Fax	: 479-	-750·	-117:	2
	Client Information				Pro	ject Inf	ormation						ues					
Company Name:	Caterpillar, Inc.			Permit/Pro														<u> </u>
Address:	9201 Faulkner Lak	e Road		Purchase			·				ĺ							ł
	North Little Rock,		· · · · · · · · · · · · · · · · · · ·	Work Ord			····				l							
Telephone:	501-955-5240			Sampler N		J.L.	~ Q	enhan	<u> </u>									ļ
Email:	stephens katina@	cat com		l Campion	tuniciaj.	TACL		ephen		\dashv								I
Contact:	Ms. Katina Stephe			and Sinns	سسم دده و سده	X	126		=	_	~	'					,	:
ESC Client Number:	2681	10		and Signa	iture(s):	7 Ja 1			<u> </u>		(21.)							
Sample Ide			Sample	Collection		Committee (grease	'									
Identification	ESC Control #	Date	Time	Type	Matrix		Container			6 5								
Outfall 001	1305010357					Туре	Volume		Mive	#	ö	<u> </u>	 				\dashv	
	1000010351	5-10-13	0.71 MM	Grab	Stormwater	Glass	1 Liter	H2SO4		1	X							
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		Date	Time		gnature and Printed	Name) (•	Date	Tim			arounc		-		!		
Relinquished By: (Signature and Print	ted Name)	5-10-13	Time	Received for Lab	Br. (Signapre and	Printed Marre	P. / ,	Cate	Tim	.e	Regul Were		iles pri	operly	Spec			
Cool all samples to ≤ 6 degree	es C with 10/18.	2-10-13	1400	Como ty	Flow Da	othy O	Wea/	5-10-13		<u> 70 </u>		Yes	Þ			No		
Comments:					Analyst:		Field Test pH:	Time	Analys	st	Resu	ılt	Resu	<u> </u>		Units		
Field Service Hours:					Time:		P. 4.						<u> </u>	\dashv				
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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

		-	1305010358				
Cuŝtomer	Name	:	CATERPILLAR,	INC.	_	OUTFALL	004

Sample Date : 05/10/13

Collected By: KATINA STEPHENS

Customer Number: 2684

Sample Time: 0830

Delivery By : TMO

Report Date : 05/14/13

Sample Type : GRAB STORMWATER Sample From : OUTFALL 004

Work Order : Purchase Order :

	Quality A	ssurance				
Analysis Date Time By	Parameter	Result Notes	Ouantity	Method	Precision % RPD	Accuracy % Recovery
	Oil & Grease, Total	< 1.400 mg/L	Vacancicy	EPA 1664 A	1.81	96.5 *

* 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

MA9-09-2013(THU) 11:09

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: 501-221-256			_ Cł	IAIN C	OF CUS	STO	DY	P	hone	479	-750	⊦117 (٥	Fax	:479-	750-	1172
Client Information					Project Information						Requested Parameters						
Company Name:			Permit/Project #:												Ť		
Address:	e Road		1	Purchase Order #:											ı		
	North Little Rock,	R 72117		Work Order #							1			1			
Telephone:	501-955-5240			1												ı	
FAX:	stephens katina@	cat com	-	Sampler Name(s): Katina Stephens								ı		1			
Contact:	Ms. Katina Stephe						a a	A C					!			Î	
ESC Client Number		S		and Signature(s): <u>Sa</u> 7			- 16 Sh				(21.)						
	e Identification	<u> </u>	Sample	Collection							grease			Ì			
Identification									Containers		65					l	
		Date	Time	Туре	Matrix	Туре	Volume	Preserva	ative	#	ō						
Outfall 004	1305010358	<u>5-/0-/3</u>	8.30 MM	Grab	Stormwater	Glass	1 Liter	Cool <u>4</u> 6" C. H2SO4 to pH <2		1	X						
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			THOUSE BY CASE	Austria eur Likiles	маляр) /		Date	Tira		Tuma Regui	ic nuous	—		Speci	r	_	
Reformished By (Signature and Printed Name) Date Time Veal 5-10-13 1470					Recovered for Laby By: (Bignature and Printed Name)			Date Time 5-10-/7 14 00		10,	Were	sampl	samples properly		ly preserved:		
					Flow Da		//Ca/ Fleid Test		74 C Analys		Resu	Yes				10	ユ
Comments Sample Faken by Catopillar					Analyst:		pH:	11110	Anialy:	-	IV G2 II	''' 	Resu		S.U.	<u>Jnits</u>	
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TARYN BURGIN

0.0 LBS LTR 1 OF 1

5019555276 CATERPILLAR, INC 9201 FAULKNER LAKE ROAD NORTH LITTLE ROCK AR 72117

SHIP TO:

PERMITS ENFORCEMENT BRANCH AR DEPT OF ENVIRONMENTAL QUALITY. WATER DIVISION 5301 NORTHSHORE DRIVE

NORTH LITTLE ROCK AR 72118-5328



AR 722 9-21



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ия 15.1.10.

BILLING: P/P

