

ADEQ

ARKANSAS
Department of Environmental Quality

CERTIFIED MAIL: RETURN RECEIPT REQUESTED (91 7199 9991 7030 4905 3906)

August 16, 2012

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

Re: 2012 NPDES Stormwater Industrial Individual Permit, Sampling Submittal
Caterpillar, Inc. – North Little Rock, AR
Permit No. AR0051454, AFIN 60-01529

Dear Ms. Stephens,

You are receiving this letter because ADEQ general permits section received lab slips for stormwater sampling at the above-referenced facility.

Enclosed are the lab reports submitted to our office. Reporting on the DMR forms is a requirement of your stormwater permit. Since the forms are considered to be a legal document, we cannot enter or delete any data onto the DMR forms. Therefore, the lab results have to be entered by you. If you do not have a copy of your facility's DMR forms, please contact David Ramsey with the Enforcement Branch to obtain new DMR forms. He can be reached at (501) 682-0615 or ramsey@adeq.state.ar.us.

If you have any questions concerning this matter or need additional information, please feel free to contact the General Permits Section at (501) 682-0623.

Sincerely,



Katherine Yarberry
Engineer, General Permits Section
Water Division

Enclosure: Lab Slips

cc: Electronic Files, (AR0051454, AFIN 60-01529 w/attachment)

BKFAQ ✓

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: 1203010182
Customer Name: CATERPILLAR, INC. - OUTFALL 001
Customer/Permit No.: 2681 / AR0051454
Report Date: 03/14/12
AFN 60-01529
Sample Date: 03/08/12
Sample Time: 1635
Sample Type: GRAB STORMWATER
Sample From: OUTFALL 001
Collected By: DWC
Delivery By: DWC
Work Order:
Purchase Order:

Laboratory Analysis				Quality Assurance					
Date	Time	By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Accuracy % Recovery
03/11	1900	NTR	Chemical Oxygen Demand, L	114.00 mg/L			EPA 410.4	1.75	98.3
03/10	0900	NTR	Oil & Grease, Total	2.400 mg/L			EPA 1664 A	0.51	97.0 *
03/08	1637	DWC	pH	7.6 S.U.			SM 18 4500 H+B	0.00	N/A *
03/10	1100	NTR	Solids, Total Suspended	< 1.00 mg/L			SM 18th 2540 D	1.38	N/A *
03/08	1637	DWC	Temperature	11.40 °C			SM 18th 2550 B	0.00	N/A

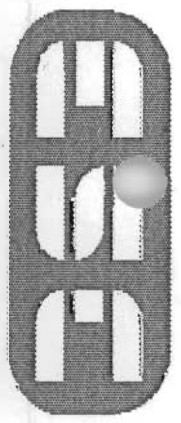
AUG 15 2012
DWC 24755

* 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. By...
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.
 Address: 9201 Faulkner Lake Road
 North Little Rock, AR 72117
 Telephone: 501-955-5240
 Email: stephens_katina@cat.com
 Contact: Ms. Katina Stephens
 ESC Client Number: 2681

Permit/Project #: _____
 Purchase Order #: _____
 Work Order #: _____
 Sampler Name(s): Dick Catlett
 and Signature(s): Dick Catlett

Sample Identification

Sample Collection

Sample Containers

Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#	Oil & grease (21.)	pH(23.), TSS(28.),	COD LR(6.0)
Outfall 001	1203010182	3/8/12	1635	Grab	Stormwater	Glass	1 Liter	H2SO4	1	X	X	
				Grab	Stormwater	Plastic	1 Liter	≤ 6 Deg C	1			
				Grab	Stormwater	Plastic	1 Liter	H2SO4	1		X	

Relinquished By: (Signature and Printed Name) _____ Date _____ Time _____
 Received By: (Signature and Printed Name) _____ Date _____ Time _____

Relinquished By: (Signature and Printed Name) _____ Date _____ Time _____
 Received By: (Signature and Printed Name) _____ Date _____ Time _____

Relinquished By: (Signature and Printed Name) Dick Catlett Date 3/8/12 Time 1715
 Received for Lab By: (Signature and Printed Name) Dick Catlett Date 3/8/12 Time 1715

Comments: _____

Flow Data: _____

Analyst: _____ Time: _____

Reading: _____

Units: _____

Chlorinated? Y N _____

Fecal Start: _____

Custody Seals: Used? Intact?
 Turnaround: Regular Special
 Were samples properly preserved: Yes No
 Result: 7.6 7.6 5.0
 Units: 1.4 1.4 0.2

This Document is Page 2 of 4

Directions

1. Complete the appropriate portions of the **Client Information** and **Project Information** blocks as completely as possible. Sampler names must be provided. Please note that Client Information refers to the ESC client who will receive the report and be responsible for payment. Contractors and consultants must enter their own company name here. Arrangements can be made for reports and/or billing to be mailed to other addresses. The Project Information block is to maintain a record for contractors and consultants of their own client data. **Sampler Names(s)** must be printed and signed.
2. Line-by-line, complete the **Sample Identification**, **Sample Collection**, and **Sample Containers** blocks.

Identification is selected by you. It will identify the sample on the laboratory reports and should also appear on the label of the sample container.
Sample Collection Date and Time are the date and time that each corresponding sample was collected.
Sample Type should be marked as either G (for Grab samples), C (for Composite samples), or FC (for Flow weighted composite samples).
Sample Matrix should be listed for each corresponding sample (e.g. "Soil", "Stormwater", "Wastewater", "Water", "Oil", "Paint", "Sludge", etc.).
3. Complete the **Sample Container Type/Volume/Preservative/#** section for each corresponding sample.

Container Type is typically Plastic , Glass , VOA or Whirl-Pak .
Container Volume is typically L for liter or G for gallon, or however much sample is actually provided.
Container Preservative is whatever chemicals have been added or steps that have been taken to preserve the sample for analysis (e.g. "Sulfuric", "Nitric", "4 C", etc.).
indicates the quantity of bottles that are actually provided.
4. Complete the **Requested Parameters** block for each corresponding sample container.
5. To ensure legal defensibility, each handler of the sample must sign off in one of the lower boxes, as well as print his or her name legibly.
6. Request the desired **Turnaround Time** and indicate **Number of Pages** submitted with the samples. The specifics of **Special Turnaround times** (e.g. 24 hours, 48 hours, etc.) as well as any other pertinent information, should be detailed on the **Comments** line. Please note that **Special turnaround times** are available **only** with prior notice and approval by ESC personnel, and that **price increases for expedited services** are applicable.

**STORM WATER GENERAL PERMIT
ADDITIONAL MONITORING REQUIREMENTS**

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

Caterpillar
1203010182

OUTFALL NUMBER

1

DATE OF STORM EVENT SAMPLED:

3/8/12

DURATION OF EVENT:

16 hours

ESTIMATE OF RAINFALL EVENT:

2 inches

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

27 days

ESTIMATE OF TOTAL VOLUME DISCHARGED:

6000 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.

Printed Name of Official

Rand Carroll

Signature

R. Carroll

Date

3/8/12

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: 1203010183
 Customer Name: CATERPILLAR, INC. - OUTFALL 002
 Customer Number: 2682
 Report Date: 03/14/12


Sample Date: 03/08/12
 Sample Time: 1555
 Sample Type: GRAB STORMWATER
 Sample From: OUTFALL 002

Laboratory Analysis

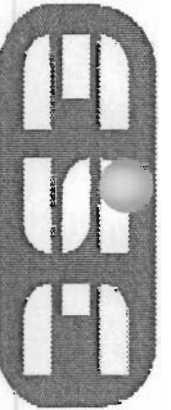
Date	Time	By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Accuracy % Recovery
03/11	1900	NTR	Chemical Oxygen Demand, L	26.20 mg/L			EPA 410.4	1.75	98.3
03/10	0900	NTR	Oil & Grease, Total	< 1.400 mg/L			EPA 1664 A	0.51	97.0
03/08	1558	DWC	PH	7.8 S.U.			SM 18 4500 H+B	0.00	N/A
03/10	1100	NTR	Solids, Total Suspended	< 1.00 mg/L			SM 18th 2540 D	1.38	N/A
03/08	1558	DWC	Temperature	11.40 °C			SM 18th 2550 B	0.00	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

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

CHAIN OF CUSTODY

Client Information				Project Information				Requested Parameters					
Company Name:	Caterpillar, Inc.	Permit/Project #:		Oil & grease (21.)									
Address:	9201 Faulkner Lake Road	Purchase Order #:		pH(23.), TSS(28.),									
Telephone:	North Little Rock, AR 72117	Work Order #		LR COD(6.0)									
FAX:	501-955-5240	Sampler Name(s):	<i>Paul Catlett</i>										
Contact:	<i>stephens_katina@cat.com</i>	and Signature(s):	<i>Paul Catlett</i>										
ESC Client Number:	2682												
Sample Identification		Sample Collection			Sample Containers			Custody Seals:					
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#	Used?	Intact?	Regular	Special
Outfall 002	1203010183	3/8/12	1555	Grab	Stormwater	Glass	1 Liter	H2SO4	1	X		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	Were samples properly preserved:					
<i>Paul Catlett</i>		3/8/12	1715	<i>Paul Catlett</i>		3/8/12	1715	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>					
Cool all samples to ≤ 6 degrees C with ice.													
Comments:		Flow Data		Field Test		Date		Time		Result		Units	
		Analyst: <i>DOC</i>		pH: <i>7.8</i>		5/8/12		1715		7.8		5.0	
		Time: <i>1558</i>		Temp: <i>15.9</i>						15.9		15.9	
		Reading: <i>DOC</i>		Units: <i>DOC</i>									
		Chlorinated? Y N		Fecal Start:									

Directions

1. Complete the appropriate portions of the **Client Information** and **Project Information** blocks as completely as possible. Sampler names must be provided. Please note that Client Information refers to the ESC client who will receive the report and be responsible for payment. Contractors and consultants must enter their own company name here. Arrangements can be made for reports and/or billing to be mailed to other addresses. The Project Information block is to maintain a record for contractors and consultants of their own client data. **Sampler Names(s)** must be printed and signed.
2. Line-by-line, complete the **Sample Identification**, **Sample Collection**, and **Sample Containers** blocks.
Identification is selected by you. It will identify the sample on the laboratory reports and should also appear on the label of the sample container.
Sample Collection Date and Time are the date and time that each corresponding sample was collected.
Sample Type should be marked as either **G** (for Grab samples), **C** (for Composite samples), or **FC** (for Flow weighted composite samples).
Sample Matrix should be listed for each corresponding sample (e.g. "Soil", "Stormwater", "Wastewater", "Water", "Oil", "Paint", "Sludge", etc.).
3. Complete the **Sample Container Type/Volume/Preservative/#** section for each corresponding sample.
Container Type is typically **Plastic, Glass, VOA** or **Whirl-Pak**.
Container Volume is typically **L** for liter or **G** for gallon, or however much sample is actually provided.
Container Preservative is whatever chemicals have been added or steps that have been taken to preserve the sample for analysis (e.g. "Sulfuric", "Nitric", "4 C", etc.).
indicates the quantity of bottles that are actually provided.
4. Complete the **Requested Parameters** block for each corresponding sample container.
5. To ensure legal defensibility, each handler of the sample must sign off in one of the lower boxes, as well as print his or her name legibly.
6. Request the desired **Turnaround Time** and indicate **Number of Pages** submitted with the samples. The specifics of Special Turnaround times (e.g. 24 hours, 48 hours, etc.) as well as any other pertinent information, should be detailed on the Comments line. Please note that **Special turnaround times are available only with prior notice and approval by ESC personnel, and that price increases for expedited services are applicable.**

STORM WATER GENERAL PERMIT
ADDITIONAL MONITORING REQUIREMENTS

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

Caterpillar
1203010183

OUTFALL NUMBER 2

DATE OF STORM EVENT SAMPLED: 3/8/12

DURATION OF EVENT: 16 hours

ESTIMATE OF RAINFALL EVENT: 2 inches

TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.) 77 days

ESTIMATE OF TOTAL VOLUME DISCHARGED: 10,000 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 Calhoun

Printed Name of Official

David Calhoun

Signature

3/8/12

Date

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: 1203010185 Sample Date : 03/08/12 Collected By: DWC
 Customer Name : CATERPILLAR, INC. - OUTFALL 003 Sample Time : 1559 Delivery By : DWC
 Customer Number : 2683 Sample Type : GRAB STORMWATER Work Order :
 Report Date : 03/14/12 Sample From : OUTFALL 003 Purchase Order :

Laboratory Analysis

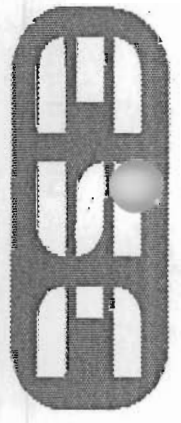
Date	Time	By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Accuracy % Recovery
03/11	1900	NTR	Chemical Oxygen Demand, L	32.90 mg/L			EPA 410.4	1.75	98.3 *
03/10	0900	NTR	Oil & Grease, Total	< 1.400 mg/L			EPA 1664 A	0.51	97.0 *
03/08	1600	DWC	pH	7.7 S.U.			SM 18 4500 H+B	0.00	N/A *
03/10	1100	NTR	Solids, Total Suspended	3.00 mg/L			SM 18th 2540 D	0.00	N/A *
03/08	1600	DWC	Temperature	11.70 °C			SM 18th 2550 B	0.00	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
 Phone 479-750-1170 Fax: 479-750-1172

CHAIN OF CUSTODY

Client Information				Project Information				Requested Parameters			
Company Name:	Caterpillar, Inc.	Permit/Project #:		Oil & grease (21.)							
Address:	9201 Faulkner Lake Road	Purchase Order #:		pH(23), TSS(28),							
Telephone:	North Little Rock, AR 72117	Work Order #:		LR COD(6.0)							
FAX:	501-955-5240	Sampler Name(s):	<i>David Catlett</i>								
Contact:	Ms. Katina Stephens	and Signature(s):	<i>Katina Stephens</i>								
ESC Client Number:	2683										

Sample Identification	ESC Control #	Date	Time	Sample Collection			Sample Containers			Used?	Intact?
				Type	Matrix	Type	Volume	Preservative	#		
Outfall 003	1203010284	4/5	1559	Grab	Stormwater	Glass	1 Liter	H2SO4	1	X	
	185	3/8/12	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 _____											
Relinquished By: (Signature and Printed Name) _____ Date _____ Time _____ Received By: (Signature and Printed Name) _____ Date _____ Time _____											
Relinquished By: (Signature and Printed Name) <i>David Catlett</i> Date <i>3/8/12</i> Time <i>1715</i> Received for Lab By: (Signature and Printed Name) <i>David Catlett</i> Date <i>3/8/12</i> Time <i>1715</i> Analyst <i>DAJC</i> Result <i>7.7</i> Units <i>5.11</i>											
Cool all samples to ≤ 6 degrees C with ice.											
Flow Data: pH: <i>7.7</i> Field Test: <i>Temp</i> Time: <i>1600</i> Analyst: <i>DAJC</i> Result: <i>7.7</i> Units: <i>5.11</i>											
Reading: _____ Units: _____ Chlorinated? Y N _____ Feecal Start: _____											
Comments: _____											

This Document is Page 1 of 1

Directions

1. Complete the appropriate portions of the **Client Information** and **Project Information** blocks as completely as possible. Sampler names must be provided. Please note that Client Information refers to the ESC client who will receive the report and be responsible for payment. Contractors and consultants must enter their own company name here. Arrangements can be made for reports and/or billing to be mailed to other addresses. The Project Information block is to maintain a record for contractors and consultants of their own client data. **Sampler Names(s)** must be printed and signed.
2. Line-by-line, complete the **Sample Identification**, **Sample Collection**, and **Sample Containers** blocks.

Identification is selected by you. It will identify the sample on the laboratory reports and should also appear on the label of the sample container.

Sample Collection Date and **Time** are the date and time that each corresponding sample was collected.

Sample Type should be marked as either **G** (for Grab samples), **C** (for Composite samples), or **FC** (for Flow weighted composite samples).

Sample Matrix should be listed for each corresponding sample (e.g. "Soil", "Stormwater", "Wastewater", "Water", "Oil", "Paint", "Sludge", etc.).
3. Complete the **Sample Container Type/Volume/Preservative/#** section for each corresponding sample.

Container Type is typically **Plastic, Glass, VOA** or **Whirl-Pak**.

Container Volume is typically **L** for liter or **G** for gallon, or however much sample is actually provided.

Container Preservative is whatever chemicals have been added or steps that have been taken to preserve the sample for analysis (e.g. "Sulfuric", "Nitric", "4 C", etc.).

indicates the quantity of bottles that are actually provided.
4. Complete the **Requested Parameters** block for each corresponding sample container.
5. To ensure legal defensibility, each handler of the sample must sign off in one of the lower boxes, as well as print his or her name legibly.
6. Request the desired **Turnaround Time** and indicate **Number of Pages** submitted with the samples. The specifics of Special Turnaround times (e.g. 24 hours, 48 hours, etc.) as well as any other pertinent information, should be detailed on the Comments line. Please note that **Special** turnaround times are available only with prior notice and approval by ESC personnel, and that **price increases for expedited services are applicable**.

**STORM WATER GENERAL PERMIT
ADDITIONAL MONITORING REQUIREMENTS**

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

1203010185
interpillar

OUTFALL NUMBER 3

DATE OF STORM EVENT SAMPLED: 3/8/12

DURATION OF EVENT: 16 hours

ESTIMATE OF RAINFALL EVENT: 2 inches

TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.) < 7 days

ESTIMATE OF TOTAL VOLUME DISCHARGED: 12,000 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.

Printed Name of Official

David Carlisle

Signature

David Carlisle

Date

3/8/12

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: 1203010184
 Customer Name : CATERPILLAR, INC. - OUTFALL 004
 Customer Number : 2684
 Report Date : 03/14/12

Sample Date : 03/08/12
 Sample Time : 1604
 Sample Type : GRAB STORMWATER
 Sample From : OUTFALL 004

Collected By: DMC
 Delivery By : DMC
 Work Order :
 Purchase Order :

Laboratory Analysis

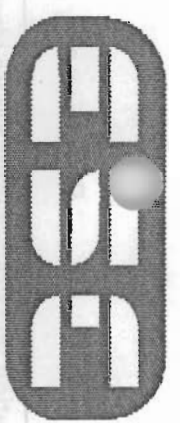
Date	Time	By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Assurance % Recovery
03/11	1900	NTR	Chemical Oxygen Demand, L	21.30 mg/L			EPA 410.4	1.75	98.3 *
03/10	0900	NTR	Oil & Grease, Total	< 1.400 mg/L			EPA 1664 A	0.51	97.0 *
03/08	1606	DMC	PH	7.7 S.U.			SM 18 4500 H+B	0.00	N/A
03/10	1100	NTR	Solids, Total Suspended	8.00 mg/L			SM 18th 2540 D	0.00	N/A
03/08	1606	DMC	Temperature	11.90 °C			SM 18th 2550 B	0.00	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 D. Ray
 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
 Phone 479-750-1170 Fax: 479-750-1172

CHAIN OF CUSTODY

Client Information

Company Name: Caterpillar, Inc.
 Address: 9201 Faulkner Lake Road
 North Little Rock, AR 72117
 Telephone: 501-955-5240
 FAX: stephens_katina@cat.com
 Contact: Ms. Katina Stephens
 ESC Client Number: 2684

Permit/Project #: _____
 Purchase Order #: _____
 Work Order #: _____
 Sampler Name(s): Dad Cant
 and Signature(s): Dad Cant

Sample Identification

Identification	ESC Control #	Date	Time	Sample Collection			Sample Containers			Oil & grease (21.)	pH(23), TSS(28),	LR COD(6.0)
				Type	Matrix	Type	Volume	Preservative	#			
Outfall 004	1203010184	3/8/12	1609	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 _____

Relinquished By: (Signature and Printed Name) Dad Cant Date 3/8/12 Time 1715
 Received for Lab By: (Signature and Printed Name) Dad Cant Date 3/8/12 Time 1715

Comments: Cool all samples to ≤ 6 degrees C with ice.

Flow Data: Analyst: DAC pH: 1606 Field Test: Temp
 Reading: 1606 Units: DAC
 Chlorinated? Y N Fecal Start: _____

Were samples properly preserved: Regular Special
 Custody Seals: Used? Intact?
 This Document is Page 1 of 2

Directions

1. Complete the appropriate portions of the **Client Information** and **Project Information** blocks as completely as possible. Sampler names must be provided. Please note that **Client Information** refers to the ESC client who will receive the report and be responsible for payment. Contractors and consultants must enter their own company name here. Arrangements can be made for reports and/or billing to be mailed to other addresses. The **Project Information** block is to maintain a record for contractors and consultants of their own client data. **Sampler Names(s)** must be printed and signed.
2. Line-by-line, complete the **Sample Identification**, **Sample Collection**, and **Sample Containers** blocks.
 - Identification** is selected by you. It will identify the sample on the laboratory reports and should also appear on the label of the sample container.
 - Sample Collection Date and Time** are the date and time that each corresponding sample was collected.
 - Sample Type** should be marked as either **G** (for Grab samples), **C** (for Composite samples), or **FC** (for Flow weighted composite samples).
 - Sample Matrix** should be listed for each corresponding sample (e.g. "Soil", "Stormwater", "Wastewater", "Water", "Oil", "Paint", "Sludge", etc.).
3. Complete the **Sample Container Type/Volume/Preservative/#** section for each corresponding sample.
 - Container Type** is typically **Plastic**, **Glass**, **VOA** or **Whirl-Pak**.
 - Container Volume** is typically **L** for liter or **G** for gallon, or however much sample is actually provided.
 - Container Preservative** is whatever chemicals have been added or steps that have been taken to preserve the sample for analysis (e.g. "Sulfuric", "Nitric", "4 C", etc.).
 - #** indicates the quantity of bottles that are actually provided.
4. Complete the **Requested Parameters** block for each corresponding sample container.
5. To ensure legal defensibility, each handler of the sample must sign off in one of the lower boxes, as well as print his or her name legibly.
6. Request the desired **Turnaround Time** and indicate **Number of Pages** submitted with the samples. The specifics of **Special Turnaround times** (e.g. 24 hours, 48 hours, etc.) as well as any other pertinent information, should be detailed on the **Comments** line. Please note that **Special turnaround times** are available **only** with prior notice and approval by ESC personnel, and that **price increases for expedited services are applicable**.

STORM WATER GENERAL PERMIT
ADDITIONAL MONITORING REQUIREMENTS

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

Caterpillar
1203010184

OUTFALL NUMBER 4

DATE OF STORM EVENT SAMPLED: 3/8/12

DURATION OF EVENT: 16 hours

ESTIMATE OF RAINFALL EVENT: 2 inches

TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.) 27 days

ESTIMATE OF TOTAL VOLUME DISCHARGED: 17,000 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.

Dana Calloway
Printed Name of Official

Dana Calloway
Signature

3/8/12
Date

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: 1203010186 Sample Date : 03/08/12 Collected By: DWC
 Customer Name : CATERPILLAR, INC. - OUTFALL 005 Sample Time : 1610 Delivery By : DWC
 Customer Number : 2685 Sample Type : GRAB STORMWATER Work Order :
 Report Date : 03/14/12 Sample From : OUTFALL 005 Purchase Order :

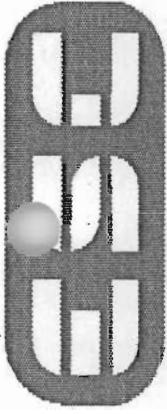
Laboratory Analysis

Date	Time By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Accuracy % Recovery
03/11	1900 NTR	Chemical Oxygen Demand, L	88.00 mg/L			EPA 410.4	1.75	98.3 *
03/10	0900 NTR	Oil & Grease, Total	3.400 mg/L			EPA 1664 A	0.51	97.0 *
03/08	1612 DWC	pH	7.8 S.U.			SM 18 4500 H+B	0.00	N/A *
03/10	1100 NTR	Solids, Total Suspended	58.00 mg/L			SM 18th 2540 D	0.00	N/A *
03/08	1612 DWC	Temperature	11.50 °C			SM 18th 2550 B	0.00	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

CHAIN OF CUSTODY

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

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

Client Information				Project Information				Requested Parameters					
Company Name:	Caterpillar, Inc.	Permit/Project #:		Oil & Grease (21)									
Address:	9201 Faulkner Lake Road	Purchase Order #:						PH(23), TSS(28),	LR COD(60)				
Telephone:	North Little Rock, AR 72117	Work Order #:											
FAX:	501-955-5240	Sampler Name(s):	<i>Dad Calnet</i>										
Contact:	stephens_katina@cat.com	and Signature(s):	<i>Dad Calnet</i>										
ESC Client Number:	2685												

Sample Identification		Sample Collection		Sample Containers		Requested Parameters						
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#	Oil & Grease (21)	PH(23), TSS(28),	LR COD(60)
Outfall 005	1203010186	3/18/12	1610	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"/>
						Turnaround: Regular <input checked="" type="checkbox"/> Special <input type="checkbox"/>
						Were samples properly preserved: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Relinquished By: (Signature and Printed Name)	Date	Time	Received By: (Signature and Printed Name)	Date	Time	Field Test
<i>Dad Calnet</i>	3/16/12	1715	<i>Dad Calnet</i>	3/16/12	1715	Analyst Result Units
						pH: 7.8
						Temp: 11.5

Comments: Cool all samples to ≤ 6 degrees C with ice.

Directions

1. Complete the appropriate portions of the **Client Information** and **Project Information** blocks as completely as possible. Sampler names must be provided. Please note that Client Information refers to the ESC client who will receive the report and be responsible for payment. Contractors and consultants must enter their own company name here. Arrangements can be made for reports and/or billing to be mailed to other addresses. The Project Information block is to maintain a record for contractors and consultants of their own client data. **Sampler Names(s)** must be printed and signed.
2. Line-by-line, complete the **Sample Identification**, **Sample Collection**, and **Sample Containers** blocks.

Identification is selected by you. It will identify the sample on the laboratory reports and should also appear on the label of the sample container.

Sample Collection Date and **Time** are the date and time that each corresponding sample was collected.

Sample Type should be marked as either **G** (for Grab samples), **C** (for Composite samples), or **FC** (for Flow weighted composite samples).

Sample Matrix should be listed for each corresponding sample (e.g. "Soil", "Stormwater", "Wastewater", "Water", "Oil", "Paint", "Sludge", etc.).
3. Complete the **Sample Container Type/Volume/Preservative/#** section for each corresponding sample.

Container Type is typically **Plastic**, **Glass**, **VOA** or **Whirl-Pak**.

Container Volume is typically **L** for liter or **G** for gallon, or however much sample is actually provided.

Container Preservative is whatever chemicals have been added or steps that have been taken to preserve the sample for analysis (e.g. "Sulfuric", "Nitric", "4 C", etc.).

indicates the quantity of bottles that are actually provided.
4. Complete the **Requested Parameters** block for each corresponding sample container.
5. To ensure legal defensibility, each handler of the sample must sign off in one of the lower boxes, as well as print his or her name legibly.
6. Request the desired **Turnaround Time** and indicate **Number of Pages** submitted with the samples. The specifics of Special Turnaround times (e.g. 24 hours, 48 hours, etc.) as well as any other pertinent information, should be detailed on the Comments line. Please note that **Special** turnaround times are available **only** with prior notice and approval by ESC personnel, and that **price increases for expedited services are applicable.**

STORM WATER GENERAL PERMIT
ADDITIONAL MONITORING REQUIREMENTS

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

Caterpillar
1203010186

OUTFALL NUMBER 5

DATE OF STORM EVENT SAMPLED: 3/8/12

DURATION OF EVENT: 16 hours

ESTIMATE OF RAINFALL EVENT: 2 inches

TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.) 77 days

ESTIMATE OF TOTAL VOLUME DISCHARGED: 10,000 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 Callant

Printed Name of Official

David Callant
Signature

3/8/12

Date

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: 1203010187
 Customer Name : CATERPILLAR, INC. - OUTFALL 006
 Customer Number : 2686
 Report Date : 03/14/12
 Sample Date : 03/08/12
 Sample Time : 1619
 Sample Type : GRAB STORMWATER
 Sample From : OUTFALL 006
 Collected By: DWC
 Delivery By : DWC
 Work Order :
 Purchase Order :

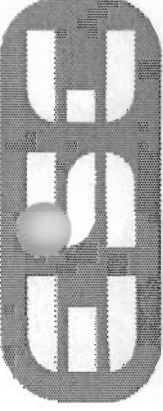
Laboratory Analysis

Date	Time	By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Quality Assurance Accuracy % Recovery
03/11	1900	NTR	Chemical Oxygen Demand, L	40.50 mg/L			EPA 410.4	1.75	98.3 *
03/10	0900	NTR	Oil & Grease, Total	< 1.400 mg/L			EPA 1664 A	0.51	97.0 *
03/08	1621	DWC	pH	7.9	S.U.		SM 18 4500 H+B	0.00	N/A *
03/10	1100	NTR	Solids, Total Suspended	15.00 mg/L			SM 18th 2540 D	0.00	N/A *
03/08	1621	DWC	Temperature	11.00 °C			SM 18th 2550 B	0.00	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.



CHAIN OF CUSTODY

Client Information			Project Information				Requested Parameters						
Company Name:	Caterpillar, Inc.	Permit/Project #:											
Address:	9201 Faulkner Lake Road	Purchase Order #:											
Telephone:	North Little Rock, AR 72117	Work Order #											
FAX:	501-955-5240	Sampler Name(s):	Dad Collet										
Contact:	stephens_katina@cat.com	and Signature(s):	Dad Collet										
ESC Client Number:	2686												
Sample Identification		Sample Collection			Sample Containers			Requested Parameters					
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#				
Outfall 006	1203010187	3/8/12	1619	Grab	Stormwater	Glass	1 Liter	H2SO4	1		Oil & grease (21)		
	/	/	/	Grab	Stormwater	Plastic	1 Liter	≤ 6 Deg C	1		PH (23), TSS (28),	X	
				Grab	Stormwater	Plastic	1 Liter	H2SO4	1			X	
Relinquished By: (Signature and Printed Name)													
Relinquished By: (Signature and Printed Name)													
Relinquished By: (Signature and Printed Name) Dad Collet Dad Collet													
Cool all samples to ≤ 6 degrees C with ice.													
Comments:		Flow Data			Field Test			Custody Seals:					
		Analyst:	Date	Time	Received By: (Signature and Printed Name)	Date	Time	Used?	Intact?	Regular	Special	Were samples properly preserved:	
		Time:	Date	Time	Received By: (Signature and Printed Name)	Date	Time	Turnaround:	Intact?	Regular	Special	Yes	No
		Reading:	Date	Time	Received for Lab By: (Signature and Printed Name)	Date	Time	Result	Result	Result	Units		
		Units:	Date	Time	Received for Lab By: (Signature and Printed Name)	Date	Time	Result	Result	Result	Units		
		Chlorinated? Y N			Dad Collet Dad Collet	3/8/12	1715	7.9	7.9	7.9	S.U.I.		
					Dad Collet Dad Collet	3/8/12	1715	46.0	46.0	46.0	mg/l		
		Fecal Start:											
												This Document is Page 1 of 1	

Directions

1. Complete the appropriate portions of the **Client Information** and **Project Information** blocks as completely as possible. Sampler names must be provided. Please note that Client Information refers to the ESC client who will receive the report and be responsible for payment. Contractors and consultants must enter their own company name here. Arrangements can be made for reports and/or billing to be mailed to other addresses. The Project Information block is to maintain a record for contractors and consultants of their own client data. **Sampler Names(s)** must be printed and signed.
2. Line-by-line, complete the **Sample Identification**, **Sample Collection**, and **Sample Containers** blocks.
 - Identification** is selected by you. It will identify the sample on the laboratory reports and should also appear on the label of the sample container.
 - Sample Collection Date and Time** are the date and time that each corresponding sample was collected.
 - Sample Type** should be marked as either **G** (for Grab samples), **C** (for Composite samples), or **FC** (for Flow weighted composite samples).
 - Sample Matrix** should be listed for each corresponding sample (e.g. "Soil", "Stormwater", "Wastewater", "Water", "Oil", "Paint", "Sludge", etc.).
3. Complete the **Sample Container Type/Volume/Preservative/#** section for each corresponding sample.
 - Container Type** is typically **Plastic**, **Glass**, **VOA** or **Whirl-Pak**.
 - Container Volume** is typically **L** for liter or **G** for gallon, or however much sample is actually provided.
 - Container Preservative** is whatever chemicals have been added or steps that have been taken to preserve the sample for analysis (e.g. "Sulfuric", "Nitric", "4 C", etc.).
 - #** indicates the quantity of bottles that are actually provided.
4. Complete the **Requested Parameters** block for each corresponding sample container.
5. To ensure legal defensibility, each handler of the sample must sign off in one of the lower boxes, as well as print his or her name legibly.
6. Request the desired **Turnaround Time** and indicate **Number of Pages** submitted with the samples. The specifics of Special Turnaround times (e.g. 24 hours, 48 hours, etc.) as well as any other pertinent information, should be detailed on the Comments line. Please note that **Special** turnaround times are available **only** with prior notice and approval by ESC personnel, and that **price increases for expedited services are applicable**.

STORM WATER GENERAL PERMIT ADDITIONAL MONITORING REQUIREMENTS

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

Caterpillar
1203010187

OUTFALL NUMBER 6

DATE OF STORM EVENT SAMPLED: 3/8/12

DURATION OF EVENT: 16 hours

ESTIMATE OF RAINFALL EVENT: 2 inches

TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.) 77 days

ESTIMATE OF TOTAL VOLUME DISCHARGED: 1.0 mgd 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

3/8/12

Date

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

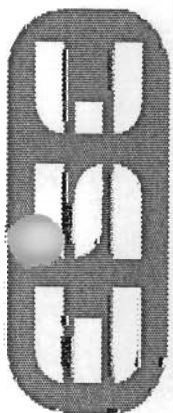
Control Number: 1203010188 Sample Date : 03/08/12 Collected By: DWC
 Customer Name : CATERPILLAR, INC. - OUTFALL 007 Sample Time : 1626 Delivery By : DWC
 Customer Number : 2687 Sample Type : GRAB STORMWATER Work Order :
 Report Date : 03/19/12 Sample From : OUTFALL 007 Purchase Order :

<u>Laboratory Analysis</u>				<u>Quality Assurance</u>				
Date	Time By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Accuracy % Recovery
03/11	1900	NTR	37.00 mg/L			EPA 410.4	1.75	98.3 *
03/17	1000	NTR	< 1.400 mg/L			EPA 1664 A	0.77	98.0 *
03/08	1629	DWC	7.8 S.U.			SM 18 4500 H+B	0.00	N/A *
03/10	1100	NTR	9.00 mg/L			SM 18th 2540 D	0.00	N/A *
03/08	1629	DWC	11.10 °C			SM 18th 2550 B	0.00	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. 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.)									
Address: 9201 Faulkner Lake Road			Purchase Order #:				PH(23), TSS(28),									
Telephone: North Little Rock, AR 72117			Work Order #:				LR COD(60)									
FAX: 501-955-5240			Sampler Name(s): <i>David Collett</i>													
Contact: stephens_katina@cat.com			and Signature(s): <i>Katina Stephens</i>													
ESC Client Number: 2687																
Sample Identification			Sample Collection				Sample Containers									
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#							
Outfall 007	1203010188	5/8/12	1626	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	Custody Seals: Used? <input type="checkbox"/> Intact? <input type="checkbox"/>	
Relinquished 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	Were samples properly preserved: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Comments: <i>Overall samples to ≤ 6 degrees C with ice.</i>													Time	Analyst	Result	Units
													Time	Analyst	Result	Units
													Time	Analyst	Result	Units

Directions

1. Complete the appropriate portions of the **Client Information** and **Project Information** blocks as completely as possible. Sampler names must be provided. Please note that Client Information refers to the ESC client who will receive the report and be responsible for payment. Contractors and consultants must enter their own company name here. Arrangements can be made for reports and/or billing to be mailed to other addresses. The Project Information block is to maintain a record for contractors and consultants of their own client data. **Sampler Names(s)** must be printed and signed.
2. Line-by-line, complete the **Sample Identification**, **Sample Collection**, and **Sample Containers** blocks.

Identification is selected by you. It will identify the sample on the laboratory reports and should also appear on the label of the sample container.

Sample Collection Date and **Time** are the date and time that each corresponding sample was collected.

Sample Type should be marked as either **G** (for Grab samples), **C** (for Composite samples), or **FC** (for Flow weighted composite samples).

Sample Matrix should be listed for each corresponding sample (e.g. "Soil", "Stormwater", "Wastewater", "Water", "Oil", "Paint", "Sludge", etc.).
3. Complete the **Sample Container Type/Volume/Preservative/#** section for each corresponding sample.

Container Type is typically **Plastic**, **Glass**, **VOA** or **Whirl-Pak**.

Container Volume is typically **L** for liter or **G** for gallon, or however much sample is actually provided.

Container Preservative is whatever chemicals have been added or steps that have been taken to preserve the sample for analysis (e.g. "Sulfuric", "Nitric", "4 C", etc.).

indicates the quantity of bottles that are actually provided.
4. Complete the **Requested Parameters** block for each corresponding sample container.
5. To ensure legal defensibility, each handler of the sample must sign off in one of the lower boxes, as well as print his or her name legibly.
6. Request the desired **Turnaround Time** and indicate **Number of Pages** submitted with the samples. The specifics of **Special Turnaround times** (e.g. 24 hours, 48 hours, etc.) as well as any other pertinent information, should be detailed on the Comments line. Please note that **Special** turnaround times are available **only** with prior notice and approval by ESC personnel, and that **price increases for expedited services are applicable**.

STORM WATER GENERAL PERMIT ADDITIONAL MONITORING REQUIREMENTS

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

*Caterpillar
1203010188*

OUTFALL NUMBER 7

DATE OF STORM EVENT SAMPLED: 3/8/12

DURATION OF EVENT: 16 hours

ESTIMATE OF RAINFALL EVENT: 2 inches

TIME SINCE LAST MEASURABLE EVENT (i.e., > 0.1 in.) 77 days

ESTIMATE OF TOTAL VOLUME DISCHARGED: 40,000 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 Calhoun

Printed Name of Official

David Calhoun
Signature

3/8/12
Date