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

Industrial Stormwater General Permit (ARR000000) Annual Report Form

Permit No. ARR-00 0817	
Permittee Name: DREW FOAM CINC	OMPANIES
Facility Name: DREW FOAM CO	MPANIES INC
Facility Physical Address (<u>not</u> mail 1098 HWY 278 EAST	ng address):
Facility City: MONTICELLO AR	Zip Code: 71655

Facility Contact Name: Susan McClendon	Title: CFO		
Facility Contact Phone Number 8703676245	Facility Contact Email: Smcclendon@drewfoam.com		
Reporting Period: January 1 st to JUNE30 st 2012 (Year)			

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

1. Benchmarks Exceeded

Did the facility exceed the benchmark for any parameter during the previous 31 st)? Note : If a parameter was sampled at a discharge point more than once reported and evaluated individually:	
Yes Complete Sections 2, 3, 4, 5 and 6.	JUN 2 9 2012
No X X - Complete Section 2, 3, 5 and 6.	(my)24419
Include any additional comments here:	
WE DO THE PH TEST ON ALL OFF FALLS AT THE TIME OF THE RA	AIN FALL

2. Evaluations and Inspections

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

Visual Site Inspection #1 Date	2-23-12
Visual Site Inspection #2 Date	5-17-12
Visual Site Inspection #3 Date	
Visual Site Inspection #4 Date	
Comprehensive Site Compliance Evaluation Date	6-12-12

3. Stormwater Problems Identified At the Facility

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

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

cribe the Problem: N/A
cribe the Problem: N/A
cribe the Problem: N/A
sc

4. Corrective Actions Planned or Taken

Instructions: Complete this section for each pollutant parameter (e.g., turbidity, copper) that exceeded a benchmark during the previous calendar year (Jan – Dec). If the parameter benchmark value is exceeded, the facility must investigate the cause of each parameter exceedance and determine a corrective action plan. To do this, indicate below in which sampling period an exceedance occurred. If more than one sample was taken at a sample location, indicate all sample results that exceeded the benchmark. Note: If the facility exceeded the benchmark for more than one parameter (e.g., turbidity & zinc), make additional copies of Section 4 and complete one for each parameter.			
Pollutant Parameter: benchmark was exceeded during the following sampling period (check all that apply): $X \sqsubseteq X1^{st} \text{ Sampling period (January-June)} \qquad \qquad $			
For the each pollutant parameter exceeding the benchmark_summarize below any corrective actions plan completed during the previous calendar year and include the dates you completed the corrective actions.			
For the each pollutant parameter exceeding the benchmark summarize any corrective actions plan <u>initiated</u> during the previous calendar year, but have <u>not vet been completed</u> . Identify the date you expect to complete corrective actions.			

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

6. Certification by Permittee

"I certify under penalty of law that this document and all attachments were prepared under my direction, or supervision, in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Susan M-Chendon	<u>CFO</u>	6.28.12
Printed Name	Title	Date
Signature ^{it} Moan	Mi Clando	

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

A person is a duly authorized representative only if:

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

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

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

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY STORMWATER DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER: ARR000817		PERMITTEE NAME:	DREWFOAM COMPANIES INC	
DREW FOAM COMPANIES INC		FACILITY PHYSICAL 1093 HWY 278 EAST		AST
INDUSTRIAL Y2 SECTOR:	OUTFALI _ NO:	L 002 REPOR YEAR:	Monticello AR TING 2012	
PARAMETER	Benchmark Value	QUALITY OR CO	ONCENTRATION JULY-DECEMBER	UNITS
Chemical Oxygen Demand (COD)	120	10.2		mg/L
Total Suspended Solids (TSS)	1.00	1.6		mg/L
Oil and Grease (O&G)	15	<2.9		mg/L
рH	6.0-9.0	7.0		S.U.
			JUN 2 9 2012	
Sampling Period: Date of Storm Event Sampled: Duration of Event: Estimate of Rainfall Event:	6	ANUARY-JUNE JUL -12-12 hours	LY-DECEMBER hou incl	 '
Time Since Last Measurable Even		0	day	
Estimate of Total Discharged Vol	ume: 1	2000		lons
Comments: I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR				
WITH THE INFORMATION SU INDIVIDUALS IMMEDIATELY R SUBMITTED INFORMATION IS T SIGNIFICANT PENALTIES FOR SOFFINE AND IMPRISONMENT.	BMITTED H ESPONSIBLE RUE, ACCUR	EREIN; AND BASED FOR OBTAINING THE RATE AND COMPLETE.	ON MY INQUIRY OF INFORMATION, I BELI I AM AWARE THAT TH	THOSE EVE THE ERE ARE
Signature & Date	<u>6-28</u>		Iame & Title of Official	on CFE

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY STORMWATER DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER: ARR000817		PERMITTEE NAME:	DREWFOAM COMP	ANIES INC
		FACILITY PHYSICAL ADDRESS: 1093 HWY 278 EAST		
			Monticello AR	
INDUSTRIAL Y2 SECTOR:	OUTFALI NO:	REPORT YEAR:	ΓING 2012	
				
PARAMETER	Benchmark	QUALITY OR CO	DNCENTRATION	UNITS
	Value	JANUARY-JUNE	JULY-DECEME	BER
Chemical Oxygen Demand (COD)	120	<10		mg/L
Total Suspended Solids (TSS)	100	2.4		mg/L
Oil and Grease (O&G)	15	<2.8		nıg/L
pH	6.0-9.0	7.0		S.U.
			JUN 2 9 20	112
Sampling Period:	J	ANUARY-JUNE JUL	Y-DECEMBER	
Date of Storm Event Sampled:	l	-12-12		
Duration of Event:		hours		hours
Estimate of Redital Event.		.5		inches
Time Since Last Measurable Event: 5		2000		days
Estimate of Total Discharged Volume: 12		2000		gallons
Comments:_				
I CERTIFY UNDER PENALTY OF	LAW THAT	LHAVE PERSONALLY F	XAMINED AND A	M FAMILIAR
WITH THE INFORMATION SU				

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

Printed Name & Title of Official



11701 I-30 Bldg 1, Ste 115 - Little Rock, AR 72209 501-455-3233 Fax 501-455-6118

20 June 2012

Allen Chavis Drew Foam Companies 1993 Hwy 278 E Monticello, AR 71655

JUN 29 2012

RE: Stormwater Samples SDG Number: 1206173

Enclosed are the results of analyses for samples received by the laboratory on 13-Jun-12 11:00. If you have any questions concerning this report, please feel free to contact me.

Sample Receipt Information:

Custody Seals	~
Containers Correct	
COC/Labels Agree	
Preservation Confirmed	
Received On Ice	
Temperature on Receipt	4.0°C

Sincerely,

Norma James President

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Drew Foam, Monticello AR Storm Water Runoff - pH test

Date / time sampled	6/12/12
Date / time rainfall occurred	10:45
person doing test	Allen Charis
Outfall # tested	001,002,003 +004
results	(6.5 \120 \120 \7.0)

JUN 29 2012

20 June 2012 Allen Chavis Drew Foam Companies 1993 Hwy 278 E Monticello, AR 71655 Project: Stormwater Samples



Date Received: 13-Jun-12 11:00

ANAL'	YTICAL	RESULTS

ANALTHUAL RESULTS						
Lab Number: Sample Name: Date/Time Collected: Sample Matrix:		1206173-01 Stormwater Outfall 002 6/12/12 11:00 Water				
Wel Chemistry	Units	Result	Qualifier(s)	Date/Time Analyzed	<u>Batch</u>	<u>Method</u>
COD	mg/L	10.2		6/18/12 14:54	A206227	410.4
Oil and Grease	mg/L	< 2.9		6/19/12 9:00	A206220	1664A
рH	S.U.	4,23	E2	6/13/12 17:25	A206181	150.2/9040C
TSS	mg/L	1.6		6/15/12 16:58	A206204	2540D
ANALYTICAL RESULTS						
Lab Number: Sample Name: Date/Time Collected: Sample Matrix:		1206173-02 Stormwater Outfall 003 6/12/12 11:00 Water				
Wet Chemistry	Units	Result	Qualifier(s)	Date/Time Analyzed	Batch	Method
COD	mg/L	< 10.0		6/18/12 14:54	A206227	410.4
Oil and Grease	mg/L	< 2.8		6/19/12 9:00	A206220	1664A
pН	S.U.	5.23	E2	6/13/12 17:25	A206181	150,2/9040C
TSS	mg/L	2.4		6/15/12 16:58	A206204	2540D

JUN 2 9 2012

20 June 2012 Alien Chavis

Drew Foam Companies 1993 Hwy 278 E

Monticello, AR 71655 Project: Stormwater Samples Arkansas Analytical

Date Received: 13-Jun-12 11:00

QUALITY O	CONTROL RESUL	_TS								
			Wet Chemi	-		*				
		Prepared: 13	3-Jun-12 17:2	5 Ву: АТ	Analyzed:	13-Jur	1-12 17:2	25 By: AT		
Analyte		BLK	LCS/LC	CSD	MS	/ MSD		ըսբ	RPD	Qualifiers
pН		NA	101% /	100%	NA	1	NA		0.142%	
			Wet Chemi	stry Bato	h: A206204	(Wat	er)			
		Prepared: 15	5-Jun-12 09:4	5 By: AP	Analyzed:	15-Jur	1-12 13:	50 By: AP		
Analyte		BLK	LCS/LC	CSD	MS	/ MSD		<u>Dup</u>	RPD	Qualifiers
TSS		<1.0 mg/L	79.0% /	83.0%	NA	1	NA		4.94%	
			Wet Chemi	stry Bato	h: A206220) (Wat	er)			
		Prepared: 19	3-Jun-12 16:3	1 By: AT	Analyzed:	19-Jur	1-12 16:	31 By: AT		
Analyte		BLK	LCS / LC	CSD	MS	/ MSD		Dup	RPD	Qualifiers
Oil and Grea	se	<2.5 mg/L	89.9% /	89.9%	80.2%	1	NA		0.00%	
			Wet Chemi	stry Bato	h: A206227	(Wat	er)			
		Prepared: 18	3-Jun-12 14:54	4 By: SB	Analyzed: '	18-Jui	1-12 14:	54 By: SB		
Analyte		BLK	LCS / LC	CSD	MS	/ MSD		Dup	RPD	Qualifiers
COD		<10.0 mg/L	104% /	NA	123%	1	117%		3.77%	
QUALIFIER	(S)								<u> </u>	
*E2: E	stimated Result; Ar	nalyzed Outside	of Holding Tin	ne						
All Analysis p	erformed according	to EPA approve	ed methodolog	v when av	ailable:		_			
	sed December, 199					ard Me	thods, 2	0th Edition.		
Instrument ca	libration and quality	control sample:	s performed at	t or above f	requency sp	oecifie	d in anal	lytical method.		
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	non	na >	Jama							
Reviewed by:			<u> </u>							
	Noma James President									
	1.144100111									

JUN 29 2012

20 June 2012

Alien Chavis Drew Foam Companies 1993 Hwy 278 E Monticello, AR 71655 Project: Stormwater Samples Arkonsas Analytical Jun 2 9 2

Date Received: 13-Jun-12 11:00

CHAIN OF CUSTODY FORM(S)

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Uraw Foam Companies	Storme	Stormwater Samples 24 Hour	L Cual Alberras Centerals 4. Thinsel	. This ulfate for Dechlering and
1093 Hwy. 278 E		48 Hour	••	البلاحظامة المنازاات
Monticello, AR 71655	Repartin	72 Hour		L. Sadina Hydratide (MaOH), pdf > 11
	Telephone	7	TEST PARAMETERS	RS Bulletijwicate
Altn: Alan Chavis	Emai: RACH	EMEL RACHAVISO HATEO.CO PRESENTEDO		
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)			EU-ME .	
T. Cases Charry				Arkansas
Sampler(s) Signature	Sampleries Printed R. ALLEN CHAVIS	EN CHAVIS	10350	Analytical Work Order Number
Field SAMPLE COLLECTION		SAMPLE		
-	d Saryle	DENTIFICATION DESCRIPTION	OII a	206/73
6-12-12 /	X 3 Ward Slow	ສ; Oudail 002	XXX	0
	×	er Outlast 003	× .	જ
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				and \$1.1
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				:
1. Relinquished by: (Signature) Oaterling	ling (1. Received by: 15 spatters)	SAMPLE CONDITION UPON RECEIPT IN LAB		REMARKS / SAMPLE COMMENTS
		I. CUSTOOY SEALS:	Yes _Ne	
	J. U.	Z CONTAMERS CORRECT:	Yes ito	
The College Charles	1.00 Jun	D, COCHABELS ACREE	70 - 20	
3. Refroulthed by: (Signature) Optol	Inte 4, Ancoired by lab: (Signature)	4. PRESERVATION CONFIRMED	Tet lin	
11125	13 12 Suday		Yes	
([la O James	FOR COMPLETION BY LAB ONLY	אם סארג	
Reເຫລາ ໃ ງລຳເກີດ	i i			

11701 Interstate 30, Bidg. 1, Ste. 115 Little Rock, AR 72209 PHONE: 501-455-3233 FAX: 501-455-6118