

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 <u>B_007</u>	
Permittee Name: <u>Alliance Rubber Co</u>	
Facility Name: <u>Alliance Rubber Co</u>	
Facility Physical Address (not mailing address): <u>210 CARPENTER DAM Rd</u>	
Facility City: <u>Hot Springs</u>	Zip Code: <u>71907</u>

Facility Contact Name: <u>TREVOR HAMILTON</u>	Title: <u>SAFETY/TRAINING COORD.</u>
Facility Contact Phone Number <u>501-262-8175</u>	Facility Contact Email: <u>thamilton@alliance-rubber.com</u>
Reporting Period: January 1 <sup>st</sup> to December 31 <sup>st</sup> <u>2011</u> (Year)	

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

**1. Benchmarks Exceeded**

Did the facility exceed the benchmark for any parameter during the previous calendar year (Jan 1<sup>st</sup> – Dec 31<sup>st</sup>)? **Note:** If a parameter was sampled at a discharge point more than once then all the samples needs to be reported and evaluated individually:

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

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

Include any additional comments here:

Did not sample in 2011

**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	<u>01/13/2011</u>
Visual Site Inspection #2 Date	<u>05/25/2011</u>
Visual Site Inspection #3 Date	<u>09/15/2011</u>
Visual Site Inspection #4 Date	<u>11/30/2011</u>
Comprehensive Site Compliance Evaluation Date	<u>12/29/2011</u>

**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<sup>st</sup> – Dec 31<sup>st</sup>) comprehensive site evaluation and quarterly visual site inspections.

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

Date Problem Discovered:	Describe the Problem: N/A
Date Problem Discovered:	Describe the Problem: N/A
Date Problem Discovered:	Describe the Problem: N/A
Date Problem Discovered:	Describe the Problem: N/A

#### 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):

1<sup>st</sup> Sampling period (January-June)

2<sup>nd</sup> Sampling Period (July-December)

For the each pollutant parameter exceeding the benchmark summarize below any corrective actions plan **completed** during the previous calendar year and include the dates you completed the corrective actions.

For the each pollutant parameter exceeding the benchmark summarize any corrective actions plan **initiated** during the previous calendar year, but have **not yet been completed**. Identify the date you expect to complete corrective actions.



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

PERMIT NUMBER: ARR00 B007 PERMITTEE NAME: Alliance Rubber Co.  
 FACILITY NAME: Alliance Rubber Co FACILITY PHYSICAL ADDRESS: 210 CARPENTER DAM Rd  
Hot Springs AR 71901  
 INDUSTRIAL SECTOR: Y1 OUTFALL NO: \_\_\_\_\_ REPORTING YEAR: 2011

PARAMETER	Benchmark Value	QUALITY OR CONCENTRATION		UNITS
		JANUARY-JUNE	JULY-DECEMBER	
Chemical Oxygen Demand (COD)	120			mg/L
Total Suspended Solids (TSS)	100			mg/L
Oil and Grease (O&G)	15			mg/L
pH	6.0-9.0			S.U.

Sampling Period: JANUARY-JUNE JULY-DECEMBER  
 Date of Storm Event Sampled: \_\_\_\_\_  
 Duration of Event: \_\_\_\_\_ hours  
 Estimate of Rainfall Event: \_\_\_\_\_ inches  
 Time Since Last Measurable Event: \_\_\_\_\_ days  
 Estimate of Total Discharged Volume: \_\_\_\_\_ gallons

Comments: WAS NOT AWARE OF THE NEED TO TEST IN 2011. HAVE MADE ARRANGEMENTS WITH AR ANALYTICAL FOR ALL TESTING.

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.

Trevor Hamilton 06/04/2013  
Signature & Date

TREVOR HAMILTON Safety/Testing Coord.  
Printed Name & Title of Official



P. O. Box 20950  
Hot Springs, Arkansas 71903-0950

Hasler

06/05/2013

US POSTAGE

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\$00.46<sup>0</sup>



ZIP 71901  
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ADEQ  
STORMWATER Enforcement Branch  
5301 Northshore Drive  
North Little Rock, AR. 72118

7211885317

ATTN: Leslie Allen Daniels