

Permit Number: ARR00 C197

AFIN 07-00212

Industrial Sector: A4

(B4)

DMR Review Form

Annual Report Received?



Yes



No

Are All Parameters Okay?



Yes



No

Parameters exceeding the benchmark values:

Pollutant	Reported Value	Benchmark Value	Outfall #	Period
COD	139	120	002	1
TSS	274,129	100	002	B
COD	132	120	003	2
ORP	19.5	15	003	2
COD	179,254	120	004	B
COD	156,124	120	006	B

Katherine Yalowsky 3/29/12
Engineer Signature / Date

3/29/12 kay
Date information was entered into database

4/4/12
Date letter was completed

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

PERMIT NUMBER: ARR00c197 PERMITTEE NAME: Georgia-Pacific Wood Products, LLC

FACILITY NAME: Fordyce OSB Facility FACILITY PHYSICAL ADDRESS: 1 Georgia Pacific Rd Fordyce, AR 71742

INDUSTRIAL SECTOR: A4 OUTFALL NO: 002 REPORTING YEAR: 2011

PARAMETER	Benchmark Value	QUALITY OR CONCENTRATION		UNITS
		JANUARY-JUNE	JULY-DECEMBER	
Chemical Oxygen Demand (COD)	120	139	95	mg/L
Total Suspended Solids (TSS)	100	274	129	mg/L
Oil and Grease (O&G)	15	3	10.3	mg/L
pH	6.0-9.0	6.4	6.4	S.U.

	JANUARY-JUNE	JULY-DECEMBER	
Sampling Period:	4/25/11	11/21/11	
Date of Storm Event Sampled:	~6	~15	hours
Duration of Event:	2.46	3.1	inches
Estimate of Rainfall Event:	3	6	days
Time Since Last Measurable Event:	525409	662100	gallons
Estimate of Total Discharged Volume:			

Comments: _____

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.

James D Upp 1/31/12
Signature & Date

James D. Upp, Plant Manager
Printed Name & Title of Official

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

PERMIT NUMBER: ARR00c197 PERMITTEE NAME: Georgia-Pacific Wood Products, LLC
 FACILITY NAME: Fordyce OSB Facility FACILITY PHYSICAL ADDRESS: 1 Georgia Pacific Rd Fordyce, AR 71742
 INDUSTRIAL SECTOR: A4 OUTFALL NO: 003 REPORTING YEAR: 2011

PARAMETER	Benchmark Value	QUALITY OR CONCENTRATION		UNITS
		JANUARY-JUNE	JULY-DECEMBER	
Chemical Oxygen Demand (COD)	120	115	132	mg/L
Total Suspended Solids (TSS)	100	79	89	mg/L
Oil and Grease (O&G)	15	1.4	19.5	mg/L
pH	6.0-9.0	7.3	7.0	S.U.

Sampling Period:	JANUARY-JUNE	JULY-DECEMBER	
Date of Storm Event Sampled:	4/25/11	11/21/11	
Duration of Event:	~6	~15	hours
Estimate of Rainfall Event:	2.46	3.1	inches
Time Since Last Measurable Event:	3	6	days
Estimate of Total Discharged Volume:	626069	788948	gallons

Comments: _____

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.

James D Upp 1/31/12
Signature & Date

James D. Upp, Plant Manager
Printed Name & Title of Official

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

PERMIT NUMBER: ARR00c197 PERMITTEE NAME: Georgia-Pacific Wood Products, LLC
 FACILITY NAME: Fordyce OSB Facility FACILITY PHYSICAL ADDRESS: 1 Georgia Pacific Rd Fordyce, AR 71742
 INDUSTRIAL SECTOR: A4 OUTFALL NO: 004 REPORTING YEAR: 2011

PARAMETER	Benchmark Value	QUALITY OR CONCENTRATION		UNITS
		JANUARY-JUNE	JULY-DECEMBER	
Chemical Oxygen Demand (COD)	120	179	254	mg/L
Total Suspended Solids (TSS)	100	90	79	mg/L
Oil and Grease (O&G)	15	5.2	7.2	mg/L
pH	6.0-9.0	6.5	6.9	S.U.

	JANUARY-JUNE	JULY-DECEMBER	
Sampling Period:	4/25/11	11/21/11	
Date of Storm Event Sampled:	~6	~15	hours
Duration of Event:	2.46	3.1	inches
Estimate of Rainfall Event:	3	6	days
Time Since Last Measurable Event:	93179	117421	gallons
Estimate of Total Discharged Volume:			

Comments: _____

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James D Upp 1/31/12
Signature & Date

James D. Upp, Plant Manager
Printed Name & Title of Official

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

PERMIT NUMBER: ARR00c197 PERMITTEE NAME: Georgia-Pacific Wood Products, LLC
 FACILITY NAME: Fordyce OSB Facility FACILITY PHYSICAL ADDRESS: 1 Georgia Pacific Rd Fordyce, AR 71742
 INDUSTRIAL SECTOR: A4 OUTFALL NO: 006 REPORTING YEAR: 2011

PARAMETER	Benchmark Value	QUALITY OR CONCENTRATION		UNITS
		JANUARY-JUNE	JULY-DECEMBER	
Chemical Oxygen Demand (COD)	120	156	124	mg/L
Total Suspended Solids (TSS)	100	60	38	mg/L
Oil and Grease (O&G)	15	1.6	7.2	mg/L
pH	6.0-9.0	6.2	6.5	S.U.

Sampling Period:	JANUARY-JUNE	JULY-DECEMBER	
Date of Storm Event Sampled:	4/25/11	11/21/11	
Duration of Event:	~6	~15	hours
Estimate of Rainfall Event:	2.46	3.1	inches
Time Since Last Measurable Event:	3	6	days
Estimate of Total Discharged Volume:	811157	1022190	gallons

Comments: _____

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.

James D Upp 1/31/12
Signature & Date

James D. Upp, Plant Manager
Printed Name & Title of Official



Georgia Pacific
Wood Products, LLC

Structural Panels Division
P.O. Box 1095
Fordyce, AR 71742
(870) 352-7252 Telephone
(870) 352-6613 Facsimile

CERTIFIED MAIL: 7011 1150 0000 2795 6522

AKGRC

January 31, 2012

Jamal Solaimanian, P.E., Ph.D.
General Permit Section Supervisor
Discharge Permits Branch, Water Division
Arkansas Department of Environmental Quality
5301 Northshore Drive
North Little Rock, AR 72118-5317

Re: Georgia-Pacific Wood Products LLC- Fordyce OSB Facility
Storm Water Annual Report and Discharge Monitoring Reports 2011 – NPDES Permit
No. ARR-00C197 – AFIN 07-00212

Dear Dr. Solaimanian:

Please find attached the Storm Water Annual Report and Discharge Monitoring Reports for the Georgia-Pacific Wood Products LLC – Fordyce OSB Facility. The Storm Water Annual Report and Discharge Monitoring Reports are being submitted as required by the Arkansas Storm Water General Permit, Part 3 Section 3.12.3. If you have any questions, please do not hesitate to contact Dewayne Henry at 870-353-7252.

Respectfully Submitted,
Georgia-Pacific Wood Products LLC

James D. Upp
Plant Manager
Fordyce OSB Facility

**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-00C197	
Permittee Name: Georgia-Pacific Wood Products, LLC.	
Facility Name: Fordyce OSB Facility	
Facility Physical Address (not mailing address): 1 Georgia Pacific Rd	
Facility City: Fordyce	Zip Code: 71742

Facility Contact Name: Dewayne Henry	Title: Environmental Coordinator
Facility Contact Phone Number (870) 352-7252	Facility Contact Email: edhenry@gapac.com
Reporting Period: January 1 st to December 31 st 2011 (Year)	

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

1. Benchmarks Exceeded

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

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

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

JAN 31 2012

Include any additional comments here:

JT 23344

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	2-24-2011
Visual Site Inspection #2 Date	4-25-2011
Visual Site Inspection #3 Date	9-22-2011
Visual Site Inspection #4 Date	12-21-11
Comprehensive Site Compliance Evaluation Date	2-21-2011

3. Stormwater Problems Identified At the Facility

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

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

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

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

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

Date Problem Discovered: N/A 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: 002- TSS benchmark was exceeded during the following sampling period (check all that apply):

1st Sampling period (January-June)

2nd Sampling Period (July-December)

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

A spoil pile in the southern portion of the watershed was spread and stabilized in July, 2011.

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.

Georgia Pacific is currently evaluating the need for additional BMPs in road side ditches in the outfall 002 watershed. The TSS concentration at outfall 002 decreased from 274 mg/L during the 1st half sampling event to 129 mg/L in the second event. Evaluation of the need for additional BMPs in the road ditches will continue during the 2012 sampling events.

4. Corrective Actions Planned or Taken cont'd

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

1st Sampling period (January-June)

2nd Sampling Period (July-December)

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

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

Evaluation of housekeeping procedures and schedules has been initiated and is continuing to identify practices to eliminate potential sources of organic materials discharging through the outfall. The COD value for the 2nd half was less than the Parameter Benchmark value; however housekeeping procedures will continue to be evaluated during subsequent sampling events.

4. Corrective Actions Planned or Taken cont'd

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

1st Sampling period (January-June)

2nd Sampling Period (July-December)

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

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

The Outfall 003 Watershed is being evaluated for a potential source of the organic material leading to the COD level elevated above the Parameter Benchmark Value. Outfall 003 also had an O&G concentration elevated above the Parameter Benchmark Value that may be associated with the elevated COD value. The watershed has been evaluated for organic spills with no spills located at present. Additionally, runoff water throughout the watershed is being evaluated during rain events for visible observance of an oil sheen. This investigation will continue through the next sampling event. If the COD and O&G values for the 1st half 2012 sampling event remains elevated and no source has been identified, a more thorough sight investigation may be initiated.

4. Corrective Actions Planned or Taken cont'd

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: 003-O&G benchmark was exceeded during the following sampling period (check all that apply):

1st Sampling period (January-June)

2nd Sampling Period (July-December)

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

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

As discussed in the corrective action planned or taken for Outfall 003 COD, the source attributing to the O&G concentration elevated above the Parameter Benchmark Value has not yet been identified. Runoff water throughout the watershed is being evaluated during rain events for visible observance of an oil sheen. This investigation will continue through the next sampling event. If the COD and O&G values for the 1st half 2012 sampling event remains elevated and no source has been identified, a more thorough sight investigation may be initiated.

4. Corrective Actions Planned or Taken cont'd

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

1st Sampling period (January-June)

2nd Sampling Period (July-December)

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

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

Evaluation of housekeeping procedures and schedules has been initiated and is continuing to identify practices to eliminate potential sources of organic materials discharging through the outfall. Housekeeping procedures will continue to be evaluated during subsequent sampling events.

4. Corrective Actions Planned or Taken cont'd

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

1st Sampling period (January-June)

2nd Sampling Period (July-December)

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

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

Evaluation of housekeeping procedures and schedules has been initiated and is continuing to identify practices to eliminate potential sources of organic materials discharging through the outfall. The COD concentration for the 2nd half sampling event was less than that for the 1st half but was still above the Parameter Benchmark Value. Housekeeping procedures will continue to be evaluated during subsequent sampling events.

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

6. Certification by Permittee

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

James D. Upp

Plant Manager

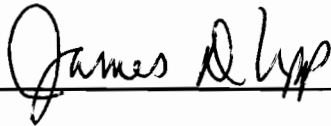
1/31/12

Printed Name

Title

Date

Signature*



*** Federal regulations require this report to be signed by the following person, or a duly authorized representative:**

- A. In the case of corporations, by a principal executive officer of at least the level of vice president.
- B. In the case of a partnership, by a general partner of a partnership.
- C. In the case of sole proprietorship, by the proprietor.
- D. In the case of a municipality, state, federal, or other public facility: by either a principal executive officer or ranking elected official.

A person is a duly authorized representative only if:

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

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

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