ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY
UST COMPLIANCE INSPECTION CHECKLIST

A. Ownership of Tank(s)	B. Location of Tank(s)
	(If same as "Owner", check here:)
Entergy Arkansas, LLC Owner Name (Corporation, Individual, Public Agency, or other entity)	Entergy Independence Facility Name or Company Site Identifier, as applicable
425 West Capital Ave.-22D Street Address	555 Point Ferry Rd. Street Address or State Road, as applicable
Pulaski County	Independence County
Little Rock, AR 72201 City, State Zip	Newark, AR 72562 City (nearest), State Zip
501 377-4030 Phone Number	870 698-4517 Phone Number
Contact Person at UST Location: Andy Wilson	Number of Tanks at This Location: 2
Phone Number: 870 698-4517	Registration certificate posted in a conspicuous location: ✔ Yes No

C. Tank Information

(1) Tank(s) presently in use	Tank # 1	Tank # 2	Tank #	Tank #
(2) If not in use, date last used				
(3) If emptied, verify 1" or less of product in tank				
(4) Month and Year Tank Installed (E-estimate or K-known)	K 5/21/1991	K 5/21/1991		
(5) Material of Construction (E-estimate or K-known)	K DW FRP	K DW FRP		
(6) Capacity of Tank (in gallons) (E-estimate or K-known)	K 15k	K 2.5k		
(7) Substance Stored (E-estimate or K-known)	diesel	gas		

D. Release Detection For Tanks

Release detection system must meet the performance standards in 280.43 or 280.44

(1) Automatic Tank Gauging				
(2) Vapor Monitoring				
(3) Groundwater Monitoring				
(4) Statistical Inventory Reconciliation (SIR)				
(5) Secondary Containment With Interstitial Monitoring **(required on piping installed after July 1, 2007)**	✔	✔		
(6) Other approved method (write in name of method)				

E. Release Detection For Piping

Release detection system must meet the performance standards in 280.43 or 280.44

(1) Check Type of Piping for each Tank	Pressure Pipe				
	Suction Pipe	✔	✔		
(2) FOR PRESSURE PIPING: Automatic Line Leak Detectors, and (check one)					
(a) Vapor Monitoring					
(b) Groundwater Monitoring					
(c) Secondary Containment With Interstitial Monitoring **(required on piping installed after July 1, 2007)**					
(d) Line Tightness Testing					
(e) Other approved method (write in name of method)					

Date: 3/6/2019

Please save your changes before proceeding.

Facility ID: 32000025 AFIN: 32-00042 Facility Name: Entergy Independence

RELEASE DETECTION FOR PIPING

Pressurized Piping

A method must be selected from each set. Where applicable indicate date of last test.

Set 1	**Tank #** 1	**Tank #** 2	**Tank #**	**Tank #**
(1) Automatic Flow Restrictor				
(2) Automatic Shut-off Device				
(3) Continuous Alarm System				
and				
Set 2				
(4) Annual Line Tightness Testing				
(5) Vapor Monitoring				
(6) If Vapor Monitoring, documentation of monthly monitoring is available?				
(7) Interstitial Monitoring				
(8) If Interstitial Monitoring, documentation of monthly monitoring is available?				
(9) Groundwater Monitoring				
(10) If Groundwater Monitoring, documentation of monthly monitoring is available?				
(11) Other Approved Method (specify in comments)				

Suction Piping

Indicate date of most recent test.

(12) Line Tightness Testing (required every 3 years)				
(13) Vapor Monitoring				
(14) Secondary Containment with Interstitial Monitoring				
(15) Groundwater Monitoring				
(16) Other Approved Method (specify in comments)				
(17) **No Leak Detection Required? (must answer yes to all of the following questions**)				
(a) Operates at less than atmospheric pressure	✔	✔		
(b) Has only one check valve, which is located directly under pump	✔	✔		
(c) Slope of piping allows product to drain back into tank when suction released	✔	✔		
(d) All information on suction piping is verifiable	✔	✔		

Comments:

Date: 3/6/2019

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Facility ID: 32000025 AFIN: 32-00042 Facility Name: Entergy Independence

RELEASE PREVENTION

Check (√) for compliance; "No" for noncompliance. Leave blank for "N/A".

I. SPILL PREVENTION	Tank # 1	Tank # 2	Tank #	Tank #
(1) Spill prevention device present and operational.	✔	✔		
(2) Spill prevention device in good repair.	✔	✔		
(3) Spill prevention device has no significant debris or liquid.	✔	✔		
(4) Spill prevention device is tested at least every three years, or is double walled and periodically monitored.				
II. OVERFILL PREVENTION				
(1) Overfill prevention device present and operational.	✔	✔		
A. Automatic shutoff device.				
(1) Verified by observations.		✔		
(2) Automatic shutoff device is functional and operational.		✔		
(3) Automatic shutoff device appropriate for system.		✔		
(4) Tested every three years.				
B. High level alarm				
(1) Present	✔			
(2) Alarm is functional and operational.	✔			
(3) Alarm is audible/visible to delivery driver.	✔			
(4) Tested every three years.				
C. Ball float valves				
(1) Presence verified thru records and/or observation.				
(2) Ball float is operational.				
(3) Ball float is appropriate for system.				
(4) Tested every three years.				
III. OPERATION AND MAINTENANCE				
(1) Repairs to UST system performed according to a recommended practice.				
(2) Repaired UST system tightness tested within 30 days of repair.				
(3) CP system tested within 6 months of any CP repair.				
(4) Records of UST system repairs.				
(5) CP system properly operated and maintained to provide continuous protection.	✔	✔		
(6) CP system performing adequately based on results of testing.				
(7) Walkthrough inspections are conducted at least every 30 days. Facilities must have records for the two most recent consecutive months, and for 10 of the last 12 months.				

Comments:

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RELEASE PREVENTION
(CONTINUED)

Check (√) for compliance; "No" for noncompliance. Leave blank for "N/A".

IV. CORROSION PROTECTION	System # 1		System # 2		System # _____		System # _____	
A. Material of Construction (Check all that apply)	Tank	Piping	Tank	Piping	Tank	Piping	Tank	Piping
NON-CORRODIBLE	✔	✔	✔	✔				
CORRODIBLE								
B. Internal lining								
(1) Installed according to a recommended practice.								
(2) Inspected in a timely manner and lining is in compliance.								
(3) Inspected according to approved protocol.								
(4) Corrective action taken on failed inspection.								
C. Galvanic (sacrificial) anodes								
(1) Designed by CP expert/specialist.								
(2) Tested in a timely manner.								
(3) Corrective action taken on failed test.								
(4) Metal components (i.e., flex lines, subpumps, etc.) protected as required.								
(5) Operational records available.								
D. Impressed current								
(1) Designed by CP expert/specialist.								
(2) Tested in a timely manner.								
(3) Rectifier is operational.								
(4) Verify records of 60 day check.								
(5) Corrective action taken on failed check.								
(6) Operational records available.								
(7) CP system maintained.								
(8) Metal components (i.e., flex lines, subpumps, etc.) protected as required.								
V. COMPATIBILITY All portions of the system are compatible with product stored.	✔	✔	✔	✔				

Comments:

Date: 3/6/2019

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Facility ID: 32000025 AFIN: 32-00042 Facility Name: Entergy Independence

FINANCIAL ASSURANCE

(1) Petroleum Storage Tank Trust Fund (PSTTF)? (check one) ✔ Yes No N/A

(2) Can PSTTF deductible be satisfied? ✔ Yes No N/A

If No or N/A for PSTTF, mechanism for meeting financial responsibility? _____

Other SOC

(1) Implementing agency has been notified of suspected release as required.	Yes	No	✔ N/A
(2) Hazardous substance UST system release detection meets requirements (i.e., either secondarily contained or otherwise approved by the implementing agency).	Yes	No	✔ N/A
(3) UST systems in temporary closure but still containing product, are compliant with release detection requirements (i.e., method present, operational, release investigated & reported as required.	Yes	No	✔ N/A

Operator Training/Certification Requirements

Class A designated operator Name Anthony R. Wilson # 000059	✔ Yes	No	
Class B designated operator Name Franklin A. Wells # 000299	✔ Yes	No	
Class C designated operator (minimum 1 operator per shift)	✔ Yes	No	*N/A
*Unmanned emergency generator facility (no class C required); OR	Yes	No	
*Unmanned facility in compliance with Arkansas State Fire Code (no class C required);	Yes	No	
If "NO", explain in comments			
Training records maintained for all Class A, B, and C operators	✔ Yes	No	
Class A and Class B Operators certified within 30 days of assuming O/M responsibilities	✔ Yes	No	
Class A and Class B Operators recertified within 45 days of delivery prohibition violation	Yes	No	✔ *N/A

Class C Operator(s) training:

• Conducted by ADEQ-certified Class A or Class B operator	✔ Yes	No
• Specific to facility	✔ Yes	No
• Documented by ADEQ provided forms	✔ Yes	No
• Adequately addresses delivery controls, monitoring of dispensing and emergency response	✔ Yes	No
• Trained prior to assuming Class C responsibility	✔ Yes	No

Comments:

Date: 3/6/2019

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Facility ID: 32000025 AFIN: 32-00042 Facility Name: Entergy Independence

INTERSTITIAL MONITORING

Manufacturer and Name of System: Veeder Root TLS 450

Date System Installed: 1/1/1991

Interstitial Space Is Monitored: ✔ Automatically Continuously Monthly

Check (√) for compliance; "No" for noncompliance. Leave blank for "N/A".

(1) All tanks in system are fitted with secondary containment & interstitial monitoring?	✔
(2) System is designed to detect release from any portion of UST system that routinely contains product?	✔
(3) Monitoring method documented as capable of detecting leak as small as .1 gal/hr. with at least 95% probability of detection & a probability of false alarm of no more than 5%?	✔
(4) Maintenance & calibration documents & records are available & indicate appropriate maintenance procedures for system have been implemented?	✔
(5) Monitoring box, if present, is operational?	✔
(6) If monitoring wells are part of leak detection system, monitoring wells are clearly marked & secured to avoid unauthorized access & tampering?	
(7) Interstitial space is monitored manually on monthly basis? (If yes, answer next question)	✔
(a) Equipment used to take readings is accessible and functional?	✔
(8) Tank is double-walled?	✔
(9) Verified documentation that system configuration alarm and battery backup operability, probes and sensors were all inspected at least annually?	
(10) Verified documentation that all sumps, installed after July 1, 2007, are double walled and monitored periodically, or are tested at least every three years?	
(11) Does UST system use a bladder or impervious liner as secondary containment? If so, explain in the comments.	
(12) Release detection system is operating properly (i.e., able to detect a release from any portion of the system that routinely contains product).	✔ YES NO
(13) Tanks and piping are monitored monthly for releases and records are available (must have records for the two most recent consecutive months and for 10 months of the last 12 months).	✔ YES NO

Comments:

Date: 3/6/2019

Please save your changes before proceeding.

Facility ID: 32000025 AFIN: 32-00042 Facility Name: Entergy Independence

INSPECTION SUMMARY

Check (√) the appropriate box:

✔ **Facility in compliance at time of inspection.**

Facility non-compliant with SOC Release Detection.

Facility non-compliant with SOC Release Prevention.

Facility non-compliant with SOC Financial Assurance requirements.

Facility non-compliant with both SOC Release Detection and SOC Release Prevention.

Facility has other non-SOC compliance issues.

I Jack Bissell certify that I have inspected the above named facility on 3/6/2019 (date/time).

Inspector's Signature: Jack Bissell Digitally signed by Jack Bissell Date: 2019.03.06 11:10:22 -06'00'

IF DELIVERY PROHIBITION IS INVOKED, THE DESIGNATED CLASS A AND CLASS B OPERATOR MUST BE RECERTIFIED WITHIN 45 DAYS OF THE FACILITY BEING RED-TAGGED. IF FUEL DELIVERY PROHIBITION IS NOT IMMEDIATELY IMPLEMENTED. FAILURE TO CORRECT SOC NONCOMPLIANCE ISSUES IN THE TIMEFRAME GIVEN MAY RESULT IN FUEL DELIVERY PROHIBITION.

This inspection checklist and summary serve as your Notice of Noncompliance (if violations are indicated).

You have until n/a **to provide evidence of compliance. Noncompliance issues could result in enforcement actions but not limited to, penalty assessments. Failure to resolve these noncompliance issues within the specified time frame could result in the escalation of enforcement action.**

Anthony R. Wilson		3/6/2019
Name of Owner/Owner's Representative (Please Print)	Signature of Owner/Owner's Representative	Date

Please save your changes before proceeding.

INSPECTION SUMMARY
(CONTINUED)

Comments:

There were no documented enforcement actions against this facility within the last 3 years.

Arrived for inspection at 10:00 am

Left new regs info with Andy Wilson.

Date: 3/6/2019

Please save your changes before proceeding.

SITE DIAGRAM

A CURRENT SITE DIAGRAM IS ON FILE FOR THIS FACILITY

Date: 3/6/2019

Please save your changes before proceeding.