

May 6, 2014

Walter Hixson, Vice President Hixson Lumber Sales P.O. Box 1466 Magnolia, AR 71754

RE: Compliance Inspection (Columbia Co) AFIN: 14-00209 NPDES Permit No.: ARR00B367

Dear Mr. Hixson:

On April 15, 2014, I performed an industrial stormwater compliance inspection of Hixson Lumber Sales in accordance with the provisions of the Federal Clean Water Act, the Arkansas Water and Air Pollution Control Act, and the regulations promulgated thereunder. A copy of the inspection report is enclosed for your records.

Please refer to the "Summary of Findings" section of the attached inspection report and provide a written response for each violation that was noted. This response should be mailed to the attention of the Water Division Inspection Branch at the address at the bottom of this letter or e-mailed to <u>Water-Inspection-Report@adeq.state.ar.us</u>. This response should contain documentation describing the course of action taken to correct each item noted. This corrective action should be completed as soon as possible, and the written response with all necessary documentation (i.e. photos) is due by <u>May 20, 2014.</u>

If I can be of any assistance, please contact me at youngm@adeq.state.ar.us or 501-837-2073.

Sincerely,

Ming

Michael D. Young District 8 Field Inspector Water Division

Inspection Report: Hixson Lumber Sales, AFIN: 14-00209, Permit #: ARR00B367

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	AFIN: 14-00209			NSPECTION REPORT PERMIT #: ARR00B367				
<u>I I D L Q</u>		UNTY: 14 Colu n	nhia		PDS #: 077622 MEDIA: WN			
ARKANSAS			AT: 33.240955 L				IVIEDIA. VVIN	
Department of Environmental Quality	GF		General Area				Point	
FACILITY INFORMAT	ΓΙΟΝ					FORMATION		
NAME: Hixson Lumber Sales			DATE(S):		5/2014			
LOCATION: 2500 S. Washington			ENTRY TIME:		14:21			
5			EXIT TIME:		16:38			
CITY: Magnolia, AR 71753			INSPECTION T	YPE:	Industria	I Stormwate	r	
RESPONSIBLE OFFI	CIAL		INSPECTOR ID	#: 10	153 S - St	ate		
CONTACTED DURING INSPECTION	CONTACTED DURING INSPECTION: No FACILITY TYPE: 2 - Industrial							
NAME: Walter Hixson	IE: Walter Hixson PERMIT EFFECTIVE DATE: 12/3/2010							
TITLE: Vice President	PERMIT EXPIRATION DATE: 6/30/2014							
COMPANY: Hixson Lumber Sales			FACILITY EVAL				actory	
MAILING P.O. Box 1466			FAYETTEVILLE					
ADDRESS:			FAYETTEVILLE					
CITY, STATE, ZIP: Magnolia, AR 717	753		IN	SPE	CTION PA	RTICIPANTS	5	
PHONE & EXT: 870-234-7820			NAME/TITLE/PH	-				
FAX: 870-234-5991			David Duke/HR					
EMAIL:			Ricky Geiggar/	Safet	y/870-234	1-7820		
OTHER:								
(S=S	Satisfact		LUATIONS isfactory, N=Not Applicable	/Evalua	ed)			
M PERMIT		FLOW MEASUR				MWATER		
M RECORDS/REPORTS	S	LABORATORY		5	FACIL	ITY SITE REV	/IEW	
S OPERATION & MAINTENANCE	S	S EFFLUENT/RECEIVING WATER M SELF-MONITORING			G PROGRAM			
M SAMPLING	Ν	SLUDGE HAND	LING/DISPOSAL	1	PRET	REATMENT		
** OTHER:								
		SUMMARY C	OF FINDINGS					

1.) Hixson Lumber Sales' SWPPP did not contain the SIC and NAICS codes on the cover page. This is a violation of permit condition 4.6.1.

2.) The site map did not include the number of acres. This is a violation of permit condition 4.6.4.a.

3.) The site map did not include locations of existing structural control measures; i.e. pipes, swales and ditches. This is a violation of permit condition 4.6.4.d.

4.) The site map did not include locations of all receiving waters in the immediate vicinity of the facility. In particular, there is a perennial stream that conveys stormwater from Hixson Lumber Sales once leaving the property. This is a violation of permit condition 4.6.4.e.

5.) The SWPPP did not include a summary of existing discharge sampling data. Lab reports were available for 2013 and 2012; however, 2011 was not available. It is required to keep all lab reports and COCs for the entire permit period. It is also required to summarize the discharge sampling data and have available in the SWPPP. This is a violation of permit condition 4.6.5.4.

6.) The SWPPP did not include an annual comprehensive site compliance evaluation for 2011, 2012 or 2013. Annual comprehensive site compliance evaluations were received by ADEQ and are available on the PDS tracker; however, copies must be kept with the SWPPP for the entire permit period. This is a violation of permit condition 4.6.10.2.

7.) Samples collected on April 18, 2013 were not indicated to be collected during a rain event. An examination of rainfall data available in the SWPPP indicated that rainfall of 0.75 inches fell on April 16, 2013 and no rainfall was reported for April 18, 2013. This is a violation of permit condition 3.7.2.b.

8.) The corrective action for TSS benchmark exceedance for sampling period January-June 2013 stated, "Review of BMPs and SWPPP on 12/25/2012." This corrective action is not appropriate for correcting

exceedances for January-June 2013 sampling because the review was before the reported exceedance. Additionally, there were no corrective actions for exceedances of copper for both sampling periods in 2013. This is a violation of permit condition 3.11.2.

9.) DMRs were not available in the SWPPP. You are required to keep copies of all DMRs submitted to ADEQ. This is a violation of permit condition 3.12.3.a.

10.) There was not a copy of the annual comprehensive evaluation in the SWPPP for 2011, 2012 or 2013. This is a violation of permit condition 3.12.3.b.

11.) There was not a copy of corrective actions in the SWPPP for benchmark exceedances in 2011, 2012 or 2013. This is a violation of permit condition 4.6.10.1.

GENERAL COMMENTS

Hixson Lumber Sales updated their SWPPP and site map in November 2012. When updating the site map, the consulting company used by Hixson Lumber Sales added Outfall 002 to the site map and completed sampling in 2013. However, the sample point for collection of stormwater at Outfall 002 is not representative of stormwater from Hixson Lumber Sales. Samples for Outfall 002 were indicated by Mr. Duke to be collected in a perennial stream that is ~60 yards from the property boundary of Hixson Lumber Sales. I advised Mr. Duke to speak with the consulting firm and visit the location of the proposed Outfall 002 during heavy rainfall to locate where the outfall is draining the property. There were no indications of heavy flow off of the property at proposed Outfall 002; however, there were indications of standing water in the area. It is recommended that Hixson Lumber Sales evaluates the location to ensure sampling is being performed appropriately. If it is determined that Outfall 002 needs to be added to ensure compliance, this outfall needs to be added to the application for coverage following the expiration of the current permit (expires 6/30/14).

Samples for Outfall 001 were indicated to be collected at the confluence of an additional drainage area that included drainage from off-site. It was recommended that the sample location be moved upstream to capture only stormwater off Hixson Lumber Sales property.

Mr. Duke informed me that pH paper was being used to measure pH. This method is not appropriate; however, it was indicated by Mr. Duke that a pH meter has been ordered.

As a reminder to Hixson Lumber Sales, permit condition 3.12.1. states, "The permittee shall retain records of all monitoring information, inspections reports, SWPPP, NOI and any other documentation of compliance with permit requirements for a period of at least 3 years from the date that coverage under this permit expires or is terminated. Such information shall include all calibration and maintenance records and all original recordings for continuous monitoring instrumentation, copies of all reports required by this permit, and records of all data used to complete the application for this permit." Please keep all records for current permit cycle and for 3 years from the date that coverage expires.

Miller		
INSPECTOR'S SIGNATURE: Michael D. Yo	ung D	DATE: 04/16/2014
Kenri MS Coly		
SUPERVISOR'S SIGNATURE:	Kerri McCabe	DATE: 5/5/2014

Figure 1. Overview of Hixson Lumber Sales with property boundary and outfall locations indicated.



ADEQ Water NPDES Inspection	AFIN: 14-00209	Permit #: ARR00B367

Inspection Form Legend: S = Satisfactory, M = Marginal, U = Unsatisfactory, Y = Yes, N = No, NI = Not Implemented, NA = Not Applicable, NE = Not Evaluated –

If Y and a NI are check it means it is in the SWPPP but not implemented in the field which is a violation.

SECTION A: PERMIT VERIFICATION	
PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS	⊡S ØM ⊡U ⊡NA ⊡NE
1.CORRECT NAME AND MAILING ADDRESS OF PERMITTEE:	🗹 y 🗆 n 🗆 na 🗆 ne
2.NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES:	Dy 🗹n Ona One
3.NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT:	Dy Øn Ona One
4.ALL DISCHARGES ARE PERMITTED:	⊡y Øn ⊡na ⊡ne
Comments: Outfall 002 is not recognized as a permitted discharge. ADEQ does not have reco the site plan and SWPPP to include Outfall 002. However, Outfall 002 location was questional general comments.	
SECTION B: STORM WATER POLLUTION PREVENTION PLAN EVALUATION	
PERMITTEE SWPPP MEETS PERMIT REQUIRMENTS	OS ØM OU ONA ONE
1. Is the SWPPP available for review by ADEQ? (Part 4.2)	Øy On Oni Ona One
2. Does the SWPPP contain facility name, general permit tracking number, facility physical address, and SIC and NAICS codes? (Part 4.6.1)	
3. Pollution Prevention Team	
A. Does the SWPPP identify specific individuals or positions?(Part 4.6.2)	🗹 Y 🗆 N 🗆 NI 🗆 NA 🗆 NE
B. Does the SWPPP outline the responsibilities of each member of the Pollution Prevention Team? (Part 4.6.2)	
4. Does the SWPPP contain a facility description (process diagram, general layout, storage of raw materials, the flow of goods and materials through the facility and seasonal variations)? (Part 4.6.3)	
5. Does the facility site map contain the following items?	
A) The size of the property in acres? (Part 4.6.4.a)	
B) The location and extent of significant structures and impervious surfaces? (Part 4.6.4.b)	
C) The direction of stormwater flow using arrows? (Part 4.6.4.c)	
D) The locations of all existing structural control measures? (Part 4.6.4.d)	
E) The locations of all receiving waters in the immediate vicinity of the facility? (Part 4.6.4.e)	Dy Øn Oni Ona One
F) The locations of all stormwater conveyances including ditches, pipes, and swales? (Part 4.6.4.f)	
G) The locations of potential pollutant sources? (Part 4.6.4.g)	🗹 y 🗆 n 🗆 ni 🗆 na 🗆 ne
H) The locations of all stormwater monitoring points? (Part 4.6.4.h)	🗹 y 🗆 n 🗆 ni 🗆 na 🗇 ne
I) The locations of stormwater inlets and outfalls with unique identification code for each outfall with indications if one or more outfall is being treated as "substantially identical" and an approximate outline of the areas draining to each outfall? (Part 4.6.4.i)	Øy On Oni Ona One
J) Where the stormwater discharges to municipal separate storm sewer system (MS4), if applicable? (Part 4.6.4.j)	□y □n Øni □na □ne
K) The locations and descriptions of all non-stormwater discharges identified in the SWPPP? (Part 4.6.4.k)	
L) The locations of the following activities if they are exposed to precipitation? (Part 4.6.4.I)	
Fueling Stations	□y □n □ni Øna □ne
Vehicle and equipment maintenance and/or cleaning areas	🗹 y 🗆 n 🗆 ni 🗆 na 🗇 ne
Loading and unloading areas	
Locations used for the treatment, storage, or disposal of waste	
Liquid storage tanks	Øy 🗆n 🗆ni 🖾na 🗇ne
Processing and storage areas	🗹 y 🗆 n 🗆 ni 🗆 na 🗇 ne
Immediate access roads and rail lines used or traveled by carriers of raw materials, manufactured products, waste material, or by-byproducts used or created by the facility	□y □n □ni Øna □ne
Transfer areas for substances in bulk	Dy On Oni Øna One
Machinery	🗹 Y 🗆 N 🗆 NI 🗆 NA 🗆 NE

ADEQ Water NPDES Inspection

AFIN: 14-00209

Permit #: ARR00B367

M) The locations and sources of run-on to the site from adjacent property that contains significant quantities of pollutants? (Part 4.6.4.m)	
6. A description of potential pollutant sources	
 A) An inventory of industrial activities which have been or may potentially be sources of significant amounts of pollutants? (Part 4.6.5.1) 	
B) An inventory of all types of materials handled at the site that might potentially be exposed to precipitation? (Part 4.6.5.2)	Øy On Oni Ona One
C) A list of significant spills and significant leaks of toxic or hazardous pollutants that have occurred in areas exposed to precipitation or drained to a stormwater conveyance for three years prior to the effective date of the permit. (Part 4.6.5.3)	
D) A summary of existing discharge sampling data (Part 4.6.5.4)	🛛 Y 🗹 N 🗆 NI 🗆 NA 🗆 NE
E) Risk Identification and Summary of Potential Pollutant Sources (Part 4.6.5.5)	🗹 Y 🗆 N 🗆 NI 🗆 NA 🗇 NE
7. Measures and Controls –SWPPP must describe how these are used.	
A) Best Management Practices (BMPs) (Part 4.6.6.1)	🗹 Y 🗆 N 🗆 NI 🗆 NA 🗇 NE
B) Exposure Minimization (Part 4.6.6.2)	🗹 y 🗆 n 🗆 ni 🗆 na 🗇 ne
C) Good Housekeeping (Part 4.6.6.3)	
D) Preventative Maintenance (Part 4.6.6.4)	
E) Spill Prevention and Response Procedures (Part 4.6.6.5)	
F) Employee Training Procedures (Part 4.6.6.6)	
G) Erosion and Sediment Control (Part 4.6.6.7)	
H) Management of Run-on and Runoff (Part 4.6.6.8)	
I) Additional Requirements for Salt Storage (Part 4.6.6.9)	
8. Authorized Non-stormwater Discharges (Part 4.6.7) – list must be in SWPPP.	Oy On Øni Ona One
9. Evaluations and Inspections (Part 4.6.10)	
A) Visual Site Inspections (minimum 4/year) (Part 4.6.10.1)	🗹 y 🗆 n 🗆 ni 🗆 na 🗇 ne
At least one visual inspection conducted during a rain event	Øy On Oni Ona One
Inspections recorded and include: date of inspection, person doing inspection; major observations, and corrective actions required.	Øy On Oni Ona One
B) Comprehensive Site Compliance Evaluation (Annual) (Part 4.6.10.2)	□y Øn □ni □na □ne
Comments:	
SECTION C: MONITORING	
PERMITTEE MONITORING MEETS PERMIT REQUIRMENTS	⊡S ØM ⊡U ⊡NA ⊡NE
1. Is the facility one of the four Effluent Guideline Facilities in the Permit? (Cement MFG, Fertilizer MFG, Steam Electric coal pile, or Paving and Roofing Materials)(Part 3.1.1)	Dy Øn Oni Ona One
A) Are all outfalls from the regulated process being sampled? (Part 3.1.3)	🛛 Y 🖾 N 🖾 NI 🖉 NA 🖾 NE
B) If coal pile run off is monitored, are all other stormwater flows excluded? (Part 3.1.1)	DY ON ONI ØNA ONE
2 Which of the monitoring categories is this facility subject to: (Part 3.3)	
A) Are samples being collected for each semi-annual monitoring period (Part 3.5)	🗹 y 🗆 n 🗆 ni 🗆 na 🗇 ne
B) Are samples being collected from the location specified in the NOI and SWPPP (Part 3.6)	
C) Has the permittee determined that some of the outfalls are similar? (Part 3.7.1)	
Are the conditions on the ground still the same as documented for the similar outfalls (Part 3.7.1)	
D) Are all parameters for the monitoring category being sampled and analyzed? (Part 3.7.2)	
E) Were the samples collected during a measureable storm event? (Part 3.7.2.b)	
F) Were the samples properly preserved and analyzed? (Part 3.7.2)	
G) Are the sample locations suitable for the collection of a representative sample? (Part 3.3)	DY 🗹 N DNI DNA DNE
3. Has any of the monitoring revealed an exceedance of the benchmark values for this facility?(Part 3.11.2)	🗹 y 🗆 n 🗆 ni 🗆 na 🗇 ne
A) Has a process to develop a corrective action plan been started within 30 days of exceedances? (Part 3.11.2)	□y Øn □ni □na □ne
B) If four monitoring periods have passed without an exceedance of a benchmark value, has the permittee requested a reduction in monitoring? (Part 3.11.1)	Dy Øn Oni Ona One
Comments:	
SECTION D: RECORD KEEPING AND REPORTING	

ADEQ Water NPDES Inspection

AFIN: 14-00209

Permit #: ARR00B367

PERMITTEE RECORD KEEPING AND REPORTING MEETS PERMIT REQUIRMENTS	□S ØM □U □NA □NE
1. Have DMRs for the previous year of monitoring been submitted to ADEQ and is a copy in the file? (Part 3.12.3.a)	DY 🗹 N DNI DNA DNE
Are the DMRs properly completed?	🗹 y 🗆 n 🗆 ni 🗆 na 🗇 ne
Does the permittee have copies of lab reports and chain of custody records?	🗹 Y 🗆 N 🗆 NI 🗆 NA 🗆 NE
Are the appropriate records of the measureable storm event and sampling being kept? (Part 3.7.2.e)	🛛 Y 🖉 N 🖾 NI 🖾 NA 🖾 NE
2. Has a copy of the annual comprehensive evaluation been submitted to the agency and is a copy on file? (Part 3.12.3.b)	Dy Øn Oni Ona One
3. Is permittee keeping copies of inspections and corrective actions on file? (Part 4.6.10.1)	□y Øn □ni □na □ne
4. Are copies of training records being kept on file? (Part 4.6.6.6)	🗹 y 🗆 n 🗆 ni 🖾 na 🗇 ne
5. Is there a list of significant spills and leaks being maintained? (Part 4.6.5.3)	🗹 Y 🗆 N 🗆 NI 🗆 NA 🗆 NE
Comments: Annual comprehensive evaluations and DMRs were submitted to ADEQ but n	ot kept in file.
SECTION E: FACILITY TOUR	
PERMITTEE FACILITY TOUR MEETS PERMIT REQUIRMENTS	ØS OM OU ONA ONE
1. Any evidence of spills or leaks that have not been properly cleaned up as required by the SWPPP?	🛛 Y 🖉 N 🖾 NI 🖾 NA 🖾 NE
2. Any evidence of erosion or un-stabilized ground?	🛛 Y 🖉 N 🗆 NI 🗆 NA 🗆 NE
3. Any controls, structures, or storage areas that are not as identified in the SWPPP?	ØY 🗆 N 🗆 NI 🗆 NA 🗆 NE
4. Any non-stormwater discharges <u>not identified in the SWPPP?</u> (see Part 1.7 of permit for list of allowable non-stormwater discharges)	□y Øn □ni □na □ne
5. Any non-stormwater discharges that are not allowed under this permit? (see Part 1.7 of permit for list of allowable non-stormwater discharges)	□y Øn □ni □na □ne
6. Are BMPs being properly operated and maintained? (Part 6.1)	🗹 y 🗆 n 🗆 ni 🗆 na 🗇 ne
7. Are housekeeping procedures being implemented and are they sufficient?	Øy 🛛 n 🖓 ni 🖓 na 🖓 ne
Comments:	

Dear Mr. Young,

On behalf of Hixson Lumber sales located in Magnolia, AR, please find attached the response to the violations noted during the inspection conducted on April 15, 2014. As you will see all corrective actions have been completed and documented. Please let me know if I can provide any additional information. Sincerely, Nancy

Nancy Farrís

ENVIRONMENTAL SERVICES GROUP, INC. 2300 Cottondale Ln., Suíte 260 Líttle Rock AR 72202 501-663-4731 (ph) 501-663-7798 (fax)



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Environmental Services Group Incorporated Safety / Health / Environmental / Regulatory Services

May 19, 2014

Arkansas Department of Environmental Quality Water Division, Enforcement Branch 5301 Northshore Drive North Little Rock, Arkansas 72118

RE: Response to compliance inspection at Hixson Lumber on April 15, 2014. Permit #: ARR00B367, AFIN: 14-00209

Dear Mr. Young:

In response to the compliance inspection performed at Hixson Lumber located in Magnolia, AR, the following answers and corrective actions are given:

Corrective Actions to Findings:

1.) The NAICS code has been added to the plan and both the NAICS and SIC codes have been added to the cover page (Appendix A)

2.) Number of acres has been added to the site map. (Appendix B)

3.) The location of existing structural control measures have been added to the site map. (Appendix B)

4.) Receiving waters in the immediate vicinity of the facility were added to the site map. (Appendix B)

5.) A copy of the 2011 sampling analysis and chain of custody has been added to the SWPPP, a copy is included in this response. (Appendix C)

6.) A copy of the annual comprehensive site compliance evaluation (report) for 2011, 2012 and 2013 have been added to the SWPPP, a copy is included in this response. (Appendix D)

7.) The sample was collected on April 18, 2013, when the event was recorded in the rain log the wrong date was written by mistake. The rain log has been corrected and initialed. A copy of the corrected rain log is included in this response along with a copy of the Chain of Custody showing the date of collection. (Appendix E)

8.) A more detailed corrective action report has been submitted to ADEQ, a copy of corrective action is included in this response. (Appendix F)

9.) A copy of the DMRs submitted to ADEQ have been added to the SWPPP, a copy of all DMRs is included in this response (Appendix G)

10.) A copy of 2012 and 2013 annual comprehensive evaluation has been added to the SWPPP and a copy is included in this response (Appendix H). A comprehensive evaluation was not completed in 2011, the facility recognized that there were areas they needed assistance with complying with permit and contracted ESGI to help with in these areas.

11.) A copy of the Annual compliance report for 2011, 2012 and 2013 has been added to the SWPPP; each of these reports include the corrective actions for benchmark exceedances. A copy of each of these reports is included in this response. (Appendix D)

A review of the site map and the sampling outfalls was conducted by Hixson Lumber Sales and ESGI, the consulting company. It was determined that the updated site map in 2012 had outfall 001 incorrectly labeled it should have been placed where outfall 002 was named. It was also determined that there is not a second outfall and to remove it from the site map and continue sampling from outfall 001, with continued monitoring. The site map has been revised and placed in the SWPPP. (Appendix B)

Also, it was noted that Mr. Duke had ordered a pH meter to ensure proper monitoring of pH was conducted. Mr. Duke confirmed that the pH meter was received and will be used for all future analysis.

If you have any questions about this response or need additional information, please contact Gary Ingle at (501) 663-4731 or by e-mail at info@esgisafety.com.

Sincerely,

Gary Ingle President/CEO Environmental Services Group, Inc. Appendix A



STORM WATER POLLUTION PREVENTION PLAN

Hixson Lumber Sales, Inc. 2500 South Washington Street Magnolia, AR, 71753 ARR00B367 SIC: 2491, NAICS: 32114

NOVEMBER, 2012

Prepared By: **ENVIRONMENTAL SERVICES GROUP, INC.** WindRiver Office Building, Suite 260 2300 Cottondale Lane Little Rock, AR 72202 (501) 663-4731 Telephone 1-800-887-6752 Toll Free (501) 663-7798 Facsimile

INTRODUCTION

1.1 Purpose of the Plan

On September 14, 1998, the Environmental Protection Agency (EPA) authorized the State of Arkansas to implement its ADEQ/National Pollutant Discharge Elimination System (NPDES) program. ADEQ/NPDES is a state program to carry out the National Pollutant Discharge Elimination System (NPDES), a federal regulatory program to control discharges of pollutants to surface waters of the United States. This Storm Water Pollution Prevention Plan (SWP3) for **Hixson Lumber Sales, Inc., Magnolia, AR**, fulfills the requirements of the Arkansas Commission on Environmental Quality (ADEQ) NPDES General Permit Number ARR00B367 Relating to Storm Water Discharges associated with Industrial Activity. As required by 40 CFR 122.46(a), ADEQ reissues NPDES every 5 years. The NPDES finalized General Permit number ARR00B367 in June, 2009. The general permit provides authorization for point source discharges of storm water associated with certain industrial activities to water in the State of Arkansas. **Storm Water Tracking Number is ARR00B367**.

The Magnolia Site is eligible for coverage under this general permit since the primary Standard Industrial Classification (SIC) code for the facility is **2491** North American Industry Classification System (NAICS) code **32114**, **"Wood Preserving"**, falls into the designated **Sector** A, sub-sector A**2**, meets the general conditions covered under the general permit. The Magnolia Site has submitted a **Notice of Intent** (**Appendix A**) to be covered under the General Permit. This SWP3 has been developed in accordance with Parts I, through Part VII of the Permit. Pertinent excerpts from the General Permit are included in Appendix B to this SWP3.

The SWP3 identifies potential sources of pollution that may reasonably be expected to affect the quality of storm water discharges associated with industrial activity from the Site. The SWP3 further describes the implementation of practices to reduce pollutants and the potential for pollutants in storm water discharges associated with industrial activity at the facility and to ensure compliance with the terms and conditions of the NPDES General Permit.

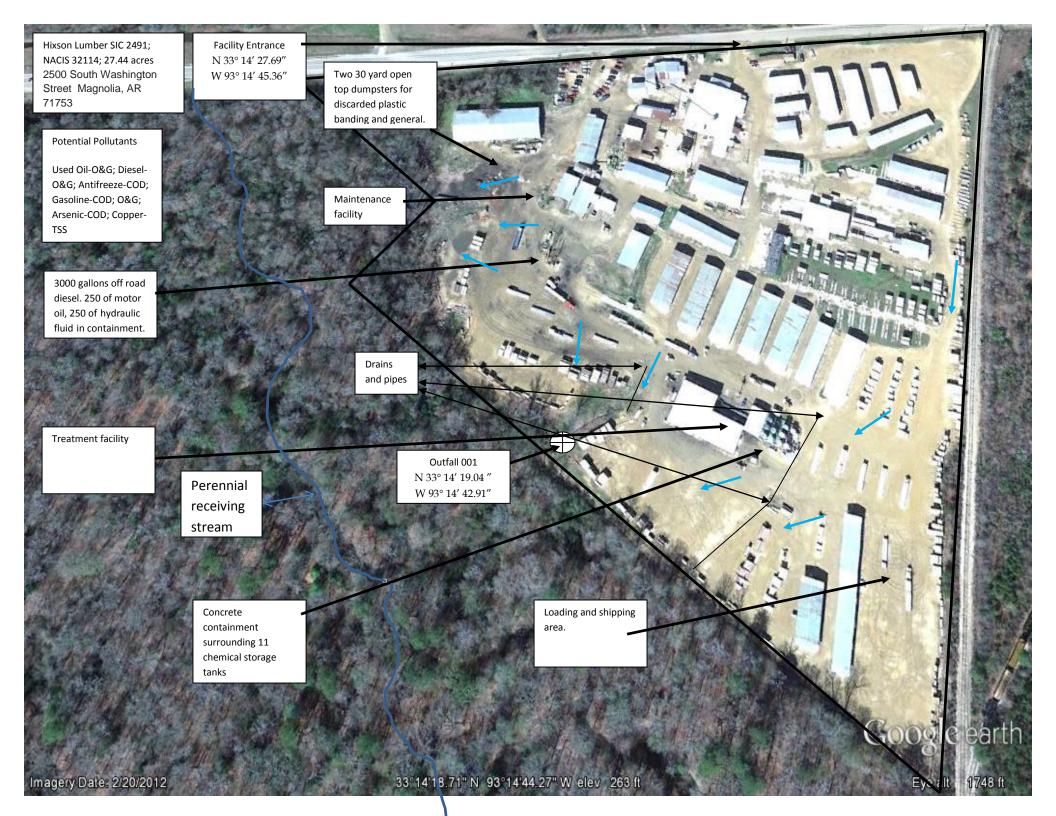
Hixson Lumber Sales, Inc., Magnolia, AR has submitted a signed Notice of Intent (NOI), along with the \$200 application fee to the ADEQ, to be covered under the NPDES General Permit ARR00B367. A copy of the complete, signed NOI is to be provided to the Pollution Prevention Team Leader designated in Table 1 within 3 days of signing. Should Hixson Lumber Sales, Inc., Magnolia, AR decide to terminate coverage under the Storm Water General Permit, it is the responsibility of Hixson Lumber Sales, Inc., Magnolia, AR, to complete and submit a Notice of Termination (NOT) to the ADEQ according to Part 1.8, of the permit with a copy provided to the Pollution Prevention Team Leader within 5 days of submittal to the ADEQ.

1.2 Definitions

Storm Water Pollution Prevention Plan (SWP3):

A SWP3 includes a series of steps and activities to identify sources or potential sources of pollution that may affect the quality of storm water discharges from the facility. This SWP3 includes selection and implementation of actions, or Best Management Practices ("BMP's"), to prevent or control pollution and

Appendix B



Appendix C



220 North Knoxville Russellville, Arkansas 72801 Phone (479) 968-6767 Fax (479) 968-1956 www.eegonline.com

February 11, 2011

Mr. David Duke Hixson Lumber Company 2500 S. Washington Street Magnolia, AR. 71753

RE: Storm Water 2011

Dear Mr. Duke:

Your DMR report should be signed by the permit holder and submitted no later than January 31, 2012, to:

NPDES Permits Branch/Storm Water Arkansas Department of Environmental Quality 5301 North Shore Drive North Little Rock, Arkansas 72118-5317

The information listed in the DMR report is from the storm event on February 1, 2011, only. If additional storm water samples were collected during this reporting period, the DMR report will need to be amended.

Please note: The COD value reported for this storm water event exceeds current ADEQ guidelines listed as parameter benchmark values for Outfall 001.

The Parameter Benchmark Values of your required analyses are:

pH 6.0-9.0 s.u.	COD 120 mg/L	Arsenic 0.169 mg/L
Oil and Grease 15 mg/L	TSS 100 mg/L	Copper 0.0756 mg/L

If you have any questions, please call me at (479) 968-6767 or (800) 530-7968.

Sincerely,

a (Le

Mike Cole Laboratory Supervisor

Enclosures



220 North Knoxville Russellville, Arkansas 72801 Phone (479) 968-6767 Fax (479) 968-1956 www.cegonline.com

> February 8, 2011 Control No. 145086 Page 3 of 4

Hixson Lumber Company 2500 S. Washington Magnolia, AR

ANALYTICAL RESULTS

AIC No. 145086-1

Sample Identification: L988	3-043946 0211020 Outfall 001	1 2-1-11 9:00am			
Analyte		Result	RL	Units	Qualifier
Total Suspended Solids		28	4	mg/l	
USGS 3765	Prep: 07-Fob-2011 0947 by 292	Analyzed: 08-Feb-2	2011 0830 by 292	Batch: W35231	

AIC No. 145086-2

Sample Identification: L988-043946 0211021 Outfall 001 2-1-11 9:10am

Analyte	_	Result	RL	Units	Qualifier
COD		290	10	mg/l	
HACH 8000	Prep; 07-Feb-2011 1603 by 285	Analyzed: 08-Feb-2	011 0913 by 285	Batch: W35240	

AIC No. 145086-3

Sample Identification: L988-043946 0211022 Outfall 001 2-1-11 9:20am

Analyte		Result	RL	Units	Qualifier
Oil and Grease		< 5	5	mg/l	
EPA 1664A	Prep: 03-Feb-2011 1334 by 100	Analyzed: 03-Feb-	2011 1626 by 100	Batch; B6732	

AIC No. 145086-4

Sample Identification: L988-043946 0211023 Outfall 001 2-1-11 9:30am

Analyte		Result	RL	Units	Qualifier
Arsenic EPA 200.7	Prep: 03-Feb-2011 1342 by 297	< 0.05 Analyzed: 03-Fe	0.05 ab-2011 1737 by 270	mg/l Batch: S29442	
Copper EPA 200.7	Prep: 03-Feb-2011 1342 by 297	0.0064 Analyzed: 04-Fe	0.006 96-2011 1223 by 270	mg/l Batch: S29442	





220 North Knoxville Russellville, Arkansas 72801 Phone (479) 968-6767 Fax (479) 968-1956 www.eegonlinc.com

> February 8, 2011 Control No. 145086 Page 4 of 4

Hixson Lumber Company 2500 S. Washington Magnolia, AR

DUPLICATE RESULTS

				RPD				
Analyte	AIC No.	Result	RPD	Limit	Preparation Date	Analysis Date	DII	Qual
Oil and Greese	145057-1	< 5 mg/l			03Feb11 1334 by 100	03Feb11 1626 by 100		
Batch: (36732 Duplicate	< 5 mg/l	0,00	20.0	03Feb11 1334 by 100	03Feb11 1626 by 100		
Total Susponded Solids	145075-1	9,6 mg/l			07Feb11 0947 by 292	08Feb11 0830 by 292		
Batch: W	35231 Duplicate	9,8 mg/l	2.06	20.0	07Feb11 0948 by 292	08Feb11 0830 by 292		
Total Suspended Solids	145078-2	22 mg/l			07Feb11 0947 by 292	Q8Feb11 0830 by 292		
Batch: W	35231 Duplicate	22 mg/l	1.80	20,0	07Feb11 0948 by 292	08Feb11 0830 by 292		

LABORATORY CONTROL SAMPLE RESULTS

Analyte	Spike Amount	%	Limits	RPD	Limit	Batch	Preparation Date	Analysis Date	DII	Qual
COD	100 mg/l	99,4	85.0-115			W35240	07Feb11 1603 by 285	08Feb11 0913 by 265		
Arsenic	5 mg/l	97.7	85.0-115			\$29442	03Feb11 1046 by 297	03Feb11 1650 by 270		
Copper	0,5 mg/l	92.8	85.0-115			529442	03Feb11 1046 by 297	04Feb11 1138 by 270		
Oil and Grease	40 mg/l	98.5	78.0-114			86732	03Feb11 1334 by 100	03Feb11 1626 by 100		

MATRIX SPIKE SAMPLE RESULTS

		Spike							
Analyte	Sample	Amount	%	Limits	Batch	Preparation Date	Analysis Date	Dil	Qual
COD	145023-1	100 mg/l	97.2	80.0-120	W35240	07Feb11 1603 by 265	06Feb11 0913 by 285		
	145023-1	100 mg/l	97.2	80.0-120	W35240	07feb11 1603 by 285	08Feb11 0913 by 205		
	Relative Per	rcent Difference:	0.00	10.0	W35240				
Arsenic	144919-1	5 mg/l	95.1	75.0-125	829442	03Feb11 1622 by 297	03Feb11 1652 by 270		
	144919-1	5 mg/l	94.0	75.0-125	S29442	03Feb11 1622 by 297	03Feb11 1656 by 270		
	Relative Per	rcant Difference:	1.15	20.0	S29442				
Copper	144919-1	0.5 mg/l	95.6	75.0-125	S29442	03Feb11 1622 by 297	04Fcb11 1141 by 270		
	144919-1	0,5 mg/l	96.4	75.0-125	S29442	03Feb11 1622 by 297	04Feb11 1144 by 270		
	Rolative Pe	rcent Difference:	0.440	20,0	S29442				

LABORATORY BLANK RESULTS

				QC			
Analyte	Result	RL	PQL	Sample		Analysis Date	Qual
COD	< 10 mg/l	10	10	W35240-1	07Feb11 1603 by 285	C8Feb11 0913 by 285	
Total Suspended Solids	< 4 mg/i	4	4	W35231-1	07Fcb11 0948 by 292	08Feb11 0830 by 292	
Arsenic	< 0.05 mg/l	0.05	0.05	829442-1	03Feb11 1046 by 297	03Feb11 1547 by 270	
Copper	< 0.006 mg/i	0.006	0.006	S29442-1	03Feb11 1046 by 297	04Feb11 1135 by 270	
Oil and Grease	< 5 mg/l	5	5	B6732-1	03Feb11 1334 by 100	03Fob11 1826 by 100	





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Client: Hixson Lumber Sales - Magnolia Date of Sample: 2/1/11 Time of Sample: 0900 Date Received: 2/2/11 Sample Collected From: Outfall 001 Sample Collected By: David Duke Sample Matrix: Storm Water Job Number: L988-043946 Date of Report: 2/8/2011 P.O. Number: Not Given Control Number: 0211020 Sample I.D.: 001 Sample Delivered By: UPS

ANALYSIS REPORT

Parameter	Init.	Date	Time	Concentration	Units	Method	Edition Or Ref.
pH	AR	2/2/11	1325	8.0		4500 H+	18 th
		QU	ALITY	CONTROL DA	ГА		
Parameter		Orig. Val	lue	Dup. Valı	Je	Rel. %	Difference
pН		6.4		6.4		C	0.00

All instruments have been calibrated on a daily basis. Each day, Quality Control procedures have been performed on 10% of all analysis.

Reviewed By

Reviewed By

145086

1088-043944

Environmental Enleprise Group, Inc. 220 North Knoxville Russellville, Arkansas 72801 (479) 968-6767 Fax (479) 968-1956

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Environmental Enterprise Group, Inc.

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Appendix D

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 B 367_	
Permittee Name: David Du	Ke/RANCY Norris
Facility Name: Hixson Lu	mber Sales
Facility Physical Addr ss (<u>not</u> m 2500 S. Cashing	nailing address):
Facility City: Magnitia	Zip Code: 7/753

	Title: H/R - Safety
Facility Contact Phone Number 870 234 7830	Facility Contact Email: down On blsmagnelin, Con
	to December 31 st <u>Zc</u> <u>11</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 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 $(Jan 1^{st} - Dec 31^{st})$? 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 **U**-Complete Sections 2, 3, 4, 5 and 6.

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

Include any additional comments here:

2. Evaluations and Inspections

Facilities are required to complete a minimum of 4 visual site inspections as d 1 comprehensive site compliance evaluation per year. Please include the dates of these inspections is 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	e Inspection #1 Date	2/1/11	
Visual Site	e Inspection #2 Date	4/25/11	
Visual Sit	e Inspection #3 Date	7/8/11	
Visual Site	e Inspection #4 Date	10/14/11	
Comprehensive Site Complia	nce Evaluation Date	12/16/11	

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 stornwater 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:	
Date Problem Discovered:	Describe the Problem:	
Date Problem Discovered:	Describe the Problem:	
Date Problem Discovered:	Describe the Problem:	

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):

☐ 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.

The COD was Exceeded. When visual inspections were done. Corrective action is to Re Sample and Continue to monitor the outful and if there becomes a ProBlem take the Appropriate Measure to Correct

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 yet been completed</u>. Identify the date you expect to complete corrective actions.

Znd SAmpling period (July-Dec) I Apologie there was no Sample taken during The Second half of year, due to the lack of Rainfall (Drought). Corrective action will be to Make Sure Sampling Criteria is Met for the year 2012.

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

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."

Parid Duke	HR	- SnFety	1-30-12
Printed Name	T itle	/	Date
Signature* Lit Auto			

* 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 documentato 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@adeg state ar us

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

PERMIT NUMBER: ARR00B367	7	PERMITTEE NAME:	Lavid Duke	
FACILITY NAME: Hixson Lumber Sales		FACILITY PHYSICAL ADDRESS:	2500 S. Washing Magnolia, AR 7	
INDUSTRIAL A	OUTFALI NO:	OO1 REPORT		
PARAMETER	Benchmark	QUALITY OR CO	DNCENTRATION	UNITS
	Value	JANUARY-JUNE	JULY-DECEMBER	UNIIS
Chemical Oxygen Demand (COD)	120	290		mg/L
Total Suspended Solids (TSS)	100	28		mg/L
Oil and Grease (O&G)	15	<5	· · ·	mg/L
pH	6.0-9.0	8.0		S.U.
Arsenic	0.169	<0.05		mg/L
Copper	0,0756	0.0064		mg/L
				ļ
		· ·		
Sampling Period:	J	ANUARY-JUNE JUL	Y-DECEMBER	
Date of Storm Event Sampled:		2-1-2011		
Duration of Event:		5		hours
Estimate of Rainfall Event:		0.5	<u>i</u>	nches
Time Since Last Measurable Ever		21	da	*
Estimate of Total Discharged Volu	unc:	110,846	ga	llons
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 AN AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

<u>2-11-11</u>

Signature & Date

Printed Name & Title of Off

Arkansas Department of Environmental	Permit No. ARR-00 <u>B367</u>		
Quality (ADEQ)	Permittee Name: Hixson Lumber Sales		
5301 Northshore Drive North Little Rock, AR 72118-5317	Facility Name: Hixson Lumber Sales		
Industrial Stormwater General Permit (ARR000000) Annual Report Form	Facility Physical Address (<u>not</u> mailing address): 2500 South Washington		
	Facility City: Magnoila, AR	Zip Code: 71753	

Facility Contact Name: David Duke	Title: H/R - Safety	
Facility Contact Phone Number 870-234-7820	Facility Contact Email:	
Reporting Period: January 1 st to December 31 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 calendar year (Jan 1^{st} – Dec 31^{st})? 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 \boxtimes - Complete Sections 2, 3, 4, 5 and 6.

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

Include any additional comments here:

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	
Visual Site Inspection #2 Date	-
Visual Site Inspection #3 Date	-
Visual Site Inspection #4 Date	-
Comprehensive Site Compliance Evaluation Date	1/8/13

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.

escribe the Problem: N/A
escribe the Problem: N/A
escribe 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 $\underline{\&}$ zinc), make additional copies of Section 4 and complete one for each parameter.

Pollutant Parameter: Arsenic benchmark was exceeded during the following sampling period (check all that apply):

^{1 st} 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.

Review of BMP's and SWPPP on 12/25/12

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.

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: Copper 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.

Review of BMP's and SWPPP on 12/25/12

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

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."

-30-15 1'L Title **Printed Name** 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 documents of 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 Discertistications

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

PERMIT NU	MBER: ARR00B367	I	PERMITTE	E NAME:	David Du	ke
FACILITY NAME:	Hixson Lumber Sales	FACILITY PHYSICAL ADDRESS:		PHYSICAL	2500 S. Washington St.	
-					Magnol i	la, AR 71753
INDUSTRIA SECTOR:	L A2	OUTFALL NO:	001	REPORTI YEAR:	NG 20	01.2

PARAMETER	Benchmark	QUALITY OR CO	ONCENTRATION	UNITS
	Value	JANUARY-JUNE	JULY-DECEMBER	00
Chemical Oxygen Demand (COD)	120	46	44	mg/L
Total Suspended Solids (TSS)	100	19	7.3	mg/L
Oil and Grease (O&G)	15	<5	0.7	mg/L
pH	6.0-9.0	6.0	(g.D	S.U.
Arsenic	0.169	<0.05	0.19	mg/L
Соррег	0.0756	0.0048	0.151	mg/L
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Sampling Period: Date of Storm Event Sampled: Duration of Event: Estimate of Rainfall Event: Time Since Last Measurable Event: Estimate of Total Discharged Volume:

JANUARY-JUNE	JULY-DECEMBER	
3/20/12	12/25/12	
24		hours
4.5		inches
9		days
994,374		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 ELNE AND IMPRISONMENT.

Signature & Date

K/Safedy

Printed Name & Title of Official

5301 Northshore Drive, North Little Rock, AR 72118 501-682-0623 Fax 501-682-0880 Version 08/30/2010

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>B367</u>				
Permittee Name: Hixson Lumber Sales				
Facility Name: Hixson Lumber Sales				
Facility Physical Address (<u>not</u> mailing address):				
2500 South Washington				
Facility City: Magnoila, AR	Zip Code: 71753			

Facility Contact Name: David Duke	Title: H/R - Safety	
Facility Contact Phone Number 870-234-7820	Facility Contact Email:	
Reporting Period: January 1 st to December 31 st 2013 (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 calendar year (Jan 1^{st} – Dec 31^{st})? **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 \square - Complete Sections 2, 3, 4, 5 and 6.

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

Include any additional comments here:

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	02/14/13
Visual Site Inspection #2 Date	04/18/13
Visual Site Inspection #3 Date	08/17/13
Visual Site Inspection #4 Date	12/06/13
Comprehensive Site Compliance Evaluation Date	1/29/13

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 $\underline{\&}$ zinc), make additional copies of Section 4 and complete one for each parameter.

Pollutant Parameter: TSS benchmark was exceeded during the following sampling period (check all that apply):

 \boxtimes 1st Sampling period (January-June)

2nd Sampling Period (July-December)

For the each pollutant parameter exceeding the benchmark_summarize below any corrective actions plan **<u>completed</u>** during the previous calendar year and include the dates you completed the corrective actions.

Review of BMP's and SWPPP; Install a section of silt fencing in an attempt to reduce sediment values in the sample. Continue to let the vegetation grow around the sampling area.

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.

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 $\underline{\&}$ zinc), make additional copies of Section 4 and complete one for each parameter.

Pollutant Parameter: Copper benchmark was exceeded during the following sampling period (check all that apply):

 \boxtimes 1st Sampling period (January-June)

 \boxtimes 2nd Sampling Period (July-December)

For the each pollutant parameter exceeding the benchmark_summarize below any corrective actions plan **<u>completed</u>** 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 yet been completed</u>**. Identify the date you expect to complete corrective actions.

Review of BMP's

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 $\underline{\&}$ zinc), make additional copies of Section 4 and complete one for each parameter.

Pollutant Parameter: Copper benchmark was exceeded during the following sampling period (check all that apply):

 \boxtimes 1st Sampling period (January-June)

 \boxtimes 2nd Sampling Period (July-December)

For the each pollutant parameter exceeding the benchmark_summarize below any corrective actions plan **<u>completed</u>** during the previous calendar year and include the dates you completed the corrective actions.

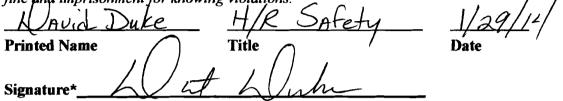
For the each pollutant parameter exceeding the benchmark summarize any corrective actions plan **<u>initiated</u>** during the previous calendar year, but have **<u>not yet been completed</u>**. Identify the date you expect to complete corrective actions.

Review of BMP's

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."



* 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

PERMIT NU	MBER:	ARR00B3	367	PERMITTEE 1	NAME:	Hixso	on Lumber S	ale	s
FACILITY NAME:	Hixson	Lumber S	ales	FACILITY PH ADDRESS:	YSICAL	250	0 South Was	shin	ngton
						Magno	olia, AR 71	753	
INDUSTRIA SECTOR:	L		OUTFALL NO:	001	REPORT YEAR:	ΓING	2013		
				T					
PARAMETE	R		Benchmark	QUALIT	TY OR CC	NCEN	TRATION		UNITS
			Value	JANUARY	-JUNE	JULY	-DECEMBER	$\overline{\mathbf{z}}$	ernie

	Value	JANUARY-JUNE	JULY-DECEMBER	011115
Chemical Oxygen Demand (COD)	120	90.000	44.000	mg/L
Total Suspended Solids (TSS)	100	289.400	4.000	mg/L
Oil and Grease (O&G)	15	1.500	1.200	mg/L
рН	6.0-9.0	6.000	6.000	S .U.
Arsenic	0.169	0.050	0.069	
Copper	0.0756	0.200	0.281	

Sampling Period:

Date of Storm Event Sampled: Duration of Event: Estimate of Rainfall Event: Time Since Last Measurable Event: Estimate of Total Discharged Volume:

JANUARY-JUNE JULY-DECEMBER

04/18/13	12/06/13	
4	9	hours
3/4	3/4	inches
12	14	days
		gallons

Comments:_

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Signature & Date

Juke H/R SA

Printed Name & Title of Official

Appendix E

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	Facility	Hixson Lu	ımber		2	013	_		v'	ł		
		.,	:		3	Rain Lo	λġ		\mathcal{V}			
	Date	Time	Rain Amount	Name	Duration in hours	.64126 203	Date	Time	Rain Amount	Name	Duration in hours	
	1/3	TAM	.25"	Dutes	3		2/2/14	DAM	1 1/2"	Duke		
	1/8	Nom	.50"	Pulce	4] · .	2/1/14	lean	310.	Dintol	8	
	1113	Lon	1.4"	Duk	6		4/3/14	10:300		Dute	4	
	1/26	10mm	.254	Dam	1		4/16/14	Ilam	2''	Dute	6	
	2/10	4 Am	.,"	Dute	6		4/10/14	4Am	,25"	Dute	ZHR	
	2/18	Spm	• 75	Dure	2		4/12/14	Bon	1/2"	Dista	4 HR	
	2/25	TAM		Dub			4/13	BAM	1/4 "	Detre	6 HR	
	3/10	6Am		Duke	6	4	4/21	BAM	1/2"	Dute		TESTSA
	44	2 pm		Dute	6	H-0,	4/24	30m	1/2"	Dam	4 HR	
DB	4/18	Man	3/2/11	Dake		Stringle	4/28	4 Am	1/2"	Date	3/2 HR	4
	5/2 5/9	SAM	44 "	Destr.	~2		5/8	Spm	1 3/4"	Derter	- 10th	1
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			L 1/4"	Dake	2	1	<i>י</i>	├ ──′	<u> </u>	—— —	├─── ┥	
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ł	10126	4 pm	1/4	Duhe		1			[]	· · · · · · · · · · · · · · · · · · ·		
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	12/20	gam	21/2	Dum	12	4		 '		<u> </u>	L	4
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SORRELLS RESEARCH ASSOCIATES, INC 8100 NATIONAL DRIVE, LITTLE ROCK, AR 72209 501-562-8139 800-331-8139 FAX 501-562-7025 FAX 501-562-7025 CHAIN OF CUSTODY RECORD	FOR LAB/OFFICE LUE ONLY (LAB # 1588 (pr 100)	P.0.* Du/e P.0.* Du/e	PROJECT MO- SAMPLERIG NAVAE IPRIMIT	MAGABICA AL OLT FALL DAVID DUC	SAMPLEID START END COME FIELD ANALYSIS DO [M] CONTAINER TYPE AMALYSIS AND/ OR ONTAINER TYPE AMALYSIS REQUIRED AND/ OR ONTAINER TYPE AMALYSIS REQUIRED COLLECTION LOCATION	1:10pt 1:40pt 6	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	COD EDM alach COD EDM alach C Mu3 Mo trals As. (2)		METHOD OF SHIPMENT (OROLE) FIELD CALERATION RECORD NOTES/COMMANENTS/DBSERVATIONS	FED EX VIALURIN SRA (VEPS) OTHER PH 7		TTPE OF SAMPLE(S): (CRELE) INVESTIGATION WAY SUIVER FOR ANALYSIS COMMITTED BY FURDED CAL FURDED FOR ANALYSIS COMMITTED BY FURDED FOR ANALYSIS	Duf Dubu DATENTINE 1: 45 pro 4/18/13 ACCOVED BY	
SORRELLS RE 8100 NATIONAL D 501-562-8139 800 FAX 501-562-7025	TURN AROUND TIME RUSH ZAHR. 48 HR. 5 DAY (RES) OTHER	6621060281(X	HAME OF COMPANY CITY, ORPI		NICE SAMPLEID '	1 Quffall	<u> </u>	<u>7</u>		METHOD OF SHIPME	FED EX WALKIN S	-	 TYPE OF SAMPLE[S]:		

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Appendix F

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 $\underline{\&}$ zinc), make additional copies of Section 4 and complete one for each parameter.

Pollutant Parameter: TSS benchmark was exceeded during the following sampling period (check all that apply):

 \boxtimes 1st Sampling period (January-June)

2nd Sampling Period (July-December)

For the each pollutant parameter exceeding the benchmark_summarize below any corrective actions plan **<u>completed</u>** during the previous calendar year and include the dates you completed the corrective actions.

Review of BMP's and SWPPP; Install a section of silt fencing in an attempt to reduce sediment values in the sample. Continue to let the vegetation grow around the sampling area.

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Review of BMP's

Appendix G

PERMIT NUMBER: ARR00B367	7	PERMITTEE NAME:	Lavid Duke			
FACILITY NAME: Hixson Lumber Sales		FACILITY PHYSICAL ADDRESS:	2500 S. Washington St. Magnolia, AR 71753			
INDUSTRIAL A	OUTFALI NO:	OO1 REPORT				
PARAMETER	Benchmark	QUALITY OR CO	DNCENTRATION	UNITS		
	Value	JANUARY-JUNE	JULY-DECEMBER	UNIIS		
Chemical Oxygen Demand (COD)	120	290		mg/L		
Total Suspended Solids (TSS)	100	28		mg/L		
Oil and Grease (O&G)	15	<5	· · ·	mg/L		
pH	6.0-9.0	8.0		S.U.		
Arsenic	0.169	<0.05		mg/L		
Copper	0,0756	0.0064		mg/L		
				ļ		
		· ·				
Sampling Period:	J	ANUARY-JUNE JUL	Y-DECEMBER			
Date of Storm Event Sampled:		2-1-2011				
Duration of Event:		5		hours		
Estimate of Rainfall Event:		0.5	<u>i</u>	nches		
Time Since Last Measurable Ever		21	da	*		
Estimate of Total Discharged Volu	unc:	110,846	ga	llons		
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 AN AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

<u>2-11-11</u>

Signature & Date

Printed Name & Title of Off

PERMIT NU	MBER: ARR00B367	<u> </u>	PERMITTE	E NAME:	David Du	ke
FACILITY NAME:	Hixson Lumber Sales		ACILITY I DDRESS:	PHYSICAL	2500 S	. Washington St.
-					Magnol i	a, AR 71753
INDUSTRIA SECTOR:	L A2	OUTFALL NO:	001	REPORTI YEAR:	NG 20	1.2

PARAMETER	Benchmark	QUALITY OR CO	UNITS	
	Value	JANUARY-JUNE	JULY-DECEMBER	00
Chemical Oxygen Demand (COD)	120	46	44	mg/L
Total Suspended Solids (TSS)	100	19	7.3	mg/L
Oil and Grease (O&G)	15	<5	0.7	mg/L
pH	6.0-9.0	6.0	(g.D	S.U.
Arsenic	0.169	<0.05	0.19	mg/L
Соррег	0.0756	0.0048	0.151	mg/L
an a		annan a stationar a station an		
nananan an				

Sampling Period: Date of Storm Event Sampled: Duration of Event: Estimate of Rainfall Event: Time Since Last Measurable Event: Estimate of Total Discharged Volume:

JANUARY-JUNE	JULY-DECEMBER	
3/20/12	12/25/12	
24		hours
4.5		inches
9		days
994,374		gallons

Comments:

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Signature & Date

K/Safedy

Printed Name & Title of Official

5301 Northshore Drive, North Little Rock, AR 72118 501-682-0623 Fax 501-682-0880 Version 08/30/2010

PERMIT NU	MBER:	ARR00B3	367	PERMITTEE 1	NAME:	Hixso	on Lumber S	ale	s
FACILITY NAME:	Hixson	Lumber S	ales	FACILITY PH ADDRESS:	YSICAL	250	0 South Was	shin	ngton
						Magno	olia, AR 71	753	
INDUSTRIA SECTOR:	L		OUTFALL NO:	001	REPORT YEAR:	ΓING	2013		
				T					
PARAMETE	R		Benchmark	QUALIT	TY OR CC	NCEN	TRATION		UNITS
			Value	JANUARY	-JUNE	JULY	-DECEMBER	$\overline{\mathbf{z}}$	ernie

	Value	JANUARY-JUNE	JULY-DECEMBER	011115
Chemical Oxygen Demand (COD)	120	90.000	44.000	mg/L
Total Suspended Solids (TSS)	100	289.400	4.000	mg/L
Oil and Grease (O&G)	15	1.500	1.200	mg/L
рН	6.0-9.0	6.000	6.000	S .U.
Arsenic	0.169	0.050	0.069	
Copper	0.0756	0.200	0.281	

Sampling Period:

Date of Storm Event Sampled: Duration of Event: Estimate of Rainfall Event: Time Since Last Measurable Event: Estimate of Total Discharged Volume:

JANUARY-JUNE JULY-DECEMBER

04/18/13	12/06/13	
4	9	hours
3/4	3/4	inches
12	14	days
		gallons

Comments:_

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Signature & Date

Juke H/R SA

Printed Name & Title of Official

Appendix H

NPDES Compliance Inspection Report

Section A: National D	Data System Coding	
Transaction Code NPDES	Yr/Mo/Day Inspec. 7	
1 2 311 12 Rema		19 20
Inspection Work Days Facility Evaluation Rating 6769 70	B1 QA7172737	Reserved 74 75 80
Section B: Fa		
Name and Location of Facility Inspected (For industrial users	Entry Time/Date	Permit Effective Date
discharging to POTW, also include POTW name and NPDES permit	1-8-13	12-03-10
Hisson Lumber Sales 2500 South Washington Street	Exit Time/Date	Permit Expiration Date
Magnolia, AR, 71753	1-8-13	06-30-14
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)		rterly Visual Site Inspection Dates:
Name, Address of Responsible Official/Title/Phone and Fax Number	Contacted	11
	Yes No	1.
Section C: Areas Evalua	ated During Inspection	
(S=Satisfactory, M=Marginal, U=L	Unsatisfactory, N=Not Evalua	ted
S Permit N Flow Measurement	S Operations / Maintenance	5 Sampling
Records/Reports Self-Monitoring Program	Sludge Handling/Disposal	S Pollution Prevention
5 Facility Site Review 5 Compliance Schedules	N Pretreatment	
N Effluent/Receiving Waters Laboratory	Storm Water	M Other:
Section D: Summary of Findings/comment	ts (Attach additional sheets	if necessary)
Maintain Loy of Quarterly Visual Clean up spills and remove contaminuted:	Sampling soil.	
Name(s) and Signature(s) of Inspector(s) Agency/Office/T	Felephone/Fax	Date 1-8-13
Signature of Reviewer Agency/Office/T	Felephone/Fax	Date [-8-13

ADEQ Water NPDES Inspection	AFIN: 14-00209	Permit #: ARROOB367
SECTION A: PERMIT VERIFICATIO		
PERMIT SATISFACTORILY ADDRE	SSES OBSERVATIONS	
DETAILS:		
1. CORRECT NAME AND MAILING ADDRESS		
	NEW DIFFERENT OR INCREASED DISCHARGES:	
3. NUMBER AND LOCATION OF DISCHARGE	E POINTS AS DESCRIBED IN PERMIT:	
4. ALL DISCHARGES ARE PERMITTED:		
	LUTION PREVENTION PLAN EVALU	
PERMITTEE SWPPP MEETS PERM	IT REQUIRMENTS	
DETAILS:		
1. Pollution Prevention Team		
A. Identify specific individuals		
B. Outline their responsibilities		
2. Description of potential pollutant source	ces, including:	
A. Site map indicating:		
A1) Drainage areas		
A2) Drainage patterns/outfalls		
A3) Structural and non-structural co	ntrols	
A4) Surface waters		
A5) Significant materials exposed to		
A6) The location of leaks or spills tha		
A7) Location of industrial activities e i. Fueling stations	xposed to precipitation including:	
ii. Vehicle/equipment mainte	anance or cleaning areas	
iii. Loading/unloading areas		
iv. Waste treatment, storage, or	disposal areas	
v. Liquid storage tanks		
vi. Processing areas		
vii. Storage areas		
B. A list of pollutants likely to be presen	t in the discharges	
C. Description of significant materials ha	andled, treated, stored, or disposed of such tha	at exposure to storm
water occurred in the last 3 years.		
C1) Description of the method and le		
C2) Description of all material mana		
	ing structural and non-structural controls	
D. List of significant spills and leaks that	t occurred in the 3 years prior	
to the effective date of this Permit		
E. Summary of existing storm water san		
F. Description of areas with a high erosi		
G. A narrative summarizing potential po	liutant sources	
3. A description of appropriate measures a	and controls, including:	
A. Good housekeeping procedures		
B. Preventive maintenance procedures		
C. Spill prevention and response procedu	ures	
C. Spill prevention and response procedu D. Inspection procedures		21 ON ONA ONE 21 ON ONA ONE 22 ON ONA ONE 23 ON ONA ONE
C. Spill prevention and response procedu D. Inspection procedures E. Employee training program		ZY DN DNA D
C. Spill prevention and response procedu D. Inspection procedures E. Employee training program F. Recordkeeping and internal reporting	procedures	
C. Spill prevention and response procedu D. Inspection procedures E. Employee training program F. Recordkeeping and internal reporting G. Non- storm water discharge certification	procedures	
C. Spill prevention and response procedu D. Inspection procedures E. Employee training program F. Recordkeeping and internal reporting G. Non- storm water discharge certificatio H. Identify authorized non-storm water of	procedures on discharges and appropriate controls	ZY IN INA INE
C. Spill prevention and response procedu D. Inspection procedures E. Employee training program F. Recordkeeping and internal reporting G. Non- storm water discharge certification	procedures on discharges and appropriate controls is with a high erosion potential	ZY IN INA

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ADEQ Water NPDES Inspection	AFIN:	19-00209	Permit #:	AKK DOB3	2

4. Annual Site Compliance Evaluation Reports which include:	
A. A summary of the scope of the inspection	
B. Personnel making the inspection	
C. Major Observations	
D. Actions taken to revise the Pollution Prevention Plan	
E. Certification of compliance or a list of non-compliance incidents	
5. If discharging to a large or medium municipal separate storm sewer,	
Compliance with applicable requirements in the municipal storm water management program.	
6. Consistency of the SWPPP with other plans	
7. Additional requirements for facilities subject to Emergency Planning and Community Right to Know Ac	
A. A description of the measures used in areas where Section 313 water priority chemicals are stored, pr	ocessed, or otherwise handled to:
A1) Minimize the potential contact or storm water run0on with the chemicals	
A2) Prevent exposure of the chemicals to storm water and wind	
B. A discussion of the measures taken to minimize the discharge of Section 313 water priority chemicals	from the following areas:
B1) Liquid storage areas	
B2) Non-liquid storage areas	DY DN DNA DNE
B3) Truck and railcar loading areas	
B4) Truck and railcar loading areas	DY DN DINA DNE
B5) Transfer, processing, or handling areas	DY DN DNA DNE
B6) Other areas	
B7) Preventive maintenance and housekeeping	
B8) Facility security	
B9) Training	
B10) Professional Engineer (PE) certification every 3 years	
8. Assurance that any salt storage piles present onsite are covered or enclosed	

8. Assurance that any salt storage piles present onsite are covered or enclosed

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Inspector Signature & Date Client Concurrence 1-8-13 4

		ARRODB367	1			
_		Section A: Netion	าลโล้อ t a	System Coding		·
	annaction Bode	NPDES		Yr/Mo/Day	Inspec. Type	
-	3	11 12	Remarks	17 1		19 20
		T	NE IIdi N3			
	pection Work Days	Facility Evaluation Rating		-		Reserved
7	69	70		7273_	74 7	
_		Section E				
		nspected (For industrial users ide POTW name and NPDES permit		try Time/Date 29-14/ 1:3		Permit Effective Date
		umber Sales, Inc				
		Washington Steet	Exi	t Time/Date	:	Permit Expiration Date
	Magnolia A	R 71753	1	í	1	· .
	•		5,	30 /1-29.	-19	
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		ive(s)/ mic(s)/ mone and Fax Numbe		820		_
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1	David D. Ke	HYR Safety	Í	Yes⊡ No□	3. O	- 17-13
					4. 12	-06-13
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	· · · ·	Section C: Areas Ca				
r	. (S=Satisfactory, M=Marginal, L	J=Unsat			
	Perrait	N Flow Measurement	S	Operations /Mainte	nance <u>S</u>	Sam pling
	Secords/Reports	Self-Monitoring Program	N)	Sludge Handling/Dis	2 lesoq	Pollution Prevention
	the all the office in the		1)	_	11	
	Facility Site Review	S Compliance Schedules	N	Pretreatment	N	ívic Itimedia
	Effluent/Receiving Waters	N Laboratory	S	Storm Water	N	Oiliter:
		Summary of Findings/commo	ente / A+	tach additional c	heets if no	rascarv
		Community of a monites/ cosme				
c	eived 1sthalf of	'year Sw Test Kit in	Apr	0 2013;	2nd ho	It came in
ŀ	e October or e	arly November. Ch	enta	orducts m	ronthl.	inspections of
2	ilty, Explained	I the requirements o	t the	quarter 1 1	isual a	ampline.
,	land the a	ew requirement to	use	a diaital a	the meter	Looked 6 out
		changes to facility .				
r	reported any long	er. Dycussed add	tion	of sealers a	mon	key grass at out
-		er. Discussed add.		,		/ 1
	ne(s) and Signature(s) of Insp	ector(s) Agency/Office	e/Telepho	ne/Fax		Date
	m	ESG	77	••• •		1-29-2014
	NIG III. IM	Ø				
		Agency/Office	e/Telepho	ne/Fax		Date
	ature of Reviewer	A Benefit en let	-,,			
	ature of Reviewer					

DEQ Water NPDES Inspection	AFIN:	Permit #,	
		·	
JECTION A: PERMIT VERIFICAT			
PERMIT SATISFACTORILY ADDR	ESSES OBSERVATIONS	C.S. C.P.	LIL LINA LINE
DETAILS:			
CORRECT NAME AND MAILING ADDRE	SS OF PERMITTEE		
	F NEW DIFFERENT OR INCREASED DISCHARGES:		
NUMBER AND LOCATION OF DISCHAR	GE POINTS AS DESCRIBED IT PERMIT:		
4. ALL DISCHARGES ARE PERMITTED:			
ECTION B: STORM WATER PO	LLUTION PREVENTION PLAN EVALUA	TIGN	
PERMITTEE SWPPP MEETS PERM		ETC CIP	
DETAILS:			
. Pollution Prevention Team			
A. Identify specific individuals	· · ·		
B. Outline their responsibilities			
Description of potential pollutant sou	rces, including:		
A. Site map indicating:			
A1) Drainage areas			
A2) Drainage patterns/outfalls			
A3) Structural and non-structural co	ontrois		
A4) Surface waters			
A5) Significant materials exposed to			
A0) The location of leaks of spills th A7) Location of industrial activities	at have occurred in the last 3 years.		
i. Fueiing stations	exposed to precipitation including:		
ii. Vehicle/equipment maint	enance or cleaning areas		
iii. Loading/unloading areas			
iv. Waste treatment, storage, or	r disposal areas		
v. Liquid storage tanks			
vi. Processing areas			IN DN DNA DNE
vii. Storage areas			MY DIN DINA DNE
B. A list of pollutants likely to be preser	nt in the discharges		
	andled, treated, stored, or disposed of such that ex	posure to storm	
water occurred in the last 3 years.			/
C1) Description of the method and I	ocation of storage or disposal		
C2) Description of all material mana	gement practices		
C3) Description and location of exist	ing structural and non-structural controls		
D. List of significant spills and leaks that	cocurred in the 3 years prior		
to the effective date of this Permit		biss	
 E. Summary of existing storm water san F. Description of areas with a high erosi 			
G. A narrative summarizing potential po			
G. A hanative sommarizing potential po			
A description of appropriate measures a	nd controls, including:		
A. Good housekeeping procedures	ind controls, including:		
A. Good housekeeping proceduresB. Preventive maintenance procedures			
 A. Good housekeeping procedures B. Preventive maintenance procedures C. Spill prevention and response procedures 			
 A. Good housekeeping procedures B. Preventive maintenance procedures C. Spill prevention and response procedures D. Inspection procedures 			
 A. Good housekeeping procedures B. Preventive maintenance procedures C. Spill prevention and response procedures D. Inspection procedures E. Employee training program 	ires		
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 A. Good housekeeping procedures B. Preventive maintenance procedures C. Spill prevention and response procedures D. Inspection procedures E. Employee training program F. Recordkeeping and internal reporting [G. Non-storm water discharge certification 	proce d ures		
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 A. Good housekeeping procedures B. Preventive maintenance procedures C. Spill prevention and response procedures D. Inspection procedures E. Employee training program F. Recordkeeping and internal reporting [G. Non-storm water discharge certification 	procedures on lischarges and appropriate controls s with a high erosion potentiai		

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ADEQ Water NPDES Inspection	AFIN:	Perri it #:
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4. Annual Site Compliance Evaluation Rep	oris which include:	
A. A summary of the scope of the inspe	ction	DAY, DII ENA DNE
B. Perconnel making the inspection		
C. Major Observations		INY CHA CINA ONE
D. Actions taken to revise the Pollution	Prevention Plan	KAY DN ENA DNE
E. Certification of compliance or a list of	f non-compliance incidents	
5. If discharging to a large comedium mur	nicipal separate storm sewer.	
Compliance with applicable requiremen	its in the municipal storm water management progra	
6. Consistency of the SWPPP with other pl	ans	
7. Additional requirements in facilities su	bject to Emergency Planning and Community Right 6	Know Act (EF TR/) Section 313 requirement
	areas where Section 313 water priority chemicals are	
	storm water runOon with the chemicals	EIY ON KINA ONE
A2) Prevent exposure of the chemicals	to storm water and wind	
B. A discussion of the measures taken to	minimize the discharge of Section 313 water priority of	themicals from the following areas:
B1) Liquid storage areas		
B2) Non-liquid storage areas		DY DN DNA DNE
B3) Truck and railcar loading a teas		
B4) Truck and railcar loading areas		DY DN ZYA DNE
B5) Transfer, processing, or handling a	reas	DY DN DNE
B6) Other areas		DY DN KINA DNE
B7) Preventive maintenance and house	ekeeping	DY IN DYA DNE
B8) Facility security		DY DN WA DNE
B9) Training		DY DN DOMA DNE
B10) Professional Engineer (PE) certific	ation every 3 years	
8. Assurance that any salt storage piles pre	esent onsite are covered or enclose:	

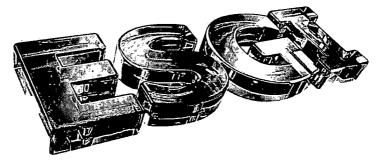
Avrille 1/29/14 Date Client Concurrence \triangleleft

Date Initials Action Storm water sample collected and sent to lab **First Half of** the year **A** Results received (Jan. – June) pH tested and recorded on site by Stormwater team 1st Monthly Site Inspection **First Quarter** of the year 2nd Monthly Site Inspection (Jan. – March) Z 3rd Monthly Site Inspection First Quarterly Visual Inspection Each rainfall event measured with on site rain gauge and recorded Updates to site plan if needed Records maintained 1 st Monthly Site Inspection Second Ouarter of the 2nd Monthly Site Inspection Year 2 3rd Monthly Site Inspection (April - June) Second Quarterly Visual Inspection Each rainfall event measured with on site rain gauge and recorded Updates to site plan if needed Records maintained Storm water sample collected and sent to lab Second Half of the year Results received (July – Dec.) D pH tested and recorded on site by Stormwater team Ist Monthly Site Inspection Third Quarter of the Year 2nd Monthly Site Inspection (July – Sept.) 2 3rd Monthly Site Inspection D Third Quarterly Visual Inspection Each rainfall event measured with on site rain gauge and recorded Updates to site plan if needed Records maintained DX 1st Monthly Site Inspection Fourth Quarter of the 2nd Monthly Site Inspection Year **3rd** Monthly Site Inspection (Oct. – Dec.) Fourth Quarterly Visual Inspection Each rainfall event measured with on site rain gauge and recorded Updates to site plan if needed **A** Records maintained Employee Training Annually Comprehensive Site Compliance Evaluation and Report □ Annual compliance report submitted to ADEQ (by ESGI)

Storm Water Compliance Checklist

*Updates should be made to the plan as needed (i.e. any changes to the site, team members, and best management practices)

DMR submitted to ADEQ (by ESGI)



ENVIRONMENTAL SERVICES GROUP, INC.

RECEN

MAY 1 9 2014

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Response to compliance inspection Hixson Lumber Sales on April 15, 2014. Permit #: ARR00B367, AFIN: 14-00209

ENVIRONMENTAL SERVICES GROUP, INC. 2300 Cottondale Lane, Suite 260 Little Rock, AR 72202 (501) 663-4731 Telephone • (800) 887-6752 • (501) 663-7798 Facsimile www.esgisafety.com



Environmental Services Group Incorporated Safety / Health / Environmental / Regulatory Services

May 19, 2014

Arkansas Department of Environmental Quality Water Division, Inspection Branch 5301 Northshore Drive North Little Rock, Arkansas 72118

RE: Response to compliance inspection at Hixson Lumber on April 15, 2014. Permit #: ARR00B367, AFIN: 14-00209

Dear Mr. Young:

In response to the compliance inspection performed at Hixson Lumber located in Magnolia, AR, the following answers and corrective actions are given:



Corrective Actions to Findings:

1.) The NAICS code has been added to the plan and both the NAICS and SIC codes have been added to the cover page (Appendix A)

2.) Number of acres has been added to the site map. (Appendix B)

3.) The location of existing structural control measures have been added to the site map. (Appendix B)

4.) Receiving waters in the immediate vicinity of the facility were added to the site map. (Appendix B)

5.) A copy of the 2011 sampling analysis and chain of custody has been added to the SWPPP, a copy is included in this response. (Appendix C)

6.) A copy of the annual comprehensive site compliance evaluation (report) for 2011, 2012 and 2013 have been added to the SWPPP, a copy is included in this response. (Appendix D)

7.) The sample was collected on April 18, 2013, when the event was recorded in the rain log the wrong date was written by mistake. The rain log has been corrected and initialed. A copy of the corrected rain log is included in this response along with a copy of the Chain of Custody showing the date of collection. (Appendix E)

8.) A more detailed corrective action report has been submitted to ADEQ, a copy of corrective action is included in this response. (Appendix F)

9.) A copy of the DMRs submitted to ADEQ have been added to the SWPPP, a copy of all DMRs is included in this response (Appendix G)

10.) A copy of 2012 and 2013 annual comprehensive evaluation has been added to the SWPPP and a copy is included in this response (Appendix H). A comprehensive evaluation was not completed in 2011, the facility recognized that there were areas they needed assistance with complying with permit and contracted ESGI to help with in these areas.

11.) A copy of the Annual compliance report for 2011, 2012 and 2013 has been added to the SWPPP; each of these reports include the corrective actions for benchmark exceedances. A copy of each of these reports is included in this response. (Appendix D)

A review of the site map and the sampling outfalls was conducted by Hixson Lumber Sales and ESGI, the consulting company. It was determined that the updated site map in 2012 had outfall 001 incorrectly labeled it should have been placed where outfall 002 was named. It was also determined that there is not a second outfall and to remove it from the site map and continue sampling from outfall 001, with continued monitoring. The site map has been revised and placed in the SWPPP. (Appendix B)

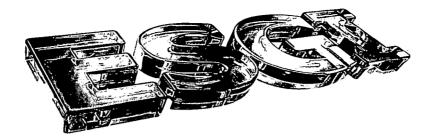
Also, it was noted that Mr. Duke had ordered a pH meter to ensure proper monitoring of pH was conducted. Mr. Duke confirmed that the pH meter was received and will be used for all future analysis.

If you have any questions about this response or need additional information, please contact Gary Ingle at (501) 663-4731 or by e-mail at info@esgisafety.com.

Sincerely,

Gary Ingle President/CEO Environmental Services Group, Inc.

Appendix A



STORM WATER POLLUTION PREVENTION PLAN

Hixson Lumber Sales, Inc. 2500 South Washington Street Magnolia, AR, 71753 ARR00B367 SIC: 2491, NAICS: 32114

NOVEMBER, 2012

Prepared By: ENVIRONMENTAL SERVICES GROUP, INC. WindRiver Office Building, Suite 260 2300 Cottondale Lane Little Rock, AR 72202 (501) 663-4731 Telephone 1-800-887-6752 Toll Free (501) 663-7798 Facsimile

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INTRODUCTION

.1 Purpose of the Plan

On September 14, 1998, the Environmental Protection Agency (EPA) authorized the State of Arkansas to implement its ADEQ/National Pollutant Discharge Elimination System (NPDES) program. ADEQ/NPDES is a state program to carry out the National Pollutant Discharge Elimination System (NPDES), a federal regulatory program to control discharges of pollutants to surface waters of the United States. This Storm Water Pollution Prevention Plan (SWP3) for **Hixson Lumber Sales, Inc., Magnolia, AR**, fulfills the requirements of the Arkansas Commission on Environmental Quality (ADEQ) NPDES General Permit Number ARR00B367 Relating to Storm Water Discharges associated with Industrial Activity. As required by 40 CFR 122.46(a), ADEQ reissues NPDES every 5 years. The NPDES finalized General Permit number ARR00B367 in June, 2009. The general permit provides authorization for point source discharges of storm water associated with certain industrial activities to water in the State of Arkansas. **Storm Water Tracking Number is ARR00B367**.

The Magnolia Site is eligible for coverage under this general permit since the primary Standard Industrial Classification (SIC) code for the facility is **2491** North American Industry Classification System (NAICS) code **32114**, **"Wood Preserving"**, falls into the designated **Sector** A, sub-sector **A2**, meets the general conditions covered under the general permit. The Magnolia Site has submitted a **Notice of Intent (Appendix A) to be covered under the General Permit.** This SWP3 has been developed in accordance with Parts I, through Part VII of the Permit. Pertinent excerpts from the General Permit are included in Appendix **B** to this SWP3.

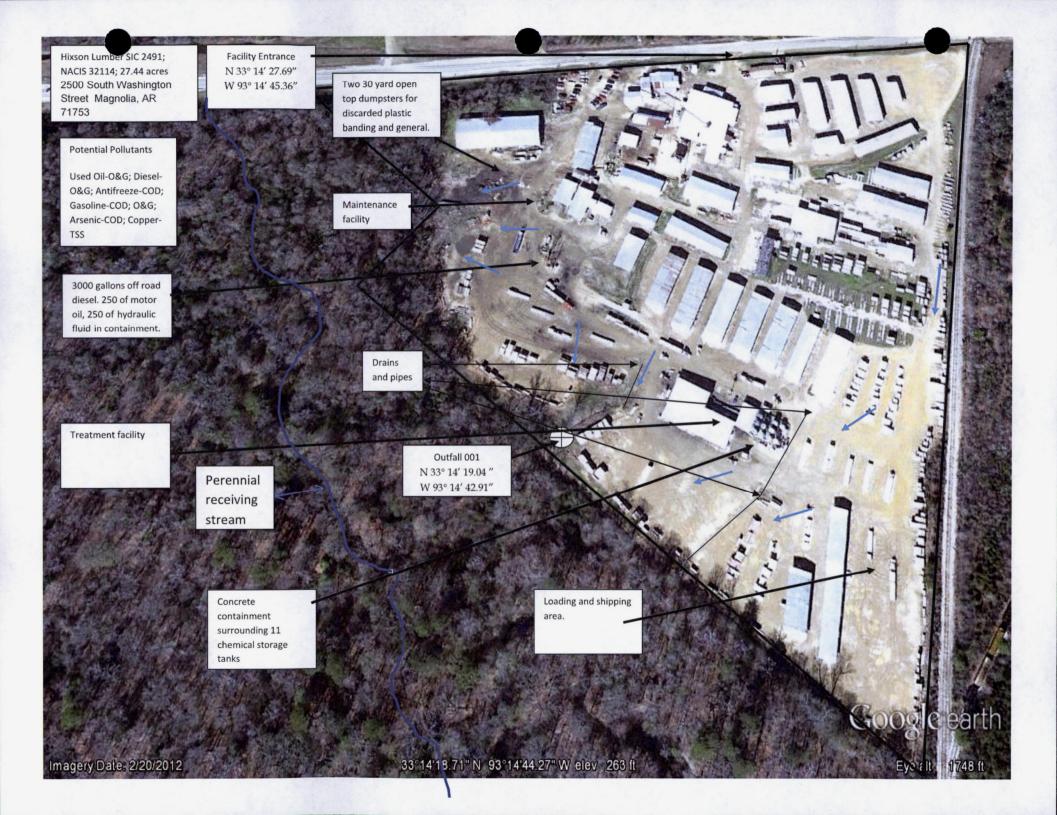
The SWP3 identifies potential sources of pollution that may reasonably be expected to affect the quality of storm water discharges associated with industrial activity from the Site. The SWP3 further describes the implementation of practices to reduce pollutants and the potential for pollutants in storm water discharges associated with industrial activity at the facility and to ensure compliance with the terms and conditions of the NPDES General Permit.

Hixson Lumber Sales, Inc., Magnolia, AR has submitted a signed Notice of Intent (NOI), along with the \$200 application fee to the ADEQ, to be covered under the NPDES General Permit ARR00B367. A copy of the complete, signed NOI is to be provided to the Pollution Prevention Team Leader designated in Table 1 within 3 days of signing. Should Hixson Lumber Sales, Inc., Magnolia, AR decide to terminate coverage under the Storm Water General Permit, it is the responsibility of Hixson Lumber Sales, Inc., Magnolia, AR, to complete and submit a Notice of Termination (NOT) to the ADEQ according to Part 1.8, of the permit with a copy provided to the Pollution Prevention Team Leader within 5 days of submittal to the ADEQ.

1.2 Definitions

Storm Water Pollution Prevention Plan (SWP3):

A SWP3 includes a series of steps and activities to identify sources or potential sources of pollution that may feet the quality of storm water discharges from the facility. This SWP3 includes selection and implementation of actions, or Best Management Practices ("BMP's"), to prevent or control pollution and Appendix B



Appendix C



220 North Knoxville Russellville, Arkansas 72801 Phone (479) 968-6767 Fax (479) 968-1956 www.eegonline.com

February 11, 2011

Mr. David Duke Hixson Lumber Company 2500 S. Washington Street Magnolia, AR. 71753

RE: Storm Water 2011

Dear Mr. Duke:

Your DMR report should be signed by the permit holder and submitted no later than January 31, 2012, to:

NPDES Permits Branch/Storm Water Arkansas Department of Environmental Quality 5301 North Shore Drive North Little Rock, Arkansas 72118-5317

The information listed in the DMR report is from the storm event on February 1, 2011, only. If additional storm water samples were collected during this reporting period, the DMR report will need to be amended.

Please note: The COD value reported for this storm water event exceeds current ADEQ guidelines listed as parameter benchmark values for Outfall 001.

The Parameter Benchmark Values of your required analyses are:

pH 6.0-9.0 s.u.	COD 120 mg/L	Arsenic 0.169 mg/L
Oil and Grease 15 mg/L	TSS 100 mg/L	Copper 0.0756 mg/L

If you have any questions, please call me at (479) 968-6767 or (800) 530-7968.

Sincerely,

Mike Cole Laboratory Supervisor



Enclosures

05/13/2014 08:51 FAX 8702345991



220 North Knoxville Russellville. Arkansas 72801 Phone (479) 968-6767 Fax (479) 968-1956 www.cegonline.com

> February 8, 2011 Control No. 145086 Page 3 of 4

Hixson Lumber Company 2500 S. Washington Magnolia, AR

ANALYTICAL RESULTS

 AIC No. 145086-1

 Sample Identification: L988-043946 0211020 Outfall 001
 2-1-11 9:00am

 Analyte
 Result
 RL
 Units
 Qualifier

 Total Suspended Solids
 Prep: 07-Fob-2011 0947 by 292
 Analyzed: 08-Feb-2011 0830 by 292
 mg/l

AIC No. 145086-2

Sample Identification: L988-043946 0211021 Outfall 001 2-1-11 9:10am

Analyte		Result	RL	Units	Qualifier
COD		290	10	mg/l	
HACH 8000	Prep: 07-Feb-2011 1603 by 285	Analyzed: 08-Feb	•2011 0913 by 285	Batch: W35240	

AIC No. 145086-3

Sample Identification: L988-043946 0211022 Outfall 001 2-1-11 9:20am

Analyte		Result	RL	Units	Qualifier
Oil and Grease		< 5	5	mg/l	
EPA 1664A	Prep: 03-Feb-2011 1334 by 100	Analyzed: 03-Feb-	2011 1626 by 100	Batch: B6732	

AIC No. 145086-4

Sample Identification: L988-043946 0211023 Outfall 001 2-1-11 9:30am

Analyte		Result	RL	Units	Qualifier
Arsenic EPA 200.7	Prep: 03-Feb-2011 1342 by 297	< 0.05 Analyzed: 03-Feb-	0.05 2011 1737 by 270	mg/l Batch: S29442	
Copper EPA 200.7	Prep: 03-Feb-2011 1342 by 297	0.0064 Analyzed: 04-Feb-	0.006 2011 1223 by 270	mg/l Batch: S29442	



analytical services provided by:



220 North Knoxville Russellville, Arkansas 72801 Phone (479) 968-6767 Fax (479) 968-1956 www.eegonlinc.com

> February 8, 2011 Control No. 145086 Page 4 of 4

Hixson Lumber Company 2500 S. Washington Magnolia, AR

DUPLICATE RESULTS

					RPD				
Analyte		AIC No.	Result	RPD	Limit	Preparation Date	Analysis Date	DII	Qual
Oil and Greese		145057-1	< 5 mg/l			03Feb11 1334 by 100	03Feb11 1626 by 100		
	Batch: 66732	Duplicate	< 5 mg/i	0.00	20.0	03Feb11 1334 by 100	03Feb11 1626 by 100		
Total Susponded Solids		145075-1	9,6 mg/l			07Feb11 0947 by 292	08Feb11 0830 by 292		
	Batch: W35231	Duplicate	9.8 mg/i	2.06	20.0	07Feb11 0948 by 292	08Feb11 0830 by 292		
Total Suspended Solids		145078-2	22 mg/l			07Feb11 0947 by 292	08Feb11 0830 by 292		
	Batch: W35231	Duplicate	22 mg/i	1.80	20,0	07Feb11 0948 by 292	08Feb11 0830 by 292		

LABORATORY CONTROL SAMPLE RESULTS

	Spike									
Analyte	Amount	%	Limits	RPD	Limit	Batch	Preparation Date	Analysis Date	DII	Qual
COD	100 mg/l	99,4	85.0-115			W35240	07Feb11 1603 by 285	08Feb11 0913 by 265		
Arsenic	5 mg/i	97.7	85.0-115			\$29442	03Feb11 1046 by 297	03Feb11 1650 by 270		
Copper	0,5 mg/i	92.8	85.0-115			529442	03Feb11 1046 by 297	04Feb11 1138 by 270		
Oil and Grease	40 mg/l	98.5	78.0-114			88732	03Feb11 1334 by 100	03Feb11 1626 by 100		

MATRIX SPIKE SAMPLE RESULTS

		Spike							
Analyte	Sample	Amount	%	Limits	Batch	Preparation Date	Analysis Date	Dil	Qual
COD	145023-1	100 mg/l	97.2	80.0-120	W35240	07Feb11 1603 by 285	06Feb11 0913 by 285		
	145023-1	100 mg/l	97.2	80.0-120	W35240	07Feb11 1603 by 285	08Feb11 0913 by 285		
	Relative Per	rcent Difference:	0,00	10.0	W35240				
Arsenic	144919-1	5 mg/l	95.1	75.0-125	829442	03Feb11 1622 by 297	03Feb11 1652 by 270		
	144919-1	5 mg/l	94.0	75.0-125	S29442	03Feb11 1622 by 297	03Feb11 1656 by 270		
	Relative Per	rcant Difference:	1,15	20.0	S29442				-
Copper	144919-1	0.5 mg/i	95.6	75.0-125	829442	03Feb11 1622 by 297	04Fcb11 1141 by 270		
	144919-1	0,5 mg/l	96.4	75.0-125	S29442	03Feb11 1622 by 297	04Feb11 1144 by 270		
	Rolative Per	rcent Difference:	0.440	20.0	S2944 2				

LABORATORY BLANK RESULTS

Analyte	Result	RL	PQL	QC Sample	Preparation Date	Analysis Date	Qual
COD	< 10 mg/l	10	10	W35240-1	07Feb11 1603 by 285	08Feb11 0913 by 255	
Total Suspended Solids	< 4 mg/l	4	4	W35231-1	07Fcb11 0948 by 292	08Feb11 0830 by 292	
Arsenic	< 0.05 mg/l	0.05	0.05	829442-1	03Feb11 1046 by 297	C3Feb11 1547 by 270	
Copper	< 0.006 mg/l	0.006	0.006	S29442-1	03Feb11 1046 by 297	04Feb11 1135 by 270	
Oil and Grease	< 5 mg/l	5	5	B6732-1	03Feb11 1334 by 100	03Fob11 1826 by 100	





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05/13/2014 08:52 FAX 8702345991



220 North Knoxville Russellville, Arkansas 72801 Phone (479) 968-6767 Fax (479) 968-1956 www.eegonline.com

Client: Hixson Lumber Sales - Magnolia Date of Sample: 2/1/11 Time of Sample: 0900 Date Received: 2/2/11 Sample Collected From: Outfall 001 Sample Collected By: David Duke Sample Matrix: Storm Water Job Number: L988-043946 Date of Report: 2/8/2011 P.O. Number: Not Given Control Number: 0211020 Sample I.D.: 001 Sample Delivered By: UPS

ANALYSIS REPORT

Parameter	Init.	Date	Time	Concentration Unit	s Method Edition Or Ref.
рН	AR	2/2/11	1325	8.0	4500 H+ 18 th
		QUA	ALITY	CONTROL DATA	
Parameter		Orig. Val	ue	Dup. Value	Rel. % Difference
рН		6.4		6.4	0.00

All instruments have been calibrated on a daily basis. Each day, Quality Control procedures have been performed on 10% of all analysis.

Reviewed By

Reviewed By

145086



L988-043944

Environmental Enlerprise Group, Inc. 220 North Knoxville Russellville, Arkansas 72801 (479) 968-6767 Fax (479) 968-1956

Сотрапу Нап	ne:				<u> </u>		Phone #:	-									T -	,	Re	que	ster	/ Ana	ysis		1	pH: 8.0 @1325
Hixson Lumi Address:	ber Sale	<u>es</u>					870-234-78	20																		reno=6.4 ele/11 By:AR
2500 S. Was Project Name	or Numb		olia,	AF	2																per				Laboratory Control Number	Remarks (Please note specie)
Storm Water Sampling Per	sonnet Si		s]:				•			_			_		Du						c, T. Coppe					detection limits below.
Sampte I.D.	Date	Time	Сотр	Grab	Plast D	Glaes ⁸	f ol Containers								ole M			100.00-	800	980	T. Arsenic,					
Outtas 001	2-1-11	9:00 AR		x	x		1				- 1		X												0211020	
Outfall 001	2-1-11	9:10 AM	_	×	×		1	x			,		×						<u>x </u>						0211021	-
Outlall OC1	Z-1-11	9:20A	m	x		x	1	x					X							x					0211022	
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Relinquished b	y:	Hechi M	Gli		a	Aro	7	Date: 1 Time: Received by aboratory: 2-2-11 1320 Wagen Hupston									Date: 2-3-11	Time: 1030								
Comments:		0		, .		<u>,</u>)-X (30		、	~	8															

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05/13/2014 08:51 FAX 8702345991

HIXSON LUMBER CO

Ø 002

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 B	367_
Permittee Name: Da	id Duke / RANCY Norris
	on Lumber Sales
Facility Physical Addr 2500 S. V.	ss (<u>not</u> mailing address): ashington

Facility City: MAGNINA Zip Code: 7/753

Facility Contact Name: Duvid Duke	Title: H/R - Safety			
Facility Contact Phone Number 870 234 7830	Facility Contact Email: druke Oblemandie, Com			
Reporting Period: January 1^{st} to December 31^{st} Zc 1 (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 cutfall 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^{st} – 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 U-Complete Sections 2, 3, 4, 5 and 6.

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

Include any additional comments here:

2. Evaluations and Inspections

Facilities are required to complete a minimum of 4 visual site inspections at d 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	2/1/11
Visual Site Inspection #2 Date	4/25/11
Visual Site Inspection #3 Date	7/8/11
Visual Site Inspection #4 Date	10/14/11
Comprehensive Site Compliance Evaluation Date	12/16/11

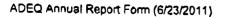
3. Stormwater Problems Identified At the Facility

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.

Date Problem Discovered:	Describe the Problem:	
Date Problem Discovered:	Describe the Problem:	
Date Problem Discovered:	Describe the Problem:	
Date Problem Discovered:	Describe the Problem:	



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): ☑ 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. The COD was Exceeded. When visual inspections were done. Corrective action is to Re Sample and Continue to monitor the outful and if there becomes a ProBlem take the Appropriate Correct For the each pollutant parameter exceeding the benchmark summarize any corrective actions plan initiated during the previous calendar year, but have not vet been completed. Identify the date you expect to complete corrective actions. SAmpling period (July-Dec) Znd I Apologie there was no Sample taken during The Second half of year, due to the lack of Rainfall (Drought). Corrective action will be to Make Sure Sampling Criteria is Met for the your 2012.

ADEQ Annual Report Form (6/23/2011)

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, a curate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Parid Duke	HR	- SnFety	1-30-12
Printed Name	Title	/	Date
Signature* Aut Anton			

* 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@adeg state at us



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

PERMIT NUMBER: ARROOB36	7	PERMITTEE NAME:	Lavid Duke	
FACILITY NAME: Hixson Lumber Sales		FACILITY PHYSICAL ADDRESS:	2500 S. Washington St.	
			Magnolia, AR 7	1753
INDUSTRIAL A SECTOR:	OUTFALL NO:	COL REPOR	III:4G 2011	
PARAMETER	Benchmark	QUALITY OR CONCENTRATION		UNITS
	Value	JANUARY-JUNE	JULY-DECEMBER	UNIIS
Chemical Oxygen Demand (COD)	120	290		mg/L
Total Suspended Solids (TSS)	100	28		mg/L
Oil and Grease (O&G)	15	<5		mg/L
pH	6.0-9.0	8.0		S.U.
Arsenic	0.169	<0.05		mg/L
Copper	0,0756	0.0064		mg/L
			·	
		<u> </u>		
Sampling Period:	ـــــــــــــــــــــــــــــــــــــ	ANUARY-JUNE JUL	Y-DECEMBER	
Date of Storm Event Sampled;		2-1-2011		
Duration of Event:				hours

Sampling Period:	JANUARY-JUNE	JULY-DECEMBER	
Date of Storm Event Sampled:	2-1-2011		
Duration of Event:	5		hours
Estimate of Rainfall Event:	0.5		inches
Time Since Last Measurable Event:	21		days
Estimate of Total Discharged Volume:	110,846		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.

2-11-11 R L

Printed Name & Title of Offi

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>B367</u>	
Permittee Name: Hixson Lumbe	r Sales
Facility Name: Hixson Lumber	Sales
Facility Physical Address (not m	ailing address):
2500 South Washington	
Facility City: Magnoila, AR	Zip Code: 71753

Facility Contact Name: David Duke	Title: H/R - Safety		
Facility Contact Phone Number 870-234-7820	Facility Contact Email:		
Reporting Period: January 1 st to December 31 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 31st. DMRs for each monitored outfall must be submitted with the annual report. Retain a copy of your submitted report onsite.

1. Benchmarks Exceeded

ð

Did the facility exceed the benchmark for any parameter during the previous calendar year (Jan 1^{st} – Dec 31^{st})? 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 \boxtimes - Complete Sections 2, 3, 4, 5 and 6.

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

Include any additional comments here:

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	-
Visual Site Inspection #2 Date	-
Visual Site Inspection #3 Date	•
Visual Site Inspection #4 Date	-
Comprehensive Site Compliance Evaluation Date	1/8/13

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.

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: <u>Complete this section for each pollutant parameter (e.g., turbidity, copper) that exceeded a</u> <u>benchmark during the previous calendar year (Jan – Dec)</u>. 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: Arsenic 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.

Review of BMP's and SWPPP on 12/25/12

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.

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: Copper 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.

Review of BMP's and SWPPP on 12/25/12

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.

ADEQ Annual Report Form (6/23/2011)

01/30/2013

5016637798

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

6. **Certification by Permittee**

RX Date/Time

01/29/2013 22:25

"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.

5016637798

ESGI

10 1'd **Printed Name** Title Date Signature*

11:48

* 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 ADEO.
- 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 spinel 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 Perone Augustation Dadeerstone at a



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

PERMIT NUMBER: ARROOB36	7	PERMITTEE NAME:	David Duke	
FACILITY Hixson Lumber Sales		FACILITY PHYSICAL ADDRESS:	2500 S. Washing	gton St.
	···		Magnolia, AR 71	753
INDUSTRIAL A2 SECTOR:	OUTFAL	L 001 REPORT YEAR:	TNG 2012	
PARAMETER	Benchmark	QUALITY OR CC	NCENTRATION	UNITS
	Value	JANUARY-JUNE	JULY-DECEMBER	UNITS
Chemical Oxygen Demand (COD)	120	45	44	mg/L
Total Suspended Solids (TSS)	100	19	7.3	ing/L
Oil and Grease (O&G)	15	<5	0.7	mg/L
pH	6.0-9.0	6.0	(g.D	S.U.
Arsenic	0.169	<0.05	0.19	mg/L
Соррег	0.0756	0.0048	0.151	mg/L
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, and the second			······································	· · · ·
Sămpling Period:	l1	ANUARY-JUNE JULY	Y-DECEMBER	l
Date of Storm Event Sampled:			2/25/12	
Duration of Event:		24		nours
Estimate of Rainfall Event:		4.5		iches
Time Since Last Measurable Even		9	da	
Estimate of Total Discharged Vol	ume:	994,374	ga	lons
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.

d. Signature & Date

Dirvid Duke - HR/Safery Printed Name & Title of Official

5301 Northshore Drive, North Little Rock, AR 72118 501-682-0623 Fax 501-682-0880 Version 08/30/2010



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

Industrial Stormwater General Permit (ARR000000) Annual Report Form

acility Name: Hixson Lumber Sales	
acility Physical Address (<u>not</u> mailing add 500 South Washington	ress):

Facility Contact Name: David Duke	Title: H/R - Safety
Facility Contact Phone Number 870-234-7820	Facility Contact Email:
Reporting Period: January 1	st to December 31 st 2013 (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 calendar year (Jan 1^{st} – Dec 31^{st})? **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 \boxtimes - Complete Sections 2, 3, 4, 5 and 6.

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

Include any additional comments here:

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	02/14/13
Visual Site Inspection #2 Date	04/18/13
Visual Site Inspection #3 Date	08/17/13
Visual Site Inspection #4 Date	12/06/13
Comprehensive Site Compliance Evaluation Date	1/29/13



ADEQ Annual Report Form (6/14/2011)

Instructions: <u>Complete this section for each pollutant parameter (e.g., turbidity, copper) that exceeded a</u> <u>benchmark during the previous calendar year (Jan – Dec).</u> 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: Copper benchmark was exceeded during the following sampling period (check all that apply):

☐ 1st Sampling period (January-June)

 $\boxtimes 2^{nd}$ Sampling Period (July-December)

For the each pollutant parameter exceeding the benchmark_summarize below any corrective actions plan **<u>completed</u>** 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 yet been completed</u>. Identify the date you expect to complete corrective actions.

Review of BMP's

ADEQ Annual Report Form (6/23/2011)

4. Corrective Actions Planned or Taken

Instructions: Complete this section for each pollutant benchmark during the previous calendar year $(Jan - D)$ the facility must investigate the cause of each paramete To do this, indicate below in which sampling period an taken at a sample location, indicate all sample results exceeded the benchmark for more than one parameter Section 4 and complete one for each parameter.	$\frac{1}{2}$ If the parameter benchmark value is exceeded, r exceedance and determine a corrective action plan. r exceedance occurred. If more than one sample was that exceeded the benchmark. Note: If the facility r (e.g., turbidity <u>&</u> zinc), make additional copies of
Pollutant Parameter: TSS benchmark was exceeded apply):	during the following sampling period (check all that
I st Sampling period (January-June)	2 nd Sampling Period (July-December)
For the each pollutant parameter exceeding the bench <u>completed</u> during the previous calendar year and include	
Review of BMP's and SWPPP; Install a section of silt f the sample. Continue to let the vegetation grow around	the sampling area.
For the each pollutant parameter exceeding the benchm during the previous calendar year, but have <u>not yet</u> complete corrective actions.	

Instructions: <u>Complete this section for each pollutant parameter (e.g., turbidity, copper) that exceeded a benchmark during the previous calendar year (Jan – Dec).</u> 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 $\underline{\&}$ zinc), make additional copies of Section 4 and complete one for each parameter.

Pollutant Parameter: Copper benchmark was exceeded during the following sampling period (check all that apply):

☐ 1st Sampling period (January-June)

 \boxtimes 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.

Review of BMP's

Are the DMRs included with this report? Yes 🔀 No 🗌

6. Certification by Permittee

5.

"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 for dimension methods."

A Avid	Duke	<u>H/R</u> SAFe	ety	1/29/14
Printed Name		Title		Date
Signature*	h at	Lun		

* 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.

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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

ADEQ Annual Report Form (6/23/2011)

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

PERMIT NUMBER: ARR00B36					
FACILITY NAME:	les	FACILITY PHYSICAL ADDRESS:	2500 South Washington		
			Magnolia, AR 7175	3	
INDUSTRIAL A2 SECTOR:	OUTFALL NO:	001 REPOR YEAR:	ΓING 2013		
	·	1		,	
PARAMETER	Benchmark	QUALITY OR CO	DNCENTRATION	UNITS	
	Value	JANUARY-JUNE	JULY-DECEMBER	014115	
Chemical Oxygen Demand (COD)	120	90.000	44.000	mg/L	
Total Suspended Solids (TSS)	100	289.400	289.400 4.000		
Oil and Grease (O&G)	15	1.500	1.200	mg/L	
рН	6.0-9.0	6.000	6.000	S.U.	
Arsenic	0.169	0.050	0.069		
Copper	0.0756	0.200	0.281		
					
		· · · · · · · · · · · · · · · · · · ·	·		

Sampling Period: Date of Storm Event Sampled: Duration of Event: Estimate of Rainfall Event:

Time Since Last Measurable Event: Estimate of Total Discharged Volume:

JANUARY-JUNE JULY-DECEMBER

04/18/13	12/06/13	
4	6	hours
3/4	3/4	inches
12	14	days
		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.

Signature & Date

Printed Name & Title of Official

5301 Northshore Drive, North Little Rock, AR 72118 501-682-0623 Fax 501-682-0880 Version 08/30/2010

Appendix E

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5	Facility	Hixson Lu	mber		0	015			v'	1		
~		• :			R	lain Lo	Dġ		V			
	Date	Time	Rain Amount	Name	Duration in hours		Date	Time	Rain Amount	Name	Duration in hours	
	1/3	TAM	.25 "	Dules	3]	2/2/14	PAM	1 1/2 "	Duke] ·
	1/8	IUpm	,50''	Dute	4	· .	21214	lean	210.	Diable	8	
	1113	Lam	1.4"	Duk	6	1	4/3/14	10:3000		Dister	4	1
	1/26	10mm	.25	Dim	4	•	416.114	IIAm	2.1	Putre	6	
	2/10	YAM		Dute	6		4/10/14	4 Am	,25"	Dute	ZHR]
	2/18	Spm	• 75	Dure	2		4/12/14	Bon	1/2"	Duta	4 MR	
	2125	7Am	105	Dube	/		4/13	BAM	1/4 "	Detres	6 HR	
	3/10	6Am		Diske	6		4/21	8AM	1/2"	Dute		Test
-	-	2 pm		Daske	6	Hzo	4/24	3pm	1/2'	Dal	4 AR	
57	4/18	Mon	3/2-1"	Date		the strange	4/28	4 Am	1/2"	Dates	3/2 HR	1
	5/2 5/9	SAM	Y4 4	Duly	_2		5/8	5pm	1 3/4"	Derter	· 10the	1
	5/15	7.000		Dulu_	2	ſ .	5/18	6 Am	1 1/4 11	Dide	- 9 HA	· · ·
	5/22	3.00000	111	Dith	6 B							
	67	5. pm	211	Dates-	9							
	6/6	12 om	1.5"	Dulse	5	<u>,</u>						ł
	6/13	liam	2"	Dulce	<u> </u>							
i	6/16	10:45	2"	Dike	3							
ر ر	6/17	11:45A	. 1/4"	Dike	2							
	7/23	9:00 pm	3 1	Dule	5.	ĺ						
	9/20	HAM	6.0"	Dista	13							ţ
	1016	Bem	1,51	Duke	. 6							
	10126	4pm	1/4	Duhe	- 3							
	1111	Jon	- 3	Dul	10							
	11/9	4nm	8/4	Duhi	12				_			
	11115	7AM	3	Done	4					•		
	11/22	7AM		Didor	12]						
	12/6	Tom	3/4	Duhe								
	12/20	gam	21/2	Dur	12						·	
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SOR LIS RESEARCH ASSOCIATES, INC.

8100 NATIONAL DRIVE, LITTLE ROCK, AR 72209

Roin Event 4/18/13 1:15pm 314 RainFirst

501-562-8139 800-331-8139 FAX 501-562-7025										
FMA JUI-302-7023		СН	IAIN (DF C U	STODY	RECOR	RD			
TURN AROUND TIME RUSH ZAHR. 48 HR. S DAY (REG) OTHER	CLIEN	for lab/	0FFICE US					C Sc Nc	TANDARD METHODS PRESER 4= COOL TO 4.C 2= SULRIRK ACID TO pH<2 2= NITRIC ACID TO pH<2 T= THIOSULFATT FOR DECHI W= WINKLER AZIDE MODIFIC P= MEMBRANE ELECTRODE H= pH >12	ORINATION ATION
TANAE OF COMPANY, CITY, OR PROTECT	PRC	ECT NO:			 		SAMPLER(S	R NAVAE: IP	RIND	
Hixson Lunber Soles Magadra AR		Du	FF	- A(1	11		\sum	Huic	1 Dike	
SAMPLE SAMPLEID	START	EMD	COMP	FIELD	MALYSIS			ing org	CONTAINER TYPE	ANALYSS REQUIRED
NO: AND/ OR COLLECTION LOCATION	OATEITIME	DATE/TIME	GLAB	βH	TEMP	FLOW	CLZ	D.0(P)	PRESERVATIVE	
1 autrall	1:104	1:40	24	6_					Andoer Glass	OEG
2	<u> .</u>	-	╡	-		<u> </u>			14gal plastic	155
2 3 4		+ -		+					Boz plastic H2504	Metals, As, Cu
<u></u>					`				Dralplastic HTW3	retus, HS, CU
								<u> </u>	·	
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METHOD OF SHIPMENT (ORCLE)	FIELDCA	LEBRATION RE	CORD		NOTES/CO	DAMMENTS/0	BSERVATION	NS	1	
FED EX WALKEN SRA (UPS) OTHER	pH 7									· · · · · · · · · · · · · · · · · · ·
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	pH 10									
	0.0				ļ					
TYPE OF SAMPLE(S): (ORELE) WATER SOIL W/W SLUDGE OTHER	╌┨┊══╌╊			···	FIELD AN	ALYSIS COND	UCTED SY: (CIRDLE}	SRA CUENT	
	DATE/TIME:	1.45		llist;=	-RECEIVED		·	<u>·</u>		
RELINQUISHED BY Dut Alth	DATE/TIME:	1:450	n l	4/18/1	5	BY: 1 BY(LASI:	hnon	R	idd la	DATE/TIME: LI- 9-13 DATE/TIME:
		·····				0	<u> </u>	0		

Appendix F

4. Corrective Actions Planned or Taken

Instructions: <u>Complete this section for each pollutant parameter</u> <u>benchmark during the previous calendar year (Jan – Dec).</u> the facility must investigate the cause of each parameter excer To do this, indicate below in which sampling period an excer taken at a sample location, indicate all sample results that e exceeded the benchmark for more than one parameter (e.g. Section 4 and complete one for each parameter.	If the parameter benchmark value is exceeded, eedance and determine a corrective action plan. edance occurred. If more than one sample was exceeded the benchmark. Note: If the facility
Pollutant Parameter: TSS benchmark was exceeded durin apply):	
I st Sampling period (January-June)	^{2nd} Sampling Period (July-December)
For the each pollutant parameter exceeding the benchmark <u>completed</u> during the previous calendar year and include the	•
Review of BMP's and SWPPP; Install a section of silt fencin the sample. Continue to let the vegetation grow around the sa	• •
For the each pollutant parameter exceeding the benchmark s during the previous calendar year, but have not yet been complete corrective actions.	

ADEQ Annual Report Form (6/23/2011)

Instructions: <u>Complete this section for each pollutant parameter (e.g., turbidity, copper) that exceeded a benchmark during the previous calendar year (Jan – Dec).</u> 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 <u>&</u> zinc), make additional copies of Section 4 and complete one for each parameter.

Pollutant Parameter: Copper benchmark was exceeded during the following sampling period (check all that apply):

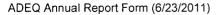
 \boxtimes 1st Sampling period (January-June)

 $\boxtimes 2^{nd}$ Sampling Period (July-December)

For the each pollutant parameter exceeding the benchmark_summarize below any corrective actions plan **<u>completed</u>** 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.

Review of BMP's



Instructions: <u>Complete this section for each pollutant parameter (e.g., turbidity, copper) that exceeded a benchmark during the previous calendar year (Jan – Dec).</u> 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: Copper benchmark was exceeded during the following sampling period (check all that apply):

☐ 1st Sampling period (January-June)

 \boxtimes 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.

Review of BMP's

ADEQ Annual Report Form (6/23/2011)

Appendix G

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

PERMIT NUMBER: ARR00B36	7	PERMITTEE NAME:	Lavid Duke		
FACILITY NAME: Hixson Lumber Sales		FACILITY PHYSICAL ADDRESS:	2500 S. Washington St.		
			Magnolia, AR 7	1753	
INDUSTRIAL A SECTOR:	OUTFALL NO:	001 REPORT	III∿G 		
PARAMETER	Benchmark	QUALITY OR CO	DNCENTRATION	UNITS	
	Value	JANUARY-JUNE	JULY-DECEMBER		
Chemical Oxygen Demand (COD)	120	290		mg/L	
Total Suspended Solids (TSS)	100	28		mg/L	
Oil and Grease (O&G)	15	<5		mg/L	
pH	6.0-9.0	8.0		S.U.	
Arsenic	0.169	<0.05		mg/L	
Copper	0,0756	0,0064		mg/L	
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			· · · · · · · · · · · · · · · · · · ·		
L	l				

Sampling Period;	JANUARY-JUNE	JULY-DECEMBER	
Date of Storm Event Sampled:	2-1-2011		
Duration of Event:	5		hours
Estimate of Rainfall Event:	0,5		inches
Time Since Last Measurable Event:	21		days
Estimate of Total Discharged Volume:	110,846		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.

2-11-11 RL

Signature & Date

Printed Name & Title of Off

\$301 Northshore Drive, North Little Rock, AR 72118 501-682-0623 Fax 501-682-0880 Version 08/30/2010

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

PERMIT NUMBER: ARR00B36	7	PERMITTEE NAME:	David Duke	
FACILITY Hixson Lumber Sales		FACILITY PHYSICAL ADDRESS:	2500 S. Washin	gton St.
			Magnolia, AR 71	.753
INDUSTRIAL A2 SECTOR:	OUTFALI NO:	L 001 REPORT YEAR:	TING 2012	
PARAMETER	Benchmark	QUALITY OR CC	ONCENTRATION	UNITS
	Value	JANUARY-JUNE	JULY-DECEMBER	
Chemical Oxygen Demand (COD)	120	45	44	mg/L
Total Suspended Solids (TSS)	100	19	7.3	mg/L
Oil and Grease (O&G)	15	<5	0.7	mg/L
pH	6.0-9.0	6.0	(g.O	S.U.
Arsenic	0.169	<0.05	0.19	mg/L_
Соррег	0.0756	. 0.0048	0.151	mg/L_
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Sampling Period:	JJ.	ANUARY-JUNE JULY	Y-DECEMBER	
Date of Storm Event Sampled:		3/20/12	2/25/12	
Duration of Event:		24		hours
Estimate of Rainfall Event:		4.5		nches
Time Since Last Measurable Ever		9		<u>ys</u>
Estimate of Total Discharged Vol	ume:	994,374	<u></u> 2a	llons
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.

liz , ¢. Signature & Date

DAVID Dule - HR/Safedy Printed Name & Title of Official

5301 Northshore Drive, North Little Rock, AR 72118 501-682-0623 Fax 501-682-0880 Version 08/30/2010



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

PERMIT NUMBER: ARR00B36	7	PERMITTEE NAME:	Hixson Lumber Sal	es
FACILITY NAME:	es FACILITY PHYSICAL ADDRESS:		2500 South Washington	
			Magnolia, AR 7175	3
INDUSTRIAL A2 SECTOR:	OUTFALL NO:	001 REPOR YEAR:	ΓING 2013	
PARAMETER	Benchmark QUALITY OR CON			UNITS
L	Value	JANUARY-JUNE	JULY-DECEMBER	
Chemical Oxygen Demand (COD)	120	90.000	44.000	mg/L
Total Suspended Solids (TSS)	100	289.400	4.000	mg/L
Oil and Grease (O&G)	15	1.500	1.200	mg/L
рН	6.0-9.0	6.000	6.000	S .U.
Arsenic	0.169	0.050	0.069	
Copper	0.0756	0.200	0.281	
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Sampling Period: Date of Storm Event Sampled: Duration of Event: Estimate of Rainfall Event: Time Since Last Measurable Event:

Estimate of Total Discharged Volume:

JULY-DECEMBER JANUARY-JUNE

04/18/13	12/06/13	
ц	6	hours
3/4	3/4	inches
12	14	days
		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.

Signature & Date

Printed Name & Title of Official

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Appendix H

NPDES Compliance Inspection Report

	Section A: National	Data System Coding	
Transaction Code	NPDES		nspec. Type Inspector Fac. Type
1 2 3			B 19 20
	Ken	narks	
Inspection Work Days	Facility Evaluation Rating	B1 QA -	
69	70	717273	74 7580
	Section B: I	Facility Data	
Name and Location of Facility Insp	ected (For industrial users	Entry Time/Date	Permit Effective Date
discharging to POTW, also include		1 0 1-	12 12 10
number) Hisson Lumber	<i>c</i> 1.	1-8-13	/2-03-10
1500 CUMOCH	JAICS	Exit Time/Date	Permit Expiration Date
2500 South Washin			
Magnolia, AR, 717	53	1-8-13	06-30-14
	e(s)/Title(s)/Phone and Fax Number(s)	Quarterly Visual Site Inspection Dates:
David Duke, HR/S.	itety P870	-234-1820	#1 NONE
······		· · · · · · · · · · · · · · · · · · ·	
Name, Address of Responsible Offi	cial/Title/Phone and Fax Number	Contacted	#2
Same As Above		Contacted	#3 //
			#4
			ļ
		ated During Inspection	
(S=	Satisfactory, M=Marginal, U=	Unsatisfactory, N=Not	Evaluated
5 Permit	Flow Measurement	S Operations / Mainter	nance 5 Sampling
Records/Reports	Self-Monitoring Program	Sludge Handling/Dis	posal S Pollution Prevention
S Facility Site Review	S Compliance Schedules	N Pretreatment	Multimedia
N Effluent/Receiving Waters	Laboratory	Storm Water	N Other:
Section D: S	ummary of Findings/commer	nts (Attach additional s	heets if necessary)
1 1	Quarterly VISUAL remove contaminuted		
Name(s) and Signature(s) of Inspec	ace Hestin ESGT	/Telephone/Fəx	Date 1-8-13
Signature of Reviewer	V Agency/Office/	/Telephone/Fax	Date
KIA LIL			1-8-13

ADEQ Water NPDES Inspection AFIN: 14-00209	Permit #: ARROOB367
SECTION A: PERMIT VERIFICATION	
PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS	
DETAILS:	
1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE:	
2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES:	ZY ON ONA ON
3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT:	
ALL DISCHARGES ARE PERMITTED:	
SECTION B: STORM WATER POLLUTION PREVENTION PLAN EVALUA	
PERMITTEE SWPPP MEETS PERMIT REQUIRMENTS	
DETAILS:	
. Pollution Prevention Team	
A. Identify specific individuals	
B. Outline their responsibilities	
2. Description of potential pollutant sources, including:	
A. Site map indicating:	
A1) Drainage areas	
A2) Drainage patterns/outfalls	
A3) Structural and non-structural controls	
A4) Surface waters	
A5) Significant materials exposed to precipitation	
A6) The location of leaks or spills that have occurred in the last 3 years.	
A7) Location of industrial activities exposed to precipitation including:	
i. Fueling stations	
ii. Vehicle/equipment maintenance or cleaning areas	
iii. Loading/unloading areas	
iv. Waste treatment, storage, or disposal areas	
v. Liquid storage tanks	
vi. Processing areas	
vii. Storage areas	
B. A list of pollutants likely to be present in the discharges	
C. Description of significant materials handled, treated, stored, or disposed of such that e	xposure to storm
water occurred in the last 3 years.	
C1) Description of the method and location of storage or disposal	
C2) Description of all material management practices	
C3) Description and location of existing structural and non-structural controls	DY ON ZINA ON
D. List of significant spills and leaks that occurred in the 3 years prior	
to the effective date of this Permit	
E. Summary of existing storm water sampling data	
F. Description of areas with a high erosion potential G. A narrative summarizing potential pollutant sources	
o. A namative summarizing potential politicalit sources	
A description of appropriate measures and controls, including:	
A. Good housekeeping procedures	
B. Preventive maintenance procedures	
C. Spill prevention and response procedures	
D. Inspection procedures	
E. Employee training program	
F. Recordkeeping and internal reporting procedures	
G. Non- storm water discharge certification	
H. Identify authorized non-storm water discharges and appropriate controls	
I. Erosion and sediment controls for areas with a high erosion potential	
J. A narrative consideration of traditional storm water management practices	
K. Plans for implementation and maintenance of traditional measures found reasonable ar	nd appropriate AY ON ONA ON

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ADEQ Water NPDES Inspection AFIN: 14-00209 Permit #: ARR 00B3

4. Annual Site Compliance Evaluation Reports which include:	
A. A summary of the scope of the inspection	
B. Personnel making the inspection	DY ON ONA ONE
C. Major Observations	DY ON ONA ONE
D. Actions taken to revise the Pollution Prevention Plan	
E. Certification of compliance or a list of non-compliance incidents	DY ON ONA ONE
5. If discharging to a large or medium municipal separate storm sewer,	
Compliance with applicable requirements in the municipal storm water management program.	
6. Consistency of the SWPPP with other plans	
7. Additional requirements for facilities subject to Emergency Planning and Community Right to Know A	ct (EPCRA) Section 313 requirements
A. A description of the measures used in areas where Section 313 water priority chemicals are stored, pr	rocessed, or otherwise handled to:
A1) Minimize the potential contact or storm water run0on with the chemicals	
A2) Prevent exposure of the chemicals to storm water and wind	
B. A discussion of the measures taken to minimize the discharge of Section 313 water priority chemicals	from the following areas:
B1) Liquid storage areas	DY DN ØNA DNE
B2) Non-liquid storage areas	DY DN DNA DNE
B3) Truck and railcar loading areas	
B4) Truck and railcar loading areas	DY ON DINA ONE
B5) Transfer, processing, or handling areas	DY DN DNA DNE
B6) Other areas	
B7) Preventive maintenance and housekeeping	DY DN ØNA DNE
B8) Facility security	DY ON PINA ONE
B9) Training	
B10) Professional Engineer (PE) certification every 3 years	DY DN DINA DNE
8. Assurance that any salt storage piles present onsite are covered or enclosed	

te Client Concurrence Inspector Signature & Date

<u></u>	HARDOB367	· · · · · · · · · · · · · · · · · · ·		
		Tata System Coding		
rantacion Sode	NPDES	Yr/Mo/Day		
S	11 12 Re ⁻		10	20
				• •, •
spection Work Days	Facility Evaluation Rating			Reserved
769	70	717273	74 75_	30
		Facility Data	·	
	Inspected (For industrial users Sude POTW name and NPDES permit	Entry Time/Date	1	mit Effective Date
	umber Sales, Inc	1-29-14/10	50	
	h Washington Stret	Exit Time/Date		mit Expiration Date
Magnolia	AK 1103	3:30 /1-29	-14	· .
·				· · · · · · · · · · · · · · · · · · ·
ame(s) of On-Site Represent	ative(s)/Title(s)/Phone and Fax Number(s) - 12	Visual Inspec	ctons
Javid Dike	622 - 124	7820	1. 2 -	14 - 13
	870-234	- 1/250		
ame, Address of Responsible	e Official/Title/Phone and Fax Number	Contacted	24-	18-13
David D. Ke	NO COL	Contacted	8-	17-13
Cavid Like	MR Satety	Yes No	3	
			4 12-	06-13
• ••••••••••••••••••••••••••••••••••••	···			
	Section C: Areas Dealu			
	(S=Satisfactory, M=Marginal, U=	Unsatisfactory, N=No	t Evaluated	·
Perroit	N Flow Measurement	S Operations / Maint	ienance S S	Sampling
Secords/Reports	Self-Monitoring Program	Sludge Handling/D		Pollution Prevention
Meconaly Reports		IV Sludge Handling/D		0.12ERATOT CONTRACT
Pacility Tite Review	S Compliance Schedules	N Pretreatment	N r	viu Itimedia
	1)	C	11	N/h
Effluent/Receiving Water	s N Laboratory	S Storm Water		Diliter:
Section E): Summary of Findings/commen	ts (Attach additional	sheets if nece	ss ary)
	<u> </u>		- 01 (6
ceived 1sthalt o	f year Sw Test Kit in	April 01 2013;	2nd hai	i came in
le October or	early November. Clie	nt conducts 1	monthly	inspections of
sility, Explaine	d the requirements of	the quarterly .	sisual so	-pling.
	new requirement to 1			
2: because of	changes to facility gl	rounds, I don	4 think t	hat this outfall
needed any lon	ger. Discussed add. 4	ion at sedges	or monke	y grass at out
filter TSS,				
mets) and Signature(s) of In:	spector(s) Agency/Office/1	felephone/Fax		Date
		7		1-29-2014
ain III la				
wigni, me		elephone/Fax		Date
nature of Beviewer	Ē			
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K. Plans for implementation and maintenance of traditional measures found reasonable and appropriate V IN INA INE VY IN INA INE				

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C. Major Observation's		INY CIP LINA DINE
D. Actions taken to revise the Pollution	Prevention Plan	INY DH ENADNE
E. Certification of compliance or a list o	f non-compliance incidents	
C lédicebourius tes la ser li		· · · · · · · · · · · · · · · · · · ·
5. If discharging to a large c medium mur	nicipal separate storm sewer.	
comprance with application requirement	its in the municipal storm water management progra-	
6. Consistency of the SW/PPP with other pl		
to assistancy of the Sweeter with other p		
7. Additional requirements 'c' facilities su	bject to Emergency Planning and Community Right &	Know Act (EFIRA) Section 313 requirements
A. A description of the measures used in	areas where Section 313 water priority chemicals are :	stored processed, or otherwise handled to:
A1) Minimize the potential contact or :	storm water run0on with the chemicals	ELY ON KINA DNE
A2) Prevent exposure of the chemicals	to storm water and wind	
B. A discussion of the measures taken to	minimize the discharge of Section 313 water priority c	hemicals from the following areas:
B1) Liquid storage areas		CIY ON WA DNE
B2) Non-liquid storage areas		CIY DA DINE
B3) Truck and railcar loading areas		
B4) Truck and railcar loading areas		DY DN DYA DNE
B5) Transfer, processing, or handling a	reas	DY ON PUA ONE
B6) Other areas		DY ON KINA ONE
B7) Preventive maintenance and house	ekeeping	DY DN DY A DNE
B8) Facility security		DY DN DNA DNE
B9) Training		DY DN DYA DNE
810) Professional Engineer (PE) certific	ation every 3 years	DY ON PINA ONE
8. Assurance that any salt storage piles pre	esent onsite are obvered or enclose	EY CIN MUA DNE

Client Concurrence inapector Signature Date be 1/29/14. 1/291 | |4

Storm Water Compliance Checklist

- CARANT AND A REAL PARTICIPANT AND A REAL PARTY AND A REAL PARTY.	Action	Date	Initials
First Half of	Ø Storm water sample collected and sent to lab		
the year (Jan. – June)	Results received		d.
(**********	pH tested and recorded on site by Stormwater team		
First Quarter	☑ 1st Monthly Site Inspection		
of the year (Jan. – March)	2nd Monthly Site Inspection		
(,	I 3rd Monthly Site Inspection		
	First Quarterly Visual Inspection		
	Each rainfall event measured with on site rain gauge and recorded		
	Updates to site plan if needed		
	Records maintained		
Second	I 1st Monthly Site Inspection		
Quarter of the Year	2nd Monthly Site Inspection		
(April - June)	Z 3rd Monthly Site Inspection		
	Second Quarterly Visual Inspection		
	Each rainfall event measured with on site rain gauge and recorded		
	Updates to site plan if needed		
	Records maintained		
Second Half of	Storm water sample collected and sent to lab		anna a la mhainn ann air an cuid an bhliann faca
the year (July – Dec.)	Z Results received		
(July Dec.)	pH tested and recorded on site by Stormwater team		
Third Quarter	Ist Monthly Site Inspection		
of the Year (July – Sept.)	2nd Monthly Site Inspection	-	
	2 3rd Monthly Site Inspection		
	D Third Quarterly Visual Inspection		ſ
	Each rainfall event measured with on site rain gauge and recorded		
	D Updates to site plan if needed		
	D Records maintained		
Fourth	Ist Monthly Site Inspection		
Quarter of the Year	2nd Monthly Site Inspection		
(Oct. – Dec.)	27 3rd Monthly Site Inspection		
	Fourth Quarterly Visual Inspection		
	Each rainfall event measured with on site rain gauge and recorded		
	Updates to site plan if needed		
	Records maintained		
Annually	Employee Training		
	Comprehensive Site Compliance Evaluation and Report		
	Annual compliance report submitted to ADEQ (by ESGI)		
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*Updates should be made to the plan as needed (i.e. any changes to the site, team members, and best management practices)



June 5, 2014

Walter Hixson, Vice President Hixson Lumber Sales P.O. Box 1466 Magnolia, AR 71754

RE: Response to Inspection (Columbia Co) AFIN: 14-00029 NPDES Permit No.: ARR00B367

Dear Mr. Hixson:

I have reviewed the response pertaining to my routine compliance inspection of the Hixson Lumber Sales facility. The information provided sufficiently addresses the violations referenced in my inspection report. At this time, the Department has no further comment concerning this particular inspection. Acceptance of this response by the Department does not preclude any future enforcement action deemed necessary at this site or any other site.

If we need further information concerning this matter, we will contact you. Thank you for your attention to this matter. Should you have any questions, feel free to contact me at (501) 837-2073 or you may e-mail me at <u>youngm@adeq.state.ar.us</u>.

Sincerely,

Ming

Michael D. Young District 8 Field Inspector Water Division