

Water Compliance Inspection Report

Section A: National Data Coding (i.e., PCS)

Transaction Code	NPDES #	yr / mo / dy	Inspection Type	Inspector	Facility Type
N 5	T N 0 0 2 1 5 6 3	1 2 0 9 1 8	C	S	1
Remarks					

Inspection Work Days	Facility Self-Monitoring Rating	BI	QA	Reserved			
		N	N				

Section B: Facility Data

Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number) Dyer POTW Dyer, Tennessee	Entry Time / Date 0830 / 18SEPT12	Permit Effective Date 01SEPT07
	Exit Time / Date 1200 / 18SEPT12	Permit Expiration Date 18SEPT12

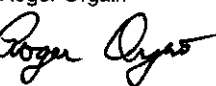
Name(s) of Onsite Representative(s) / Title(s) / Phone and Fax Number(s) William Caton / Operator / 1-731-692-3903	Other Facility Data
Name, Address of Responsible Official / Title / Phone and Fax Number Walter Thompson / 235 S. Royal St. / Mayor / 1-731-692-3763 Contacted <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Section C: Areas Evaluated During Inspection (Check only those areas evaluated)

<input type="checkbox"/> Permit	<input type="checkbox"/> Flow Measurement	<input checked="" type="checkbox"/> Operation & Maintenance	<input type="checkbox"/> CSO / SSO (Sewer Overflow)
<input type="checkbox"/> Records / Reports	<input type="checkbox"/> Self-monitoring Program	<input type="checkbox"/> Sludge Handling	<input type="checkbox"/> Pollution Prevention
<input type="checkbox"/> Facility Site Review	<input type="checkbox"/> Compliance Schedule	<input type="checkbox"/> Pretreatment Program	<input type="checkbox"/> Multimedia
<input type="checkbox"/> Effluent / Receiving Waters	<input type="checkbox"/> Laboratory	<input type="checkbox"/> Storm Water	<input type="checkbox"/> Other: _____

Section D: Summary of Findings / Comments

No Major Deficiencies

Name (s) and Signature(s) of Inspector(s) Roger Orgain 	Agency / Office / Phone and Fax Numbers TDEC / JEFO - DWR	Date 18SEPT12
Signature of Management Q A Reviewer	TDEC / JEFO - DWR	