

# ADEQ

ARKANSAS  
Department of Environmental Quality

December 20, 2004

Mr. Glen Holmes, General Manager  
El Dorado Water Utilities  
P.O. Box 1587  
El Dorado, AR 71731

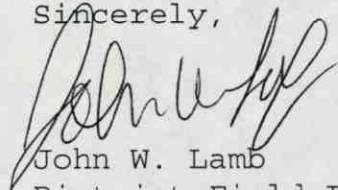
Re: NPDES Permit No. AR0033723

Dear Mr. Holmes:

On December 13, 2004, I performed a routine compliance inspection ~~and a pretreatment compliance inspection~~ of the El Dorado South Wastewater Treatment Facility in accordance with the provisions of the federal Clean Water Act, the Arkansas Water and Air Pollution Control Act and the regulations promulgated thereunder. These inspections revealed that you are in compliance with terms of your permit.

If I can be of any assistance, please contact me at 870-862-5941.

Sincerely,



John W. Lamb  
District Field Inspector  
Water Division

cc: NPDES Branch

244  
RECEIVED  
4049  
JAN 4 2005  
43243

Received by:  
Jan 5 2004  
ADEQ Records Management Section

**\*Please see**

Allen Hillman - pretreatment  
**For Complete Report**

NPDES COMPLIANCE FILES  
NPDES # 33723  
\_\_\_ DMR'S *ft*  
\_\_\_ NCR  
\_\_\_  CORRESPONDENCE  
\_\_\_ CRAS



Form Approved  
OMB No. 2040-0003  
Approval Expires 7-31-85

**UNITED STATES ENVIRONMENTAL PROTECTION AGENCY**  
Washington, D.C. 20460  
**NPDES Compliance Inspection Report**

**Section A: National Data System Coding**

Transaction Code	NPDES	yr/mo/day	Inspec. Type	Inspector	Fac Type
1 N 2 5 3 A R 0 0 3 3 7 2 3 11 12 0 4 1 2 1 3 17 18 C 19 S 20 1					
Remarks					
7 0 - 0 0 3 4 1 U n i o n					
Inspection Work Days	Facility Evaluation Rating	BI	QA	-----Reserved-----	
67 69	70 4	71 N	72 N	73	74 75 80

**Section B: Facility Data**

Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number) City of El Dorado South Wastewater Treatment Plant South west Ave El Dorado, AR	Entry Time /Date 9:04	Permit Effective Date 01 November 2002
	Exit Time/Date 16:10	Permit Expiration Date 31 October 2007
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) Harold Baker, Treatment Superintendent/870-862-6451	Other Facility Data	
Name, Address of Responsible Official/Title/Phone and Fax Number Glen Holmes, General Manager/870-862-6451 P.O. Box 1547 El Dorado, AR 71731	Contacted Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

**Section C: Areas Evaluated During Inspection**

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

S	Permit	S	Flow Measurement	S	Operations & Maintenance	S	Sampling
S	Records/Reports	S	Self-Monitoring Program	N	Sludge Handling/Disposal	N	Pollution Prevention
S	Facility Site Review	N	Compliance Schedules	N	Pretreatment	N	Multimedia
S	Effluent/Receiving Waters	S	Laboratory	N	Storm Water		Other:

**Section D: Summary of Findings/Comments (Attach additional sheets if necessary)**

The facility appears well operated and maintained. No problems were noted. The facility does not have a primary flow measuring device, which was the way the plant was approved, so no flow check could be done. The facility must pump the effluent which can only be a set rate. Mr. Baker checks the flow meter run time of the pumps to insure the meter is reading correctly.

The facility is not distilling ammonia samples, the facility has comparable data onsite as required.

Name(s) and Signature(s) of Inspector(s) John Wesley Lamb	Agency/Office/Telephone/Fax ADEQ/El Doraod/870862-5941/870-862-3509	Date 20 December 2004
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date

**SECTION A - PERMIT VERIFICATION**

PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS  
DETAILS:

S  M  U  NA (FURTHER EXPLANATION ATTACHED no )

- 1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE  Y  N  NA
- 2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES  Y  N  NA
- 3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT  Y  N  NA
- 4. ALL DISCHARGES ARE PERMITTED  Y  N  NA

**SECTION B - RECORDKEEPING AND REPORTING EVALUATION**

RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT.  
DETAILS:

S  M  U  NA (FURTHER EXPLANATION ATTACHED no )

- 1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRs.  Y  N  NA
- 2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE.  S  M  U  NA
  - a) DATES, TIME(S) AND LOCATION(S) OF SAMPLING  Y  N  NA
  - b) NAME OF INDIVIDUAL PERFORMING SAMPLING  Y  N  N
  - c) ANALYTICAL METHODS AND TECHNIQUES.  Y  N  NA
  - d) RESULTS OF ANALYSES AND CALIBRATIONS.  Y  N  NA
  - e) DATES AND TIMES OF ANALYSES.  Y  N  NA
  - f) NAME OF PERSON(S) PERFORMING ANALYSES.  Y  N  NA
- 3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE.  S  M  U  NA
- 4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR.  S  M  U  NE
- 5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA.  Y  N  NA

**SECTION C - OPERATIONS AND MAINTENANCE**

TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED.  
DETAILS:

S  M  U  NA (FURTHER EXPLANATION ATTACHED no )

- 1. TREATMENT UNITS PROPERLY OPERATED.  S  M  U  NA
- 2. TREATMENT UNITS PROPERLY MAINTAINED.  S  M  U  NA
- 3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED.  S  M  U  NA
- 4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE.  S  M  U  NA
- 5. ALL NEEDED TREATMENT UNITS IN SERVICE.  S  M  U  NA
- 6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED.  S  M  U  NA
- 7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED.  S  M  U  NE
- 8. OPERATION AND MAINTENANCE MANUAL AVAILABLE.  
STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED.  Y  N  NA
- PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED.  Y  N  NE

**SECTION C - OPERATIONS AND MAINTENANCE (CONT'D)**

9. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR?  Y  N  NA  
 IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED?  Y  N  NA  
 HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS?  Y  N  NA

10. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT?  Y  N  NA  
 IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT?  Y  N  NA

**SECTION D - SELF-MONITORING**

PERMITTEE SELF-MONITORING MEETS PERMIT REQUIREMENTS.  S  M  U  NA (FURTHER EXPLANATION ATTACHED no ).  
 DETAILS:

1. SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT.  Y  N  NA

2. LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES.  Y  N  NA

3. FLOW PROPORTIONED SAMPLES OBTAINED WHEN REQUIRED BY PERMIT.  Y  N  NA

4. SAMPLING AND ANALYSES COMPLETED ON PARAMETERS SPECIFIED IN PERMIT.  Y  N  NA

5. SAMPLING AND ANALYSES PERFORMED AT FREQUENCY SPECIFIED IN PERMIT.  Y  N  NA

6. SAMPLE COLLECTION PROCEDURES ADEQUATE  Y  N  NA

a) SAMPLES REFRIGERATED DURING COMPOSITING.  Y  N  NA

b) PROPER PRESERVATION TECHNIQUES USED.  Y  N  NA

c) CONTAINERS AND SAMPLE HOLDING TIMES CONFORM TO 40 CFR 136  Y  N  NA

7. IF MONITORING AND ANALYSES ARE PERFORMED MORE OFTEN THAN REQUIRED BY PERMIT, ARE THE RESULTS REPORTED IN PERMITTEE'S SELF-MONITORING REPORT?  Y  N  NA

**SECTION E - FLOW MEASUREMENT**

PERMITTEE FLOW MEASUREMENT MEETS PERMIT REQUIREMENTS.  S  M  U  NA (FURTHER EXPLANATION ATTACHED yes )  
 DETAILS: see page one

1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED.  Y  N  NA  
 TYPE OF DEVICE NONE

2. FLOW MEASURED AT EACH OUTFALL AS REQUIRED.  Y  N  NA

3. SECONDARY INSTRUMENTS (TOTALIZERS, RECORDERS, ETC.) PROPERLY OPERATED AND MAINTAINED.  Y  N  NA

4. CALIBRATION FREQUENCY ADEQUATE. (DATE OF LAST CALIBRATION   )  Y  N  NA  
 RECORDS MAINTAINED OF CALIBRATION PROCEDURES.  Y  N  NA  
 CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE.  Y  N  NA

5. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE.  Y  N  NA

6. HEAD MEASURED AT PROPER LOCATION.  Y  N  NA

7. FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES.  Y  N  NA

**SECTION F - LABORATORY**

PERMITTEE LABORATORY PROCEDURES MEET PERMIT REQUIREMENTS.  S  M  U  NA (FURTHER EXPLANATION ATTACHED no )  
 DETAILS:

1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(b) FOR SLUDGES)  Y  N  NA

**SECTION F - LABORATORY (CONT'D)**

- 2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED  Y  N  NA
- 3. SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT.  S  M  U  NA
- 4. QUALITY CONTROL PROCEDURES ADEQUATE.  S  M  U  NA
- 5. DUPLICATE SAMPLES ARE ANALYZED. 10\_ % OF THE TIME.  Y  N  NA
- 6. SPIKED SAMPLES ARE ANALYZED. 10\_ % OF THE TIME.  Y  N  NA
- 7. COMMERCIAL LABORATORY USED.  Y  N  NA

LAB NAME American Interplex  
 LAB ADDRESS Kanis Road, Little Rock, AR  
 PARAMETERS PERFORMED CBOD

**SECTION G - EFFLUENT/RECEIVING WATERS OBSERVATIONS.**  S  M  U  NA (FURTHER EXPLANATION ATTACHED no).

**Based on visual observations only.**

OUTFALL NO.	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOAT SOL.	COLOR	OTHER
001	none	none	Slight	none	none	Lt green	

Comments:

**SECTION H - SLUDGE DISPOSAL**

SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS.  S  M  U  NA (FURTHER EXPLANATION ATTACHED no).  
 DETAILS:

- 1. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY.  S  M  U  NA
- 2. SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503.  S  M  U  NA
- 3. FOR LAND APPLIED SLUDGE, TYPE OF LAND APPLIED TO:            (e.g., FOREST, AGRICULTURAL, PUBLIC CONTACT SITE)

**SECTION I - SAMPLING INSPECTION PROCEDURES** (FURTHER EXPLANATION ATTACHED   ).

- 1. SAMPLES OBTAINED THIS INSPECTION.  Y  N  NA
- 2. TYPE OF SAMPLE OBTAINED  
 GRAB            COMPOSITE            SAMPLE            METHOD            FREQUENCY
- 3. SAMPLES PRESERVED.  Y  N  NA
- 4. FLOW PROPORTIONED SAMPLES OBTAINED.  Y  N  NA
- 5. SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE.  Y  N  NA
- 6. SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE.  Y  N  NA
- 7. SAMPLE SPLIT WITH PERMITTEE.  Y  N  NA
- 8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED.  Y  N  NA
- 9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT.  Y  N  NA

## DMR Calculation Check

Reporting Period: From 2004 Oct 01 To 2004 Oct 31  
 Day Year Month Day Year Month

Parameter Checked: Ammonia Nitrogen

or Max- Mg/l	Loading Mass Monthly Avg. (lbs/ day)	Monthly Avg.-Mg/l	Concentration 7-Day Avg. Daily
Reported Value:	72	1	2
Calculated Value:	72	1	2
Permit Value:	292	5	8

If calculated value does not equal reported value, explain: equal



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1 N 2 5 3 A R 0 0 3 3 7 2 3 11 12 0 4 1 2 1 3 17 18 U 19 S 20 2					
Remarks					
0 0 4 C					
Inspection Work Days	Facility Evaluation Rating	BI	QA	Reserved	
67 69	70 4	71 N	72 N	73	74 75 80

Section B: Facility Data

Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number) Prescolite Reflector Industrial Road El Dorado, AR 71730	Entry Time /Date 13:42	Permit Effective Date
	Exit Time/Date 14:20	Permit Expiration Date
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) John Pepper, City of El Dorado	Other Facility Data	
Name, Address of Responsible Official/Title/Phone and Fax Number Walter DeLeon 546 Industrial Road El Dorado, AR 71730	Contacted Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

Section C: Areas Evaluated During Inspection

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

- Permit	- Flow Measurement	- Operations & Maintenance	- Sampling
- Records/Reports	- Self-Monitoring Program	- Sludge Handling/Disposal	- Pollution Prevention
- Facility Site Review	- Compliance Schedules	Y Pretreatment	- Multimedia
- Effluent/Receiving Waters	- Laboratory	- Storm Water	- Other:

Section D: Summary of Findings/Comments (Attach additional sheets if necessary)

This inspection done as part of a Pretreatment Compliance Inspection of the City of El Dorado Wastewater Treatment Facility

Name(s) and Signature(s) of Inspector(s) John Wesley Lamb	Agency/Office/Telephone/Fax ADEQ/El Doraod/870862-5941/870-862-3509	Date 20 December 2004
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date