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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 1 N 2 5 3 A R 0 0 3 3 7 2 | | | | | 3 | 11 | 12 | 0 | 6 | yr 1 | /mo/d | ау 1 | ₃ | 17 | Ins ₁ | рес. Ту С | • | Ins | pecto S | or 20 | Fac ' | Туре |
| | | | 1 1 1 | ı | <u> </u> | | Remar | | <u> </u> | | <u>. – </u> | <u>. </u> | 1 | J | 1 | ادا | ı | | ~ | Ī | <u> </u> | |
| | | 1 | | U n | | 0 | n | | | | | | | | | | | | | | | J |
| | Inspection Work Days | I | Facility Evaluati | ion Ratii | | | | 1 1 | QA | | I | I | | | ; I | Reserved | | | | | | |
| | 67 69 | | 70 4 | | | 71 | N | 72 | N | 73 | | | 74 | 75 | | | | | | | 80 | |
| | Section B: Facility Data | | | | | | | | | | | | | | | | | | | | | |
| incli | ne and Location of Facility Inspecte ude POTW name and NPDES permi of El Dorado | | | s discha | irging to | o POT | W, also | 0 | 8:3 | 35/12 | me /Da /13/06 | j . | | | | 01 N | nit Eff ovemb | oer 20 | 002 | | | |
| Sout | h Wastewater Treatment Plant h west Ave orado, AR | | | | | | | | | | e/Date 2/20/0 | | | | | Permit Expiration Date 31 October 2007 | | | | | | |
| Har | ne(s) of On-Site Representative(s)/T old Baker, Treatment Superintenden n Peppers/Pretreatment Coordinator | | | Number | r(s) | | | | | | | | | | Oth | er Faci | lity D | ata | | | | |
| Nan Gle P.O. | Name, Address of Responsible Official/Title/Phone and Fax Number Glen Holmes, General Manager/870-862-6451 P.O. Box 1587 El Dorado, AR 71731 Contacted Yes No X | | | | | | | | | | | | | | | | | | | | | |
| | Section C: Areas Evaluated During Inspection (S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated) | | | | | | | | | | | | | | | | | | | | | |
| S | Permit | S | Flow Measur | ement | | | S | Оре | eration | ns & | Main | tenar | nce | ļ | S | Sampling | | | | | | |
| S | Records/Reports | S | Self-Monito | ring Pr | ogram | | N | Slu | dge H | landl | ing/D | ispos | al | L | N | Pollution Prevention | | | | | | |
| S | Facility Site Review | N | Compliance | Schedu | les | | N | Pr | etreat | men | t | | | ļ | N | Multimedia | | | | | | |
| S | Effluent/Receiving Waters | S | Laboratory | | N Storm Water | | | | Other: | | | | | | | | | | | | | |
| ТЬ | e facility appears well operated an | | ction D: Summ | | | | | | | | | | | | | ring de | vion | which | h wa | s the | wow 1 | the |
| pla | nt was approved, so no flow check pumps to insure the meter is reac | coul | d be done. The | | | | | | | | | | | | | | | | | | | |
| Th | e facility is not distilling ammonia | samp | les; the facility | has cor | nparab | le data | a onsi | te as 1 | requir | ed. | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | |
| Name(s) and Signature(s) of Inspector(s) John Wesley Lamb | | | | | Agency/Office/Telephone/Fax ADEQ/El Dorado/870862-5941/870-862-3509 | | | | Date 29 January 2007 | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | |
| Signature of Reviewer | | | | | Agency/Office/Phone and Fax Numbers | | | | | Date | | | | | | | | | | | | |

| | PERMIT NO. AR0033723 |
|--|--|
| SECTION A - PERMIT VERIFICATION | |
| PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS DETAILS: S M U NA (F | URTHER EXPLANATION ATTACHED <u>NO</u>) |
| 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 (FU | IRTHER EXPLANATION ATTACHED <u>no</u>) |
| 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: | THER EXPLANATION ATTACHED <u>NO</u>) |
| 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 |

| | PERMIT NO. AR0033723 |
|---|--|
| SECTION C - OPERATIONS AND MAINTENANCE (CONT'D) | |
| 9. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR? IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED? HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS? | □ Y ■ N □ NA □ Y □ N ■ NA □ Y □ N ■ NA |
| 10.HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT? IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT? | □Y■N □NA □Y□N ■NA |
| SECTION D - SELF-MONITORING | |
| PERMITTEE SELF-MONITORING MEETS PERMIT REQUIREMENTS. ■ S □ M □ U □ NA (FURTHER EXPLANATION DETAILS: | ON ATTACHED_ NO _). |
| 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 (FURT DETAILS: see page one | HER EXPLANATION ATTACHED YES) |
| PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED. TYPE OF DEVICE NONE NONE | □Y □N ■NA |
| 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 _) RECORDS MAINTAINED OF CALIBRATION PROCEDURES. CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE | ■Y □N □NA ■Y □N □NE ■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 (FURT DETAILS: | THER EXPLANATION ATTACHED <u>NO</u>) |
| 1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(b) FOR SLUDGES) | ■Y □N □NA |

| | | | | | | PERMIT | NO. AR0033723 | | | |
|--|--|--------------------|----------------------|----------------------|---------------------|----------------|--------------------|--|--|--|
| SECTION F - LABOR | ATORY (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. | | | | | | | | | | |
| 4. QUALITY CONTROL PROCEDURES ADEQUATE. | | | | | | | | | | |
| 5. DUPLICATE SAMPLES ARE ANALYZED.10_% OF THE TIME. | | | | | | | | | | |
| 6. SPIKED SAMPLES ARE ANALYZED.10_% OF THE TIME. ■ Y □ N □ NA | | | | | | | | | | |
| 7. COMMERCIAL LAE | BORATORY USED. | | | | | ■Y□ | N □ NA | | | |
| LAB ADDRESS | LAB NAMEAmerican Interplex LAB ADDRESSKanis Road, Little Rock, AR PARAMETERS PERFORMEDCBOD | | | | | | | | | |
| SECTION G - EFFLU | ENT/RECEIVING WAT | TERS OBSERVATIONS | | ■S □M □U □ | NA (FURTHER EXPLAN | NATION ATTACHE | D_ no _). | | | |
| Based on visual | observations or | nly. | | | | | | | | |
| OUTFALL NO. | OIL SHEEN | GREASE | TURBIDITY | VISIBLE FOAM | FLOAT SOL. | COLOR | OTHER | | | |
| 001 | none | none | Slight | none | none | Lt green | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Comments: | | | | | | | | | | |
| SECTION H - SLUDG | GE DISPOSAL | | | | | | | | | |
| SLUDGE DISPOSAL DETAILS: | MEETS PERMIT REQ | QUIREMENTS. | | | U ■ NA (FURTHER E | XPLANATION ATT | ACHED <u>no</u>). | | | |
| 1. SLUDGE MANAGE | EMENT ADEQUATE TO | O MAINTAIN EFFLUEN | T QUALITY. | | | □ S □ M □ | U ■ NA | | | |
| 2. SLUDGE RECORE | OS MAINTAINED AS R | EQUIRED BY 40 CFR | 503. | | | □S □M □ U | J ■ NA | | | |
| 3. FOR LAND APPLIE | ED SLUDGE, TYPE OI | F LAND APPLIED TO: | _ (e.g., FOREST, AGF | RICULTURAL, PUBLIC C | CONTACT SITE) | | | | | |
| SECTION I - SAMPLI | ING INSPECTION PRO | OCEDURES | | (FURTHER EXPL | ANATION ATTACHED no | _). | | | | |
| 1. SAMPLES OBTAIN | NED THIS INSPECTIO | N. | | | | □Y■N | 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 OBTAINE | ED FROM FACILITY'S | SAMPLING DEVICE. | | | | ΠΥП | N ■ NA | | | |
| 6. SAMPLE REPRES | 6. SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE. □ Y □ N ■ NA | | | | | | | | | |
| 7. SAMPLE SPLIT W | ITH PERMITTEE. | | | | | ΠΥΠ | N ■ NA | | | |
| 8. CHAIN-OF-CUSTO | DDY PROCEDURES E | MPLOYED. | | | | ΠΥП | N ■ NA | | | |
| 9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT. □ Y □ N ■ NA | | | | | | | | | | |

DMR Calculation Check

| Reporting Period: | From | 2006 | Nov | _01 | To | 2006 | Nov | |
|--------------------------|------|------|-------|-----|----|------|-------|-----|
| | | Year | Month | Day | | Year | Month | Day |

Parameter Checked: TSS

| | Loading | Concentration | | | | | |
|-------------------|---------------------------------|--------------------|----------------------------------|--|--|--|--|
| | Mass Monthly Avg. (lbs/ day) | Monthly AvgMg/l | 7-Day Avg. or Daily Max- Mg/l | | | | |
| Reported Value: | | 16 | 21 | | | | |
| Calculated Value: | | 16 | 21 | | | | |
| Permit Value: | | 30 | 45 | | | | |

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

El Dorado, AR 71731

Mr. Glen Holmes, General Manager

El Dorado Water Utilities

P.O. Box 1587



A R K A N S A S Department of Environmental Quality

January 29, 2007

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

NPDES Permit No. AR0033723

Dear Mr. Holmes:

On December 13, 2006, I performed a routine compliance inspection and a pretreatment compliance inspection of the El Dorado South Wastewater 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. This inspection revealed the following:

- The pretreatment inspection reports performed by the facility for Miller Transport needs to include the verification of the selfmonitoring done by Miller Transport for pH. This should be done by documenting the review of the self-monitoring data, observation of self-monitoring procedure, and verification of an approved, analytical method.
- 2. The facility was instructed in a pretreatment audit in May 2006, to insure that flow measurement checks are included on the pretreatment inspection reports. The facility has begun this but still should follow up to make sure this is fully implemented
- 3. The facility was instructed in a pretreatment audit in May 2006, to document phone calls to industrial users when violations occur. The facility still needs to implement this in the form of phone call logs.

These items require your immediate attention. Please submit a written response to these findings to the NPDES Enforcement Section of this Department. 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 is due by February 12, 2007.

If you have any questions concerning this inspection, please feel free to contact me at (870) 862-0680.

Sincerely,

John W. Lamb, District Field Inspector

Water Division

cc: NPDES Enforcement Branch
NPDES Permits Branch