



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
Washington, D.C. 20460

NPDES Compliance Inspection Report

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

Section A: National Data System Coding

Transaction Code	NPDES	yr/mo/day	Inspec. Type	Inspector	Fac Type
1 <input type="checkbox"/> N <input type="checkbox"/> 2 <input type="checkbox"/> 5 <input type="checkbox"/> 3 <input type="checkbox"/> A <input type="checkbox"/> R <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 2 <input type="checkbox"/> 2 <input type="checkbox"/> 4 <input type="checkbox"/> 1 <input type="checkbox"/> 1 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 0 <input type="checkbox"/> 7 <input type="checkbox"/> 0 <input type="checkbox"/> 6 <input type="checkbox"/> 2 <input type="checkbox"/> 6 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> C <input type="checkbox"/> 19 <input type="checkbox"/> S <input type="checkbox"/> 20 <input type="checkbox"/> 1 <input type="checkbox"/>					
Remarks					
<input type="checkbox"/> A <input type="checkbox"/> F <input type="checkbox"/> I <input type="checkbox"/> N <input type="checkbox"/> 5 <input type="checkbox"/> 9 <input type="checkbox"/> - <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 2 <input type="checkbox"/> 9 <input type="checkbox"/>					
Inspection Work Days	Facility Evaluation Rating	BI	QA	-----Reserved-----	
67 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 69	70 <input type="checkbox"/> 2 <input type="checkbox"/>	71 <input type="checkbox"/> N <input type="checkbox"/>	72 <input type="checkbox"/> N <input type="checkbox"/>	73 <input type="checkbox"/>	74 <input type="checkbox"/> 75 <input type="checkbox"/>

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 Hazen WWTP P.O. Box 564 Hazen, Arkansas 72064 Prairie County, Arkansas	Entry Time /Date ~8:30 a.m. 6/26/07	Permit Effective Date May 1, 2004
	Exit Time/Date ~11:50 a.m. 6/26/07	Permit Expiration Date April 30, 2009
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) Phillip Foot, Water Utilities Manager (870) 255-4521 Chad Swain, Class I Operator (870) 255-4521	Other Facility Data Trimble GPS Location recorded.	
Name, Address of Responsible Official/Title/Phone and Fax Number Phillip Foot, Water Utilities Manager (870) 255-4521 City of Hazen P.O. Box 564 Hazen, Arkansas 72064	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)

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

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

At the time of the current inspection, the following violations were noted:

- 1. No documentation that the 30-day average percent removal of Biochemical Oxygen Demand and Total Suspended Solids is at least eighty-five percent (85%).**
- 2. No documentation that monthly calculation checks are being conducted to assure the accuracy of the effluent flow meter.**

Name(s) and Signature(s) of Inspector(s) Steven L. Henderson	Agency/Office/Telephone/Fax ADEQ/ Stuttgart/ (870) 673-8846/ (870) 673-7236	Date June 27, 2007
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date

PERMIT NO.: AR0022411

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 NA
 - 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. **Contract Laboratory** 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. **2 Class I** S M U NA
- 7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED. S M U NE
- 8. OPERATION AND MAINTENANCE MANUAL AVAILABLE. Y N NA
- 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 - SAMPLING

PERMITTEE Sampling 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 No)
 DETAILS: **No documentation of flow calculation checks.**

1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED. Y N NA
 TYPE OF DEVICE 6" Parshall Flume
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 (8/4/06)
 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 Sorrells Research
 LAB ADDRESS 8002 Stanton Road, Little Rock, Arkansas 72209
 PARAMETERS PERFORMED CBOD5, TSS, NH3-N, DO, FCB, pH

SECTION G - (EFFLUENT)/RECEIVING WATERS OBSERVATIONS. S M U NA (FURTHER EXPLANATION ATTACHED _____).

Based on visual observations only.

OUTFALL NO.	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOAT SOL.	COLOR	OTHER
<i>001</i>	<i>None</i>	<i>None</i>	<i>None</i>	<i>None</i>	<i>None</i>	<i>Clear</i>	

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 No)

- 1. SAMPLES OBTAINED THIS INSPECTION. Y N NA
- 2. TYPE OF SAMPLE OBTAINED - **N/A**
 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

FLOW CALCULATION SHEET

Field Data: Date June 26, 2007 Time ~11:00 a.m.

Head in Inches 3" = .25 or 103.4 GPM

Type & Size of Primary Flow Measurement Device

6" Parshall Flume

Name & Model of Secondary Flow Measurement Device

Greyline SLT 32

Recorded Flow at date & time listed above 72.36 GPM

Flows are calculated from flow charts taken from the ISCO Open Channel Flow Measurement Handbook-5th Edition

$$\% \text{ error} = \frac{(\text{recorded value} - \text{calculated value})}{\text{calculated value}} \times 100$$

$$\% \text{ error} = \frac{72.36 - 103.4}{103.4} \times 100$$

$$\% \text{ error} = -30\%$$

DMR Calculation Check

Reporting Period: From 2007 05 01 To 2007 05 31
 Year Month Day Year Month Day

Parameter Checked: TSS

	Loading Mass	Concentration	
	Mo. Avg. -lbs/ day	Mo. Avg.-mg/l	7-day Avg. -mg/l
Reported Value:	5.2	6.0	6.0
Calculated Value:	5.2	6.0	6.0
Permit Value:	34	15	23

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

ADEQ

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

June 27, 2007

*Phillip Foot, Water Utilities Manager
City of Hazen
P.O. Box 564
Hazen, Arkansas 72064*

RE: AFIN: 59-00029

NPDES Permit No.: AR0022411

Dear Mr. Foot:

On June 26, 2007, I conducted a routine compliance inspection of the waste water 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. This inspection revealed the following violations:

- 1. No documentation that the 30-day average percent removal of Biochemical Oxygen Demand and Total Suspended Solids is at least eighty-five percent (85%).*
- 2. No documentation that monthly calculation checks are being conducted to assure the accuracy of the effluent flow meter.*

*The above items require your immediate attention. Please submit a written response to the Enforcement Section of this Department. This response should contain documentation describing the course of action taken to correct the items noted. This corrective action should be completed as soon as possible, and the written response is due by **July 27, 2007**.*

If I can be any assistance, please contact me at (870) 673-8846.

Sincerely,



*Steven L. Henderson
District #6 Inspector
Water Division*

*cc: Enforcement Branch
Permit Branch*