



ARKANSAS  
Department of Environmental Quality

June 2, 2009

Dan Dawson  
City of Searcy  
Searcy Board of Utilities  
PO Box 1319  
Searcy, AR 72145

AFIN: 73-00055      NPDES Permit No.: AR0021601      No Exposure Exclusion ARR00C389

Dear Mr. Dawson:

On May 12, 2009, Dale Washam and I performed 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. Improper Operations and Maintenance:
  - a. During the inspection, it was noted that multiple pumps had failed and that it was an on-going problem. This is a violation of Part II Section B.1.a. of your permit.
  - b. There is inadequate back up power. In the event of an outage, the treatment plant could not operate. This is a violation of Part II Section B.2. of your permit.
  - c. The weirs on the clarifier need to be cleaned of algae which is a violation of Part II Section B.1.a of your permit.
  - d. A faulty seal (see picture 3) is allowing untreated wastewater to escape the treatment system. This is also a violation of Part II Section B.1.a of your permit as well as a violation of A.C.A. § 8-4-217(b).
  - e. The dechlorination SO<sub>2</sub> room had a working fan but vents that were in operable. This is a violation of Part II Section B.1.a. of your permit.
2. Part I of your permit states that grab samples will be collected at Outfall 001. Outfall 001 is currently underwater and representative samples can not be collected there. You have violated your permit by collecting the sample elsewhere and not notifying the department.
3. Ammonia Nitrogen testing must be performed through manual distillation which is the approved method. The current monitoring procedure used by the lab is not an approved method which is a violation of Part II Section C.3. of your permit.

On May 12, 2009, Dale Washam and I performed an evaluation of the No Exposure Certification under your permit tracked under permit number ARR00C389. During this inspection the following violations were noted:

1. Machinery and equipment particularly a fork lift (seen in picture 6) is left exposed to stormwater which is a violation of the No Exposure Exclusion. This is a REPEAT VIOLATION.

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY

Dan Dawson, Searcy Wastewater Treatment Plant  
May 20, 2009  
Page 2

2. Hydraulic and other possible fluids were noted on the ground (see picture 6) which is a violation of the No Exposure Exclusion.
3. A dumpster has been left uncovered in an open area (see picture 5) which is also a violation of the No Exposure Exclusion. This is a REPEAT VIOLATION.

On May 12 and 13, 2009, Dale Washam and I performed an SSO inspection 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 violation:

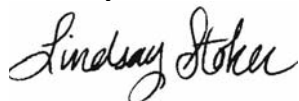
- The Main Pump Station had a large amount of solids and grease build up in the wet well. This could interfere with the workings of the pumps in the future and is a violation of Part II Section B.1.a. of the operations and maintenance section of your permit.

On May 13, 2009, Dale Washam and I performed a Pretreatment Compliance Inspection of the wastewater treatment facility as well as two inspections of your Industrial Users 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 you are within the terms of your permit and no violations were noted.

The above items require your immediate attention. Please submit a written response to these findings to Cindy Garner, Water Division Enforcement Branch Manager, of this Department. This response should be mailed to the address below. This response should contain documentation describing the course of action taken to correct each item noted (i.e. pictures). This corrective action should be completed as soon as possible, and the written response is due by June 12, 2009.

If I can be any assistance, please contact me at [stoker@adeq.state.ar.us](mailto:stoker@adeq.state.ar.us) or 501-682-0657.

Sincerely,



Lindsay Stoker  
District 9 Field Inspector  
Water Division

cc: Water Division Enforcement Branch  
Water Division Permits Branch



<b>SECTION A: PERMIT VERIFICATION</b>	
PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. ALL DISCHARGES ARE PERMITTED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>SECTION B: RECORDKEEPING AND REPORTING EVALUATION</b>	
RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRS:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
a. DATES AND TIME(S) OF SAMPLING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
b. EXACT LOCATION(S) OF SAMPLING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
c. NAME OF INDIVIDUAL PERFORMING SAMPLING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
d. ANALYTICAL METHODS AND TECHNIQUES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
e. RESULTS OF CALIBRATIONS:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
f. RESULTS OF ANALYSES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
g. DATES AND TIMES OF ANALYSES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
h. NAME OF PERSON(S) PERFORMING ANALYSES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>SECTION C: OPERATIONS AND MAINTENANCE</b>	
TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. TREATMENT UNITS PROPERLY OPERATED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
2. TREATMENT UNITS PROPERLY MAINTAINED: <u>Pump failures are on-going</u>	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED: <u>Generators not strong enough to power the plant or all pumps</u>	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE: <u>Rings at plant</u>	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
5. ALL NEEDED TREATMENT UNITS IN SERVICE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED: <u>4 Class IV, 4 Class III, 1 Class I</u>	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
8. OPERATION AND MAINTENANCE MANUAL AVAILABLE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
9. STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
10. PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED: <u>Call electric company and get generators running</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
11. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
12. IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
13. HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
14. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
15. IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE

**SECTION D: SAMPLING**

PERMITTEE SAMPLING MEETS PERMIT REQUIREMENTS S M U NA NE

DETAILS:

1. SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT: <u>Outfall 001 is at the Red River and the water was up at outfall</u>	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES: <u>samples currently collected where composites are collected</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
3. FLOW PROPORTIONED SAMPLES OBTAINED WHEN REQUIRED BY PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. SAMPLING AND ANALYSES COMPLETED ON PARAMETERS SPECIFIED IN PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
5. SAMPLING AND ANALYSES PERFORMED AT FREQUENCY SPECIFIED IN PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
6. SAMPLE COLLECTION PROCEDURES ADEQUATE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
a. SAMPLES REFRIGERATED DURING COMPOSITING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
b. PROPER PRESERVATION TECHNIQUES USED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
c. CONTAINERS AND SAMPLE HOLDING TIMES CONFORM TO 40 CFR 136:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
7. IF MONITORING IS PERFORMED MORE OFTEN THAN REQUIRED ARE RESULTS REPORTED ON THE DMR:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE

**SECTION E: FLOW MEASUREMENT**

PERMITTEE FLOW MEASUREMENT MEETS PERMIT REQUIREMENTS S M U NA NE

DETAILS:

1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED: __ TYPE OF DEVICE: <u>2 ft. Parshall Flume</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. FLOW MEASURED AT EACH OUTFALL AS REQUIRED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
3. SECONDARY INSTRUMENTS (TOTALIZERS, RECORDERS, ETC.) PROPERLY OPERATED AND MAINTAINED: <u>ultrasonic flow meter</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. CALIBRATION FREQUENCY ADEQUATE: <u>last calibration 10-31-08</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
5. RECORDS MAINTAINED OF CALIBRATION PROCEDURES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
6. CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
7. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
8. FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
9. HEAD MEASURED AT PROPER LOCATION:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

**SECTION F: LABORATORY**

PERMITTEE LABORATORY PROCEDURES MEET PERMIT REQUIREMENTS S M U NA NE

DETAILS:

1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(B) FOR SLUDGES) : <u>no manual distillation for Ammonia-Nitrogen</u>	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
3. SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. QUALITY CONTROL PROCEDURES ADEQUATE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
5. DUPLICATE SAMPLES ARE ANALYZED ≥10% OF THE TIME:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
6. SPIKED SAMPLES ARE ANALYZED ≥10% OF THE TIME:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
7. COMMERCIAL LABORATORY USED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
a. LAB NAME: <u>American Interplex</u>	
b. LAB ADDRESS: <u>8600 Kanis Rd. Little Rock, AR 72204</u>	
c. PARAMETERS PERFORMED: <u>Biomonitoring</u>	
8. BIOMONITORING PROCEDURES ADEQUATE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
a. PROPER ORGANISMS USED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
b. PROPER DILUTION SERIES FOLLOWED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
c. PROPER TEST METHODS AND DURATION:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
d. RETESTS AND/OR TRE PERFORMED AS REQUIRED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE

**SECTION G: EFFLUENT/RECEIVING WATERS OBSERVATIONS**

BASED ON VISUAL OBSERVATIONS ONLY S M U NA NE

DETAILS: Outfall covered by Red River water

OUTFALL #:	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOATING SOLIDS	COLOR	OTHER
001							

**SECTION H: SLUDGE DISPOSAL**

SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS S M U NA NE

DETAILS: currently sent to Rolling Meadows Landfill, soon to go to American Composting

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

**SECTION I: SAMPLING INSPECTION PROCEDURES**

SAMPLE RESULTS WITHIN PERMIT REQUIREMENTS S M U NA NE

DETAILS:

- SAMPLES OBTAINED THIS INSPECTION: Y N NA NE
- TYPE OF SAMPLE: GRAB:\_\_ COMPOSITE:\_\_ METHOD:\_\_ FREQUENCY:
- SAMPLES PRESERVED: Y N NA NE
- FLOW PROPORTIONED SAMPLES OBTAINED: Y N NA NE
- SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE: Y N NA NE
- SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE: Y N NA NE
- SAMPLE SPLIT WITH PERMITTEE: Y N NA NE
- CHAIN-OF-CUSTODY PROCEDURES EMPLOYED: Y N NA NE
- SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT: Y N NA NE

**SECTION J: STORM WATER POLLUTION PREVENTION PLAN**

STORM WATER MANAGEMENT MEETS PERMIT REQUIREMENTS S M U NA NE

DETAILS: No Exposure Certification

- SWPPP UPDATED AS NEEDED:\_\_ DATE OF LAST UPDATE: Y N NA NE
- SITE MAP INCLUDING ALL DISCHARGES AND SURFACE WATERS: Y N NA NE
- POLLUTION PREVENTION TEAM IDENTIFIED: Y N NA NE
- POLLUTION PREVENTION TEAM PROPERLY TRAINED: Y N NA NE
- LIST OF POTENTIAL POLLUTANT SOURCES: Y N NA NE
- LIST OF POTENTIAL SOURCES AND PAST SPILLS AND LEAKS: Y N NA NE
- ALL NON-STORM WATER DISCHARGES ARE AUTHORIZED: Y N NA NE
- LIST OF STRUCTURAL BMPS: Y N NA NE
- LIST OF NON-STRUCTURAL BMPS: Y N NA NE
- BMPS PROPERLY OPERATED AND MAINTAINED: Y N NA NE
- INSPECTIONS CONDUCTED AS REQUIRED: Y N NA NE

## FLOW CALCULATION SHEET

Date: 5/12/2009 Time: 10:18 am

Head in Inches: \_\_\_\_\_ Feet: 1.2

Type & Size of Primary Flow Measurement Device: 2 foot Parshall Flume

Name & Model of Secondary Flow Measurement Device: Siemens Milltronics OCM III  
 Date of last Calibration of Secondary Flow Device: **10-31-08**

Recorded Flow at Date & Time Listed Above: 6.79 MGD (Facility Flow Meter)

Calculated Flow at Date & Time Listed Above: 6.858 MGD  
 (Flow is calculated using flow charts in: ISCO Open Channel Flow Measurement Handbook-5<sup>th</sup> Edition)

$$\% \text{ Error} = \frac{\text{Recorded Value} - \text{Calculated Value}}{\text{Calculated Value}} \times 100$$

$$\% \text{ Error} = \frac{6.79 - 6.858}{6.858} \times 100$$

$$\% \text{ Error} = \frac{-0.068}{6.858} \times 100$$

$$\% \text{ Error} = \frac{-0.0099}{6.858} \times 100$$

$$\% \text{ Error} = \underline{-0.99} \%$$

Comments: Within 10% error range





**DMR Calculation Check**

**Reporting Period:** From 09 02 01 To 09 02 28  
 Year Month Day Year Month Day

**Parameter Checked:** TSS

	<b>Loading Mass Mo. Avg. - lbs/day</b>	<b>Concentration Monthly Mo. Avg. - mg/l      7-day Avg. - mg/l</b>	
<b>Reported Value:</b>	<u>389.0</u>	<u>10.4</u>	<u>12.5</u>
<b>Calculated Value:</b>	<u>388.5</u>	<u>10.35</u>	<u>12.5</u>
<b>Permit Value:</b>	<u>1251</u>	<u>30</u>	<u>45</u>

**If calculated value does not equal reported value, explain:  
Differences attributed to rounding.**

### Photographic Evidence Sheet

<b>Location:</b>	City of Searcy		
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<b>Photographer:</b>	Lindsay Stoker	<b>Witness:</b>	Dale Washam
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<b>Photo #</b>	1	<b>Of</b>	6	<b>Date:</b>	5/12/2009	<b>Time:</b>	8:47
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<b>Description:</b>	Outfall 001 under water		
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<b>Photographer:</b>	Lindsay Stoker	<b>Witness:</b>	Dale Washam
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<b>Photo #</b>	2	<b>Of</b>	6	<b>Date:</b>	5/12/2009	<b>Time:</b>	10:04
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<b>Description:</b>	Clarifier weirs need to be cleaned.		
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## Photographic Evidence Sheet

<b>Location:</b>		City of Searcy						
<b>Photographer:</b>		Lindsay Stoker			<b>Witness:</b>		Dale Washam	
<b>Photo #</b>	3	<b>Of</b>	6	<b>Date:</b>		5/12/2009	<b>Time:</b>	10:18
<b>Description:</b>		Broken seal causing untreated water to spill everywhere						



<b>Photographer:</b>		Lindsay Stoker			<b>Witness:</b>		Dale Washam	
<b>Photo #</b>	4	<b>Of</b>	6	<b>Date:</b>		5/12/2009	<b>Time:</b>	10:43
<b>Description:</b>		Grease and solids built up in Main Pump Station						



## Photographic Evidence Sheet

<b>Location:</b>	City of Searcy						
<b>Photographer:</b>	Lindsay Stoker			<b>Witness:</b>	Dale Washam		
<b>Photo #</b>	5	<b>Of</b>	6	<b>Date:</b>	5/12/2009	<b>Time:</b>	11:07
<b>Description:</b>	Uncovered, exposed dumpster						



<b>Photographer:</b>	Lindsay Stoker			<b>Witness:</b>	Dale Washam		
<b>Photo #</b>	6	<b>Of</b>	6	<b>Date:</b>	5/12/2009	<b>Time:</b>	11:08
<b>Description:</b>	Hydraulic and other fluids from fork lift.						





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

Form Approved  
OMB No. 2040-0003

# 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   2   1   6   0   1   11   12   0   9   0   5   1   3   17   18   I   19   S   20   2					
Remarks					
0   0   2   C   A   F   I   N   7   3   -   0   0   0   5   5					
Inspection Work Days	Facility Evaluation Rating	BI	QA	Reserved	
67       69	70   N	71   N	72   N	73	74   75                   80

## Section B: Facility Data

Name and Location of Facility Inspected ( <i>For industrial users discharging to POTW, also include POTW name and NPDES permit number</i> ) <b>Eaton Hydraulics, Inc 400 Lincoln St, Searcy AR, 72143 (City of Searcy AR0021601)</b>	Entry Time/Date <b>1:15 am 5/13/09</b>	Permit Effective Date <b>2/1/2008</b>
	Exit Time/Date <b>2:20 pm 5/13/09</b>	Permit Expiration Date <b>1/31/2013</b>
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) <b>Dan Dawson (Searcy) Daniel Martin and Kevin Caldwell (Eaton)</b>	Other Facility Data <b>35.267878 -91.720967</b>	
Name, Address of Responsible Official/Title/Phone and Fax Number <b>Dan Dawson/(501) 268-2481 City of Searcy Searcy Board of Utilities PO Box 1319 Searcy, AR 72145</b>	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)

Name(s) and Signature(s) of Inspector(s) <i>Lindsay Stoker</i> <b>Lindsay Stoker/</b>	Agency/Office/Telephone/Fax <b>ADEQ/ North Little Rock/ 501-682-0657/ 501 682-0910 (Fax)</b>	Date <b>5/13/09</b>
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date

POTW Pretreatment Program

Industrial Site Visit

Name of Industry: Eaton Hydraulics, Inc.

Industry Contacts: Daniel Martin, Lead Environmental Tech and Kevin Caldwell, EHS Manager

Type of Industry: metal finisher

Date of Visit: 5/13/09

- 1. Significant industrial user:  Yes  No  Not Determined
- 2. Pretreatment equipment or procedures?  Yes  No  N/A
- 3. Pretreatment equipment maintained and operational?  Yes  No  N/A
- 4. Hazardous waste generated or stored?  Yes  No  N/A
- 5. Proper solid waste disposal?  Yes  No  N/A
- 6. Solvent management/TTO control?  Yes  No  N/A
- 7. Suitable sampling location?  Yes  No  N/A
- 8. Appropriate self-monitoring procedures / equipment?  Yes  No  N/A
- 9. Adequate spill prevention?  Yes  No  N/A
- 10. Industry familiar with limits and requirements?  Yes  No  N/A

Additional Comments: # 6 TOMP submitted to the city.  
Facility has accomplished 70% reduction in use of Naphthla and is working to reduce acetone as well.

Visit Conducted By: *Lindsay Stoker* Date: 5/13/09



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

Form Approved  
OMB No. 2040-0003

# NPDES Compliance Inspection Report

## Section A: National Data System Coding

Transaction Code	NPDES	Yr/Mo/Day	Inspec. Type	Inspector	Fac. Type
1 <b>N</b> 2 <b>5</b> 3 <b>A R 0 0 2 1 6 0 1</b> 11 12 <b>0 9 0 5 1 3</b> 17 18 <b>I</b> 19 <b>S</b> 20 <b>2</b>					
Remarks					
<b>0 0 2 C A F I N 7 3 - 0 0 0 5 5</b>					
Inspection Work Days	Facility Evaluation Rating	BI	QA	Reserved	
67 <b>  </b> 69	70 <b>N</b>	71 <b>N</b>	72 <b>N</b> 73 <b>  </b>	74 <b>  </b>	75 <b>  </b> 80

## Section B: Facility Data

Name and Location of Facility Inspected ( <i>For industrial users discharging to POTW, also include POTW name and NPDES permit number</i> ) <b>Yarnell Ice Cream Company, Inc. 205 S. Spring St, Searcy AR, 72143 (City of Searcy AR0021601)</b>	Entry Time/Date <b>2:30 am 5/13/09</b>	Permit Effective Date <b>2/1/2008</b>
	Exit Time/Date <b>3:30 pm 5/13/09</b>	Permit Expiration Date <b>1/31/2013</b>
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) <b>Tim Cleveland (Searcy) and Richard Taylor (Yarnells)</b>	Other Facility Data <b>35.267878 -91.720967</b>	
Name, Address of Responsible Official/Title/Phone and Fax Number <b>Dan Dawson/(501) 268-2481 City of Searcy Searcy Board of Utilities PO Box 1319 Searcy, AR 72145</b>	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	<b>Y</b> Pretreatment	- Multimedia
- Effluent/Receiving Waters	- Laboratory	- Storm Water	Other:

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

Name(s) and Signature(s) of Inspector(s) <b>Lindsay Stoker</b>	Agency/Office/Telephone/Fax <b>ADEQ/ North Little Rock/ 501-682-0657/ 501 682-0910 (Fax)</b>	Date <b>5/13/09</b>
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date

POTW Pretreatment Program

Industrial Site Visit

Name of Industry: Yarnell Ice Cream Company, Inc.

Industry Contacts: Richard Taylor- Quality Manager

Type of Industry: Ice cream making facility

Date of Visit: 5/13/09

- 1. Significant industrial user:  Yes  No  Not Determined
- 2. Pretreatment equipment or procedures?  Yes  No  N/A
- 3. Pretreatment equipment maintained and operational?  Yes  No  N/A
- 4. Hazardous waste generated or stored?  Yes  No  N/A
- 5. Proper solid waste disposal?  Yes  No  N/A
- 6. Solvent management/TTO control?  Yes  No  N/A
- 7. Suitable sampling location?  Yes  No  N/A
- 8. Appropriate self-monitoring procedures / equipment?  Yes  No  N/A
- 9. Adequate spill prevention?  Yes  No  N/A
- 10. Industry familiar with limits and requirements?  Yes  No  N/A

Additional Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Visit Conducted By: Lindsay Stoker Date: 5/13/09





UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
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# NPDES Compliance Inspection Report

## Section A: National Data System Coding

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Remarks					
<b>A F I N 7 3 - 0 0 0 5 5 W H I T E C O U N T Y</b>					
Inspection Work Days	Facility Evaluation Rating	BI	QA	Reserved	
67 <b>  </b> 69	70 <b>N</b>	71 <b>N</b>	72 <b>N</b>	73 <b>  </b>	74 75 <b>  </b> 80

## Section B: Facility Data

Name and Location of Facility Inspected ( <i>For industrial users discharging to POTW, also include POTW name and NPDES permit number</i> ) <b>City of Searcy</b> <b>260 north Bypass Road.</b> <b>Searcy AR White Co.</b>	Entry Time/Date <b>8:30 am 5/13/09</b>	Permit Effective Date <b>2/1/2008</b>
	Exit Time/Date <b>4:30 pm 5/13/09</b>	Permit Expiration Date <b>1/31/2013</b>
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) <b>Dan Dawson, assistant general manager 501-268-2481</b>	Other Facility Data <b>35.267878</b> <b>-91.720967</b>	
Name, Address of Responsible Official/Title/Phone and Fax Number <b>Dan Dawson/(501) 268-2481</b> <b>City of Searcy</b> <b>Searcy Board of Utilities</b> <b>PO Box 1319</b> <b>Searcy, AR 72145</b>	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)

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

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

**File reviews on 3 IUs as well as the pretreatment program were performed. as well as 2 site visits. Pretreatment program appears in good shape.**

Name(s) and Signature(s) of Inspector(s) <b>Lindsay Stoker</b> <i>Lindsay Stoker</i>	Agency/Office/Telephone/Fax <b>ADEQ/ North Little Rock/ 501-682-0657/ 501 682-0910</b> <b>(Fax)</b>	Date <b>5/13/09</b>
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY  
PRETREATMENT COMPLIANCE INSPECTION (PCI) REPORT

---

Name of Municipality: City of Searcy

AFIN Number: 73-00055

NPDES Permit Number(s): AR0021601

Program Tracked under NPDES Permit Number: AR0021601

Fact Sheet Preparation Date: N/A

Date of Last PCI/Audit: PCI-5/10/06 Audit 10/6/07

Date of Last Annual Report: February 15, 2009

Name of Inspector: Lindsay Stoker

Date PCI Performed: May 13, 2009

Name, Title, and Telephone Number of Facility Representative:  
Daniel Dawson, Asst. General Mgr., 501-268-2481

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Name and Title of Other Participants: \_\_\_\_\_  
**Richard Taylor, Quality Manager of Yarnell's and Daniel Martin,**  
**Lead Environmental Tech and Kevin Caldwell EHS Manager from**  
**Eaton.**

Number of IUs Visited: 2

Name(s) of IUs Visited: Eaton Hydraulics and Yarnells

---

AN IU SITE VISIT FORM SHOULD BE COMPLETED FOR EACH IU VISITED

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**NOTE: ANY QUESTION PRINTED IN ALL CAPS AND BOLD PRINT INDICATED A REGULATORY REQUIREMENT AND MUST BE ANSWERED FOR THE PCI REPORT TO BE COMPLETE. A NO ANSWER TO ONE OF THESE QUESTIONS SHOULD RESULT IN AN UNSATISFACTORY RATING.**



B. LOCAL LIMITS

1. IS THE POTW APPLYING LOCAL LIMITS WHICH HAVE BEEN APPROVED BY ADEQ OR EPA? **Yes, technically based on how it affects the treatment plant.**

---

2. Describe any apparent problems with the local limits.  
**None noted**

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3. How often are pollutant scans of POTW influent, effluent, and sludge performed by the POTW? Does this fulfill the requirements of the approved program (as described in the fact sheet) and part III of the NPDES permit?

Pollutant:	Frequency:	Requirement in		Comments:
		Permit:	Program:	
Metals:				
Influent:	<b>4/year</b>	<b>4/year</b>	<b>Not in permit</b>	
Effluent:	<b>4/year</b>	<b>4/year</b>	<b>Not in permit</b>	
Sludge:	<b>4/year</b>	<b>-</b>	<b>Not in permit</b>	
Organics:				
Influent:	<b>1/year</b>	<b>1/year</b>	<b>Not in permit</b>	
Effluent:	<b>1/year</b>	<b>1/year</b>	<b>Not in permit</b>	
Sludge:	<b>1/year</b>	<b>-</b>	<b>Not in permit</b>	

4. Have there been any inhibitions or upsets at the POTW (since the last PCI of Audit) which were believed to be caused by industrial discharges? If so, describe the action taken by the City to ensure that the incident would not recur. Were these actions effective?  
**No, the plant is running well.**

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C. INDUSTRIAL USER CONTROL MECHANISM

1. Is the POTW using the type of control mechanism (permit, agreement, etc.) required by the approved program? permit
  
2. How many IU permits (or other control documents) have been issued? 12
  
3. DO ALL SIGNIFICANT IUS HAVE CURRENT (UNEXPIRED) CONTROL DOCUMENTS? IF NOT, LIST ALL UNPERMITTED SIUS, THE DATE OF EXPIRATION OF THEIR PREVIOUS PERMIT (IF APPLICABLE), AND THE REASON FOR DELAY IN ISSUING THE REQUIRED DOCUMENT.  
Yes.

---

4. Does the control document contain the following items?  
  
An expiration date: yes  
  
Discharge limitations: yes  
  
If the program requires self-monitoring by the IUs, do the Permits contain:  
  
IU self-monitoring requirements: yes  
  
IU reporting requirements: yes
  
5. Indicate which of the following recommended standard conditions are contained in the control documents:  
  
Sample location: Yes  
Type of sample: Yes  
Monitoring frequency: Yes  
Bypass prohibition: Yes  
Right of entry: Yes  
Nontransferability: Yes  
Revocation clause: Yes  
Penalty Provisions: Yes, references local ordinance  
Slug load notification: Yes  
Notification of process change: Yes

D. MONITORING OF IUS BY POTW

1. Indicate current inspection and sampling frequency and program requirement below:

	Current frequency:	Program Requirement:
Sampling:		
categorical IUs	<u>2/year</u>	<u>2/year</u>
other SIUs	<u>2/year</u>	<u>2/year</u>
Inspection:		
categorical IUs	<u>1/year</u>	<u>1/year</u>
other SIUs	<u>1/year</u>	<u>1/year</u>

2. HAS EACH SIU BEEN INSPECTED AND SAMPLED AT THE FREQUENCY REQUIRED BY THE APPROVED PROGRAM? yes

3. Are inspections announced or unannounced? Mostly unannounced

4. Are records kept of each inspection? yes

5. Does the inspection report contain an adequate description of the following:

Date and time of inspection: Yes

Officials present: Yes

Inspection of chemical storage areas: Yes

Description of regulated processes, categorical waste streams, and discharge location of these waste streams: Yes

Inspection of the pretreatment facilities: Yes

Review of self-monitoring records: Yes

Observation of IU self-monitoring procedures: Yes

Verification that approved analytical techniques are used: Yes, when applicable

Verification of IU flow measurement (where required): Yes

6. Overall adequacy of inspection documentation: Overall inspection Documentation appears adequate.

7. DOES THE POTW SAMPLE IUS FOR ALL POLLUTANTS REGULATED IN THEIR PERMITS? (IT IS NOT NECESSARY TO SAMPLE FOR ALL POLLUTANTS EVERY TIME, BUT IT MUST BE DONE PERIODICALLY). Yes.

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8. Are analyses performed in accordance with EPA-approved methods (40 CFR 136)? Yes

---

9. Are sampling and flow monitoring equipment properly maintained? Yes

---

10. Is the POTW keeping proper field notes and chain of custody forms? Yes

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11. Is the sampling location representative of the discharge to the collection system? Yes

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12. Are sampling locations identified in POTW records? Yes

---

13. Are sampling services available in an emergency? Yes

---

14. What are the POTW's procedures for tracking receipt and review of IU reports, such as BMR's, semi-annual reports, progress reports, bypass reports, and self-monitoring reports? A chart in which information is logged in.

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15. ARE SELF-MONITORING REPORTS REVIEWED TO VERIFY THAT ANALYSES WERE PERFORMED FOR ALL REGULATED PARAMETERS, AND TO EVALUATE COMPLIANCE WITH EFFLUENT LIMITS? Yes

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16. IF VIOLATIONS ARE FOUND IN REPORTS, DOES THE POTW RESPOND TO ALL VIOLATIONS? BOD and TSS-are surcharged and supplemented.

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17. What are the POTW's procedures for following up violations?  
**Notice of Violation and enforcement plan**
- 
- 

18. **HAS THE POTW REVIEWED BMRS FOR COMPLIANCE WITH 40 CFR 403.12(b)?**: **No BMRS-no new CIUs**
- 

Review a Baseline Monitoring Report from the POTW's file, and indicate which of the following items can be identified in the BMR:

Name and address: \_\_\_\_\_

Other environmental permits held: \_\_\_\_\_

Description of operations: \_\_\_\_\_

Process flow diagrams: \_\_\_\_\_

Flow measurements: \_\_\_\_\_

Measurements of regulated pollutants: \_\_\_\_\_

Certification of compliance by the IU: \_\_\_\_\_

Compliance schedule (if needed): \_\_\_\_\_

19. Additional comments on the POTW's inspection and sampling procedures:

**Comments: POTW is doing the 2/year samplings on 2 consecutive days. I would recommend spacing those out to get more representative samples.**

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E. Enforcement

1. HAS THE POTW IMPLEMENTED ENFORCEMENT RESPONSE PROCEDURES TO ADEQUATELY ADDRESS EVERY IU VIOLATION OF PRETREATMENT STANDARDS AND REQUIREMENTS? **Yes but has had no enforcement actions since the last annual report.**

---

2. How does the POTW respond to the following violations?

Effluent limitations: Notice of Violation

Late reports: If late more than 5 days then NOV

Unpermitted discharges: NOV and permit application packet

Slug loads or spills: Depends of seriousness. Verbal reprimand or NOV

3. IS THE LIST OF SIGNIFICANT VIOLATORS PUBLISHED BY THE POTW DEVELOPED IN ACCORDANCE WITH EPA REGION VI CRITERIA FOR SIGNIFICANT VIOLATING INDUSTRIAL USER (DATED AUGUST 22, 1985)? **POTW has not had one in a while, it would be in annual report.**

---

4. List the SIUs which have met the criteria for Significant Violator within the last 12 months, and describe the enforcement action which has been taken by the POTW. If construction is required, please indicate whether the IU has been placed on an enforceable compliance schedule.

Name:	Type of Violation:	Enforcement Action:	Compliance Deadline:
<b>None in significant violation</b>			

5. Comments on the POTW's enforcement procedures:

**None.**

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F. POTW'S PRETREATMENT ORGANIZATION STRUCTURE

1. Is the program structure essentially the same as that presented in the approved pretreatment program? **yes**

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2. Are staffing levels adequate? **Appear to be so.**

---

3. Are the responsible officials familiar with the approved program? **yes**

---

G. MULTIJURISDICTIONAL ISSUES

1. List any IUs which are located outside of the jurisdictional area of the POTW:  
**None**

---

2. Does the POTW have adequate procedures for controlling IUs located outside its jurisdictional area? **N/A**

---

3. Does the POTW have copies of permits for IUs in other cities? **N/A**

---

4. Have any of these IUs met the criteria for Significant Violator? If so, have they been published by the POTW in its annual list of Significant Violators? **N/A**

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5. Comments on multijurisdictional issues: **N/A**

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PRETREATMENT COMPLIANCE INSPECTION

IU SITE VISIT FORM

Name of Industry: Eaton Hydraulics

POTW Name: City of Searcy

Industry Contacts: Daniel Martin, Lead Environmental Tech and  
Kevin Caldwell, EHS Manager

Date and Time of Visit: 5-13-09 1:15-2:20

Description of Manufacturing Process:  
Assemble and test hydraulic valves and filters.  
Nickel plating: soak clean>rinse>electro-clean>rinse>HCl  
rinse>city water rinse>nickel bath>hot water rinse>out  
In addition: a "cold" blackening line and a "hot" blackening  
line.

Sources of Process Wastewater:  
Plating overflows, parts washers, batch processing of plating  
rinse, spent machine coolant, and mop water.

Categorical Industry? Yes- Metal Finisher

Basis for Limits: City based

Point of Application: Treatment Building

Description of Pretreatment Equipment and Procedures:  
Filter press, filtration system, storage tanks, chemical  
processes to remove metals and adjust pH, another filtration  
system.

Spill Prevention and Solvent Management Procedures:  
Secondary containment for chemicals and spill stations around  
the facility for spills containing absorbent pads and socks.

Sampling Location and Equipment:  
Treatment building on north side of plant at the final  
wastewater discharge.

PRETREATMENT COMPLIANCE INSPECTION

IU SITE VISIT FORM

Name of Industry: Yarnell's Ice Cream Company, Inc.

POTW Name: City of Searcy

Industry Contacts: Richard Taylor, Quality Manager

Date and Time of Visit: 5-13-09 2:30

Description of Manufacturing Process:  
Making ice cream and related products

Sources of Process Wastewater:  
Washing down and rinsing of ice cream and stick novelty  
production equipment, and boiler blow-down.

Categorical Industry? No

Basis for Limits: City based

Point of Application: Manhole

Description of Pretreatment Equipment and Procedures:  
No pretreatment

Spill Prevention and Solvent Management Procedures:  
Contain the spill, dilute it, and call the POTW to let them know  
a slug is coming.

Sampling Location and Equipment:  
Manhole in Spring Street at the front of the plant.

## PPETS CODE SHEET

## PRETREATMENT COMPLIANCE INSPECTION (PCI)

		CODE
INSPECTOR'S NAME:	<u>Lindsay Stoker</u>	
NAME OF FACILITY:	<u>City of Searcy (Wastewater)</u>	
PERMIT NUMBER USED TO TRACK PROGRAM:	<u>AR0021601</u>	NPID
DATE OF PCI:	<u>May 13, 2009</u>	DTIA

## PPETS WENDB DATA ELEMENTS

NUMBER OF SIGNIFICANT IUS (SIUS):	<u>12</u>	SIUS
NUMBER OF CATEGORICAL IUS:	<u>1</u>	CIUS
SIUS NOT SAMPLED OR INSPECTED BY POTW:	<u>2-new permittees</u>	NOIN
SIUS WITHOUT CONTROL MECHANISM:	<u>0</u>	NOCM
SIUS IN SIGNIFICANT NONCOMPLIANCE WITH STANDARDS OR REPORTING:	<u>0</u>	PSNC
SIUS IN SIGNIFICANT NONCOMPLIANCE WITH SELF-MONITORING REQUIREMENTS:	<u>0</u>	MSNC
SIUS IN SIGNIFICANT NONCOMPLIANCE WITH SELF-MONITORING AND NOT INSPECTED OR SAMPLED BY POTW:	<u>0</u>	SNIN



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Remarks																																
W H I T E C O U N T Y																																
Inspection Work Days						Facility Evaluation Rating						BI		QA		-----Reserved-----																
67						70						71		72		73		74		75		80										

## Section B: Facility Data

Name and Location of Facility Inspected ( <i>For industrial users discharging to POTW, also include POTW name and NPDES permit number</i> ) <b>City of Searcy</b> 260 North Bypass Rd. Searcy, AR White Co.	Entry Time/Date 8:30 am 5/12/09	Permit Effective Date 2/1/2008
	Exit Time/Date 4:30 pm 5/13/09	Permit Expiration Date 1/31/2013
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) Dan Dawson, Paul Abernathy, and Tim Cleveland	Other Facility Data 35.267878 -91.720967	
Name, Address of Responsible Official/Title/Phone and Fax Number Dan Dawson/(501) 268-2481 City of Searcy Searcy Board of Utilities PO Box 1319 Searcy, AR 72145	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)

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

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

1. One portable generator is on hand for 6 of the pump station in case of failures.
2. At the main pump station a lot of grease and solids were noticed as well as a septic odor.
3. The Main Pump Station has 5 pumps only 3 are operational
4. In case of power failure, generator at main pump station can only power 2 pumps

Name(s) and Signature(s) of Inspector(s)  Lindsay Stoker/	Agency/Office/Telephone/Fax ADEQ/ North Little Rock/ 501-682-0657/ 501 682-0910 (Fax)	Date 5/13/09
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date

<b>COLLECTION SYSTEM INSPECTION AND OVERALL RATING</b>		<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
PROVIDE A BRIEF DESCRIPTION OF THE COLLECTION SYSTEM: <b>A combination of old and new lines ranging from 6" to 48" 95% gravity flow</b>		
POPULATION SERVED/NUMBER OF RESIDENTIAL AND COMMERCIAL CONNECTIONS: <u>20,000 population</u> <u>6,500 connections</u>		
FEET OF SEWER SYSTEM: <u>Approximately 60 miles</u>		
AGE OF SYSTEM: <u>100 years to current</u>		
DOES THE SYSTEM EXPERIENCE PROBLEMS DURING DRY OR WET WEATHER (EXPLAIN): <u>some overflows due to rain, grease, and roots</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
IS THERE A SYSTEM IN PLACE FOR REPORTING SSOS TO ADEQ (DESCRIBE): <u>Report via internet and also submit paper copy</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
ARE ALL SSOs REPORTED REGARDLESS OF SIZE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
HAVE SSOs REACHED "WATERS OF THE U.S." (LIST DATE AND LOCATION OF EACH):	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
<b>PUMP STATIONS</b>		<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
NUMBER OF PUMP STATIONS IN SYSTEM: <u>7</u>	NUMBER WITH BACKUP POWER: <u>all have adapter for portable generator</u>	
HOW OFTEN ARE PUMP STATIONS INSPECTED/MONITORED: <u>Daily</u>		
ARE MAINTENANCE RECORDS AND/OR OPERATOR LOGS KEPT: <u>some</u>		
ADEQUATE INVENTORY OF SPARE PARTS: <u>no</u>		
TYPE OF REMOTE ELECTRONIC MONITORING USED (I.E. SCADA OR AUTO DIALERS): <u>Scada</u>		
BRIEF SUMMARY OF EMERGENCY PROCEDURES: <u>Emergency Response Plan and priority backup power</u>		
NUMBER OF PUMP STATIONS VISITED DURING INSPECTION (SEE ATTACHED CHECKLISTS FOR EACH): <u>2</u>		
<b>SATELLITE SYSTEMS</b>		<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
DOES THE COLLECTION SYSTEM RECEIVE FLOW FROM SATELLITE SYSTEMS: <u>No</u>		
TYPE(S) OF WASTE WATER RECEIVED: <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:		
BRIEFLY DESCRIBE THE SATELLITE SYSTEM:		
ANY KNOWN PROBLEMS WITH SATELLITE SYSTEM:		
NAME, ADDRESS AND PHONE NUMBER OF PERSON RESPONSIBLE FOR SATELLITE SYSTEM:		



<b>PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)</b>	
<b>GENERAL INFORMATION AND OVERALL EVALUATION</b>	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: <b>Main Pump Station</b>	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input checked="" type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: <u>5</u>	NUMBER OPERATIONAL: <u>3</u>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE: <u>1-58HP 2-75HP</u>	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
EVIDENCE OF RECENT OVERFLOWS OR HIGH LEVELS: <u>Submerged pumps</u>	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>GENERAL OPERATION AND MAINTENANCE</b>	
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAGE OF UNRELATED EQUIPMENT:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GATES/DOORS/HATCHES/LIDS/ETC. LOCKED TO PREVENT UNAUTHORIZED ACCESS AND/OR TAMPERING:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
WET WELLS, SUMPS AND PITS ADEQUATELY COVERED, GRATED OR OTHERWISE PROTECTED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ELECTRICAL CONTROLS COVERS CONDUIT AND EQUIPMENT PROPERLY INSTALLED AND MAINTAINED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GUARDS AND SHIELDS IN PLACE AROUND MOVING EQUIPMENT (BELTS, PULLEYS, DRIVESHAFTS, ETC.):	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE VENTILATION TO PREVENT EXCESSIVE CONDENSATION AND/OR GASES AND FUMES:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE LIGHTING FOR ROUTINE INSPECTION/MAINTENANCE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SEALS, VALVES AND PACKING ADEQUATELY MAINTAINED TO PREVENT LEAKS:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN WET WELLS: <u>A lot of grease and solids noted as well as a septic odor in the wet well.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>BACKUP POWER AND ALARMS</b>	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP: <u>Generator attached to pump station only able to power 2 pumps</u>	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED: <u>audio alarm phones plant also visual alarm</u>	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SCADA SYSTEM (LIST PARAMETERS MONITORED): <u>only pump station without SCADA</u>	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

<b>PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)</b>	
<b>GENERAL INFORMATION AND OVERALL EVALUATION</b>	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: <b>Wal-Mart Lift Station</b>	
TYPE(S) OF WASTE WATER RECEIVED: <input type="checkbox"/> RESIDENTIAL <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input checked="" type="checkbox"/> OTHER: <u>some residential</u>	
NUMBER OF PUMPS: <u>2</u>	NUMBER OPERATIONAL: <u>2</u>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE: <u>yes</u>	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
EVIDENCE OF RECENT OVERFLOWS OR HIGH LEVELS:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>GENERAL OPERATION AND MAINTENANCE</b>	
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAGE OF UNRELATED EQUIPMENT:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GATES/DOORS/HATCHES/LIDS/ETC. LOCKED TO PREVENT UNAUTHORIZED ACCESS AND/OR TAMPERING:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
WET WELLS, SUMPS AND PITS ADEQUATELY COVERED, GRATED OR OTHERWISE PROTECTED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ELECTRICAL CONTROLS COVERS CONDUIT AND EQUIPMENT PROPERLY INSTALLED AND MAINTAINED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GUARDS AND SHIELDS IN PLACE AROUND MOVING EQUIPMENT (BELTS, PULLEYS, DRIVESHAFTS, ETC.) :	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE VENTILATION TO PREVENT EXCESSIVE CONDENSATION AND/OR GASES AND FUMES:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE LIGHTING FOR ROUTINE INSPECTION/MAINTENANCE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SEALS, VALVES AND PACKING ADEQUATELY MAINTAINED TO PREVENT LEAKS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN WET WELLS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>BACKUP POWER AND ALARMS</b>	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP: <u>1 generator for all pump stations</u>	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED: <u>visual alarm</u>	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SCADA SYSTEM (LIST PARAMETERS MONITORED): <u>Audio and light at plant via SCADA</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

Date started	Date stopped	Volume	Environmental damage	Description	Cause	Stream	Location
1/8/2009	1/8/2009	100	NEAH	Manhole Overflow	Grease	did not reach a stream	#24 Cattail
1/8/2009	1/8/2000	50	NEAH	Manhole Overflow - Started at 1430 hours and ended 1500 hours.	roots	did not reach stream	1400 Randall Dr.
1/13/2007	1/13/2007		None	Manhole Overflow	Line Plugged w/ roots and I and I		
1/15/2007		1000000 0	NONE	STP diverted influent into EQ basin	I and I		Searcy WW EQ Basin
8/22/2006	8/23/2006	1000	none noted	manhole overflow	contractor built house and manhole, but forgot to cut out exit from manhole		8 Ridgeview Court
12/7/2004	12/8/2004	3	none	WWTP Pond #3	heavy rainfall and flooding	Little Red River	
11/10/2001	11/10/2001		Saturated ground around manhole.	808 Hays Street	Blockage in gravity line.		
11/28/2001	11/28/2001	0	None	Moone & Charles Street	Roots		
11/28/2001	11/28/2001	0	None	1204 Gum Springs Rd	Line blockage		
11/30/2001	11/30/2001	0	None	Intersection of Cherry & Maple	Grease		
9/22/2006	9/22/2006	5	None	East Park & Burns	Paper	Into Storm Drain	
4/17/2005	4/17/2005		unknown	Pumping station failure between North Main and Davis Drive			

Date started	Date stopped	Volume	Environmental damage	Description	Cause	Stream	Location
4/16/2005	4/16/2005		unknown	6 Meadow Lane	roots	street	
11/11/2006	11/11/2006	25	none	Line blockage	Grease	PA	2 Stoneybrook
4/26/2002	4/26/2002	0	unknown	Airport Pump Station	Pump station failure		
1/7/2005	1/19/2005		none	WWTP Pond #3	rainfall		
2/7/2005	2/7/2005		none	Spring and Academy St.	grease/line plugged		
1/5/2001	1/5/2001	0	Unknown	Overflow at Academy (Birch & Pear)	Line blockage		
12/15/2006	12/15/2006	8000	Minimal	Water flow	Sign contractor dug into line, flow went into storm drain	Storm Drain	301 S. Poplar
12/12/2006	12/12/2006	25	Minimal	Overflow went along curb into storm drain	Line Plugged-Grease	Storm Drain	River/Moss
12/8/2006	12/8/2006	25	Minimal	Line plugged	Grease	Storm Drain	209 W. Lincoln
4/12/2005			unknown	Plant lagoon	rainfall		
8/13/2001	8/13/2001		Minimal	Ditch off Market Street (between Moss & Benton streets), runoff to stream	Grease		
9/10/2001	9/10/2001	0	None	#10 Cattail St., runoff to storm sewer	Grease & roots		
1/12/2001	1/12/2001	0	None	Manhole Overflow - 42 Mohawk	Grease		
10/18/2001	10/18/2001	0	Minimal	6 Meadow Lane (across street)	Grease		
2/7/2005	2/7/2005		unknown	Spring & Academy Sts.	Grease		

Date started	Date stopped	Volume	Environmental damage	Description	Cause	Stream	Location
2/15/2005	2/15/2005		unknown	East Moore, east of Holly Street	Grease & roots		
2/15/2005	2/15/2005		unknown	Caleb & Kristien	Grease & roots		
9/25/2001	9/25/2001	200	None	W. Woodruff & S. Maple Int.	Grease and kitty litter		
9/25/2001 3:00:00 PM	5/25/2001 4:30:00 PM	1000	Minimal	End of Cherry Street	Grease		
12/17/2001	12/24/2001	0	None	4 overflows	Grease and sometimes Hvy rainfall		
5/12/2002	5/12/2002	0	minimal	8 Cattail	grease		
11/20/2006	11/20/2006	75	none	Along curb to storm drain	Line plugged with roots	Storm Drain	Main/W. Lincoln
11/17/2006	11/17/2006	10	none	Along curb to storm drain	Roots	Storm Drain	Main/W. Lincoln
12/17/2001	12/26/2001	3000000	Minimal.	Bypass at Treatment Plant	Heavy rainfall		
3/9/2001	3/9/2001	0	No	Sunset Street	Line plugged from grease and roots		
2/20/2001	3/19/2001 8:00:00 AM	0	No	Overflow at equalization basin at WW treatment plant	Hvy rainfall, flooding		
9/14/2006	9/14/2006	5	unknown		plastic bags, candy wrappers, etc	ground	506 & 507 North Spruce
11/23/2002	11/23/2002	0	unknown	8 Cattail	grease and roots		
1/6/2002	1/6/2002	0	None	Willow - East Race Intersection	Grease		
1/7/2002	1/7/2002	0	Unknown	608 Pin Oak	Grease		
11/22/2006	11/22/2006	50	none	Went north along west side of street along curb into storm drain	Grease, paper	Storm Drain	7 Foxboro

Date started	Date stopped	Volume	Environmental damage	Description	Cause	Stream	Location
12/12/2006	12/12/2007	25	minimal	manhole overflow	Line plugged	manhole	601 Ethel
1/3/2007	1/3/2007	500	Minimal	overflow	Mop Head	PA	6 Medow Ln
1/25/2002	1/25/2002	0	Minimal	37 Harding Circle	Grease & Paper products		
11/15/2006	11/15/2006	25	none	Manhole overflow	Line plugged with roots	Storm Drain	311 E. Center/S. Locust
12/3/2002	12/3/2002	0	unknown	Beverly Nursing Home (Skyline Dr.)	grease		
12/4/2002	12/4/2002	0	unknown	Skyline Dr.	grease		
3/28/2002	3/28/2002	0	Minimal	#2 Medow Lane	grease and roots		
1/6/2007	1/6/2007	100	Unknown	overflowing manhole	roots and grease		Blaheney and Walnut
2/20/2002		3000000	minimal	Bypass - WWTP overflow pond	Rain		
9/6/2003	9/6/2003	0	none	2215 E. Race	grease		
3/5/2003	3/5/2003	0	minimal	South Main and East Lincoln	grease and paper		
3/7/2003	3/7/2003	0	minimal	Blakley and E. Park	grease and rags		
2/17/2003	2/17/2003	0	minimal	6 Meadow Lane	grease and roots		
7/24/2002	7/24/2002	0	unknown	8 Julner	mop head		
4/14/2003	4/14/2003	0	minimal	500 Evans Street	blown fuse		
9/16/2003	9/16/2003	0	minimal	1004 Golf Course Dr.	grease		
3/12/2003	3/12/2003	0	into storm drain	1301 West Vine	grease		
3/14/2003	3/14/2003	0	grass	708 North Spring	grease		
5/11/2005	5/11/2005		unknown	Higginson & Hastings	grease	ditch	
8/23/2004	8/23/2004	0	none	Ella St.	grease		
4/28/2004	4/28/2004	0	none	411 Eastwood	grease		
9/23/2003	9/23/2003	0	minimal	Short Street	ring knocked		

Date started	Date stopped	Volume	Environmental damage	Description	Cause	Stream	Location
					off and stopped up flow		
10/1/2003	10/1/2003	0	none	332 Evans Street	pump station failure-high level floats did not activate pumps		
10/7/2003	10/7/2003	0	minimal	1808 West Center St.	grease and rags		
10/8/2003	10/8/2003	500	minimal	114 Western Hills	grease and roots		
2/11/2004	2/11/2004	0	none	Corner of Fox and Deener Dr.	roots		
7/16/2006	7/16/2006	1000	unknown		clothing stuffed in line	creek	6 Stoneybrook
6/20/2006	6/20/2006	25	unknown	manhole overflowed	grease & roots	yard	19 Lynnwood
9/6/2005	9/6/2005	15	unknown	1808 West Center	Grease & roots	ditch	
5/11/2006	5/11/2006		unknown	manhole overflow	grease		611 Eastwood
11/1/2004	11/1/2004	0	minimal	903 West Pleasure	grease & rain		
4/12/2005	4/14/2005	2000000	unknown	Overflowed lagoon	heavy rainfall		
4/14/2005	4/17/2005		unknown	Plant - main pump station	Pump failure	Pond #1 and Gin Creek	
9/20/2005	9/20/2005		unknown	1808 West Center	grease	driveway	
9/21/2005	9/21/2005	20	unknown	507 King Street	grease	street	
1/18/2006	1/18/2006		unknown	8 Cattail	grase & roots		
12/28/2005	12/28/2005		unknown	Higginson & Hastings intersection	grease	ditch	
1/3/2006	1/3/2006		unknown	420 South Sawmill	grease	ditch	
1/23/2006	1/23/2006		unknown	Aztec & Cherokee	grease & roots	yard	
5/2/2006	5/2/2006		unknown	Blakeney & East Park	paper	ground	
5/4/2006	5/4/2006		unknown	Treatment	main		

Date started	Date stopped	Volume	Environmental damage	Description	Cause	Stream	Location
				plant	pump station overflowed pond - 5" of rainfall		
4/14/2005			unknown	Main Pumping station	Pump failure - electrical	Gin Creek	
2/1/2002		3000000	None	Overflow Pond at treatment plant	Precipitation		
4/5/2004	4/5/2004	0	unknown	behind Booth Road	pipe parts and gravel		
4/25/2003	4/25/2003	0	none	14 Meadow Lane	grease		
4/3/2001 9:30:00 AM	4/3/2001 10:30:00 AM	100	No	1004 James Street, runoff to yard	Grease & roots		
2/23/2004	2/23/2004	0	unknown	710 Holly St.	grease and roots		
2/5/2004	2/5/2004	2000000	none	WWTP Main pumpstation	faulty wires on pump		
2/12/2004	2/12/2004	0	none	East Market St.	grease		
4/16/2004	4/16/2004	0	none	24 Mohawk	grease		
2/13/2001	2/13/2001	0	unknown	1 Hour Overflow @ 1000 N Holly Street	Grease & hvy rain		
3/19/2004	3/19/2004	0	unknown	1313 East Race	grease		
4/1/2004	4/1/2004	0	unknown	1507 West Pleasure	rocks		
2/11/2003	2/11/2003	0	none	East Moore St.	paper in line		
3/12/2004	3/12/2004	0	none	19-20 Christopher Holmer off East Moore St.	grease and hair brush		
3/13/2004	3/13/2004	0	none	Ella and Melody Lane	roots		
8/19/2003	8/19/2003	0	none	905 Holly	grease		
9/10/2004	9/10/2004	0	minimal	505 Grain	line break/gravel		



Date started	Date stopped	Volume	Environmental damage	Description	Cause	Stream	Location
3/7/2007	3/7/2007	20	None	Manhole overflow	Grease	Storm drain	Fir & Arch Int
2/7/2007	2/7/2007	30	None	Manhole overflow	Line plugged - Paper & Rags	Storm Drain	North of East Market on Blankley
4/11/2007	4/11/2007	100	None observed	Line blockage	Grease	Ditch	601 Eastwood
5/9/2006	5/10/2006		unknown	Equalization basin overflowing	2 " rainfall	Gin Creek - Little Red River	
5/10/2006	5/10/2006		unknown	Main pump overflowing into pond then into Gin Creek	2 " rainfall	Gin Creek	
1/12/2006	1/12/2006	5	unknown	117 Larkspur	roots	yard	
1/13/2006	1/13/2006	500	unknown	105 Comache	diaper & grease	storm drain	
6/30/2006	6/30/2006	25	unknown	manhole overflow	roots	yard	13 Lynnwood
6/26/2006	6/26/2006		unknown	manhole overflow	debris	gutter	Vine & Spruce
1/15/2007	1/17/2007	3000000 0	None	Pumping 10 MG/Day into EQ basin	Heavy Rainfall - Flooding	Little Red	Searcy WWTP EQ Basin
2/2/2007	2/2/2007	25	None	Customer cleanouts and manhole overflow down street along curb	Roots in line - Line plugged	To the ground	112 & 113 Dean
1/24/2007	1/24/2007	10	None	Manhole overflow	Roots in line	To the ground	1204 River Ave
6/21/2007	6/21/2007	5	none				yard #18 Meadow Lane
3/7/2007	3/7/2007	20	None	Manhole overflow	Grease		Fir & Arch Int
5/19/2007	5/19/2007	100	none	pump station failiure	pump station failure		Airport Loop Rd.
2/25/2007	2/25/2007	50	None	Overflowed in creek 3' from manhole	Pump Station failure		Lift Station Airport Loop
2/20/2007	2/20/2007	25	None		Line blockage		511 Dean St.
8/27/2007	8/27/2007	40	NEAH	Manhole Overflow	Grease and Rage		4 Cattail

Date started	Date stopped	Volume	Environmental damage	Description	Cause	Stream	Location
9/4/2007	9/4/2007		NONE	BRAND NEW PUMP STATION, HOOKING UP AND SHUT ELECTRICITY OFF; 1 1/2 INCH OF RAIN CAME INTO THE PUMP STATION	1 1/2 INCH OF RAIN IN LESS THAN AN HOUR	HOLDING POND	260 NORTHBYPASS ROAD
10/15/2007	10/15/2007	1500	none	manhole overflow	roots		800 N. Holly St.
10/10/2007	10/10/2007	1000	none	overflow	roots, grease		802 N. Holly St.
12/7/2007	12/7/2007	5	NEAH	MH overflow	paper and grease		100 ft West of Sowell and West Race Street
12/14/2007	12/14/2007	125	NEAH	MH overflow	roots	did not reach stream	113 Lynwood
12/17/2007	12/17/2007	50	NEAH	MH overflow	grease	storm drain did not reach stream	Intersection of Race and Fir
1/31/2008	1/31/2008	50	NEAH	overflow	rags in pump impellers	ground	Evans Drive, WalMart lift station
1/30/2008	1/30/2008	100	NEAH	overflow	controls damaged during storm	ground	Airport Loop pump station
12/3/2007	12/3/2007	100	NEAH	MH overflow	grease	did not reach stream	124 Western Hills Drive
3/23/2008	3/23/2008	50	NEAH	MH overflow; 6:00 p.m. to 7:00 p.m.	Trash in line	Did not reach stream	Intersection of Jennifer Lane & Lori Circle
9/13/2008	9/13/2008	30	NEAH	Walmart Lift Station Overflow on Enans Dr - Started 8:45 Stopped 9:00	Pump Station Failure	Unnamed Trib	Evans Dr.
4/8/2008	4/8/2008	20	NEAH	MH overflow, 1:40 p.m. to 2:15 p.m.	Roots	Did not reach stream	Between 33 & 35 Harding Circle
7/30/2008	7/30/2008	200	none	112 Chrisp Street -	Cracked concrete	Gin Creek	

Date started	Date stopped	Volume	Environmental damage	Description	Cause	Stream	Location
				sewer line at creek crossing was discovered to have a crack in it, leaking sewage to ditch.	sewer line	and Ditch	
5/6/2008	5/6/2008	50	NONE	MH OVERFLOW @ #43 HARDING CIRCLE	GREASE & ROOTS		
9/11/2008	9/11/2008	15	NEAH	Manhole Overflow	Grease	Did Not Reach Stream	104 S. Cone St.
9/11/2008	9/11/2008	15	NEAH	Manhole Overflow	Grease	Did not reach stream	1702 W. Center
9/17/2008	9/17/2008	75	NEAH	Manhole Overflow 0810 to 0840	Grease	did no reach stream	134 Western Hills Dr.
9/18/2008	9/18/2008	50	NEAH	Lift station overflow	pump station failure		Wal-Mart lift station
9/21/2008	9/21/2008	60	NEA:H	Pump Station Overflow on Evans Drive, 1300 to 1340	PS Failure		Evans Drive
10/2/2008	10/2/2008	150	NEAH	PS wet well overflowed.	Pump Station Control Failure	N/A did not reach a stream.	Evans Drive
12/1/2008	12/1/2008	30	NEAH	Manhole Overflow	Roots	did not reach stream	21 Mowhawk
12/1/2008	12/1/2008	30	NEAH	Manhole Overflow	Roots	did not reach stream	21 Mohawk
12/1/2008	12/1/2008	30	NEAH	Manhole Overflow	Roots	did not reach stream	
12/16/2008	12/16/2008	25	NEAH	Manhole Overflow	Grease		911 E. Moore St
1/2/2009	1/2/2009	150	NEAH	Manhole Overflow - Started 0940 hours and ended 1100 hours.	Roots	did not reach stream	#8 Cattail

Date started	Date stopped	Volume	Environmental damage	Description	Cause	Stream	Location
1/19/2009	1/19/2009	50	NEAH	Manhole Overflow - 1650 to 1710 hours	Grease	Did not reach stream	130 Western Hills Dr.
1/28/2009	1/28/2009	300	NEAH	Manhole Overflow began at 0640 and ended 0750	grease	did not reach stream	Intersection of W. Race and N. Fir Streets
2/13/2009	2/13/2009	200	NEAH	Pump Station Overflow	Pump Station Failure	did not reach stream	Airport Loop
2/13/2009	2/13/2009	150	NEAH	Manhole Overflow - Overflow began 1525 hours and ended 1547 hours.	Grease	did not reach stream	Land-O-Frost on Higginson St.



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 N 2 5 3 A R R 0 0 C 3 8 9 11 12 0 9 0 5 1 2 17 18 W 19 S 20 1					
Remarks					
A F I N 7 3 - 0 0 0 5 5					
Inspection Work Days	Facility Evaluation Rating	BI	QA	-----Reserved-----	
67 69	70 N	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) <b>City of Searcy Waste Water Treatment Plant.</b> 260 north Bypass Road Searcy, AR	Entry Time/Date 9:00 05/12/09	Permit Effective Date 2/1/2008
	Exit Time/Date 4:15 05/12/09	Permit Expiration Date 1/31/2013
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) Paul Abernathy, facility manager	Other Facility Data	
Name, Address of Responsible Official/Title/Phone and Fax Number Dan Dawson City of Searcy Searcy Board of Utilities PO Box 1319 Searcy, AR 72145 (501) 268-2481	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)

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

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

### Violations of the No Exposure Exclusion:

1. Hydraulic fluid spills evident on ground from equipment.
2. Forklift exposed to the elements.
3. Dumpster left uncovered and exposed to stormwater.

Name(s) and Signature(s) of Inspector(s)  Lindsay Stoker	Agency/Office/Telephone/Fax ADEQ/ North Little Rock/ 501-682-0657/ 501 682-0910 (Fax)	Date 5/12/09
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date

No Exposure Exclusion Verification		
Are any of the following materials or activities exposed to precipitation, now or in the foreseeable future? <b>Answering "Yes" to any of these questions indicates the facility is not eligible for the No Exposure Exclusion.</b>		
a. Using, storing, or cleaning industrial machinery or equipment, and areas where residuals from using, storing, or cleaning industrial machinery or equipment remain and are exposed to storm water.	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N
Comments:		
b. Are materials or residuals on the ground or in storm water inlets from spills/leaks.	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
Comments: <b><u>Hydraulic fluid on ground from an equipment leak.</u></b>		
c. Are materials or products from past industrial activity exposed.	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N
Comments:		
d. Is material handling equipment exposed (except adequately maintained vehicles).	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
Comments: <b><u>Forklift exposed</u></b>		
e. Are materials or products during loading/unloading or transporting activities exposed.	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N
Comments:		
f. Materials or products stored outdoors (except final products intended for outside use [e.g., new cars] where exposure to storm water does not result in the discharge of pollutants).	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N
Comments:		
g. Materials contained in open, deteriorated, or leaking storage drums, barrels, tanks, and similar containers.	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
Comments: <b><u>dumpster uncovered but empty</u></b>		
h. Materials or products handled/stored on roads or railways owned or maintained by the discharger.	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N
Comments:		
i. Waste materials exposed (except waste in covered, non-leaking containers [e.g., dumpsters]).	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N
Comments:		
j. Application or disposal of process wastewater (unless otherwise permitted).	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N
Comments:		
k. Particulate matter or visible deposits of residuals from roof stacks and/or vents not otherwise regulated (i.e., under an air quality control permit) and evident in the storm water outflow.	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N
Comments:		
General Comments:		

## SEARCY WATER AND SEWER SYSTEM

300 NORTH ELM STREET

P. O. BOX 1319

SEARCY, ARKANSAS

72145-1319

CLARENCE O. BUCKNER, MANAGER

June 11, 2009

CERTIFIED MAIL, Return Receipt Requested: 7008 1830 0000 2485 7391

Cindy Garner, Manager  
Water Division Enforcement Branch  
ADEQ  
5301 Northshore Dr.  
North Little Rock, AR 72118-5317

Re: NPDES Permit No. AR0021601  
AFIN: 73-00055  
No Exposure Exclusion: ARR00C389

Dear Cindy:

We are in receipt on June 8, 2009, of the inspection report written by Lindsay Stoker regarding inspections made by her and Dale Washam on May 12 & 13, 2009. We have the following responses to the Compliance Evaluation Inspection items noted in her report.

### Issue 1: Improper Operations and Maintenance

- a) All the main pump station pumps are now back in place and operational after being returned from the factory for warranty repairs. The back-up waste activated sludge pump has been delivered and is scheduled for installation.
- b) The addition of more backup power for the plant in case of an extended power outage has been discussed with our consulting engineers and is scheduled for inclusion in our next planned plant upgrade.
- c) The chlorine lines to the weirs have been opened up by drilling more holes in them and all the chlorination is now done through that line as algae prevention and treatment. The chlorinator makeup water pump has been inspected by the factory representative and will be improved for increased performance so more chlorine can be applied to the weirs. The operator has been notified to put weir-cleaning on his weekly schedule. Finally, the new brushes for the weir scrubbers have been purchased and the scrubbers will be modified and painted (see photo).
- d) The seal for the makeup water pump has been replaced and the leak is under control (see photo). The pump manufacturer's representative has made a site visit and we are awaiting his recommendations on the repair or replacement of the pump. The water that was leaking was running back into the wet well.
- e) The SO<sub>2</sub> room vents have been repaired and are now operational (see photo).

## Issue 2: Improper Collection of Samples

ADEQ will be notified on the monthly DMR if we are unable to collect our grab samples at the outfall due to flooding in the river. Please see an example of this notification statement on our recently submitted May 2009 DMR.

## Issue 3: Ammonia Testing

Ammonia testing will proceed according to the approved method, referenced in Standard Methods, 20<sup>th</sup> Edition, Method No. 4500-NH<sub>3</sub> D.

The following responses pertain to the evaluation of the stormwater No Exposure Certification.

1. The forklift in question is parked in the equipment shop when not in use (see photo).
2. All work on the lift will be done in the equipment shop so any spill or leak will be contained.
3. The dumpster tarpaulin is now completely covering the dumpster and plastic "ribbing" has been added so that water will not pool in the tarpaulin (see photo).

The following responses pertain to the SSO inspection.

- The chemical supplier has been contacted concerning grease control strategies in the main pump station wet well, and an evaluation is scheduled. Furthermore, the utility is continuing to promote its "Can the Grease" initiative to the public.

We hope these responses adequately address the concerns noted. Please let me know if there is any additional information needed pertaining to these matters.

Sincerely,

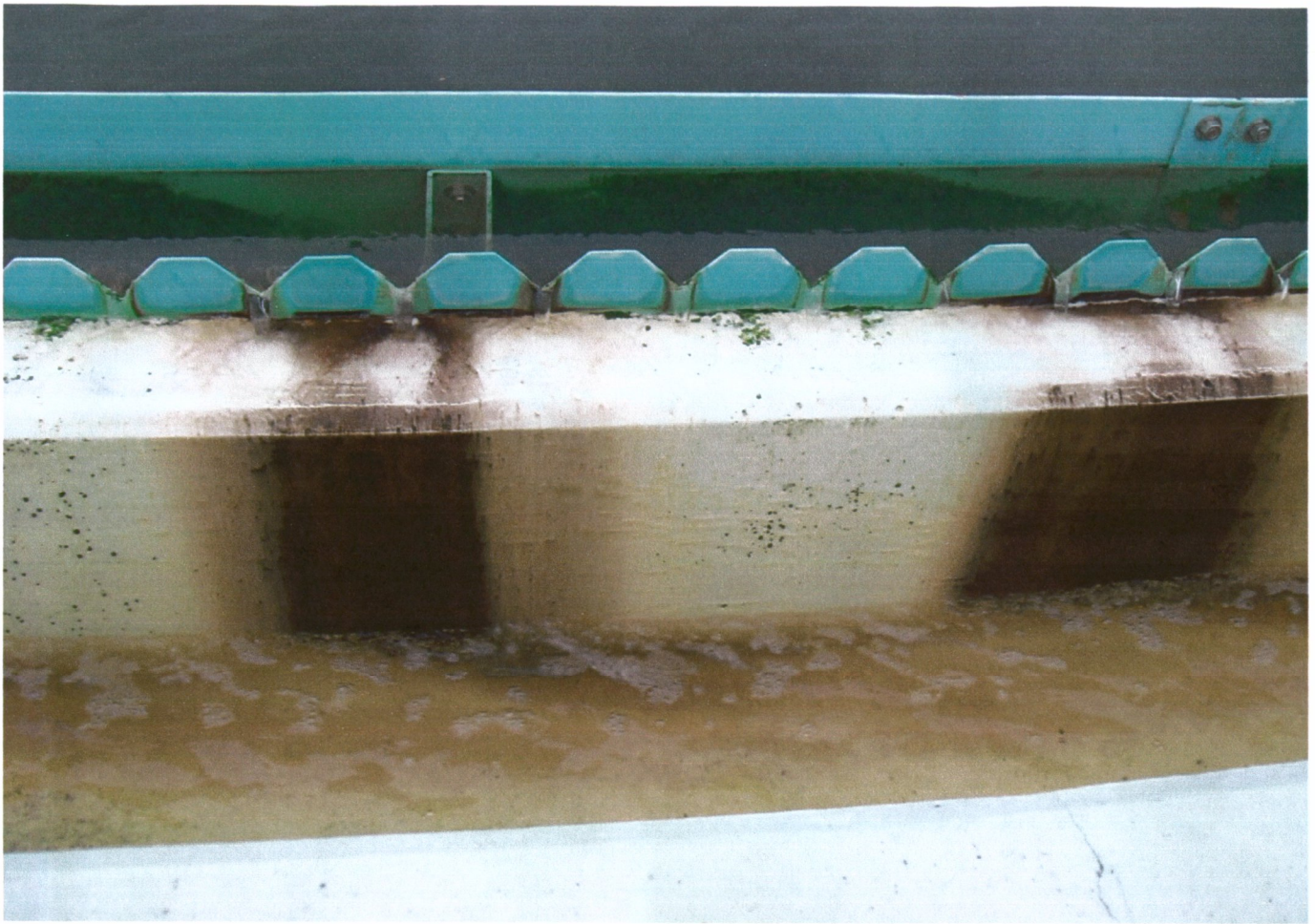
SEARCY WATER AND SEWER SYSTEM



Daniel K. Dawson  
Assistant Manager

Enclosures





Cleaned weirs and increased chlorine flow.



Replaced brushes and painted arms and altered inner brush mount.



Replaced seals in makeup water pump.



Repaired vent in SO2 room.



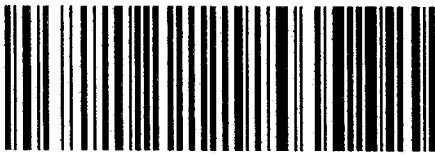


Parked lift in equipment shed.



Tarp over dumpster with bows installed.

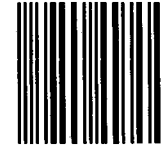
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**SEARCY WATER AND SEWER SYSTEM**

300 NORTH ELM STREET

P. O. BOX 1319

SEARCY, ARKANSAS 72145-1319

**RETURN RECEIPT  
REQUESTED**



Cindy Garner, Manager  
Water Division Enforcement Branch  
ADEQ  
5301 Northshore Dr.  
North Little Rock, AR 72118-5317

