

ADEQ

ARKANSAS
Department of Environmental Quality

February 1, 2010

*Tommy Lawson, Manager
City of Stuttgart Water Utilities
P.O. Box 130
Stuttgart, Arkansas 72160*

RE: Sanitary Sewer Overflow Inspection

AFIN: 01-00041

NPDES Permit No.:AR0034380

Dear Mr. Lawson:

On January 20, 2010, I conducted a Sanitary Sewer Overflow Inspection of the above referenced 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. At the time of inspection, the facility appeared to be in compliance with the applicable regulations.

If I can be of any assistance, please contact me at (870) 247-5155.

Sincerely,



*District 6 Inspector
Water Division*

*cc: Water Division Enforcement Branch
Water Division Permits Branch*



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

NPDES Compliance Inspection Report

Form Approved
OMB No. 2040-0003

Section A: National Data System Coding

Transaction Code	NPDES	Yr/Mo/Day	Inspec. Type	Inspector	Fac. Type												
1 <input type="text" value="N"/> 2 <input type="text" value="5"/> 3 <input type="text" value="A"/> <input type="text" value="R"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="3"/> <input type="text" value="4"/> <input type="text" value="3"/> <input type="text" value="8"/> <input type="text" value="0"/>	11 <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="2"/> <input type="text" value="0"/>	17 <input type="text" value="V"/>	18 <input type="text" value="S"/>	19 <input type="text" value="1"/>	20 <input type="text" value="1"/>												
Remarks																	
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">Inspection Work Days</td> <td style="width:10%;">Facility Evaluation Rating</td> <td style="width:10%;">BI</td> <td style="width:10%;">QA</td> <td style="width:10%;">Reserved</td> <td style="width:10%;"></td> </tr> <tr> <td>67 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/></td> <td>70 <input type="text" value="N"/></td> <td>71 <input type="text" value="N"/></td> <td>72 <input type="text" value="N"/></td> <td>73 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/></td> <td>74 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/></td> </tr> </table>						Inspection Work Days	Facility Evaluation Rating	BI	QA	Reserved		67 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	70 <input type="text" value="N"/>	71 <input type="text" value="N"/>	72 <input type="text" value="N"/>	73 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	74 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
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Section B: Facility Data

Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number) <i>City of Stuttgart Water Utilities</i> <i>612 South College</i> <i>Stuttgart, Arkansas 72160</i> <i>Arkansas County, Arkansas</i>	Entry Time/Date <i>9:00 a.m. 1/20/2010</i>	Permit Effective Date <i>September 1, 2009</i>
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) <i>Tommy Lawson, Manager (870) 674-7115</i>	Exit Time/Date <i>1:00 p.m. 1/20/2010</i>	Permit Expiration Date <i>August 31, 2014</i>
Name, Address of Responsible Official/Title/Phone and Fax Number <i>Tommy Lawson, Manager (870) 674-7115</i> <i>City of Stuttgart Water Utilities</i> <i>P.O. Box 130</i> <i>Stuttgart, Arkansas 72160</i>	Contacted Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Other Facility Data

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
N	Facility Site Review	N	Compliance Schedules	N	Pretreatment	N	Multimedia
N	Effluent/Receiving Waters	N	Laboratory	N	Storm Water	S	Other: SSO

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

A Sanitary Sewer Overflow inspection was conducted to determine compliance status with the applicable regulations. At the time of inspection, the facility appeared to be in compliance with the applicable regulations.

Name(s) and Signature(s) of Inspector(s) Steven L. Henderson	Agency/Office/Telephone/Fax <i>ADEQ/ White Hall/ (870) 247-5155/ (870) 247-5185</i>	Date <i>February 1, 2010</i>
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date

COLLECTION SYSTEM INSPECTION AND OVERALL RATING		<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: Gravity Flow > 17 Regular Pump Stations > 3 Main Pump Stations > WWTP Pump Station		
POPULATION SERVED/NUMBER OF RESIDENTIAL AND COMMERCIAL CONNECTIONS: Estimated population (9,500)/ 3,854 residential/ 563 commercial		
FEET OF SEWER SYSTEM: Approximately 63 miles		
AGE OF SYSTEM: Some lines as old as 80 years/ oldest pump station 50 years/ Latest update to WWTP 2002/ In 2009, construction began on ~2.5 miles of new force main to help eliminate overflows.		
DOES THE SYSTEM EXPERIENCE PROBLEMS DURING DRY OR WET WEATHER (EXPLAIN): Wet weather, infiltration	<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): Sanitary Sewer overflows are reported monthly to the Department with estimated amount of release, duration of release, location, cause of release and corrective measures taken. Documentation was provided during inspection.	<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 checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
7/28/09, 1200 Block of East Lincoln Street		
PUMP STATIONS		<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
NUMBER OF PUMP STATIONS IN SYSTEM: 20	NUMBER WITH BACKUP POWER: 20	
HOW OFTEN ARE PUMP STATIONS INSPECTED/MONITORED: Daily		
ARE MAINTENANCE RECORDS AND/OR OPERATOR LOGS KEPT: Yes		
ADEQUATE INVENTORY OF SPARE PARTS: Yes		
TYPE OF REMOTE ELECTRONIC MONITORING USED (I.E. SCADA OR AUTO DIALERS): None		
BRIEF SUMMARY OF EMERGENCY PROCEDURES: Portable generators are available for pump stations, Permanent generators are available at the WWTP		
NUMBER OF PUMP STATIONS VISITED DURING INSPECTION (SEE ATTACHED CHECKLISTS FOR EACH): One, 21st and Cherry Street		
SATELLITE SYSTEMS		<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: No		
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:		

PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)	
GENERAL INFORMATION AND OVERALL EVALUATION	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: 21st and Cherry Street	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: 2	NUMBER OPERATIONAL: 2
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE:	<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
GENERAL OPERATION AND MAINTENANCE	
<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA	
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 checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input 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
BACKUP POWER AND ALARMS	
<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED:	<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):	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE

Date_started	Date_stopped	Volume	Environmental_damage	Description	Cause	Stream	Location
11/29/2001	11/30/2001	0	No	Overflow at Plant, runoff to plant grounds.	Excess rain,		
4/11/2005	4/11/2005		unknown	11th & Prairie	rainfall	ditch	
5/11/2008	5/12/2008	300000	none	manholes overflowed because they were backed up	electrical services were ripped out of the buildings, tornado	pond at golf course, storm drains	southeast side of town
7/28/2009	7/29/2009	300000	neah	manhole overflowed	5 1/2 inches of rain, I&I--overloaded lift station	to ground	1200 block of E. Lincoln
7/28/2009	7/28/2009	2000	neah	manhole overflow	excessive rain	street	Cleveland and Burkle
7/28/2009	7/28/2009	3000	neah	manhole overflow	excessive rain	street	21st and Park
4/9/2009	4/10/2009	5000	NEAH	backup of wastewater came out where a sewer line had been pulled out on private property.	due to excessive solids being discharged from an industry		1200 block of East Lincoln
5/6/2009	5/6/2009	3000	NEAH	Manhole at W. 10th & Prairie	power outage, excessive rain, lightening shut off switch	ditch	W. 10th & Prairie
5/6/2009	5/6/2009	3000	NEAH	manhole overflow	rainfall, power outage	street, to ditch	21st & Cherry