

ADEQ

ARKANSAS
Department of Environmental Quality

May 31, 2012

David Fitzgerald, Manager
Sheridan, City Of-Wastewater
PO BOX 44
Sheridan, AR 72150

AFIN: 27-00022

NPDES Permit No.: AR0034347

Dear Mr. Fitzgerald:

On May 24, 2012, I performed a Sanitary Sewer Overflow Inspection (Collection System 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. This inspection revealed the following violations:

- The wastewater pumping stations do not have emergency contact information on the stations. All wastewater pumping stations must have emergency contact information clearly visible to the public. This will facilitate a more timely response.

The above items require your immediate attention. Please submit a written response to these findings to the Water Division Inspection Branch of this Department. This response should be mailed to the address at the bottom of the first page of the letter or e-mailed to Water-Inspection-report@adeq.state.ar.us. This response should contain documentation describing the course of action taken to correct each item noted. This corrective action should be completed as soon as possible, and the written response with all necessary documentation (i.e. photos) is due by June 12, 2012.

If I can be any assistance, please contact me at benson@adeq.state.ar.us or 501-683-0827.

Sincerely,



Dennis Benson
District 9 Field Inspector
Water Division



Form Approved
OMB No. 2040-0003

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

NPDES Compliance Inspection Report

Section A: National Data System Coding

Transaction Code			NPDES										Yr/Mo/Day				Inspec. Type		Inspector		Fac. Type										
1	N		2	5		3	A	R	0	0	3	4	3	4	7	11	12	1	2	0	5	2	4	17	18	V		19	S	20	1
Remarks																															
Inspection Work Days						Facility Evaluation Rating						BI		QA		-----Reserved-----															
67						70	N					71	N	72	N	73														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>) Sheridan, City Of-Wastewater - Take I-530 South toward Pine Bluff and take the Highway 167 ext toward Sheridan. Once in Sheridan, turn left (east) on Highway 270 and go approximately 8 blocks to Gatzke Drive (turn right). Plant is at end of drive.		Entry Time/Date 10:00 am on 05/24/12	Permit Effective Date 3/1/2005
		Exit Time/Date 10:55 am on 5/24/12	Permit Expiration Date 2/28/2010
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) David Fitzgerald, Manager		Other Facility Data PDS #065913	
Name, Address of Responsible Official/Title/Phone and Fax Number David Fitzgerald/ Sheridan, City Of-Wastewater PO BOX 44 Sheridan, AR 72150		Contacted Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Section C: Areas Evaluated During Inspection

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

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

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

The wastewater pumping stations do not have emergency contact information on the stations. All wastewater pumping stations must have emergency contact information clearly visible to the public. This will facilitate a more timely response.

Name(s) and Signature(s) of Inspector(s) 	Agency/Office/Telephone/Fax	Date 05/24/12
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: <u>Collection system consists of primarily a gravity sewer system with 9 pump stations.</u>		
POPULATION SERVED/NUMBER OF RESIDENTIAL AND COMMERCIAL CONNECTIONS: <u>1400 residential connections and 184 commercial connections</u>		
FEET OF SEWER SYSTEM: <u>Unknown</u>		
AGE OF SYSTEM: <u>Original collection system installed in late 1940's for downtown area, expanded in late 60s and again in 70's. All new developments have to meet Sheridan</u>		
DOES THE SYSTEM EXPERIENCE PROBLEMS DURING DRY OR WET WEATHER (EXPLAIN):	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
IS THERE A SYSTEM IN PLACE FOR REPORTING SSOS TO ADEQ (DESCRIBE):	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
<u>All calls go through main office – David Fitzgerald makes 24-hour call and monthly rpt.</u>		
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	
PUMP STATIONS		<input 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: <u>9</u>	NUMBER WITH BACKUP POWER: <u>none</u>	
HOW OFTEN ARE PUMP STATIONS INSPECTED/MONITORED: <u>M-F daily by wastewater staff, Sheridan PD drives by all pumping stations during the weekend.</u>		
ARE MAINTENANCE RECORDS AND/OR OPERATOR LOGS KEPT: <u>yes</u>		
ADEQUATE INVENTORY OF SPARE PARTS: <u>yes</u>		
TYPE OF REMOTE ELECTRONIC MONITORING USED (I.E. SCADA OR AUTO DIALERS): <u>none</u>		
BRIEF SUMMARY OF EMERGENCY PROCEDURES: <u>All Sheridan WW employees are on call. Pumper trucks are available if needed to keep from overflowing.</u>		
NUMBER OF PUMP STATIONS VISITED DURING INSPECTION (SEE ATTACHED CHECKLISTS FOR EACH): <u>2</u>		
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: <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:		

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: North Main Pump Station	
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: <u>2</u>	NUMBER OPERATIONAL: <u>2</u>
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 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 type="checkbox"/> S <input checked="" 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 type="checkbox"/> S <input checked="" 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 checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
The pump station does not have any emergency contact information	

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: Jail Pump Station	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: <u>2</u>	NUMBER OPERATIONAL: <u>2</u>
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
Jail pump station is near wastewater plant, has emergency overflow to treatment plant.	
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	
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 type="checkbox"/> S <input checked="" 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 type="checkbox"/> NA <input type="checkbox"/> NE
The pump station does not have any emergency contact information	

Water Division NPDES Photographic Evidence Sheet

Location: Sheridan Wastewater Collection System

Photographer: Dennis Benson **Witness:** None

Photo # 1 **Of** 2 **Date:** 5/24/12 **Time:** 10:23 am

Description: North Main Pump Station – Emergency contact information is missing.



Photographer: Dennis Benson **Witness:** None

Photo # 2 **Of** 2 **Date:** 5/24/12 **Time:** 10:24 am

Description: Inside of pumping station was very clean and orderly.



From: [Benson, Dennis](#)
To: [Miller, Dennise](#)
Subject: FW: Document1
Date: Monday, July 09, 2012 10:51:20 AM
Attachments: [Document1.docx](#)

Water ID 9224

Dennis Benson
District 9 Inspector
Water Division

From: Sheridan Water Works [mailto:sheridanwater@windstream.net]
Sent: Tuesday, July 03, 2012 2:04 PM
To: Benson, Dennis
Subject: Document1

Sheridan Water Works
PO BOX 486
Sheridan, AR 72150

ADEQ
Dennis Benson-Dist.9 Field Inspector
5301 Northshore Dr.
No Little Rock, AR 72118

July 3, 2012

RE: AFIN 27-00022
NPDES permit no: AR0034347

Dear Mr. Benson:

This letter is in reference to your inspection on May 24, 2012 of the Sewer Collection System. The inspection revealed waste water pumping stations do not have emergency contact information on them. The signs have been ordered from a local sign maker who works for the Arkansas Forestry Commission. Due to the drought and extreme heat and number of fires the Forestry Commission is fighting on a daily basis, the signs have been delayed and will be installed as soon as delivered. Photos will be sent at that time.

Sincerely,
David Fitzgerald

ADEQ

ARKANSAS
Department of Environmental Quality

July 10, 2012

David Fitzgerald
Sheridan, City Of-Wastewater Treatment
PO BOX 44
Sheridan, AR 72150

Re: AFIN 27-00022

Permit No. AR0034347- Response to Inspection

Dear Mr. Fitzgerald:

I have reviewed your response pertaining to my May 1, 2012 inspection of the above referenced facility. However, the information provided does not sufficiently address the violations referenced in my inspection report. Specifically, the response does not contain an estimated date for the completion of the installation of the notification signs required at the wastewater pumping stations. Please provide ADEQ with the anticipated date when the signs will be installed on the pumping stations. Your response to this letter should be submitted by July 19, 2012.

Thank you for your attention to this matter. Should you have any questions, feel free to contact me at 501-683-0827 or you may e-mail me at benson@adeq.state.ar.us.

Sincerely,



Dennis Benson
District 9 Field Inspector
Water Division

cc: Enforcement Branch

Sheridan Water Works
PO BOX 486
Sheridan, AR 72150

ADEQ
Dennis Benson-Dist.9 Field Inspector
5301 Northshore Dr.
No Little Rock, AR 72118

July 17, 2012

RE: AFIN 27-00022
NPDES permit no: AR0034347
Response to Inspection

Dear Mr. Benson:

The signs for the waste water pumping stations are due here on July 27th. They will be put up and pictures will be sent by August 17th.


Sincerely,
David Fitzgerald

From: [Benson, Dennis](#)
To: [Miller, Dennise](#)
Subject: FW: signs
Date: Thursday, August 23, 2012 1:03:57 PM
Attachments: [red.jpg](#)
[red1.jpg](#)

Please attach to Water ID 9224

Dennis Benson
District 9 Inspector
Water Division

From: Sheridan Water Works [mailto:sheridanwater@windstream.net]
Sent: Thursday, August 23, 2012 11:10 AM
To: Benson, Dennis
Subject: signs



IF RED LIGHT IS ON, CALL
SHERIDAN WATER WORKS
942-2722 OR SPD 942-4642

**IF RED LIGHT IS ON, CALL
SHERIDAN WATER WORKS
942-2722 OR SPD 942-4642**

ADEQ

ARKANSAS
Department of Environmental Quality

August 24, 2012

David Fitzgerald
Sheridan, City Of-Wastewater Treatment
PO BOX 44
Sheridan, AR 72150

Permit No.: AR0034347 AFIN: 27-00022

Dear David Fitzgerald:

I have reviewed the response pertaining to my May 1, 2012 inspection of the Sheridan, City Of-Wastewater Treatment. The information provided sufficiently addresses the violations referenced in my inspection report. At this time the Department has no further comment concerning this particular inspection. Acceptance of this response by the Department does not preclude any future enforcement action deemed necessary at this site or any other site.

If we need further information concerning this matter, we will contact you. Thank you for your attention to this matter. Should you have any questions, feel free to contact me at 501-683-0827 or you may e-mail me at benson@adeq.state.ar.us.

Sincerely,



Dennis Benson
District 9 Field Inspector
Water Division

cc: Water Division Enforcement Branch
 Water Division Permits Branch