ADEQ

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

May 16, 2013

Kirby Murray, Public Works Director
City of Berryville
P.O. Box 227
Berryville, Arkansas 72616

RE: Compliance Evaluation and Sanitary Sewer Overflow Inspections
        AFIN: 08-00034, NPDES Permit No.: AR0021792

Dear: Mr. Murray:

On May 2, 2013, I performed a Compliance Evaluation Inspection and a Sanitary Sewer Overflow
Inspection at the wastewater 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. These inspections revealed that you are incompliance with the referenced
permit.

If I can be of any assistance, please contact me at 870-446-6170.

Sincerely,

Bruce Kirkpatrick
District 2 Field Inspector
Water Division

⊕EPA

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 2 1 7 9 2** 11	12 **1 3 0 5 0 2** 17	18 **C**	19 **S** 20	**1**

Remarks

A F I N 0 8 - 0 0 0 3 4

Inspection Work Days	Facility Evaluation Rating	BI	QA	-----------------------------Reserved----------------------------
67 69	70 **5**	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)*		
City of Berryville Wastewater Treatment Facility **1000 W. Cedarvale** **Berryville, Arkansas**	Entry Time/Date **0855 / 05-02-2013**	Permit Effective Date **December 01, 2007**
	Exit Time/Date **1453 / 05-02-2013**	Permit Expiration Date **November 30, 2012 (extended)**

Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)	Other Facility Data
Kirby Murray, Public Works Director **Darrell Backs, Chief Operator, 870-423-3749**	**Facility: 36 21' 25.95", -93 34' 43.51"**

Name, Address of Responsible Official/Title/Phone and Fax Number	Contacted	**MAJOR MUNICIPAL**
Kirby Murray, Public Works Director **City of Berryville** **P.O. Box 227** **Berryville, Arkansas 72616 870-423-4074, 870-423-4501 (fax)**	Yes ☑ No ☐	

Section C: Areas Evaluated During Inspection
(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

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

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

A compliance evaluation inspection was performed.   The treatment plant appeared to be very well-maintained and operated. A review of Discharge Monitoring Reports from February 2012 through March 2013 did not reveal any effluent limitation violations. Facility records were well-organized and complete. The facility no longer land applies sludge.   Sludge is now dewatered with new belt press and landfilled.   A new generator has been installed capable of powering all treatment processes. The inspection did not reveal any evidence of any violations.

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Telephone/Fax	Date
Bruce Kirkpatrick *Bruce Kirkpatrick*	**AR Dept. of Environmental Quality- Jasper** **870-446-6170; 870-4476-2181 (fax)**	**05-10-2013**
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date

SECTION A: PERMIT VERIFICATION

PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS ☑S ☐M ☐U ☐NA ☑NE

DETAILS:

1.	CORRECT NAME AND MAILING ADDRESS OF PERMITTEE:	☑Y ☐N ☐NA ☐NE
2.	NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES:	☐Y ☐N ☑NA ☐NE
3.	NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT:	☑Y ☐N ☐NA ☐NE
4.	ALL DISCHARGES ARE PERMITTED:	☑Y ☐N ☐NA ☐NE

SECTION B: RECORDKEEPING AND REPORTING EVALUATION

RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT ☑S ☐M ☐U ☐NA ☑NE

DETAILS:

1.	ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRS:	☑Y ☐N ☐NA ☐NE
2.	SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE:	☑S ☐M ☐U ☐NA ☐NE
	a. DATES AND TIME(S) OF SAMPLING:	☑Y ☐N ☐NA ☐NE
	b. EXACT LOCATION(S) OF SAMPLING:	☑Y ☐N ☐NA ☐NE
	c. NAME OF INDIVIDUAL PERFORMING SAMPLING:	☑Y ☐N ☐NA ☐NE
	d. ANALYTICAL METHODS AND TECHNIQUES:	☑Y ☐N ☐NA ☐NE
	e. RESULTS OF CALIBRATIONS:	☑Y ☐N ☐NA ☐NE
	f. RESULTS OF ANALYSES:	☑Y ☐N ☐NA ☐NE
	g. DATES AND TIMES OF ANALYSES:	☑Y ☐N ☐NA ☐NE
	h. NAME OF PERSON(S) PERFORMING ANALYSES:	☑Y ☐N ☐NA ☐NE
3.	LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE:	☑S ☐M ☐U ☐NA ☐NE
4.	PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR:	☑S ☐M ☐U ☐NA ☐NE
5.	EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA:	☑Y ☐N ☐NA ☐NE

SECTION C: OPERATIONS AND MAINTENANCE

TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED ☑S ☐M ☐U ☐NA ☑NE

DETAILS:

1.	TREATMENT UNITS PROPERLY OPERATED:	☑S ☐M ☐U ☐NA ☐NE
2.	TREATMENT UNITS PROPERLY MAINTAINED:	☑S ☐M ☐U ☐NA ☐NE
3.	STANDBY POWER OR OTHER EQUIVALENT PROVIDED:	☑S ☐M ☐U ☐NA ☐NE
4.	ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE:	☑S ☐M ☐U ☐NA ☐NE
5.	ALL NEEDED TREATMENT UNITS IN SERVICE:	☑S ☐M ☐U ☐NA ☐NE
6.	ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED:	☑S ☐M ☐U ☐NA ☐NE
7.	SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED:	☐S ☐M ☐U ☐NA ☑NE
8.	OPERATION AND MAINTENANCE MANUAL AVAILABLE:	☑Y ☐N ☐NA ☐NE
9.	STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED:	☐Y ☐N ☐NA ☑NE
10.	PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED:	☐Y ☐N ☐NA ☑NE
11.	HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR:	☑Y ☐N ☐NA ☐NE
12.	IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED:	☑Y ☐N ☐NA ☐NE
13.	HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS:	☑Y ☐N ☐NA ☐NE
14.	HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT:	☐Y ☑N ☐NA ☐NE
15.	IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT:	☐Y ☐N ☑NA ☐NE

SECTION D: SAMPLING

PERMITTEE SAMPLING MEETS PERMIT REQUIREMENTS	☑S ☐M ☐U ☐NA ☑NE

DETAILS:

1.	SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT:	☑Y ☐N ☐NA ☐NE
2.	LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES:	☑Y ☐N ☐NA ☐NE
3.	FLOW PROPORTIONED SAMPLES OBTAINED WHEN REQUIRED BY PERMIT:	☑Y ☐N ☐NA ☐NE
4.	SAMPLING AND ANALYSES COMPLETED ON PARAMETERS SPECIFIED IN PERMIT:	☑Y ☐N ☐NA ☐NE
5.	SAMPLING AND ANALYSES PERFORMED AT FREQUENCY SPECIFIED IN PERMIT:	☑Y ☐N ☐NA ☐NE
6.	SAMPLE COLLECTION PROCEDURES ADEQUATE:	☑Y ☐N ☐NA ☐NE
	a. SAMPLES REFRIGERATED DURING COMPOSITING:	☑Y ☐N ☐NA ☐NE
	b. PROPER PRESERVATION TECHNIQUES USED:	☑Y ☐N ☐NA ☐NE
	c. CONTAINERS AND SAMPLE HOLDING TIMES CONFORM TO 40 CFR 136:	☑Y ☐N ☐NA ☐NE
7.	IF MONITORING IS PERFORMED MORE OFTEN THAN REQUIRED ARE RESULTS REPORTED ON THE DMR:	☐Y ☐N ☑NA ☐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: **18" Parshall Fl;ume**	☑Y ☐N ☐NA ☐NE
2.	FLOW MEASURED AT EACH OUTFALL AS REQUIRED:	☑Y ☐N ☐NA ☐NE
3.	SECONDARY INSTRUMENTS (TOTALIZERS, RECORDERS, ETC.) PROPERLY OPERATED AND MAINTAINED:	☑Y ☐N ☐NA ☐NE
4.	CALIBRATION FREQUENCY ADEQUATE:	☑Y ☐N ☐NA ☐NE
5.	RECORDS MAINTAINED OF CALIBRATION PROCEDURES:	☑Y ☐N ☐NA ☐NE
6.	CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE:	☑Y ☐N ☐NA ☐NE
7.	FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE:	☑Y ☐N ☐NA ☐NE
8.	FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES:	☑Y ☐N ☐NA ☐NE
9.	HEAD MEASURED AT PROPER LOCATION:	☑Y ☐N ☐NA ☐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) :	☑Y ☐N ☐NA ☐NE
2.	IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED:	☐Y ☐N ☑NA ☐NE
3.	SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT:	☐Y ☐N ☐NA ☑NE
4.	QUALITY CONTROL PROCEDURES ADEQUATE:	☐Y ☐N ☐NA ☑NE
5.	DUPLICATE SAMPLES ARE ANALYZED ≥10% OF THE TIME:	☐Y ☐N ☐NA ☑NE
6.	SPIKED SAMPLES ARE ANALYZED ≥10% OF THE TIME:	☐Y ☐N ☐NA ☑NE
7.	COMMERCIAL LABORATORY USED:	☑Y ☐N ☐NA ☐NE
	a. LAB NAME: **ETG**	
	b. LAB ADDRESS: **1702c E Central, Bentonville, AR**	
	c. PARAMETERS PERFORMED: **CBOD5, TSS, NH3-N, FCB, P, TDS**	
8.	BIOMONITORING PROCEDURES ADEQUATE:	☐Y ☐N ☐NA ☑NE
	a. PROPER ORGANISMS USED:	☐Y ☐N ☐NA ☑NE
	b. PROPER DILUTION SERIES FOLLOWED:	☐Y ☐N ☐NA ☑NE
	c. PROPER TEST METHODS AND DURATION:	☐Y ☐N ☐NA ☑NE
	d. RETESTS AND/OR TRE PERFORMED AS REQUIRED:	☐Y ☐N ☑NA ☐NE

SECTION G: EFFLUENT/RECEIVING WATERS OBSERVATIONS

BASED ON VISUAL OBSERVATIONS ONLY	☑S ☐M ☐U ☐NA ☐NE

DETAILS: Some algae noted on substrate below outfall in receiving waters / very clear effluent

OUTFALL #:	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOATING SOLIDS	COLOR	OTHER
001	none	none	none	none	none	none	

SECTION H: SLUDGE DISPOSAL

SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS	☑S ☐M ☐U ☐NA ☐NE

DETAILS: **Facility has a new belt press.   All now sludge landfilled.**

1.	SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY:	☑S ☐M ☐U ☐NA ☐NE
2.	SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503:	☑S ☐M ☐U ☐NA ☐NE
3.	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:

1.	SAMPLES OBTAINED THIS INSPECTION:	☐Y ☐N ☐NA ☑NE
2.	TYPE OF SAMPLE: ☐GRAB:__ ☐COMPOSITE:__ METHOD:__ FREQUENCY:	
3.	SAMPLES PRESERVED:	☐Y ☐N ☐NA ☑NE
4.	FLOW PROPORTIONED SAMPLES OBTAINED:	☐Y ☐N ☐NA ☑NE
5.	SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE:	☐Y ☐N ☐NA ☑NE
6.	SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE:	☐Y ☐N ☐NA ☑NE
7.	SAMPLE SPLIT WITH PERMITTEE:	☐Y ☐N ☐NA ☑NE
8.	CHAIN-OF-CUSTODY PROCEDURES EMPLOYED:	☐Y ☐N ☐NA ☑NE
9.	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:

1.	SWPPP UPDATED AS NEEDED:__ DATE OF LAST UPDATE:	☐Y ☐N ☐NA ☑NE
2.	SITE MAP INCLUDING ALL DISCHARGES AND SURFACE WATERS:	☐Y ☐N ☐NA ☑NE
3.	POLLUTION PREVENTION TEAM IDENTIFIED:	☐Y ☐N ☐NA ☑NE
4.	POLLUTION PREVENTION TEAM PROPERLY TRAINED:	☐Y ☐N ☐NA ☑NE
5.	LIST OF POTENTIAL POLLUTANT SOURCES:	☐Y ☐N ☐NA ☑NE
6.	LIST OF POTENTIAL SOURCES AND PAST SPILLS AND LEAKS:	☐Y ☐N ☐NA ☑NE
7.	ALL NON-STORM WATER DISCHARGES ARE AUTHORIZED:	☐Y ☐N ☐NA ☑NE
8.	LIST OF STRUCTURAL BMPS:	☐Y ☐N ☐NA ☑NE
9.	LIST OF NON-STRUCTURAL BMPS:	☐Y ☐N ☐NA ☑NE
10.	BMPS PROPERLY OPERATED AND MAINTAINED:	☐Y ☐N ☐NA ☑NE
11.	INSPECTIONS CONDUCTED AS REQUIRED:	☐Y ☐N ☐NA ☑NE

FLOW CALCULATION SHEET

Date: **05-02-2013**   Time: **1015**

Head in Inches: **7.25**   Feet: **.604**

Type & Size of Primary Flow Measurement Device: **18" parshall flume**

Name & Model of Secondary Flow Measurement Device: **Wedco Panel View Plus 700**

Date of last Calibration of Secondary Flow Device**: 4-24-2013**

Recorded Flow at Date & Time Listed Above: **1.81 mgd**   (Facility Flow Meter)

Calculated Flow at Date & Time Listed Above: **1.79 mgd**

(Flow is calculated using flow charts in: ISCO Open Channel Flow Measurement Handbook-5th Edition)

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

$$\% \text{ Error} = \frac{1.81 - 1.79}{1.79} \times 100$$

% Error = _____ X 100

% Error = _____ X 100

% Error = **1.1** %

Comments: **OK, < 10**

DMR Calculation Check

Reporting Period: From   **2013**   **3**   **01**   To **2013** **3**   **31**

                         Year   **Month**   **Day**   **Year** **Month** **Day**

Parameter Checked: **CBOD5**

	Loading Mass Mo. Avg. - lbs/day	Concentration Monthly Mo. Avg. - mg/l	7-day Avg. - mg/l
Reported Value:	38.2	2.80	3.45
Calculated Value:	38.2	2.80	3.45
Permit Value:	200.2	10	15

If calculated value does not equal reported value, explain: **Values are equal.**

Plant effluent

Outfall 001 and receiving stream

New generator capable of powering all treatment units during power outage