

# ADEQ

ARKANSAS  
Department of Environmental Quality

March 10, 2014

Sam Zehtaban  
City of Jacksonville  
248 Cloverdale Road  
Jacksonville, AR 72076

RE: Cypress Road Pump Station Compliance Inspection  
AFIN: 60-00543 NPDES Permit No.: AR0041335

Dear Mr. Zehtaban,

On February 28, 2014, due to a complaint, I performed 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. No violations were observed during this inspection.

Should you have any questions, feel free to contact me at 501-683-0827 or you may e-mail me at [mcadoo@adeq.state.ar.us](mailto:mcadoo@adeq.state.ar.us).

Sincerely,



Erica McAdoo  
District 9 Field Inspector  
Water Division



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	4	1	3	3	5	11	12	1	4	0	2	2	8	17	18	V	19	S	20	1	
Remarks																													
6	0	-	0	0	5	4	3																						
Inspection Work Days				Facility Evaluation Rating				BI		QA		-----Reserved-----																	
67				69	70		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 Jacksonville Waste Water Cypress Road Waste Water Pump Station Intersection of Cypress Dr. and Oakridge Rd., Jacksonville</b>	Entry Time/Date <b>2/28/14 1120</b>	Permit Effective Date <b>11/01/12</b>
	Exit Time/Date <b>2/28/14 1140</b>	Permit Expiration Date <b>10/31/17</b>
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) N/A	Other Facility Data <b>Major Municipal</b>	
Name, Address of Responsible Official/Title/Phone and Fax Number <b>Sam Zehtaban Jacksonville WW Utility 248 Cloverdale Road JACKSONVILLE, 72076</b>	Contacted Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
PDS # <b>076429</b>		

## 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
N	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		Other:

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

No violations were observed during this inspection.

Name(s) and Signature(s) of Inspector(s) <b>Erica McAdoo</b> 	Agency/Office/Telephone/Fax <b>AR Dept. of Environmental Quality North Little Rock</b>	Date <b>2/28/14</b>
Signature of Reviewer <b>Jason Bolenbaugh</b> 	Agency/Office/Phone and Fax Numbers	Date

<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: Cypress Road Waste Water Pump Station Intersection of Cypress Dr. and Oakridge Rd., Jacksonville	
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
<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 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 type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" 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 type="checkbox"/> NA <input checked="" 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:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED: <u>No Signage</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
SCADA SYSTEM	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE