 A R K A N S A S Department of Environmental Quality	WATER DIVISION INSPECTION REPORT				
	AFIN: 12-00029	PERMIT #: AR0022381	DATE: 2/17/2016		
	COUNTY: 12 Cleburne	PDS #: 089663	MEDIA: WN		
	GPS LAT:	LONG:	LOCATION: N/A		
FACILITY INFORMATION		INSPECTION INFORMATION			
NAME: Heber Springs Wastewater Treatment Plant LOCATION: 1174 Bypass Rd CITY: Heber Springs, AR		FACILITY TYPE: 1 - Municipal INSPECTOR ID#: 84022 S - State FACILITY EVALUATION RATING: 3 - Satisfactory INSPECTION TYPE: SSO/Collection System			
RESPONSIBLE OFFICIAL		DATE(S): 2/17/2016 ENTRY TIME: 08:30 EXIT TIME: 14:30 PERMIT EFFECTIVE DATE: 3/1/2013 PERMIT EXPIRATION DATE: 2/28/2018			
NAME / TITLE: Kent Latch / General Manager COMPANY: Heber Springs Water and Sewer Commission MAILING ADDRESS: 1108 West Front Street CITY, STATE, ZIP: Heber Springs AR 72543 PHONE & EXT. / FAX: 501-362-3422 / EMAIL: kent@heberspringswater.com		FAYETTEVILLE SHALE RELATED: N FAYETTEVILLE SHALE VIOLATIONS: N			
CONTACTED DURING INSPECTION: No		INSPECTION PARTICIPANTS			
		NAME/TITLE/PHONE/FAX/EMAIL/ETC.: Joey Massey/Chief Operator (Lic# 008421) District 2 Water Inspector Cody Wallace			
AREA EVALUATIONS (S=Satisfactory, M=Marginal, U=Unsatisfactory, N=Not Applicable/Evaluated)					
N	PERMIT	N	FLOW MEASUREMENT	N	STORMWATER
N	RECORDS/REPORTS	N	LABORATORY	N	FACILITY SITE REVIEW
S	OPERATION & MAINTENANCE	N	EFFLUENT/RECEIVING WATER	N	SELF-MONITORING PROGRAM
N	SAMPLING	N	SLUDGE HANDLING/DISPOSAL	N	PRETREATMENT
**	OTHER:				
SUMMARY OF FINDINGS					
No violations were noted during the inspection.					
GENERAL COMMENTS					
On Wednesday, Feb 17, 2016 an inspection was conducted of the City's collection system with the above-mentioned inspection participants. The inspection consisted of a site assessment of six (6) lift stations and a review of the Department's online SSO Report for permit AR0022381.					
Site assessment: All lift stations visited were in a secure manner with locked components. The lift stations are checked on a Monday and Friday schedule, and four problematic lift stations are inspected daily. The City has two portable generators with two different sized motors (3 phase and 440). Also, the City has a vac-tron for emptying lift stations and delivering the contents to a manhole located prior to the preliminary of the treatment plant. The City may want to consider permanent generators at the problematic lift stations. Also, major areas of concern for I&I should be addressed.					
Online SSO reports: The City reported six (6) SSOs for 2014 and four (4) SSOs for 2015 (see Figures 2 - 3).					

INSPECTOR'S SIGNATURE: <i>Kerri McCabe</i>	Kerri McCabe	DATE: 3/14/2016
SUPERVISOR'S SIGNATURE: <i>Jason R. Bolenbaugh</i>	Jason Bolenbaugh	DATE: 3/15/2016

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 to lift stations -> force -> WWTP		
POPULATION SERVED/NUMBER OF RESIDENTIAL AND COMMERCIAL CONNECTIONS: Population of about 8000 people with 2990 residential connections and 250 commercial connections.		
FEET OF SEWER SYSTEM: About 305,551 feet of gravity sewer and 30,053 feet of force mains.		
AGE OF SYSTEM: 75 years to newer		
DOES THE SYSTEM EXPERIENCE PROBLEMS DURING DRY OR WET WEATHER (EXPLAIN): System experiences I&I during heavy rain events.	<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): Reported with monthly DMRs; 24-hr online reporting.	<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 STATE" (LIST DATE AND LOCATION OF EACH): See Figure 2 -3; six (6) SSOs for 2014 and four (4) SSOs for 2015.	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
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: 28	NUMBER WITH BACKUP POWER: Two (2) portable generators; two different sized motors	
HOW OFTEN ARE PUMP STATIONS INSPECTED/MONITORED: Mondays and Fridays; four problematic lift stations 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: Identify problem, fix it, remove solids, disinfect area, and report to ADEQ; endangerment to public is near building and endangerment to the environment if discharges to waters of the State.		
NUMBER OF PUMP STATIONS VISITED DURING INSPECTION (SEE ATTACHED CHECKLISTS FOR EACH): Six (6)		
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: South Ridge (Lift Station V) at Bypass Rd/Sage Brush Way (35.491592, -91.999226)	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL (75%) <input checked="" type="checkbox"/> COMMERCIAL (25%) <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: Two (2)	NUMBER OPERATIONAL: Two (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	
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.): Submerged	<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: Outside	<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: Outside	<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: Low	<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: City has two (2) portable generators for hookups at lift stations.	<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: Audio and visual alarms.	<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

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: Brighton Pointe at Hwy 25B (35.519162, -92.012475)	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL (50%) <input checked="" type="checkbox"/> COMMERCIAL (50%) <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: Two (2)	NUMBER OPERATIONAL: Two (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	
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.): Submerged	<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: Outside	<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: Outside	<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: Low	<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: City has two (2) portable generators for hookups at lift stations.	<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: Visual alarm only.	<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

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: Scenic (Lift Station J) at Ford Case Rd & Scenic Ln (35.518850, -92.039069)	
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: Two (2)	NUMBER OPERATIONAL: Two (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	
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.) : Submerged	<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: Outside	<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: Outside	<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: Low	<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: City has two (2) portable generators for hookups at lift stations.	<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: Visual alarm only.	<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

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: Case Ford (Lift Station K2) at Case Ford Rd (35.526227, -92.040167)	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL (15%) <input checked="" type="checkbox"/> COMMERCIAL (85%) <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: Two (2)	NUMBER OPERATIONAL: Two (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.) : Submerged	<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: Outside	<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: Outside	<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: Moderate	<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: City has two (2) portable generators for hookups at lift stations.	<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: Visual alarm only.	<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

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: 25N at Hwy 25N (35.508682, -92.030653)	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL (25%) <input checked="" type="checkbox"/> COMMERCIAL (75%) <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: Two (2)	NUMBER OPERATIONAL: Two (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	
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.): Submerged	<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: Outside	<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: Outside	<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: Low	<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: City has two (2) portable generators for hookups at lift stations.	<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: Visual alarm only.	<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

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: Barnett (Lift Station B) at West Front Street (35.499813, -92.052135)	
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: Two (2)	NUMBER OPERATIONAL: Two (2); another pump on order
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	
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.): Submerged	<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: Outside	<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: Outside	<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: Moderate	<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: City has two (2) portable generators for hookups at lift stations.	<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: Audio and visual alarms that are float activated.	<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

Water Division Photographic Evidence Sheet

Location:	Heber Springs Wastewater Treatment Plant				
Photographer:	Cody Wallace	Date:	Feb 17, 2016	Time:	0958
Witness:	Kerri McCabe	Photo #:	1		
Description:	South Ridge Lift Station; emergency contact info and audio/visual alarm.				



Photographer:	Cody Wallace	Date:	Feb 17, 2016	Time:	0955
Witness:	Kerri McCabe	Photo #:	2		
Description:	South Ridge Lift Station wet well; solids low.				



Water Division Photographic Evidence Sheet

Location: Heber Springs Wastewater Treatment Plant			
Photographer: Cody Wallace	Date: Feb 17, 2016	Time: 0957	
Witness: Kerri McCabe		Photo #: 3	
Description: South Ridge Lift Station; pump run hours for both pumps.			



Photographer: Cody Wallace		Date: Feb 17, 2016	Time: 1011
Witness: Kerri McCabe			Photo #: 4
Description: Brighton Pointe Lift Station; visual alarm.			



Water Division Photographic Evidence Sheet

Location:	Heber Springs Wastewater Treatment Plant				
Photographer:	Cody Wallace	Date:	Feb 17, 2016	Time:	1008
Witness:	Kerri McCabe			Photo #:	5
Description:	Brighton Pointe Lift Station wet well; solids low.				



Photographer:	Cody Wallace	Date:	Feb 17, 2016	Time:	1019
Witness:	Kerri McCabe			Photo #:	6
Description:	Scenic Lift Station; visual alarm.				



Water Division Photographic Evidence Sheet

Location: Heber Springs Wastewater Treatment Plant			
Photographer: Cody Wallace	Date: Feb 17, 2016	Time: 1020	
Witness: Kerri McCabe		Photo #: 7	
Description: Scenic Lift Station wet well; solids low.			



Photographer: Cody Wallace		Date: Feb 17, 2016	Time: 1026
Witness: Kerri McCabe			Photo #: 8
Description: Case Ford Lift Station; visual alarm.			



Water Division Photographic Evidence Sheet

Location: Heber Springs Wastewater Treatment Plant			
Photographer: Cody Wallace	Date: Feb 17, 2016	Time: 1024	
Witness: Kerri McCabe		Photo #: 9	
Description: Case Ford Lift Station wet well; solids moderate.			



Photographer: Cody Wallace		Date: Feb 17, 2016	Time: 1025
Witness: Kerri McCabe			Photo #: 10
Description: Case Ford Lift Station; pump run hours of both pumps.			



Water Division Photographic Evidence Sheet

Location:	Heber Springs Wastewater Treatment Plant				
Photographer:	Cody Wallace	Date:	Feb 17, 2016	Time:	1034
Witness:	Kerri McCabe			Photo #:	11
Description:	25N Lift Station; visual alarm.				



Photographer:	Cody Wallace	Date:	Feb 17, 2016	Time:	1034
Witness:	Kerri McCabe			Photo #:	12
Description:	25N Lift Station wet well; solids low.				



Water Division Photographic Evidence Sheet

Location:	Heber Springs Wastewater Treatment Plant				
Photographer:	Cody Wallace	Date:	Feb 17, 2016	Time:	1042
Witness:	Kerri McCabe			Photo #:	13
Description:	Barnett Lift Station; audio and visual alarms.				



Photographer:	Cody Wallace	Date:	Feb 17, 2016	Time:	1042
Witness:	Kerri McCabe			Photo #:	14
Description:	Barnett Lift Station wet well; solids moderate.				



Figure 1. Google Earth image dated Nov 16, 2012 depicting the City of Heber Springs lift stations that were accessed during the inspection.

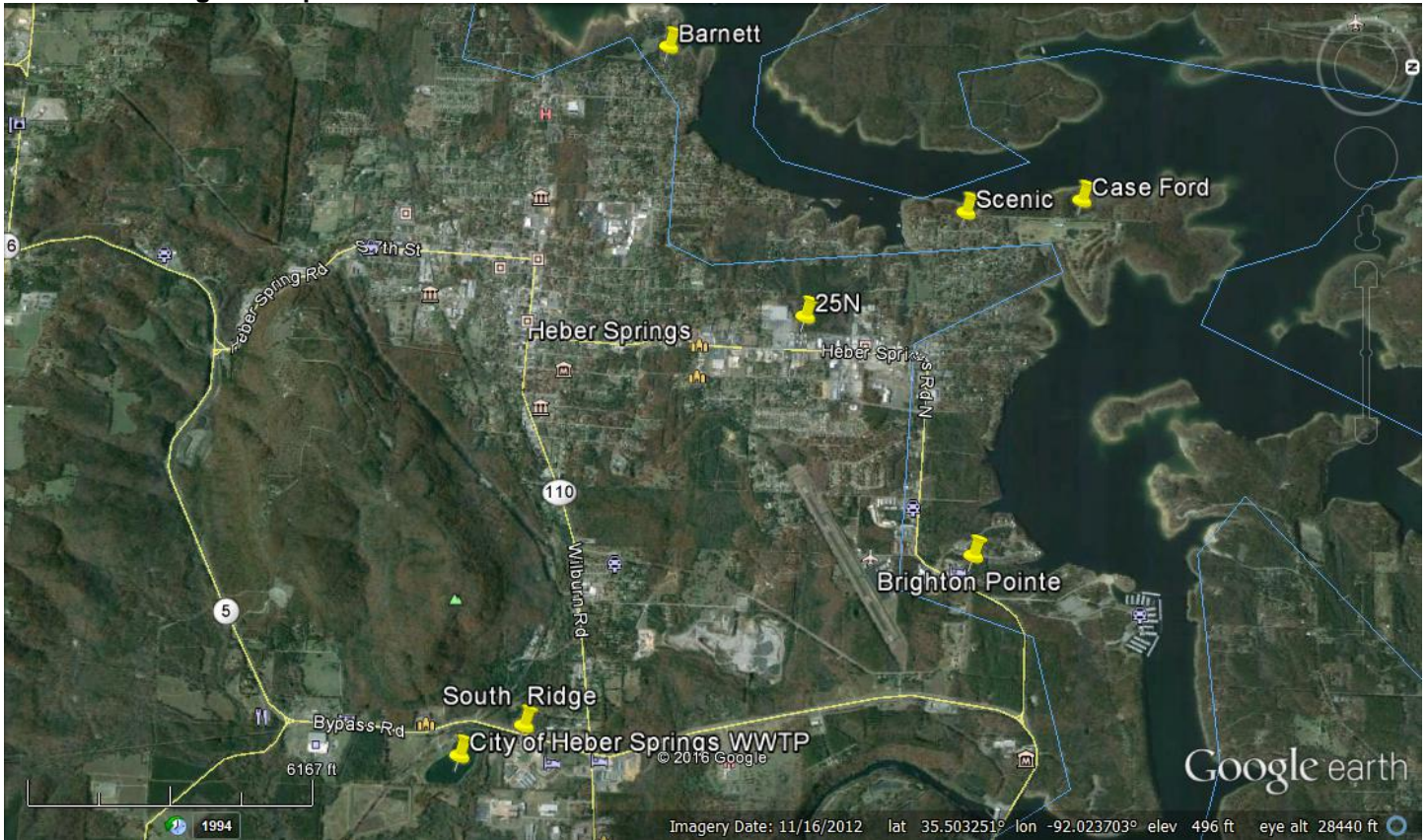


Figure 2. City of Heber Springs Sanitary Sewer Overflows (SSOs) reported to ADEQ in 2014.

Sanitary Sewer Overflow (SSO) Online Report (24-hour and Five Days)

NPDES Permit Number	Facility Name	Location	Date Overflow Started	Date Overflow Stopped	Date Reported	Volume (Gallons)	Stream	SSO	Bypass	Upset	Environmental Damage
AR0022381	HEBER SPRINGS, CITY OF	303 W. North Street - MH 85 - ditch	03/04/2014	03/04/2014	03/04/2014	500	ditch	Y			
Web Confirmation Number: c908cce0-d451-41c9-9718-0195a984e1b2											
AR0022381	HEBER SPRINGS, CITY OF	Lift Station M Highy 25 North	03/21/2014	03/21/2014	03/24/2014			Y			
Web Confirmation Number: c88a87f5-0ecb-494b-9fc4-3b82b1c22ef0											
AR0022381	HEBER SPRINGS, CITY OF	First & Walnut - MH - open field overflow	05/13/2014	05/13/2014	05/13/2014	1000		Y			
Web Confirmation Number: 42e366fc-d427-4d69-88aa-6464af75d0df											
AR0022381	HEBER SPRINGS, CITY OF	805 Dogwood Trail #577	06/02/2014	06/02/2014	06/03/2014	500	Ditch	Y			
Web Confirmation Number: e7cf52b0-f874-4501-af5b-a955d44ac961											
AR0022381	HEBER SPRINGS, CITY OF	Lift Station M 2539 Hwy 25 N	08/22/2014	08/22/2014	08/22/2014	50	Ground Surface	Y			
Web Confirmation Number: 11c03531-3ab5-4d3b-9470-64824a5e025d											
AR0022381	HEBER SPRINGS, CITY OF	Between cye circle and murray lane	12/16/2014	12/16/2014	12/16/2014	400	ground surface	Y			
Web Confirmation Number: 222ba558-4095-4c81-9211-84ed745c213e											

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Inspection Report: **Heber Springs Wastewater Treatment Plant, AFIN: 12-00029, Permit #: AR0022381**
Figure 3. City of Heber Springs Sanitary Sewer Overflows (SSOs) reported to ADEQ in 2015.

Sanitary Sewer Overflow (SSO) Online Report (24-hour and Five Days)

NPDES Permit Number	Facility Name	Location	Date Overflow Started	Date Overflow Stopped	Date Reported	Volume (Gallons)	Stream	SSO	Bypass	Upset	Environmental Damage
AR0022381	HEBER SPRINGS, CITY OF	Manhole 281@Hillcrest and Sunset	03/13/2015	03/13/2015	03/13/2015	100		Y			
Web Confirmation Number: 652f9121-e48a-4ffa-b5f8-7825172dc232											
AR0022381	HEBER SPRINGS, CITY OF	1st and Walnut	03/13/2015	03/14/2015	03/13/2015			Y			
Web Confirmation Number: cd489750-f6f8-4f2a-807d-3cd5c1817e39											
AR0022381	HEBER SPRINGS, CITY OF	Lift station on Rachel Lane	08/04/2015	08/04/2015	08/04/2015	500		Y			
Web Confirmation Number: 7db2fb07-6a7f-41e2-a604-e9c7f8cece88											
AR0022381	HEBER SPRINGS, CITY OF		12/28/2015	12/28/2015	12/28/2015	1000	Ground Surface	Y			
Web Confirmation Number: 8664d754-68ff-4c4b-be0c-aafd5aa755a6											

Recs Found: 4 << >> Page 1 / 1 Records Per Page: 20 Export...

[Download a zipped copy of the full Access database \(NPDES_SSO_web.zip - Approximate file size 3.01 MB\)](#)
 Note: Data current as of 02/28/2016