

ADEQ

ARKANSAS
Department of Environmental Quality

June 5, 2020

David Green, Utilities Manager
City of Arkadelphia
PO Box 495
Arkadelphia, AR 71923

RE: Arkadelphia WWTP Inspections (Clark Co)
AFIN: 10-00463 NPDES Permit No.: AR0020605
ARR000190

Dear Mr. Green:

On May 13, 2020, I performed a Compliance Evaluation Inspection, an SSO/Collection System Inspection, and an Industrial Stormwater 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. A copy of each of the inspection reports is enclosed for your records.


Please refer to the “Summary of Findings” section of each of the attached inspection reports and provide a written response for each violation that was noted. This response should be mailed to the attention of the Office of Water Quality (OWQ) Compliance Branch at the address at the bottom of this 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 19, 2020**.

If I can be of any assistance, please contact me at youngm@adeq.state.ar.us or (501) 837-2073.

Sincerely,



Michael Young
District 8 Inspector
Office of Water Quality

 A R K A N S A S Department of Environmental Quality		WATER DIVISION INSPECTION REPORT				
		AFIN: 10-00463		PERMIT #: AR0020605		DATE: 5/13/2020
		COUNTY: 10 Clark			PDS #: 112080	MEDIA: WN
		GPS LAT: 34.084117 LONG: -93.051534 LOCATION: Entrance				
FACILITY INFORMATION			INSPECTION INFORMATION			
NAME: Arkadelphia WWTP LOCATION: South 3rd Street and Open Banks Road CITY: Arkadelphia, AR 71923			FACILITY TYPE: 1 - Municipal INSPECTOR ID#: 101531 S - State			
RESPONSIBLE OFFICIAL NAME / TITLE: David Green / Utilities Manager COMPANY: City of Arkadelphia MAILING ADDRESS: PO Box 495 CITY, STATE, ZIP: Arkadelphia AR 71923 PHONE & EXT. / FAX: 870-246-5863 / 870-246-9546 EMAIL: david.green@arkadelphia.gov CONTACTED DURING INSPECTION: No			FACILITY EVALUATION RATING: 2 - Marginal		INSPECTION TYPE: Compliance Evaluation	
			DATE(S): 5/13/2020 7/12/2018	ENTRY TIME: 11:00	EXIT TIME: 14:11	PERMIT EFFECTIVE DATE: 11/1/2017 PERMIT EXPIRATION DATE: 10/31/2022
			FAYETTEVILLE SHALE RELATED: N			
			FAYETTEVILLE SHALE VIOLATIONS: N			
			INSPECTION PARTICIPANTS			
			NAME/TITLE/PHONE/FAX/EMAIL/ETC.: Christi Daniel/Operator and Lab Tech(Lic. #: 007392)/870-246-0697/christi.daniel@arkadelphia.gov David Thomason/Operator (Lic. #001842)/870-264-5863			
AREA EVALUATIONS						
(S=Satisfactory, M=Marginal, U=Unsatisfactory, N=Not Applicable/Evaluated)						
S	PERMIT	S	FLOW MEASUREMENT	S	STORMWATER	
S	RECORDS/REPORTS	S	LABORATORY	S	FACILITY SITE REVIEW	
M	OPERATION & MAINTENANCE	S	EFFLUENT/RECEIVING WATER	S	SELF-MONITORING PROGRAM	
S	SAMPLING	S	SLUDGE HANDLING/DISPOSAL	S	PRETREATMENT	
**	OTHER:					
SUMMARY OF FINDINGS						
<p>1.) There is excessive vegetation in the aerated, pretreatment lagoon (see Photos 1-3) and the aquaculture pond (see Photos 11-13). This is a violation of permit condition Part III. (B.) (1.) (A.).</p> <p>2.) Composite sampling is being completed as a time-weighted collection and not a flow-weighted collection. This is a violation of permit conditions Part II. (8.) (B.) (4.) (a.) and Part IV. (8.).</p> <p>3.) There was no thermometer in the composite sampler (see Photo 24) to monitor the temperature to maintain a 0-6° C for proper preservation. This is a violation of permit condition Part III. (C.) (3.).</p>						

GENERAL COMMENTS

On May 13, 2020, I performed an inspection at the City of Arkadelphia WWTP with the above participants in attendance. City of Arkadelphia operates a treatment plant with a design consisting of an aerated industrial pretreatment lagoon, followed by three oxidation lagoons, followed by an aquaculture pond with an aeration cell, followed by disinfection through hypochlorite bleach and dechlorination using sodium bisulfite, flow monitoring through a rectangular weir with end contractions and totalizer, and discharge from Outfall 001 to the Ouachita River (see Figure 1). Sample collection and analysis is completed by City of Arkadelphia for all parameters except Whole Effluent Toxicity (WET) Testing. This inspection consisted of a facility inspection, laboratory inspection, and records review.

Facility Inspection:

Operator David Thomason explained that there is currently no industrial process wastewater treated in the aerated industrial pretreatment lagoon and that domestic waste from the industrial park is the majority of the discharges when there is no stormwater. At the time of inspection, there was an intruding cover of Water Hyacinth (*Eichhornia crassipes*) in the pond and other reed plants were established (see Photos 1-2). There was a steady discharge from the aerated industrial pretreatment lagoon (see Photo 3) that was being routed to the primary oxidation lagoon. At the main lift station, there is an automatic bar screen (see Photo 4) and the water is pumped to the primary oxidation lagoon (see Photos 5-6). From the primary lagoon, water gravity flows to the second lagoon (see Photos 7-8) and then to the third lagoon (see Photo 9). From the third lagoon, water gravity flows to the aquaculture pond, which had excessive vegetation on the surface and outside of the vegetation cells (see Photos 10-13). Water discharges from the aquaculture pond to the chlorine contact chamber (see Photo 14) and the water is injected with liquid hypochlorite bleach and allowed to have contact time in the contact chamber (see Photos 15-16). Flow is measured through a rectangular weir with end contractions and a totalizer (see Photo 17), and the treated effluent is dechlorinated using sodium bisulfite prior to the sampling point (see Photo 18). I observed the tanks and feeding system for the bleach (see Photos 19-21) and observed the totalizer (see Photo 22). This facility documents the instantaneous and totalized flow daily (see Photo 23), and I observed the refrigerated composite sample (see Photo 24), which lacked a thermometer and was incapable of performing a flow-weighted composite. Mr. Thomason and I walked to the Outfall 001 discharge point at the Ouachita River and observed a large concrete pipe submerged under the water (see Photos 25-26).


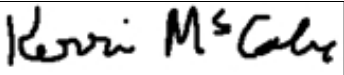
Laboratory Inspection:

Prior to the facility inspection, I observed the methods utilized to analyze wastewater samples for City of Arkadelphia. Christi Daniel, operator and lab tech, performs all analyses on wastewater for the City of Arkadelphia. I observed the calibration records for pH (see Photo 27) and the calibration sheet for the Dissolved Oxygen (DO) meter (see Photo 28), which contained all the required information. A field meter is used for DO measurements at the sampling point for Outfall 001, and a separate desktop DO meter is used for the Biochemical Oxygen Demand (BOD5) analysis (see Photo 29). Filter paper (see Photo 30), drying ovens (see Photo 31-32), desiccant (see Photo 33), and weights (see Photos 34-35) were all in good condition and in compliance with the analytical method. Temperature is monitored in the BOD5 cooler (see Photo 36) and the fecal coliform bath (see Photo 37) using a digital thermometer that is replaced annually.

Records Review:

Collection records for samples provide a good chain of custody (COC) and analysis records also contained all the required information (see Photos 38-40). Additionally, all the totals tabulated on the spreadsheets for the facility are correct, and the information reviewed in NetDMR did not have any inconsistencies.

Note: This facility was inspected on July 12, 2018; however, no report was drafted. This CEI documents current conditions and replaces the observations made during the 2018 inspection.

INSPECTOR'S SIGNATURE:  Michael Young	DATE: 6/3/2020
SUPERVISOR'S SIGNATURE:  Kerri McCabe	DATE: 6/3/2020

SECTION A: PERMIT VERIFICATION	
PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. ALL DISCHARGES ARE PERMITTED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
SECTION B: RECORDKEEPING AND REPORTING EVALUATION	
RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRS:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
a. DATES AND TIME(S) OF SAMPLING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
b. EXACT LOCATION(S) OF SAMPLING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
c. NAME OF INDIVIDUAL PERFORMING SAMPLING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
d. ANALYTICAL METHODS AND TECHNIQUES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
e. RESULTS OF CALIBRATIONS:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
f. RESULTS OF ANALYSES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
g. DATES AND TIMES OF ANALYSES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
h. NAME OF PERSON(S) PERFORMING ANALYSES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
SECTION C: OPERATIONS AND MAINTENANCE	
TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. TREATMENT UNITS PROPERLY OPERATED:	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
2. TREATMENT UNITS PROPERLY MAINTAINED:	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
5. ALL NEEDED TREATMENT UNITS IN SERVICE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
8. OPERATION AND MAINTENANCE MANUAL AVAILABLE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
9. STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
10. PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
11. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
12. IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
13. HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
14. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
15. IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE

SECTION D: SAMPLING	
PERMITTEE SAMPLING MEETS PERMIT REQUIREMENTS	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
3. FLOW PROPORTIONED SAMPLES OBTAINED WHEN REQUIRED BY PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. SAMPLING AND ANALYSES COMPLETED ON PARAMETERS SPECIFIED IN PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
5. SAMPLING AND ANALYSES PERFORMED AT FREQUENCY SPECIFIED IN PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
6. SAMPLE COLLECTION PROCEDURES ADEQUATE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
a. SAMPLES REFRIGERATED DURING COMPOSITING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
b. PROPER PRESERVATION TECHNIQUES USED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
c. CONTAINERS AND SAMPLE HOLDING TIMES CONFORM TO 40 CFR 136:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
7. IF MONITORING IS PERFORMED MORE OFTEN THAN REQUIRED ARE RESULTS REPORTED ON THE DMR:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
SECTION E: FLOW MEASUREMENT	
PERMITTEE FLOW MEASUREMENT MEETS PERMIT REQUIREMENTS	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED: <u>Yes</u> TYPE OF DEVICE: <u>Rectangular weir with end contractions</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. FLOW MEASURED AT EACH OUTFALL AS REQUIRED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
3. SECONDARY INSTRUMENTS (TOTALIZERS, RECORDERS, ETC.) PROPERLY OPERATED AND MAINTAINED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. CALIBRATION FREQUENCY ADEQUATE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
5. RECORDS MAINTAINED OF CALIBRATION PROCEDURES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
6. CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
7. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
8. FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
9. HEAD MEASURED AT PROPER LOCATION:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
SECTION F: LABORATORY	
PERMITTEE LABORATORY PROCEDURES MEET PERMIT REQUIREMENTS	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(B) FOR SLUDGES) :	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
3. SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. QUALITY CONTROL PROCEDURES ADEQUATE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
5. DUPLICATE SAMPLES ARE ANALYZED \geq 10% OF THE TIME:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
6. SPIKED SAMPLES ARE ANALYZED \geq 10% OF THE TIME:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
7. COMMERCIAL LABORATORY USED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
a. LAB NAME: <u>Arkansas Analytical</u>	
b. LAB ADDRESS: <u>Little Rock</u>	
c. PARAMETERS PERFORMED: <u>WET Testing</u>	
8. BIOMONITORING PROCEDURES ADEQUATE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
a. PROPER ORGANISMS USED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
b. PROPER DILUTION SERIES FOLLOWED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
c. PROPER TEST METHODS AND DURATION:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
d. RETESTS AND/OR TRE PERFORMED AS REQUIRED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

SECTION G: EFFLUENT/RECEIVING WATERS OBSERVATIONS							
BASED ON VISUAL OBSERVATIONS ONLY						<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE	
DETAILS:							
OUTFALL #:	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOATING SOLIDS	COLOR	OTHER
001	No	No	No	No	No	Colorless	--
SECTION H: SLUDGE DISPOSAL							
SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS						<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE	
DETAILS:							
1. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY:						<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE	
2. SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503:						<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> 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						<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
DETAILS:							
1. SAMPLES OBTAINED THIS INSPECTION:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
2. TYPE OF SAMPLE: <input type="checkbox"/> GRAB:__ <input type="checkbox"/> COMPOSITE:__ METHOD:__ FREQUENCY:							
3. SAMPLES PRESERVED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
4. FLOW PROPORTIONED SAMPLES OBTAINED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
5. SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
6. SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
7. SAMPLE SPLIT WITH PERMITTEE:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
SECTION J: STORM WATER POLLUTION PREVENTION PLAN							
STORM WATER MANAGEMENT MEETS PERMIT REQUIREMENTS						<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
DETAILS:							
1. SWPPP UPDATED AS NEEDED:__ DATE OF LAST UPDATE:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
2. SITE MAP INCLUDING ALL DISCHARGES AND SURFACE WATERS:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
3. POLLUTION PREVENTION TEAM IDENTIFIED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
4. POLLUTION PREVENTION TEAM PROPERLY TRAINED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
5. LIST OF POTENTIAL POLLUTANT SOURCES:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
6. LIST OF POTENTIAL SOURCES AND PAST SPILLS AND LEAKS:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
7. ALL NON-STORM WATER DISCHARGES ARE AUTHORIZED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
8. LIST OF STRUCTURAL BMPS:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
9. LIST OF NON-STRUCTURAL BMPS:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
10. BMPS PROPERLY OPERATED AND MAINTAINED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
11. INSPECTIONS CONDUCTED AS REQUIRED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	

FLOW CALCULATION SHEET

Date: **05/13/2020** Time: **13:03**

Head in Inches: **5.64** Feet: **0.47**

Type & Size of Primary Flow Measurement Device:

Name & Model of Secondary Flow Measurement Device: **Siemens HydroRanger 200**

Date of last Calibration of Secondary Flow Device: **4-20-2020**

Recorded Flow at Date & Time Listed Above: **1.998** (Facility Flow Meter)

Calculated Flow at Date & Time Listed Above: **1.885**

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

% Error =	Recorded Value	-	Calculated Value	X 100
	Calculated Value			

% Error =	1.998	-	1.885	X 100
	1.885			

% Error =	0.113	X 100
	1.885	

% Error =	0.05	X 100
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% Error =	5	%
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Comments: **Within 10%**

DMR Calculation Check

Reporting Period: From 2020 02 01 To 2020 02 29
 Year Month Day Year Month Day

Parameter Checked: TSS

	Loading Mass Mo. Avg. - lbs/day	Concentration Monthly Mo. Avg. - mg/l	7-day Avg. - mg/l
Reported Value:	<u>212.1</u>	<u>6.3</u>	<u>10.0</u>
Calculated Value:	<u>212.1</u>	<u>6.3</u>	<u>10.0</u>
Permit Value:	<u>2252.0</u>	<u>90</u>	<u>135</u>

If calculated value does not equal reported value, explain:

Equal

DMR Calculation Check

Reporting Period: From 2020 03 01 To 2020 03 31
 Year Month Day Year Month Day

Parameter Checked: BOD5

	Loading Mass Mo. Avg. - lbs/day	Concentration Monthly Mo. Avg. - mg/l	7-day Avg. - mg/l
Reported Value:	<u>400</u>	<u>16</u>	<u>16.2</u>
Calculated Value:	<u>400</u>	<u>16</u>	<u>16.2</u>
Permit Value:	<u>751</u>	<u>30</u>	<u>45</u>

If calculated value does not equal reported value, explain:

Equal.

Water Division Photographic Evidence Sheet

Location:	Arkadelphia WWTP		
Photographer:	Michael Young	Date:	05/13/2020
Time:	13:19	Witness:	
Photo #:	1		

Description: **Industrial waste pretreatment aerated lagoon. Note excessive vegetation.**



Photographer:	Michael Young	Date:	05/13/2020
Time:	13:20	Witness:	
Photo #:	2		

Description: **Industrial waste pretreatment aerated lagoon. Note excessive vegetation.**



Water Division Photographic Evidence Sheet

Location:	Arkadelphia WWTP				
Photographer:	Michael Young	Date:	05/13/2020	Time:	13:20
Witness:				Photo #:	3

Description: **Discharge from industrial waste pretreatment aerated lagoon.**



Photographer:	Michael Young	Date:	05/13/2020	Time:	12:23
Witness:				Photo #:	4

Description: **Automatic bar screen and collector.**



Water Division Photographic Evidence Sheet

Location:	Arkadelphia WWTP		
Photographer:	Michael Young	Date:	05/13/2020
Time:	12:45	Witness:	
Photo #:	5	Description:	
Primary oxidation lagoon and point of influent discharge.			



Photographer:	Michael Young	Date:	05/13/2020
Time:	12:45	Witness:	
Photo #:	6	Description:	
Primary oxidation lagoon and point of influent discharge.			



Water Division Photographic Evidence Sheet

Location:	Arkadelphia WWTP		
Photographer:	Michael Young	Date:	05/13/2020
Time:	12:49	Witness:	
Photo #:	7	Description: Secondary oxidation lagoon.	



Photographer:	Michael Young	Date:	05/13/2020
Time:	12:49	Witness:	
Photo #:	8	Description: Secondary oxidation lagoon.	



Water Division Photographic Evidence Sheet

Location:	Arkadelphia WWTP		
Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	12:51
		Photo #:	9
Description:	Third oxidation lagoon.		



Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	12:51
		Photo #:	10
Description:	Aquaculture pond levee between second lagoon.		



Water Division Photographic Evidence Sheet

Location:	Arkadelphia WWTP				
Photographer:	Michael Young	Date:	05/13/2020	Time:	12:52
Witness:				Photo #:	11

Description: **Aquaculture pond with excessive vegetation.**



Photographer:	Michael Young	Date:	05/13/2020	Time:	12:52
Witness:				Photo #:	12

Description: **Aquaculture pond with excessive vegetation.**



Water Division Photographic Evidence Sheet

Location:	Arkadelphia WWTP				
Photographer:	Michael Young	Date:	05/13/2020	Time:	12:58
Witness:				Photo #:	13
Description:	Aerated aquaculture pond with excessive vegetation.				



Photographer:	Michael Young	Date:	05/13/2020	Time:	12:58
Witness:				Photo #:	14
Description:	Discharge from aquaculture pond to chlorine contact chamber.				



Water Division Photographic Evidence Sheet

Location:	Arkadelphia WWTP		
Photographer:	Michael Young	Date:	05/13/2020
Time:	13:01	Witness:	
Photo #:	15	Description: Chlorine contact chamber.	



Photographer:	Michael Young	Date:	05/13/2020
Time:	13:01	Witness:	
Photo #:	16	Description: Chlorine contact chamber.	



Water Division Photographic Evidence Sheet

Location:	Arkadelphia WWTP		
Photographer:	Michael Young	Date:	05/13/2020
Time:	13:03	Witness:	
Photo #:	17		
Description:	Primary flow device and staff gage.		



Photographer:	Michael Young	Date:	05/13/2020
Time:	13:03	Witness:	
Photo #:	18		
Description:	Dechlorination through sodium bisulfate injection and step post-aeration.		



Water Division Photographic Evidence Sheet

Location:	Arkadelphia WWTP		
Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	13:09
		Photo #:	19
Description:	Containers of hypochlorite solution bleach.		



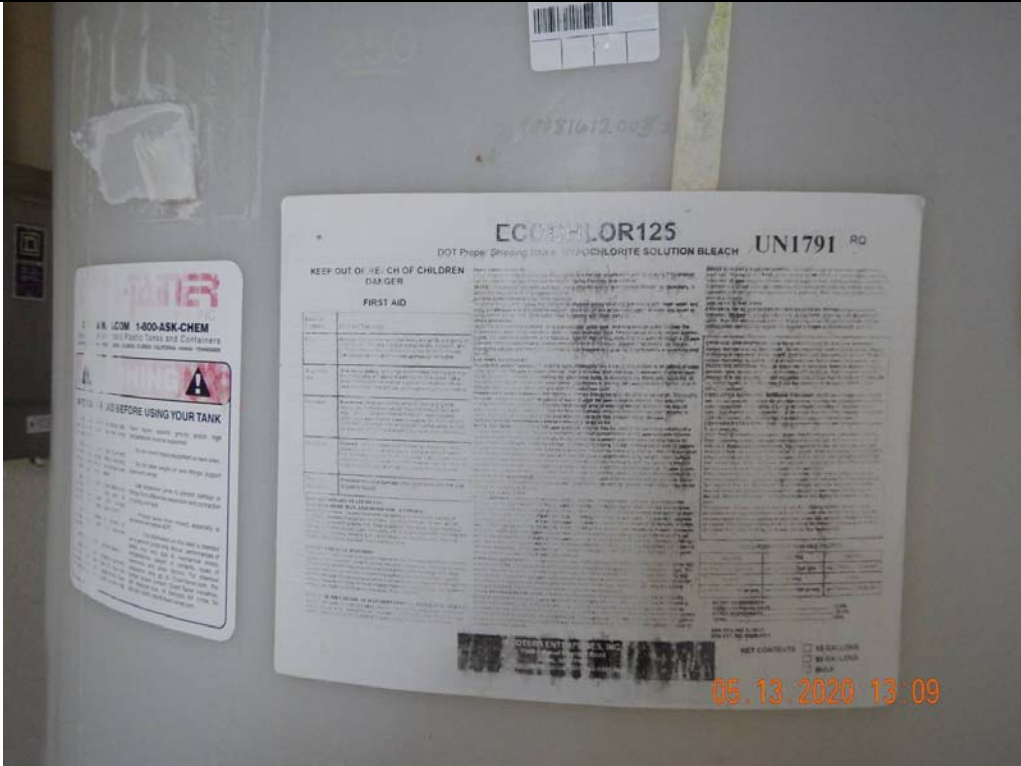
Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	13:09
		Photo #:	20
Description:	Feeding system for hypochlorite bleach solution.		



Water Division Photographic Evidence Sheet

Location:	Arkadelphia WWTP		
Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	13:09
		Photo #:	21

Description: **Label for hypochlorite solution bleach.**



Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	13:04
		Photo #:	22

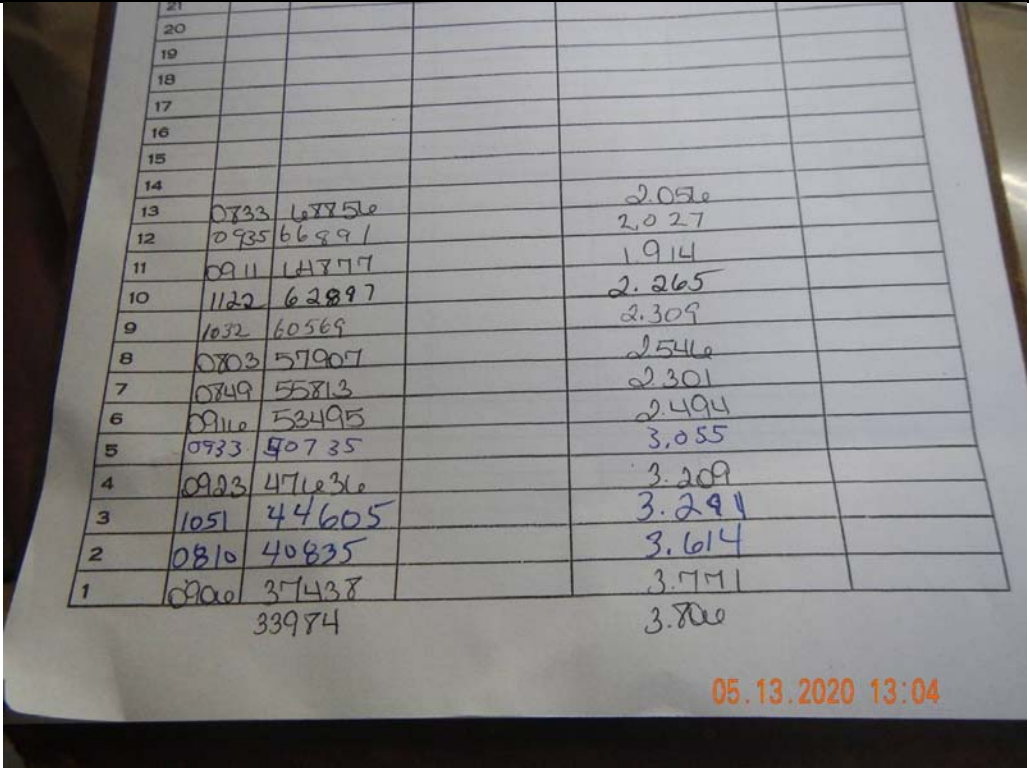
Description: **Totalizer recently calibrated and in service.**



Water Division Photographic Evidence Sheet

Location:	Arkadelphia WWTP		
Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	13:04
		Photo #:	23



Description: **Flow is recorded daily from the totalizer as well as an instantaneous flow measurement.**



Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	13:06
		Photo #:	24

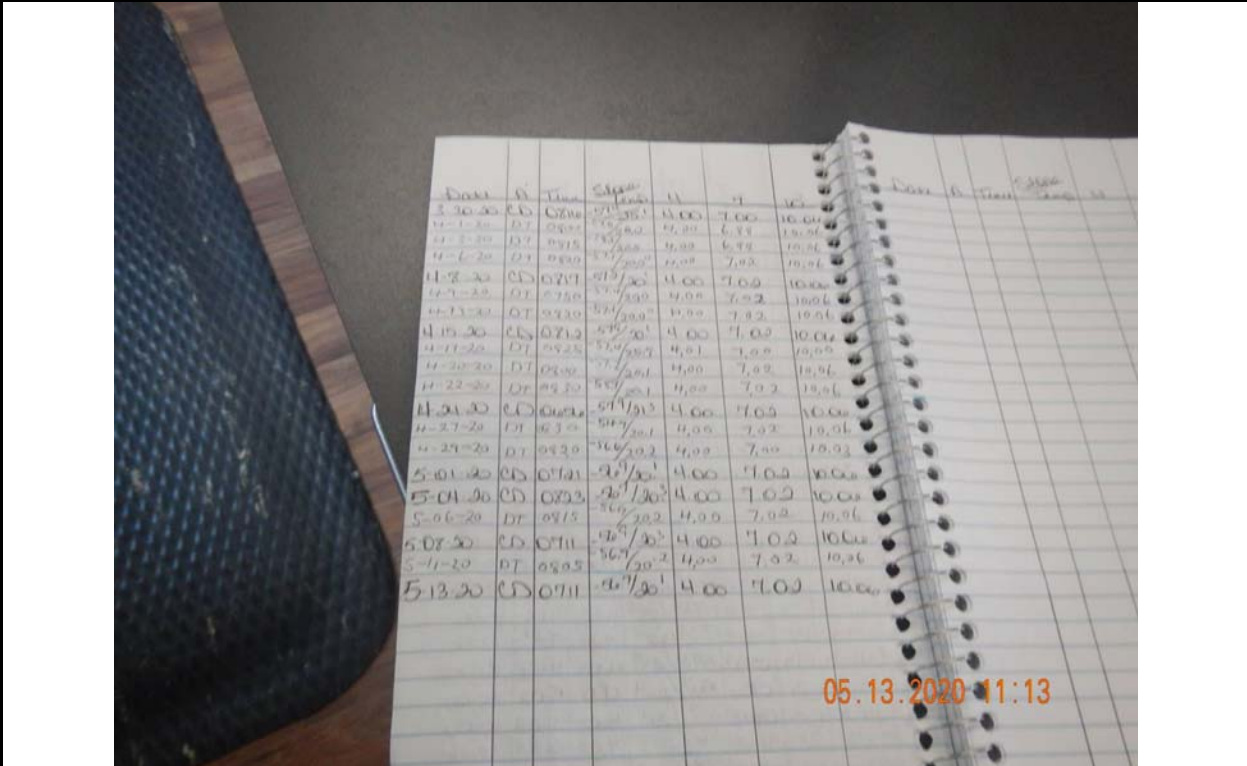
Description: **Collection for composite sampler. Note there is no thermometer in refrigerated sampler.**



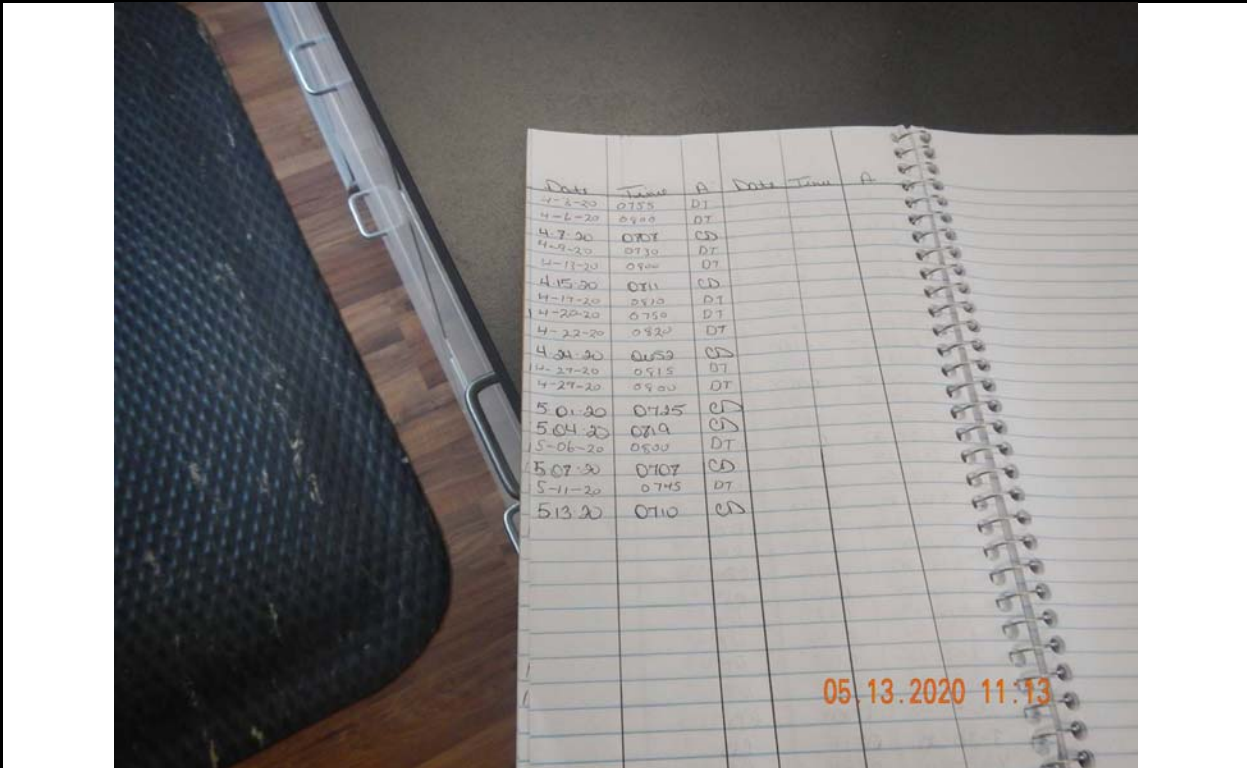
Water Division Photographic Evidence Sheet			
Location:	Arkadelphia WWTP		
Photographer:	Michael Young	Date:	05/13/2020
Time:		Photo #:	25
Witness:			25
Description:	Outfall 001 discharge location in the Ouachita River.		
			
Photographer:	Michael Young	Date:	05/13/2020
Time:		Photo #:	26
Witness:			26
Description:	Outfall 001 discharge location in the Ouachita River.		
			

Water Division Photographic Evidence Sheet

Location:	Arkadelphia WWTP		
Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	11:13
Description:	Calibration records for pH meter.		

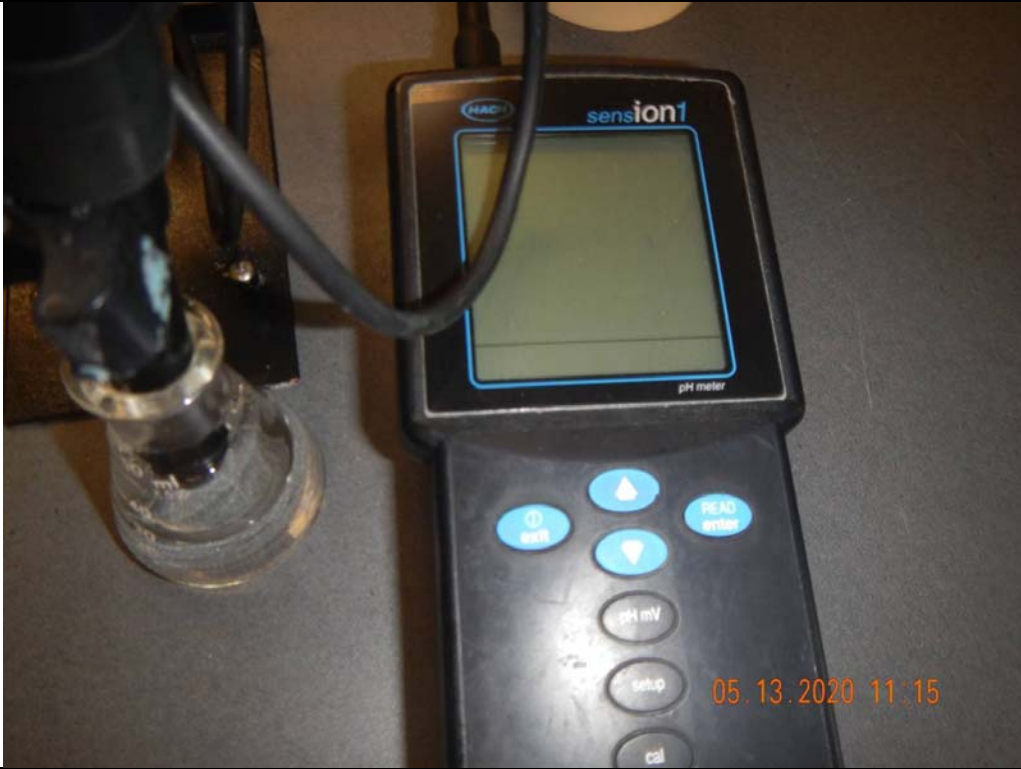


Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	11:13
Description:	Calibration records for DO meter.		



Water Division Photographic Evidence Sheet

Location:	Arkadelphia WWTP		
Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	11:15
		Photo #:	29
Description:	DO meter used for Biochemical Oxygen Demand (BOD) analysis.		



Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	11:23
		Photo #:	30
Description:	Filter paper used for Total Suspended Solids (TSS) analysis.		



Water Division Photographic Evidence Sheet

Location:	Arkadelphia WWTP		
Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	11:24
		Photo #:	31

Description: Temperature of oven used for drying the filter paper.



Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	11:24
		Photo #:	32

Description: Oven used for drying the filter paper.



Water Division Photographic Evidence Sheet

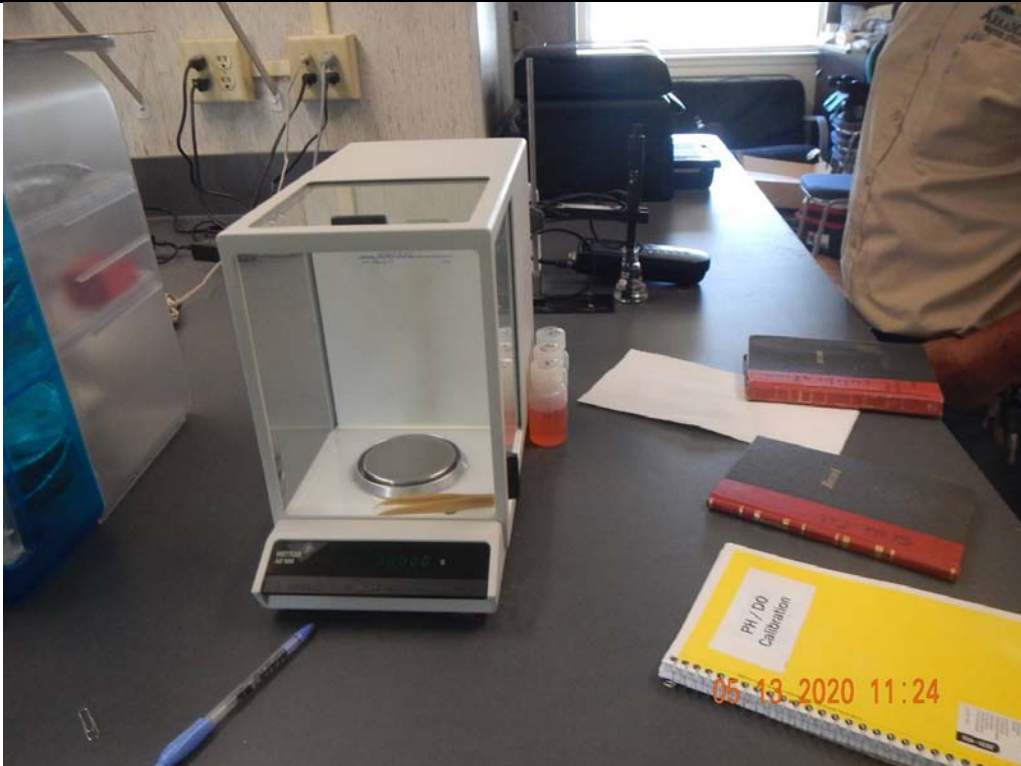
Location:	Arkadelphia WWTP		
Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	11:24
		Photo #:	33

Description: **Desiccant for TSS samples to be weighed.**



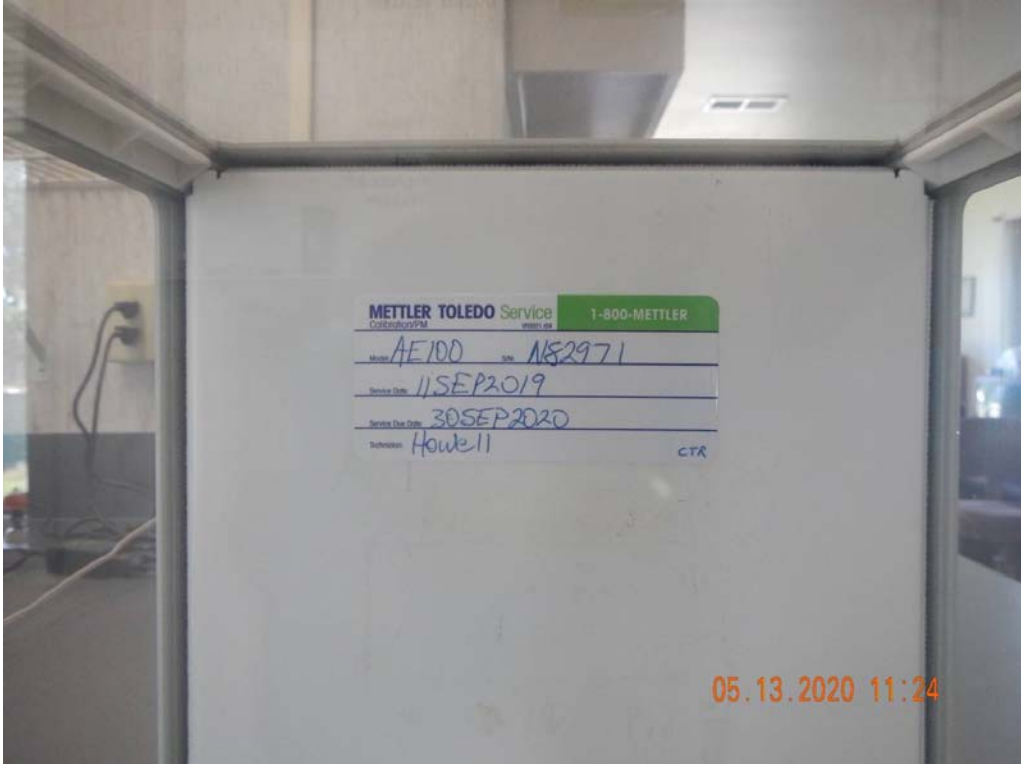
Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	11:24
		Photo #:	34

Description: **Weight balance for TSS samples.**



Water Division Photographic Evidence Sheet

Location:	Arkadelphia WWTP		
Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	11:24
		Photo #:	35
Description:	Balance is due for calibration September 2020.		

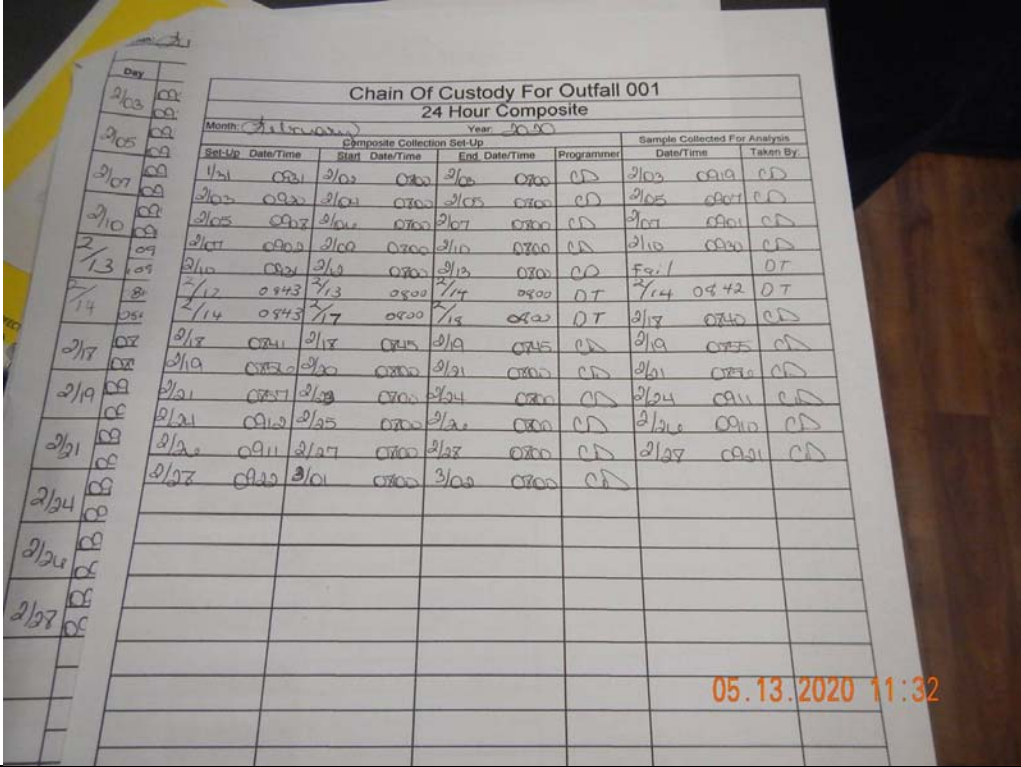


Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	11:26
		Photo #:	36
Description:	Thermometer inside of the BOD refrigerator.		



Water Division Photographic Evidence Sheet

Location:	Arkadelphia WWTP		
Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	11:32
		Photo #:	39
Description:	Collection records for composite samples serve as a Chain of Custody (COC).		



Photographer:	Michael Young	Date:	05/13/2020
Witness:		Time:	11:33
		Photo #:	40
Description:	Collection records for composite samples serve as a COC.		

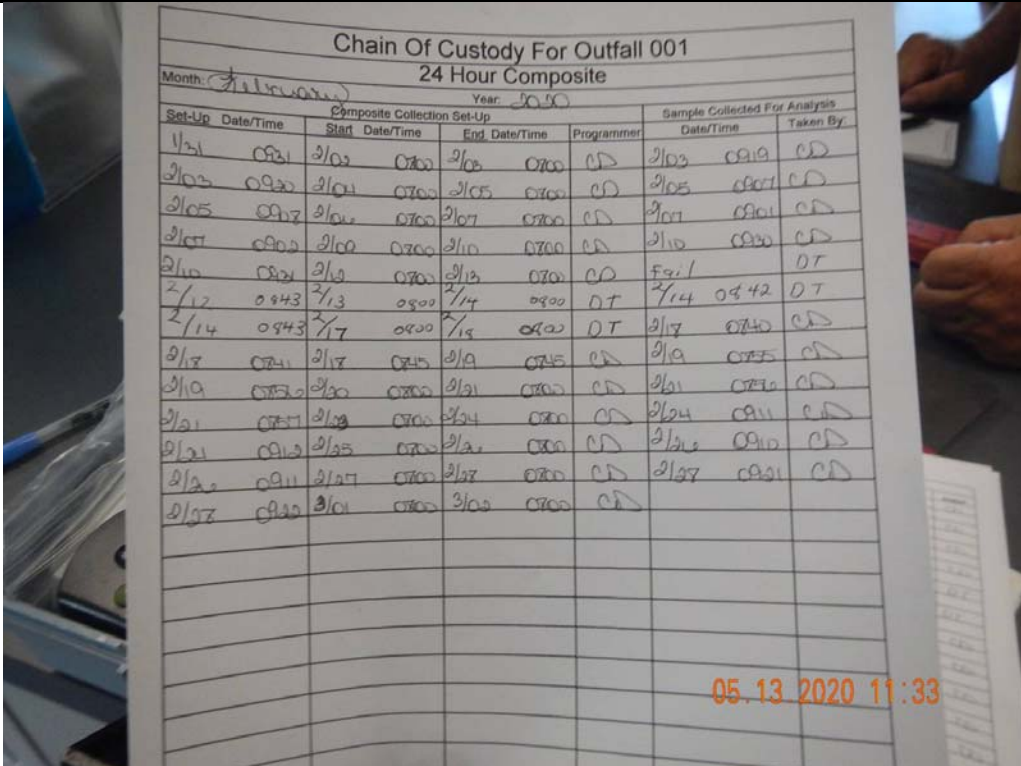
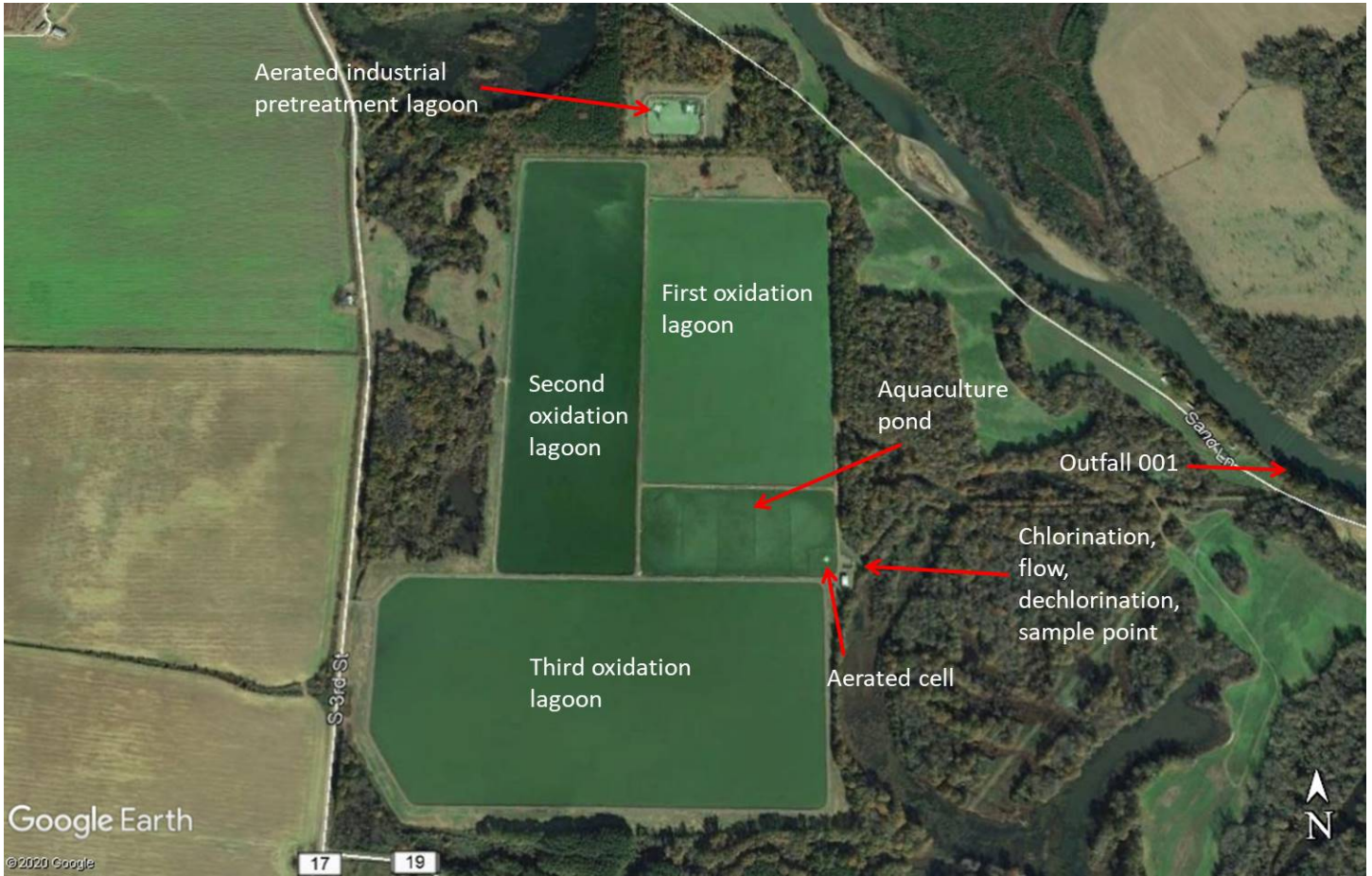


Figure 1. Overview of City of Arkadelphia WWTP with location of treatment components and discharge point.



June 15, 2020

Michael Young
District 8 Inspector
5301 Northshore Drive
North Little Rock, AR 72118

RE: Arkadelphia WWTP Inspection Response/ Permit No. AR0020605

Dear Mr. Young;

I have read and reviewed your reports of the facility from your inspection May 13th and have the following response for the violations listed in each "Summary of Findings" section.

Lagoons/Lab Inspection Report

1. There is excessive vegetation in the aerated, pretreatment lagoon and the aquaculture pond. This is a violation of permit condition Part III. (B.) (1.) (A.).

We are currently in the process of treating the excessive vegetation in the lagoon with the herbicide Rodeo. The first treatment had been applied prior to your May 13th inspection. Our Notice of Coverage states a start date of 4/01/2020 with an approximate end date of 10/31/2020. Each treatment is applied in accordance to the instructions on the herbicide label and all state laws and regulations.

2. Composite sampling is being completed as a time-weighted collection and not a flow-weighted collection. This is a violation of permit conditions Part II. (8.) (B.) (4.) (a.) and Part IV. (8.).

We have requested a technician from Instrument and Supply to inspect and conclude as to why the refrigerated sampler freezes up whenever a flow weighted sample is in the process of being collected. The sampler will be repaired as soon as possible.

3. There was no thermometer in the composite sampler to monitor the temperature to maintain a 0-6°C for proper preservation. This is a violation of permit condition Part III. (C.) (3.).

Not long before the inspection an issue with the primary sampler caused the switch to a back-up sampler and not placing the thermometer in the new sampler was just an oversight that has been corrected.

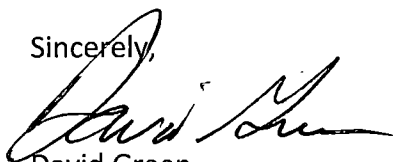
South Pump Station Inspection Report

1. Materials from the drain box for the bar screen were removed and placed on ground and drain is clogged. This is a violation of permit condition Part 1.7.

The drain has been unclogged. We will monitor the area more closely in the future as well as speaking with the Sanitation Department about collecting the contents of the dumpster more frequently to prevent overflow onto the ground.

If you have any questions please don't hesitate to contact me.

Sincerely,



David Green

Water & Sewer Utilities Manager

City of Arkadelphia

PO Box 495

Arkadelphia, AR 71923

870-246-5863

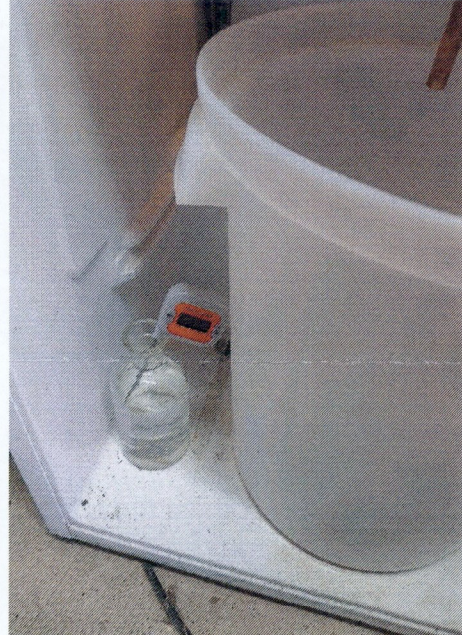
david.green@arkadelphia.gov

cd

1) Lagoons



3)



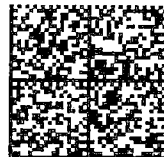
1) South Pump Station





700 Clay Street • P. O. Box 495
Arkadelphia, Arkansas 71923

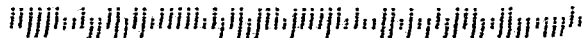
LITTLE ROCK
AR 722
18 JUN '20
PM 4 L



02 1P
\$ 000.50⁰
0001609054 JUN 18 2020
MAILED FROM ZIP CODE 71923

Michael Young
District 8 Inspector
5301 Northshore Drive
North Little Rock, AR 72118

72118-532801



ADEQ

ARKANSAS
Department of Environmental Quality

July 2, 2020

David Green, Utilities Manager
City of Arkadelphia
PO Box 495
Arkadelphia, AR 71923

RE: City of Arkadelphia - Response to Inspections (Clark Co)
AFIN: 10-00463 **NPDES Permit No.: AR0020605**
ARR000190

Dear Mr. Green:

I have reviewed the response pertaining to my May 13, 2020 inspections of the City of Arkadelphia WWTP. The information provided sufficiently addresses the violations referenced in my inspection reports. At this time, the Department has no further comment concerning these particular inspections. 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) 837-2073 or you may e-mail me at youngm@adeq.state.ar.us.

Sincerely,



Michael Young
District 8 Inspector
Office of Water Quality