 <b>ENVIRONMENTAL QUALITY</b>	<b>OFFICE OF WATER QUALITY</b>				
	<b>INSPECTION REPORT</b>				
	AFIN: 26-00145	PERMIT #: AR0033880	DATE: 6/23/2021		
	COUNTY: 26 Garland	PDS #: 117421	MEDIA: WN		
GPS LAT: 34.450316 LONG: -93.019033 LOCATION: General Area					
<b>FACILITY INFORMATION</b>		<b>INSPECTION INFORMATION</b>			
NAME: <b>City of Hot Springs POTW</b> LOCATION: <b>320 Davidson Drive</b> CITY: <b>Hot Springs, AR 71901</b>		FACILITY TYPE: <b>1 - Municipal</b> INSPECTOR ID#: <b>34689 S - State</b> FACILITY EVALUATION RATING: <b>2 - Marginal</b> INSPECTION TYPE: <b>SSO/Collection System</b> DATE(S): <b>6/23/2021</b> ENTRY TIME: <b>10:00</b> EXIT TIME: <b>15:00</b> PERMIT EFFECTIVE DATE: <b>9/1/2018</b> PERMIT EXPIRATION DATE: <b>8/31/2023</b>			
<b>RESPONSIBLE OFFICIAL</b>		<b>FAYETTEVILLE SHALE RELATED: N</b>			
NAME: / TITLE <b>Mr. Monty Ledbetter / Utilities Director</b> COMPANY: <b>City of Hot Springs POTW</b> MAILING ADDRESS: <b>780 Adams Street</b> CITY, STATE, ZIP: <b>Hot Springs AR 71901</b> PHONE & EXT: / FAX: <b>501-651-7730 /</b> EMAIL: <b>mledbetter@cityhs.net</b> <b>hmauldin@cityhs.net</b> <b>dburton@cityhs.net</b>		<b>FAYETTEVILLE SHALE VIOLATIONS: N</b>			
CONTACTED DURING INSPECTION: <b>No</b>		<b>INSPECTION PARTICIPANTS</b>			
		NAME/TITLE/PHONE/FAX/EMAIL/ETC.: <b>Mr. Danny Burton/ Lift Station Manager/ 501-321-6200</b>			
<b>AREA EVALUATIONS</b>					
(S=Satisfactory, M=Marginal, U=Unsatisfactory, N=Not Applicable/Evaluated)					
<b>S</b>	PERMIT	<b>N</b>	FLOW MEASUREMENT	<b>N</b>	STORMWATER
<b>N</b>	RECORDS/REPORTS	<b>N</b>	LABORATORY	<b>N</b>	FACILITY SITE REVIEW
<b>N</b>	OPERATION & MAINTENANCE	<b>N</b>	EFFLUENT/RECEIVING WATER	<b>N</b>	SELF-MONITORING PROGRAM
<b>N</b>	SAMPLING	<b>N</b>	SLUDGE HANDLING/DISPOSAL	<b>N</b>	PRETREATMENT
<b>M</b>	OTHER: <b>Lift Station Inspections</b>				
<b>SUMMARY OF FINDINGS</b>					
1. At the time of inspection, 4 of 6 lift stations had a pump out of service for repair/re-work. This is a violation of Part III.B.1.A of the permit.					
<b>GENERAL COMMENTS</b>					
<u>Introduction</u>					
I inspected on June 23, 2021. The inspection included an inspection of five stations. Mr. Danny Burton, Lift Station Manager, represented the facility. Hot Springs operates a POTW and collection system with 84 lift stations and > 3,000 grinder pumps. The lift station inspections consisted of a demonstration of pump operability, alarm system, evaluation of high levels or grease in wells, and checking for evidence of recent SSOs.					
<u>Lift Station Inspections</u>					
At the time of inspection, 4 of 6 lift stations had a pump out for repair/re-work. A single pump was out at each of the following: Malvern Highway lift station, the Gulpha lift station, the Catherine Heights lift station, and Matthews Lane lift station. I also observed lime on the ground at a manhole near the Gulpha lift station indicating a recent SSO.					

INSPECTOR'S SIGNATURE: <i>Travis Harmon</i>	Travis Harmon	DATE: 7/8/2021
SUPERVISOR'S SIGNATURE: <i>Kerri McCabe</i>	Kerri McCabe	DATE: 9/13/2021

<b>COLLECTION SYSTEM INSPECTION AND OVERALL RATING</b>		<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: <b><u>Domestic/Commercial/Industrial Users: clay/PVC pipe and force mains.</u></b>		
POPULATION SERVED/NUMBER OF RESIDENTIAL AND COMMERCIAL CONNECTIONS: <b><u>23,000</u></b>		
FEET OF SEWER SYSTEM: <b><u>2.2 Million linear feet</u></b>		
AGE OF SYSTEM: <b><u>&gt; 50 years; force main within last few years</u></b>		
DOES THE SYSTEM EXPERIENCE PROBLEMS DURING DRY OR WET WEATHER (EXPLAIN): <b><u>I&amp;I</u></b>	<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): <b><u>Online SSO reporting</u></b>	<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): <b><u>Viewed in SSO report database.</u></b>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
<b>PUMP STATIONS</b>		<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: <b><u>84</u></b>	NUMBER WITH BACKUP POWER: <b><u>Some on-site/portable available</u></b>	
HOW OFTEN ARE PUMP STATIONS INSPECTED/MONITORED: <b><u>Twice per week</u></b>		
ARE MAINTENANCE RECORDS AND/OR OPERATOR LOGS KEPT: <b><u>Yes</u></b>		
ADEQUATE INVENTORY OF SPARE PARTS: <b><u>Yes</u></b>		
TYPE OF REMOTE ELECTRONIC MONITORING USED (I.E. SCADA OR AUTO DIALERS): <b><u>SCADA</u></b>		
BRIEF SUMMARY OF EMERGENCY PROCEDURES: <b><u>Report, pump truck, lime or disinfect</u></b>		
NUMBER OF PUMP STATIONS VISITED DURING INSPECTION (SEE ATTACHED CHECKLISTS FOR EACH): <b><u>6</u></b>		
<b>SATELLITE SYSTEMS</b>		<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
DOES THE COLLECTION SYSTEM RECEIVE FLOW FROM SATELLITE SYSTEMS: <b><u>No satellite systems</u></b>		
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:		

<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: <b>Fairgrounds</b>	
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>	
<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA	
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAGE OF UNRELATED EQUIPMENT:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GATES/DOORS/HATCHES/LIDS/ETC. LOCKED TO PREVENT UNAUTHORIZED ACCESS AND/OR TAMPERING:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
WET WELLS, SUMPS AND PITS ADEQUATELY COVERED, GRATED OR OTHERWISE PROTECTED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ELECTRICAL CONTROLS COVERS CONDUIT AND EQUIPMENT PROPERLY INSTALLED AND MAINTAINED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GUARDS AND SHIELDS IN PLACE AROUND MOVING EQUIPMENT (BELTS, PULLEYS, DRIVESHAFTS, ETC.) :	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE VENTILATION TO PREVENT EXCESSIVE CONDENSATION AND/OR GASES AND FUMES:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE LIGHTING FOR ROUTINE INSPECTION/MAINTENANCE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SEALS, VALVES AND PACKING ADEQUATELY MAINTAINED TO PREVENT LEAKS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN WET WELLS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>BACKUP POWER AND ALARMS</b>	
<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:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED:	<input 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): <u>High levels, power failure</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

<b>PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)</b>	
<b>GENERAL INFORMATION AND OVERALL EVALUATION</b>	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: <b>Malvern Highway</b>	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: <u>2</u>	NUMBER OPERATIONAL: <u>1</u>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE: <u>One pump out for repair.</u>	<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 checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SEALS, VALVES AND PACKING ADEQUATELY MAINTAINED TO PREVENT LEAKS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN WET WELLS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>BACKUP POWER AND ALARMS</b>	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED:	<input 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): <u>High levels, power failure</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

<b>PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)</b>	
<b>GENERAL INFORMATION AND OVERALL EVALUATION</b>	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: <b>Gulpha</b>	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: <u>3</u>	NUMBER OPERATIONAL: <u>2</u>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE: <u>One pump out being re-worked</u>	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
EVIDENCE OF RECENT OVERFLOWS OR HIGH LEVELS: <u>Lime on ground at manhole</u>	<input checked="" type="checkbox"/> Y <input 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 checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SEALS, VALVES AND PACKING ADEQUATELY MAINTAINED TO PREVENT LEAKS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN WET WELLS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>BACKUP POWER AND ALARMS</b>	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED:	<input 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): <u>High levels, power failure</u>	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

<b>PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)</b>	
<b>GENERAL INFORMATION AND OVERALL EVALUATION</b>	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: <b>Catherine Heights</b>	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: <u>2</u>	NUMBER OPERATIONAL: <u>1</u>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE: <u>One pump out</u>	<input type="checkbox"/> S <input checked="" 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 checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SEALS, VALVES AND PACKING ADEQUATELY MAINTAINED TO PREVENT LEAKS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN WET WELLS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>BACKUP POWER AND ALARMS</b>	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED:	<input 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): <u>High levels, power failure</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

<b>PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)</b>	
<b>GENERAL INFORMATION AND OVERALL EVALUATION</b>	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: <u>Humphrey's Dairy</u>	
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>	
<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA	
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAGE OF UNRELATED EQUIPMENT:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GATES/DOORS/HATCHES/LIDS/ETC. LOCKED TO PREVENT UNAUTHORIZED ACCESS AND/OR TAMPERING:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
WET WELLS, SUMPS AND PITS ADEQUATELY COVERED, GRATED OR OTHERWISE PROTECTED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ELECTRICAL CONTROLS COVERS CONDUIT AND EQUIPMENT PROPERLY INSTALLED AND MAINTAINED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GUARDS AND SHIELDS IN PLACE AROUND MOVING EQUIPMENT (BELTS, PULLEYS, DRIVESHAFTS, ETC.) :	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE VENTILATION TO PREVENT EXCESSIVE CONDENSATION AND/OR GASES AND FUMES:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE LIGHTING FOR ROUTINE INSPECTION/MAINTENANCE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SEALS, VALVES AND PACKING ADEQUATELY MAINTAINED TO PREVENT LEAKS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN WET WELLS: <u>Grease</u>	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>BACKUP POWER AND ALARMS</b>	
<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:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED:	<input 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): <u>High levels, power failure</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE



<b>PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)</b>	
<b>GENERAL INFORMATION AND OVERALL EVALUATION</b>	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: <b>Matthews Lane; please note: camera didn't store photos of Matthews Lane lift station</b>	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: <u>2</u>	NUMBER OPERATIONAL: <u>1</u>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE: <u>One pump out. Mr. Burton reported it would be back in by next day.</u>	<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 checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SEALS, VALVES AND PACKING ADEQUATELY MAINTAINED TO PREVENT LEAKS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN WET WELLS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>BACKUP POWER AND ALARMS</b>	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED:	<input 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): <u>High levels, power failure</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

**Office of Water Quality Photographic Evidence Sheet**

Location:	<b>City of Hot Springs POTW</b>		
Photographer:	<b>Travis Harmon</b>	Date:	<b>6/23/2021</b>
Time:	<b>1322</b>		Photo #:
Witness:	<b>None- No other regulatory personnel</b>		<b>1</b>
Description:	<b>View of Fairgrounds lift station.</b>		



Photographer:	<b>Travis Harmon</b>	Date:	<b>6/23/2021</b>
Time:	<b>1323</b>		Photo #:
Witness:	<b>None</b>		<b>2</b>
Description:	<b>View inside wet well.</b>		



**Office of Water Quality Photographic Evidence Sheet**

Location:	<b>City of Hot Springs POTW</b>		
Photographer:	<b>Travis Harmon</b>	Date:	<b>6/23/2021</b>
Witness:	<b>None</b>	Time:	<b>1333</b>
		Photo #:	<b>3</b>
Description:	<b>View of Malvern Highway lift station. One pump out for repair.</b>		



Photographer:	<b>Travis Harmon</b>	Date:	<b>6/23/2021</b>
Witness:	<b>None</b>	Time:	<b>1336</b>
		Photo #:	<b>4</b>
Description:	<b>View inside wet well.</b>		



**Office of Water Quality Photographic Evidence Sheet**

Location:	<b>City of Hot Springs POTW</b>		
Photographer:	<b>Travis Harmon</b>	Date:	<b>6/23/2021</b>
Witness:	<b>None</b>	Time:	<b>1350</b>
		Photo #:	<b>5</b>
Description:	<b>View of Gulpha lift station. One pump out for re-work.</b>		



Photographer:	<b>Travis Harmon</b>	Date:	<b>6/23/2021</b>
Witness:	<b>None</b>	Time:	<b>1350</b>
		Photo #:	<b>6</b>
Description:	<b>Generator on-site.</b>		



**Office of Water Quality Photographic Evidence Sheet**

Location:	<b>City of Hot Springs POTW</b>		
Photographer:	<b>Travis Harmon</b>	Date:	<b>6/23/2021</b>
Witness:	<b>None</b>	Time:	<b>1352</b>
Description:	<b>View of control room.</b>	Photo #:	<b>7</b>



Photographer:	<b>Travis Harmon</b>	Date:	<b>6/23/2021</b>
Witness:	<b>None</b>	Time:	<b>1353</b>
Description:	<b>Bar screen at lift station.</b>	Photo #:	<b>8</b>



**Office of Water Quality Photographic Evidence Sheet**

Location:	<b>City of Hot Springs POTW</b>		
Photographer:	<b>Travis Harmon</b>	Date:	<b>6/23/2021</b>
Witness:	<b>None</b>	Time:	<b>1354</b>
		Photo #:	<b>9</b>
Description:	<b>View inside well.</b>		



Photographer:	<b>Travis Harmon</b>	Date:	<b>6/23/2021</b>
Witness:	<b>None</b>	Time:	<b>1346</b>
		Photo #:	<b>10</b>

Description: **View of MH 1750 near Gulpha lift station. City has constructed rock structure around manhole. Area is limed due to recent SSO. Lime visible on downhill side, upper right, toward Gulpha Creek.**



**Office of Water Quality Photographic Evidence Sheet**

Location:	<b>City of Hot Springs POTW</b>		
Photographer:	<b>Travis Harmon</b>	Date:	<b>6/23/2021</b>
Witness:	<b>None</b>	Time:	<b>1358</b>
		Photo #:	<b>11</b>
Description:	<b>View of Catherine Height's lift station. One pump out. Could not access wet well.</b>		



Photographer:	<b>Travis Harmon</b>	Date:	<b>6/23/2021</b>
Witness:	<b>None</b>	Time:	<b>1426</b>
		Photo #:	<b>12</b>
Description:	<b>View of Humphrey's Dairy lift station.</b>		



**Office of Water Quality Photographic Evidence Sheet**

Location:	<b>City of Hot Springs POTW</b>				
Photographer:	<b>Travis Harmon</b>	Date:	<b>6/23/2021</b>	Time:	<b>1427</b>
Witness:	<b>None</b>			Photo #:	<b>13</b>
Description:	<b>Humphrey's Dairy lift station wet well with grease.</b>				







# CITY OF HOT SPRINGS

Utilities Department

780 Adams Street

Hot Springs, Arkansas 71901

September 23, 2021

Mr. Travis Harmon, Inspector  
Arkansas Energy & Environment  
Office of Water Quality  
5301 Northshore Drive  
North Little Rock, Arkansas 72118

**RE: Response to Letter of September 14, 2021 Regarding June 23, 2021 Compliance Evaluation Inspection - City of Hot Springs POTW Inspections (Garland County) - AFIN: 26-00145 NPDES Permit No.: AR0033880 / ARR000059**

Dear Mr. Harmon,

On June 23, 2021 a Compliance Evaluation Inspection and Industrial Stormwater Inspection took place for NPDES Permit No. AR0033880 and Industrial Stormwater Permit No. ARR000059. In the Summary of Findings, the Inspection Report calls for responses to the following issues at the Davidson Drive Wastewater Treatment Plant.

**Finding:** Excessive algae and vegetative growth in were present in secondary clarifiers and sand filters.

**Response:** On July 19, 2021 Plant Operators removed the excessive algae and plant growth from the secondary treatment and sand filters.

**Finding:** Calibration of the effluent flowmeter (last calibrated on March 9, 2020) was overdue for the required annual calibration.

**Response:** The effluent flowmeter has be calibrated as of July 22, 2021 by Paul Wofford with Instrument & Supply.

---

The June 23 Report also notes that four of six lift stations inspected had pumps out of service, including:

- Malvern Highway Pump Station
- Catherine Heights Pump Station
- Gulpha Pump Station
- Matthews Lane Pump Station

Response: Pump No. 2 at the Malvern Highway Pump Station had been rewound and is back in service.

Pump No. 3 at the Gulpha Pump Station has been rewound and is back in service.

Pump No. 1 at the Catherine Heights Pump Station has had the seals repaired and is back in service.

Pump No. 1 at the Matthews Lane pump station was repaired and reinstalled on June 24, 2021. Two pumps have been functioning at the station since that date.

If you need further information, please let us know. Harold Mauldin, Facilities Operations Manager for the Davidson Drive Wastewater Treatment Plant is available at 501.262.1125 or by email at [hmauldin@cityhs.net](mailto:hmauldin@cityhs.net). Jeff Palmer, Lift Station Manager is available at 501.321.2120 or by email at [jpalmer@cityhs.net](mailto:jpalmer@cityhs.net). I can be reached at 501.651.7730 or by email at [mledbetter@cityhs.net](mailto:mledbetter@cityhs.net).

Cordially,



Monty Ledbetter  
Utilities Director

Cc: Bill Burrough, City Manager, City of Hot Springs  
Bobby Harris, Field Operations Manager, City of Hot Springs Utilities  
Harold Mauldin, Wastewater Facilities Operations Manager, City of Hot Springs Utilities  
Jeff Palmer, Wastewater Lift Stations Manager, City of Hot Springs Utilities

Attachment: Davidson Drive Wastewater Treatment Plant Photos

Davidson Drive Wastewater Treatment Plant Photos

---

## Davidson Drive Wastewater Treatment Plant Photos



Clarifier after cleaning



Effluent Meter Calibration  
July 22, 2021  
Instrument & Supply  
Paul Wofford

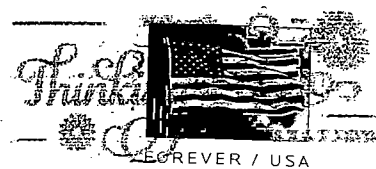


**City of Hot Springs  
Utilities Department**

Post Office Box 700  
Hot Springs National Park,  
Arkansas 71902

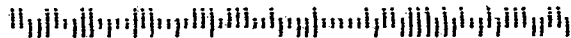
LITTLE ROCK AR 720

27 SEP 2021 PM 4 L



Mr. Travis Harmon, Inspector  
Arkansas Energy & Environment  
Office of Water Quality  
5301 Northshore Drive  
North Little Rock, Arkansas 72118

72118-531799





# ARKANSAS

## ENERGY & ENVIRONMENT

October 13, 2021

Monty Ledbetter, Utilities Director  
City of Hot Springs  
780 Adams Street  
Hot Springs, AR 71901

**RE: City of Hot Springs POTW - Response to Inspections (Garland Co)**  
**AFIN: 26-00145** **NPDES Permit No.: AR0033880**  
**ARR000059**

Dear Mr. Ledbetter:

I have reviewed the response pertaining to my June 23, 2021 inspections of the City of Hot Springs - Davidson POTW. The information provided sufficiently addresses the items 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 I require further information concerning this matter, I will contact you. Thank you for your attention to this matter. Should you have any questions please contact me at (501) 837-2070 or you may email me at [harmont@adeq.state.ar.us](mailto:harmont@adeq.state.ar.us).

Sincerely,

A handwritten signature in cursive script that reads "Travis Harmon".

Travis Harmon  
Inspector, DEQ - Office of Water Quality  
5301 Northshore Drive, North Little Rock, AR, 72118