



ARKANSAS

ENERGY & ENVIRONMENT

August 5, 2022

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

RE: City of Arkadelphia Inspection (Clark Co)
AFIN: 10-00463 NPDES Permit No.: AR0020605

Dear Mr. Green:

On June 9, 2022, I performed a Compliance Evaluation Inspection (CEI) 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 the inspection report is enclosed for your records.


No violations were noted at the time of the inspection. Please refer to the inspection report for any comments.

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

Sincerely,

A handwritten signature in black ink, appearing to read 'Michael Young'.

Michael Young
Inspector, Office of Water Quality
5301 Northshore Drive, North Little Rock, AR, 72118

 <p>ENVIRONMENTAL QUALITY</p>	OFFICE OF WATER QUALITY		
	AFIN: 10-00463 PERMIT #: AR0020605		DATE: 6/9/2022
	COUNTY: 10 Clark	PDS #: 121250	MEDIA: WN
	GPS LAT: 34.084117 LONG: -93.051534 LOCATION: Entrance		
FACILITY INFORMATION		INSPECTION INFORMATION	
NAME: City of Arkadelphia LOCATION: South 3rd Street and Open Banks Road CITY: Arkadelphia, AR		FACILITY TYPE: 1 - Municipal INSPECTOR ID#: 101531 S - State FACILITY EVALUATION RATING: 5 - Satisfactory INSPECTION TYPE: Compliance Evaluation	
RESPONSIBLE OFFICIAL		DATE(S): 6/9/2022 ENTRY TIME: 10:48 EXIT TIME: 11:55 PERMIT EFFECTIVE DATE: 11/1/2017 PERMIT EXPIRATION DATE: 10/31/2022	
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		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 Trey Butler/DEQ OWQ Inspector	
AREA EVALUATIONS			
(S=Satisfactory, M=Marginal, U=Unsatisfactory, N=Not Applicable/Evaluated)			
S	PERMIT	S	FLOW MEASUREMENT
S	RECORDS/REPORTS	S	LABORATORY
S	OPERATION & MAINTENANCE	S	EFFLUENT/RECEIVING WATER
S	SAMPLING	S	SLUDGE HANDLING/DISPOSAL
S	OTHER:	S	STORMWATER
			FACILITY SITE REVIEW
			SELF-MONITORING PROGRAM
			PRETREATMENT
SUMMARY OF FINDINGS			
<p>No violations observed at the time of inspection.</p> <p>Note: There is a small island of vegetation forming in oxidation Pond 2 (see Photos 26-27) that may need to be addressed in the future to prevent loss of water storage.</p>			

GENERAL COMMENTS


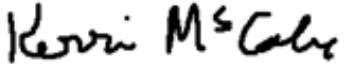
On June 9 2022, I performed an inspection at City of Arkadelphia wastewater treatment facility with the above participants in attendance. City of Arkadelphia operates a wastewater treatment facility with a design that consists of an aerated industrial pretreatment lagoon followed by a splitter box that allows water to enter either Oxidation Ponds 1, 2, or 3 (these ponds are not in series). Each oxidation pond can discharge to the aquaculture pond with an aeration cell with an option to add hydrogen peroxide (35%) when needed. Currently, this facility uses hypochlorite bleach as disinfection and following the chlorine contact chamber there is a rectangular weir with end contractions for flow measurement and natural post-aeration. Sample collection and analysis is performed entirely by City of Arkadelphia staff except WET testing, which is performed by Arkansas Analytical. This inspection consisted of a facility evaluation and a records review was performed by DEQ - OWQ - Enforcement Branch due to the requirements of an internal laboratory.

Facility Evaluation:

I evaluated the facility and obtained photos as I entered the main road and followed operator David Thomason. Oxidation Ponds 2 and 3 are in good condition with very little vegetation on the banks (see Photos 1-6). Dosing equipment for the hypochlorite bleach was in good condition (see Photo 7), and Mr. Thomason stated they had looked into other disinfection options such as paracetic acid (PAA). I reminded Mr. Thomason that any changes in treatment design would need to be approved by DEQ - OWQ - Permits Branch. I observed the aquaculture pond to contain good coverage of duckweed and some dying vegetation (see Photo 8). Mr. Thomason stated that there was a recent contracting of herbicide application to the aquaculture pond to kill undesired vegetation. At the discharge location to the chlorine contact chamber, there is an option to add 35% hydrogen peroxide (see Photos 8-10); and after the aquaculture pond, there is chlorine disinfection (see Photo 11-12) and a rectangular weir with end contractions (see Photo 13). Post-aeration occurs by the falling water and samples are collected at this location (see Photo 14). I observed a totalizer to be calibrated in 2022 (see Photo 15) and a paper graph (see Photo 16). We continued around the aquaculture pond (see Photos 17-18) and I observed oxidation pond one (see Photos 19-22) and stopped at the splitter box (see Photos 23-24). We continued to oxidation Pond 2 (see Photo 25) and I observed a small island forming in the pond (see Photos 26-27). Mr. Thomason stated they were in the planning phase of removing the vegetation and materials. We continued around oxidation Pond 2 and I did not observe any further issues (see Photos 28-31).

Records Review:

At the beginning of the inspection, I discussed the requirements of DEQ - OWQ - Enforcement Branch for internal laboratories with Christie Daniel. Ms. Daniel does primarily all of the lab preparation and analysis for the City of Arkadelphia and she was asked by OWQ - Enforcement Branch to submit lab information. Therefore, a records review was not asked for this inspection as the information submitted and reviewed by Enforcement Branch is the same information reviewed during the inspection.

INSPECTOR'S SIGNATURE:  Michael Young	DATE: 7/21/2022
SUPERVISOR'S SIGNATURE:  Kerri McCabe	DATE: 8/4/2022

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 checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. TREATMENT UNITS PROPERLY OPERATED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
2. TREATMENT UNITS PROPERLY MAINTAINED:	<input checked="" type="checkbox"/> S <input 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 checked="" 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 checked="" 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: <u>Siemens Hydromanager 200</u>	<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 only</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	N	N	N	N	N	Slight green	--
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: **06/09/2022** Time: **11:34**

Head in Inches: **10.6** Feet: **0.86**

Type & Size of Primary Flow Measurement Device: **1.5 foot rectangular weir with end contractions**

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

Date of last Calibration of Secondary Flow Device: **January 2022**

Recorded Flow at Date & Time Listed Above: **2.38** (Facility Flow Meter)

Calculated Flow at Date & Time Listed Above: **2.279**
 (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 =	2.38	-	2.279	X 100	
	2.279				

% Error =	0.101	X 100	
	2.279		

% Error =	0.04	X 100	
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% Error =	4	%	
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Comments: **Equal.**

Office of Water Quality Photographic Evidence Sheet

Location:	City of Arkadelphia		
Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:25
		Photo #:	1
Description:	Oxidation Pond 2 viewed from the southwest corner.		



Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:25
		Photo #:	2
Description:	Oxidation Pond 3 viewed from the northwest corner.		



Office of Water Quality Photographic Evidence Sheet

Location:	City of Arkadelphia		
Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:26
		Photo #:	3
Description:	View of oxidation Pond 3 from the north bank.		



Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:27
		Photo #:	4
Description:	Oxidation Pond 3 viewed from the north bank.		



Office of Water Quality Photographic Evidence Sheet

Location:	City of Arkadelphia		
Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:30
		Photo #:	5
Description:	Oxidation Pond 3 from the northeast corner.		



Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:30
		Photo #:	6
Description:	View of east bank of oxidation Pond 3 viewed from the northeast corner.		



Office of Water Quality Photographic Evidence Sheet

Location:	City of Arkadelphia		
Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:31
		Photo #:	7
Description:	Dosing machine for bleach disinfection.		



Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:31
		Photo #:	8
Description:	Aquaculture pond and aeration provided by floating aerators.		



Office of Water Quality Photographic Evidence Sheet

Location:	City of Arkadelphia		
Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:32
		Photo #:	9
Description:	Hydrogen peroxide (35%) used intermittently at the outfall.		



Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:32
		Photo #:	10
Description:	Effluent discharge to chlorine contact chamber.		



Office of Water Quality Photographic Evidence Sheet

Location:	City of Arkadelphia		
Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:32
		Photo #:	11
Description:	Chlorine contact chamber with bleach dosing.		



Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:32
		Photo #:	12
Description:	Chlorine contact chamber following the bleach dosing location.		



Office of Water Quality Photographic Evidence Sheet

Location:	City of Arkadelphia				
Photographer:	Michael Young	Date:	06/09/2022	Time:	11:33
Witness:	Trey Butler	Photo #:	13		
Description:	Rectangular weir with end contractions and staff gage. Note ultrasonic meter in photo.				



Photographer:	Michael Young	Date:	06/09/2022	Time:	11:33
Witness:	Trey Butler	Photo #:	14		
Description:	Sampling location and post-aeration for Outfall 001.				



Office of Water Quality Photographic Evidence Sheet

Location:	City of Arkadelphia		
Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:34
Description:	Siemens Hydroranger 200 used by the facility for flow monitoring,		



Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:34
Description:	Paper graph totalizer still in operation.		



Office of Water Quality Photographic Evidence Sheet

Location:	City of Arkadelphia		
Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:39
		Photo #:	17
Description:	Aquaculture pond with plastic squares to contain duckweed. Vegetation recently sprayed.		



Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:39
		Photo #:	18
Description:	Aquaculture pond with plastic squares to contain duckweed. Vegetation recently sprayed.		



Office of Water Quality Photographic Evidence Sheet

Location:	City of Arkadelphia		
Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:40
		Photo #:	19
Description:	Oxidation Pond 1 viewed from the southeast corner.		



Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:40
		Photo #:	20
Description:	View of the east bank of oxidation Pond 1 from southeast corner.		



Office of Water Quality Photographic Evidence Sheet

Location:	City of Arkadelphia		
Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:40
		Photo #:	21
Description:	View of oxidation Pond 1 from the east bank.		



Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:41
		Photo #:	22
Description:	Viewing oxidation Pond 1 north from east bank.		



Office of Water Quality Photographic Evidence Sheet

Location:	City of Arkadelphia				
Photographer:	Michael Young	Date:	06/09/2022	Time:	11:43
Witness:	Trey Butler	Photo #:	23		
Description:	Influent splitter box allowing water to enter any oxidation pond.				



Photographer:	Michael Young	Date:	06/09/2022	Time:	11:44
Witness:	Trey Butler	Photo #:	24		
Description:	Influent splitter box allowing water to enter any oxidation pond.				



Office of Water Quality Photographic Evidence Sheet

Location:	City of Arkadelphia		
Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:46
		Photo #:	25
Description:	Oxidation Pond 2 viewing from the north bank.		



Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:16
		Photo #:	26
Description:	Small island forming in oxidation Pond 2.		



Office of Water Quality Photographic Evidence Sheet

Location:	City of Arkadelphia		
Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:46
		Photo #:	27
Description:	Closer view of small island in oxidation Pond 2.		



Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:47
		Photo #:	28
Description:	View of oxidation Pond 2 from the west bank looking south.		



Office of Water Quality Photographic Evidence Sheet

Location:	City of Arkadelphia		
Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:47
		Photo #:	29
Description:	Viewing north from the west bank of oxidation Pond 2.		



Photographer:	Michael Young	Date:	06/09/2022
Witness:	Trey Butler	Time:	11:50
		Photo #:	30
Description:	Viewing south bank of oxidation Pond 2 from southwest corner.		



Office of Water Quality Photographic Evidence Sheet

Location:	City of Arkadelphia				
Photographer:	Michael Young	Date:	06/09/2022	Time:	11:50
Witness:	Trey Butler			Photo #:	31
Description:	Viewing north from southwest corner of oxidation Pond 2.				



Figure 1. Overview of City of Arkadelphia wastewater treatment facility with treatment devices identified.

