



Commissioner:
C.E. Dougan
John Barnwell
J.W. Floyd
Jim Williamson
Todd Young

"Providing Water, Sewer, and Sanitation Services"
2806 Bryan Road / P.O. Drawer 1269
Van Buren, Arkansas 72957
479-474-5067 / Fax 479-471-8969
Van Buren Municipal Utilities

October 21, 2015

Allen Gilliam, Pretreatment Coordinator NPDES Branch
Arkansas Department of Environmental Quality
5301 North Shore Drive
North Little Rock, Arkansas 72218

Re: Permit #AR0021482, #AR0040967, & #AR0037567
Annual Pretreatment Report for 2015-2016


Dear Mr. Gilliam:

Please find our Annual Pretreatment Program Report. The report contains the following:

- I. Cover Page
- II. Annual Averages for Main, North and Bekart Plants
- III. Influent-Effluent Chart for Main Plant - Table III
- IV. Influent-Effluent Chart for North Plant
- V. Attachment A -- PPS Report Updated SIU List
- VI. Attachment B -- Significant Violations - Enforcement Action
- VII. Attachment C - PPS (1st page)
- VIII. Attachment C - PPS (2nd page)

If you have any questions feel free to contact our office.

Sincerely,


Steve Dufresne
Director

ADEQ

Kim Redo, VB MU Environmental Coordinator
North & South Plant files

Serving Van Buren and Crawford County since 1893

Attorney
Paul Cant
Secretary
Kathy Geppert

RECEIVED
OCT 24 2016

complete/compliance
no action necessary
JTB

A2BWH

Annual Average(s) of Analyses for South, North and Bekaert Treatment Plants

Southside Treatment Plant
October 2015 – September 2016
Average CBOD₅, BOD₅, TSS, Fecal Coliform and flow for the calendar year

Flow	2.550 MGD	2.573 MGD
BOD ₅ (Nov.-Apr.)	136 mg/L	9.8 mg/L
CBOD ₅	119 mg/L	6 mg/L
TSS	70 mg/L	6 mg/L
Fecal Coliform	----	40 colonies/100 mls
Ammonia Nitrogen	23 mg/L	5.5 mg/L

Northside Treatment Plant
October 2015 – September 2016
Average CBOD₅, TSS, Fecal Coliform, Ammonia Nitrogen, Dissolved Oxygen and flow for the calendar year

Flow	1.282 MGD	1.282 MGD
CBOD ₅ (November-Apr.)	159 mg/L	2.3 mg/L
CBOD ₅ (May – October)	192 mg/L	4.6 mg/L
TSS (November-April)	124 mg/L	3 mg/L
(May – October)	127 mg/L	1.5 mg/L
Fecal Coliform (April-Sept.)		7 colonies/100 mls
(October-March)		9 colonies/100 mls
Ammonia Nitrogen (November-April)		0.29 mg/L
(May – October)		0.28 mg/L
Dissolved Oxygen		Low: 6.9 mg/L; Average: 7.2 mg/L

Bekaert(Lee Creek) Treatment Plant
October 2015 – September 2016
Average BOD₅, TSS, Fecal Coliform and flow for the calendar year

Flow	0.005 MGD	0.005 MGD
BOD ₅	265 mg/L	2.5 mg/L
TSS	160 mg/L	6.8 mg/L
Fecal Coliform	----	7 colonies/100 mls

MONITORING RESULTS FOR THE ANNUAL PRETREATMENT REPORT
REPORTING YEAR: Oct. 1, 2015 TO Sept. 30, 2016
TREATMENT PLANT: City of Van Buren NPDES PERMIT #AR0021482
AVERAGE POTW FLOW: 2,550 MGD % IU FLOW: 34.1%

METALS, CYANIDE and PHENOLS (Total)	MAHC (µg/l) (2)	INFLUENT DATES SAMPLED (µg/l) Once/quarter				WQ level/ limit (µg/l) (2)	EFFLUENT DATES SAMPLED (µg/l) Once/quarter				LABORATORY ANALYSIS		
		12/8/2015	2/8/2016	4/5/2016	7/6/2016		12/8/2015	2/8/2016	4/5/2016	7/6/2016	EPA MCL (µg/l) (1)	EPA Method Used (1)	Detection Level Achieved (µg/l)
Arsenic	71.07	2.1	2.6	2.4	5.1	4807.76	1.3	1.1	0.99	2.1	0.5	200.8	0.5
Beryllium	100.00	0	0	0	0	173.41	0	0	0	0	0.5	200.8	0.5
Chromium, total	1000.0	0	0	0	0	22680.2	0	0	0	0	10	200.8	10
Copper	1000.0	5.6	14	11	9.4	431.63	4.3	6.2	3.8	5.5	0.5	200.8	0.5
Lead	587.2	0	1.6	1.4	0.94	587.66	0	0.56	0	0	0.5	200.8	0.5
Mercury	0.98µg/L	0.0053	0.037	0.036	0.039	0.39 µg/L	0	0	0.012	0.011	.005	EPA 245.7	1.8 ng/L
Nickel	426.42	4.5	8.1	5.9	5.9	15071.86	5.8	7.4	4.8	6.0	0.5	200.8	0.5
Selenium	85.28	0	0	0	0	137.76	0	0	0	0	5	200.8	5
Silver	250.00	0	3.5	0.54	0	112.58	0	0	0	0	0.5	200.8	0.5
Zinc	300.00	57	120	85	79	3461.17	29	44	0	38	20	200.8	20
Cyanide	100.00	0	0	0	0	154.01	0	0	0	0	10	SM4500- CN C,E	0.01 mg/L
Molybdenum	63.96	0	0	0	0	N/A	0	0	0	0	--	200.8	0.5
Phenols	N/A	0.023	0.027	0.019	N/A	N/A	0	0.0092	0	0	5	EPA 420.1	0.005 mg/L
Thallium	N/A	0	0	0	0	N/A	0	0	0	0	0.5	200.8	0.5
Flow, MGD	N/A	2,589	1,879	3,199	2,325	N/A	2,531	1,867	2,605	2,577			

*No MAHC's calculated for these parameters

(1) It is advised that the influent and effluent samples are collected considering flow detention time through each plant. Analytical MQLs must be met for the effluent (and SHOULD be met for the influent) so the data can also be used for Local Limits assessment and NPDES application purposes.

MONITORING RESULTS FOR THE ANNUAL PRETREATMENT REPORT
REPORTING YEAR: Oct. 1, 2015 TO Sept. 30, 2016
TREATMENT PLANT: City of Van Buren NPDES PERMIT #AR0040967
AVERAGE POTW FLOW: 1.282 MGD % IU FLOW: 1.03%

METALS, CYANIDE and PHENOLS (Total)	MAHC (µg/l) (2)	INFLUENT DATES SAMPLED				WQ level/ limit (µg/l) (2)	EFFLUENT DATES SAMPLED				LABORATORY ANALYSIS		
		10/6/2015	3/2/2016	4/5/2016	9/6/2016		10/6/2015	3/2/2016	4/5/2016	9/6/2016	EPA MQL (µg/l) (1)	EPA Method Used (1)	Detection Level Achieved (µg/l)
Antimony	N/A	0	0	0	0	N/A	0	0	0	0	60	200.8	60
Cadmium	5.58	0	0	0	0	1.84	0	0	0	0	0.5	200.8	0.5
Copper	31.85	16	8.1	15	18	9.24	6.2	6.7	4.8	5.6	0.5	200.8	0.5
Lead	10.84	0.94	0.95	0.008	0.98	2.71	0	0	0	0	0.5	200.8	0.5
Mercury	0.03	0.077	0.030	0.003	0.041	0.0134	0	0	0	0.0023	.005	EPA 245.7	0.0018
Nickel	167.18	4.5	4.5	0.0390	4.2	96.96	4.6	3.2	4.3	4.6	0.5	200.8	0.5
Selenium	11.16	0	0	0	0	5.58	0	0	0	0	5	200.8	5
Silver	3.73	0	0	0	0	0.93	0	0	0	0	0.5	200.8	0.5
Zinc	167.71	190	66	0.577	91	85.53	24	73	56	20	20	200.8	20
Chromium, total	748.99	0	0	0	0	11.81(hex) 295.4(tri)	0	0	0	0	10	200.8	10
Chromium, Hexavalent		0	0	0	0		0	0	0	0	10	SM 3500- Cr-B	10
Cyanide	187.2	0	0	0	0	5.80	0	0	0	0	10	SM4500- CN C.E	0.00001
Arsenic	341.2	5.7	3.8	0	6.2	348.96	1.5	0.86	0.74	1.4	0.5	200.8	0.5
Phenols	*	0.040	0.00021	0.184	0.041		0.0072	0.0050	0.012	0	5	EPA 420.1	0.000005
Beryllium	11.83	0	0	0	0	5.91	0	0	0	0	0.5	200.8	0.5
Thallium	*	0	0	0	0	N/A	0	0	0	0	0.5	200.8	0.5
Flow, MGD	N/A	0.694	1.333	1.124	0.634	N/A	0.694	1.333	1.124	0.634			

*No MAHC's calculated for these parameters

(1) It is advised that the influent and effluent samples are collected considering flow detention time through each plant. Analytical MQLs must be met for the effluent (and SHOULD be met for the influent) so the data can also be used for Local Limits assessment and NPDES application purposes.

(2) This value was calculated during the development of TBL based on State WQ criteria, EPA guidance and either ADEQ Pretreatment staff Excel spreadsheets or the Permittee's consultant with concurrence from Pretreatment staff.

PRETREATMENT PROGRAM STATUS REPORT
 UPDATED SIGNIFICANT USERS LIST
 ATTACHMENT A

Control
 Document COMPLIANCE STATUS
 REPORTS

INDUSTRIAL USER	SIC CODE	Categorical Determination	Y/N	Last Action	New User	Times Inspected	Times Sampled	BMR	90-DAY COMPLIANCE	SEMI ANNUAL	SELF MONITORING	EFFLUENT LIMITS
Arkansas Lamp Mfg.	1721	Categorical	Y	10/8/2014	no	1	0*	yes	n/a	C	NC	C*
B & W Plating	1721	Categorical	Y	11/17/2015	no	1	0*	yes	n/a	C	C	C*
FabTech	3400	Categorical	Y	2/28/2016	no	1	1	yes	n/a	C	C	C
River City Coatings	1721	Categorical	Y	9/18/2016	no	1	3	yes	n/a	C	C	C
Simmons Foods	2015	Noncategorical	Y	4/15/2014	no	1	9	yes	n/a	n/a	C	NC
Simmons Poultry Farms	2017	Noncategorical	Y	11/30/2014	no	1	8	yes	n/a	n/a	C	NC
Tate & Lyle	2046	Noncategorical	Y	5/31/2016	no	1	7	yes	n/a	n/a	C	NC
Tyson Foods	2017	Noncategorical	Y	11/30/2018	no	1	4	yes	n/a	n/a	C	C
Arkansas Valley Truck Wash of America	7542	Noncategorical	Y	12/30/2015	no	1	5	yes	n/a	n/a	C	NC

* Arkansas Lamp Mfg. & B & W Plating - zero discharge so sampling not possible

SIGNIFICANT VIOLATORS -- ENFORCEMENT ACTIONS TAKEN
ATTACHMENT B

INDUSTRIAL USER	NUMBER OF VIOLATION				NUMBER OF ACTIONS TAKEN						COMPLIANCE SCHEDULE			
	REPORTS	LIMITS	N.O.V.	A.O.	CIVIL	CRIMINAL	OTHER	PENALTIES COLLECTED	DATE ISSUED	DATE DUE	CURRENT STATUS	COMMENTS		
Simmons Foods		9X		0	0	0	0	yes	n/a	n/a	C	BOD excursions		
Simmons Prepared Foods		9X		0	0	0	0	yes	n/a	n/a	C	12/BOD excursions; Lack of spare parts (flow meter)		
Tate & Lyle		1X		0	0	0	0	no	n/a	n/a	C	BOD excursion		
Arkansas Lamp Mfg.	1X			0	0	0	0	no	n/a	n/a	C	Failure to submit reports		
Arkansas Valley Truck Wash		3X		0	0	0	0	yes	n/a	n/a	C	1X-Zinc, 5X-TSS, 1X BOD excursions		

PRETREATMENT PERFORMANCE SUMMARY (PPS)
ATTACHMENT C

NOTE: ALL QUESTIONS REFER TO THE INDUSTRIAL PRETREATMENT PROGRAM AS APPROVED BY THE EPA. THE PERMITTEE SHOULD NOT ANSWER THE QUESTIONS BASED ON CHANGES MADE TO THE APPROVED PROGRAM WITHOUT DEPARTMENT AUTHORIZATION.

General Information

Control Authority Name Van Buren Municipal Utilities

Address 2806 Bryan Road, P.O. Drawer 1269

City Van Buren State/Zip Arkansas 72956

Contact Person Steve Dufresne Director

Contact Telephone (479) 474-5067 (Area Code)

NPDES Permit Nos. AR0021482 & AR0040967

Reporting Period October 1, 2015 to September 30, 2016

(Beginning Month and Year) (Ending Month and Year)

Total Number of Categorical IUs 4

Total Number of Significant Noncategorical IUs 5

II. Significant Industrial User Compliance

SIGNIFICANT INDUSTRIAL USERS

Categorical Noncategorical

1) No. of SIUs submitting BMRs/Total 0/0

2) No. of SIUs submitting 90-day Compliance Reports/No. Required 0/0

3) No. of SIUs submitting Semi-annual Reports/Total No. Required 0/0

4) No. of SIUs meeting Compliance Schedule/Total No. Required to Meet Schedule 0/0

5) No. of SIUs in Significant Noncompliance/Total No. of SIUs 0/4

6) Rate of Significant Noncompliance for all SIUs (categorical and noncategorical) 0/9

Compliance Monitoring Program

1) No. of Control Documents Issued/Total No. Required 4/4

2) No. of Nonsampling Inspections Conducted 4/4

3) No. of Sampling Visits Conducted 33/5

4)	No. of Facilities Inspected (nonsampling).....	4/4	5/5
5)	No. of Facilities Sampled.....	4	5

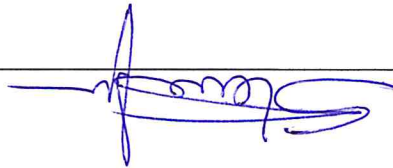
Enforcement Actions

SIGNIFICANT INDUSTRIAL USERS

	<u>Categorical</u>	<u>Noncategorical</u>
1)	No. of Compliance Schedules Issued/No. of Schedules Required.....	0/0
2)	No. of Notices of Violations Issued to SIUs.....	1/4
3)	No. of Administrative Orders Issued to SIUs.....	0
4)	No. of Civil Suits Filed.....	0
5)	No. of Criminal Suits Filed.....	0
6)	No. of Significant Violators (newspaper publication attached).....	0
7)	Amount of Penalties Collected (total dollars/ IUs Assessed) (Not Surcharges).....	\$0
8)	Other Actions (sewer bans, etc.).....	0

The following certification must be signed in order for this form to be considered complete:

I certify that the information contained herein is complete and accurate to the best of my knowledge.

Authorized Representative  Date 10/21/2016