

BOND CONSULTING ENGINEERS EAST, INC.
3683 STATE HIGHWAY 77 NORTH
MARION, ARKANSAS 72364

PHONE: (870)739-2228

FAX: (870)739-8407

E-mail: bondengineering@hotmail.com

C.H. BOND, JR., P.E.
JEROME B. ALFORD, P.E.
JACK G. BOND, P.E.

Arkansas Department of Environmental Quality
5301 Northshore Drive
North Little Rock, AR 72118-5317

Attn: Alan Anderson – Enforcement Administrator

RE: City of Marion NPDES Permit AR0021971
AFIN # 18-00110

Dear Alan,

The City of Marion has decided to proceed with plans to move their sewage discharge to the Mississippi River. Earlier references were made to the use of chemicals to settle the algae in the third pond to demonstrate ability to reduce suspended solids for continued discharge into 15 Mile Bayou. These efforts were unsuccessful therefore we must exercise the option of changing the point of discharge.

Please consider this letter our first attempt to satisfy the first item in the Consent Administrative Order (CAO). Attached please note a map showing the route of the proposed forcemain. Also attached you will find copy of efforts underway to receive permission from the Corps of Engineers to build a suitable discharge structure at or near the high bank of the Mississippi River. We have also made contact with the St. Francis Levee District for a suitable crossing. We have also contacted Kim Fuller in the permit section concerning some guidance that we need before approaching the land owner between the levee and the discharge point. Please find attached e-mail in this matter.

A new permit application has been prepared with a proposed daily discharge of 1.6 million gallons which is the same as the current permit. Since this forcemain will be 13 miles long, logic dictates that we build some future in to this capacity. As you may be aware, Marion has one of the few certified super-sites for large industry in the state of Arkansas. This 1,750 acre tract was in serious contention several years ago when Toyota was looking for a manufacturing site. If we were to find out tomorrow that a similar industry had picked Marion, it would obviously change our immediate plans to include moving large volume treatment capacity east near the Mississippi River levee. In that instance we want to consider sizing this proposed forcemain along Gammon Road to handle raw sewage in the future. In the event this ideal industry never comes, we still need to provide some growth with Marion keeping their existing treatment site.

The numbers we have crunched the last few days and input from the City Council dictate providing minimum pump capacity in the range of 5.0 mgd. This

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provides capacity for future growth over the life of the pumps. The economics involved in power costs generated by friction loss in this length of forcemain dictates 16" to 18" pipe size. This design point provides future growth, flexibility in the daily pumping scheme and the ability to manage the pond depth to equalize flow. This will create an intermittent discharge and will further require a new chlorine contact chamber to provide the required detention time at the design pumping rate. Controls will simply be established to start chlorination at the front end of a large chlorine contact chamber when the pumps are started and simultaneously start de-chlorination at or near the pump pick-up point. Preliminary design is leaning toward an open concrete tank with baffles to avoid short circuiting that is connected through the levee so the level in the chlorine contact chamber is the same as the level in the third pond. This same concrete basin will have two vertical turbine pumps with variable speed drives located on the tail end. Space will be prepared for a third pump. Entrance to this concrete basin will be screened to remove anything that could harm the vertical turbine pumps and provisions will be made to easily hand clean the face of this screen.

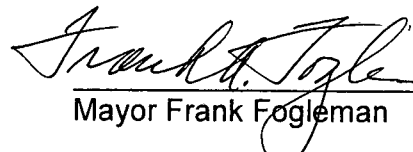
We have already initiated efforts to acquire easements along this forcemain route in those areas where we do not have existing right of way. A copy of the discharge and construction permit application is attached for your information. As soon as we receive Corps of Engineers concurrence and ADEQ permit section approval, we will prepare and submit detailed plans, specifications and contract documents. At the appropriate time, we will work with the City of Marion on securing funds and rate increases commensurate with this project.

At this point in time, we are seventeen months away from the construction deadline dictated by the CAO. This project is rather straight forward as I have outlined herein; therefore we see no reason that Marion cannot meet this agreed to timetable. There are some decisions that have to be made concerning this proposal. Primarily we are proposing to abandon the rock-reed filters since they are 27 years old. By discharging directly from the third pond we will have to be allowed 30 ppm BOD and 90 ppm suspended solids as a discharge quality. This decision will come from the permit section.

This is my attempt to give you design parameters and justification for each. I will keep you informed as we proceed on this end. If you need any additional information, please do not hesitate to call.

Sincerely,


Jerome Alford, P.E.


Mayor Frank Fogleman

Bond Consulting Engineers East, Inc.
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Marion, AR 72364

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Fax (870)739-8407

Email: Bondengineering@hotmail.com

C.H. Bond, Jr. P.E.
Jerome B. Alford, P.E.
Jack Bond, P.E.

January 28, 2013

Mr. Regie Wuornes
U. S. Army Corps. Of Engineers
Regulatory Functions Branch
167 North Main Street Room 766
Memphis, TN 38103-1894

RE: City of Marion Sewage Treatment Improvements

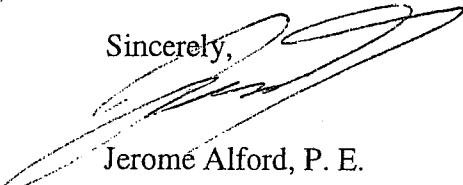
Dear Mr. Wuornos,

The City of Marion is under a consent Administration order from the Arkansas Department of Environmental Quality (ADEQ) to correct violations occurring in the City's sewer discharge. Plans for correcting the violations include placing a sewer force main from the existing treatment ponds to the Mississippi River.

Attached please find an application for constructing an outlet structure on the top bank of the Mississippi River. Once this application is approved project drawings showing the location of the force main will be submitted to your office for review.

As time is very critical for completing preliminary design, please let us know if you have any questions or need any additional information.

Sincerely,



Jerome Alford, P. E.

Cc. Mayor Frank fogleman

**U.S. ARMY CORPS OF ENGINEERS
APPLICATION FOR DEPARTMENT OF THE ARMY PERMIT**

33 CFR 325. The proponent agency is CECW-CO-R.

OMB APPROVAL NO. 0710-0003
EXPIRES: 28 FEBRUARY 2013

Public reporting for this collection of information is estimated to average 11 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters, Executive Services and Communications Directorate, Information Management Division and to the Office of Management and Budget, Paperwork Reduction Project (0710-0003). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. Please DO NOT RETURN your form to either of those addresses. Completed applications must be submitted to the District Engineer having jurisdiction over the location of the proposed activity.

PRIVACY ACT STATEMENT

Authorities: Rivers and Harbors Act, Section 10, 33 USC 403; Clean Water Act, Section 404, 33 USC 1344; Marine Protection, Research, and Sanctuaries Act, Section 103, 33 USC 1413; Regulatory Programs of the Corps of Engineers; Final Rule 33 CFR 320-332. Principal Purpose: Information provided on this form will be used in evaluating the application for a permit. Routine Uses: This information may be shared with the Department of Justice and other federal, state, and local government agencies, and the public and may be made available as part of a public notice as required by Federal law. Submission of requested information is voluntary, however, if information is not provided the permit application cannot be evaluated nor can a permit be issued. One set of original drawings or good reproducible copies which show the location and character of the proposed activity must be attached to this application (see sample drawings and/or instructions) and be submitted to the District Engineer having jurisdiction over the location of the proposed activity. An application that is not completed in full will be returned.

(ITEMS 1 THRU 4 TO BE FILLED BY THE CORPS)

1. APPLICATION NO.	2. FIELD OFFICE CODE	3. DATE RECEIVED	4. DATE APPLICATION COMPLETE
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(ITEMS BELOW TO BE FILLED BY APPLICANT)

5. APPLICANT'S NAME First - Frank Middle - A Last - Fogleman Company - City of Marion - Mayor E-mail Address - mayormarionar@aol.com			8. AUTHORIZED AGENT'S NAME AND TITLE (agent is not required) First - Jerome Middle - B Last - Alford Company - Bond Consulting Engineers East, Inc. E-mail Address - bondengineering@hotmail.com		
6. APPLICANT'S ADDRESS: Address- 14 Military Road City - Marion State - AR Zip - 72364 Country - US			9. AGENT'S ADDRESS: Address- 3683 State Highway 77 North City - Marion State - AR Zip - 72364 Country - US		
7. APPLICANT'S PHONE NOS. w/AREA CODE a. Residence b. Business c. Fax 870-739-4175 870-739-5410 870-739-1200			10. AGENTS PHONE NOS. w/AREA CODE a. Residence b. Business c. Fax 901-412-6003 870-739-2228 870-739-8407		

STATEMENT OF AUTHORIZATION

11. I hereby authorize, Jerome Alford, P.E. to act in my behalf as my agent in the processing of this application and to furnish, upon request, supplemental information in support of this permit application.


1-28-13
 SIGNATURE OF APPLICANT DATE

NAME, LOCATION, AND DESCRIPTION OF PROJECT OR ACTIVITY

12. PROJECT NAME OR TITLE (see instructions) City of Marion Wastewater Treatment Improvements			
13. NAME OF WATERBODY, IF KNOWN (if applicable) Mississippi River		14. PROJECT STREET ADDRESS (if applicable) Address N/A	
15. LOCATION OF PROJECT Latitude: +N 35degrees15'05.5" Longitude: -W 90degrees06'00"		City -	State- AR Zip-
16. OTHER LOCATION DESCRIPTIONS, IF KNOWN (see instructions) State Tax Parcel ID Municipality N/A Section - 2 Township - 7 North Range - 9 East			

17. DIRECTIONS TO THE SITE

Starting at the intersection of State Highway 77 and Gammon Road; thence east along Gammon Road a distance of 5.8 miles to an intersection with a gravel drive to the north. See attached map for directions from levee to discharge point. Said location is approximately 600 feet south of Island Forty Chute.

18. Nature of Activity (Description of project, include all features)

The project involves laying an eighteen inch forcemain to the top bank of the Mississippi River. A 5' x 8' discharge structure will be constructed on the top bank of the River (see attached detail). Rip rap will be placed around the structure and the River bank slope as directed by the Corps of Engineers.

19. Project Purpose (Describe the reason or purpose of the project, see instructions)

The City of Marion is under a Consent Administration Order (CAO) from the Arkansas Department of Environmental Quality (ADEQ) to correct violations occurring in the City's sewer discharge. The City is currently discharging into the 15 Mile Bayou. The 15 Mile Bayou is a small stream which requires very strict discharge limits from ADEQ. The City is planning to pump treated sewage to the Mississippi River to avoid making improvements to the existing sewage treatment facility. A eighteen inch forcemain will be installed from the treatment facility to the top bank of the Mississippi River. Improvements must begin in 2014 and be completed July 2015.

USE BLOCKS 20-23 IF DREDGED AND/OR FILL MATERIAL IS TO BE DISCHARGED

20. Reason(s) for Discharge

21. Type(s) of Material Being Discharged and the Amount of Each Type in Cubic Yards:

Type	Type	Type
Amount in Cubic Yards	Amount in Cubic Yards	Amount in Cubic Yards

22. Surface Area in Acres of Wetlands or Other Waters Filled (see instructions)

Acres
or
Linear Feet

23. Description of Avoidance, Minimization, and Compensation (see instructions)

24. Is Any Portion of the Work Already Complete? Yes No IF YES, DESCRIBE THE COMPLETED WORK

25. Addresses of Adjoining Property Owners, Lessees, Etc., Whose Property Adjoins the Waterbody (if more than can be entered here, please attach a supplemental list).

a. Address- 79 South 2nd Street

City - Memphis State - TN Zip - 38103

b. Address-

City - State - Zip -

c. Address-

City - State - Zip -

d. Address-

City - State - Zip -

e. Address-

City - State - Zip -


26. List of Other Certificates or Approvals/Denials received from other Federal, State, or Local Agencies for Work Described in This Application.

AGENCY	TYPE APPROVAL*	IDENTIFICATION NUMBER	DATE APPLIED	DATE APPROVED	DATE DENIED

* Would include but is not restricted to zoning, building, and flood plain permits

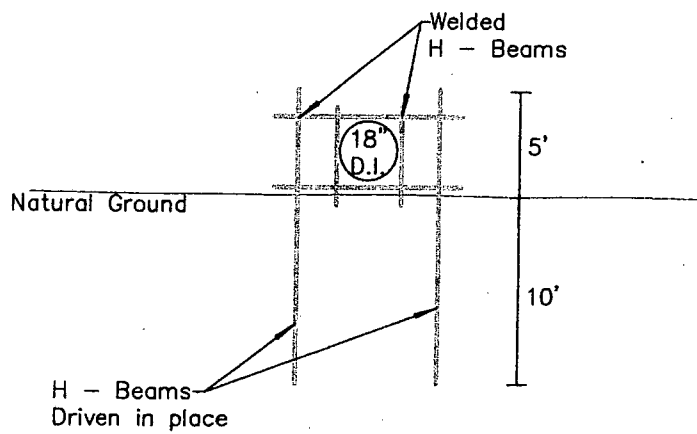
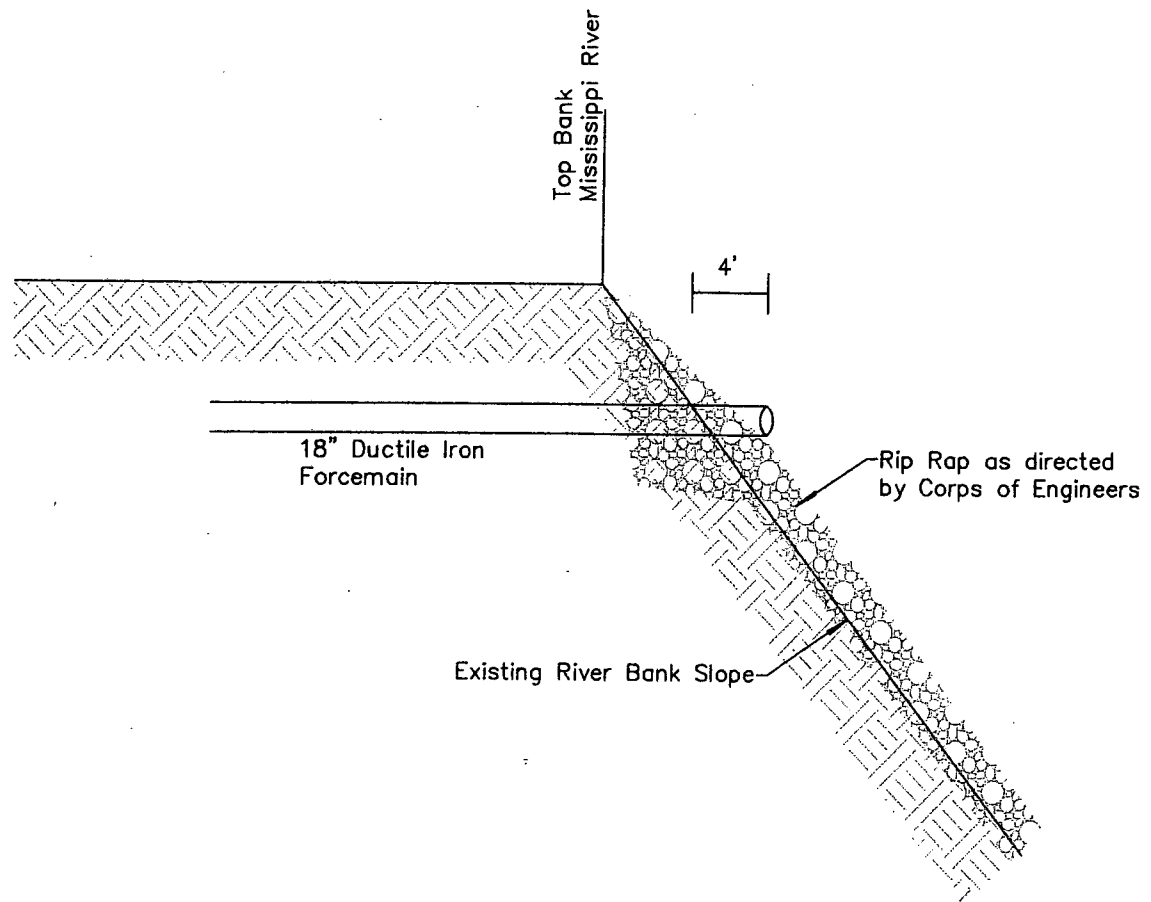
27. Application is hereby made for permit or permits to authorize the work described in this application. I certify that this information in this application is complete and accurate. I further certify that I possess the authority to undertake the work described herein or am acting as the duly authorized agent of the applicant.

 1-28-13
SIGNATURE OF APPLICANT DATE


SIGNATURE OF AGENT DATE

The Application must be signed by the person who desires to undertake the proposed activity (applicant) or it may be signed by a duly authorized agent if the statement in block 11 has been filled out and signed.

18 U.S.C. Section 1001 provides that: Whoever, in any manner within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies, conceals, or covers up any trick, scheme, or disguises a material fact or makes any false, fictitious or fraudulent statements or representations or makes or uses any false writing or document knowing same to contain any false, fictitious or fraudulent statements or entry, shall be fined not more than \$10,000 or imprisoned not more than five years or both.



Discharge Structure
Detail
1" = 10'

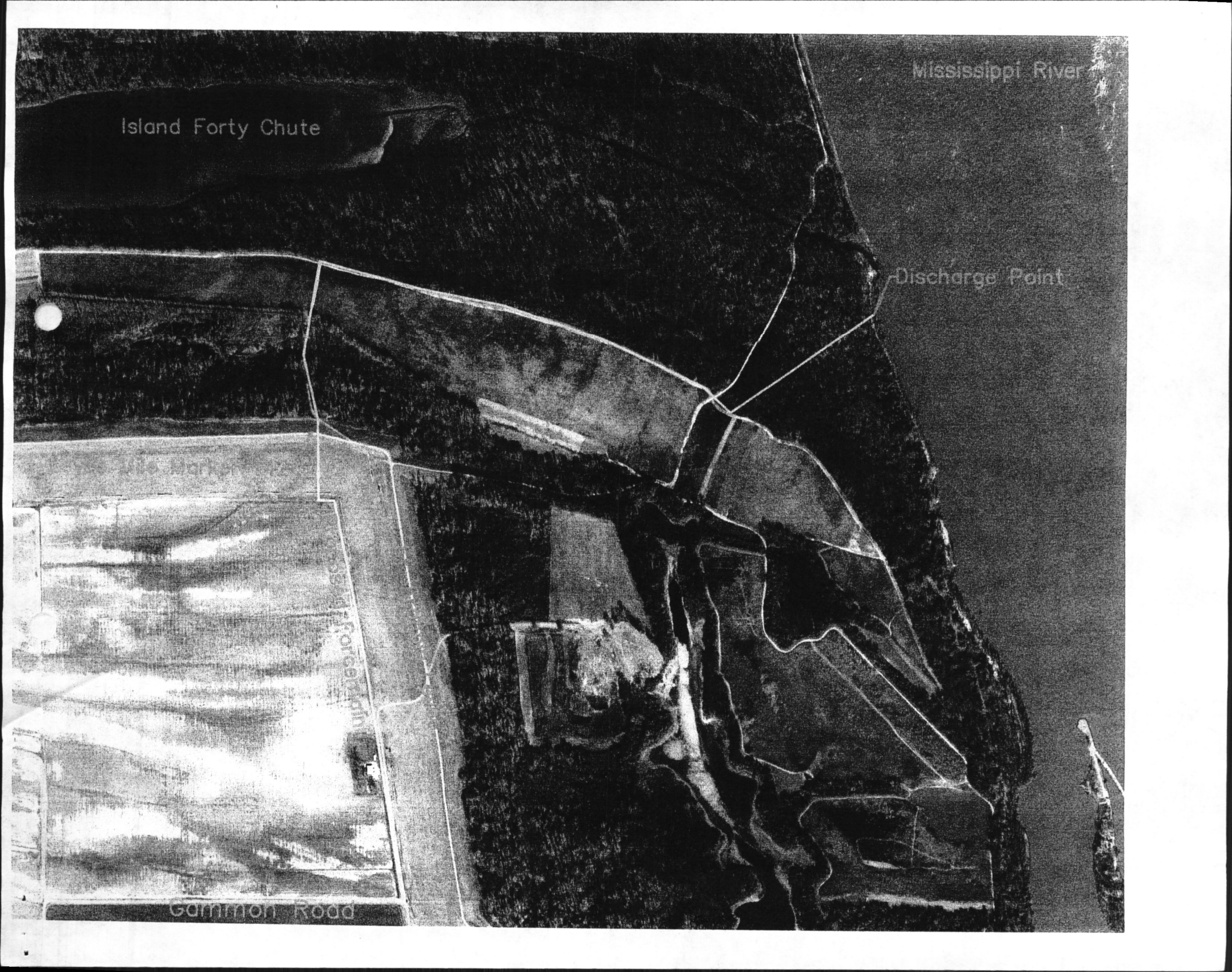
Mississippi River

Island Forty Chute

Discharge Point

Port of Force Main

Garrison Road



Bond Engineering

From: "Bond Engineering" <bondengineering@hotmail.com>
Date: Thursday, January 31, 2013 8:59 AM
To: "Kim Fuller" <fuller@adeq.state.ar.us>
Subject: Marion Sewer

GOOD MORNING KIM,

AS YOU ARE NOW AWARE, MARION IS PLANNING A LONG SEWER FORCEMAIN TO DISCHARGE AT THE HIGH BANK OF THE MISSISSIPPI RIVER. THE PROPOSED FORCEMAIN IS 13 MILES LONG, CROSSING THE ST. FRANCIS LEVEE; THEN IT MUST CROSS APPROXIMATELY A MILE OF UNPROTECTED AREA THAT IS SPECIFICALLY RESERVED FOR HUNTING. DURING HUNTING SEASON TRAFFIC OVER THIS LAST MILE WOULD CERTAINLY BE FROWNED UPON BY THE LAND OWNER AND OF COURSE THERE IS THE POTENTIAL OF THE DISCHARGE BEING UNDER WATER DURING SPRING RIVER RISES. BEFORE WE START NEGOTIATING WITH THE LAND OWNER, WE NEED TO BE ABLE TO GIVE HIM SOME ASSURANCE THAT HE CAN LIMIT ACCESS TO THE DISCHARGE POINT. WITH OUR ANTICIPATED SAMPLING SCHEDULE, WE WOULD OBVIOUSLY NEED TO SAMPLE ALONG THIS FORCEMAIN OR IN THE EVENT OF A PROPERLY SIZED CHLORINE CONTACT CHAMBER WE WOULD PREFER SAMPLING AT OR NEAR THE DISCHARGE PUMPS. IS THIS SOMETHING THAT CAN BE ALLOWED SPECIFICALLY BY THE PERMIT? CAN YOU MAKE THIS DETERMINATION NOW BEFORE WE BEGIN NEGOTIATIONS WITH THIS PROPERTY OWNER?

**JEROME ALFORD, P.E.
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MARION, AR 72364
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JEROME B. ALFORD, P.E.
JACK G. BOND, P.E.

February 7, 2013

Arkansas Department of Environmental Quality
Water Division
5301 Northshore Drive
North Little Rock, AR 72118-5317

Attn: Kim Fuller, P.E.

RE: City of Marion – NPDES Permit Application

Dear Kim,

This letter transmits one copy of form 1 and a layout map for those improvements required for Marion to move their point of discharge to the Mississippi River. In keeping with the CAO that is now in place we have contacted the Corps of Engineers for this discharge point and the St. Francis Levee District for crossing their levee. We are currently preparing design description for pipe, pumps and other related improvements to submit to your enforcement branch by March 1, 2013.

We are still in discussion with the Mayor and Council about specific sizing for future operations and growth; however we are applying for the same 1.6 mgd as in our current permit. As we have discussed, we intend to abandon our 27 year old rock-reed filters and pump directly from pond number three to the Mississippi River. For this reason it is most important that we be granted discharge parameters of 30 ppm BOD and 90 ppm Suspended Solids. On behalf of the City of Marion, we respectfully request this discharge quality.

If we can provide any additional information, please contact us as this decision on discharge requirements substantially impacts the funding arrangements we must face immediately.

Sincerely,



Jerome Alford, P.E.

Cc: Mayor Frank Fogleman

Arkansas Department of Environmental Quality
NPDES PERMIT APPLICATION
FORM 1

INSTRUCTIONS:

1. This form should be **typed or printed in ink**. If insufficient space is available to address any item please continue on an attached sheet of paper.
2. Please complete the following Section (s):

Sections	A	B	C	D	E	F	G	H	I
POTW	X	X	X	X					X
Industrial User	X	X	X	X	X	X	X		X
Construction Permit Only	X	X	*	X				X	X
Modification	X	X	X	X	X	*	*	X	X
All Other Applicants	X	X	X	X	X				X

* As necessary

3. If you need help on SIC or NAICS go to www.osha.gov/oshstats/sicser.html
4. If you have any questions about this form you may call NPDES Section at 501-682-0622 or go to www.adeq.state.ar.us/water. You may also contact :

Department
Arkansas Department of Health

Information in Regard to
Water Supply

Telephone #
501-661-2623

5. The following EPA Forms in addition to Form 1 is required for processing your application:

Form 2A - Municipal Dischargers

Form 2B - Concentrated Animal Feeding Operations

Form 2C - Existing Manufacturing, Commercial, Mining, and Silvicultural Operations

Form 2D - New Sources and New Dischargers Application for Permit to Discharge Process Wastewater

Form 2E - Facilities Which Do Not Discharge Process Wastewater (i.e. Domestic, Non contact cooling water)

Form 2F - Application for Permit to Discharge Storm Water Discharges Associated With Industrial Activity

6. Where to Submit

Return the completed form by mail to:

Arkansas Department of Environmental Quality
Permits Branch, Water Division
5301 Northshore Drive
North Little Rock, AR 72118

Or by email to:

Water.Permit.Application@adeq.state.ar.us

NPDES PERMIT APPLICATION
FORM 1

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY
WATER DIVISION
5301 Northshore Drive
North Little Rock, AR 72118-5317
www.adeg.state.ar.us/water

PURPOSE OF THIS APPLICATION

- INITIAL PERMIT APPLICATION FOR NEW FACILITY
 INITIAL PERMIT APPLICATION FOR EXISTING FACILITY
 MODIFICATION OF EXISTING PERMIT
 REISSUANCE (RENEWAL) OF EXISTING PERMIT
 MODIFICATION AND CONSTRUCTION OF EXISTING PERMIT
 CONSTRUCTION PERMIT

SECTION A- GENERAL INFORMATION

1. Legal Applicant Name (who has ultimate decision making responsibility over the operation of a facility or activity):

City of Marion

Note: The legal name of the applicant must be identical to the name listed with the Arkansas Secretary of State.

2. Operator Type: Private State Federal Partnership Corporation Other

State of Incorporation: _____

3. Facility Name: City of Marion Sewage Treatment Plant

4. Is the legal applicant identified in number 1 above, the owner of the facility? Yes No

5. NPDES Permit Number (If Applicable): AR0021971

6. NPDES General Permit Number (If Applicable): ARG

7. NPDES General Storm Water Permit Number (If Applicable): _____

8. Permit Numbers and/or names of any permits issued by ADEQ or EPA for an activity located in Arkansas that is presently held by the applicant or its parent or subsidiary corporation which are not listed above:

<u>Permit Name</u>	<u>Permit Number</u>	<u>Held by</u>
<u>City of Marion, AR</u>	<u>AR0021971</u>	<u>City of Marion</u>

9. Give driving directions to the wastewater treatment plant with respect to known landmarks:

From intersection of State Highway 64 and State Highway 118, go south on Highway 118 one and one quarter miles to intersection of Hardin Road. Go west on Hardin Road 1.0 miles to sewage treatment facility.

10. Facility Physical Location: (Attach a map with location marked; street, route no. or other specific identifier)

Street: 5054 Hardin Road

City: Marion

County: Crittenden

State: AR

Zip: 72364

11. Facility Mailing Address for permit, DMR, and Invoice (Street or Post Office Box):

Name: Jim Shempert Title: City Water & Sewer Operator
Street: 14 Military Road P.O. Box 717
City: Marion State: AR Zip: 72364
E-mail address*: jshempert.waterdept@yahoo.com Fax: _____

* Is emailing all documents (permit, letters, DMRs, invoices, etc.) acceptable to the applicant? Yes No

12. Neighboring States Within 20 Miles of the permitted facility (Check all that apply):

Oklahoma Missouri Tennessee Louisiana Texas Mississippi

13. Indicate applicable Standard Industrial Classification (SIC) Codes and NAICS codes for primary processes

4952 SIC Facility Activity under this SIC or NAICS:
221320 NAICS Sewerage Systems

14. Design Flow: 1.6 MGD Highest Monthly Average of the last two years Flow: 2.28 MGD

15. Is Outfall equipped with a diffuser? Yes No

16. Responsible Official (as described on the last page of this application):

Name: Frank Fogleman Title: Mayor
Address: 14 Military Road Phone Number: 870-739-5410
E-mail Address: mayormarionar@aol.com
City: Marion State: AR Zip: 72364

17. Cognizant Official (Duly Authorized Representative of responsible official as describe on the last page of this application):

Name: Jim Shempert Title: City Sewer & Water Operator
Address: 14 Military Road Phone Number: 870-739-3073
E-mail Address: jimshempert.waterdept@yahoo.com
City: Marion State: AR Zip: 72364

18. Name, address and telephone number of active consulting engineer firm (If none, so state):

Contact Name: Jerome Alford, P.E.
Company Name: Bond Consulting Engineers East, Inc.
Address: 3683 State Highway 77 North Phone Number: 870-739-2228
E-mail Address: bondengineering@hotmail.com
City: Marion State: AR Zip: 72364

19. Wastewater Operator Information

Wastewater Operator Name: Jim Shempert License number: 003245
Class of municipal wastewater operator: I II III IV
Class of industrial wastewater operator: Basic Advanced

SECTION B: FACILITY AND OUTFALL INFORMATION

1. Facility Location (All information must be based on **front door (Gate)** location of the facility):

Lat: 35 ° 11 ' 25 " Long: 90 ° 13 ' 43 " County: Crittend en Nearest Town: Marion

2. **Outfall** Location (The location of the end of the pipe Discharge point.):

Outfall No. 1:

Latitude: 35 ° 15 ' 55 " Longitude: 90 ° 06 ' 00 "

Where is the collection point? _____

Name of Receiving Stream (i.e. an unnamed tributary of Mill Creek, thence into Mill Creek; thence into Arkansas River):

Mississippi River thence Gulf of Mexico

Outfall No. _____:

Latitude: _____ ° _____ ' _____ " Longitude: _____ ° _____ ' _____ "

Where is the collection point? _____

Name of Receiving Stream (i.e. an unnamed tributary of Mill Creek, thence into Mill Creek; thence into Arkansas River):

3. **Monitoring** Location (If the monitoring is conducted at a location different than the above **Outfall** location):

Outfall No. 1:

Lat: 35 ° 11 ' 25 " Long: 90 ° 13 ' 43 "

Outfall No. _____:

Lat: _____ ° _____ ' _____ " Long: _____ ° _____ ' _____ "

Outfall No. _____:

Lat: _____ ° _____ ' _____ " Long: _____ ° _____ ' _____ "

4. Type of Treatment system (Included all components of treatment system and Attach the process flow diagram):

Three cell lagoon, chlorine contact chamber, de-chlorination. Aeration added to first and third pond

5. Do you have, or plan to have, automatic sampling equipment or continuous wastewater flow metering equipment at this facility?

Current:	Flow Metering	<input checked="" type="checkbox"/>	Yes	Type: <u>Doppler</u>	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Sampling Equipment	<input type="checkbox"/>	Yes	Type: _____	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Planned:	Flow Metering	<input checked="" type="checkbox"/>	Yes	Type: <u>Doppler</u>	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Sampling Equipment	<input type="checkbox"/>	Yes	Type: _____	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>

If yes, please indicate the present or future location of this equipment on the sewer schematic and describe the equipment below:

Proposed doppler meter on sewer forcemain near pump location

6. Is the proposed or existing facility located above the 100-year flood level? Yes No

NOTE: FEMA Map must be included with this application. Maps can be ordered at www.fema.gov.

If "No", what measures are (or will be) used to protect the facility? _____

7. Population for Municipal and Domestic Sewer Systems: 14,000

8. Backup Power Generation for Treatment Plants

Are there any permanent backup generators? Yes No

If Yes, How many? _____ Total Horespower (hp)? _____

If No, Please explain? Pond volume maintained for storage should preempt requirement for back-up power

SECTION C – WASTE STORAGE AND DISPOSAL INFORMATION

1. Sludge Disposal Method (Check as many as are applicable):

Landfill

Landfill Site Name _____ ADEQ Solid Waste Permit No. _____

Land Application: ADEQ State Permit No. _____

Septic tank Arkansas Department of Health Permit No.: _____

Distribution and Marketing: Facility receiving sludge:

Name: _____ Address: _____
City: _____ State: _____ Zip: _____ Phone: _____
Rail: _____ Pipe: _____ Other: _____

Subsurface Disposal (Lagooning):

Location of lagoon _____ How old is the lagoon? _____
Surface area of lagoon: _____ Acre Depth: _____ ft Does lagoon have a liner? Yes No

Incineration: Location of incinerator _____

Remains in Treatment Lagoon(s):

How old is the lagoon(s)? 38 years Has sludge depth been measured? Yes No
If Yes, Date measured? April 2012 Sludge Depth? .6 - .83 ft If No, When will it be measured? _____
Has sludge ever been removed? Yes No If Yes, When was it removed? _____

Other (Provide complete description): _____

SECTION D - WATER SUPPLY

Water Sources (check as many as are applicable):

Private Well - Distance from Discharge point: Within 5 miles Within 50 miles

Municipal Water Utility (Specify City): Marion/West Memphis

Distance from Discharge point: Within 5 miles Within 50 miles

Surface Water- Name of Surface Water Source: _____

Distance from Discharge point: Within 5 miles Within 50 miles

Lat: _____ ° _____ ' _____ " Long: _____ ° _____ ' _____ "

Other (Specify): _____

Distance from Discharge point: Within 5 miles Within 50 miles

SECTION E: FINANCIAL ASSURANCE AND DISCLOSURE STATEMENT

1. Arkansas Code Annotated § 8-4-203 provides for financial assurance requirements for permitting non-municipal domestic sewage treatment systems. Arkansas Code 8-4-203 (b)(1)(A)(i) – “The department shall not issue, modify, or renew a National Pollutant Discharge Elimination System permit or state permit for a non-municipal domestic sewage treatment works without the permit applicant first demonstrating to the department its financial ability to cover the estimated costs of operating and maintaining the non-municipal domestic sewage treatment works for a minimum period of five (5) years.”

The applicant must provide a detailed estimate of the operation and maintenance (O&M) costs for the facility for a five year period. Once the O&M estimate is approved, the applicant must provide **financial assurance** in order to show that the facility is able to cover the costs of operating and maintaining the treatment system for the next five years.

The minimal financial assurance may be demonstrated to the department by using the following as outlined in Arkansas Code 8-4-203(b)(2):

- A. Obtaining insurance that specifically covers operation and maintenance costs
 - B. Obtaining a letter of credit;
 - C. Obtaining a surety/performance bond;
 - D. Obtaining a trust fund or an escrow account; or
 - E. Using a combination of insurance, letter of credit, surety bond, trust fund, or escrow account.
2. Disclosure Statement:

Arkansas Code Annotated Section 8-1-106 requires that all applicants for any type of permit or transfer of any permit, license, certification or operational authority issued by the Arkansas Department of Environmental Quality (ADEQ) file a Disclosure Statement with their application. The filing of a Disclosure Statement is mandatory. No application can be considered administratively complete without a completed Disclosure Statement. The form may be obtained from the ADEQ web site at:

http://www.adeg.state.ar.us/disclosure_stmt.pdf

SECTION F – INDUSTRIAL ACTIVITY

1. Does an effluent guideline limitation promulgated by EPA ([Link to a Listing of the 40 CFR Effluent Limit Guidelines](#)) under Section 304 of the Clean Water Act (CWA) apply to your facility?

YES (Answer questions 2 and 3) NO

2. What Part of 40 CFR? _____

3. What Subpart(s)? _____

4. Give a brief description of all operations at this facility including primary products or services (attach additional sheets if necessary):

5. Production: (projected for new facilities)

Product(s) Manufactured (Brand name)	Last 12 Months		Highest Production Year of Last 5 Years	
	lbs/day*		lbs/day*	
	Highest Month	Days of Operation	Monthly Average	Days of Operation

* These units could be off-lbs, lbs quenched, lbs cleaned/etched/rinsed, lbs poured, lbs extruded, etc.

SECTION H - TECHNICAL INFORMATION

Technical information to support this application shall be furnished in appropriate detail to understand the project. Information in this Part is required for obtaining a **construction permit** or for **modification** of the treatment system.

1. Describe the treatment system. Include the types of control equipment to be installed along with their methods of operation and control efficiency.

Treatment system calls for keeping the ponds and abandoning the rock-reed filters.

Plans are to construct forcemain to discharge treated effluent to Mississippi River.

See attached information.

2. One set of construction plans and specifications, approved (Signed and stamped) by a **Professional Engineer (PE)** registered in **Arkansas**, must be submitted as follows:
 - a. The plans must show flow rates in addition to pertinent dimensions so that detention times, overflow rates, and loadings per acre, etc. can be calculated.
 - b. Specifications and complete design calculations.
 - c. All treated wastewater discharges should have a flow measuring device such as a weir or Parshall flume installed. Where there is a significant difference between the flow rates of the raw and treated wastewater, a flow measuring device should be provided both before and after treatment.
3. If this application includes a construction permit disturbing five or more acres, a storm water construction permit must be obtained by submitting a notice of intent (NOI) to ADEQ.

SECTION I: SIGNATORY REQUIREMENTS

Cognizant Official (Duly Authorized Representative)

40 CFR 122.22(b) states that all reports required by the permit, or other information requested by the Director, shall be signed by the applicant (or person authorized by the applicant) or by a duly authorized representative of that person. A person is duly authorized representative only if:

- (1) the authorization is made in writing by the applicant (or person authorized by the applicant);
- (2) the authorization specifies either an individual or a position having responsibility for the overall operation of the regulated facility or activity responsibility, or an individual or position having overall responsibility for environmental matters for the company.

The applicant hereby designates the following person as a Cognizant Official, or duly authorized representative, for signing reports, etc., including Discharge Monitoring Reports (DMR) required by the permit, and other information requested by the Director:

Signature of Cognizant Official: _____ Date: _____

Printed name of Cognizant Official: Frank Fogleman

Official title of Cognizant Official: Mayor Telephone Number: 870-739-5410

Responsible Official

The information contained in this form must be certified by a responsible official as defined in the "signatory requirements for permit applications" (40 CFR 122.22).

Responsible official is defined as follows:

- Corporation**, a principal officer of at least the level of vice president
- Partnership**, a general partner
- Sole proprietorship**: the proprietor
- Municipal, state, federal, or other public facility**: principal executive officer, or ranking elected official.

(Initial) "I certify that the cognizant official designated above is qualified to act as a duly authorized representative under the provisions of 40 CFR 122.22(b)." NOTE: If no duly authorized representative is designated in this section, the Department considers the applicant to be the responsible official for the facility and only reports, etc., signed by the applicant will be accepted by the Department.

(Initial) "I certify that, if this facility is a corporation, it is registered with the Secretary of State in Arkansas. Please provide the full name of the corporation if different than that listed in Section A above."

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations. I further certify under penalty of law that all analyses reported as less than detectable in this application or attachments thereto were performed using the EPA approved test method having the lowest detection limit for the substance tested."

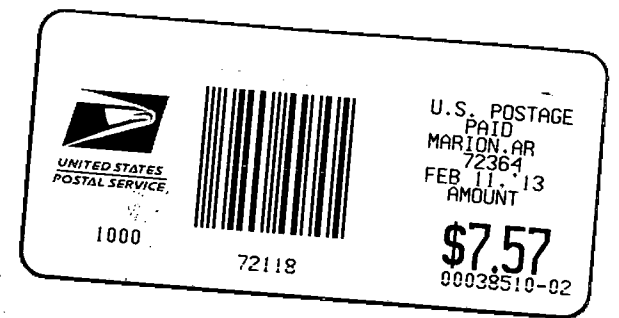
Signature of Responsible Official: Frank A. Fogleman Date: 2-4-13

Printed name of Responsible Official: FRANK A. FOGLEMAN

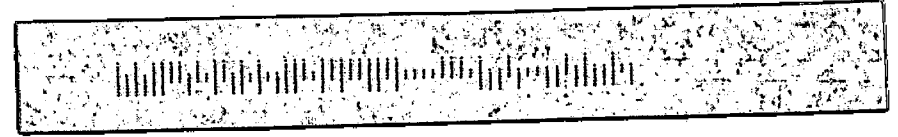
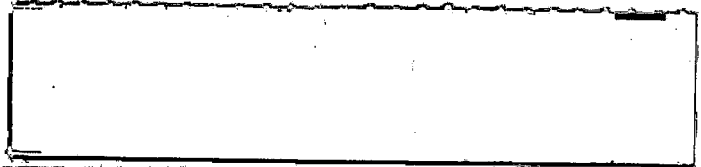
Official title of Responsible Official: MAYOR Telephone Number: 870-739-3289

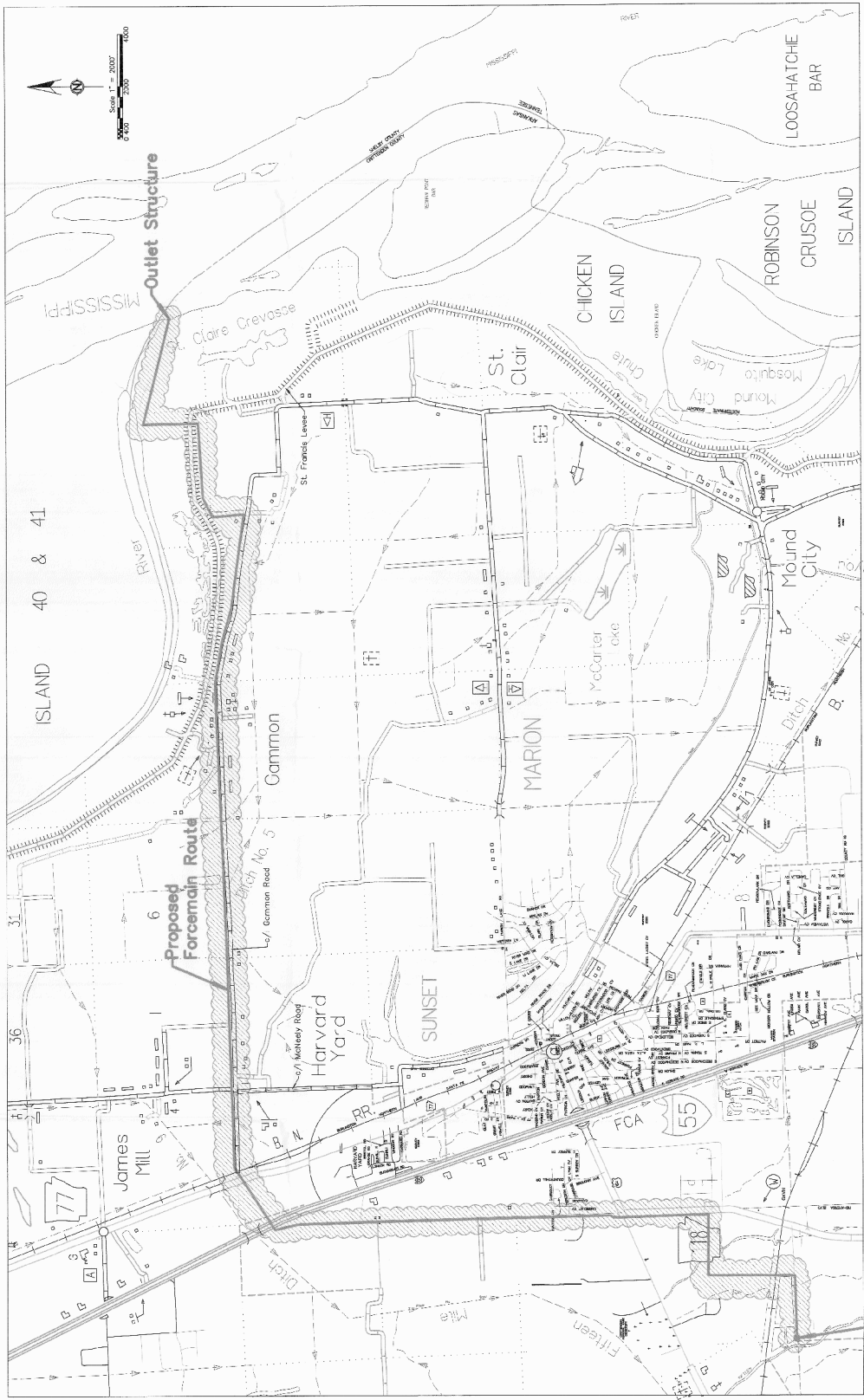
MAP(S)/PLAN(S) SCANNED IN
SEPARATE FILE

Bond Consulting Engineers
3683 Hwy 77 N.
Marion, AR 72364



ADEQ
Attn: Alan Anderson
5301 Northshore Drive
North Little Rock, AR 72118-5317





City of Marion
 Sewer Improvements
 2013

Pump Station
 & Chlorine Contact
 Station