

REPORT OF NON COMPLIANCE

NAME OF FACILITY CAVE CITY, CITY OF

PERMIT NUMBER AR0022110 001-A

PERIOD ENDING December 2015

PARAMETER VIOLATED	DO CONC INST MIN						
REPORTED VIOLATIONS	6.0						
PARAMETER VIOLATED	8						

WEEK OF Dec 23 15

Please fill out the following information

CAUSE OF VIOLATION Breaker thrown at Aerator
turned back on fixed it

DURATION OF VIOLATION 8 hrs. - 12 AM - 8 AM

CORRECTIVE ACTION turned breaker back on

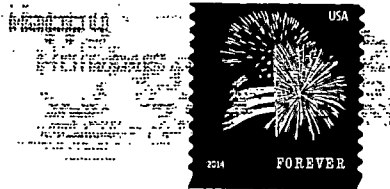
EXPECTED COMPLIANCE DATE Dec. 23rd

Jim Smith 1-19-2016
SIGNATURE / DATE

Cave City Water & Sewer
120 E Spring St.
PO Box 69
Cave City, AR 72521

UNITED STATES AIR MAIL

19 JAN 2015 PM 17



ADEQ
NPDES ENFORCEMENT

5301 Northshore Drive
North Little Rock, AR 72118

72118X5328

