

REPORT OF NON COMPLIANCE

NAME OF FACILITY WALNUT RIDGE, CITY OF

PERMIT NUMBER AR0046566 001-A

PERIOD ENDING November 2019

PARAMETER VIOLATED	CHLORINE, TOTAL RESIDUAL	CHLORINE, TOTAL RESIDUAL	CHLORINE, TOTAL RESIDUAL	CHLORINE, TOTAL RESIDUAL	CHLORINE, TOTAL RESIDUAL	CHLORINE, TOTAL RESIDUAL	CHLORINE, TOTAL RESIDUAL	CHLORINE, TOTAL RESIDUAL	CHLORINE, TOTAL RESIDUAL
REPORTED VIOLATIONS	0.06	0.050	0.040	0.060	0.050	0.330	0.060	0.060	0.070
PARAMETER VIOLATED	0.011	0.011	0.011	0.011	0.011	0.011	0.011	0.011	0.011

WEEK OF 11/04/19 11/05/19 11/06/19 11/11/19 11/12/19 11/13/19 11/18/19 11/19/19 11/25/19

Please fill out the following information

CAUSE OF VIOLATION chemical issue

DURATION OF VIOLATIO Month of november

CORRECTIVE ACTION Add more Declore we have also been doing extensive testing ourselves to double check the lab work.

EXPECTED COMPLIANCI January 1 2020

Jon Kepp 12/25/19

SIGNATURE / DATE

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PERMIT NUMBER AR0046566 001-A
PERIOD ENDING November 2019

PARAMETER VIOLATED	CHLORINE TOTAL RESIDUAL INST MAX	CHLORINE TOTAL RESIDUAL INST MAX								
REPORTED VIOLATIONS	0.090	0.08								
PARAMETER VIOLATED	0.011	0.011								
WEEK OF	11/26/19	11/27/19								

Please fill out the following information

CAUSE OF VIOLATION chemical issue

DURATION OF VIOLATION Month of november

CORRECTIVE ACTION Add more Declore we have also been doing extensive testing ourselves to double check the lab work.

EXPECTED COMPLIANCE DATE January 1 2020

Jon Kopp 12/25/19

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