REPORT OF NON COMPLIANCE

NAME OF FACILITY	WALNUT RIDGE, CITY OF							
PERMIT NUMBER	AR0046566 001-A September 2017							
PERIOD ENDING								
PARAMETER VIOLATED	CI2 DAILY MAX							
REPORTED VIOLATIONS	0.07							
PARAMETER VIOLATED	<0.011		50° SAUNEN					
WEEK OF	Sep 20 17							
Please fill out the following information								
CAUSE OF VIOLATION	Operator en	ror				·····		
DURATION OF VIOLATION	September	20th						
CORRECTIVE ACTION	Adjust DeCh	norination C	chemicals a	nd Chlorine	feed rate.			
								
		·						
EXPECTED COMPLIANCE DAT	E Septembe	r 21						
						. •		
					Jon Koj	op.	10/23/2017	
					SIG	NATURE / [DATE	