

Allen

El Dorado Water Utilities

500 NORTH WASHINGTON • P. O. BOX 1587 • EL DORADO, AR 71731 (870) 862-6451

March 31, 2010

Mr. Allen Gilliam
Arkansas Department of
Environmental Quality
5301 Northshore Drive
Little Rock, AR 72218-5317



Dear Mr. Gilliam:

Re: Permit Numbers AR 0033723, AR 0033936 and AR 0049743
Pretreatment Program Annual Report

Enclosed are Attachments "A" & "C" and the influent and effluent monitoring results for the North (AR0033936) and the South (AR0033723) Wastewater Treatment Facilities. There were no significant violators, therefore Attachment "B" was not submitted. Please note there is still no discharge from the proposed river discharge permit (AR 0049743).

If you have any questions or comments, please call me at (870) 862-6451.

Sincerely,

T. Harold Baker
Treatment Superintendent

Enclosures

ATTACHMENT C
PRETREATMENT PERFORMANCE SUMMARY (PPS)

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

I. General Information

Control Authority Name CITY OF EL DORADO

Address 500 NORTH WASHINGTON

City EL DORADO State/Zip ARKANSAS 71730

Contact Person HAROLD BAKER Position TREATMENT SUPERINTENDENT

Contact Telephone (870) 862-6451 NPDES Permit Nos. AR0033723, AR0033936, AR0049743

Reporting Period JANUARY 1, 2009 DECEMBER 31, 2009
 (Beginning Month and Year) (Ending Month and Year)

Total Number of Categorical IUs 3 (THREE)

Total Number of Significant Noncategorical IUs 3 (THREE)

Total Number of Non-Significant (yet permitted) IUs 2 (TWO)

II. Significant Industrial User Compliance

	<u>SIGNIFICANT INDUSTRIAL USERS</u>	
	<u>Categorical</u>	<u>NonCategorical</u>
1) No. of SIUs Submitting BMRs/Total No. Required.	<u>0/0</u>	<u>N/A*</u>
2) No. of SIUs Submitting 90-Day Compliance Reports/No. Required.	<u>0/0</u>	<u>N/A*</u>
3) No. of SIUs Submitting Semiannual Reports/ Total No. Required.	<u>3/3</u>	<u>0/0</u>
4) No. of SIUs Meeting Compliance Schedule/ Total No. Required to Meet Schedule	<u>0/0</u>	<u>0/0</u>
5) No. of SIUs in Significant Noncompliance/ Total No. of SIUs	<u>0/3</u>	<u>0/4</u>
6) Rate of Significant Noncompliance for all SIUs (categorical and noncategorical) . .	<u>0/7</u>	

III. Compliance Monitoring Program

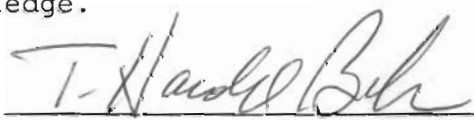
	<u>SIGNIFICANT</u> <u>Categorical</u>	<u>INDUSTRIAL USERS</u> <u>NonCategorical</u>
1) No. of Control Documents Issued/Total No. Required.	<u>3/3</u>	<u>4/4</u>
2) No. of Nonsampling Inspections Conducted. .	<u>3/3</u>	<u>4/4</u>
3) No. of Sampling Visits Conducted.	<u>40/</u>	<u>75/</u>
4) No. of Facilities Inspected (nonsampling) .	<u>3/3</u>	<u>4/4</u>
5) No. of Facilities Sampled	<u>3/3</u>	<u>4/4</u>

IV. Enforcement Actions

	<u>SIGNIFICANT</u> <u>Categorical</u>	<u>INDUSTRIAL USERS</u> <u>NonCategorical</u>
1) No. of Compliance Schedules Issued/No. of Schedules Required	<u>0/0</u>	<u>0/0</u>
2) No. of Notices of Violations Issued to SIUs	<u>0</u>	<u>0</u>
3) No. of Administrative Orders Issued to SIUs	<u>0</u>	<u>0</u>
4) No. of Civil Suits Filed.	<u>0</u>	<u>0</u>
5) No. of Criminal Suits Filed	<u>0</u>	<u>0</u>
6) No. of Significant Violators (attach newspaper publication).	<u>0</u>	<u>0</u>
7) Amount of Penalties (not surcharges) Collected (total dollars/IUs assessed) . . .	<u>0/0</u>	<u>0/0</u>
8) Other Actions (sewer bans, etc.).	<u>0</u>	<u>0</u>

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 3/31/10

PPS Program Report

* NPDES ID: AR0033723 Permittee's Name EI Dorado
 * Report Received/Event Date: 4/1/10 Date 4/19/10

Report Type

- Biosolids Program Report
- CAFO Annual Report
- CSO Event Report
- Local Limits Report
- MS4 Program Report
- Pretreatment Performance Summary Report
- SSO Annual Report
- SSO Event Report
- SSO Monthly Event Report
- Storm Water Event Report

Report Information

* Pretreatment Performance Summary Start Date: 1/1/09

Significant Industrial Users (SIUs)

SIUs: 6
 SIUs Without Control Mechanism: 0
 SIUs Not Inspected: 0
 SIUs Not Sampled: 0
 SIUs in SNC with Pretreatment Standards: 0
 SIUs in SNC with Reporting Requirements: 0
 SIUs in SNC with Pretreatment Schedule: 0
 SIUs in SNC Published in Newspaper: 0
 SIUs Schedules: 0
 Violation Notices Issued to SIUs: 0
 Administrative Orders Issued to SIUs: 0
 Civil Suits Filed Against SIUs: 0
 Criminal Suits Filed Against SIUs: 0

Categorical Industrial Users (CIUs)

CIUs: 3
 CIUs in SNC: 0

Penalties

Dollar Amount of Penalties Collected: \$ 0
 Industrial Users (IUs) from which Penalties have been collected: 0

Other Information

SUO Reference: _____
 SUO Date: _____
 Annual Pretreatment Budget: \$ _____
 Pass-Through/Interference Indicator: No
 Notification of IU Schedule for Remedial Measures: No
 Actual Response to Violation of IU Schedule for Remedial Measures: No

Local Limits

Date of Most Recent Technical Evaluation & or Local Limits: _____
 Date of Most Recent Adoption of Technically Based Local Limits: _____
 Local Limit Pollutants: _____
 ADD / REMOVE

Removal Credits

Removal Credits Application Status: Not Applicable
 Date of Most Recent Removal Credits Approval: _____
 Removal Credits: _____
 ADD / REMOVE

Acceptance of Waste

Acceptance of Hazardous Waste: No
 Acceptance of Non-Hazardous Industrial Waste: No
 Acceptance of Hauled Domestic Wastes: No

Deficiencies

Deficiencies Identified During IU File Review: No
 Control Mechanism Deficiencies: No
 Legal Authority Deficiencies: No
 Deficiencies in Data Management and Public Participation: No
 Deficiencies in Interpretation and Application of Pretreatment Standards: No
 Inadequacy of Sampling and Inspections: No
 Adequacy of Pretreatment Resources: Yes

Annual Frequency

Annual Frequency of Influent Toxicant Sampling: _____
 Annual Frequency of Effluent Toxicant Sampling: _____
 Annual Frequency of Sludge Toxicant Sampling: _____