						Form Approved OMB No. 2040-0003 Approval Expires 7-31-85		
UNITED STATES ENVIRONMENTAL PROTECTION AGENCY Washington, D.C. 20460						Approval Expires 7-51-65		
NPDES Complianc	NPDES Compliance Inspection Report							
S	Section A: Nation	nal Dat	ta Sys	stem Coding				
Transaction Code NPDES yr/mo/day Inspector Fac Type								
1 N 2 5 3 A R 0 0 2 1 2	<b>1 1</b> <sup>11</sup>	12 Remark		6 1 2 1	<b>4</b> 17	18	C 19 S 20 1	
A F I N 0 3 - 0 0 0	3 9							
Inspection Work Days Facility Evaluation R	ating	BI	Q	A			Reserved	
67 69 70 <b>5</b>	71	Ν	72	<b>N</b> 73	74 75		80	
	Section I	B: Faci	ility E	Data				
Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number)Entry Time /Date 0943 / 12-14-06City of Mountain Home Wastewater Treatment PlantPote 0943 / 12-14-06						Permit Effective Date May 1, 2005		
537 Hicks Road, ¼ mile off Highway 201 southMountain Home, AR72653Baxter County				Exit Time/Date 1416 / 12-14-06			Permit Expiration Date April 30, 2010	
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Num	ber(s)					Oth	Other Facility Data	
Mr. Terry Sanders / Plant Supervisor / 870-425-6510 Mr. James Hestley / 870-425-6510							Effluent Sample Location:	
Name Address of Responsible (Itticial/Little/Phone and Fax Number				-36-48-04.7 /-92-22-54.6				
	Section C: Areas Evaluated During Inspection (S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)							
S Permit S Flow Measurement		1		rations & Maintenan	1	S	Sampling	
S Records/Reports S Self-Monitoring	Program	S	Sluc			N	N Pollution Prevention	
S Facility Site Review S Compliance Sche	dules	Ν	Pre	etreatment	ľ	N	Multimedia	
S Effluent/Receiving Waters S Laboratory		Ν	Storm Water S			S	Other: Effluent Limits	
Section D: Summary	of Findings/Com	ments	(Atta	ch additional sheets	if necessar	y)		
During the course of the inspection the Discharge Monitoring Reports for January through November 2006 were reviewed. No effluent violations were reported during this period. The plant was found to be well-maintained and in good working condition at the time of this inspection. Required facility records were found to be well-organized and complete. The inspection found the facility to be in compliance with the terms of its permit.								
Name(s) and Signature(s) of Inspector(s)   Agency/Office/Tel     Bruce Kirkpatrick   Arkansas Dept. of     6170 /870-446-218			Environmental Quality /Jasper/ 870-446-			Date December 19, 2006		
Signature of Reviewer	Agency/Office/Phone and Fax Numbers				Date			

EPA Form 3560-3 (Rev. 9-94) Previous editions are obsolete.

PERMIT NO.: AR0021211
SECTION A - PERMIT VERIFICATION
PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS S M U NA (FURTHER EXPLANATION ATTACHED NO) DETAILS:
1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE
2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES Y N NA
3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT
4. ALL DISCHARGES ARE PERMITTED Y N NA
SECTION B - RECORDKEEPING AND REPORTING EVALUATION
RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT. S M U NA (FURTHER EXPLANATION ATTACHED NO )
1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRs.
2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE.
a) DATES, TIME(S) AND LOCATION(S) OF SAMPLING
b) NAME OF INDIVIDUAL PERFORMING SAMPLING
c) ANALYTICAL METHODS AND TECHNIQUES.
d) RESULTS OF ANALYSES AND CALIBRATIONS.
e) DATES AND TIMES OF ANALYSES.
f) NAME OF PERSON(S) PERFORMING ANALYSES. ■Y N NA
3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE.
4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR.
5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA.
SECTION C - OPERATIONS AND MAINTENANCE
TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED. S M U NA (FURTHER EXPLANATION ATTACHED <u>No</u> ) DETAILS: Lift stations are checked daily. The County Road 390 Lift Station was inspected and found in good condition with audible and visible alarms.
1. TREATMENT UNITS PROPERLY OPERATED.
2. TREATMENT UNITS PROPERLY MAINTAINED ■ S M U NA
3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED. (Generator- 60 kw)
4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE.
5. ALL NEEDED TREATMENT UNITS IN SERVICE.
6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED.
7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED.
8. OPERATION AND MAINTENANCE MANUAL AVAILABLE.
STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED.
PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED.
PAGE 2 OF 4

	PERMIT NO.: AR0021211
SECTION C - OPERATIONS AND MAINTENANCE (CONT'D)	
9. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR? IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED? HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS?	■YNNA ■YNNA ■YNNA
10.HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT? IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT?	Y■N NA Y N■NA
SECTION D - SAMPLING	
PERMITTEE Sampling MEETS PERMIT REQUIREMENTS. <b>S</b> M U NA (FURTHER E) DETAILS: <b>Permit specifies 6 hr. composite for CBOD, TSS, and Nh3-N. Facility is collecting 24 hr. composite which was</b>	XPLANATION ATTACHED <u>No</u> ). noted on all DMR's reviewed.
1. SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT.	■ Y N NA
2. LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES.	■ Y N NA
3. FLOW PROPORTIONED SAMPLES OBTAINED WHEN REQUIRED BY PERMIT.	■Y N NA
4. SAMPLING AND ANALYSES COMPLETED ON PARAMETERS SPECIFIED IN PERMIT.	■Y N NA
5. SAMPLING AND ANALYSES PERFORMED AT FREQUENCY SPECIFIED IN PERMIT.	■ Y N NA
6. SAMPLE COLLECTION PROCEDURES ADEQUATE	Y N NA
a) SAMPLES REFRIGERATED DURING COMPOSITING.	Y N NA
b) PROPER PRESERVATION TECHNIQUES USED.	Y N NA
c) CONTAINERS AND SAMPLE HOLDING TIMES CONFORM TO 40 CFR 136	■ Y N NA
7. IF MONITORING AND ANALYSES ARE PERFORMED MORE OFTEN THAN REQUIRED BY PERMIT, ARE THE RESULTS REPORTED IN PERMITTEE'S SELF-MONITORING REPORT?	□Y N ■NA
SECTION E - FLOW MEASUREMENT	
PERMITTEE FLOW MEASUREMENT MEETS PERMIT REQUIREMENTS.	R EXPLANATION ATTACHED No_)
1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED. TYPE OF DEVICE <u>2 foot Parshall flume</u>	■Y N NA
2. FLOW MEASURED AT EACH OUTFALL AS REQUIRED.	■ Y N NA
3. SECONDARY INSTRUMENTS (TOTALIZERS, RECORDERS, ETC.) PROPERLY OPERATED AND MAINTAINED.	■ Y N NA
4. CALIBRATION FREQUENCY ADEQUATE. (DATE OF LAST CALIBRATION ( <b>April 25, 2006</b> ) RECORDS MAINTAINED OF CALIBRATION PROCEDURES. CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE. (monthly)	■YNNA ■YNNA ■YNNA
5. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE.	■Y N NA
6. HEAD MEASURED AT PROPER LOCATION.	■Y N NA
7. FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES.	■Y N NA
SECTION F - LABORATORY	
PERMITTEE LABORATORY PROCEDURES MEET PERMIT REQUIREMENTS.	R EXPLANATION ATTACHED NO $)$
1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(b) FOR SLUDGES)	■ Y N NA PAGE 3 OF 4

						PERMIT	NO.: AR0021211
SECTION F - LABOR	ATORY (CONT'D)						
2. IF ALTERNATIVE A	NALYTICAL PROCED	OURES ARE USED, PR	OPER APPROVAL HA	AS BEEN OBTAINED		Y N	■ NA
3. SATISFACTORY C	ALIBRATION AND MA	INTENANCE OF INST	RUMENTS AND EQUI	PMENT.		∎S M U	NA
4. QUALITY CONTRO	L PROCEDURES ADI	EQUATE.				∎S M U	NA
5. DUPLICATE SAMP	LES ARE ANALYZED.	. <u>100_</u> % OF THE TIME				∎Y N	I NA
6. SPIKED SAMPLES	ARE ANALYZED. 100	% OF THE TIME.				∎Y N	I NA
7. COMMERCIAL LAB	BORATORY USED.	(State certified)				∎Y N	N NA
LAB NAME <b>ETC</b> LAB ADDRESS <u>2790 Whitten Road, Memphis, TN 38133 (901-213-2400)</u> PARAMETERS PERFORMED <u>Biomonitoring, Influent&amp; effluent priority pollutant scan, copper, sludge analyses</u>							
SECTION G - (EFFLU	SECTION G – (EFFLUENT)/RECEIVING WATERS OBSERVATIONS.						
Based on visual	observations or	nly.					
OUTFALL NO.	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOAT SOL.	COLOR	OTHER
001	None	None	None	None	None	Clear	
Comments:							
SECTION H - SLUDG	E DISPOSAL						
DETAILS: Grit and B	MEETS PERMIT REQ ar screen waste disp CLP, Paint Filter and F	osed at a class 1 land	fill. By means of a be	elt press, the sludge is o	(FURTHER EXPLANATION dewatered with the soli ludge was disposed at	ds disposed a	
1. SLUDGE MANAGE	SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY.					J NA	
2. SLUDGE RECORD	SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503. ■S M U □NA						□NA
3. FOR LAND APPLIE	ED SLUDGE, TYPE OF	F LAND APPLIED TO:	<b>N/A</b> (e.g., FOREST	, AGRICULTURAL, PUB	BLIC CONTACT SITE)		
SECTION I - SAMPLI	SECTION I - SAMPLING INSPECTION PROCEDURES (FURTHER EXPLANATION ATTACHED NO						_)
1. SAMPLES OBTAIN	ED THIS INSPECTIO	N.				Y∎N	I NA
2. TYPE OF SAMPLE GRAB C	OBTAINED - <b>N/A</b> OMPOSITE SAMPLE		DDFR	EQUENCY			
3. SAMPLES PRESE	RVED.				<u>.</u>	YN	I ■ NA
4. FLOW PROPORTIONED SAMPLES OBTAINED. Y N ■ NA						I ■ NA	
5. SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE. Y N ■ NA						I ■ NA	
6. SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE. Y N NA						I ■ NA	
7. SAMPLE SPLIT WITH PERMITTEE. Y N ■ NA						I ■ NA	
8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED. Y N ■ NA						I ■ NA	
9. SAMPLES COLLEC	CTED IN ACCORDANC	CE WITH PERMIT.				Y N	I ■ NA PAGE 4 OF 4

Attachment #1 AR0021211 December 14, 2006

## FLOW CALCULATION SHEET

Field Data: Date <u>12/14/2006</u> Time <u>1006</u>

Head in Inches <u>9.75</u>" = <u>0.8125</u> Feet

Type & Size of Primary Flow Measurement Device **2 Foot Parshall Flume** Name & Model of Secondary Flow Measurement Device **Isco 3230** 

Recorded Flow at date & time listed above 3.79 MGD

Flows are calculated from flow charts taken from the <u>ISCO Open Channel Flow Measurement Handbook-5th</u> <u>Edition</u>

From Table 13-8 Flow = 3.75 MGD

% error = <u>(recorded value - calculated value)</u> x 100 calculated value

% error =  $\underline{3.79-3.75}_{3.75}$  x 100 3.75

% error = 1.1 % Percent error less than +/- 10 %-- OK

## Attachment #2 AR0021211 December 14, 2006

## **DMR Calculation Check**

Reporting Period: From	2006     10       Year     Month	<u>01</u> To <u>2006</u> Day Year	<u>    10     01   </u> Month     Day			
Parameter Checked: <u>Total Suspended Solids (TSS)</u>						
	<u>Ouantity</u> Mass Monthly <u>Avg-lb/day</u>	Monthly <u>Avg-Mg/L</u>	7-day <u>Avg-Mg/l</u>			
Reported Value:	102.65	4.73	5.4			
Calculated Value:	103	4.63	5.4			
Permit Value:	625.5	15	23			

If calculated value does not equal reported value, explain: Slight differences most likely due to rounding. OK



December 27, 2006

Ms. Alma Clark, Director of Water and Wastewater City of Mountain Home 720 South Hickory Mountain Home, AR 72653

Re: AFIN: 03-00039 NPDES Permit No. AR0021211

Dear Ms. Clark:

On December 14, 2006, I performed a routine permit compliance inspection of the Mountain Home Wastewater Treatment facility in accordance with the provisions of the federal Clean Water Act, the Arkansas Water and Air Pollution Control Act and the regulations promulgated thereunder. This inspection revealed that you are in compliance with the terns of your permit.

If you have any questions concerning this inspection, please feel free to contact me at 870-446-6170.

Sincerely,

Can Hebihrt

Bruce Kirkpatrick District Field Inspector Water Division

cc: NPDES Branch