



Form Approved  
OMB No. 2040-0003  
Approval Expires 7-31-85

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
Washington, D.C. 20460  
**NPDES Compliance Inspection Report**

Section A: National Data System Coding

|   |                            |           |                 |           |          |
|---|----------------------------|-----------|-----------------|-----------|----------|
| Transaction Code  | NPDES                      | yr/mo/day | Inspection Type | Inspector | Fac Type |
| 1 N 2 5 3 A R 0 0 3 6 6 9 2 11 12 0 7 0 5 0 2 17 18 C 19 T 20 1 |                            |           |                 |           |          |
| Remarks   |                            |           |                 |           |          |
| A F I N 5 7 - 0 0 0 4 2 P O L K C O U N T Y                     |                            |           |                 |           |          |
| Inspection Work Days  | Facility Evaluation Rating | BI        | QA              | Reserved  |          |
| 67 69   | 70 4                       | 71 N      | 72 N            | 73 74 75  | 80       |

Section B: Facility Data

|  |   |                        |
|--|---|------------------------|
| Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number) | Entry Time /Date  | Permit Effective Date  |
| City of Mena Wastewater Treatment Plant<br>- on County Road 53, north off of Hwy 8, east of Mena                                   | 0954 / 5-2-2007   | July 1, 2006           |
|  | Exit Time/Date  | Permit Expiration Date |
|  | 1320 / 5-2-2007   | June 30, 2011          |
| Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)  | Other Facility Data   |                        |
| Mike Spencer / Wastewater Plant Supervisor / (479) 394-1239  | Major mun.  |                        |
| Name, Address of Responsible Official/Title/Phone and Fax Number   | Contacted   |                        |
| Jeff Wallace / System Manager, Water & Sewer Department / (479) 394-1132<br>701 Mena Street<br>Mena, AR 71953                      | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |                        |

Section C: Areas Evaluated During Inspection  
(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

|   |                           |   |                         |   |                          |   |                      |
|---|---------------------------|---|-------------------------|---|--------------------------|---|----------------------|
| S | Permit                    | S | Flow Measurement        | S | Operations & Maintenance | S | Sampling             |
| S | Records/Reports           | M | Self-Monitoring Program | N | Sludge Handling/Disposal | N | Pollution Prevention |
| S | Facility Site Review      | N | Compliance Schedules    | N | Pretreatment             | N | Multimedia           |
| M | Effluent/Receiving Waters | M | Laboratory              | N | Storm Water              | N | Other:               |

Section D: Summary of Findings/Comments (Attach additional sheets if necessary)

Sec. C – The freeboard on both ponds appeared to be high, but couldn't be verified. Ten States Standards requires a minimum of three feet of freeboard for large systems and two feet of freeboard for small systems. In order to anticipate the need for an increase in discharge, to prevent a freeboard violation, the influent flow meter should be repaired to an accurate and reliable condition.

Sec. F,1 – Facility is not following specific laboratory procedures for the following two parameters: GGA is not being used on every sample run and the NH3-N samples are not being distilled prior to analyses. Both of these procedures required additional time and cost, that, under certain circumstances, are better suited for a contract laboratories expertise.

Sec. G – The permit states “no discharge of distinctly visible solids”. During the inspection, on occasion, large masses of solids were observed to be discharged over the weir.

|  |                                     |             |
|--|-------------------------------------|-------------|
| Name(s) and Signature(s) of Inspector(s) | Agency/Office/Telephone/Fax         | Date        |
| Shan Lynch                               | ADEQ / District 12 / (870) 389-6970 | May 3, 2007 |
| Signature of Reviewer                    | Agency/Office/Phone and Fax Numbers | Date        |

**SECTION A - PERMIT VERIFICATION**

 PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS  
 DETAILS:

☒ S ☐ M ☐ U ☐ NA (FURTHER EXPLANATION ATTACHED no )

- |   |  |
|---|--|
| 1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE                            | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA |
| 2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA |
| 3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT           | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA |
| 4. ALL DISCHARGES ARE PERMITTED   | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA |

**SECTION B - RECORDKEEPING AND REPORTING EVALUATION**

 RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT.  
 DETAILS:

☒ S ☐ M ☐ U ☐ NA (FURTHER EXPLANATION ATTACHED no )

- |  |   |
|--|---|
| 1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRs.                         | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA                            |
| 2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE.                                  | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA |
| a) DATES, TIME(S) AND LOCATION(S) OF SAMPLING  | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA                            |
| b) NAME OF INDIVIDUAL PERFORMING SAMPLING  | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA                            |
| c) ANALYTICAL METHODS AND TECHNIQUES.  | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA                            |
| d) RESULTS OF ANALYSES AND CALIBRATIONS.   | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA                            |
| e) DATES AND TIMES OF ANALYSES.  | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA                            |
| f) NAME OF PERSON(S) PERFORMING ANALYSES.  | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA                            |
| 3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE.                | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA |
| 4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR.       | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA |
| 5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA. | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA                            |

**SECTION C - OPERATIONS AND MAINTENANCE**

 TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED.  
 DETAILS:

☒ S ☐ M ☐ U ☐ NA (FURTHER EXPLANATION ATTACHED yes )

- |   |   |
|---|---|
| 1. TREATMENT UNITS PROPERLY OPERATED.                               | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA |
| 2. TREATMENT UNITS PROPERLY MAINTAINED..                            | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA |
| 3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED.                      | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA |
| 4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE. | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA |
| 5. ALL NEEDED TREATMENT UNITS IN SERVICE.                           | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA |
| 6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED.                 | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA |
| 7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED.                   | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA |
| 8. OPERATION AND MAINTENANCE MANUAL AVAILABLE.                      | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA                            |
| STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED.            | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA                            |
| PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED.             | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA                            |

**SECTION C - OPERATIONS AND MAINTENANCE (CONT'D)**

9. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR? ☒ Y ☐ N ☐ NA  
 IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED? ☒ Y ☐ N ☐ NA  
 HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS? ☒ Y ☐ N ☐ NA

10. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT? ☐ Y ☒ N ☐ NA  
 IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT? ☐ Y ☐ N ☒ NA

**SECTION D - SAMPLING**

PERMITTEE SELF-MONITORING MEETS PERMIT REQUIREMENTS. ☒ S ☐ M ☐ U ☐ NA (FURTHER EXPLANATION ATTACHED no).  
 DETAILS:

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. ☒ S ☐ M ☐ U ☐ NA (FURTHER EXPLANATION ATTACHED no )  
 DETAILS:

1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED. ☒ Y ☐ N ☐ NA  
 TYPE OF DEVICE V notch weir

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 4-20-2007 ) ☒ Y ☐ N ☐ NA  
 RECORDS MAINTAINED OF CALIBRATION PROCEDURES. ☒ Y ☐ N ☐ NA  
 CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE. ☒ Y ☐ N ☐ NA

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. ☐ S ☒ M ☐ U ☐ NA (FURTHER EXPLANATION ATTACHED yes )  
 DETAILS:

1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(b) FOR SLUDGES) ☐ Y ☒ N ☐ NA

|   |                      |        |           |  |            |       |       |
|---|----------------------|--------|-----------|--|------------|-------|-------|
|   | PERMIT NO. AR0036692 |        |           |  |            |       |       |
| <b>SECTION F - LABORATORY (CONT'D)</b>  |                      |        |           |  |            |       |       |
| 2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED <span style="float: right;"><input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA</span>   |                      |        |           |  |            |       |       |
| 3. SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT. <span style="float: right;"><input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA</span>                            |                      |        |           |  |            |       |       |
| 4. QUALITY CONTROL PROCEDURES ADEQUATE. <span style="float: right;"><input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA</span>  |                      |        |           |  |            |       |       |
| 5. DUPLICATE SAMPLES ARE ANALYZED, >10 % OF THE TIME. <span style="float: right;"><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA</span>   |                      |        |           |  |            |       |       |
| 6. SPIKED SAMPLES ARE ANALYZED, >10 % OF THE TIME. <span style="float: right;"><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA</span>  |                      |        |           |  |            |       |       |
| 7. COMMERCIAL LABORATORY USED. <span style="float: right;"><input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA</span>  |                      |        |           |  |            |       |       |
| LAB NAME <u>BioAquatic Testing, Inc.</u><br>LAB ADDRESS <u>2501 Mayes Rd., Ste. 100; Carrollton, TX 75006</u><br>PARAMETERS PERFORMED <u>Biomonitoring</u>  |                      |        |           |  |            |       |       |
| <b>SECTION G - EFFLUENT/RECEIVING WATERS OBSERVATIONS.</b> <span style="float: right;"><input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA (FURTHER EXPLANATION ATTACHED <u>no</u>).</span> |                      |        |           |  |            |       |       |
| <b>Based on visual observations only.</b>   |                      |        |           |  |            |       |       |
| OUTFALL NO.   | OIL SHEEN            | GREASE | TURBIDITY | VISIBLE FOAM   | FLOAT SOL. | COLOR | OTHER |
| 001   | none                 | none   | high      | slight   | slight     | clear | NA    |
|   |                      |        |           |  |            |       |       |
|   |                      |        |           |  |            |       |       |
|   |                      |        |           |  |            |       |       |
| Comments: some solids observed in receiving stream; large chunks of floating solids over weir.  |                      |        |           |  |            |       |       |
| <b>SECTION H - SLUDGE DISPOSAL</b>  |                      |        |           |  |            |       |       |
| SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS. DETAILS:   |                      |        |           | <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA (FURTHER EXPLANATION ATTACHED <u>no</u> ). |            |       |       |
| 1. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY.   |                      |        |           | <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA  |            |       |       |
| 2. SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503.   |                      |        |           | <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA  |            |       |       |
| 3. FOR LAND APPLIED SLUDGE, TYPE OF LAND APPLIED TO: NA (e.g., FOREST, AGRICULTURAL, PUBLIC CONTACT SITE)   |                      |        |           |  |            |       |       |
| <b>SECTION I - SAMPLING INSPECTION PROCEDURES</b>   |                      |        |           | (FURTHER EXPLANATION ATTACHED <u>no</u> ).   |            |       |       |
| 1. SAMPLES OBTAINED THIS INSPECTION.  |                      |        |           | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA   |            |       |       |
| 2. TYPE OF SAMPLE OBTAINED    NA  |                      |        |           |  |            |       |       |
| GRAB  | COMPOSITE            | SAMPLE | METHOD    | FREQUENCY  |            |       |       |
| 3. SAMPLES PRESERVED.   |                      |        |           | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA   |            |       |       |
| 4. FLOW PROPORTIONED SAMPLES OBTAINED.  |                      |        |           | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA   |            |       |       |
| 5. SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE.   |                      |        |           | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA   |            |       |       |
| 6. SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE.   |                      |        |           | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA   |            |       |       |
| 7. SAMPLE SPLIT WITH PERMITTEE.   |                      |        |           | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA   |            |       |       |
| 8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED.  |                      |        |           | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA   |            |       |       |
| 9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT.   |                      |        |           | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA   |            |       |       |

## DMR Calculation Check

**Reporting Period:** From   07     02     01   **To**   07     02     28

Year       Month       Day                  Year       Month       Day

**Parameter Checked:** CBOD

|                          | Loading<br>Mass<br>Monthly Avg. (lbs/ day) | Concentration<br>Monthly<br>Avg.-Mg/l | 7-day<br>Avg- Mg/l |
|--------------------------|--|---------------------------------------|--------------------|
| <b>Reported Value:</b>   | 111.2                                      | 7.82                                  | 9.58               |
| <b>Calculated Value:</b> | 111.2                                      | 7.82                                  | 9.58               |
| <b>Permit Value:</b>     | 259  | 10                                    | 15                 |

**If calculated value does not equal reported value, explain:** same

## FLOW CALCULATION SHEET

Field Data: Date 5-2-2007 Time 1004  
Head in Inches 13 3/4  
Type & Size of Primary Flow Measurement Device 90 degree V notch weir  
Name & Model of Secondary Flow Measurement Device Milltronics Hydroranger  
Recorded Flow at date & time listed above 1559 gpm

Flows are calculated from flow charts taken from the ISCO Open Channel Flow Measurement Handbook

Calculations:

$$13 \frac{3}{4} = 13.75 / 12 = 1.145 \text{ hf} = 1574 \text{ gpm}$$

$$\% \text{ error} = \frac{\text{recorded value} - \text{calculated value}}{\text{calculated value}} \times 100$$

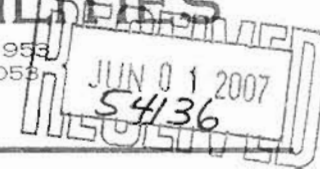
$$\frac{1559 - 1574}{1574} (100) = \frac{-15}{1574} (100) = -0.0095 (100) = -0.95 \% \text{ error}$$



# MENA WATER UTILITIES

701 MENA STREET - MENA, ARKANSAS - 71953  
PH (479) 394-2761 - FAX (479) 394-5058

*SL to Frank*



31-May-07

Mr. Shan Lynch  
District Field Inspector  
Water Division  
P.O. Box 8913  
Little Rock, AR 72219-8913

Mr. Lynch

I have received your letter and information in regards to the inspections of our Water Treatment Plant and Wastewater Treatment Plant on May 1, 2007 and May 2, 2007 respectively. AFIN# 57-00042

Listed below are the corrective actions taken to correct the violations.

## ARG640043

1. With reference to paragraph 1 & 2. The Mena Water plant has corrected the form used for PH and Chlorine Analysis. It will now reflect the correct method used to measure chlorine, the date and time of the analysis and the name of the person doing the analysis. It also has a location to record the calibration records for the spectrophotometer used to measure the chlorine.
2. Both filters backwash ponds will be pumped out and land applied according to our land application permit.

## 4426-WG-WR-2

- 1 With reference to paragraph 1, due to an oversight, no tests were done for the following required parameters: Volatile Solids (%), CaCO<sub>3</sub> (%), and Total Organic Carbon (%). These will be corrected in the next reporting period.

## AR0036692

- 1 With reference to paragraph 1. The Mena Wastewater plant is deferring its CBOD and NH<sub>3</sub>-N to a certified water analysis lab, due mainly to manpower constraints and equipment cost of purchasing new lab equipment. These changes took effect 7 May 2007. The outside lab will run GGA daily and properly distill the NH<sub>3</sub>-N. The lab is as follows:

Data Testing Inc.  
3434 Country Club  
Ft Smith, AR. 72903 Phone: 479-649-8378

3. With reference to Para. 2, the visible solids are the result of foaming from the alum and polymer and has dried up with attached to the lily pads downstream of point source. This foam is usually isolated and contained at the point source with the floating buoys at the beginning of the stream. Some foam has carried over and since inspection has been cleaned up with telescopic pool net and disposed of in the primary lagoon.
4. A new influent meter is being researched and recommendation to purchase will be given to water commission at next meeting.