ADEQ
ARKANSAS
Department of Environmental Quality

January 11, 2008

Mr. Hugh W. Harrison, III
General Manager
Clarksville Light and Water Company
P.O. Box 1807
Clarksville, AR 72830

Re: AFIN: 36-00038; NPDES Permit No. AR0022187

Dear Mr. Harrison:

On December 13, 2007, I performed a compliance evaluation inspection of your facility in accordance with the provisions of the federal Clean Water Act, the Arkansas Water and Air Pollution Control Act and the regulations promulgated there under. This inspection revealed that you are in compliance with the terms of your permit.

If I can be of any assistance, please contact me at 870-446-6170.

Sincerely,

Bruce Kirkpatrick
District Field Inspector
Water Division

cc: Water Division Enforcement Branch
Water Division Permits Branch

EPA

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
Washington, D.C. 20460

Form Approved
OMB No. 2040-0003

NPDES Compliance Inspection Report

Section A: National Data System Coding

Transaction Code	NPDES	Yr/Mo/Day	Inspec. Type	Inspector	Fac. Type
N	5	ARK0022187	071213	C	S	1

Remarks: AFIN 36-00038

Inspection Work Days	Facility Evaluation Rating	BI	QA	Reserved
	5	N	N	

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
Clarksville Light and Water Pollution Control Facility Located on South Crawford Highway one mile South of Interstate 40 Exit 57 in Sections 7 & 8, Township 9 North, Range 23 West, in Johnson County, Arkansas	**0722 / December 13, 2007**	**January 1, 2004**
	Exit Time/Date **1430 / December 13, 2007**	Permit Expiration Date **December 31, 2008**

Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)
Mr. Gregg Rainey / Pollution Control Facility Superintendent / Phone: 479-754-7929 / Fax: 479-754-6885

Other Facility Data
Outfall OO1 sample point located at
Latitude N 35-26-38.8
Longitude W 93-29-05.4
Outfall 002 sample point located at
Latitude N 35-26-44.3
Longitude W 93-28-24.8

Name, Address of Responsible Official/Title/Phone and Fax Number
Mr. Hugh W. Harrison, III, General Manager
Clarksville Light and Water Co.
P.O. Box 1807
Clarksville, AR 72830 / Phone 479-754-6241

Contacted
Yes ☐ No ☑

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**	S	**Self-Monitoring Program**	S	**Sludge Handling/Disposal**	N	**Pollution Prevention**
S	**Facility Site Review**	N	**Compliance Schedules**	N	**Pretreatment**	N	**Multimedia**
S	**Effluent/Receiving Waters**	S	**Laboratory**	S	**Storm Water**	N	**Other:**

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

A review of 2007 discharge monitoring reports revealed one numeric effluent limit violation. For the June 2007 reporting period, the facility reported 7-day average fecal coliform bacteria concentration of 547 colonies per 100 milliliter which exceeded the permit limit of 400. A non-compliance report was submitted to the Department. No further action is necessary. No other violations were reported. The facility reported a Lethal/Sublethal Effects Biomonitoring test failure in February 2007. Test failure was attributed to cold water pathogenic fungus. The ADEQ Water Division did not require a retest. The plant was found to be operated and maintained well.

Name(s) and Signature(s) of Inspector(s) Bruce Kirkpatrick	Agency/Office/Telephone/Fax	Date
	AR Dept. of Environmental Quality-Jasper **PHONE# (870) 446-6170 / FAX# (870) 446-2181**	**December 17, 2007**
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date

SECTION A: PERMIT VERIFICATION

PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS	☑S ☐M ☐U ☐NA ☐NE
DETAILS:	
1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE:	☑Y ☐N ☐NA ☐NE
2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES:	☐Y ☑N ☐NA ☐NE
3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT:	☑Y ☐N ☐NA ☐NE
4. ALL DISCHARGES ARE PERMITTED:	☑Y ☐N ☐NA ☐NE

SECTION B: RECORDKEEPING AND REPORTING EVALUATION

RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT	☑S ☐M ☐U ☐NA ☐NE
DETAILS:	
1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRS:	☑Y ☐N ☐NA ☐NE
2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE:	☑S ☐M ☐U ☐NA ☐NE
a. DATES AND TIME(S) OF SAMPLING:	☑Y ☐N ☐NA ☐NE
b. EXACT LOCATION(S) OF SAMPLING:	☑Y ☐N ☐NA ☐NE
c. NAME OF INDIVIDUAL PERFORMING SAMPLING:	☑Y ☐N ☐NA ☐NE
d. ANALYTICAL METHODS AND TECHNIQUES:	☑Y ☐N ☐NA ☐NE
e. RESULTS OF CALIBRATIONS:	☑Y ☐N ☐NA ☐NE
f. RESULTS OF ANALYSES:	☑Y ☐N ☐NA ☐NE
g. DATES AND TIMES OF ANALYSES:	☑Y ☐N ☐NA ☐NE
h. NAME OF PERSON(S) PERFORMING ANALYSES:	☑Y ☐N ☐NA ☐NE
3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE:	☑S ☐M ☐U ☐NA ☐NE
4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR:	☑S ☐M ☐U ☐NA ☐NE
5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA:	☑Y ☐N ☐NA ☐NE

SECTION C: OPERATIONS AND MAINTENANCE

TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED	☑S ☐M ☐U ☐NA ☐NE
DETAILS:	
1. TREATMENT UNITS PROPERLY OPERATED:	☑S ☐M ☐U ☐NA ☐NE
2. TREATMENT UNITS PROPERLY MAINTAINED:	☑S ☐M ☐U ☐NA ☐NE
3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED:	☑S ☐M ☐U ☐NA ☐NE
4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE:	☑S ☐M ☐U ☐NA ☐NE
5. ALL NEEDED TREATMENT UNITS IN SERVICE:	☑S ☐M ☐U ☐NA ☐NE
6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED:	☑S ☐M ☐U ☐NA ☐NE
7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED:	☑S ☐M ☐U ☐NA ☐NE
8. OPERATION AND MAINTENANCE MANUAL AVAILABLE:	☑Y ☐N ☐NA ☐NE
9. STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED:	☑Y ☐N ☐NA ☐NE
10. PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED:	☑Y ☐N ☐NA ☐NE
11. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR:	☑Y ☐N ☐NA ☐NE
12. IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED:	☑Y ☐N ☐NA ☐NE
13. HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS:	☑Y ☐N ☐NA ☐NE
14. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT:	☐Y ☑N ☐NA ☐NE
15. IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT:	☐Y ☐N ☑NA ☐NE

SECTION D: SAMPLING

PERMITTEE SAMPLING MEETS PERMIT REQUIREMENTS	☑S ☐M ☐U ☐NA ☐NE
DETAILS:	
1. SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT:	☑Y ☐N ☐NA ☐NE
2. LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES:	☑Y ☐N ☐NA ☐NE
3. FLOW PROPORTIONED SAMPLES OBTAINED WHEN REQUIRED BY PERMIT:	☑Y ☐N ☐NA ☐NE
4. SAMPLING AND ANALYSES COMPLETED ON PARAMETERS SPECIFIED IN PERMIT:	☑Y ☐N ☐NA ☐NE
5. SAMPLING AND ANALYSES PERFORMED AT FREQUENCY SPECIFIED IN PERMIT:	☑Y ☐N ☐NA ☐NE
6. SAMPLE COLLECTION PROCEDURES ADEQUATE:	☑Y ☐N ☐NA ☐NE
a. SAMPLES REFRIGERATED DURING COMPOSITING:	☑Y ☐N ☐NA ☐NE
b. PROPER PRESERVATION TECHNIQUES USED:	☑Y ☐N ☐NA ☐NE
c. CONTAINERS AND SAMPLE HOLDING TIMES CONFORM TO 40 CFR 136:	☑Y ☐N ☐NA ☐NE
7. IF MONITORING IS PERFORMED MORE OFTEN THAN REQUIRED ARE RESULTS REPORTED ON THE DMR:	☐Y ☑N ☐NA ☐NE

SECTION E: FLOW MEASUREMENT

PERMITTEE FLOW MEASUREMENT MEETS PERMIT REQUIREMENTS	☑S ☐M ☐U ☐NA ☐NE
DETAILS:	
1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED: TYPE OF DEVICE: **ultrasonic meter on 001**	☑Y ☐N ☐NA ☐NE
2. FLOW MEASURED AT EACH OUTFALL AS REQUIRED:	☑Y ☐N ☐NA ☐NE
3. SECONDARY INSTRUMENTS (TOTALIZERS, RECORDERS, ETC.) PROPERLY OPERATED AND MAINTAINED:	☑Y ☐N ☐NA ☐NE
4. CALIBRATION FREQUENCY ADEQUATE:	☑Y ☐N ☐NA ☐NE
5. RECORDS MAINTAINED OF CALIBRATION PROCEDURES:	☑Y ☐N ☐NA ☐NE
6. CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE:	☑Y ☐N ☐NA ☐NE
7. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE:	☐Y ☐N ☐NA ☑NE
8. FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES:	☑Y ☐N ☐NA ☐NE
9. HEAD MEASURED AT PROPER LOCATION:	☐Y ☐N ☑NA ☐NE

SECTION F: LABORATORY

PERMITTEE LABORATORY PROCEDURES MEET PERMIT REQUIREMENTS	☑S ☐M ☐U ☐NA ☐NE
DETAILS:	
1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(B) FOR SLUDGES) :	☑Y ☐N ☐NA ☐NE
2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED:	☑Y ☐N ☐NA ☐NE
3. SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT:	☑Y ☐N ☐NA ☐NE
4. QUALITY CONTROL PROCEDURES ADEQUATE:	☑Y ☐N ☐NA ☐NE
5. DUPLICATE SAMPLES ARE ANALYZED ≥10% OF THE TIME:	☑Y ☐N ☐NA ☐NE
6. SPIKED SAMPLES ARE ANALYZED ≥10% OF THE TIME:	☑Y ☐N ☐NA ☐NE
7. COMMERCIAL LABORATORY USED:	☑Y ☐N ☐NA ☐NE
a. LAB NAME: **Huther and Associates**	
b. LAB ADDRESS: **1156 North Bonnie, Denton TX 76202**	
c. PARAMETERS PERFORMED: **Biomonitoring**	
8. BIOMONITORING PROCEDURES ADEQUATE:	☑Y ☐N ☐NA ☐NE
a. PROPER ORGANISMS USED:	☑Y ☐N ☐NA ☐NE
b. PROPER DILUTION SERIES FOLLOWED:	☑Y ☐N ☐NA ☐NE
c. PROPER TEST METHODS AND DURATION:	☑Y ☐N ☐NA ☐NE
d. RETESTS AND/OR TRE PERFORMED AS REQUIRED:	☐Y ☐N ☑NA ☐NE

SECTION G: EFFLUENT/RECEIVING WATERS OBSERVATIONS

BASED ON VISUAL OBSERVATIONS ONLY — ☑S ☐M ☐U ☐NA ☐NE

DETAILS: **No discharge at Outfall 002.**

OUTFALL #:	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOATING SOLIDS	COLOR	OTHER
001	none	none	none	none	none	clear	

SECTION H: SLUDGE DISPOSAL

SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS — ☑S ☐M ☐U ☐NA ☐NE

DETAILS:

1. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY: ☑S ☐M ☐U ☐NA ☐NE
2. SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503: ☑S ☐M ☐U ☐NA ☐NE
3. FOR LAND APPLIED SLUDGE, TYPE OF LAND APPLIED TO: agricultural (E.G., FOREST, AGRICULTURAL, PUBLIC CONTACT SITE):

SECTION I: SAMPLING INSPECTION PROCEDURES

SAMPLE RESULTS WITHIN PERMIT REQUIREMENTS — ☐S ☐M ☐U ☑NA ☐NE

DETAILS:

1. SAMPLES OBTAINED THIS INSPECTION: ☐Y ☑N ☐NA ☐NE
2. TYPE OF SAMPLE: ☐GRAB:__ ☐COMPOSITE:__ METHOD:__ FREQUENCY:
3. SAMPLES PRESERVED: ☐Y ☐N ☑NA ☐NE
4. FLOW PROPORTIONED SAMPLES OBTAINED: ☐Y ☐N ☑NA ☐NE
5. SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE: ☐Y ☐N ☑NA ☐NE
6. SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE: ☐Y ☐N ☑NA ☐NE
7. SAMPLE SPLIT WITH PERMITTEE: ☐Y ☐N ☑NA ☐NE
8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED: ☐Y ☐N ☑NA ☐NE
9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT: ☐Y ☐N ☑NA ☐NE

SECTION J: STORM WATER POLLUTION PREVENTION PLAN

STORM WATER MANAGEMENT MEETS PERMIT REQUIREMENTS — ☑S ☐M ☐U ☐NA ☐NE

DETAILS: **No exposure certification approved on 10/8/03.**

1. SWPPP UPDATED AS NEEDED:__ DATE OF LAST UPDATE: ☐Y ☐N ☐NA ☑NE
2. SITE MAP INCLUDING ALL DISCHARGES AND SURFACE WATERS: ☐Y ☐N ☐NA ☑NE
3. POLLUTION PREVENTION TEAM IDENTIFIED: ☐Y ☐N ☐NA ☑NE
4. POLLUTION PREVENTION TEAM PROPERLY TRAINED: ☐Y ☐N ☐NA ☑NE
5. LIST OF POTENTIAL POLLUTANT SOURCES: ☐Y ☐N ☐NA ☑NE
6. LIST OF POTENTIAL SOURCES AND PAST SPILLS AND LEAKS: ☐Y ☐N ☐NA ☑NE
7. ALL NON-STORM WATER DISCHARGES ARE AUTHORIZED: ☐Y ☐N ☐NA ☑NE
8. LIST OF STRUCTURAL BMPS: ☐Y ☐N ☐NA ☑NE
9. LIST OF NON-STRUCTURAL BMPS: ☐Y ☐N ☐NA ☑NE
10. BMPS PROPERLY OPERATED AND MAINTAINED: ☐Y ☐N ☐NA ☑NE
11. INSPECTIONS CONDUCTED AS REQUIRED: ☐Y ☐N ☐NA ☑NE

FLOW CALCULATION SHEET

Date: **12/13/07** Time: **1303**

Head in Inches: **n/a** Feet:

Type & Size of Primary Flow Measurement Device: ultrasonic meter in 24 inch pipe

Name & Model of Secondary Flow Measurement Device: BIF Model 0259-21

Date of last Calibration of Secondary Flow Device: June 5, 2007

Recorded Flow at Date & Time Listed Above: **0.7 mgd** (Facility Flow Meter)

Calculated Flow at Date & Time Listed Above: **n/a**

(Flow is calculated using flow charts in: ISCO Open Channel Flow Measurement Handbook-5th Edition)

$$\% \text{ Error} = \frac{\text{Recorded Value} - \text{Calculated Value}}{\text{Calculated Value}} \times 100$$

$$\% \text{ Error} = \frac{\quad - \quad}{\quad} \times 100$$

% Error = ____ X 100

% Error = ____ X 100

% Error = **n/a** %

Comments: **Due to type and location of flow meter, no flow calibration check was performed.**

DMR Calculation Check

Reporting Period: **From** 07 (Year) 02 (Month) 01 (Day) **To** 07 (Year) 02 (Month) 28 (Day)

Parameter Checked: CBOD5

	Loading Mass Mo. Avg. - lbs/day	Concentration Monthly Mo. Avg. - mg/l	Concentration Monthly 7-day Avg. - mg/l
Reported Value:	33.16	3.54	5.23
Calculated Value:	33.2	3.54	5.23
Permit Value:	167	10	15

If calculated value does not equal reported value, explain: Values equal