

July 14, 2008

Mr. James Boston, Public Works Director City of Decatur P.O. Box 247 Decatur, Arkansas 72722

RE: Sanitary Sewer Overflow Reporting

AFIN: 04-00052 NPDES Permit No.: AR0022292

Dear Mr. Boston:

On June 9, 2008, John Fazio, District Field Inspector, and I performed a reconnaissance inspection of the waste water 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. Please be advised that all collection system overflows must be reported to this Department as per your NPDES Permit.

In addition, you need to report any private lines that are overflowing to the Department.

For additional information you may contact the Enforcement Branch by telephone at 501-682-0639 or by fax at 501-682-0910.

If I can be of any assistance, please contact me at 479-267-0811, ext. 12.

Sincerely,

alisan West

Alison West District 1 Field Inspector Water Division

cc: Water Division Enforcement Branch Water Division Permits Branch

									Form Approved		
≎EPA								OMB No. 2040-0003			
	NPDE										
		_		Ection A: Nation							
1	Transaction Code NPDES Yr/Mo/Day Inspec. Type Inspector Fac. Type 1 N 2 5 3 A R 0 0 2 2 9 2 11 12 0 8 0 6 0 9 17 18 V 19 S 20 1										
		4	- 0 0 0	0 0 5 2							
	Inspection Work Days Facility Evaluation Rating BI QA 67 69 70 N 71 N 72 N 73 74 75) 	Reserved 80		
				Section 1	B: Facili	ty Da	ata		r		
inclı	ne and Location of Facility Inspected <i>ide POTW name and NPDES permit</i> of Decatur POTW			harging to POTW	V, also		Entry Time/Date 1150 / 06-09-08		Permit Effective Date 10-01-03		
	Austin St. atur Arkansas				Exit Time/Date 1230 / 06-09-08				Permit Expiration Date 09-30-08		
	ne(s) of On-Site Representative(s)/T nes Boston, Public Works Director								er Facility Data 20' 39.019'', -94 28' 21.806''		
Jam City P.O Dec	Name, Address of Responsible Official/Title/Phone and Fax Number James Boston, Public Works Director City of Decatur P.O. Box 247 Decatur, Arkansas 72722 479-752-3912, 479-752-8336						Contacted Yes 🗹 No 🗖				
				tion C: Areas Ev y, M = Marginal,			ing Inspection actory, N = Not Evaluated)				
S	Permit	Ν	Flow Measuremen	-	L		erations & Maintenance N		Sampling		
U	Records/Reports	Ν	Self-Monitoring P	Program	NS	Sludg	ge Handling/Disposal	Ν	Pollution Prevention		
Ν	Facility Site Review	Ν	Compliance Schee	dules		Pretre	eatment .	Ν	Multimedia		
Ν	Effluent/Receiving Waters N Laboratory N Storm Water Section D: Summary of Findings/Comments (Attach additional sheets if necessary						U	Other: SSO			
All sanitary sewer overflows must be reported to the Department. Mr. Boston was made aware of two overflows that were observed during our investigation.											
Name(s) and Signature(s) of Inspector(s) Alison West				Agency/Office/Telephone/Fax AR Dept. of Environmental Quality - Fayetteville 479-267-0811, ext. 12; 479-267-0819					Date July 14, 2008		
John Fazio				AR Dept. of Environmental Quality - Fayetteville 479-267-0811, ext. 16; 479-267-0819							
Signature of Reviewer				Agency/Office/Phone and Fax Numbers				Date			

	ADEQ W	ater NPDE	S Inspection	AFIN: 04-00052		Permit #: AR00	22292	
		W	ater Divisi	on NPDES Photographic Ev	vidence Sheet			
Location:	Peters			SSO locations				
Photograp	er: Ali	son West		Witness:	John Fazio			
Photo #	1	Of	3	·	Date:	6/9/08	Time:	11:59 a.m.
				ecation in road near live haul t				
Photograp	er:	Alison V	West		Witness:	John Fazio		
Photo #	2	Of	3		Date:	6/9/08	Time:	11:51 a.m.
Description	:		398. Private	e sewer line that needs to be re	epaired.			

ADEQ Water NPDES Inspection	

AFIN:	04-0005	2
	04-0003	~

Water Division NPDES Photographic Evidence Sheet									
Location:	Peterson		Decatur SSO locations						
Photographer	: Aliso	n West		Witness:		John Fazio			
Photo #	3 O	f 3		Date:		6/9/08	Time:	11:56 a.m.	
Description:	IMG	P1401. Ai	nother SSO location at th	e end of Sprin	ng	Avenue.			
Photographer				Witness:		None			
Photo #	· Of			Date:		None	Time:		
Description:				Date.			Time.		