ADEQ
ARKANSAS
Department of Environmental Quality

February 19, 2009

Don O'Neal, Manager
City of Wynne Water Utilities
121 Merriman
Wynne, Arkansas 72396

RE: City of Wynne's Waste Water Treatment Facility

AFIN: 19-00071 *NPDES Permit No.: AR0021903*

Dear Mr. O'Neal:

On February 18, 2009, I conducted a routine compliance 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. At the time of inspection, the facility appeared to be in compliance with the applicable regulations.

If I can be of any assistance, please contact me at (870) 247-5183.

Sincerely,

Steven L. Henderson

Steven L. Henderson
District 6 Inspector
Water Division

cc: *Water Division Enforcement Branch*
Water Division Permits Branch

EPA

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

NPDES Compliance Inspection Report

Form Approved
OMB No. 2040-0003

Section A: National Data System Coding

1	Transaction Code	2	NPDES	11	12	Yr/Mo/Day	17	18	Inspec. Type	19	Inspector	20	Fac. Type
	N	5	AR00219031			090218			C		S		1

Remarks: AFIN 19-00071

67	Inspection Work Days	69	70	Facility Evaluation Rating	71	BI	72	QA	73	Reserved	74	75	Reserved	80
	001			3		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
City of Wynne WWTP ***¼ mile South of Hwy. 284, across from Fire Station*** ***Wynne, Arkansas*** ***Cross County, Arkansas***	***9:00 a.m. 2/18/09***	***December 1, 2007***
	Exit Time/Date ***11:45 a.m. 2/18/09***	Permit Expiration Date ***November 30, 2012***

Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)	Other Facility Data
Harrell Williams, Lab Technician (870) 238-7574 or (870) 238-5466 ***Shannon McKnight, Class III Operator (870) 238-7574***	**N 35 13' 07"** **W 90 49' 52"**

Name, Address of Responsible Official/Title/Phone and Fax Number	Contacted
Don O'Neal, Manager ***City of Wynne Water Utilities*** ***121 Merriman*** ***Wynne, Arkansas 72396***	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**	N	**Storm Water**	S	**Other: Effluent Limits**

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

A routine inspection was conducted to determine compliance status with the Arkansas Water and Air Pollution Control Act, the Federal Clean Water Act, and the regulations promulgated thereunder. At the time of inspection, the facility appeared to be in compliance with the applicable regulations.

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Telephone/Fax	Date
Steven L. Henderson Steven L. Henderson	**ADEQ/ White Hall/ (870) 247-5183, (870) 247-5155**	**February 19, 2009**
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: ***9" Parshall Flume***	☑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: ***Last calibrated: 9/9/08***	☑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: ***Sorrells Research Lab***	
b. LAB ADDRESS: ***8002 Stanton Road, Little Rock, Arkansas 72209***	
c. PARAMETERS PERFORMED: ***CBOD, TSS, NH-3, TRC, FCB, pH, Toxicity and Bio-solids***	
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:

OUTFALL #:	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOATING SOLIDS	COLOR	OTHER
001	*None*	*None*	*None*	*None*	*None*	*Clear*	*None*

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: ***Agriculture*** (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: ***Non-Exposure Certification***

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: **2/18/09** Time: **10:15 a.m.**

Head in Inches: **8.0** Feet: **.670**

Type & Size of Primary Flow Measurement Device:

9" Parshall Flume

Name & Model of Secondary Flow Measurement Device:

Inventron 9140

Date of last Calibration of Secondary Flow Device:

September 9, 2008

Recorded Flow at Date & Time Listed Above: **1.050** (Facility Flow Meter)

Calculated Flow at Date & Time Listed Above: **1.075**

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

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

$$\% \text{ Error} = \frac{1.050 - 1.075}{1.075} \times 100$$

$$\% \text{ Error} = \frac{-0.025}{1.075} \times 100$$

$$\% \text{ Error} = -0.023 \times 100$$

% Error = **-2.33** %

Comments:

DMR Calculation Check

Reporting Period: **From** **2009** (Year) **01** (Month) **01** (Day) **To** **2009** (Year) **01** (Month) **31** (Day)

Parameter Checked: **TSS**

	Loading Mass Mo. Avg. - lbs/day	Concentration Monthly Mo. Avg. - mg/l	Concentration Monthly 7-day Avg. - mg/l
Reported Value:	**23.605**	**2.911**	**4.824**
Calculated Value:	**23.605**	**2.911**	**4.824**
Permit Value:	**345**	**15**	**22.5**

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