



ARKANSAS
Department of Environmental Quality

June 19, 2009

Barrett Harrison, Mayor
Blytheville WWTP - West
P.O. Box 1784
Blytheville, AR 72315

RE: Sanitary Sewer Overflow Inspection - West

AFIN: 47-00145 NPDES Permit No.: AR0022560

Dear Mr. Harrison:

On May 19 and 21, 2009, I performed a routine sanitary sewer overflow (SSO) inspection of the waste water collection system 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 the following violations:

There was an excessive accumulation of grease in the 820 Pump Station.

Additionally you should continue working to comply with the current Consent Administrative Order (CAO) requiring you to evaluate, repair and upgrade the collection system including the installation of emergency backups and remote monitoring.

The above items require your immediate attention. Please submit a written response to these findings to Cindy Garner, Water Division Enforcement Branch Manager, of this Department. This response should be mailed to the address below. This response should contain documentation describing the course of action taken to correct each item noted. This corrective action should be completed as soon as possible, and the written response is due by **July 2, 2009**.

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

«Cognizant_Official», «Facility_Name»

June 19, 2009

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If I can be of any assistance, please contact me at walker@adeq.state.ar.us or 870-935-7221 ext.-12.

Sincerely,



Brent L. Walker

District 3 Field Inspector

Water Division

cc: Water Division Enforcement Branch
Water Division Permits Branch



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																					
1 <input type="text" value="N"/> 2 <input type="text" value="5"/> 3 <input type="text" value="A"/> <input type="text" value="R"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="2"/> <input type="text" value="2"/> <input type="text" value="5"/> <input type="text" value="6"/> <input type="text" value="0"/>	11 <input type="text" value="0"/> 12 <input type="text" value="9"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="1"/> <input type="text" value="9"/>	17 <input type="text" value="V"/>	18 <input type="text" value="S"/>	19 <input type="text" value="1"/>	20 <input type="text" value="1"/>																					
Remarks																										
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">Inspection Work Days</td> <td style="width:15%;">Facility Evaluation Rating</td> <td style="width:10%;">BI</td> <td style="width:10%;">QA</td> <td style="width:10%;">Reserved</td> <td style="width:10%;"></td> <td style="width:10%;"></td> <td style="width:10%;"></td> <td style="width:10%;"></td> </tr> <tr> <td>67 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> 69</td> <td>70 <input type="text" value="N"/></td> <td>71 <input type="text" value="N"/></td> <td>72 <input type="text" value="N"/></td> <td>73 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/></td> <td>74 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/></td> <td>75 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/></td> <td>76 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/></td> <td>77 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/></td> <td>78 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/></td> <td>79 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/></td> <td>80 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/></td> </tr> </table>						Inspection Work Days	Facility Evaluation Rating	BI	QA	Reserved					67 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> 69	70 <input type="text" value="N"/>	71 <input type="text" value="N"/>	72 <input type="text" value="N"/>	73 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	74 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	75 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	76 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	77 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	78 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	79 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	80 <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
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Section B: Facility Data

Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number) Blytheville WWTP - West 4951 NCR 635 Blytheville, AR Mississippi Co.	Entry Time/Date 1320 5/19/2009 0920 5/21/2009	Permit Effective Date 12/1/2005
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) James Yankee/Pretreatment Coordinator/870-763-4961 Kenneth Ellis/Waste Water Superintendent/870-763-4961	Other Facility Data	
Name, Address of Responsible Official/Title/Phone and Fax Number Barrett Harrison/Mayor/870-763-3602 Blytheville WWTP - West P.O. Box 1784 Blytheville, AR 72315	Contacted 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	N	Flow Measurement	U	Operations & Maintenance	N	Sampling
S	Records/Reports	N	Self-Monitoring Program	N	Sludge Handling/Disposal	N	Pollution Prevention
N	Facility Site Review	N	Compliance Schedules	N	Pretreatment	N	Multimedia
N	Effluent/Receiving Waters	N	Laboratory	N	Storm Water	U	Other: SSO

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

There was an excessive accumulation of grease in the 820 Pump Station.

The facility must also continue working to comply with the current Consent Administrative Order (CAO) requiring them to evaluate, repair and upgrade the collection system including the installation of emergency backups and remote monitoring.

Name(s) and Signature(s) of Inspector(s) Brent L. Walker <i>Brent L. Walker</i>	Agency/Office/Telephone/Fax AR Dept. of Environmental Quality-Jonesboro (870) 935-7221 ext. 12/(870) 935-4715 (Fax)	Date June 19, 2009
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date

COLLECTION SYSTEM INSPECTION AND OVERALL RATING		<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
PROVIDE A BRIEF DESCRIPTION OF THE COLLECTION SYSTEM: Shallow gravity flow and force main system		
POPULATION SERVED/NUMBER OF RESIDENTIAL AND COMMERCIAL CONNECTIONS:		
FEET OF SEWER SYSTEM: Not available at the time of inspection – new maps are being developed		
AGE OF SYSTEM: ~1953 and newer		
DOES THE SYSTEM EXPERIENCE PROBLEMS DURING DRY OR WET WEATHER (EXPLAIN): High groundwater in wet weather	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
IS THERE A SYSTEM IN PLACE FOR REPORTING SSOS TO ADEQ (DESCRIBE): Superintendent is informed of all overflows and is responsible for reporting to ADEQ	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
ARE ALL SSOs REPORTED REGARDLESS OF SIZE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
HAVE SSOs REACHED "WATERS OF THE STATE" (LIST DATE AND LOCATION OF EACH): All reported and available in ADEQ Enforcement Database	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
PUMP STATIONS		<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
NUMBER OF PUMP STATIONS IN SYSTEM: 17	NUMBER WITH BACKUP POWER: 0	
HOW OFTEN ARE PUMP STATIONS INSPECTED/MONITORED: Twice per day		
ARE MAINTENANCE RECORDS AND/OR OPERATOR LOGS KEPT: Yes		
ADEQUATE INVENTORY OF SPARE PARTS: Yes		
TYPE OF REMOTE ELECTRONIC MONITORING USED (I.E. SCADA OR AUTO DIALERS): None		
BRIEF SUMMARY OF EMERGENCY PROCEDURES: Priority service from power company		
NUMBER OF PUMP STATIONS VISITED DURING INSPECTION (SEE ATTACHED CHECKLISTS FOR EACH): 2		
SATELLITE SYSTEMS		<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
DOES THE COLLECTION SYSTEM RECEIVE FLOW FROM SATELLITE SYSTEMS: No		
TYPE(S) OF WASTE WATER RECEIVED: <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:		
BRIEFLY DESCRIBE THE SATELLITE SYSTEM:		
ANY KNOWN PROBLEMS WITH SATELLITE SYSTEM:		
NAME, ADDRESS AND PHONE NUMBER OF PERSON RESPONSIBLE FOR SATELLITE SYSTEM:		

PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)	
GENERAL INFORMATION AND OVERALL EVALUATION	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: Shop Lift Station	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input checked="" type="checkbox"/> COMMERCIAL <input checked="" type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: <u>3</u>	NUMBER OPERATIONAL: <u>3</u>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
EVIDENCE OF RECENT OVERFLOWS OR HIGH LEVELS:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
GENERAL OPERATION AND MAINTENANCE	
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAGE OF UNRELATED EQUIPMENT:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GATES/DOORS/HATCHES/LIDS/ETC. LOCKED TO PREVENT UNAUTHORIZED ACCESS AND/OR TAMPERING:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
WET WELLS, SUMPS AND PITS ADEQUATELY COVERED, GRATED OR OTHERWISE PROTECTED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ELECTRICAL CONTROLS COVERS CONDUIT AND EQUIPMENT PROPERLY INSTALLED AND MAINTAINED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GUARDS AND SHIELDS IN PLACE AROUND MOVING EQUIPMENT (BELTS, PULLEYS, DRIVESHAFTS, ETC.) :	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE VENTILATION TO PREVENT EXCESSIVE CONDENSATION AND/OR GASES AND FUMES:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE LIGHTING FOR ROUTINE INSPECTION/MAINTENANCE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SEALS, VALVES AND PACKING ADEQUATELY MAINTAINED TO PREVENT LEAKS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN WET WELLS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
BACKUP POWER AND ALARMS	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SCADA SYSTEM (LIST PARAMETERS MONITORED):	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)	
GENERAL INFORMATION AND OVERALL EVALUATION	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: 820 Lift Station (Located on Airbase)	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input checked="" type="checkbox"/> COMMERCIAL <input checked="" type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: <u>2</u>	NUMBER OPERATIONAL: <u>2</u>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
EVIDENCE OF RECENT OVERFLOWS OR HIGH LEVELS:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
GENERAL OPERATION AND MAINTENANCE	
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAGE OF UNRELATED EQUIPMENT:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GATES/DOORS/HATCHES/LIDS/ETC. LOCKED TO PREVENT UNAUTHORIZED ACCESS AND/OR TAMPERING:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
WET WELLS, SUMPS AND PITS ADEQUATELY COVERED, GRATED OR OTHERWISE PROTECTED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ELECTRICAL CONTROLS COVERS CONDUIT AND EQUIPMENT PROPERLY INSTALLED AND MAINTAINED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GUARDS AND SHIELDS IN PLACE AROUND MOVING EQUIPMENT (BELTS, PULLEYS, DRIVESHAFTS, ETC.) :	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE VENTILATION TO PREVENT EXCESSIVE CONDENSATION AND/OR GASES AND FUMES:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE LIGHTING FOR ROUTINE INSPECTION/MAINTENANCE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SEALS, VALVES AND PACKING ADEQUATELY MAINTAINED TO PREVENT LEAKS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN WET WELLS:	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
Excessive grease in wet well with strong odor similar to food processing facility discharging to this station.	
BACKUP POWER AND ALARMS	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED:	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SCADA SYSTEM (LIST PARAMETERS MONITORED):	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

Date started	Date stopped	Volume	Environmental damage	Description	Cause	Stream	Location
8/4/2006	8/4/2006	15	none	overflow	grease		1109 N. 2nd St., Blytheville, AR
12/8/2006	12/8/2006	10	none	overflow onto paved area	grease		
1/8/2007	1/12/2007	60000	none	# 17 ditch overflow over 4 days	line failure	main truck ditch	
11/25/2006	11/25/2006	20	NEAH	PA	GREASE	E-2-3	
9/27/2006	9/27/2006	20	none	overflow	rainfall	n.w. ditch	
11/25/2006	11/25/2006	20	NEAH	PA	Grease	E-2-3	
11/6/2006	11/6/2006	15	NEAH	Ground Surface	Grease	GR	
2/24/2005	2/24/2005	30	unknown	605 W. Moultrie	grease	paved area	
12/21/2006	12/21/2006	10	NEAH	overflow	Debris	West treatment plant	107 W. Pecan, in alley
11/1/2006	11/1/2006	20	none	overflow	grease		Apt. 201, E. Moultrie
11/6/2006	11/6/2006	15	none	overflow	grease		
10/27/2006	10/27/2006	30	NEAH	Main truck ditch north #17	Grease	Ditch	North #17
12/8/2006	12/8/2006	10	NEAH		Grease	Paved Area	
11/1/2006	11/1/2006	20	NEAH		Grease	GR	Apt. 201 E Moultrie
12/27/2006	12/27/2006	30	none	overflow at main truck ditch North #17	grease		
1/3/2007	1/3/2007	15	none	not given	grease		
5/3/2005	5/3/2005	20	unknown	1200 Hearn Street	grease	ground	
2/13/2005	2/13/2005	30	unknown	1004 Mount Clair	grease	ground	
5/5/2006	5/5/2006	15	unknown	manhole #DE-2	Grease	ground	2101 Carolyn
5/13/2005	5/14/2005	3300	unknown	Moultri & Ruddle Streets	Broken sewer line	storm drain	
8/1/2005	8/1/2005	35	unknown	900 North Division	grease	ground	
3/21/2006	3/21/2006	30	NEAH	1000 Rollison ST.	Grease	none	
11/24/2005	11/24/2005	75	unknown	1520 North 6th St	Debris & grease	paved area	
5/26/2006	5/26/2006	10	none	overflow at manhole DE-1, 917 Hardin	grease		

Date started	Date stopped	Volume	Environmental damage	Description	Cause	Stream	Location
1/30/2006	1/30/2006	10	unknown	612 Grandview	grease	drop inlet	
1/27/2005	1/27/2005	50	unknown	200 E. Missouri	Hole in customer's service line	street	
2/16/2005	2/16/2005	5	unknown	1616 Martin	Grease & debris	street	
10/4/2005	10/4/2005	30	unknown	200 West Walnut	grease	storm drain	
10/5/2005	10/5/2005	25	unknown	600 Moultrie	grease	ground	
7/25/2005	7/25/2005	20	unknown	1020 Highland	grease	paved area	
9/15/2005	9/15/2005	30	unknown	1520 North 6th Street	grease	street	
3/28/2007	3/28/2007	50	none	manhole overflow - washed back in sewer manhole	Grease		
6/18/2006	6/18/2006	50	none	overflow into ditch north of Fifth St., 1000 feet	grease		1505 North Fifth St.
2/26/2007	2/26/2007	60	none	manhole overflow	grease		1909 Meadow Lane
3/2/2007	3/2/2007	30	none	overflow	grease	storm drain	
5/23/2007	5/24/2007	7000	none	manhole overflow	LF		
6/23/2007	6/23/2007	40	none	overflow at L-6	debris		
6/11/2007	6/11/2007	30	none	overflow	grease/roots		
5/6/2007	5/6/2007	20	none	overflow - location not provided	grease		
11/7/2007	11/7/2007	30			grease	West Wastewater Plant	618 N. 11th Street Manhole #NE-Z
11/10/2007	11/10/2007	10	NEAH		Grease		
1/28/2008	1/28/2008	30	NEAH	overflow	grease	paved area	800 Grandview Street
3/19/2008	3/19/2008	100	NEAH		rainfall		
3/20/2008	3/20/2008	75	NEAH	line failure	line failure		
3/21/2008	3/21/2008	30	NEAH	mh overflow	Grease		
3/22/2008				using a 4" pump for bypass		Pemiscott Bayou	
3/22/2008	3/25/2008	745200	NEAH	30" main line failure	line failure	Pemiscott Bayou	
3/20/2008	3/20/2008	75	NEAH	line failure			

Date started	Date stopped	Volume	Environmental damage	Description	Cause	Stream	Location
3/21/2008	3/21/2008	30	NEAH	MH overflow	grease		
4/26/2008	4/26/2008	20	NEAH	Manhole Overflow # E-3	grease		706 Country Club Rd.
5/12/2008	5/12/2008	100	NONE	MH @ FERN & CHERRY OLD EAKER AIRBASE 2000 BLOCK AREA	E/POWER FAILURE UNDERGROUND ELECTRIC ON PROVIDERS SIDE.	PAVED AREA	
5/13/2008	5/13/2008	120000	NONE	BUILT CHLORINE WEIR FOR DISINFECTION. THERE SHOULD BE NO MORE WATERS DISCHARGED INTO DITCH 27, THIS PROJECT WAS FROM STORMS OF EARLY 2008. FEMA RECORDS SHOULD SHOW OUR EFFORTS, THIS PORTION OF THIS PROJECT SHOULD END NEXT WEEK.	LINE FAILURE / CAVE IN	DITCH 27	
5/16/2008	5/16/2008	80000	NONE	22ND & HENLEY ST.	LINE FAILURE / CAVE-IN	DITCH 27	
12/1/2008	12/1/2008	25	NEAH	Not Given	Grease		Not Given
12/1/2008	12/1/2008	25	NEAH	Not Given	Grease		Not Given
12/1/2008	12/1/2008	25	NEAH	Not Given	Grease		Not Given
1/20/2009	1/20/2009	20	NEAH	NA	RG	NA	Not Given
1/24/2009	1/24/2009	50	NEAH	NA	RG	NA	NA
1/24/2009	1/24/2009	50	NEAH	NA	RG	NA	NA
2/4/2009	2/4/2009	75	NEAH	Manhole Overflow	Roots and Grease	na	Unknown
2/3/2009	2/4/2009	50	NEAH	Manhole Overflow	Power Failure		
2/12/2009	2/12/2009	100	NEAH	Manhole Overflow	power failure		2000 Fern Court Circle. Apt. A

MAYOR:
Barrett Harrison

CITY COUNCIL:
Ray L. Jones
Shirley Conneally
Shirley Overman
Monte Hodges
Mylas Jeffers
Carol White

ATTORNEY:
Mike Bearden

**PUBLIC UTILITIES
DIRECTOR:**
Rick Mosley

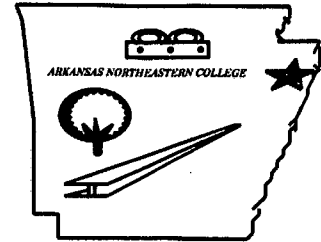
SUPERINTENDENT:
Kenneth Ellis

Blytheville Wastewater Dept.

P.O. Box 1784
Blytheville, AR 72316-1784

Phone: (870) 763-4961

Fax: (870) 763-8541



July 2, 2009

Cindy Garner
ADEQ Water Division Enforcement Manager
5301 Northshore Drive
North Little Rock, AR 72118-5317

Re: Sanitary Sewer Overflow Inspection Response

Re: AFIN: 47-00145

NPDES Permit No: AR0022560

Dear Ms. Garner:

The 820 pumping station is located on the old air base and receives wastewater discharges from Kagome Creative Foods in which possibly has caused the abundance of grease to accumulate in the pumping station. The excessive grease has been treated with an oxidizer and will be pumped out.

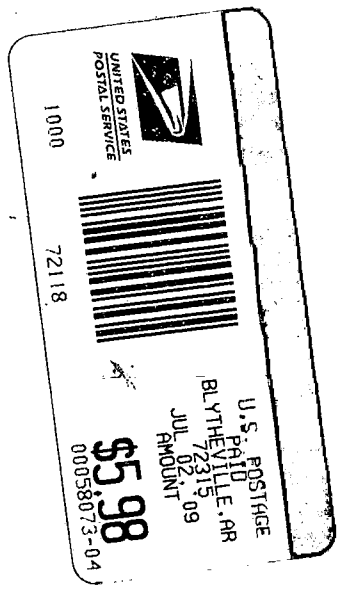
If you need more information, please contact me at (870) 763-4961.

Sincerely,

A handwritten signature in black ink, appearing to read "James Yankee". The signature is stylized with a large, sweeping initial "J" and a long, horizontal stroke extending to the right.

James Yankee
Pretreatment Coordinator
Blytheville Wastewater Department

Blytheville wastewater Dept.
P.O. Box 17
Blytheville, AR. 72316-1784



RETURN RECEIPT
REQUESTED

Cindy Garner
ADEO Water Division Enforcement MANAGER
5301 North Shore Drive
North Little Rock, AR. 72118-5317