



ARKANSAS
Department of Environmental Quality

March 22, 2012

John Rimmer, General Manager
City of West Memphis WWTP
P.O. Box 1868
West Memphis, AR 72303

RE: NPDES Sanitary Sewer Overflow Inspection, West Memphis WWTP

AFIN: 18-00879 NPDES Permit No.: AR0022039

Dear Mr Rimmer:

On December 02, 2011, fellow inspector Brent Walker and I performed a routine sanitary sewer overflow 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. This inspection revealed the following violations:

1. Station #8 (610 East Jefferson)
 - a. There was an uncovered hole in the floor where a pump had been removed.

2. Station #9 (1620 South Avalon)
 - a. There was excessive grease and solids in the wet well.
 - b. There were uncovered holes in the floor.

3. Station #6 (401 South Avalon)
 - a. One of the three pumps was not operational.
 - b. There was excessive grease and solids in the wet well.
 - c. One of the pumps did not have a driveshaft guard in place.
 - d. The lights for the lower level were inoperative.

4. Station #26a (Shady Grove)
 - a. There was excessive grease and solids in the wet well
 - b. The pumps were not alternating; both ran at the same time.

5. Station #13a (Park Plaza)
 - a. A manhole behind station was damaged and partially uncovered.

6. Station #29 (Lalman's Mobile Home Park)
 - a. It appeared this was a significant source of inflow, due to the unprotected sewer connections that were not in use.

7. Station # 35 (Southland Dr.)
 - a. There was excessive grease and solids in the wet well.
 - b. Lights in the lower level were inoperative.
 - c. It appeared that pumps were not properly maintained. One of the driveshafts did not appear to be properly greased and the pump was noisy during operation.
 - d. Guards did not adequately cover driveshafts.

8. Station #33 (Bill's Grill)
 - a. There was excessive grease and solids in the wet well.
 - b. The door to the pump station was unlocked. Additionally, the door could not be unlocked with a key from the outside.
 - c. Guards did not adequately cover driveshafts.

The above items require your immediate attention. Please submit a written response to these findings to the Water Division Enforcement Branch of this Department. This response should be mailed to the address below, or e-mailed to Water-Enforcement-Report@adeq.state.ar.us. 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 with all necessary documentations (i.e. photos) is **due by April 4, 2012**.

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 assistance, please contact me at greenway@adeq.state.ar.us or 870-935-7221 ext.-15.

Sincerely,



Michael B. Greenway
District 3 Field Inspector
Water Division

cc: Water Division Enforcement Branch
Water Division Permits Branch



Form Approved
OMB No. 2040-0003

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					Inspec. Type		Inspector		Fac. Type							
1	N	2	5	3	A	R	0	0	2	2	0	3	9	11	12	1	1	1	2	0	2	17	18	V	19	S	20	1
Remarks																												
1 8 - 0 0 8 7 9							C R I T T E N D E N																					
Inspection Work Days						Facility Evaluation Rating						BI		QA		Reserved												
67						70 N						71 N		72 N		73 74 75 80												

Section B: Facility Data

Name and Location of Facility Inspected (<i>For industrial users discharging to POTW, also include POTW name and NPDES permit number</i>) City of West Memphis 502 Rushing Rd. West Memphis, AR Crittenden County		Entry Time/Date 12-02-2011 / 09:45		Permit Effective Date August 1, 2008	
		Exit Time/Date 12-02-2011 / 17:15		Permit Expiration Date July 31, 2013	
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) Denise Bosnick / Director of Environmental Quality / 870-702-5141 Marvin Jones / Lab Supervisor / 870-702-5151 , Tommie Butler / Field Technician / 870-702-5151				Other Facility Data 35.124212 -90.179016	
Name, Address of Responsible Official/Title/Phone and Fax Number John Rimmer / General Manager / 870-735-3355 City of West Memphis Utilities P.O. Box 1868 West Memphis, AR 72303				Contacted Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> PDS # 064403	

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)

This sanitary sewer overflow inspection was conducted during the course of a pretreatment compliance inspection. Multiple violations were noted. Refer to the attached letter and inspection report for more information.

Name(s) and Signature(s) of Inspector(s) Michael Greenway Brent Walker 		Agency/Office/Telephone/Fax AR Dept. of Environmental Quality-Jonesboro (870) 935-7221 ext. 15 / (870) 935-4715 (Fax)	Date January 19, 2012
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: <u>Combination gravity and force main system.</u>		
POPULATION SERVED/NUMBER OF RESIDENTIAL AND COMMERCIAL CONNECTIONS: <u>Pop. Of ~28,000</u>		
FEET OF SEWER SYSTEM: <u>~ 167 miles</u>		
AGE OF SYSTEM: <u>Variable</u>		
DOES THE SYSTEM EXPERIENCE PROBLEMS DURING DRY OR WET WEATHER (EXPLAIN): <u>I&I problems in some locations.</u>		<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): <u>SSO's are reported to ADEQ by the Director of Environmental Quality.</u>		<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 U.S." (LIST DATE AND LOCATION OF EACH): <u>Over 50 SSO's have been reported in 2011. Refer to the NPDES Enforcement Database for a complete list</u>		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
PUMP STATIONS		<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
NUMBER OF PUMP STATIONS IN SYSTEM: <u>37</u>	NUMBER WITH BACKUP POWER: <u>0</u>	
HOW OFTEN ARE PUMP STATIONS INSPECTED/MONITORED: <u>Daily</u>		
ARE MAINTENANCE RECORDS AND/OR OPERATOR LOGS KEPT: <u>Yes</u>		
ADEQUATE INVENTORY OF SPARE PARTS: <u>Yes</u>		
TYPE OF REMOTE ELECTRONIC MONITORING USED (I.E. SCADA OR AUTO DIALERS): <u>SCADA and/or Phone</u>		
BRIEF SUMMARY OF EMERGENCY PROCEDURES: <u>Large stations have auxiliary pump connections; small stations require manual installation of an emergency pump.</u>		
NUMBER OF PUMP STATIONS VISITED DURING INSPECTION (SEE ATTACHED CHECKLISTS FOR EACH): <u>9</u>		
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: <u>No</u>		
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: <u>610 East Jefferson (Station #8)</u>	
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: <u>Holes in the floor were not covered.</u>	<input type="checkbox"/> S <input checked="" 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 type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" 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: <u>Some grease, but not excessive.</u>	<input type="checkbox"/> S <input checked="" 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 checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED: <u>No emergency contact information posted.</u>	<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): <u>Power and high level.</u>	<input checked="" type="checkbox"/> Y <input 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: <u>1620 South Avalon (Station #9)</u>	
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: <u>Holes in the floor were not covered.</u>	<input type="checkbox"/> S <input checked="" 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 type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" 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: <u>Excessive grease and solids in the wet well.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
BACKUP POWER AND ALARMS	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED: <u>No emergency contact information posted.</u>	<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): <u>Power and high level.</u>	<input checked="" type="checkbox"/> Y <input 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: <u>401 South Avalon (Station # 6)</u>	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: <u>3</u>	NUMBER OPERATIONAL: <u>2</u>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE:	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
EVIDENCE OF RECENT OVERFLOWS OR HIGH LEVELS: <u>High level, no overflow.</u>	<input checked="" type="checkbox"/> Y <input 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.) : <u>One pump did not have a guard around drive shaft.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" 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: <u>Light did not work.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" 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: <u>Excessive grease and solids in wet well.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
BACKUP POWER AND ALARMS	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED: <u>No emergency contact information posted.</u>	<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): <u>Power and high level.</u>	<input checked="" type="checkbox"/> Y <input 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: <u>Shady Grove (Station # 26a)</u>	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input 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: <u>High level, no overflow.</u>	<input checked="" type="checkbox"/> Y <input 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: <u>Pumps were not alternating, both ran at the same time.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" 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: <u>Excessive grease and solids in the wet well.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
BACKUP POWER AND ALARMS	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED: <u>No emergency contact information posted.</u>	<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): <u>Power and high level.</u>	<input checked="" type="checkbox"/> Y <input 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: <u>Park Plaza (Station # 13a)</u>	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input 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: <u>High level, no overflow.</u>	<input checked="" type="checkbox"/> Y <input 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: <u>A Manhole behind station was damaged and partially uncovered.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" 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: <u>Some grease, but not excessive.</u>	<input type="checkbox"/> S <input checked="" 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 checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED: <u>No emergency contact information posted.</u>	<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): <u>Power and high level.</u>	<input checked="" type="checkbox"/> Y <input 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 checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: <u>Lalman's Mobile Home Park (Station # 29)</u>	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: <u>1</u>	NUMBER OPERATIONAL: <u>1</u>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE:	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
EVIDENCE OF RECENT OVERFLOWS OR HIGH LEVELS: <u>High level, no overflow.</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
It appeared this was a significant source of inflow, due to the unprotected sewer connections that were not in use.	
GENERAL OPERATION AND MAINTENANCE	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAGE OF UNRELATED EQUIPMENT:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
GATES/DOORS/HATCHES/LIDS/ETC. LOCKED TO PREVENT UNAUTHORIZED ACCESS AND/OR TAMPERING:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" 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 type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE VENTILATION TO PREVENT EXCESSIVE CONDENSATION AND/OR GASES AND FUMES:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE LIGHTING FOR ROUTINE INSPECTION/MAINTENANCE:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
SEALS, VALVES AND PACKING ADEQUATELY MAINTAINED TO PREVENT LEAKS:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" 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	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED: <u>No emergency contact information posted.</u>	<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): <u>Power and high level.</u>	<input checked="" type="checkbox"/> Y <input 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: <u>Mound City (Station # 25)</u>	
TYPE(S) OF WASTE WATER RECEIVED: <input 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	
	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
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: <u>Some grease and solids, but not excessive.</u>	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
BACKUP POWER AND ALARMS	
	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP: <u>No Backup connections for power or pumps.</u>	<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: <u>No emergency contact information posted.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SCADA SYSTEM (LIST PARAMETERS MONITORED): <u>Power and high level.</u>	<input type="checkbox"/> Y <input 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: <u>Southland Dr. (Station # 35)</u>	
TYPE(S) OF WASTE WATER RECEIVED: <input 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	
<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA	
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAGE OF UNRELATED EQUIPMENT: <u>Not maintained well.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" 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.): <u>Some guards were not in place.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" 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: <u>Several lights did not work.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" 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: <u>Excessive grease and solids in wet well.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
BACKUP POWER AND ALARMS	
<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED: <u>No emergency contact information posted.</u>	<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): <u>Power and high level.</u>	<input checked="" type="checkbox"/> Y <input 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: <u>Bill's Grill (Station # 33)</u>	
TYPE(S) OF WASTE WATER RECEIVED: <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: <u>2</u>	NUMBER OPERATIONAL: <u>1</u>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE:	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
EVIDENCE OF RECENT OVERFLOWS OR HIGH LEVELS: <u>High level, no overflow.</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
GENERAL OPERATION AND MAINTENANCE	
<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA	
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAGE OF UNRELATED EQUIPMENT: <u>Not maintained well.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GATES/DOORS/HATCHES/LIDS/ETC. LOCKED TO PREVENT UNAUTHORIZED ACCESS AND/OR TAMPERING: <u>Door was unlocked, no key available.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" 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.): <u>Some guards were not in place.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" 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: <u>Excessive grease and solids in the wet well.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
BACKUP POWER AND ALARMS	
<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED: <u>No emergency contact information posted.</u>	<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): <u>Power and high level.</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

Water Division NPDES Photographic Evidence Sheet

Location: West Memphis WWTP

Photographer: Michael Greenway **Witness:** Brent Walker

Photo # 1 **Of** 14 **Date:** 12-02-2011 **Time:** 10:36

Description: An uncovered hole in the floor of the 610 East Jefferson pump station (Station #8).



Photographer: Michael Greenway **Witness:** Brent Walker

Photo # 2 **Of** 14 **Date:** 12-02-2011 **Time:** 10:48

Description: Excessive grease and solids in the wet well of the 1620 South Avalon pump station (Station #9).



Water Division NPDES Photographic Evidence Sheet

Location:	West Memphis WWTP						
Photographer:	Michael Greenway			Witness:	Brent Walker		
Photo #	3	Of	14	Date:	12-02-2011	Time:	11:01
Description:	Excessive grease and solids in the wet well of the 401 South Avalon pump station (Station # 6).						



Photographer:	Michael Greenway			Witness:	Brent Walker		
Photo #	4	Of	14	Date:	12-02-2011	Time:	11:03
Description:	Missing guard on the far left pump in the 401 South Avalon pump station (Station #6).						



Water Division NPDES Photographic Evidence Sheet

Location:	West Memphis WWTP						
Photographer:	Michael Greenway			Witness:	Brent Walker		
Photo #	5	Of	14	Date:	12-02-2011	Time:	11:06
Description:	There were no working lights in the bottom level of the 401 South Avalon pump station. The wiring to this light was hanging in front of it.						



Photographer:	Michael Greenway			Witness:	Brent Walker		
Photo #	6	Of	14	Date:	12-02-2011	Time:	11:19
Description:	Excessive grease and solids in the wet well of the Shady Grove pump station (Station #26a).						



Water Division NPDES Photographic Evidence Sheet

Location:	West Memphis WWTP		
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Photographer:	Michael Greenway	Witness:	Brent Walker
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Photo #	7	Of	14	Date:	12-02-2011	Time:	11:44
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Description:	Damaged and partially uncovered manhole behind the Park Plaza pump station (Station #13a).
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Photographer:	Michael Greenway	Witness:	Brent Walker
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Photo #	8	Of	14	Date:	12-02-2011	Time:	12:33
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Description:	Excessive grease and solids in the wet well of the Southland Dr. pump station (Station #35).
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Water Division NPDES Photographic Evidence Sheet

Location: West Memphis WWTP

Photographer: Michael Greenway **Witness:** Brent Walker

Photo # 9 **Of** 14 **Date:** 12-02-2011 **Time:** 12:38

Description: Exposed driveshaft in the Southland Dr. pump station (Station #35).



Photographer: Michael Greenway **Witness:** Brent Walker

Photo # 10 **Of** 14 **Date:** 12-02-2011 **Time:** 12:40

Description: Lights in the bottom level of the Southland Dr. pump station (Station #35) did not work.



Water Division NPDES Photographic Evidence Sheet

Location: West Memphis WWTP

Photographer: Michael Greenway **Witness:** Brent Walker

Photo # 11 **Of** 14 **Date:** 12-02-2011 **Time:** 12:54

Description: Excessive grease and solids in the wet well of the Bill's Grill pump station (Station #33)



Photographer: Michael Greenway **Witness:** Brent Walker

Photo # 12 **Of** 14 **Date:** 12-02-2011 **Time:** 12:56

Description: Drive shafts were not adequately protected in the Bill's Grill pump station (Station #33).



Water Division NPDES Photographic Evidence Sheet

Location:	West Memphis WWTP						
Photographer:	Michael Greenway			Witness:	Brent Walker		
Photo #	13	Of	13	Date:	12-02-2011	Time:	12:58
Description:	The door to the Bill's Grill pump station (Station #33) was unlocked. Note the lack of a keyhole.						





WEST MEMPHIS UTILITY COMMISSION

604 East Cooper P O Box 1868

West Memphis, AR 72301

Phone: 870-735-3355 Fax: 870-732-7623

April 3, 2012

Arkansas Department of Environmental Quality
Water Enforcement Division
5301 Northshore Drive
North Little Rock, Arkansas 72118-5317

Re: NPDES Compliance Evaluation Inspection Wastewater Treatment Plant
NPDES Sanitary Sewer Overflow Inspection
Pretreatment Compliance Inspection

AFIN: 18-00879 NPDES Permit No.: AR0022039 and AR00C405

We recently received a letter addressing a routine compliance inspection performed back in December 2011. The inspection revealed several violations in all areas addressed. This letter is to address those violations:

Wastewater Treatment Plant:

1. Improper operation and maintenance. This violates Part III, Section B, Item 1.a. of the permit, which requires that the permittee shall at all times properly operate and maintain all facilities and systems of treatment and control (and related appurtenances) which are installed or used by the permittee to achieve compliance with the conditions of this permit. The following items were noted:
 - a) There was a small leak from a valve in the effluent wet well. Water from the leak had bypassed the UV treatment system.
 - b) There was sludge on the ground next to a manhole located between the headworks and the sludge drying beds.
 - c) There was a moderate amount of foam observed in the clarifiers and effluent wet well.

Response:

- a) The valve nuts were tightened and the valve was greased to prevent leaks. (See picture-WWTP-1).
- b) Two pumps have been installed to pump the waste filtrate. These pumps replace the filtrate station that was pumping the filtrate. There should be no more overflows at this manhole. (See picture-WWTP-2 & 3).
- c) There is a 0041 filament in the sludge that I am using c12 in the return sludge to control.

2. Samples taken during the month of May 2011 were not representative of volume and nature of the discharge during that month. It appeared that samples were normally collected on Monday, Tuesday and Wednesday of each week. However on May 2-3, 2011, effluent flow exceeded 20 MGD and the UV treatment system was bypassed. During this week, samples were collected on Thursday, Friday and Saturday (May 5-7, 2011) after effluent flow dropped to less than 8 MGD. This violates Part III, Section C. Item 1. of the permit.

Response:

From this day forward, all samples will be pulled on Monday, Tuesday and Wednesday.

3. Dissolved Oxygen (D.O.) concentration was not accurately reported on the DMR's. D.O. concentration was reported in ug/L instead of mg/L as required by part I, Section A. of the permit.

Response:

All DMRs are corrected. Net DMR is also corrected.

4. The Industrial stormwater (ARR00C405) inspection revealed the following violations:
 - a) Sampling was not performed as required.
 - b) The SWPPP was incomplete. Specifically the generator, equalization basin, and the amount of acreage were not identified in SWPPP.

Response:

- a) We have the permit now and sampling is being performed as required.
- b) All of this has been corrected.

Sanitary Sewer Overflow:

1. Station #8 (610 East Jefferson)
 - a) There was an uncovered hole in the floor where a pump had been removed.

Response:

- a) This has been repaired. The holes have been filled (See picture-Pump Station #8 (610 East Jefferson-Inside-1).
2. Station #9 (1620 South Avalon)
 - a) There was excessive grease and solids in the wet well.
 - b) There were uncovered holes in the floor.

Response:

- a) The wet well will be cleaned and will be on a cleaning schedule.
 - b) This hasn't been completed. Two of the areas have been repaired, and one has not. This will be done within the week. (See picture-Pump Station #9 (1620 South Avalon)-Inside 2, 3, & 4).
3. Station #6 (401 South Avalon)
- a) One of the three pumps was not operational.
 - b) There was excessive grease and solids in the wet well.
 - c) One of the pumps did not have a driveshaft guard in place.
 - d) The lights for the lower level were inoperative.

Response:

- a) Two pumps are operational and are all that is needed. The third is not needed and is not operational but was just left in place.
 - b) The wet well has been cleaned and will be on a cleaning schedule. (See picture-Pump Station #6 (410 South Avalon)-Wet Well 1 & 2).
 - c) The one pump that does not have a driveshaft guard is the one that is not needed and is not operational.
 - d) The light in the lower level are now operational. (See picture-Pump Station #6 (410 South Avalon)-Inside 3 & 4).
4. Station #26A (Shady Grove)
- a) There was excessive grease and solids in the wet well.
 - b) The pumps were not alternating; both ran at the same time.

Response:

- a) The wet well has been cleaned and will be on a cleaning schedule. (See picture-Pump Station 26A-Wet Well-1).
 - b) This issue was actually a problem with the floats. It has been corrected.
5. Station #13A (Park Plaza)
- a) A manhole behind station was damaged and partially uncovered.

Response:

- a) This has been repaired. (See picture-Pump Station #13A (Park Plaza)-Outside-1 & 2).
6. Station #29 (Lalman Mobile Home Park)

- a) It appeared this was a significant source of inflow, due to the unprotected sewer connections that were not in use.

Response:

- a) These are private sewer lines. If this issue needs to be addressed further we would appreciate ADEQ submitting a letter addressing the issue.

7. Station #35 (Southland Drive)

- a) There was excessive grease and solids in the wet well.
- b) Lights in the lower level were inoperative.
- c) It appeared that pumps were not properly maintained. One of the drive shafts did not appear to be properly greased and the pump was noisy during operation.
- d) Guards did not adequately cover drive shafts.

Response:

- a) Wet well has been cleaned and will be on a cleaning schedule. (See picture-Pump Station #35 (Southland Drive)-Wet Well-1).
- b) Lights are now operational. (See picture-Pump Station #35 (Southland Drive)-Inside-1).
- c) This has been corrected.
- d) This will be corrected.

8. Station #33 (Bill's Grill)

- a) There was excessive grease and solids in the wet well.
- b) The door to the pumps station was unlocked. Additionally, the door could not be unlocked with a key from the outside.
- c) Guards did not adequately cover drive shafts.

Response:

- a) Wet well has been cleaned and will be on a cleaning schedule. (See picture-Pump Station #33 (Bills Grill)-Wet Well-1).
- b) This has been corrected. (See picture-Pump Station #33 (Bills Grill)-Outside-1).
- c) This will be corrected.

Also included with this letter will be a copy of a Corrective Action Plan. This plan has somewhat been reworked from the last copy received by the inspectors.

Pretreatment Compliance Inspection:

1. The IU site visit to Quala Wash (Previously PSC Container) revealed:
 - a) Lack of familiarity with pretreatment requirements by facility representative.

- b) Inadequate sample point. The sampling hose was placed horizontally inside a PVC "T".
- c) Tanker contents were drained onto the ground and bypassed pretreatment equipment.
- d) The drain valve was open on the secondary containment to the outdoor holding tank.

Response:

All of the above will be addressed with Quala Wash in a letter. When the letter is sent I will copy Michael Greenway/Brent Walker.

- 2. The IU site visit to ATM Oil/Jim's Tank Service revealed the following violations:
 - a) Lack of familiarity with pretreatment requirements by facility representatives.
 - b) This facility routinely discharged leachate into the West Memphis collection system in violation of the pretreatment permit. Additionally, West Memphis POTW personnel were not aware of the leachate received from this industrial user.
 - c) Inadequate sampling. Wastewater was hauled from Marion to West Memphis by truck and discharged into a manhole. Samples were usually taken from the bottom of the tanker and not from the top where oil was present.

Response:

- a) At the time of the inspection, everyone familiar with the requirements was working off site.
 - b) This has already been addressed somewhat with the City Attorney and will be addressed further now that we have received the letter addressing the issue.
 - c) This has been changed and all samples are now taken from the top of the tanker.
- 3. The baseline Monitoring Reports (BMR) were not reviewed for compliance with 40 CFR 403.12 (b). The BMR for Quala Wash did not include process flow diagrams, and a certification of compliance.

Response:

This will be addressed in a letter along with the other issues addressed. A copy of the letter will be sent to Michael Greenway/Brent Walker.

- 4. All permitted facilities were not inspected by the POTW. Only Categorical Industrial Users were inspected.

Response:

All Industrial User will be inspected this year.

If you needed additional information you may contact Denise Bosnick, Director Environmental Quality at 870-702-5141.

If I can be of assistance, please contact me at 870-702-5103.

Sincerely,

A handwritten signature in cursive script that reads "John Rimmer". The signature is written in dark ink and is positioned above the printed name and title.

John Rimmer
General Manager

Corrective Action Plan

The West Memphis Utility Commission proposes to enact a 5 year Corrective Action Plan to address the problems associated with excessive I/I onto the sanitary sewer system. This plan will address current problems and develop a program to abate future problems through an improved maintenance program. The following is a 4-step plan and the associated timeline.

1. Begin immediately a Phase I rehabilitation program to correct defects located during the SSES. All of the Priority 1 defects and most of the Priority 2 defects will be rehabilitated in 2013. This will consist of various methods of rehab including but not limited to:
 - A. Mainline point repairs
 - B. Relining or replacement of mainlines
 - C. Repair or replacement of manholes
 - D. Installation of rain caps for manholes
 - E. Root removal and mainline cleaning
 - F. Rehab of deficient pump stations
2. Upon completion of Phase I rehabilitation program, the SSES will be resumed in the areas that were not investigated during the initial SSES. The initial SSES included mapping, database development, pump station analysis and hydraulic assessment for the entire system. Therefore, the second phase SSES will consist primarily of field tasks to locate defects and prepare rehab recommendations within the area of the collection system that were not investigated in Phase I.

Another aspect to be undertaken in the Phase II SSES will be monitoring the results of the Phase I rehabilitation program and the effects on I/I reduction. These results will be used for future rehab programs to determine the most effective methods for achieving I/I reduction.
3. Based upon the results of the Phase II SSES, the Phase II rehabilitation program will be developed. All priority 1 defects found will be correct and based upon the effectiveness of priority 2 rehab in Phase I, a determination made Priority 2 repairs. Phase II rehab will be spread over a 2 year period as the area covered in the study is twice the size of the initial program.
4. The final step in the Corrective Action Plan is the development and implementation of a Comprehensive Maintenance Management Program (CMMP). The CMMP will be designed as a program to manage the maintenance and capital improvements of the system for the purpose of the efficient overall operation of the system to maintain regulatory compliance and eliminate customer service problems. The basis of the program is to provide a well organized approach in a proactive manner in identifying and correcting maintenance problems before they become customer service complaints or regulatory violations.

Specific aspects to be addressed in the development of a CMMP are as follows:

- A. Identify specific goals and objective of CMMP
- B. System and software to manage program
 - i. GIS Software
 - ii. Database development
- C. Evaluation of Equipment Needs for Operation of Program
 - i. Cleaning and Inspection of Equipment
 - ii. Investigate tools (smoke test)

The development of the CMMP will begin immediately with the program being implemented completely within 5 years.

Conclusion

West Memphis Utility Commission will be hiring an Engineering Consultant and RJN inc. to inspect a basin every year for the next 5 years. With there recommendations, make repairs where they are needed. West Memphis Utility Commission agrees to adopt this 5-year plan to achieve not only regulatory compliance, but also the efficient and cost effective collection and treatment of wastewater for its customers in West Memphis. This commitment is evident through the development of this Plan and the SSES. Further evidence of this commitment can be found in the following examples:

- I. Rehabbed 5 pump stations in the last 3 years and currently have ordered material for a future rehab.
- II. Replaced 50' of 24" pipe that was having major I/I problems.
- III. Acquiring budgetary numbers to install SCADA in all pumping stations.
- IV. Hiring an outside specialist to inspect pumps to see if they are pumping to capacity.
- V. Creating specifications for new installations to prevent future I/I problems
- VI. Self inspections of all 42 stations, repairs have been completed.

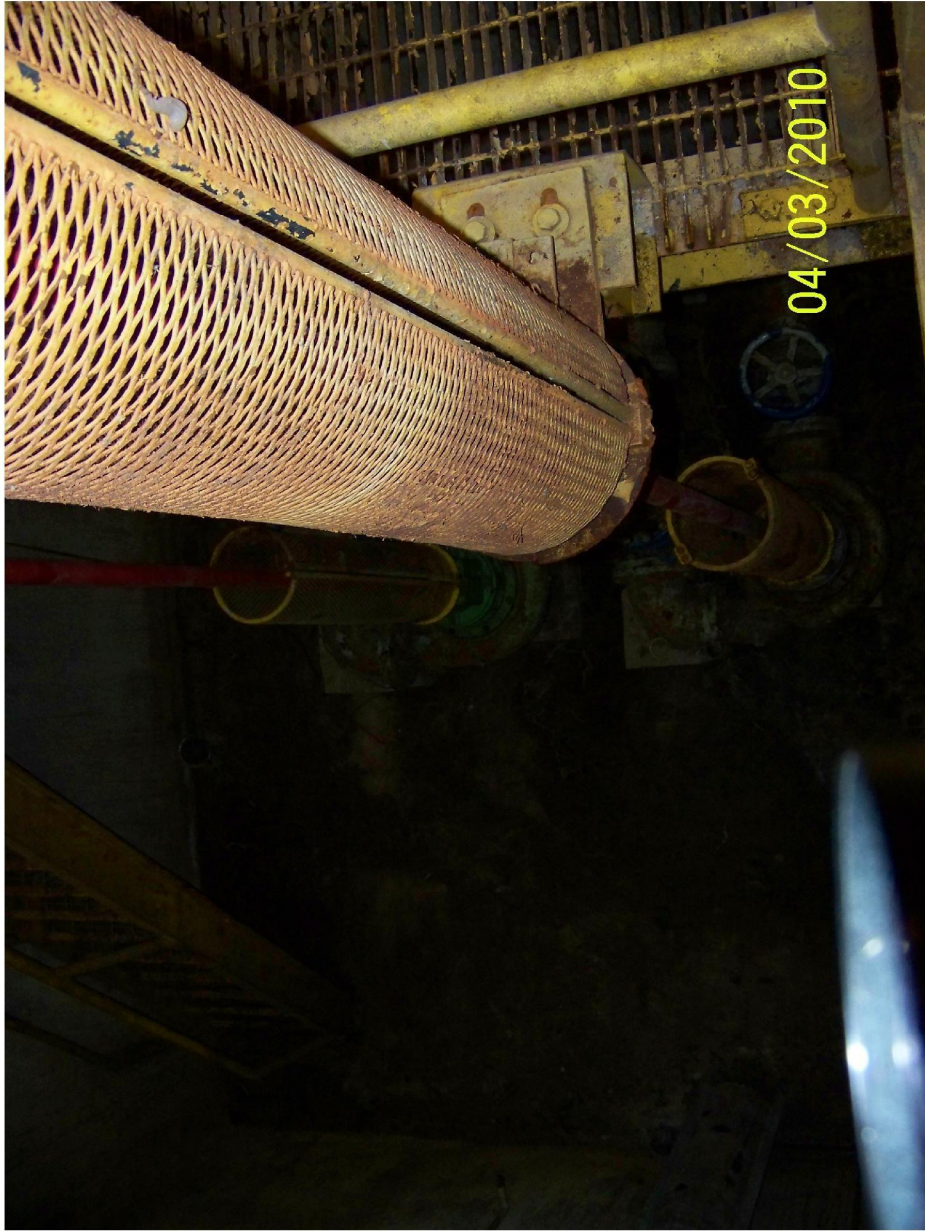
These projects and this Plan are strong evidence of the commitment by the City of West Memphis to address the sewer infrastructure in an aggressive and proactive manner. The elements of this plan will allow the City to achieve the stated goals and objectives of regulatory compliance and I/I reduction.





04/04/2010

































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