



STATE OF ARKANSAS
DEPARTMENT OF POLLUTION CONTROL AND ECOLOGY

8001 NATIONAL DRIVE, P.O. BOX 8913
LITTLE ROCK, ARKANSAS 72219-8913
PHONE: (501) 562-7444
FAX: (501) 562-4632



RECEIVED
JAN 11 1995
16 8 60

January 9, 1995

William Johnson, General Manager
West Memphis Water Utilities
Post Office Box 1868
West Memphis, AR 72301

Re: CSN: 18-0019; NPDES Permit No. AR0022039

Dear Mr. Johnson:

On December 20, 1994, I performed a routine permit compliance inspection of your facility pursuant to the federal Clean Water Act, the Arkansas Water and Air Pollution Control Act and the regulations promulgated thereunder. This inspection revealed the inspections on I.U.s were not performed on five facilities during 1994.

The aforementioned item requires your immediate attention. Please submit a written response to these findings to the NPDES Branch of this Department no later than February 9, 1995. Violations of your NPDES permit are subject to enforcement actions by this Department. You should take reasonable measures to eliminate or prevent the recurrence of such violations in the future.

If you have any questions, please contact me.

Sincerely,

Frank Esing

for

Stephen Browning
District Field Inspector
Water Division

SB/sy

cc: NPDES Branch

NPDES COMPLIANCE FILES

NPDES # 22039 *Alpenn coded*

_____ DMR'S

_____ NCR

CORRESPONDENCE

_____ CRAS

** See Allen Gilliam for complete report.*



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me

January 9, 1995

RECEIVED
JAN 11 1995
16861

William Johnson, General Manager
West Memphis Water Utilities
Post Office Box 1868
West Memphis, AR 72301

Re: CSN: 18-0019; NPDES Permit No. AR0022039

Dear Mr. Johnson:

On December 21, 1995, I performed a routine permit compliance inspection of your facility pursuant to the Arkansas Water and Air Pollution Control Act and the regulations promulgated thereunder. This inspection revealed that you are in compliance with the applicable regulations.

If I can be of any assistance, please feel free to contact me.

Sincerely,

Frank Esen

for
Stephen Browning
District Field Inspector
Water Division

SB/sy

cc: NPDES Branch

NPDES COMPLIANCE FILES

NPDES # 22039 *Ilpam*

DMR'S

NCR

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JEC



United States Environmental Protection Agency
Washington, D. C. 20460

NPDES Compliance Inspection Report

Form Approved
OMB No. 2040-0003
Approval Expires 7-31-85

Section A: National Data System Coding

Transaction Code: 1N 25 3AR00022039 11 12941221 17
 NPDES yr/mo/day Inspection Type: 18C Inspector: 19S Fac Type: 201

Remarks

CSM 118-0019

Reserved Facility Evaluation Rating BI OA
 67 69 70A 71N 72M 73 74 75 80

Section B: Facility Data

Name and Location of Facility Inspected City of West Memphis Sec 19, R9E, T6N Crittenden County		Entry Time <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM 9:20	Permit Effective Date Sept 1, 1990
Name(s) of On-Site Representative(s) GREGA ST. JOHN		Exit Time/Date 15:00 pm 12/21/94	Permit Expiration Date Aug 31, 1995
Title(s) PROJECT MGR.		Phone No(s) 501 735-9862	
Name, Address of Responsible Official William Johnson P.O. Box 1868 West Memphis, AR 72301		Title GENERAL MGR. WATER UTILITIES	Phone No. 501-735-3355
		Contacted <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Section C: Areas Evaluated During Inspection

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

S	Permit	S	Flow Measurement	S	Pretreatment	S	Operations & Maintenance
S	Records/Reports	S	Laboratory	S	Compliance Schedules	S	Sludge Disposal
S	Facility Site Review	S	Effluent/Receiving Waters	S	Self-Monitoring Program		Other:

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

1994 DMR review showed a pH excursion of 5.9 during JANUARY. The excursion lasted APPROX 1hr.

Facility was being operated very well AND WAS IN COMPLIANCE AT TIME OF INSPECTION.

Name(s) and Signature(s) of Inspector(s) Stephen Browning	Agency/Office/Telephone ADPCTE / STUTTGART, AR	Date 1-6-95
Signature of Reviewer Stephen Browning	Agency/Office 501-673-8846	Date

Regulatory Office Use Only

Action Taken	Date JAN 1 1995 1/6/95	Compliance Status <input type="checkbox"/> Noncompliance <input checked="" type="checkbox"/> Compliance
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Sections F thru L: Complete on all inspections, as appropriate. N/A = Not Applicable

PERMIT NO.
AR0022039

SECTION F - Facility and Permit Background

ADDRESS OF PERMITTEE IF DIFFERENT FROM FACILITY
(Including City, County and ZIP code)

DATE OF LAST PREVIOUS INVESTIGATION BY EPA/STATE
12-29-93 STATE

FINDINGS
NO PRIMARY FLOW MEASUREMENT

SECTION G - Records and Reports

RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT. YES NO N/A (Further explanation attached **NO**)
DETAILS:

(a) ADEQUATE RECORDS MAINTAINED OF:

- (i) SAMPLING DATE, TIME, EXACT LOCATION YES NO N/A
- (ii) ANALYSES DATES, TIMES YES NO N/A
- (iii) INDIVIDUAL PERFORMING ANALYSIS YES NO N/A
- (iv) ANALYTICAL METHODS/TECHNIQUES USED YES NO N/A
- (v) ANALYTICAL RESULTS (e.g., consistent with self-monitoring report data) YES NO N/A

(b) MONITORING RECORDS (e.g., flow, pH, D.O., etc.) MAINTAINED FOR A MINIMUM OF THREE YEARS INCLUDING ALL ORIGINAL STRIP CHART RECORDINGS (e.g., continuous monitoring instrumentation, calibration and maintenance records). YES NO N/A

(c) LAB EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS KEPT. YES NO N/A

(d) FACILITY OPERATING RECORDS KEPT INCLUDING OPERATING LOGS FOR EACH TREATMENT UNIT. YES NO N/A

(e) QUALITY ASSURANCE RECORDS KEPT. YES NO N/A

(f) RECORDS MAINTAINED OF MAJOR CONTRIBUTING INDUSTRIES (and their compliance status) USING PUBLICLY OWNED TREATMENT WORKS. **AT MAIN OFFICE ON Cooper St.** YES NO N/A

SECTION H - Permit Verification

INSPECTION OBSERVATIONS VERIFY THE PERMIT. YES NO N/A (Further explanation attached **NO**)
DETAILS:

(a) CORRECT NAME AND MAILING ADDRESS OF PERMITTEE. YES NO N/A

(b) FACILITY IS AS DESCRIBED IN PERMIT. YES NO N/A

(c) PRINCIPAL PRODUCT(S) AND PRODUCTION RATES CONFORM WITH THOSE SET FORTH IN PERMIT APPLICATION. YES NO N/A

(d) TREATMENT PROCESSES ARE AS DESCRIBED IN PERMIT APPLICATION. YES NO N/A

(e) NOTIFICATION GIVEN TO EPA/STATE OF NEW, DIFFERENT OR INCREASED DISCHARGES. YES NO N/A

(f) ACCURATE RECORDS OF RAW WATER VOLUME MAINTAINED. YES NO N/A

(g) NUMBER AND LOCATION OF DISCHARGE POINTS ARE AS DESCRIBED IN PERMIT. YES NO N/A

(h) CORRECT NAME AND LOCATION OF RECEIVING WATERS. YES NO N/A

(i) ALL DISCHARGES ARE PERMITTED. YES NO N/A

SECTION I - Operation and Maintenance

TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED. YES NO N/A (Further explanation attached **NO**)
DETAILS:

(a) STANDBY POWER OR OTHER EQUIVALENT PROVISIONS PROVIDED. YES NO N/A

(b) ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE. YES NO N/A

(c) REPORTS ON ALTERNATE SOURCE OF POWER SENT TO EPA/STATE AS REQUIRED BY PERMIT. YES NO N/A

(d) SLUDGES AND SOLIDS ADEQUATELY DISPOSED. YES NO N/A

(e) ALL TREATMENT UNITS IN SERVICE. YES NO N/A

(f) CONSULTING ENGINEER RETAINED OR AVAILABLE FOR CONSULTATION ON OPERATION AND MAINTENANCE PROBLEMS. YES NO N/A

(g) QUALIFIED OPERATING STAFF PROVIDED. YES NO N/A

(h) ESTABLISHED PROCEDURES AVAILABLE FOR TRAINING NEW OPERATORS. YES NO N/A

(i) FILES MAINTAINED ON SPARE PARTS INVENTORY, MAJOR EQUIPMENT SPECIFICATIONS, AND PARTS AND EQUIPMENT SUPPLIERS. YES NO N/A

(j) INSTRUCTIONS FILES KEPT FOR OPERATION AND MAINTENANCE OF EACH ITEM OF MAJOR EQUIPMENT. YES NO N/A

(k) OPERATION AND MAINTENANCE MANUAL MAINTAINED. YES NO N/A

(l) SPCC PLAN AVAILABLE. YES NO N/A

(m) REGULATORY AGENCY NOTIFIED OF BY PASSING. (Dates _____) YES NO N/A

(n) ANY BY-PASSING SINCE LAST INSPECTION. YES NO N/A

(o) ANY HYDRAULIC AND/OR ORGANIC OVERLOADS EXPERIENCED. YES NO N/A

PERMIT NO.
AR0022039

SECTION J - Compliance Schedules

PERMITTEE IS MEETING COMPLIANCE SCHEDULE. YES NO N/A (Further explanation attached NO)

CHECK APPROPRIATE PHASE(S):

- (a) THE PERMITTEE HAS OBTAINED THE NECESSARY APPROVALS FROM THE APPROPRIATE AUTHORITIES TO BEGIN CONSTRUCTION.
- (b) PROPER ARRANGEMENT HAS BEEN MADE FOR FINANCING (mortgage commitments, grants, etc.).
- (c) CONTRACTS FOR ENGINEERING SERVICES HAVE BEEN EXECUTED.
- (d) DESIGN PLANS AND SPECIFICATIONS HAVE BEEN COMPLETED.
- (e) CONSTRUCTION HAS COMMENCED.
- (f) CONSTRUCTION AND/OR EQUIPMENT ACQUISITION IS ON SCHEDULE.
- (g) CONSTRUCTION HAS BEEN COMPLETED.
- (h) START-UP HAS COMMENCED.
- (i) THE PERMITTEE HAS REQUESTED AN EXTENSION OF TIME.

SECTION K - Self-Monitoring Program

Part 1 - Flow measurement (Further explanation attached YES)

PERMITTEE FLOW MEASUREMENT MEETS THE REQUIREMENTS AND INTENT OF THE PERMIT. YES NO N/A
DETAILS:

- (a) PRIMARY MEASURING DEVICE PROPERLY INSTALLED. YES NO N/A
TYPE OF DEVICE: WEIR PARSHALL FLUME MAGMETER VENTURI METER OTHER (Specify _____)
- (b) CALIBRATION FREQUENCY ADEQUATE. (Date of last calibration FEB 4, 1994) YES NO N/A
- (c) PRIMARY FLOW MEASURING DEVICE PROPERLY OPERATED AND MAINTAINED. YES NO N/A
- (d) SECONDARY INSTRUMENTS (totalizers, recorders, etc.) PROPERLY OPERATED AND MAINTAINED. YES NO N/A
- (e) FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGES OF FLOW RATES. YES NO N/A

Part 2 - Sampling (Further explanation attached NO)

PERMITTEE SAMPLING MEETS THE REQUIREMENTS AND INTENT OF THE PERMIT. YES NO N/A
DETAILS:

- (a) LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES. YES NO N/A
- (b) PARAMETERS AND SAMPLING FREQUENCY AGREE WITH PERMIT. YES NO N/A
- (c) PERMITTEE IS USING METHOD OF SAMPLE COLLECTION REQUIRED BY PERMIT. YES NO N/A
IF NO, GRAB MANUAL COMPOSITE AUTOMATIC COMPOSITE FREQUENCY
- (d) SAMPLE COLLECTION PROCEDURES ARE ADEQUATE. YES NO N/A
 - (i) SAMPLES REFRIGERATED DURING COMPOSITING YES NO N/A
 - (ii) PROPER PRESERVATION TECHNIQUES USED YES NO N/A
 - (iii) FLOW PROPORTIONED SAMPLES OBTAINED WHERE REQUIRED BY PERMIT YES NO N/A
 - (iv) SAMPLE HOLDING TIMES PRIOR TO ANALYSES IN CONFORMANCE WITH 40 CFR 136.3 YES NO N/A
- (e) MONITORING AND ANALYSES BEING PERFORMED MORE FREQUENTLY THAN REQUIRED BY PERMIT. YES NO N/A
- (f) IF (e) IS YES, RESULTS ARE REPORTED IN PERMITTEE'S SELF-MONITORING REPORT. YES NO N/A

Part 3 - Laboratory (Further explanation attached NO)

PERMITTEE LABORATORY PROCEDURES MEET THE REQUIREMENTS AND INTENT OF THE PERMIT. YES NO N/A
DETAILS: IN HOUSE LAB USED FOR PERMIT REQUIREMENTS

- (a) EPA APPROVED ANALYTICAL TESTING PROCEDURES USED. (40 CFR 136.3) YES NO N/A
- (b) IF ALTERNATE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED. YES NO N/A
- (c) PARAMETERS OTHER THAN THOSE REQUIRED BY THE PERMIT ARE ANALYZED. YES NO N/A
- (d) SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT. YES NO N/A
- (e) QUALITY CONTROL PROCEDURES USED. YES NO N/A
- (f) DUPLICATE SAMPLES ARE ANALYZED. 10 % OF TIME. YES NO N/A
- (g) SPIKED SAMPLES ARE USED. 10 % OF TIME. YES NO N/A
- (h) COMMERCIAL LABORATORY USED. YES NO N/A
- (i) COMMERCIAL LABORATORY STATE CERTIFIED. YES NO N/A

LAB NAME ENVIRONMENTAL TESTING
LAB ADDRESS 2924 WALNUT GROOVE RD. MEMPHIS TN 38111

PERMIT NO.

AR0022039

SECTION L - Effluent/Receiving Water Observations (Further explanation attached NO)

OUTFALL NO.	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	VISIBLE FLOAT SOL	COLOR	OTHER
001	—	—	—	—	—	Clear	—

(Sections M and N: Complete as appropriate for sampling inspections)

SECTION M - Sampling Inspection Procedures and Observations (Further explanation attached N/A)

- GRAB SAMPLES OBTAINED
- COMPOSITE OBTAINED
- FLOW PROPORTIONED SAMPLE
- AUTOMATIC SAMPLER USED
- SAMPLE SPLIT WITH PERMITTEE
- CHAIN OF CUSTODY EMPLOYED
- SAMPLE OBTAINED FROM FACILITY SAMPLING DEVICE

COMPOSITING FREQUENCY _____ PRESERVATION _____

SAMPLE REFRIGERATED DURING COMPOSITING: YES NO

SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE _____

SECTION N - Analytical Results (Attach report if necessary)

Blank area for analytical results.

