ADEQ
ARKANSAS
Department of Environmental Quality

May 16, 2012

David Cameron, City Administrator
City of Siloam Springs
P.O. Box 80
Siloam Springs, Arkansas 72761

RE: Compliance Evaluation Inspection

AFIN: 04-00106 NPDES Permit Tracking No.: AR0020273

Dear Mr. Cameron:

On March 21, 2012, accompanied by James Eng, EPA Region 6, I performed a routine compliance evaluation inspection of the wastewater 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. Your permit states that 24-hour flow-proportioned composite samples must be collected for several effluent parameters. However, Jack Harriston, Operator, stated that the Isco automatic effluent sampler was disconnected from the Isco effluent flow meter during POTW expansion construction, and that it is not connected to the ABB transmitter flow meter currently in use. Mr. Harriston stated that the sampler is programmed to collect effluent portions every hour, not proportional to flow, indicating that the plant has been collecting 24-hour time-weighted composite samples. This is in violation of Part 1.A, Part II.B.1.a and Part II.C.1 of your permit. Refer to Part IV (20) of your permit for the definition of 24-hour composite sample.

2. Because 24-hour time-weighted composite samples have been taken for effluent parameters requiring 24-hour flow-proportioned composite samples, it has not been possible for you to report accurate mass-loading rates for these parameters on your monthly discharge monitoring reports (DMRs). This is in violation of Part 1.A and Part II.C.1 of your permit.

3. The following are violations of Part II.C.3 of your permit:

    a. According to Mr. Harriston, bagged ice must be used to supplement cooling of samples to 6 degrees C in your influent and effluent refrigerators. These refrigerators are not functioning as designed and must be replaced.
    b. Mr. Harriston stated that fecal coliform bacteria (FCB) samples are being collected with an unsterilized scoop. FCB sampling equipment must be sterilized prior to each sampling event.

c. All sample refrigerator thermometers have not been calibrated against a certified thermometer since 2009.
d. Your records indicate that your lab is using EPA Method 360.1 for dissolved oxygen analysis and EPA Method 330.5 for total residual chlorine analysis. These procedures are not currently approved by 40 CFR Part 136.

4. Your standard operating procedures (SOP) must be updated. For example, the SOP for measuring dissolved oxygen does not reference a test procedure approved by 40 CFR 136, but rather references a method internally designated as WW006. This is in violation of Part II.B.1.a of your permit.

5. Only one of the two generators used for standby power was in service at the time of the inspection. According to Mr. Harriston, the north generator was taken out of service during construction related to the POTW expansion. The south generator does not provide backup power to all of the plant's treatment units. This is in violation of Part II.B.7 of your permit.

6. Excessive grease and algae buildup on the weirs of the primary clarifier and excessive algae buildup on the weirs of the two final clarifiers was causing short circuiting of flow in each of these clarifiers. This is in violation of Part II.B.1.a of your permit. These conditions could cause overflow of settling solids into the launders during high flow periods. Cleaning of the weirs should take place as necessary to allow for equal and unobstructed flow through each of the weirs.

7. Part II.C.2 of your permit states that flow measurement devices must be capable of measuring flows with a maximum deviation of less than +/- 10% from true discharge rates throughout the range of expected discharge volumes and shall be installed at the monitoring point of the discharge. The meter at the primary flow measurement device was not in service (see Item 1 above). According to Mr. Harriston, an alternate flow meter (ABB transmitter flow meter) has been used to measure flow. This meter measures flow through a pipe from the final clarifiers to the primary flow measurement device. At the time of the inspection, the discharge rates between the primary flow device and the ABB transmitter deviated by 17%. In addition, flow through the rectangular weir was turbulent, causing significant fluctuations in the water level as it flowed past the gauge used to measure head in this device.

8. Part IV (18) of your permit states that the 7-day average discharge limitation is the highest allowable arithmetic mean (geometric mean for FCB) of the values for all effluent samples collected during the calendar week. It states that the DMR should report the highest 7-day average obtained during the calendar month, and that for reporting purposes, the 7-day average values should be reported as occurring in the month in which the Saturday of the calendar week falls in. Total suspended solids (TSS) and total phosphorus (TP) concentrations in the effluent samples taken on Wednesday, November 30, 2011 were 5.0 mg/L and 1.18 mg/L, respectively. These are the 7-day average values you reported for these parameters on your November 2011 DMR. Review of your records indicates that 7-

day average values of 3.0 mg/L TSS and 0.46 mg/L TP should have been reported on your November 2011 DMR.

The above items require your immediate attention. Please submit a written response to these findings to the "Water Division Enforcement Branch". The response should be mailed to the address provided on the letterhead, or e-mailed to *Water-Inspection-report@adeq.state.ar.us*. This response should contain documentation describing the course of action taken to correct each item noted. You must include color photographs that document your corrective action, where applicable. This corrective action should be completed as soon as possible, and the response with all necessary documentation is due by May 29, 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 any assistance, please contact me at 479-267-0811, ext. 16.

Sincerely,

John Fazio
District 1 Inspector
Water Division

cc: Water Division Enforcement Branch
Water Division Permits Branch

EPA

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

NPDES Compliance Inspection Report

Form Approved
OMB No. 2040-0003

Section A: National Data System Coding

1	Transaction Code	2	NPDES	11	12	Yr/Mo/Day	17	18	Inspec. Type	19	Inspector	20	Fac. Type
	N	5	AR0020273			120321			C		T		1

Remarks

67	Inspection Work Days	69	70	Facility Evaluation Rating	71	BI	72	QA	73	Reserved	74	75	Reserved	80
				1		N		N						

Section B: Facility Data

Name and Location of Facility Inspected *(For industrial users discharging to POTW, also include POTW name and NPDES permit number)*	Entry Time/Date	Permit Effective Date
City of Siloam Springs Pollution Control Plant **975 Anderson Ave.** **Siloam Springs, Arkansas 72761**	**0940 / 03-21-12**	**October 1, 2007**
	Exit Time/Date **1535 / 03-21-12**	Permit Expiration Date **September 30, 2012**

Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)	Other Facility Data
Jack Harriston / Operator / 479-524-5623 / 479-524-4653	**Outfall 001: 36.19396, -94.56398** **PDS #065668**
Name, Address of Responsible Official/Title/Phone and Fax Number **David Cameron / Public Works Director / 479-524-5136 / 479-524-8513** **City of Siloam Springs** **P.O. Box 80** **Siloam Springs, Arkansas 72761**	Contacted Yes ☐ No ☑

Section C: Areas Evaluated During Inspection

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

S	Permit	U	Flow Measurement	M	Operations & Maintenance	U	Sampling
M	Records/Reports	U	Self-Monitoring Program	S	Sludge Handling/Disposal	N	Pollution Prevention
S	Facility Site Review	N	Compliance Schedules	N	Pretreatment	N	Multimedia
S	Effluent/Receiving Waters	M	Laboratory	N	Storm Water		Other:

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

James Eng, EPA Region 6, and Jack Harriston, WWTP Operator, were present during my compliance evaluation inspection of the wastewater treatment facility.

Discharge Monitoring Reports (DMRs) and DMR calculating spreadsheets were reviewed for the months of November 2011 – January 2012. There were no permit effluent limit excursions during these months.

See Page 11 of this report for a summary of findings.

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Telephone/Fax	Date
John Fazio	**AR Dept. of Environmental Quality-Fayetteville** **479-267-0811, ext. 16; 479-267-0819 (fax)**	**May 10, 2012**
Signature of Reviewer	Agency/Office/Phone and Fax Numbers	Date

SECTION A: PERMIT VERIFICATION

PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS	☑S ☐M ☐U ☐NA ☐NE
DETAILS:	
1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE:	☑Y ☐N ☐NA ☐NE
2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES:	☐Y ☐N ☑NA ☐NE
3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT:	☑Y ☐N ☐NA ☐NE
4. ALL DISCHARGES ARE PERMITTED:	☑Y ☐N ☐NA ☐NE

SECTION B: RECORDKEEPING AND REPORTING EVALUATION

RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT	☐S ☑M ☐U ☐NA ☐NE
DETAILS:	
1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRS: **Not reporting 7-day averages in the manner as defined in Part IV of the permit.**	☐Y ☑N ☐NA ☐NE
2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE:	☑S ☐M ☐U ☐NA ☐NE
a. DATES AND TIME(S) OF SAMPLING:	☑Y ☐N ☐NA ☐NE
b. EXACT LOCATION(S) OF SAMPLING:	☑Y ☐N ☐NA ☐NE
c. NAME OF INDIVIDUAL PERFORMING SAMPLING:	☑Y ☐N ☐NA ☐NE
d. ANALYTICAL METHODS AND TECHNIQUES:	☑Y ☐N ☐NA ☐NE
e. RESULTS OF CALIBRATIONS:	☑Y ☐N ☐NA ☐NE
f. RESULTS OF ANALYSES:	☑Y ☐N ☐NA ☐NE
g. DATES AND TIMES OF ANALYSES:	☑Y ☐N ☐NA ☐NE
h. NAME OF PERSON(S) PERFORMING ANALYSES:	☑Y ☐N ☐NA ☐NE
3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE:	☑S ☐M ☐U ☐NA ☐NE
4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR:	☑S ☐M ☐U ☐NA ☐NE
5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA:	☑Y ☐N ☐NA ☐NE

SECTION C: OPERATIONS AND MAINTENANCE

TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED	☐S ☑M ☐U ☐NA ☐NE
DETAILS:	
1. TREATMENT UNITS PROPERLY OPERATED:	☑S ☐M ☐U ☐NA ☐NE
2. TREATMENT UNITS PROPERLY MAINTAINED: **Short circuiting occurring at all in-service clarifiers due to excessive grease and/or algae buildup on weirs.**	☐S ☑M ☐U ☐NA ☐NE
3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED: **North generator not in service and is needed for some of the treatment units (i.e., the south generator (in service) does not provide standby power to the entire plant).**	☐S ☐M ☑U ☐NA ☐NE
4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE:	☑S ☐M ☐U ☐NA ☐NE
5. ALL NEEDED TREATMENT UNITS IN SERVICE: **Note: Grit chamber, one of two primary clarifiers & primary sludge thickener not in service.**	☑S ☐M ☐U ☐NA ☐NE
6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED:	☑S ☐M ☐U ☐NA ☐NE
7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED: **Not required; not a 92-500 facility**	☐S ☐M ☐U ☑NA ☐NE
8. OPERATION AND MAINTENANCE MANUAL AVAILABLE:	☑Y ☐N ☐NA ☐NE
9. STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED: **Needs to be updated**	☑Y ☐N ☐NA ☐NE
10. PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED:	☐Y ☐N ☐NA ☑NE
11. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR:	☑Y ☐N ☐NA ☐NE
12. IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED:	☑Y ☐N ☐NA ☐NE
13. HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS:	☑Y ☐N ☐NA ☐NE
14. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT:	☐Y ☑N ☐NA ☐NE
15. IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT:	☐Y ☐N ☑NA ☐NE

SECTION D: SAMPLING

PERMITTEE SAMPLING MEETS PERMIT REQUIREMENTS	☐S ☐M ☑U ☐NA ☐NE
DETAILS:	
1. SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT:	☑Y ☐N ☐NA ☐NE
2. LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES:	☑Y ☐N ☐NA ☐NE
3. FLOW PROPORTIONED SAMPLES OBTAINED WHEN REQUIRED BY PERMIT: **Time-weighted: auto-sampler not hooked up to a flow meter.**	☐Y ☑N ☐NA ☐NE
4. SAMPLING AND ANALYSES COMPLETED ON PARAMETERS SPECIFIED IN PERMIT:	☑Y ☐N ☐NA ☐NE
5. SAMPLING AND ANALYSES PERFORMED AT FREQUENCY SPECIFIED IN PERMIT:	☑Y ☐N ☐NA ☐NE
6. SAMPLE COLLECTION PROCEDURES ADEQUATE: **FCB samples are collected with an unsterilized scoop.**	☐Y ☑N ☐NA ☐NE
a. SAMPLES REFRIGERATED DURING COMPOSITING: **However; condition of refrigerators requires supplementing cooling w/ ice.**	☑Y ☐N ☐NA ☐NE
b. PROPER PRESERVATION TECHNIQUES USED:	☑Y ☐N ☐NA ☐NE
c. CONTAINERS AND SAMPLE HOLDING TIMES CONFORM TO 40 CFR 136:	☑Y ☐N ☐NA ☐NE
7. IF MONITORING IS PERFORMED MORE OFTEN THAN REQUIRED ARE RESULTS REPORTED ON THE DMR:	☑Y ☐N ☐NA ☐NE

SECTION E: FLOW MEASUREMENT

PERMITTEE FLOW MEASUREMENT MEETS PERMIT REQUIREMENTS	☐S ☐M ☑U ☐NA ☐NE
DETAILS:	
1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED:__ TYPE OF DEVICE: **5 foot rectangular weir without end contractions.**	☑Y ☐N ☐NA ☐NE
2. FLOW MEASURED AT EACH OUTFALL AS REQUIRED:	☑Y ☐N ☐NA ☐NE
3. SECONDARY INSTRUMENTS (TOTALIZERS, RECORDERS, ETC.) PROPERLY OPERATED AND MAINTAINED: **Isco meter not in use. At the time of the inspection, the alternate meter (ABB Transmitter Flowmeter) was not capable of measuring flow with a maximum deviation of less than +/- 10% from the true discharge rate. The deviation was 17%.**	☐Y ☑N ☐NA ☐NE
4. CALIBRATION FREQUENCY ADEQUATE:	☑Y ☐N ☐NA ☐NE
5. RECORDS MAINTAINED OF CALIBRATION PROCEDURES:	☑Y ☐N ☐NA ☐NE
6. CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE:	☑Y ☐N ☐NA ☐NE
7. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE: **Turbulent flow.**	☐Y ☑N ☐NA ☐NE
8. FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES:	☑Y ☐N ☐NA ☐NE
9. HEAD MEASURED AT PROPER LOCATION:	☐Y ☐N ☐NA ☑NE

SECTION F: LABORATORY

PERMITTEE LABORATORY PROCEDURES MEET PERMIT REQUIREMENTS	☐S ☑M ☐U ☐NA ☐NE
DETAILS:	
1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(B) FOR SLUDGES): **EPA Methods used for TRC and DO measurement are not currently approved.**	☐Y ☑N ☐NA ☐NE
2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED:	☐Y ☑N ☐NA ☐NE
3. SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT: **Thermometers in all sample refrigerators have not been calibrated against a certified thermometer since 2009.**	☐Y ☑N ☐NA ☐NE
4. QUALITY CONTROL PROCEDURES ADEQUATE:	☑Y ☐N ☐NA ☐NE
5. DUPLICATE SAMPLES ARE ANALYZED ≥10% OF THE TIME:	☑Y ☐N ☐NA ☐NE
6. SPIKED SAMPLES ARE ANALYZED ≥10% OF THE TIME:	☑Y ☐N ☐NA ☐NE
7. COMMERCIAL LABORATORY USED:	☑Y ☐N ☐NA ☐NE
a. LAB NAME: **ETG** **American Interplex**	
b. LAB ADDRESS: **1702 E. Central Ave, Bentonville, AR 72712** **8600 Kanis Rd., Little Rock, AR 72204**	
c. PARAMETERS PERFORMED: **CBOD5, TSS, NH3-N, TP, TRC, NO3-N** **Biomonitoring**	
8. BIOMONITORING PROCEDURES ADEQUATE:	☑Y ☐N ☐NA ☐NE
a. PROPER ORGANISMS USED:	☑Y ☐N ☐NA ☐NE
b. PROPER DILUTION SERIES FOLLOWED:	☑Y ☐N ☐NA ☐NE
c. PROPER TEST METHODS AND DURATION:	☑Y ☐N ☐NA ☐NE
d. RETESTS AND/OR TRE PERFORMED AS REQUIRED:	☑Y ☐N ☐NA ☐NE

SECTION G: EFFLUENT/RECEIVING WATERS OBSERVATIONS

BASED ON VISUAL OBSERVATIONS ONLY ☑S ☐M ☐U ☐NA ☐NE

DETAILS:

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

SECTION H: SLUDGE DISPOSAL

SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS ☑S ☐M ☐U ☐NA ☐NE

DETAILS: **Sludge is disposed at Waste Management Landfill in Tontitown, AR**

1. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY: ☑S ☐M ☐U ☐NA ☐NE
2. SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503: ☐S ☐M ☐U ☐NA ☑NE
3. FOR LAND APPLIED SLUDGE, TYPE OF LAND APPLIED TO: (E.G., FOREST, AGRICULTURAL, PUBLIC CONTACT SITE):

SECTION I: SAMPLING INSPECTION PROCEDURES

SAMPLE RESULTS WITHIN PERMIT REQUIREMENTS ☐S ☐M ☐U ☐NA ☑NE

DETAILS:

1. SAMPLES OBTAINED THIS INSPECTION: ☐Y ☐N ☐NA ☑NE
2. TYPE OF SAMPLE: ☐GRAB:__ ☐COMPOSITE:__ METHOD:__ FREQUENCY:
3. SAMPLES PRESERVED: ☐Y ☐N ☐NA ☑NE
4. FLOW PROPORTIONED SAMPLES OBTAINED: ☐Y ☐N ☐NA ☑NE
5. SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE: ☐Y ☐N ☐NA ☑NE
6. SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE: ☐Y ☐N ☐NA ☑NE
7. SAMPLE SPLIT WITH PERMITTEE: ☐Y ☐N ☐NA ☑NE
8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED: ☐Y ☐N ☐NA ☑NE
9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT: ☐Y ☐N ☐NA ☑NE

SECTION J: STORM WATER POLLUTION PREVENTION PLAN

STORM WATER MANAGEMENT MEETS PERMIT REQUIREMENTS ☐S ☐M ☐U ☐NA ☑NE

DETAILS:

1. SWPPP UPDATED AS NEEDED:__ DATE OF LAST UPDATE: ☐Y ☐N ☐NA ☑NE
2. SITE MAP INCLUDING ALL DISCHARGES AND SURFACE WATERS: ☐Y ☐N ☐NA ☑NE
3. POLLUTION PREVENTION TEAM IDENTIFIED: ☐Y ☐N ☐NA ☑NE
4. POLLUTION PREVENTION TEAM PROPERLY TRAINED: ☐Y ☐N ☐NA ☑NE
5. LIST OF POTENTIAL POLLUTANT SOURCES: ☐Y ☐N ☐NA ☑NE
6. LIST OF POTENTIAL SOURCES AND PAST SPILLS AND LEAKS: ☐Y ☐N ☐NA ☑NE
7. ALL NON-STORM WATER DISCHARGES ARE AUTHORIZED: ☐Y ☐N ☐NA ☑NE
8. LIST OF STRUCTURAL BMPS: ☐Y ☐N ☐NA ☑NE
9. LIST OF NON-STRUCTURAL BMPS: ☐Y ☐N ☐NA ☑NE
10. BMPS PROPERLY OPERATED AND MAINTAINED: ☐Y ☐N ☐NA ☑NE
11. INSPECTIONS CONDUCTED AS REQUIRED: ☐Y ☐N ☐NA ☑NE

FLOW CALCULATION SHEET

Date: **03/21/12** Time: **1050**

Head in Inches: _____ Feet: **0.85**

Type & Size of Primary Flow Measurement Device: **5 foot rectangular weir without end contractions**

Name & Model of Secondary Flow Measurement Device: **ABB Transmitter Flowmeter**

Date of last Calibration of Secondary Flow Device: **02/29/12**

Recorded Flow at Date & Time Listed Above: **9.86 MGD** (Facility Flow Meter)

Calculated Flow at Date & Time Listed Above: **8.43 MGD**

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

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

$$\% \text{ Error} = \frac{9.86 - 8.43}{8.43} \times 100$$

$$\% \text{ Error} = \frac{1.43}{8.43} \times 100$$

% Error = 0.17 X 100

% Error = 17 %

Comments: Deviation > +/- 10%. Isco flow meter not in use.

DMR Calculation Check

Reporting Period: **From** 11 (Year) 11 (Month) 01 (Day) **To** 11 (Year) 11 (Month) 30 (Day)

Parameter Checked: **CBOD5**

	Loading Mass Mo. Avg. - lbs/day	Concentration Monthly Mo. Avg. - mg/l	Concentration Monthly 7-day Avg. - mg/l
Reported Value:	60.6	1.61	2.57
Calculated Value:	60.6	1.61	2.57
Permit Value:	550	15	22.5

If calculated value does not equal reported value, explain:

DMR Calculation Check

Reporting Period: **From** **11** (Year) **11** (Month) **01** (Day) **To** **11** (Year) **11** (Month) **30** (Day)

Parameter Checked: **TSS**

	Loading Mass Mo. Avg. - lbs/day	Concentration Monthly Mo. Avg. - mg/l	Concentration Monthly 7-day Avg. - mg/l
Reported Value:	**97.4**	**2.5**	**5.0**
Calculated Value:	**97.4**	**2.5**	**3.0**
Permit Value:	**734**	**20**	**30**

If calculated value does not equal reported value, explain:

Facility is not reporting the 7-day average in the manner defined by Part IV (18) of the permit. The reported value was for a sample taken on Wednesday, November 30, 2011. The date on Saturday of that calendar week was December 3, 2011.

NPDES Compliance Inspection Report
Further Explanation

The following violations were noted at the time of the inspection:

1. Flow-proportioned samples are not being taken for parameters that require 24-hour composite samples. Operator indicated that composite samples are time weighted only.
2. Because 24-hour time-weighted composite samples have been taken for effluent parameters requiring 24-hour flow-proportioned composite samples, it has not been possible for the facility to report accurate mass-loading rates for these parameters on their monthly discharge monitoring reports.
3. Monitoring procedures violations:
    a. It is necessary for the facility to supplement cooling of samples to 6 degrees C with ice in the influent and effluent refrigerators. These refrigerators are not functioning as designed and must be replaced.
    b. Fecal coliform bacteria samples are being collected with an unsterilized scoop.
    c. All sample refrigerator thermometers have not been calibrated against a certified thermometer since 2009.
    d. Records indicate that the facility's lab is using EPA Method 360.1 for dissolved oxygen analysis and EPA Method 330.5 for total residual chlorine analysis. These procedures are not currently approved by 40 CFR Part 136.
4. Facility's standard operating procedures must be updated. For example, the SOP for measuring dissolved oxygen does not reference a test procedure approved by 40 CFR 136, but rather references a method internally designated as WW006.
5. Only one of the two generators used for standby power was in service at the time of the inspection. According to staff, the north generator was taken out of service during construction related to the POTW expansion. The south generator does not provide backup power to all of the plant's treatment units.
6. Excessive grease and algae buildup on the weirs of the primary clarifier and excessive algae buildup on the weirs of the two final clarifiers was causing short circuiting of flow in each of these clarifiers.
7. At the time of the inspection, the effluent flow measurement devices were not capable of measuring flows with a maximum deviation of less than +/- 10% from true discharge rates. In addition, flow through the primary device was turbulent, causing significant fluctuations in the water level as it flowed past the gauge used to measure head in this device.
8. Facility is not reporting 7-day averages in the manner as defined in Part IV of the permit.

Note: The grit chamber, one of the two primary clarifiers and the primary sludge thickener were not operable at the time of the inspection.

Water Division NPDES Photographic Evidence Sheet								
Location:	City of Siloam Springs Pollution Control Plant							
Photographer:	John Fazio				**Witness:**	James Eng, EPA Region 6		
Photo #	1	**Of**	6		**Date:**	03/21/12	**Time:**	1034
Description:	Excessive algae buildup on weirs at final clarifier causing short circuiting.							

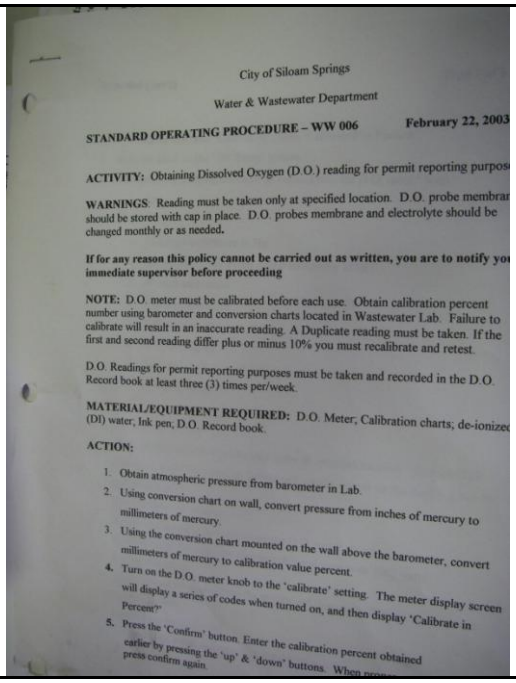
Photographer:	John Fazio				**Witness:**	James Eng, EPA Region 6		
Photo #	2	**Of**	6		**Date:**	03/21/12	**Time:**	1032
Description:	Excessive algae buildup on weirs at final clarifier causing short circuiting.							

Water Division NPDES Photographic Evidence Sheet								
Location:	City of Siloam Springs Pollution Control Plant							
Photographer:	John Fazio				**Witness:**	James Eng, EPA Region 6		
Photo #	3	**Of**	6		**Date:**	03/21/12	**Time:**	1054
Description:	ABB Transmitter Flowmeter used as secondary effluent flow measuring device.							

Photographer:	John Fazio				**Witness:**	James Eng, EPA Region 6		
Photo #	4	**Of**	6		**Date:**	03/21/12	**Time:**	1058
Description:	Turbulent flow through the primary flow measuring device.							

Water Division NPDES Photographic Evidence Sheet								
Location:	City of Siloam Springs Pollution Control Plant							
Photographer:	John Fazio				**Witness:**	James Eng, EPA Region 6		
Photo #	5	**Of**	6		**Date:**	03/21/12	**Time:**	1130
Description:	Turbulent flow through the primary flow measuring device before passing over the weir.							

Photographer:	John Fazio				**Witness:**	James Eng, EPA Region 6		
Photo #	6	**Of**	6		**Date:**	03/21/12	**Time:**	1304
Description:	SOP for measuring dissolved oxygen does not reference a test procedure approved by 40 CFR 136.							



City of Siloam Springs

Water & Wastewater Department

STANDARD OPERATING PROCEDURE – WW 006 **February 22, 2003**

ACTIVITY: Obtaining Dissolved Oxygen (D.O.) reading for permit reporting purpos

WARNINGS: Reading must be taken only at specified location. D.O. probe membra should be stored with cap in place. D.O. probes membrane and electrolyte should be changed monthly or as needed.

If for any reason this policy cannot be carried out as written, you are to notify yo immediate supervisor before proceeding

NOTE: D.O. meter must be calibrated before each use. Obtain calibration percent number using barometer and conversion charts located in Wastewater Lab. Failure to calibrate will result in an inaccurate reading. A Duplicate reading must be taken. If the first and second reading differ plus or minus 10% you must recalibrate and retest.

D.O. Readings for permit reporting purposes must be taken and recorded in the D.O. Record book at least three (3) times per/week.

MATERIAL/EQUIPMENT REQUIRED: D.O. Meter; Calibration charts; de-ionize (DI) water; Ink pen; D.O. Record book.

ACTION:

1. Obtain atmospheric pressure from barometer in Lab.
2. Using conversion chart on wall, convert pressure from inches of mercury to millimeters of mercury.
3. Using the conversion chart mounted on the wall above the barometer, convert millimeters of mercury to calibration value percent.
4. Turn on the D.O. meter knob to the 'calibrate' setting. The meter display screen will display a series of codes when turned on, and then display 'Calibrate in Percent?'
5. Press the 'Confirm' button. Enter the calibration percent obtained earlier by pressing the 'up' & 'down' buttons. When

CITY OF
Siloam Springs
It's a natural

May 29, 2012

Sent Via E-Mail and Certified U.S. Mail

Water Division Enforcement Branch
Arkansas Department of Environmental Quality
5301 Northshore Drive
North Little Rock, Arkansas 72118-5317
Water-Inspection-Report@adeq.state.ar.us

To Whom It May Concern:

Enclosed please find the City of Siloam Spring's response to the Arkansas Department of Environmental Quality Inspection Report, dated May 16, 2012. If you have any questions regarding the City's response, please contact me at (479) 524-5136. Thank you.

Sincerely,

Randy Atkinson

Randy Atkinson
City of Siloam Springs
Public Works Director

Enclosure

cc: Parthy Evans, Stinson Morrison Hecker
John Fazio, District 1 Inspector

CITY OF SILOAM SPRINGS
RESPONSE TO ADEQ INSPECTION REPORT (MAY 16, 2012)
MAY 29, 2012

The Arkansas Department of Environmental Quality ("ADEQ" or "the Department") conducted an inspection of the City of Siloam Springs ("the City") wastewater treatment facility ("WWTF") on March 21, 2012. The Department submitted its findings from the inspection in a report ("Inspection Report") to the City dated May 16, 2012, which the City received on May 17, 2012. The Inspection Report contains eight numbered alleged violations. The Inspection Report requests a written response to each alleged violation by May 29, 2012. This letter is intended to respond to each alleged violation contained in the May 16, 2012, Inspection Report.

1. Your permit states that 24-hour flow-proportioned composite samples must be collected for several effluent parameters. However, Jack Harriston, Operator, stated that the Isco automatic effluent sampler was disconnected from the Isco effluent flow meter during POTW expansion construction, and that it is not connected to the ABB transmitter flow meter currently in use. Mr. Harriston stated that the sampler is programmed to collect effluent portions every hour, not proportional to flow, indicating that the plant has been collecting 24-hour time-weighted composite samples. This is in violation of Part 1.A, Part II.B.1.a. and Part II.C.1 of your permit. Refer to Part IV (20) of your permit for the definition of 24-hour composite sample.

Response: The City's Authorization to Discharge Wastewater Under The National Pollutant Discharge Elimination System and the Arkansas Water and Air Pollution Control Act Permit No. AR0020273 ("NPDES Permit") defines "24-hour composite sample" in Part IV, paragraph 21 as:

> "a minimum of 12 effluent portions collected at equal time intervals over the 24-hour period and combined proportional to flow *or* a sample collected at frequent intervals proportional to flow over the 24-hour period." *(emphasis added)*

The City collects its 24-hour composite samples in accordance with the second provision of the definition, as it collects samples "at frequent intervals proportional to flow over the 24-hour period." To accomplish this, the City uses an ISCO sampler, which gathers flow measurements and collects a 400-milliliter sample after every 100,000 gallons of water is measured by the ISCO meter associated with the ISCO sampler.[1] Thus, the samples are not collected based on time-intervals, but rather are collected proportional to flow. As the average daily flow is approximately 2.7 million gallons per day, more than 12 aliquots are collected for each composite sample.

As further information, the ISCO sampler is programmed to collect a sample after every 100,000 gallons of flow in accordance with the ISCO operator manual. The 100,000-gallon threshold was selected based on the average daily WWTF flow, and ensures samples are collected at an appropriate flow-based frequency to be representative of the discharge. The relevant pages of the ISCO operator manual, including the Program Sequence Structure, are attached hereto as

[1] In addition, the ISCO flow meter was calibrated the week of the March 2012 inspection. It has been re-calibrated in the last 14 days to ensure proper operations. In addition, the City performs regular spot-check calibrations on the flow meter.

Attachment 1. The ISCO sampler allows the operator to view the Sequence Structure on the machine. The City has purchased and installed an analog ISCO sampler as part of its continual upgrade programs. The new ISCO sampler allows the City to view and store information regarding the flow and aliquot collection for a 45-day period, and allows the information to be downloaded into a database.

The Inspection Report indicates that an ABB flow meter is in use. While this is true, the ABB flow meter was used only for collecting the daily flow readings from the WWTP. It is not connected to the ISCO sampler and no information from the ABB flow meter was used in association with collection of 24-hour composite samples, as they serve entirely distinct purposes. The ISCO sampler collects aliquots, based on flow, for effluent sample purposes, while the ABB sampler takes flow measurements based on million gallons per day to provide the daily flow measurement required by the NPDES Permit. A photo of the ABB sampler is attached to the Inspection Report. The ISCO sampler is located approximately 100 yards away from the ABB sampler. The inspectors did not inspect the ISCO sampler and ISCO meter during the March 21, 2012, inspection.

The Inspection Report indicates that Mr. Harriston stated that the 24-hour composite samples are time-proportional, not flow-proportional. The City regrets any misunderstanding that there may have been in discussions regarding the composite sample collection methodology.

As discussed above, since issuance of the Permit, samples have been conducted on a flow-proportional basis. Thus, as the City was not in violation of its Permit, the City requests this alleged violation be removed from the Inspection Report.

2. Because 24-hour time-weighted composite samples have been taken for effluent parameters requiring 24-hour flow-proportioned composite samples, it has not been possible for you to report accurate mass-loading rates for these parameters on your monthly discharge monitoring reports (DMRs). This is in violation of Part 1.A and Part II.C.1 of your permit.

Response: As discussed above, 24-hour composite samples were appropriately collected in accordance with the NPDES Permit requirements and the ISCO Operator Manual. After collection, samples are sent to a certified lab for analysis, and reported in monthly Discharge Monitoring Reports. Thus, accurate mass-loading rates were reported in DMRs, and revised calculations are unnecessary. The City requests this alleged violation be removed from the Inspection Report.

3. The following are violations of Part II.C.3 of your permit:

    a. According to Mr. Harriston, bagged ice must be used to supplement cooling of samples to 6 degrees C in your influent and effluent refrigerators. These refrigerators are not functioning as designed and must be replaced.

Response: Condition II.C.3 of the Permit requires the permittee to:

> "perform maintenance procedures on all monitoring and analytical instrumentation ... to insure accuracy of measurements and shall insure that both calibration and maintenance activities will be conducted."

As a preliminary response, the sample refrigerator on the ISCO sampler does not constitute "monitoring and analytical instrumentation." Thus, Condition II.C.3 is not directly relevant to this issue. The City also notes that it did comply with its requirement to keep samples below the Part 136-required temperature of 6 degrees Celsius. Eight Chain of Custody forms are attached hereto as Attachment 2. The Chain of Custody forms are from February 2012 (the month prior to the inspection) and May 2011, and are representative of consistent, continued compliance with the 6-degree Celsius storage temperature requirement. Thus, the City requests this alleged violation be removed from the Inspection Report.

The new ISCO analog sampler that has been installed has a built-in refrigerator. The City will continue to monitor and calibrate the temperature in the new refrigerator, as discussed below in response to Item 3(c).

b. Mr. Harriston stated that fecal coliform bacteria (FCB) samples are being collected with an unsterilized scoop. FCB sampling equipment must be sterilized prior to each sampling event.

Response: Prior to the inspection, the City conducted its fecal coliform bacteria samples as follows. The City used clean sample techniques, such as requiring the sampler to wear gloves, and collecting the sample with a scoop that was kept in a sterilized container. The City sent samples to the laboratory in a sterilized sample bottle. However, as noted in the Inspection Report, the scoop was not independently sterilized. After the inspection, the City ceased use of the scoop. All equipment that is used to collect fecal coliform bacteria samples is now sterilized, and the sample is collected with a sterilized container. Clean sampling procedures are also still employed by all sample collection personnel.

c. All sample refrigerator thermometers have not been calibrated against a certified thermometer since 2009.

Response: The refrigerator thermometers are calibrated as required. The Inspection Report notes that the thermometers had not been calibrated since 2009. This is incorrect. In 2009, the City purchased new thermometers and installed them in its refrigerators. This is the 2009 date reflected on the thermometers. To calibrate the thermometers, the City uses a certified thermometer, which is calibrated every two years. The certified thermometer was purchased on August 2, 2010, and is accurate until August 2, 2012. A new thermometer will be obtained prior to August 2012. The City uses the certified thermometer to calibrate the refrigerator thermometers and other temperature-controlled units on a weekly basis. An example of the calibration checks for one of the refrigerator thermometers is attached hereto as Attachment 3. If

a refrigerator thermometer is not working properly, it is replaced. Thus, the City requests this alleged violation be removed from the Inspection Report.

d. Your records indicate that your lab is using EPA Method 360.1 for dissolved oxygen analysis and EPA Method 330.5 for total residual chlorine analysis. These procedures are not currently approved by 40 CFR Part 136.

Response: The City uses EPA Method 330.5 to measure total residual chlorine. ADEQ has informed the City that this is an acceptable method for NPDES purposes, as it is equivalent to EPA-approved Part 136 Method 4500-CL-G. Correspondence from Ms. Jane Hurley is attached hereto as Attachment 4. The City uses EPA Method 360.1 to measure dissolved oxygen. ADEQ has informed the City that this is an acceptable method for NPDES purposes, as it is equivalent to EPA-approved Part 136 Method 4500-O-G. See Attachment 4.

4. Your standard operating procedures (SOP) must be updated. For example, the SOP for measuring dissolved oxygen does not reference a test procedure approved by 40 CFR 136, but rather references a method internally designated as WW006. This is in violation of Part II.B.1.a of your permit

Response: The Inspection Report indicated that the City's SOPs constituted a violation of Condition II.B.1.a of the Permit because they did not list an explicit reference to an EPA-approved Part 136 Method. The City disagrees that the forms were in violation of Condition II.B.1.a. which states that:

> "The permittee shall at all times properly operate and maintain all facilities and systems of treatment and control ... which are installed or used by the permittee to achieve compliance with the conditions of this permit. Proper operation and maintenance also includes adequate laboratory controls and appropriate quality assurance procedures."

The City does not believe this provision is relevant to its internal Standard Operating Procedures ("SOP"). The internal SOPs do not constitute a treatment or control system. Thus, the City requests that this alleged violation be removed from the Inspection Report.

To the extent a response is still required, the City's SOPs are created for internal use and reference. The dissolved oxygen SOP, which is referenced in ADEQ's Inspection Report, is *internally* designated as WW006. The WWTF operators and persons collecting samples from the WWTF understand that EPA Part 136-approved methods or methods otherwise approved by ADEQ should be used for sample analysis. Nevertheless, to avoid future confusion, the SOPs are being updated to include on the first page, in addition to the internal reference number, the EPA Part 136-approved Method number. The City requests this alleged violation be removed from the Inspection Report.

5. Only one of the two generators used for standby power was in service at the time of the inspection. According to Mr. Harriston, the north generator was taken out of service during construction related to the POTW expansion. The south generator does not provide backup power to all of the plant's treatment units. This is in violation of Part II. B.7 of your permit

Response: Presently there are two generators at the WWTF – the north generator, which is located on the north side of the property and has been in use for some years, and the south generator, which is located on the south side of the property and was installed as part of the WWTF improvements project that began in 2009. The south generator was designed to provide backup power to all vital treatment units at the WWTF, and the north generator, which will be abandoned in place as noted on the design drawings for the WWTF improvements (see sheet 70-E-501 of the WWTF design drawings). Thus, the City is in violation of Condition II.B.7, and the City requests this alleged violation be removed from the Inspection Report.

6. Excessive grease and algae buildup on the weirs of the primary clarifier and excessive algae buildup on the weirs of the two final clarifiers was causing short circuiting of flow in each of these clarifiers. This is in violation of Part II.B.1.a of your permit. These conditions could cause overflow of settling solids into the launders during high flow periods. Cleaning of the weirs should take place as necessary to allow for equal and unobstructed flow through each of the weirs.

Response: The City is in compliance with its effluent limits. However, the City understands the importance of cleaning the weirs to allow unobstructed flow. Therefore, the City has implemented a more rigorous procedure for checks and cleaning of the weirs at the clarifiers to allow minimal algal growth. The City has also already developed an SOP to reflect this practice. The SOP is attached as Attachment 5. Recent photos of the weirs are attached as Attachment 6.

7. Part II.C.2 of your permit states that flow measurement devices must be capable of measuring flows with a maximum deviation of less than +/- 10% from true discharge rates throughout the range of expected discharge volumes and shall be installed at the monitoring point of the discharge. The meter at the primary flow measurement device was not in service (see Item 1 above). According to Mr. Harriston, an alternate flow meter (ABB transmitter flow meter) has been used to measure flow. This meter measures flow through a pipe from the final clarifiers to the primary flow measurement device. At the time of the inspection, the discharge rates between the primary flow device and the ABB transmitter deviated by 17%. In addition, flow through the rectangular weir was turbulent, causing significant fluctuations in the water level as it flowed past the gauge used to measure head in this device.

Response: During the March inspection, the City was using the ABB flow meter, described in response to alleged violation No. 1, to calculate daily flow from the WWTF. The ABB meter was last certified in February 2012. Since the March inspection, the City has purchased and

installed a new ISCO sampler and flow meter that will be used for calculating flow for reporting purposes. The new ISCO flow meter will be properly maintained and calibrated to provide accurate flow measurements.

8. Part IV (18) of your permit states that the 7-day average discharge limitation is the highest allowable arithmetic mean (geometric mean for FCB) of the values for all effluent samples collected during the calendar week. It states that the DMR should report the highest 7-day average obtained during the calendar month, and that for reporting purposes, the 7-day average values should be reported as occurring in the month in which the Saturday of the calendar week falls in. Total suspended solids (TSS) and total phosphorus (TP) concentrations in the effluent samples taken on Wednesday, November 30, 2011 were 5.0 mg/L and 1.18 mg/L, respectively. These are the 7-day average values you reported for these parameters on your November 2011 DMR. Review of your records indicates that 7-day average values of 3.0 mg/L TSS and 0.46 mg/L TP should have been reported on your November 2011 DMR.

Response: The City has revised the November and December 2011 Discharge Monitoring Reports to move the Saturday December 4, 2011, sample result to the appropriate DMR month. The November and December DMRs are attached hereto as Attachment 7. The City does note that despite the placement of Saturday December 4, 2011, result in the November DMR, the City remained in compliance with its effluent limits for both November and December 2011. The City has also reviewed its last three years of data to ensure that similar mistakes were not made. As part of its evaluation, the City identified additional DMRs with similar issues. They are attached hereto as Attachment 8.

# # #

Attachment 1

City of Siloam Springs

Response to ADEQ Inspection Report (March 21, 2012)

May 29, 2012

NAPCO® by **Precision Scientific**

Installation/Service Manual

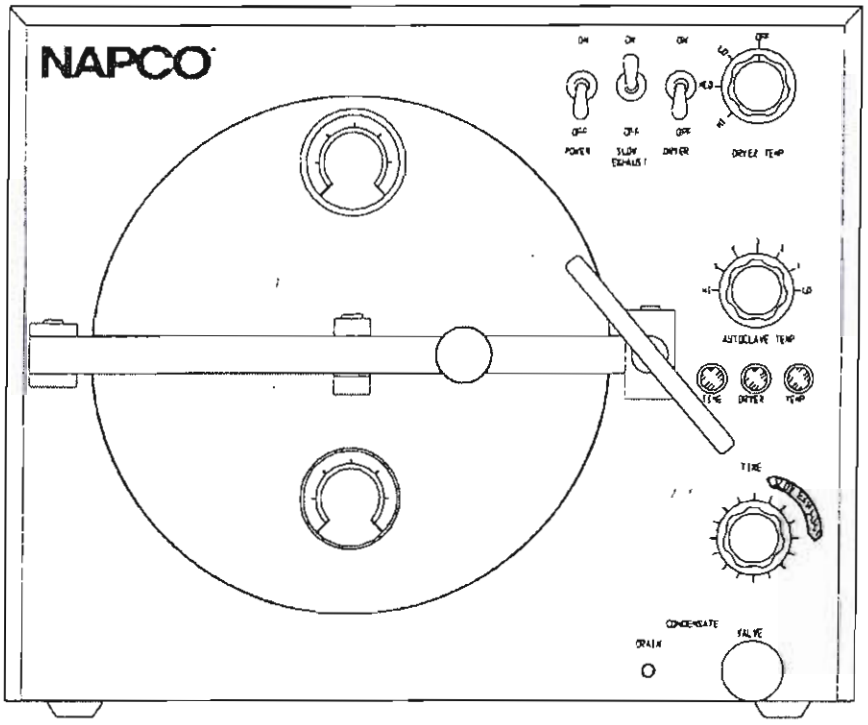
Slow Exhaust Autoclave

Model 8000-DSE

&

Rapid Exhaust Autoclave

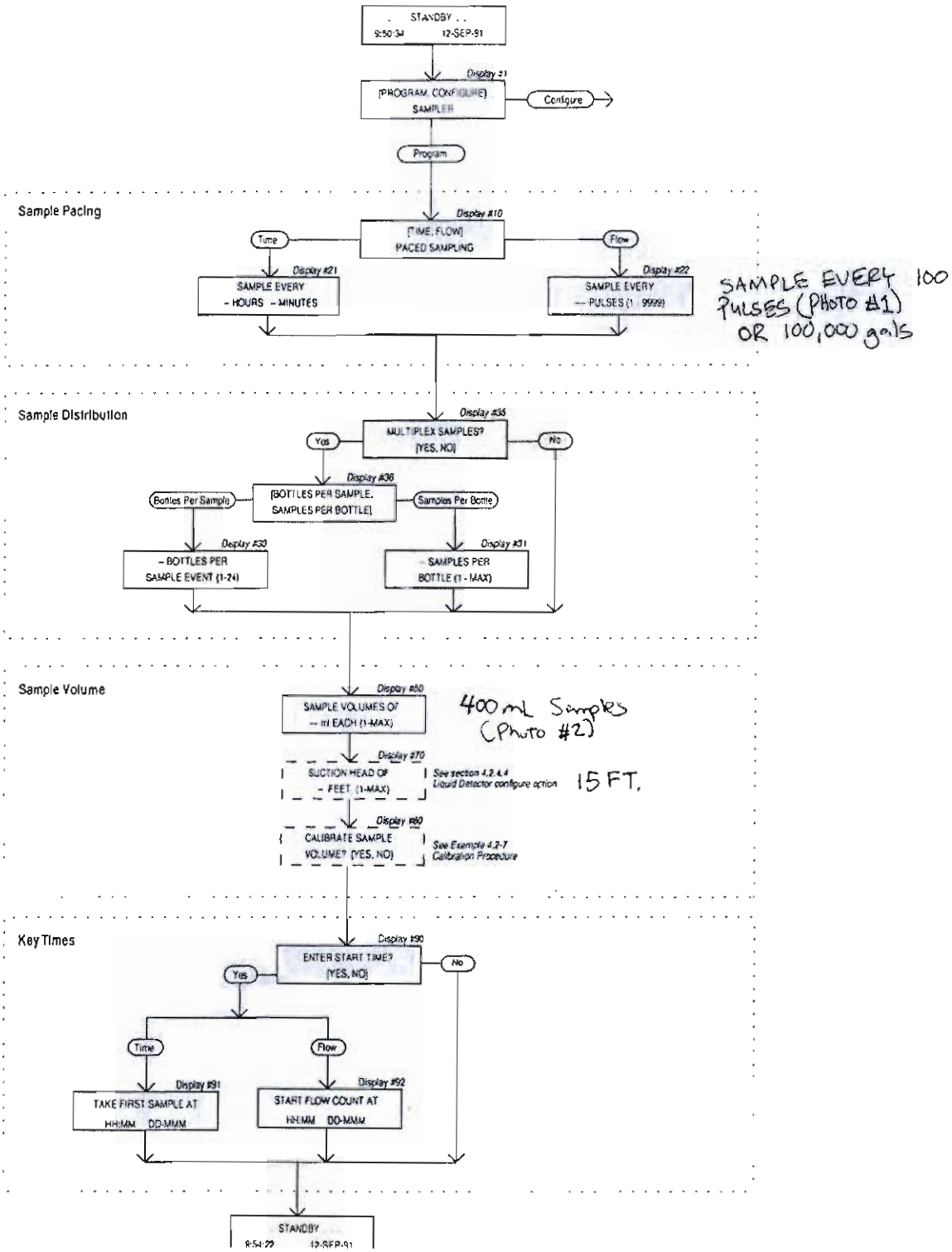
Model 9000-D



Precision Scientific
A DIVISION OF JOURAN
170 Marcel Drive
Winchester, Virginia 22602
(540) 869-9892 Fax: 540/869-0130
Toll Free: 800/621-8820

Manual Part No. 34002704 (80009501) **Revision D 9/24/98**

Figure 9. **Basic Programming Mode: Program Sequence Structure**



Attachment 2

City of Siloam Springs

Response to ADEQ Inspection Report (March 21, 2012)

May 29, 2012

City of Siloam Springs

975 Anderson Avenue
Siloam Springs, AR

P.O. Box 80
Siloam Springs, AR 72761

website: siloamsprings.com

Phone 479-524-5623 Fax: 479-524-4653

CITY OF SILOAM SPRINGS

WATER POLLUTION CONTROL FACILITY

CHAIN OF CUSTODY

Cargill Turkey Products
BB20007-01 C
Effluent
Sampled: 02/01/12 09:00
Water, Work Order Label

Client Information		Project Information	
Company Name	Siloam Springs	Permit/Project #	Weekly Testing
Address.	P O Box 80	Project Order #.	1 of 1
	410 N. Broadway		
	Siloam Springs, Ar 72761	Sampler Name(s)	J Harrison
Telephone:	(479) 524-5623		
FAX:	(479) 524-4653	and Signature(s)	Jack Harrison

Identification	Lab Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#	CBOD	Total Suspended Solids	NH3-N	BOD	NO3	TP
Effluent	BB20007-01	1/31 - 2/1/12	1000 0900	Comp	H_2O	P	1 Qt	ICE	1	X	X				
Effluent	↓	1/31 - 2/1/12	1000 0900	Comp	H_2O	P	500 ML	H2SO4 + IC	1			X		X	X
Influent	BB20007-02	1/31 - 2/1/12	1000 0900	Comp	H_2O	P	500 ML	H2SO4 + ICE	1			X		X	X
Influent	↓	1/31 - 2/1/12	1000 0900	Comp	H_2O	P	1 Qt	ICE	1		X		X		

Relinquished By (Signature and Printed Name)	Date	Time	Received By (Signature and Printed Name)	Date	Time	Custody Seals
Jack Harrison / Jack Harrison	2/1/12	1241	Joshua Marshall / Joshua Marshall	2/1/12	1242	Used? [ ] Intact? [ ]
Relinquished By (Signature and Printed Name)	Date	Time	Received By (Signature and Printed Name)	Date	Time	Turnaround: Regular [X] Special [ ]
Relinquished By (Signature and Printed Name) Joshua Marshall / Joshua Marshall	02/01/12	1500	Received by Lab (Signature and Printed Name) Donna Blankenship	2/1/12	1500	Were samples properly preserved: Yes [X] No [ ]

Comments:

Cool all samples to 4 degrees C

Chlorinated? Yes No

City of Siloam Springs

CITY OF SILOAM SPRINGS

WATER POLLUTION CONTROL FACILITY

BB20072-01 C
Effluent
Sampled: 02/15/12 09:00
Water- Work Order Label
City of Siloam Springs

975 Anderson Avenue P.O. Box 80
Siloam Springs, AR Siloam Springs, AR 72761
website: siloamsprings.com
Phone: 479-524-5623 Fax: 479-524-4653

CHAIN OF CUSTODY

Client Information

Company Name: Siloam Springs
Address: P O. Box 80
410 N. Broadway
Siloam Springs, Ar 72761
Telephone: (479) 524-5623
FAX: (479) 524-4653

Project Information

Permit/Project #: Weekly Testing
Project Order #: 1 of 1
Sampler Name(s): T Harrison
and Signature(s): [signature]

Sample Identification		Sample Collection				Sample Containers				Requested Parameters					
Identification	Lab Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#	CBOD	Total Suspended Solids	NH3-N	BOD	NO3	TP
Effluent	BB20072-01	2/14-15/12	1000 0900	Comp	H_2O	P	1 Qt	ICE	1	X	X				
Effluent	↓	2/14-15/12	1000 0900	Comp	H_2O	P	500 ML	H2SO4 + IC	1			X		X	X
Influent	BB20072-02	2/14 15/12	1000 0900	Comp	H_2O	P	500 ML	H2SO4 + ICE	1			X		X	X
Influent	↓	2/14 15/12	1000 0900	Comp	H_2O	P	1 Qt	ICE	1		X		X		

Relinquished By (Signature and Printed Name)	Date	Time	Received By (Signature and Printed Name)	Date	Time	
Jack Harrison [signature]	2/15/12	11:44	[signature]	2/15/12	11:44	Custody Seals: Used? [ ] Intact? [ ]
[signature]	02/15/12	1415	Deanna Blankenship [signature]	2/15/12	1415	Turnaround: Regular [X] Special [ ]
Relinquished By (Signature and Printed Name)	Date	Time	Received for Lab By (Signature and Printed Name)	Date	Time	Were samples properly preserved: Yes [X] No [ ]

Comments

Cool all samples to 4 degrees C 2°

Chlorinated? Yes No

This Document is Page 1 of 1

City of Siloam Springs

CITY OF SILOAM SPRINGS

WATER POLLUTION CONTROL FACILITY

BB20106-01 C
Effluent
Sampled: 02/22/12 09:00
Water - Work Order Label

975 Anderson Avenue, Siloam Springs, AR — P.O. Box 80, Siloam Springs, AR 72761
website: siloamsprings.com

Phone: 479-524-5623 Fax: 479-524-4653

CHAIN OF CUSTODY

Client Information		Project Information	
Company Name:	Siloam Springs	Permit/Project #:	Weekly Testing
Address:	P.O. Box 80	Project Order #:	1 of 1
	410 N. Broadway		
	Siloam Springs, Ar 72761	Sampler Name(s):	J Harrison
Telephone:	(479) 524-5623		
FAX:	(479) 524-4653	and Signature(s):	[signature]

Identification	Lab Control #	Date	Time	Type	Matrix	Container Type	Volume	Preservative	#	CBOD	Total Suspended Solids	NH3-N	BOD	NO3	TP
Effluent	BB20106-01	2/21-22/12	1000-0900	Comp	H_2O	P	1 Qt	ICE	1	X	X				
Effluent	↓	2/21-22/12	1000-0900	Comp	H_2O	P	500 ML	H2SO4 + IC	1			X		X	X
Influent	BB20106-02	2/21-22/12	1000-0900	Comp	H_2O	P	500 ML	H2SO4 + ICE	1			X		X	X
Influent	↓	2/21-22/12	1000-0900	Comp	H_2O	P	1 Qt	ICE	1		X		X		

Relinquished By (Signature and Printed Name)	Date	Time	Received By (Signature and Printed Name)	Date	Time
JACK HARRISON [signature]	2/22/12	1318	Joshua S. Heffner [signature]	2/22/12	1318
Relinquished By (Signature and Printed Name)	Date	Time	Received By (Signature and Printed Name)	Date	Time
Relinquished By (Signature and Printed Name)	Date	Time	Received for Lab By (Signature and Printed Name)	Date	Time
Joshua S. Heffner [signature]	02/22/12	1431	[signature]	2/22/12	1431

Custody Seals: Used? ☐ Intact? ☐

Turnaround: Regular ☒ Special ☐

Were samples properly preserved? Yes ☒ No ☐

Comments:

Cool all samples to 4 degrees C. Temp = 1°C JSH

Chlorinated? Yes / No

This Document is Page 1 of 1

City of Siloam Springs

CITY OF SILOAM SPRINGS

WATER POLLUTION CONTROL FACILITY

BB20136-01 C
Effluent
Sampled: 02/29/12 09:00
Water Work Order Label
City of Siloam Springs

975 Anderson Avenue P.O. Box 80
Siloam Springs, AR Siloam Springs, AR 72761
website: siloamsprings.com

Phone: 479-524-5623 Fax 479-524-4653

CHAIN OF CUSTODY

Client Information		Project Information		Requested Parameters
Company Name:	Siloam Springs	Permit/Project #:	Weekly Testing	
Address:	P.O. Box 80	Project Order #:	1 of 1	
	410 N. Broadway	Sampler Name(s):	Jack Harrison	
	Siloam Springs, Ar 72761	and Signature(s)		
Telephone:	(479) 524-5623			
FAX:	(479) 524-4653			

Sample Identification		Sample Collection				Sample Containers				Requested Parameters						
Identification	Lab Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#	CBOD	Total Suspended Solids	NH3-N	BOD	NO3	TP	
Effluent	BB20136-01	2/28-29/12	1000-0900	Comp	H_2O	P	1 Qt	ICE	1	X	X					
Effluent		2/28-29/12	1000-0900	Comp	H_2O	P	500 ML	H_2SO_4 + IC	1			X		X	X	
Influent	BB20136-02	2/28-29/12	1000-0900	Comp	H_2O	P	500 ML	H_2SO_4 + ICE	1			X		X	X	
Influent		2/28-29/12	1000-0900	Comp	H_2O	P	1 Qt	ICE	1		X		X			

Relinquished By (Signature and Printed Name)	Date	Time	Received By (Signature and Printed Name)	Date	Time
Jack Harrison	2/29/12	1042	Joshua M. Marshall	2/29/12	1044
Relinquished By (Signature and Printed Name)	Date	Time	Received By (Signature and Printed Name)	Date	Time
Relinquished By (Signature and Printed Name) Joshua M. Marshall	Date 02/29/12	Time 1210	Received for Lab By (Signature and Printed Name) Deanna Blankenship	Date 2/29/12	Time 1210

Custody Seals: Used? ☐ Intact? ☐

Turnaround: Regular [X] Special ☐

Were samples properly preserved: Yes [X] No ☐

Comments:

Cool all samples to 4 degrees C.

Chlorinated? (Yes) / N

This Document is Page 1 of 1

2°C

City of Siloam Springs

CITY OF SILOAM SPRINGS

WATER POLLUTION CONTROL FACILITY

BE10018-01 C
Effluent
Sampled: 05/04/11 09:00
Water Work Order Label

City of Siloam Springs

975 Anderson Avenue P.O. Box 80
Siloam Springs, AR Siloam Springs, AR 72761
website: siloamsprings.com

Phone: 479-524-5623 Fax: 479 524-4653

CHAIN OF CUSTODY

Client Information		Project Information		Requested Parameters
Company Name:	Siloam Springs	Permit/Project #:	Weekly Testing	
Address:	P.O. Box 80	Project Order #:	1 of 1	
	410 N. Broadway	Sampler Name(s):	T Harmon	
	Siloam Springs, Ar 72761	and Signature(s):		
Telephone:	(479) 524-5623			
FAX:	(479) 524-4653			

Sample Identification		Sample Collection				Sample Containers				CBOD	Total Suspended Solids	NH3-N	BOD	NO3	TP		
Identification	Lab Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#								
Effluent	BE10018-01	5/3-4/11	1000-0900	Comp	H_2O	P	1 Qt	ICE	1	X	X						
Effluent		5/3-4/11	1000-0900	Comp	H_2O	P	500 ML	H2SO4 + IC	1			X		X	X		
Influent	BE10018-02	5/3-4/11	1000-0900	Comp	H_2O	P	500 ML	H2SO4 + ICE	1			X		X	X		
Influent		5/3-4/11	1000-0900	Comp	H_2O	P	1 Qt	ICE	1		X		X				

Relinquished By (Signature and Printed Name)	Date	Time	Received By (Signature and Printed Name)	Date	Time
JACK HARMON	5/4/11	1036		5/4/11	1038
	5/4/11	1245	Deanna Blankenship	5/4/11	1245

Custody Seals: Used? ☐ Intact? ☐

Turnaround: Regular [X] Special ☐

Were samples properly preserved: Yes [X] No ☐

Comments:

Cool all samples to 4 degrees C.

Chlorinated? Yes No

This Document is Page 1 of 1

27

City of Siloam Springs

975 Anderson Avenue
Siloam Springs, AR
website: siloamsprings.com

P O. Box 80
Siloam Springs AR 72761

Phone 479-524-5623 Fax: 479-524-4653

CITY OF SILOAM SPRINGS

WATER POLLUTION CONTROL FACILITY

BE10095-01 C
Effluent
Sampled: 05/11/11 09:00
Water Work Order Label

City of Siloam Springs

CHAIN OF CUSTODY

Client Information		Project Information		Requested Parameters
Company Name:	Siloam Springs	Permit/Project #:	Weekly Testing	
Address:	P O Box 80	Project Order #:	1 OF 1	
	410 N. Broadway			
	Siloam Springs, Ar 72761	Sampler Name(s):	Jack Hamsen	
Telephone:	(479) 524-5623			
FAX:	(479) 524-4653	and Signature(s):	Jack Hamsen	

Sample Identification		Sample Collection				Sample Containers				CBOD	Total Suspended Solids	NH3-N	BOD	NO3	TP			
Identification	Lab Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#									
Effluent	BE10095-01	5/10 11/11	1000- 0900	Comp	H_2O	P	1 Qt	ICE	1	X	X							
Effluent		5/10 11/11	1000- 0900	Comp	H_2O	P	500 ML	H2SO4 + IC	1			X		X	X			
Influent	BE10095-02	5/10 11/11	1000- 0900	Comp	H_2O	P	500 ML	H2SO4 + ICE	1			X		X	X			
Influent		5/10 11/11	1000- 0900	Comp	H_2O	P	1 Qt	ICE	1		X		X					

Relinquished By: (Signature and Printed Name)	Date	Time	Received By: (Signature and Printed Name)	Date	Time	Custody Seals
Jack Harrison	5/11/11	1130	Heidi Moore	5/11/11	11:32	Used? ☐ Intact? ☐
Heidi Moore	5/11/11	1250	Deanna Blankenship	5/11/11	1250	Turnaround: Regular [X] Special ☐
Relinquished By: (Signature and Printed Name)	Date	Time	Received for Lab By: (Signature and Printed Name)	Date	Time	Were samples properly preserved: Yes [X] No ☐

Comments:

COMPOSITOR SAMPLER

Cool all samples to 4 degrees C.

Chlorinated? Yes ☐ No ☐

This Document is Page 1 of 1

BE10222-01 C
1 Effluent
Sampled: 05/18/11 09:00
Water Work Order Label
City of Siloam Springs

City of Siloam Springs

975 Anderson Avenue P.O. Box 80
Siloam Springs, AR Siloam Springs, AR 72761
website: siloamsprings.com

Phone: 479-524-5623 Fax: 479-524-4653

CITY OF SILOAM SPRINGS

WATER POLLUTION CONTROL FACILITY

CHAIN OF CUSTODY

Client Information		Project Information	
Company Name:	Siloam Springs	Permit/Project #:	Weekly Testing
Address	P.O. Box 80	Project Order #:	1 of 1
	410 N. Broadway		
	Siloam Springs, Ar 72761	Sampler Name(s).	J Harrison
Telephone:	(479) 524-5623		
FAX:	(479) 524-4653	and Signature(s)	Jack Harrison

Sample Identification		Sample Collection				Sample Containers				Requested Parameters							
Identification	Lab Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#	CBOD	Total Suspended Solids	NH3-N	BOD	NO3	TP		
Effluent	BE10222-01	5/17-18/11	1000-0700	Comp	H_2O	P	1 Qt	ICE	1	X	X						
Effluent	↓	5/17-18/11	1000-0700	Comp	H_2O	P	500 ML	H_2SO_4 + IC	1			X		X	X		
Influent	BE10222-02	5/17-18/11	1000-0700	Comp	H_2O	P	500 ML	H_2SO_4 + ICE	1			X		X	X		
Influent	↓	5/17-18/11	1000-0700	Comp	H_2O	P	1 Qt	ICE	1		X		X				

Relinquished By (Signature and Printed Name): Jack Harrison Jack Harrison	Date: 5/18/11	Time: 1217	Received By (Signature and Printed Name): John E. Marshall	Date: 5/18/11	Time: 1218	Custody Seals: Used? ☐ Intact? ☐	
Relinquished By (Signature and Printed Name):	Date:	Time:	Received By (Signature and Printed Name):	Date:	Time:	Turnaround: Routine ☒ Special ☐	
Relinquished By (Signature and Printed Name):	Date: 5/18/11	Time: 1617	Received for Lab By (Signature and Printed Name): Deanna Blankenship	Date: 5/18/11	Time: 1625	Were samples properly preserved: Yes ☒ No ☐	

Comments:

Cool all samples to 4 degrees C

Chlorinated? Yes No

City of Siloam Springs

CITY OF SILOAM SPRINGS

WATER POLLUTION CONTROL FACILITY

BE10294-01 C
Effluent
Sampled: 05/25/11 09:00
Water Work Order Label
City of Siloam Springs

975 Anderson Avenue P.O. Box 80
Siloam Springs, AR Siloam Springs, AR 72761
website: siloamsprings.com

Phone: 479-524-5823 Fax: 479-524-4653

CHAIN OF CUSTODY

Client Information		Project Information		Requested Parameters
Company Name:	Siloam Springs	Permit/Project #	Weekly Testing	
Address:	P O Box 80	Project Order #:	1 of 1	
	410 N. Broadway			
	Siloam Springs, Ar 72761	Sampler Name(s):	J. Harrison	
Telephone:	(479) 524-5823			
FAX:	(479) 524-4653	and Signature(s):		

Sample Identification		Sample Collection				Sample Containers				CBOD	Total Suspended Solids	NH3-N	BOD	NO3	TP		
Identification	Lab Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#								
Effluent	BE10294-01	5/24-25/11	1000-0900	Comp	H_2O	P	1 Qt	ICE	1	X	X						
Effluent		5/24-25/11	1000-0900	Comp	H_2O	P	500 ML	H_2SO_4 + IC	1			X		X	X		
Influent	BE10294-03	5/24-25/11	1000-0900	Comp	H_2O	P	500 ML	H_2SO_4 + ICE	1			X		X	X		
Influent		5/24-25/11	1000-0900	Comp	H_2O	P	1 Qt	ICE	1		X		X				

Relinquished By (Signature and Printed Name)	Date	Time	Received By (Signature and Printed Name)	Date	Time	Custody Seals
JACK HARRISON	5/25/11	1130		5/25/11	1137	Used? ☐ Intact? ☐
Relinquished By (Signature and Printed Name)	Date	Time	Received By (Signature and Printed Name)	Date	Time	Turnaround: Regular [X] Special ☐
	5/26/11	1315		5/25/11	1315	Were samples properly preserved: Yes [X] No ☐

Comments

Cool all samples to 4 degrees C 2°

Chlorinated? Yes / No

Attachment 3

City of Siloam Springs

Response to ADEQ Inspection Report (March 21, 2012)

May 29, 2012

Calibration complies with ISO 9001 ISO/IEC 17025 AND ANSI/NCSL Z540-1

Calibration Certificate No. 1750.01

Cert. No.: 4152-3082329

Traceable® Certificate of Calibration for Full-Scale Thermometer

Manufactured for and distributed by: Fisher Scientific, P.O. Box 1768, Pittsburgh, PA 15230

Instrument Identification:

Model: 15-077-23 S/N: 101860047 Manufacturer : Control Company

Standards/Equipment:

Description	Serial Number	Due Date	NIST Traceable Reference
Temperature Calibration Bath TC-231	A79341		
Temperature Probe	3039	12/10/10	A9B23080-1
Thermistor Module	A17118	11/19/10	A9B21010
Temperature Calibration Bath TC-256	B01375		
Thermistor Module	A27129	8/09/10	1000264338
Temperature Probe	157	8/27/10	A9708011-4

Certificate Information:

Technician: 68 Procedure: CAL-03 Cal Date 8/02/10 **Cal Due: 8/02/12**

Test Conditions: 26.0°C 41.0 %RH 1015 mBar

Calibration Data: (New Instrument)

Unit(s)	Nominal	As Found	In Tol	Nominal	As Left	In Tol	Min	Max	±U	TUR
°C		N.A.		0.00	-0.6	Y	-1.0	1.0	0.06	>4:1
°C		N.A.		100.00	99.6	Y	99.0	101.0	0.06	>4:1

This Instrument was calibrated using Instruments Traceable to National Institute of Standards and Technology.

A Test Uncertainty Ratio of at least 4:1 is maintained unless otherwise stated and is calculated using the expanded measurement uncertainty. Uncertainty evaluation includes the instrument under test and is calculated in accordance with the ISO "Guide to the Expression of Uncertainty in Measurement" (GUM). The uncertainty represents an expanded uncertainty using a coverage factor k=2 to approximate a 95% confidence level. In tolerance conditions are based on test results falling within specified limits with no reduction by the uncertainty of the measurement. The results contained herein relate only to the item calibrated. This certificate shall not be reproduced except in full, without written approval of Control Company.

Nominal=Standard's Reading; As Left=Instrument's Reading; In Tol=In Tolerance; Min/Max=Acceptance Range; ±U=Expended Measurement Uncertainty; TUR=Test Uncertainty Ratio; Accuracy=±(Max-Min)/2; Min = Nominal(Rounded) - Tolerance; Max = Nominal(Rounded) + Tolerance, Date=MM/DD/YY

Nicol Rodriguez, Quality Manager

Wallace Berry, Technical Manager

Maintaining Accuracy:

In our opinion once calibrated your Full-Scale Thermometer should maintain its accuracy. There is no exact way to determine how long calibration will be maintained. Full-Scale Thermometers change little, if any at all, but can be affected by aging, temperature, shock, and contamination.

Recalibration:

For factory calibration and re-certification traceable to National Institute of Standards and Technology contact Control Company.

CONTROL COMPANY 4455 Rex Road Friendswood, TX 77546 USA
Phone 281 482-1714 Fax 281 482-9448 service@control3.com www.control3.com

LABORATORY TEMPERATURE CHECKLIST

MONTH MARCH YEAR 2012

		REFRIGERATOR	FC INCUBATOR	DRYING OVEN	MUFFLE FURNACE	DI WATER	ANALYST
DAY	TIME	4 C	44.5 C +/- .2 C	103-105 C	500 C +/- 50 C	LIGHT ON	
1	0830	4°	44.5°	104°	OFF	✓	JLH
2	0815	4°	OFF	104°	OFF	✓	JLH
3	—						
4	—						
5	0929	4°	OFF	104°	OFF	✓	JLH
6	1040	4°	44.4°	104°	OFF	✓	JLH
7	0740	4°	44.5°	104°	OFF	✓	JLH
8	—						
9	—						
10	—						
11	—						
12	0800	4°	OFF	104°	OFF	✓	JLH
13	1100	4°	44.5°	104°	OFF	✓	JLH
14	0900	4°	44.5°	104°	OFF	✓	JLH
15	0740	4°	OFF	104°	OFF	✓	JLH
16	0800	4°	OFF	104°	OFF	✓	JLH
17	—						
18	—						
19	0810	4°	OFF	104°	OFF	✓	JLH
20	0950	4°	44.5°	104°	OFF	✓	JLH
21	0800	4°	44.5°	104°	OFF	✓	JLH
22	1030	4°	OFF	104°	OFF	✓	JLH
23	0830	4°	OFF	104°	OFF	✓	JLH
24							
25							
26	0748	4°	OFF	104°	OFF	✓	JLH
27	1053	4°	44.5°	104°	OFF	✓	JLH
28	1115	4°	44.5°	104°	OFF	✓	JLH
29	0700	4°	OFF	104°	OFF	✓	JLH
30	—						
31	—						

Attachment 4

City of Siloam Springs

Response to ADEQ Inspection Report (March 21, 2012)

May 29, 2012

Tom Myers

From: Hurley, Jane <HURLEYJ@adeq.state.ar.us>
Sent: Monday, May 21, 2012 2:01 PM
To: Tom Myers
Subject: RE: Laboratory Approved Methods

Yes, both are acceptable for NPDES purposes.!

From: Tom Myers
Sent: Monday, May 21, 2012 1:59 PM
To: Hurley, Jane
Cc: Randy Atkinson; Justin Bland
Subject: Laboratory Approved Methods

ADEQ
Jane Hurley
Chemist Supervisor

Jane,

Good Afternoon Ma'am!

I have a couple of questions regarding testing methods and if they are approved by ADEQ.

1. Method (1) is for Total Residual Chlorine. This is a Hach Method 8167 also referred to as 330.5 and is our method of choice for running Total Residual Chlorine. Hach Chemical statement is; this procedure is equivalent to USEPA method and Standard Method 4S00-CL G
2. Method (2) is for dissolved oxygen. The method of choice is for Membrane Electrode Method referred to E.P.A. 360.1 or the Standard Method 4500-O-G which is checked with the Winkler method for reference. Membrane Instrument: YSI Model 52.

I look forward to hearing back from you regarding this information. If we need to make any needed changes please let me know?

Thank you,

Tom Myers
Environmental Compliance Manager
City of Siloam Springs
Ph: 479-524-5623
Cell: 479-228-0934
Fax: 479-524-4653

Attachment 5

City of Siloam Springs

Response to ADEQ Inspection Report (March 21, 2012)

May 29, 2012

CITY OF SILOAM SPRINGS OPERATING INSTRUCTIONS

SILOAM SPRINGS, ARKANSAS May 24, 2012

City of Siloam Springs
Water/Wastewater Department

POLICY & PROCEDURE FOR CLEANING FINAL CLARIFIERS

Purpose: The purpose of this Operating Instruction is to outline the procedures to be followed by all employees of the Wastewater department for the proper and timely cleaning of the final clarifiers.

1. **Scope:** This Operating Procedure applies to all Wastewater personnel under the direction of the Superintendent of Wastewater.

2. **Responsibility:** The Wastewater Superintendent and Assistant Wastewater Superintendent will be responsible for the procedure and adherence of the policy as outlined. The Superintendent of Wastewater will be responsible to discipline any employee which fails to follow this policy.

3. **Requirements:** The final clarifiers must be cleaned on a weekly basis to maintain safe and reliable operation.

4. **Procedure:**
   The final clarifiers are to be cleaned a minimum of once per week, more often when necessary. The operator of the day will be responsible for checking the cleanliness and condition of the final clarifiers daily.

5. **Reports:**

   The operator should notify the supervisor of any circumstance that prevents the adherence of this policy.

5. **Records:**

   The action of cleaning the final clarifiers will be recorded in the operations log book and initialed. It will be the duty of the Wastewater Supervisor to review these records on a regular basis.

Director of Water & Wastewater Utilities: _____

Operations Controller: _____

Effective Date: _____

#1 FINAL CLARIFER CLEANING LOG

Date	TIME	INITIALS	Date	TIME	INITIALS

#1 PRIMARY CLARIFER CLEANING LOG

Date	TIME	INITIALS	Date	TIME	INITIALS

Attachment 6

City of Siloam Springs

Response to ADEQ Inspection Report (March 21, 2012)

May 29, 2012


05/22/2012


05/22/2012

Attachment 7

City of Siloam Springs

Response to ADEQ Inspection Report (March 21, 2012)

May 29, 2012

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

Corrected Report 5/22/12

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME: SILOAM SPRINGS CITY OF
ADDRESS: POLLUTION CONTROL FACILITY
SILOAM SPRINGS, AR 72761

FACILITY: SILOAM SPRINGS, CITY OF
LOCATION: 975 ANDERSON AVE
SILOAM SPRINGS AR 72761

ATTN THOMAS MYERS/DAVID CAMERON,ADM

AR0C20273	001-A
PERMIT NUMBER	DISCHARGE NUMBER

DMR Mailing ZIP CODE: 72761
MAJOR

001-MONTHLY-TRTD MUNICIPAL WW
External Outfall

No Discharge ☐

MONITORING PERIOD			
	MM/DD/YYYY		MM/DD/YYYY
FROM	11/01/2011	TO	11/30/2011

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen, dissolved (DO)	SAMPLE MEASUREMENT	*****	*****	*****	8.02	*****	*****	mg/L	0	Weekly	Grab
00300 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	7 MO AV MN	*****	*****	mg/L		Weekly	GRAB
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.13	*****	7.77	S.U.	0	Five Per Month	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6 MINIMUM	*****	9 MAXIMUM	SU		Twice Per Month	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	97.4	*****	lb/d	*****	2.5	~~3.0~~ 5.0	mg/L	0	Weekly	Comp24
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	734 MO AVG	*****	lb/d	*****	20 MO AVG	30 7 DA AVG	mg/L		Weekly	COMP24
Nitrogen, ammonia total (as N)	SAMPLE MEASUREMENT	0.5	*****	lb/d	*****	0.02	0.05	mg/L	0	Weekly	Comp24
00610 1 1 Effluent Gross	PERMIT REQUIREMENT	147 MO AVG	*****	lb/d	*****	4 MO AVG	6 7 DA AVG	mg/L		Weekly	COMP24
Phosphorus, total (as P)	SAMPLE MEASUREMENT	19.2	*****	lb/d	*****	0.49	~~0.46~~ 1.18	mg/L	0	Weekly	Comp24
00665 1 0 Effluent Gross	PERMIT REQUIREMENT	37 MO AVG	*****	lb/d	*****	1 MO AVG	1.5 7 DA AVG	mg/L		Weekly	COMP24
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	4.1	5.3	Mgal/d	*****	*****	*****	*****		Daily	Totalz
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	Mgal/d	*****	*****	*****	*****		Daily	TOTALZ
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.03	mg/L	0	Weekly	Grab
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 INST MAX	mg/L		Weekly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Thomas A. Myers Wastewater Superintendent			4795245623		12/19/2011
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT FLOW AS MONTHLY AVG. & DAILY MAX. IN MGD (MILLION GALLONS/DAY). SEE PART IV ITEM #4(A). SEE PART III CONDITIONS #11, #12 & #13. 04-00106

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Corrected Report 5/22/2012

Form Approved
OMB No 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SILOAM SPRINGS, CITY OF
ADDRESS: POLLUTION CONTROL FACILITY
SILOAM SPRINGS, AR 72761

FACILITY: SILOAM SPRINGS, CITY OF
LOCATION: 975 ANDERSON AVE
SILOAM SPRINGS, AR 72761

ATTN: THOMAS MYERS/DAVID CAMERON,ADM

AR0020273	001-A
PERMIT NUMBER	DISCHARGE NUMBER

DMR Mailing ZIP CODE: 72761
MAJOR

001-MONTHLY-TRTD MUNICIPAL WW
External Outfall

No Discharge ☐

MONITORING PERIOD			
	MM/DD/YYYY		MM/DD/YYYY
FROM	12/01/2011	TO	12/31/2011

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen, dissolved (DO)	SAMPLE MEASUREMENT	-----	-----	-----	8.71	-----	-----	mg/L	0	Weekly	Grab
00300 1 0 Effluent Gross	PERMIT REQUIREMENT	-----	-----	-----	7 MO AV MN	-----	-----	mg/L		Weekly	GRAB
pH	SAMPLE MEASUREMENT	-----	-----	-----	7.25	-----	7.66	SU	0	Four Per month	1 Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	-----	-----	-----	6 MINIMUM	-----	9 MAXIMUM	SU		Twice Per Month	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	47.5	-----	lb/d	-----	2.0	~~3.0~~ 5.0	mg/L	0	Weekly	Comp24
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	734 MO AVG	-----	lb/d	-----	20 MO AVG	30 7 DA AVG	mg/L		Weekly	COMP24
Nitrogen, ammonia total (as N)	SAMPLE MEASUREMENT	0.54	-----	lb/d	-----	0.02	0.04	mg/L	0	Weekly	Comp24
00610 1 1 Effluent Gross	PERMIT REQUIREMENT	147 MO AVG	-----	lb/d	-----	4 MO AVG	6 7 DA AVG	mg/L		Weekly	COMP24
Phosphorus, total (as P)	SAMPLE MEASUREMENT	11.32	-----	lb/d	-----	0.48	~~0.68~~ 1.18	mg/L	0	Weekly	Comp24
00665 1 0 Effluent Gross	PERMIT REQUIREMENT	37 MO AVG	-----	lb/d	-----	1 MO AVG	1.5 7 DA AVG	mg/L		Weekly	COMP24
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	2.7	3.8	Mgal/d	-----	-----	-----	-----		Daily	Totalz
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	Mgal/d	-----	-----	-----	-----		Daily	TOTALZ
Chlorine, total residual	SAMPLE MEASUREMENT	-----	-----	-----	-----	-----	0.03	mg/L	0	Weekly	Grab
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	-----	-----	-----	-----	-----	.1 INST MAX	mg/L		Weekly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Thomas A. Myers Wastewater Superintendent	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		479-524-5623		1/20/2012
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT FLOW AS MONTHLY AVG. & DAILY MAX. IN MGD (MILLION GALLONS/DAY). SEE PART IV, ITEM #47(A). SEE PARTIII, CONDITIONS #11, #12 & #13. 04-00106

Attachment 8

City of Siloam Springs

Response to ADEQ Inspection Report (March 21, 2012)

May 29, 2012

Corrected Report

5/24/12

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME: SILOAM SPRINGS, CITY OF
ADDRESS: POLLUTION CONTROL FACILITY
SILOAM SPRINGS, AR 72761
FACILITY: SILOAM SPRINGS, CITY OF
LOCATION: 975 ANDERSON AVE
SILOAM SPRINGS, AR 72761
ATTN: THOMAS MYERS/DAVID CAMERON,ADM

AR0020273	001A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD			
	MM/DD/YYYY		MM/DD/YYYY
FROM	03/01/2010	TO	03/31/2010

DMR Mailing ZIP CODE: 72761
MAJOR

001-MONTHLY-TRTD MUNICIPAL WW
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen, dissolved (DO)	SAMPLE MEASUREMENT	.....	.....	.....	7.09	.....	.....	mg/L	0	Weekly	Grab
00300 1 0 Effluent Gross	PERMIT REQUIREMENT	.....	.....	.....	7 MO AV MN	.....	.....	mg/L		Weekly	GRAB
pH	SAMPLE MEASUREMENT	.....	.....	.....	6.49	.....	6.74	SU	0	5/Month	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	.....	.....	.....	6 MINIMUM	.....	9 MAXIMUM	SU		Twice Per Month	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	241	.....	lb/d	.....	9.20	17.5	mg/L	0	Weekly	Comp24
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	734 MO AVG	.....	lb/d	.....	20 MO AVG	30 7 DA AVG	mg/L		Weekly	COMP24
Nitrogen, ammonia total (as N)	SAMPLE MEASUREMENT	96.6	.....	lb/d	.....	3.99	4.80	mg/L	0	Weekly	Comp24
00610 1 1 Effluent Gross	PERMIT REQUIREMENT	147 MO AVG	.....	lb/d	.....	4 MO AVG	6 7 DA AVG	mg/L		Weekly	COMP24
Phosphorus, total (as P)	SAMPLE MEASUREMENT	13.8	.....	lb/d	.....	0.61	0.82 0.78	mg/L	0	Weekly	Comp24
00665 1 0 Effluent Gross	PERMIT REQUIREMENT	37 MO AVG	.....	lb/d	.....	1 MO AVG	1.5 7 DA AVG	mg/L		Weekly	COMP24
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	2.9	6.8	Mgal/d	.....	.....	.....	.....		Daily	Total2
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	Mgal/d	.....	.....	.....	.....		Daily	TOTAL 2
Chlorine, total residual	SAMPLE MEASUREMENT	.....	.....	.....	.....	.....	0.02	mg/L	0	Weekly	Grab
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	.....	.....	.....	.....	.....	.1 INST MAX	mg/L		Weekly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Thomas A. Myers Wastewater Superintendent			479-238-0929		4/20/10
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT FLOW AS MONTHLY AVG. & DAILY MAX. IN MGD (MILLION GALLONS/DAY). SEE PART IV, ITEM #47(A). SEE PART III, CONDITIONS #11, #12 & #13. 04-00105

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Corrected Report
5/24/12

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME: SILOAM SPRINGS, CITY OF
ADDRESS: POLLUTION CONTROL FACILITY
SILOAM SPRINGS, AR 72761

FACILITY: SILOAM SPRINGS, CITY OF
LOCATION: 975 ANDERSON AVE
SILOAM SPRINGS, AR 72761

ATTN: THOMAS MYERS/DAVID CAMERON,ADM

AR0020273	001A
PERMIT NUMBER	DISCHARGE NUMBER

DMR Mailing ZIP CODE: 72761
MAJOR

001-MONTHLY-TRTD MUNICIPAL WW
External Outfall

No Discharge ☐

MONITORING PERIOD			
	MM/DD/YYYY		MM/DD/YYYY
FROM	05/01/2010	TO	05/31/2010

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen, dissolved (DO)	SAMPLE MEASUREMENT	*****	*****	*****	7.14	*****	*****	mg/L	0	Weekly	Grab
00300 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	7 MO AV MN	*****	*****	mg/L		Weekly	GRAB
pH	SAMPLE MEASUREMENT	*****	*****	*****	6.48	*****	6.82	SU	0	4/month	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6 MINIMUM	*****	9 MAXIMUM	SU		Twice Per Month	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	55.3	*****	lb/d	*****	4.38	6.0	mg/L	0	Weekly	Comp24
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	734 MO AVG	*****	lb/d	*****	20 MO AVG	30 7 DA AVG	mg/l		Weekly	COMP24
Nitrogen, ammonia total (as N)	SAMPLE MEASUREMENT	51.39	*****	lb/d	*****	3.77	~~6.29~~ 5.99	mg/L	6/5	Weekly	Comp24
00610 1 0 Effluent Gross	PERMIT REQUIREMENT	55 MO AVG	*****	lb/d	*****	1.5 MO AVG	2.3 7 DA AVG	mg/L		Weekly	COMP24
Phosphorus, total (as P)	SAMPLE MEASUREMENT	7.82	*****	lb/d	*****	0.64	0.96	mg/L	0	Weekly	Comp24
00665 1 0 Effluent Gross	PERMIT REQUIREMENT	37 MO AVG	*****	lb/d	*****	1 MO AVG	1.5 7 DA AVG	mg/l		Weekly	COMP24
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	2.1	3.9	Mgal/d	*****	*****	*****	*****		Daily	Totalz
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	Mgal/d	*****	*****	*****	*****		Daily	TOTALZ
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.02	mg/L	0	Weekly	Grab
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.1 INST MAX	mg/L		Weekly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Thomas A. Myers Wastewater Superintendent			479 2380927		06-23-2010
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT FLOW AS MONTHLY AVG. & DAILY MAX. IN MGD (MILLION GALLONS/DAY). SEE PART IV, ITEM #47(A). SEE PARTIII. CONDITIONS #11, #12 & #13. 04-00106

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Corrected Report
Form Approved
OMB No. 2040-0004
5/24/12

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SILOAM SPRINGS, CITY OF
ADDRESS: POLLUTION CONTROL FACILITY
SILOAM SPRINGS, AR 72761
FACILITY: SILOAM SPRINGS, CITY OF
LOCATION: 975 ANDERSON AVE
SILOAM SPRINGS, AR 72761
ATTN: THOMAS MYERS/DAVID CAMERON,ADM

AR0020273	001-A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD			
	MM/DD/YYYY		MM/DD/YYYY
FROM	09/01/2010	TO	09/30/2010

DMR Mailing ZIP CODE: 72761
MAJOR

001-MONTHLY-TRTD MUNICIPAL WW
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Nitrogen, nitrate total (as NO3) 71850 1 0 Effluent Gross	SAMPLE MEASUREMENT	69.5	******	lb/d	******	3.35	~~5.15~~ 4.45	mg/L	0	Weekly	Comp24
	PERMIT REQUIREMENT	Req. Mon. MO AVG	******	lb/d	******	Req. Mon. MO AVG	Req. Mon. 7 DA AVG	mg/l		Weekly	COMP24
Coliform, fecal general 74055 1 0 Effluent Gross	SAMPLE MEASUREMENT	******	******	******	******	137.1	208	#/100ml	0	Weekly	Grab
	PERMIT REQUIREMENT	******	******	******	******	200 30DA GEO	400 7 DA GEO	#/100ml		Weekly	GRAB
BOD, carbonaceous, 05 day, 20 C 80082 1 0 Effluent Gross	SAMPLE MEASUREMENT	20.57	******	lb/d	******	1.03	1.10	mg/L	0	Weekly	Comp24
	PERMIT REQUIREMENT	550 MO AVG	******	lb/d	******	15 MO AVG	22.5 7 DA AVG	mg/l		Weekly	COMP24

CONTRACT LABORATORY
E. T. G.
1702 E. Central Ave
Suite 10
Bentonville, AR 72712

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Thomas A. Myers Wastewater Superintendent			479 238 0927		10/21/2010
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT FLOW AS MONTHLY AVG & DAILY MAX. IN MGD (MILLION GALLONS/DAY). SEE PART IV, ITEM #47(A). SEE PARTIII, CONDITIONS #11, #12 & #13. 04-00106

DISCHARGE MONITORING REPORT (DMR)

Corrected Report 5/24/12

OMB No. 2040-0004

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME: SILOAM SPRINGS, CITY OF
ADDRESS: POLLUTION CONTROL FACILITY
SILOAM SPRINGS, AR 72761
FACILITY: SILOAM SPRINGS, CITY OF
LOCATION: 975 ANDERSON AVE
SILOAM SPRINGS, AR 72761
ATTN: THOMAS MYERS/DAVID CAMERON,ADM

AR0020273	001-A
PERMIT NUMBER	DISCHARGE NUMBER

DMR Mailing ZIP CODE: 72761
MAJOR
001-MONTHLY-TRTD MUNICIPAL WW
External Outfall
No Discharge ☐

MONITORING PERIOD			
	MM/DD/YYYY		MM/DD/YYYY
FROM	03/01/2011	TO	03/31/2011

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen, dissolved (DO)	SAMPLE MEASUREMENT	******	******	******	7.60	******	******	mg/L	0	Weekly	Grab
00300 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	7 MO AV MN	******	******	mg/L		Weekly	GRAB
pH	SAMPLE MEASUREMENT	******	******	******	7.33	******	7.66	SU	0	5/Month	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	6 MINIMUM	******	9 MAXIMUM	SU		Twice Per Month	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	219.0	******	lb/d	******	8.16	~~24.5~~ 12.8	mg/L	0	Weekly	Comp24
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	734 MO AVG	******	lb/d	******	20 MO AVG	30 7 DA AVG	mg/L		Weekly	COMP24
Nitrogen, ammonia total (as N)	SAMPLE MEASUREMENT	1.57	******	lb/d	******	0.06	0.14	mg/L	0	Weekly	Comp24
00610 1 1 Effluent Gross	PERMIT REQUIREMENT	147 MO AVG	******	lb/d	******	4 MO AVG	6 7 DA AVG	mg/L		Weekly	COMP24
Phosphorus, total (as P)	SAMPLE MEASUREMENT	54.27	******	lb/d	******	2.13	~~4.73~~ 3.72	mg/L	~~3~~ 2	Weekly	Comp24
00665 1 0 Effluent Gross	PERMIT REQUIREMENT	37 MO AVG	******	lb/d	******	1 MO AVG	1.5 7 DA AVG	mg/L		Weekly	COMP24
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	2.2	3.6	Mgal/d	******	******	******	******		Daily	Totalz
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	Mgal/d	******	******	******	******		Daily	TOTALZ
Chlorine, total residual	SAMPLE MEASUREMENT	******	******	******	******	******	0.02	mg/L	0	Weekly	Grab
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	******	1 INST MAX	mg/L		Weekly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Thomas A. Myers Wastewater Superintendent	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		479.5245623		04/21/2011
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT FLOW AS MONTHLY AVG. & DAILY MAX IN MGD (MILLION GALLONS/DAY). SEE PART IV, ITEM #47(A). SEE PART III, CONDITIONS #11, #12 & #13. 04-00106

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Corrected Report 5/24/12

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SILOAM SPRINGS, CITY OF
ADDRESS: POLLUTION CONTROL FACILITY
SILOAM SPRINGS, AR 72761
FACILITY: SILOAM SPRINGS, CITY OF
LOCATION: 975 ANDERSON AVE
SILOAM SPRINGS, AR 72761
ATTN: THOMAS MYERS/DAVID CAMERON,ADM

AR0020273	001-A
PERMIT NUMBER	DISCHARGE NUMBER

DMR Mailing ZIP CODE: 72761
MAJOR

MONITORING PERIOD			
	MM/DD/YYYY		MM/DD/YYYY
FROM	03/01/2011	TO	03/31/2011

001-MONTHLY-TRTD MUNICIPAL WW
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Nitrogen, nitrate total (as NO3)	SAMPLE MEASUREMENT	134.89	.....	lb/d	.....	5.77	10.4	mg/L		Weekly	Comp24
71850 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. MO AVG	.....	lb/d	.....	Req. Mon MO AVG	Req. Mon. 7 DA AVG	mg/L		Weekly	COMP24
Coliform, fecal general	SAMPLE MEASUREMENT	.....	.....	.....	.....	313.5	1258	#/100ml	0	Weekly	Grab
74055 1 1 Effluent Gross	PERMIT REQUIREMENT	.....	.....	.....	.....	1000 30DA GEO	2000 7 DA GEO	#/100ml		Weekly	GRAB
BOD, carbonaceous, 05 day, 20 C	SAMPLE MEASUREMENT	43.4	.....	lb/d	.....	1.81	~~2.76~~ 3.44	mg/L	0	Weekly	Comp24
80082 1 0 Effluent Gross	PERMIT REQUIREMENT	550 MO AVG	.....	lb/d	.....	15 MO AVG	22.5 7 DA AVG	mg/L		Weekly	COMP24

Contract Laboratory
ETG
1702 E. Central
Bentonville, AR 72712

Note: Phosphorus Excursion on March 22 and 29 was report to Cindy Garner Office Upon notification from Contract Laboratory.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Thomas A. Myers Wastewater Superintendent	I certify under penalty of law that this document and all its attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		479-524-5623		04/21/2011
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT FLOW AS MONTHLY AVG & DAILY MAX. IN MGD (MILLION GALLONS/DAY) SEE PART IV, ITEM #47(A), SEE PARTIII, CONDITIONS #11, #12 & #13. 04-00106

Corrected Report
[illegible signature] 5/24/12

Form Approved
OMB No. 2040-0004

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME: SILOAM SPRINGS, CITY OF
ADDRESS: POLLUTION CONTROL FACILITY
SILOAM SPRINGS, AR 72761
FACILITY: SILOAM SPRINGS, CITY OF
LOCATION: 975 ANDERSON AVE
SILOAM SPRINGS, AR 72761
ATTN: THOMAS MYERS/DAVID CAMERON,ADM

AR0020273	001-A
PERMIT NUMBER	DISCHARGE NUMBER

	MONITORING PERIOD		
	MM/DD/YYYY		MM/DD/YYYY
FROM	04/01/2011	TO	04/30/2011

DMR Mailing ZIP CODE: 72761
MAJOR

001-MONTHLY-TRTD MUNICIPAL WW
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen, dissolved (DO)	SAMPLE MEASUREMENT	******	******	******	7.41	******	******	mg/L	0	Weekly	Grab
00300 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	7 MO AV MN	******	******	mg/l		Weekly	GRAB
pH	SAMPLE MEASUREMENT	******	******	******	7.18	******	7.60	SU	0	4/Month	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	6 MINIMUM	******	9 MAXIMUM	SU		Twice Per Month	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	154.5	******	lb/d	******	4.0	~~5.5~~ 24.5	mg/L	0	Weekly	Comp 24
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	734 MO AVG	******	lb/d	******	20 MO AVG	30 7 DA AVG	mg/l		Weekly	COMP24
Nitrogen, ammonia total (as N)	SAMPLE MEASUREMENT	2.59	******	lb/d	******	0.086	0.22	mg/L	0	Weekly	Comp 24
00610 1 2 Effluent Gross	PERMIT REQUIREMENT	59 MO AVG	******	lb/d	******	1.6 MO AVG	3.9 7 DA AVG	mg/l		Weekly	COMP24
Phosphorus, total (as P)	SAMPLE MEASUREMENT	12.35	******	lb/d	******	0.39	~~0.4~~ 4.7	mg/L	[illegible]	Weekly	Comp 24
00665 1 0 Effluent Gross	PERMIT REQUIREMENT	37 MO AVG	******	lb/d	******	1 MO AVG	1.5 7 DA AVG	mg/l		Weekly	COMP24
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	3.0	6.5	Mgal/d	******	******	******	******		Weekly	Totalz
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	Mgal/d	******	******	******	******		Daily	TOTALZ
Chlorine, total residual	SAMPLE MEASUREMENT	******	******	******	******	******	0.02	mg/L	0	Weekly	Grab
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	******	INST MAX	mg/l		Weekly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Thomas A. Myers, Wastewater Superintendent	[illegible]	[signature]	479	524-5623	5/23/2011
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT FLOW AS MONTHLY AVG. & DAILY MAX. IN MGD (MILLION GALLONS/DAY). SEE PART IV, ITEM #47(A). SEE PART III, CONDITIONS #11, #12 & #13. 04-00106

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Corrected Report 5/24/12

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME: SILOAM SPRINGS, CITY OF
ADDRESS: POLLUTION CONTROL FACILITY
SILOAM SPRINGS, AR 72761
FACILITY: SILOAM SPRINGS, CITY OF
LOCATION: 975 ANDERSON AVE
SILOAM SPRINGS, AR 72761
ATTN: THOMAS MYERS/DAVID CAMERON,ADM

AR0020273	001-A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD			
	MM/DD/YYYY		MM/DD/YYYY
FROM	04/01/2011	TO	04/30/2011

DMR Mailing ZIP CODE: 72761
MAJOR

001-MONTHLY-TRTD MUNICIPAL WW
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Nitrogen, nitrate total (as NO3) 71850 1 0 Effluent Gross	SAMPLE MEASUREMENT	178.75	******	lb/d	******	5.12	8.29	mg/L		Weekly	Comp24
	PERMIT REQUIREMENT	Req. Mon. MO AVG	******	lb/d	******	Req. Mon. MO AVG	Req. Mon. 7 DA AVG	mg/L		Weekly	COMP24
Coliform, fecal general 74055 1 0 Effluent Gross	SAMPLE MEASUREMENT	******	******	******	******	194.1	253.9	#/100mL	0	Weekly	Grab
	PERMIT REQUIREMENT	******	******	******	******	200 30DA GEO	400 7 DA GEO	#/100mL		Weekly	GRAB
BOD, carbonaceous, 05 day, 20 C 80082 1 0 Effluent Gross	SAMPLE MEASUREMENT	32.6	******	lb/d	******	1.08	~~1.32~~ 3.11	mg/L	0	Weekly	Comp24
	PERMIT REQUIREMENT	550 MO AVG	******	lb/d	******	15 MO AVG	22.5 7 DA AVG	mg/l		Weekly	COMP24

Contract Laboratory:
E.T.G.
1702 E. Central Ave
Bentonville, AR 72712

Note:
April 28, 2011 Storm manhole overflow at Plant. Estimated 25,000 gallons ran on ground treated with hydrated lime. No Evidence of Adverse Health/Environmental Impact. Called → Cindy Garner phone and left message regarding overflow.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Thomas A. Myers Wastewater Superintendent			479-5245623		5/23/2011
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	DD/MM/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT FLOW AS MONTHLY AVG. & DAILY MAX. IN MGD (MILLION GALLONS/DAY). SEE PART IV, ITEM #4/(A). SEE PART III, CONDITIONS #11, #12 & #13. 04-00108

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Corrected Report 5/24/12

Form Approved OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different):

NAME: SILOAM SPRINGS, CITY OF
ADDRESS: POLLUTION CONTROL FACILITY
SILOAM SPRINGS, AR 72761

FACILITY: SILOAM SPRINGS, CITY OF
LOCATION: 975 ANDERSON AVE
SILOAM SPRINGS AR 72761

ATTN THOMAS MYERS/DAVID CAMERON,ADM

AR0020273	001-A
PERMIT NUMBER	DISCHARGE NUMBER

DMR Mailing ZIP CODE: 72761
MAJOR

MONITORING PERIOD			
	MM/DD/YYYY		MM/DD/YYYY
FROM	07/01/2011	TO	07/31/2011

001-MONTHLY-TRTD MUNICIPAL WW
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Nitrogen, nitrate total (as NO3) 71850 1 0 Effluent Gross	SAMPLE MEASUREMENT	82.4	*****	lb/d	*****	5.55	7.06	mg/L	0	Weekly	Comp24
	PERMIT REQUIREMENT	Req. Mon MO AVG	*****	lb/d	*****	Req. Mon. MO AVG	Req. Mon 7 DA AVG	mg/L		Weekly	COMP24
Coliform, fecal general 74055 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	169.3	220.0	#/100mL	0	Weekly	Grab
	PERMIT REQUIREMENT	*****	*****	*****	*****	200 30DA GEO	400 7 DA GEO	# /100mL		Weekly	GRAB
BOD, carbonaceous, 05 day, 20 C 80082 1 0 Effluent Gross	SAMPLE MEASUREMENT	17.7	*****	lb/d	*****	1.22	~~1.47~~ 2.14	mg/L	0	Weekly	Comp24
	PERMIT REQUIREMENT	550 MO AVG	*****	lb/d	*****	15 MO AVG	22.5 7 DA AVG	mg/L		Weekly	COMP24

Contract Laboratory
E.T.B.
1702 E. Central Ave. Suite 10
Bentonville, AR 72712

Please Note: Tom Myers called Alan Anderson to report 7day exceedance on phosphorus of 2.14 mg/L on July 7, 2011. Call was made 7/18/11 at 3:10 p.m. after receiving analytical report.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Thomas A. Myers Waste Water Superintendent			479-524-5623		08/19/2011
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT FLOW AS MONTHLY AVG. & DAILY MAX, IN MGD (MILLION GALLONS/DAY). SEE PART IV ITEM #4(A). SEE PART III CONDITIONS #11, #12 & #13. 04-00105

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Corrected Report 5/24/12

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME: SILOAM SPRINGS, CITY OF
ADDRESS: POLLUTION CONTROL FACILITY
SILOAM SPRINGS, AR 72761

FACILITY: SILOAM SPRINGS, CITY OF
LOCATION: 975 ANDERSON AVE
SILOAM SPRINGS, AR 72761

ATTN: THOMAS MYERS/DAVID CAMERON,ADM

AR0020273	001-A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD			
	MM/DD/YYYY		MM/DD/YYYY
FROM	09/01/2011	TO	09/30/2011

DMR Mailing ZIP CODE: 72761
MAJOR

001-MONTHLY-TRTD MUNICIPAL WW
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Nitrogen, nitrate total (as NO3)	SAMPLE MEASUREMENT	36.36	*****	lb/d	*****	3.61	6.65	mg/L	0	Weekly	Comp24
71850 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. MO AVG	*****	lb/d	*****	Req. Mon MO AVG	Req. Mon. 7 DA AVG	mg/L		Weekly	COMP24
Coliform, fecal general	SAMPLE MEASUREMENT	*****	*****	*****	*****	101.7	166.0	#/100mL	0	Weekly	Grab
74055 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	200 30DA GEO	400 7 DA GEO	#/100mL		Weekly	GRAB
BOD, carbonaceous, 05 day, 20 C	SAMPLE MEASUREMENT	11.33	*****	lb/d	*****	1.02	~~1.08~~ 1.35	mg/L	0	Weekly	Comp24
80082 1 0 Effluent Gross	PERMIT REQUIREMENT	550 MO AVG	*****	lb/d	*****	15 MO AVG	22.5 7 DA AVG	mg/L		Weekly	COMP24

Contract Laboratory
E.T.G.
1702 E. Central Ave Suite 10
Bentonville, AR 72712

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Thomas A. Myers Wastewater Superintendent	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	479-524-5623		10/20/2011
TYPED OR PRINTED			AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT FLOW AS MONTHLY AVG. & DAILY MAX. IN MGD (MILLION GALLONS/DAY). SEE PART IV, ITEM #47(A). SEE PARTIII, CONDITIONS #11, #12 & #13. 04-00106

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

Corrected Report 5/24/12

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SILOAM SPRINGS, CITY OF
ADDRESS: POLLUTION CONTROL FACILITY
SILOAM SPRINGS, AR 72761

FACILITY: SILOAM SPRINGS, CITY OF
LOCATION: 975 ANDERSON AVE
SILOAM SPRINGS, AR 72761

ATTN: THOMAS MYERS/DAVID CAMERON ADM

AR0020273	001-A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD			
	MM/DD/YYYY		MM/DD/YYYY
FROM	02/01/2012	TO	02/29/2012

DMR Mailing ZIP CODE: 72761
MAJOR

001-MONTHLY-TRTD MUNICIPAL WW
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Nitrogen, nitrate total (as NO3)	SAMPLE MEASUREMENT	124	-----	lb/d	-----	6.04	7.05	mg/L	0	Weekly	Comp24
71850 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. MO AVG	-----	lb/d	-----	Req. Mon. MO AVG	Req. Mon. 7 DA AVG	mg/L		Weekly	COMP24
Coliform, fecal general	SAMPLE MEASUREMENT	-----	-----	-----	-----	93.5	130.0 208	#/100mL	0	Weekly	Grab
74055 1 1 Effluent Gross	PERMIT REQUIREMENT	-----	-----	-----	-----	1000 30DA GEO	2000 7 DA GEO	#/100mL		Weekly	GRAB
BOD, carbonaceous, 05 day, 20 C	SAMPLE MEASUREMENT	46.9	-----	lb/d	-----	2.27	3.04	mg/L	0	Weekly	Comp24
80082 1 0 Effluent Gross	PERMIT REQUIREMENT	550 MO AVG	-----	lb/d	-----	15 MO AVG	22.5 7 DA AVG	mg/L		Weekly	COMP24

Contract laboratory
E.T.G
1702 E. Central Ave, Suite 10
Bentonville, Ar 72712

Please Note: Primary #1 Clarifier still out of service parts have been ordered.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Thomas A. Myers Environmental Compliance Mgr			479-524-5623		03/15/2012
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REPORT FLOW AS MONTHLY AVG. & DAILY MAX. IN MGD (MILLION GALLONS/DAY). SEE PART IV ITEM #47(A). SEE PARTIII. CONDITIONS #11, #12 & #13. 04-00106

From:	Randy
To:	Water-Inspection-Report
Cc:	"Nancy Clark"
Subject:	Inspection Report Response from City of Siloam Springs
Date:	Tuesday, May 29, 2012 4:11:41 PM
Attachments:	City of Siloam Springs Response to ADEQ Inspection Report (March 21 2012) May 29 2012.pdf

---

Please find the attached response from the City of Siloam Springs to ADEQ Inspection Report (March 21, 2012). We will send a hard copy via Certified U.S. Mail. Please contact my office if you have any questions.

Randy Atkinson, Public Works Director
City of Siloam Springs
479-238-0927

From:	Justin Bland
To:	Water-Inspection-Report
Subject:	FW: City of Siloam Springs, Supplemental Response to ADEQ May 16, 2012, Inspection Report (Permit No. AR0020273)
Date:	Friday, June 15, 2012 2:15:35 PM
Attachments:	City of Siloam Springs 6-15-12 Supplemental Response to ADEQ Inspection Report (May 16, 2012).pdf

Mr. Fazio:

ADEQ conducted an inspection of the City of Siloam Springs WWTF on March 21, 2012, and sent the City an Inspection Report on May 16, 2012. The City of Siloam Springs responded to the Inspection Report on May 29, 2012. On May 30, 2012, ADEQ requested additional information to supplement the City's May 29, 2012, response. Attached please find the City's Supplemental Response to ADEQ's May 16, 2012, Inspection Report. Thank you.

Justin Bland, PE
City Engineer
City of Siloam Springs
PO Box 80/ 400 N. Broadway
Siloam Springs, AR 72761
479-238-0921

CITY OF SILOAM SPRINGS
SUPPLEMENTAL RESPONSE TO ADEQ INSPECTION REPORT (MAY 16, 2012)
JUNE 15, 2012

The Arkansas Department of Environmental Quality ("ADEQ" or "the Department") conducted an inspection of the City of Siloam Springs ("the City") wastewater treatment facility ("WWTF") on March 21, 2012. The Department submitted its findings from the inspection in a report ("Inspection Report") to the City dated May 16, 2012, which the City received on May 17, 2012. The City responded to the inspection report by documents dated May 29, 2012. ADEQ requested additional explanation and/or documentation by e-mail dated May 30, 2012. This Supplemental Response to the ADEQ May 16, 2012, Inspection Report is to provide the additional explanation and/or documentation requested. The May 30, 2012, e-mail requests are repeated below in italics followed by the information requested.

> *Item 1: In the City's response, it is stated that the inspectors did not inspect the Isco sampler and Isco flow meter. James Eng, EPA Region 6, and I did, in fact, inspect the Isco sampler and Isco flow meter during the inspection. It was at that time that the operator informed us that the sampler was not hooked up to any flow meter and that the sampler was simply programmed to collect effluent portions every hour, independent of flow. In the City's response, it is implied that the Isco sampler was hooked up to the Isco flow meter at the time of inspection. If there is any way for you to provide documentation that the sampler was hooked up to the flow meter up to the time and following the time of the inspection, please submit this documentation in your response (i.e., information stored in the sampler regarding the flow and aliquot collection). If this is not possible, please provide us with information regarding who verified that the sampler had actually been hooked up to the sampler, and when they verified this.*

Response: The information that the City provided in its May 29, 2012, response regarding the composite sampler and the flow meters is accurate except for the statement that the new ISCO analog sampler and flow meter was installed as of the May 29, 2012 response. The new ISCO analog sampler and flow meter was installed as of June 5, 2012. The City believes that there is confusion regarding the flow meters and the composite sampler that is due to a simple failure to communicate. The City representative on the inspection communicated to the inspectors that the ABB meter is not tied to the ISCO sampler, which is true. However, the City representative did not understand that when he stated that the ABB meter is not tied to the ISCO sampler, the inspectors would interpret that to mean that no flow meter is tied to the ISCO sampler. The ISCO flow meter is connected to the ISCO sampler. The ISCO sampler is located in a building on the northwest corner of the chlorination basin. The ISCO flow meter is in a different building about 20 yards from the small building housing the ISCO sampler. This is the same ISCO flow meter that has been at the same location and has been viewed during prior annual inspections. It is troubling that the ADEQ would think that the City would not have the ISCO sampler connected to a flow meter, as the flow meter dictates the frequency that the sampler collects aliquots for effluent sampling purposes.

The e-mail requests that the City prove that the sampler was tied to the flow meter and suggests providing information stored in the sampler regarding the flow and aliquot collection. The ISCO sampler and ISCO flow meter that were in use until the new ISCO sampler and flow meter were

installed and operating June 5, 2012, did not have information storage and there is not a document that would prove that the sampler was tied to the flow meter. The e-mail suggests providing information regarding who verified that the sampler had actually been hooked up to the flow meter. The connection of the ISCO flow meter to the ISCO sampler is the configuration that is at the essence of the City's use of flow proportional sampling done on the basis of programming the sampler to take an aliquot of effluent approximately every 100,000 gallons of flow. The approximately 100,000 gallons of flow is measured by the ISCO flow meter pulse device. If the sampler were not tied to the ISCO flow meter, the sampler could not draw an aliquot of effluent approximately every 100,000 gallons of flow.

ADEQ previously conducted an inspection of the City's wastewater treatment plant on March 22, 2011. During that inspection, Ms. Alison West used the City's ISCO sampler and associated ISCO flow meter to obtain a 24-hour composite sample. The sampler and flow meter were in the same configuration on March 21, 2012, as they were on March 22, 2011. In addition, the sampler was programmed in March 2012 as it was in March 2011 to collect an aliquot of effluent every 100,000 gallons of flow as measured by the ISCO flow meter. The City representative stated that samples are taken over a 24-hour period and believes that this may have caused the inspectors to have the impression that the sampler is set up to take aliquots each hour. Again, this appears to be a failure to communicate.

Item 3.a: I was incorrect in citing the City in violation of Condition II.C.3 of the permit as the sample refrigerator on the ISCO sampler does not constitute "monitoring and analytical instrumentation". However, according to Jeff Ruehr, ADEQ Chemist Supervisor, because the refrigerators are not functioning as designed (are unable cool to <=6 degrees C without packing the sample bottles in ice) it would be necessary to provide records documenting that the refrigerator temperatures stayed at or below 6 degrees during the 24-hour sampling process. The COCs may show that the samples were received by the lab at the required temperature, but no documentation was provided to show that the sample temperatures were maintained at or below 6 degrees during the 24-hour sampling process.

Response: The City has acted responsibly in responding to refrigerator operation problems by using and replenishing ice to achieve proper cooling in the refrigerator. The City appreciates that ADEQ is concerned that the proper temperature be maintained during sample collection. The City does not maintain records regarding the refrigerator temperature. The City prides itself on the state of the art wastewater treatment plant and on taking the proper operating measures to demonstrate compliance with NPDES effluent limits.

Item 3.c: Your operator stated that the thermometers had not been calibrated since 2009 and did not provide us with any records of weekly thermometer calibration checks. Please provide documentation of the weekly checks for each of the sample refrigerator thermometers for the first two weeks of March 2012.

Response: The requested documentation of weekly laboratory refrigerator thermometer checks was provided to ADEQ as Attachment 3 of the City's May 29, 2012, response. The City checks the laboratory refrigerator thermometers weekly and records the temperature on a "Laboratory Temperature Checklist." The City performs monthly calibration checks of the laboratory refrigerator thermometers by using the certified thermometer as described in the City's May 29, 2012, response to the inspection report.

Item 4: In reference to Condition II.B.1.a of the permit: your SOPs are definitely considered a control used by the permittee to achieve compliance with the conditions of the permit. In the case of an SOP for measurement or analysis of a regulated effluent parameter, the SOP must reference a method currently approved by 40 CFR Part 136. I discussed this issue with James Eng, EPA; Jane Hurley & Jeff Ruehr, ADEQ Chemists; and Dennis Benson, Inspection Branch. Please provide copies of the updated SOPs.

Response: In its May 29, 2012, response, the City stated that it is amending its SOPs to include not only the City's internal reference to the proper test method, but also the EPA approved method number. The updated SOPs for total residual chlorine and for dissolved oxygen are attached hereto as Attachments 1 and 2.

Item 5: Your operator stated at the time of inspection that the south generator did not provide power to all of the plant's treatment units. Your response states that the south generator was designed to provide backup power to all vital treatment units at the WWTF. Please provide documentation that this generator has been connected to and that it can currently provide backup power to all vital treatment units.

Response: The information that the City provided in its May 29, 2012, response is accurate. The City representative's statement is true as well. The south generator provides power to operate all vital plant processes. As further information, the City is providing at Attachment 3 Drawing Numbers 7-E-501 through 7-E-506 of the ADEQ-approved plans and specifications for the wastewater treatment plant improvements. These drawings provide the design details regarding the south generator. The new south generator is connected to and can currently provide backup power to all vital treatment units. It would be difficult to imagine why the City would spend $24 million on a plant expansion and not provide the necessary backup power thus jeopardizing the investment as well as the purpose of the investment – clean effluent.

Item 7: If indeed the ISCO flow meter was hooked up to the sampler at the time of the inspection, then why wasn't it used for comparing flow between it and the weir during the inspection? It not being used for the "flow check" during the inspection is consistent with the operator's statement about it not being hooked up to the sampler. In addition, the City's response did not address the issue of significant turbulence through the weir.

Response: The ISCO flow meter was hooked up to the ISCO sampler at the time of inspection as it has been at all times. The ABB meter is used to measure daily plant flow and, thus, the ABB meter should have been used for a "flow check."

The turbulence in the weir box for the weir was due to high plant flows as a result of prior rains. The turbulence does interfere with taking readings at the weir, just as it interfered with the reading on the inspection day. The City does not attempt to perform an ABB meter check or an ABB meter calibration on high flow days because the flow does fluctuate in the weir box for the weir. The ABB meter has been inspected and calibrated more often than recommended by the manufacturer and the City believes that it has provided accurate flow readings. The City understands ADEQ's concern with turbulence and is consulting with its design engineers.

# # #

ATTACHMENT 1

CITY OF SILOAM SPRINGS
SUPPLEMENTAL RESPONSE TO ADEQ INSPECTION REPORT (MAY 16, 2012)
JUNE 15, 2012

City of Siloam Springs

Water & Wastewater Department

STANDARD OPERATING PROCEDURE –Total Method Chlorine (Standard Methods 4500-CL G, EPA-approved method, or Method 330.5, ADEQ-approved equivalent method)

ACTIVITY: Obtaining Total Chlorine Residual reading for permit reporting purposes.

WARNINGS: Sample must be taken only at specified location at Effluent. Sample collected and stored according to method. Sterilized container and laboratory equipment used must be first autoclaved. Record time sample collected and ran.

If for any reason this policy cannot be carried out as written, you are to notify your immediate supervisor before proceeding.

NOTE: Chlorine, Total reading for permit reporting purposes must be taken and recorded in the Chlorine Record book when conducting permit reporting. Notify your supervisor immediately if you have a problem with testing.

MATERIAL/EQUIPMENT REQUIRED: Autoclave, sterilized sample bottle with preservative, sterilized laboratory instruments, incubator, Petri-dish, media broth, filters thermometer Calibration Log Sheet.

ACTION:

1. Have spectrophotometer on and allow for warm up.
2. Pre-sterilization of glass ware and sample contain as required to meet time and temperature.
3. Using sterilized bottle collect sample directly into bottle avoid any possible contamination.
4. Immediately take to Laboratory to run test as required in Hach method. Please refer to standard methods 4500-CL G to ensure correct protocol is met prior to reporting values.

CONCLUSION: The following policy and procedure has been established to ensure the proper completion of the listed task. Failure to complete the procedure as described will result in discipline up to and including termination of employment.

Tom Myers, Wastewater Superintendent Date

Jack Harrison, Wastewater Asst. Superintendent Date

ATTACHMENT 2

CITY OF SILOAM SPRINGS
SUPPLEMENTAL RESPONSE TO ADEQ INSPECTION REPORT (MAY 16, 2012)
JUNE 15, 2012

City of Siloam Springs

Water & Wastewater Department

STANDARD OPERATING PROCEDURE – Dissolved Oxygen (Standard Methods 4500-O G, EPA-approved method, or Method 360.1, ADEQ-approved equivalent method)

ACTIVITY: Obtaining Dissolved Oxygen (D.O.) reading for permit reporting purposes.

WARNINGS: Reading must be taken only at specified location. D.O. probe membrane should be stored with cap in place. D.O. probes membrane and electrolyte should be changed monthly or as needed.

If for any reason this policy cannot be carried out as written, you are to notify your immediate supervisor before proceeding.

NOTE: D.O. meter must be calibrated before each use. Obtain calibration percent number using barometer and conversion charts located in Wastewater Lab. Failure to calibrate will result in an inaccurate reading.

D.O. Readings for permit reporting purposes must be taken and recorded in the D.O. Record book at least one (1) time per week. Reading MUST be 7.00 or above. If reading is not 7.00 or above, recalibrate the meter and repeat the process. If reading is still not in the acceptable range notify your supervisor immediately .

MATERIAL/EQUIPMENT REQUIRED: D.O. Meter; Calibration charts; D.I. Water; Ink pen; D.O. Record book.

ACTION:

1. Obtain atmospheric pressure from barometer in Lab.
2. Using conversion chart on wall, convert pressure from inches of mercury to millimeters of mercury.
3. Using chart above, convert millimeters of mercury to calibration value percent.
4. Turn on the D.O. meter knob to the 'calibrate' setting. The meter display screen will display a series of codes when turned on, and then display 'Calibrate in Percent?'
5. Press the 'Confirm' button. Enter the calibration percent obtained

earlier by pressing the 'up' & 'down' buttons. When proper percent is entered

press 'Confirm' again.

6. The display will read 'Calibrating', then 'Calibrated to (chart) Percent'. Turn the knob to the 'O2-Temp' setting.
7. Record time of day.
8. Remove cap and lower probe into water at specified location. Wait for D.O. reading on display to stabilize, (a star will usually appear on the display when the reading is stable),
9. Record this number.
10. Record the temperature reading.
11. Remove the probe from the sample water and rinse with De-ionized (DI) water.
12. Repeat steps h. & i.
13. Again remove the probe from the stream and rinse with DI water, make sure it appears to be clean.
14. Replace cap on probe end.
15. Turn off D.O. meter and return to storage area.
16. Please refer to standard methods 4500-0-G to ensure correct protocol is met prior to reporting values.

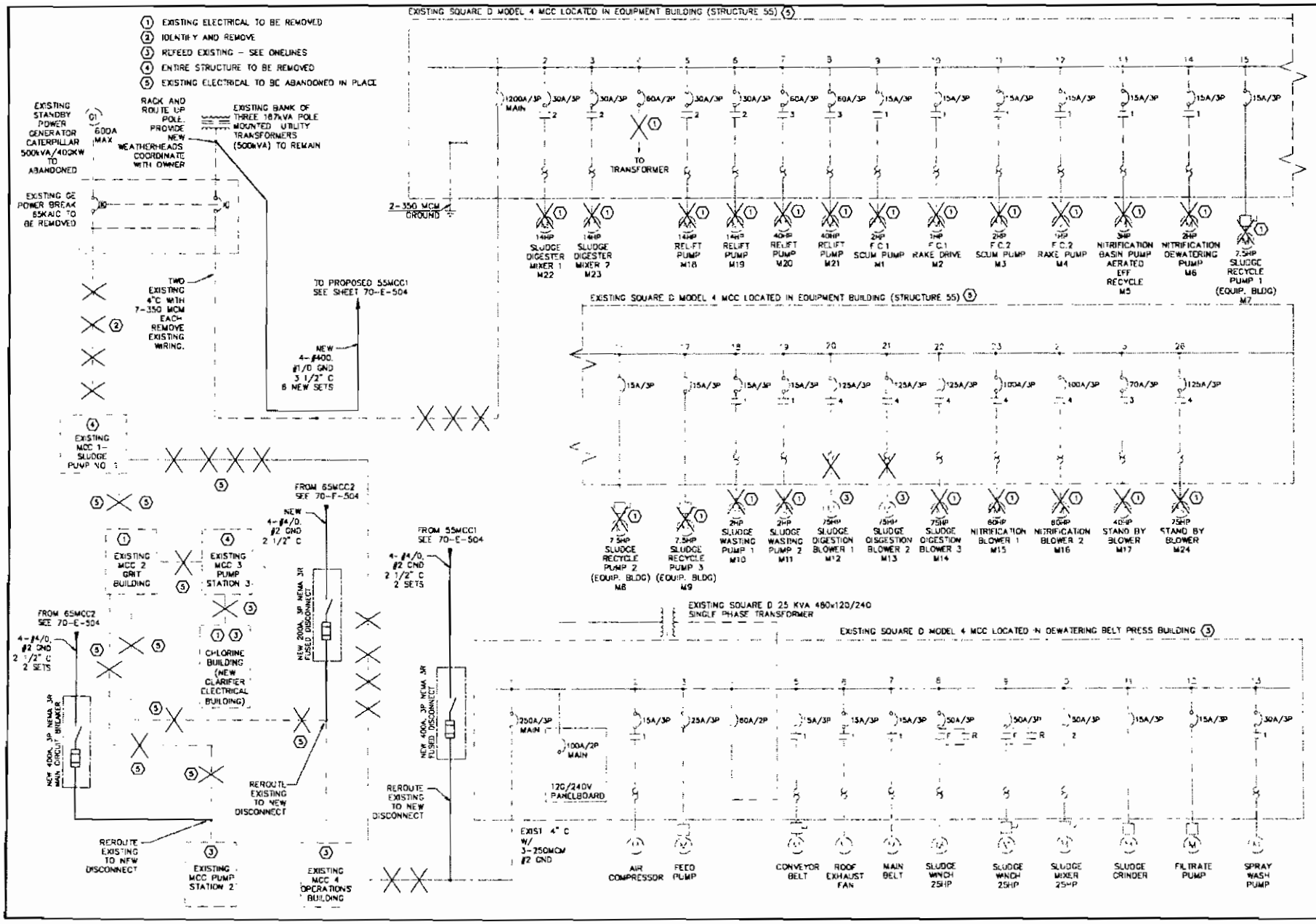
CONCLUSION: The following policy and procedure has been established to ensure the proper completion of the listed task. Failure to complete the procedure as described will result in discipline up to and including termination of employment.

Tom Myers, Wastewater Superintendent Date

Jack Harrison, Wastewater Asst. Superintendent Date

ATTACHMENT 3

CITY OF SILOAM SPRINGS
SUPPLEMENTAL RESPONSE TO ADEQ INSPECTION REPORT (MAY 16, 2012)
JUNE 15, 2012



GARVER ENGINEERS
1095 EAST MILLSAP ROAD, FAYETTEVILLE, AR 72703, (479) 527-6700

SILOAM SPRINGS
SILOAM SPRINGS, AR

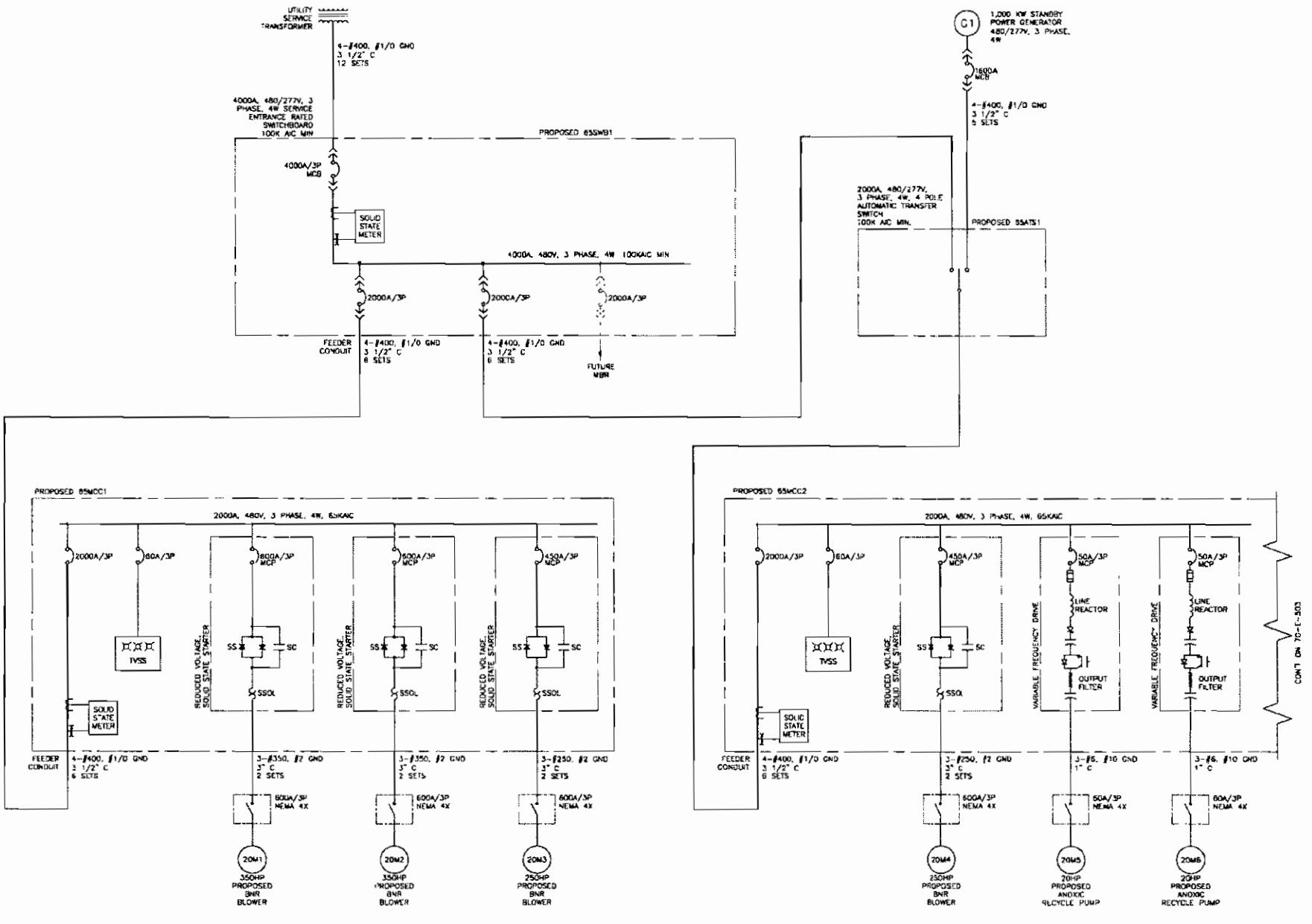
WASTEWATER TREATMENT PLANT IMPROVEMENTS

EXISTING ELECTRICAL ONELINE DIAGRAM

JOB NO.: 07057000
DATE: OCT 2008
DESIGNED BY: SHZ
DRAWN BY: JPA

DRAWING NUMBER
70-E-501

SHEET NUMBER
169



CARVER ENGINEERS, LLC No. 756

STATE OF ARKANSAS REGISTERED PROFESSIONAL ENGINEER No. 9701

10/17/08

REV.	DATE	DESCRIPTION	BY	APPROVED

CARVER ENGINEERS
1085 EAST MILLSAP ROAD, FAYETTEVILLE, AR 72703, (479) 587-8100

SILOAM SPRINGS
SILOAM SPRINGS, AR

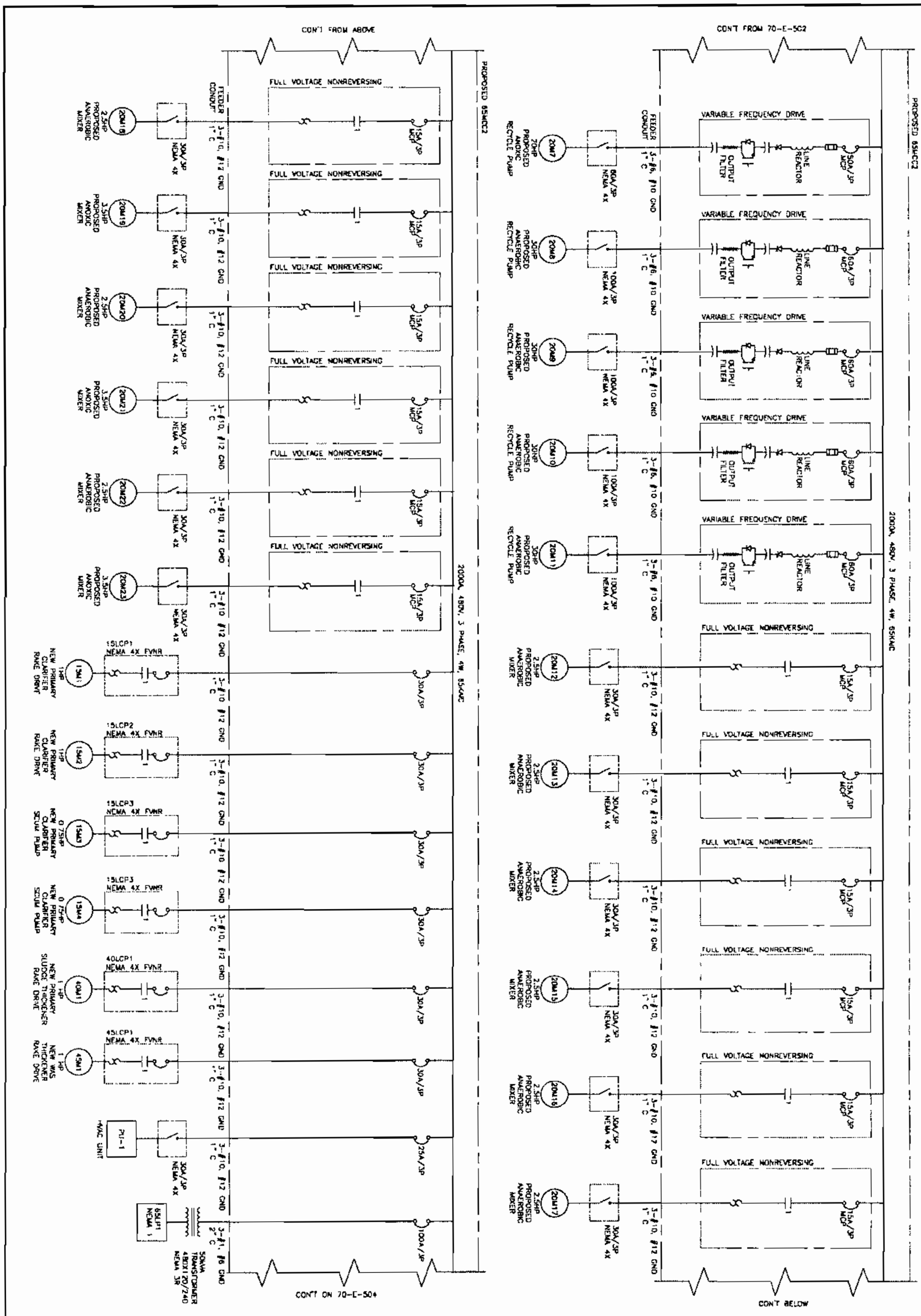
WASTEWATER TREATMENT PLANT IMPROVEMENTS

65SWB1, 65MCC1 AND 65MCC2 ONELINE DIAGRAMS

JOB NO.: 07057000
DATE: OCT. 2008
DESIGNED BY: SHZ
DRAWN BY: JPA

DRAWING NUMBER
70-E-502

SHEET NUMBER
170



REV.	DATE	DESCRIPTION	BY	APPROVED

85MCC2 ONELINE DIAGRAM CONTINUED

JOB NO. 07037000
DATE: OCT. 2008
DESIGNED BY: SHZ
DRAWN BY: JPA

DRAWING NUMBER 70-E-503

SHEET NUMBER 17

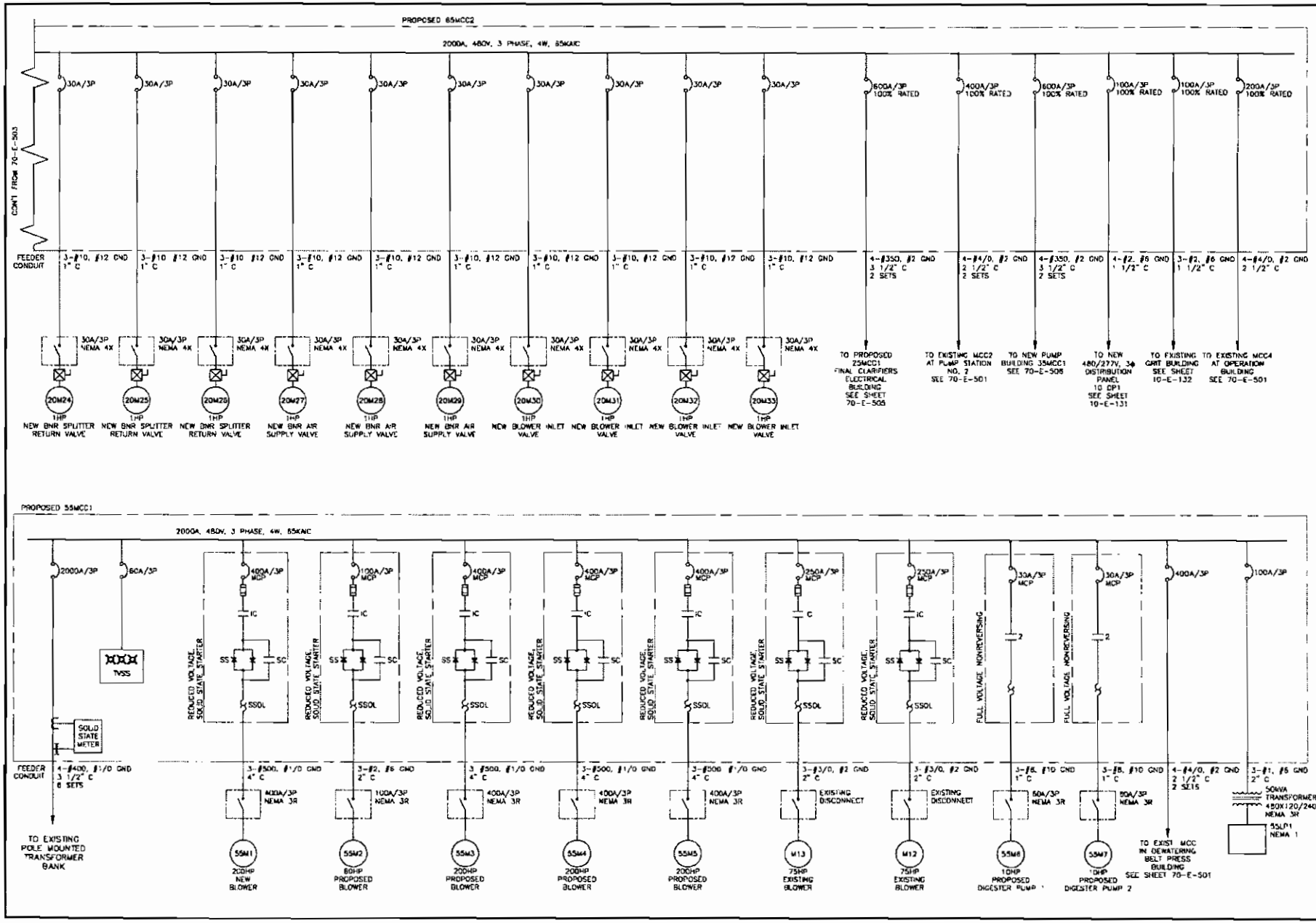
SILOAM SPRINGS

SILOAM SPRINGS, AR

WASTEWATER TREATMENT PLANT IMPROVEMENTS

GARVER ENGINEERS

1085 EAST MILLSAP ROAD, FAYETTEVILLE, AR 72703, (479) 527-9100



GARVER ENGINEERS
1008 EAST MILLSAP ROAD, FAYETTEVILLE, AR 72703, (479) 521-9100

SILOAM SPRINGS
SILOAM SPRINGS, AR

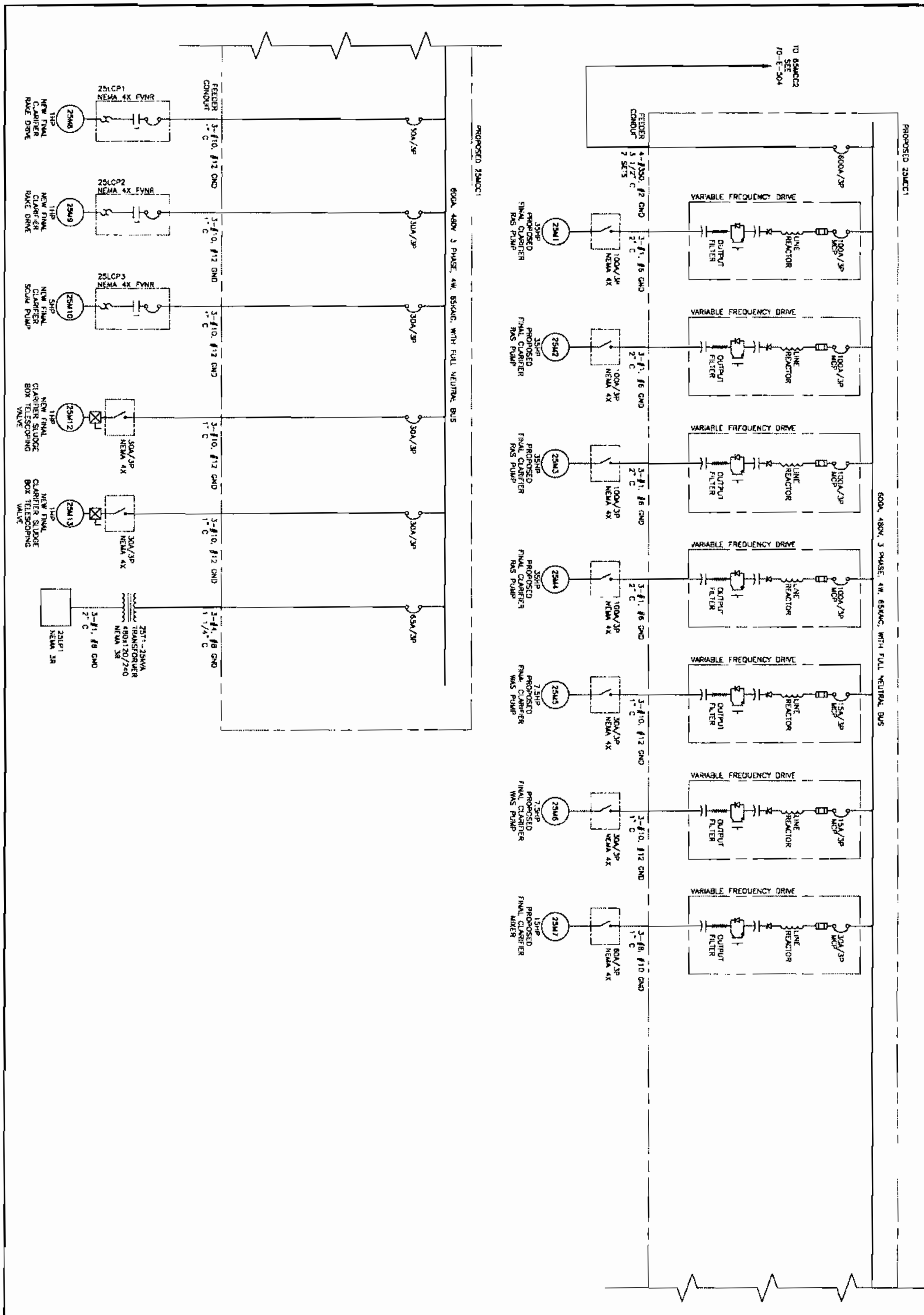
WASTEWATER TREATMENT PLANT IMPROVEMENTS

65MCC1 AND 65MCC2 ONELINE DIAGRAMS

JOB NO.: 07057000
DATE: OCT 2008
DESIGNED BY: SHZ
DRAWN BY: JFA

DRAWING NUMBER
70-E-504

SHEET NUMBER
172



REV.	DATE	DESCRIPTION	BY	APPROVED

GARVER ENGINEERS

1085 EAST MILLSAP ROAD, FAYETTEVILLE, AR 72703, (479) 527-9100

SILOAM SPRINGS

SILOAM SPRINGS, AR

Siloam Springs

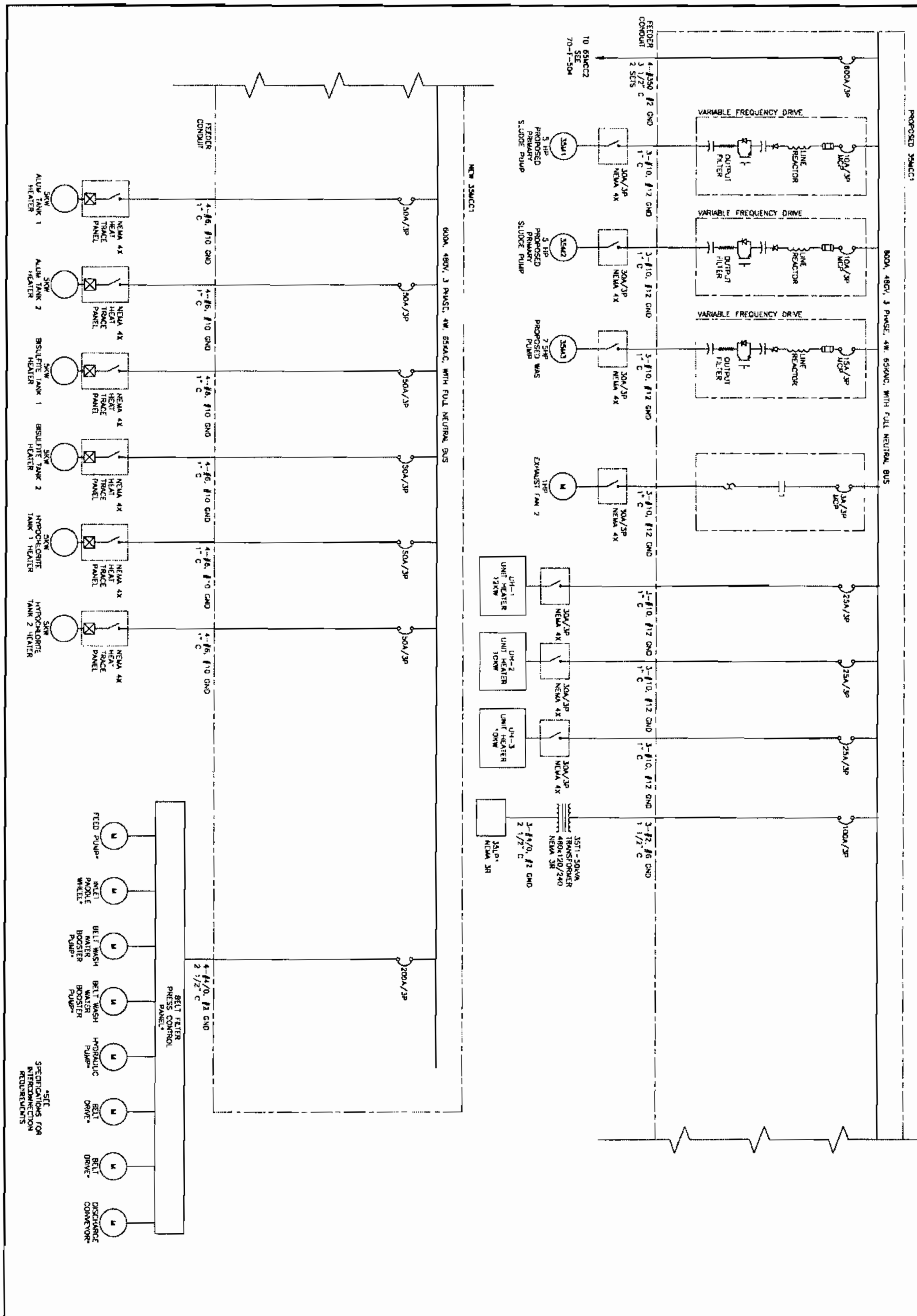
WASTEWATER TREATMENT PLANT IMPROVEMENTS

25MCC1 ONELINE DIAGRAM

JOB NO. 07057000
DATE OCT 2008
DESIGNED BY SHZ
DRAWN BY JPA

DRAWING NUMBER
70-E-505

SHEET NUMBER
173



REV.	DATE	DESCRIPTION	BY	APPROVED

GARVER ENGINEERS

1000 EAST MILLSAP ROAD, FAYETTEVILLE, AR 72703, (479) 527-9100

SILOAM SPRINGS

SILOAM SPRINGS, AR

WASTEWATER TREATMENT PLANT IMPROVEMENTS

35MCC1 ONELINE DIAGRAM

JOB NO: 07057000
DATE: OCT. 2008
DESIGNED BY: SHZ
DRAWN BY: JPA

DRAWING NUMBER **70-E-506**

SHEET NUMBER 174

From:	Johnson, Steven
To:	Miller, Dennise
Cc:	Fleming, Eric
Subject:	FW: City of Siloam Springs, Supplemental Response to ADEQ May 16, 2012, Inspection Report (Permit No. AR0020273)
Date:	Friday, June 15, 2012 3:09:41 PM

John would like for this email to go with the report. He will be sending an adequate response letter to Siloam Springs.

thanks

From: Fazio, John
Sent: Friday, June 15, 2012 3:02 PM
To: 'Justin Bland'
Cc: Fleming, Eric; Johnson, Steven
Subject: RE: City of Siloam Springs, Supplemental Response to ADEQ May 16, 2012, Inspection Report (Permit No. AR0020273)

Mr. Bland,

I have reviewed the City's revised response. My comments to the response are below:

Item 1: Again, at the time of the inspection, the operator stated to both James Eng, EPA, and I that the sampler was not hooked up to any flow meter. In addition, I reiterated in the May 30, 2012 email that the operator told Mr. Eng and me that the sampler was programmed to take sample aliquots every hour, independent of flow. So it does seem very reasonable that the ADEQ would take the word of the City's trained, licensed operator.

Item 5: As I reminded you in the May 30, 2012 email, your operator (clearly) stated to both Mr. Eng and I that the south generator did not provide power to all of the plants treatment units.

It appears necessary that the City should make the operator more familiar with exactly how the treatment plant's monitoring and sampling equipment are configured and operate and to which treatment units the south generator provides back-up power.

I will discuss your revised response with my supervisors and possibly enforcement personnel to determine if the response is adequate, as it appears that much of what you have described as confusion can be attributed to what the operator communicated to the EPA and the ADEQ at the time of the inspection.

If you have any questions, you can call me 479-267-0811, ext. 16.

Sincerely,

John Fazio
District 1 Inspector
Water Division, ADEQ

From: Justin Bland [mailto:jbland2@siloamsprings.com]
Sent: Friday, June 15, 2012 2:12 PM
To: Fazio, John
Cc: Randy Atkinson
Subject: Re: City of Siloam Springs, Supplemental Response to ADEQ May 16, 2012, Inspection Report (Permit No. AR0020273)

Mr. Fazio:

ADEQ conducted an inspection of the City of Siloam Springs WWTF on March 21, 2012, and sent the City an Inspection Report on May 16, 2012. The City of Siloam Springs responded to the Inspection Report on May 29, 2012. On May 30, 2012, ADEQ requested additional information to supplement the City's May 29, 2012, response. Attached please find the City's Supplemental Response to ADEQ's May 16, 2012, Inspection Report. Thank you.

Justin Bland, PE
City Engineer
City of Siloam Springs
PO Box 80/ 400 N. Broadway
Siloam Springs, AR 72761
479-238-0921

ADEQ

ARKANSAS
Department of Environmental Quality

June 18, 2012

David Cameron, City Administrator
City of Siloam Springs
P.O. Box 80
Siloam Springs, Arkansas 72761

Permit No.: AR0020273 AFIN: 04-00106

Dear Mr. Cameron:

I have reviewed the City's supplemental response pertaining to my March 21, 2012 inspection of the City of Siloam Springs Pollution Control Plant. The information provided sufficiently addresses the violations referenced in my inspection report. At this time, the Department has no further comment concerning this particular inspection. Acceptance of your response by the Department does not preclude any future enforcement action deemed necessary at this site or any other site.

If we need further information concerning this matter, we will contact you. Thank you for your attention to this matter. Should you have any questions, feel free to contact me at 479-267-0811, ext. 16, or you may e-mail me at fazio@adeq.state.ar.us.

Sincerely,

John Fazio
District 1 Inspector
Water Division

cc: Water Division Enforcement Branch
Water Division Permits Branch