|   | ADEQ Water NPDES In                    | spection        | AF                              | IN: <b>61-</b> 0 | 00055   |                                  |                                   |          |          |      | Peri    | mit #:                           | AR0 | 0348 | 35          |          |                  |          |              |
|---|--|-----------------|---------------------------------|------------------|---------|----------------------------------|-----------------------------------|----------|----------|------|---------|----------------------------------|-----|------|-------------|----------|------------------|----------|--------------|
| <b>\$</b> EPA   |  | UNITED STATES E | NVIRONME                        | ENTAL PRO        | )TECTIO | ON AGEN                          | NCY                               |          |          |      |         |                                  |     |      |             |          | rm App<br>No. 20 |          |              |
|   | NPDES                                  | <b>Compl</b>    | washington,                     |                  |         | ctio                             | n I                               | Rep      | or       | t    |         |                                  |     |      |             |          |                  |          |              |
|   | Section A: National Data System Coding |                 |                                 |                  |         |                                  |                                   |          |          |      |         |                                  |     |      |             |          |                  |          |              |
| 1 N 2   |  | 0 3 4           | PDES 4   8   0   0   luation Ra | 3   5<br>5   5   |         | 12<br>Remar                      |                                   | <b>2</b> | Yr/<br>0 | Mo/E | ay<br>1 | 5                                | 17  | 18   | H Reserved- | 19<br>19 | inspect S        | •        | Fac. Type  1 |
| 67  | 69                                     | Ī               | N                               |                  | 71      | N                                | 72                                | N        | 73       |      |         | 74                               | 75  |      |             |          |                  | <u> </u> | 80           |
|   |  |                 |                                 | S                | ection  | B: Fac                           | cility                            | Data     |          |      |         |                                  |     |      |             |          |                  |          |              |
| Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number)  City of Pocahontas WWTP |  |                 |                                 |                  |         |                                  | Entry Time/Date<br>1005 6/15/2012 |          |          |      |         | Permit Effective Date 4/1/2009   |     |      |             |          |                  |          |              |
| 20.4 m. south of Swan Cove intersection with Black River Pocahontas, AR Randolph Co.  |  |                 |                                 |                  |         | Exit Time/Date<br>1040 6/15/2012 |                                   |          |          |      |         | Permit Expiration Date 3/31/2014 |     |      |             |          |                  |          |              |
| Name(s) of 0  | On-Site Representative(s)/Tit          | le(s)/Phone and | Fax Numl                        | per(s)           |         |                                  |                                   |          |          |      |         |                                  |     | Oth  | er Facilit  | v Data   |                  |          |              |

| Bill Daniel/Manager/870-892-3222   | 36,240997                         |                          |
|--|-----------------------------------|--------------------------|
| Name, Address of Responsible Official/Title/Phone and Fax Number<br>Bill Daniel/Manager/870-892-3222<br>Pocahontas Water and Sewer System<br>207 Hwy. 67 South<br>Pocahontas, AR 72455 | Contacted Yes ✓ No □              | -90.97981<br>PDS #066822 |
| Section C: Areas Evaluated D   | uring Inspection                  |                          |
| (S = Satisfactory, M = Marginal, U = Unsatisfactory)   | is factory, $N = Not Evaluated$ ) |                          |
|  | _                                 |                          |

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

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

This compliance assistance inspection was conducted at the request of the permittee. The facility is preparing to do major rehabilitation of the primary lagoon cell. This will involve dewatering the lagoon, repairing the levee and armoring the interior slope of the levee with rock. Additionally, the rock filter will rehabilitated with new and larger rock. A description of the anticipated work has been submitted to the permits branch for approval.

During the course of the maintenance, influent will be rerouted into the second lagoon cell and a pump will be used to transfer the water remaining in the first cell to the second cell. Since the volume of discharged water will increase during the dewatering process, Mr. Daniel and I discussed the need to be mindful of the loading limits of the permit even when measured concentrations are below permit limits.

No letter will be sent.

| Name(s) and Signature(s) of Inspector(s)  Brent L. Walker Brest L Walker | Agency/Office/Telephone/Fax AR Dept. of Environmental Quality-Jonesboro (870) 935-7221 ext. 12/(870) 935-4715 (Fax) | Date 6/15/2012 |  |  |  |
|--|---|----------------|--|--|--|
|  |   |                |  |  |  |
| Signature of Reviewer  | Agency/Office/Phone and Fax Numbers   | Date           |  |  |  |