

# ADEQ

ARKANSAS  
Department of Environmental Quality

August 23, 2016

Honorable Tim McKinney, Mayor  
City of Berryville  
P.O. Box 227  
Berryville, AR 72616

**RE: Berryville POTW Inspections (Carroll Co)**  
**AFIN: 08-00034**                      **NPDES Permit No.: AR0021792**  
**AR0021792C**

Dear Mr. McKinney:

On August 4, 2016 I performed a Compliance Evaluation Inspection, a Collection System Inspection, and a Construction Permit Inspection of the above-referenced 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. A copy of each of the inspection reports is enclosed for your records.

**Please refer to the “Summary of Findings” sections of the attached inspection reports and provide a written response for each violation that was noted.** This response should be mailed to the attention of the Water Division Inspection Branch at the address at the bottom of this letter or e-mailed to [Water-Inspection-Report@adeq.state.ar.us](mailto:Water-Inspection-Report@adeq.state.ar.us). This response should contain documentation describing the course of action taken to correct each item noted. This corrective action should be completed as soon as possible, and the written response with all necessary documentation (i.e., photos) is due by **September 6, 2016**.


If I can be of any assistance, please contact me at [grayd@adeq.state.ar.us](mailto:grayd@adeq.state.ar.us) or (479) 424-0333.

Sincerely,



Dannielle Gray  
District 4 Field Inspector  
Water Division

cc: Kirby Murray, Public Works Director, [kirbymurray@gmail.com](mailto:kirbymurray@gmail.com)  
Mike Maynard, Operator, [michael.maynard@ch2m.com](mailto:michael.maynard@ch2m.com)

 <b>A R K A N S A S</b> Department of Environmental Quality		<b>WATER DIVISION INSPECTION REPORT</b>				
		AFIN: 08-00034		PERMIT #: AR0021792		DATE: 8/4/2016
		COUNTY: 08 Carroll		PDS #: 092377		MEDIA: WN
		GPS LAT: 36.35614 LONG: -93.58015 LOCATION: Entrance				
<b>FACILITY INFORMATION</b>			<b>INSPECTION INFORMATION</b>			
NAME: <b>Berryville POTW</b> LOCATION: <b>1000 West Cedarvale Road</b> CITY: <b>Berryville</b>			FACILITY TYPE: <b>1 - Municipal</b>	INSPECTOR ID#: <b>71330 S - State</b>		
<b>RESPONSIBLE OFFICIAL</b> NAME / TITLE: <b>Honorable Tim McKinney / Mayor</b> COMPANY: <b>City of Berryville</b> MAILING ADDRESS: <b>P.O. Box 227</b> CITY, STATE, ZIP: <b>Berryville AR 72616</b> PHONE & EXT. / FAX: <b>870-423-4414 /</b> EMAIL:			FACILITY EVALUATION RATING: <b>2 - Marginal</b>	INSPECTION TYPE: <b>Compliance Evaluation</b>		
			DATE(S): <b>8/4/2016</b>	ENTRY TIME: <b>09:00</b>	EXIT TIME: <b>14:00</b>	PERMIT EFFECTIVE DATE: <b>12/1/2007</b> PERMIT EXPIRATION DATE: <b>11/30/2012</b>
CONTACTED DURING INSPECTION: <b>Yes</b>			FAYETTEVILLE SHALE RELATED: <b>N</b>			
			FAYETTEVILLE SHALE VIOLATIONS: <b>N</b>			
			<b>INSPECTION PARTICIPANTS</b>			
			NAME/TITLE/PHONE/FAX/EMAIL/ETC.: <b>Mike Maynard/Operator/870-423-3749/michael.maynard@ch2m.com</b> <b>Tim Tinsley/Operator</b> <b>Mayo Miller/Operator</b>			
<b>AREA EVALUATIONS</b>						
(S=Satisfactory, M=Marginal, U=Unsatisfactory, N=Not Applicable/Evaluated)						
<b>S</b>	PERMIT	<b>S</b>	FLOW MEASUREMENT	<b>S</b>	STORMWATER	
<b>S</b>	RECORDS/REPORTS	<b>S</b>	LABORATORY	<b>S</b>	FACILITY SITE REVIEW	
<b>M</b>	OPERATION & MAINTENANCE	<b>S</b>	EFFLUENT/RECEIVING WATER	<b>S</b>	SELF-MONITORING PROGRAM	
<b>S</b>	SAMPLING	<b>S</b>	SLUDGE HANDLING/DISPOSAL	<b>N</b>	PRETREATMENT	
<b>**</b>	OTHER:					
<b>SUMMARY OF FINDINGS</b>						
The following violations were noted during inspection:						
<ol style="list-style-type: none"> <li>1. The gravity thickening tank is leaking (see Photos 13-16). This is a violation of Part II, Section B.1.a. The thickener is located adjacent to Mill Branch Creek. Therefore, the leak also poses an increased risk of stormwater pollution. This is a violation of Part III, Condition 12.B.7.iii of the permit.</li> <li>2. The Permittee is incorrectly reporting data on required DMRs. Specifically, the Permittee is halving any lab reported value that contains a less than (&lt;) value prior to conducting calculations. This has resulted in misreporting loading and monthly average results. This is a violation of Part 1A and Part II, Section C.5 of the permit. The Permittee must correctly report data moving forward and must also contact their ADEQ Enforcement Analyst to submit corrected DMRs for a period of time determined by the Enforcement Analyst.</li> </ol>						

**GENERAL COMMENTS**

I inspected this facility with the above-referenced inspection participants on August 4, 2016. Inspection consisted of a facility assessment, a records audit, a separate construction permit inspection, and a separate collection system inspection.


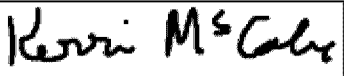
This permit expired in November 2012. The facility is currently operating under an administrative extension while they complete the permit renewal process. The draft permit was posted for public notice on April 1, 2016.

The facility is no longer land applying sludge. Therefore, inspection did not include assessment of permitted land application sites. In 2013, the facility completed treatment plant modifications, which included the addition of a gravity thickener, digester, and sludge press. Sludge is now dewatered and sent to a landfill for disposal.

With the exception of the leaking thickening tank noted in the "Summary of Findings" above, nothing of concern was observed during the facility assessment. Otherwise, the treatment plant was clean and in good repair during inspection, and the Operators were knowledgeable of the facility and its components.

Records audit revealed discrepancies in data reporting. As per Mr. Tim Tinsley, he was given the following instruction by Ms. Amy Schluterman of ADEQ: "Any values that are less than (<) values are reported as half in NetDMR." As a result of this guidance, the Permittee has been reporting loading concentration and monthly averages using half of the lab reported results for any result with a less than value. I contacted Ms. Schluterman to clarify this guidance, and she informed that reducing values is not a recommended practice and that data must be entered into NetDMR in the same manner as it is entered onto a paper DMR using exact lab reported results. I also contacted Kyle Barber with ADEQ's Enforcement Division, and he verified that data entered into NetDMR must be precise lab reported data, and that manipulation of the data are not a compliant practice. The Permittee must contact their ADEQ Enforcement Analyst, Ms. Jaqueline Trotta, to correct the applicable DMRs and to determine how far back the DMR corrections must go. Further, data reported on DMRs, whether they be paper or electronic, must henceforth reflect actual lab reported analyses results and may not be halved or otherwise changed.

The current permit includes Stormwater Pollution Prevention requirements. Review of the facility's stormwater Best Management Practices (BMPs) and SWPPP revealed that the facility conducts inspections and training activities in accordance with stormwater requirements. As stated above, the facility is currently undergoing permit renewal and the Draft Permit does not include specific conditions related to the current Stormwater Pollution Prevention. The Draft Permit requires that the Permittee apply for coverage under the Industrial Stormwater General Permit (ARR000000) within 180 days of issuance of the permit. While this permit is still in draft form, I did advise the facility of the No-Exposure Certification option, and they have requested the paperwork to apply for this exclusion. As such, the No-Exposure Certification Form and a fact sheet are included with this report. However, a stormwater outfall was observed (see Photo 19), which collects runoff from the facility grounds and discharges it to Mill Branch Creek. The Permittee will need to verify (and certify) that runoff entering the creek from this outfall pipe does not come into contact with wastewater treatment components prior to discharge to be eligible for the No-Exposure Exclusion.

INSPECTOR'S SIGNATURE:  Danielle Gray	DATE: 8/17/2016
SUPERVISOR'S SIGNATURE:  Kerri McCabe	DATE: 8/22/2016

<b>SECTION A: PERMIT VERIFICATION</b>	
PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. ALL DISCHARGES ARE PERMITTED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>SECTION B: RECORDKEEPING AND REPORTING EVALUATION</b>	
RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRS:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
a. DATES AND TIME(S) OF SAMPLING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
b. EXACT LOCATION(S) OF SAMPLING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
c. NAME OF INDIVIDUAL PERFORMING SAMPLING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
d. ANALYTICAL METHODS AND TECHNIQUES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
e. RESULTS OF CALIBRATIONS:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
f. RESULTS OF ANALYSES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
g. DATES AND TIMES OF ANALYSES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
h. NAME OF PERSON(S) PERFORMING ANALYSES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>SECTION C: OPERATIONS AND MAINTENANCE</b>	
TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. TREATMENT UNITS PROPERLY OPERATED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
2. TREATMENT UNITS PROPERLY MAINTAINED: <u>Thickening tank leaking onto ground.</u>	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED: <u>750 hp diesel generator.</u>	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
5. ALL NEEDED TREATMENT UNITS IN SERVICE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
8. OPERATION AND MAINTENANCE MANUAL AVAILABLE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
9. STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
10. PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
11. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
12. IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
13. HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
14. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
15. IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE



<b>SECTION D: SAMPLING</b>	
PERMITTEE SAMPLING MEETS PERMIT REQUIREMENTS	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
3. FLOW PROPORTIONED SAMPLES OBTAINED WHEN REQUIRED BY PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. SAMPLING AND ANALYSES COMPLETED ON PARAMETERS SPECIFIED IN PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
5. SAMPLING AND ANALYSES PERFORMED AT FREQUENCY SPECIFIED IN PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
6. SAMPLE COLLECTION PROCEDURES ADEQUATE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
a. SAMPLES REFRIGERATED DURING COMPOSITING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
b. PROPER PRESERVATION TECHNIQUES USED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
c. CONTAINERS AND SAMPLE HOLDING TIMES CONFORM TO 40 CFR 136:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
7. IF MONITORING IS PERFORMED MORE OFTEN THAN REQUIRED ARE RESULTS REPORTED ON THE DMR: <u>Facility conducts an additional TDS composite on Thursdays. These data are included on DMR.</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>SECTION E: FLOW MEASUREMENT</b>	
PERMITTEE FLOW MEASUREMENT MEETS PERMIT REQUIREMENTS	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED: <u>Yes</u> TYPE OF DEVICE: <u>18" Parshall flume</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. FLOW MEASURED AT EACH OUTFALL AS REQUIRED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
3. SECONDARY INSTRUMENTS (TOTALIZERS, RECORDERS, ETC.) PROPERLY OPERATED AND MAINTAINED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. CALIBRATION FREQUENCY ADEQUATE: <u>Calibrated 14 January 2016.</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
5. RECORDS MAINTAINED OF CALIBRATION PROCEDURES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
6. CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
7. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
8. FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
9. HEAD MEASURED AT PROPER LOCATION:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>SECTION F: LABORATORY</b>	
PERMITTEE LABORATORY PROCEDURES MEET PERMIT REQUIREMENTS	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(B) FOR SLUDGES) :	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
3. SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. QUALITY CONTROL PROCEDURES ADEQUATE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
5. DUPLICATE SAMPLES ARE ANALYZED $\geq$ 10% OF THE TIME:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
6. SPIKED SAMPLES ARE ANALYZED $\geq$ 10% OF THE TIME:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
7. COMMERCIAL LABORATORY USED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
a. LAB NAME: <u>American Interplex</u>	
b. LAB ADDRESS: <u>8600 Kanis Road, Little Rock, AR</u>	
c. PARAMETERS PERFORMED: <u>WET testing, TDS, TP, FCB, NH3-N, TSS, BOD5</u>	
8. BIOMONITORING PROCEDURES ADEQUATE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
a. PROPER ORGANISMS USED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
b. PROPER DILUTION SERIES FOLLOWED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
c. PROPER TEST METHODS AND DURATION:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
d. RETESTS AND/OR TRE PERFORMED AS REQUIRED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE

<b>SECTION G: EFFLUENT/RECEIVING WATERS OBSERVATIONS</b>							
BASED ON VISUAL OBSERVATIONS ONLY						<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE	
DETAILS:							
OUTFALL #:	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOATING SOLIDS	COLOR	OTHER
001	No	No	Minor	No	No	Clear	--
<b>SECTION H: SLUDGE DISPOSAL</b>							
SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS						<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE	
DETAILS: <b>No longer land applying. Last application occurred in early 2013.</b>							
1. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY:						<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE	
2. SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503:						<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE	
3. FOR LAND APPLIED SLUDGE, TYPE OF LAND APPLIED TO: (E.G., FOREST, AGRICULTURAL, PUBLIC CONTACT SITE):							
<b>SECTION I: SAMPLING INSPECTION PROCEDURES</b>							
SAMPLE RESULTS WITHIN PERMIT REQUIREMENTS						<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
DETAILS:							
1. SAMPLES OBTAINED THIS INSPECTION:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
2. TYPE OF SAMPLE: <input type="checkbox"/> GRAB:__ <input type="checkbox"/> COMPOSITE:__ METHOD:__ FREQUENCY:							
3. SAMPLES PRESERVED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
4. FLOW PROPORTIONED SAMPLES OBTAINED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
5. SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
6. SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
7. SAMPLE SPLIT WITH PERMITTEE:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
<b>SECTION J: STORM WATER POLLUTION PREVENTION PLAN</b>							
STORM WATER MANAGEMENT MEETS PERMIT REQUIREMENTS						<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE	
DETAILS:							
1. SWPPP UPDATED AS NEEDED:__ DATE OF LAST UPDATE:						<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
2. SITE MAP INCLUDING ALL DISCHARGES AND SURFACE WATERS:						<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
3. POLLUTION PREVENTION TEAM IDENTIFIED:						<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
4. POLLUTION PREVENTION TEAM PROPERLY TRAINED:						<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
5. LIST OF POTENTIAL POLLUTANT SOURCES:						<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
6. LIST OF POTENTIAL SOURCES AND PAST SPILLS AND LEAKS:						<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
7. ALL NON-STORM WATER DISCHARGES ARE AUTHORIZED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
8. LIST OF STRUCTURAL BMPS:						<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
9. LIST OF NON-STRUCTURAL BMPS:						<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
10. BMPS PROPERLY OPERATED AND MAINTAINED:						<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
11. INSPECTIONS CONDUCTED AS REQUIRED:						<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	

**FLOW CALCULATION SHEET**

Date: **8/4/2016** Time: **1010**

Head in Inches: **6"** Feet: **0.5'**

Type & Size of Primary Flow Measurement Device:  
**18" Parshall Flume**

Name & Model of Secondary Flow Measurement Device: **Omega CT 8000**

Date of last Calibration of Secondary Flow Device: **14 January 2016**

Recorded Flow at Date & Time Listed Above: **1.44 MGD** (Facility Flow Meter)

Calculated Flow at Date & Time Listed Above: **1.335 MGD**

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

% Error =	Recorded Value	-	Calculated Value	X 100	
	Calculated Value				

% Error =	1.44	-	1.335	X 100	
	1.335				

% Error =	0.105	X 100	
	1.335		

% Error =	0.0786	X 100	
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% Error =	<b>7.865</b>	%	
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Comments: **Within +/-10% deviation allowance – in compliance**



**DMR Calculation Check**

Reporting Period: From 2016 04 01 To 2016 04 30  
 Year Month Day Year Month Day

Parameter Checked: TSS

	Loading Mass Mo. Avg. - lbs/day	Concentration Monthly Mo. Avg. - mg/l	7-day Avg. - mg/l
Reported Value:	<u>17.1</u>	<u>3</u>	<u>6.1</u>
Calculated Value:	<u>24.8</u>	<u>3</u>	<u>6.1</u>
Permit Value:	<u>20</u>	<u>1</u>	<u>19</u>

If calculated value does not equal reported value, explain:

The facility used a sample taken on March 27, 2016 in their calculations of the 7-day average, but did not use these data when calculating the loading mass, which resulted in their average of 17.1 lbs/day. Following the "Saturday Rule," the data from the March 27, 2016 sample should have been incorporated into all calculations including loading mass. Facility should make this correction on their DMR and verify that they are being consistent in their application of the "Saturday Rule."

Sample Date	Flow (MGD)	Mg/l	Calculated lbs/day
3-27-2016	1.090	6.10	55.45266
4-3-2016	0.960	1.70	13.61088
4-10-2016	0.795	1.30	8.61939
4-17-2016	0.761	3.90	24.752286
4-24-2016	0.776	3.30	21.357
		Samples/5=Mo. Ave - >16.3/5= <b>3.26mg/l</b>	Sample loads/d=Mo. Ave. - > 123.79/5= <b>24.75845lbs/day</b>
		Sample loads minus 3.27 sample/d=Mo. Ave. -> <b>68.3396/4= 17.084887lbs/day</b>	

**Water Division Photographic Evidence Sheet**

Location:	<b>Berryville POTW</b>				
Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>	Time:	<b>0943</b>
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>			Photo #:	<b>1</b>
Description:	<b>Influent</b>				



Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>	Time:	<b>0944</b>
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>			Photo #:	<b>2</b>
Description:	<b>Mechanically cleaned bar screen.</b>				





**Water Division Photographic Evidence Sheet**

Location:	<b>Berryville POTW</b>		
Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>	Time:	<b>0948</b>
Description:	<b>Selector Basin</b>	Photo #:	<b>3</b>



Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>	Time:	<b>0950</b>
Description:	<b>Oxidation Ditch</b>	Photo #:	<b>4</b>





**Water Division Photographic Evidence Sheet**

Location:	<b>Berryville POTW</b>		
Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>	Time:	<b>0952</b>
Description:	<b>Oxidation Ditch</b>	Photo #:	<b>5</b>



Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>	Time:	<b>0957</b>
Description:	<b>Clarifier</b>	Photo #:	<b>6</b>





**Water Division Photographic Evidence Sheet**

Location:	<b>Berryville POTW</b>				
Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>	Time:	<b>0957</b>
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>			Photo #:	<b>7</b>
Description:	<b>Clarifier – note material on surface resembles pollen.</b>				



Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>	Time:	<b>0958</b>
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>			Photo #:	<b>8</b>
Description:	<b>Parshall flume prior to disinfection.</b>				





**Water Division Photographic Evidence Sheet**

Location:	<b>Berryville POTW</b>		
Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>	Time:	<b>0959</b>
Description:	<b>Cascade aeration</b>	Photo #:	<b>9</b>



Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>	Time:	<b>0954</b>
Description:	<b>Facing upstream on Mill Branch Creek towards Outfall 001 (plant effluent).</b>		





**Water Division Photographic Evidence Sheet**

Location:	<b>Berryville POTW</b>			
Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>	
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>	Time:	<b>1005</b>	
Description:	<b>Facing downstream on Mill Branch Creek, Outfall 001.</b>		Photo #:	<b>11</b>



Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>	
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>	Time:	<b>1017</b>	
Description:	<b>Sludge in thickening tank.</b>		Photo #:	<b>12</b>





**Water Division Photographic Evidence Sheet**

Location:	<b>Berryville POTW</b>		
Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>	Time:	<b>1013</b>
		Photo #:	<b>13</b>
Description:	<b>Thickening tank – note black slimy residue where tank is leaking.</b>		



Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>	Time:	<b>1013</b>
		Photo #:	<b>14</b>
Description:	<b>Close-up of residue where thickening tank is leaking.</b>		





**Water Division Photographic Evidence Sheet**

Location:	<b>Berryville POTW</b>		
Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>	Time:	<b>1013</b>
		Photo #:	<b>15</b>
Description:	<b>Immediately below Photo 14 above, wastewater from thickener is leaking out onto ground.</b>		



Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>	Time:	<b>1014</b>
		Photo #:	<b>16</b>
Description:	<b>Thickener leak – note residue on tank and wetted area on ground immediately below residue; tank actively leaking during inspection.</b>		





Water Division Photographic Evidence Sheet

Location:	<b>Berryville POTW</b>				
Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>	Time:	<b>1021</b>
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>			Photo #:	<b>17</b>
Description:	<b>Sludge press</b>				



Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>	Time:	<b>1024</b>
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>			Photo #:	<b>18</b>
Description:	<b>Grit bin beneath bar screen – bin is stored inside building.</b>				





**Water Division Photographic Evidence Sheet**

Location:	<b>Berryville POTW</b>			
Photographer:	<b>Dannielle Gray</b>	Date:	<b>8/4/2016</b>	
Witness:	<b>Mike Maynard, Mayo Miller, &amp; Tim Tinsley</b>		Time:	<b>0955</b>
			Photo #:	<b>19</b>
Description:	<b>Stormwater outfall to Mill Branch Creek (receiving stream).</b>			





Figure 1. Google Earth image dated April 24, 2014 showing facility overview and major treatment components.

