	WATER DIVISION INSPECTION REPORT							
A R K A N S A S		AFIN: 21-00045 PERMIT #: AR003398		987		DATE: 10/11/	2016	
		COUNTY: 21 Desha		PDS 7	#: 093631	MED	IA: WN	
Department of Environmental Quality			GPS LAT: 33.890293 LONG: -91.465429 LOCATION: Entrance					
FACILITY INFORMATION			N INSPECTION INFORMATION					
NAME: City of Dumas WWTP LOCATION:			1 - Municipal INSPECTOR ID#: 26075 S - State					
204 Ford Loop Road			FACILITY EVALUATION RATING: INSPECTION TYPE: 3 - Satisfactory SSO/Collection System			ystem		
Dumas, AR				* *	RY TIME:	12:00	PERMIT EFFECTIVE D	DATE:
	RESPONSIBLE OFFIC	CIAI	_	10/11/2016 09:00 12:00 12/1/2011 PERMIT EXPIRATION DATE:			DATE:	
NAME: / TITLE							11/30/2016	
Johnny Brigham, / Mayor				FAYETTEVILLE SHALE RELATED: N				
City of Dumas			FAYETTEVILLE SHALE VIOLATIONS: N					
	NG ADDRESS: D. Box 157			INSPECTION PARTICIPANTS				
	STATE, ZIP:			NAME/TITLE/PHONE/FAX/EMAIL	/ETC.:			24
	mas, AR 71639 le & EXT: / FAX:			Patrick Fitzgerald, Water/Sewer Superintendent Class II Operator #008415				
)-382- 2121 /			oluce ii operate				
EMAII	: mas@centurytel.net							
	NTACTED DURING INSPECTION:	No	1					
			AREA EVA					
S	PERMIT (\$=\$	atisfa N	FLOW MEASUR	sfactory, N=Not Applicable/E	valuated N	STORMW	/ATFR	
S	RECORDS/REPORTS	N	LABORATORY			SITE REVIEW		
S	OPERATION & MAINTENANCE	N	EFFLUENT/REC	CEIVING WATER S SELF-MONITORING		NITORING PR	OGRAM	
N	SAMPLING	N	SLUDGE HAND	DLING/DISPOSAL N PRETREATMENT				
S	OTHER: SSO/Collection System		OURANA DV. G					
Λ r	outine inspection was conducted	l to	SUMMARY C		tho /	rkancac W	lator and Air E	Pollution
	ntrol Act, the Federal Clean Wate		-					Ollution
	pection, the system was in comp		_			ouridon 7 to		
GENERAL COMMENTS								
Note: Emergency contact information should be posted at each pump station.								
CI JUL 1								
<u>IN</u> S	INSPECTOR'S SIGNATURE: Steven S. Houdless			Steven L. Henderson		DATE: 10/13/2016		
INSPECTOR'S SIGNATURE: Steven J. Honderson DATE: 10/13/2016								
SUPERVISOR'S SIGNATURE: Kerri McCabe DATE: 10/31/2016							1/2016	

moposition respectively of 2 difficult restriction	. ,						
COLLECTION SYSTEM INSPECTION AND OVERALL RAT	☑S □M □U □NA □NE						
PROVIDE A BRIEF DESCRIPTION OF THE COLLECTION SYSTEM:							
Gravity Flow > 11 Pump Stations > WWTP	COMMEDCIAL CONNECTIONS						
POPULATION SERVED/NUMBER OF RESIDENTIAL AND COMMERCIAL CONNECTIONS: Population= 5,486 Residential= 2,012 Commercial= 186							
FEET OF SEWER SYSTEM: <u>Unknown</u>							
AGE OF SYSTEM: WWTP built in 1980; collection lines range from new to 80 years old.							
DOES THE SYSTEM EXPERIENCE PROBLEMS DURING DRY OR WET WEATHER (EXPLAIN): Some infiltration during heavy rain events.							
IS THERE A SYSTEM IN PLACE FOR REPORTING SSOS	☑Y □N □NA □NE						
Monthly DMR	10 115EQ (5E001115E).						
ARE ALL SSOs REPORTED REGARDLESS OF SIZE:	☑Y □N □NA □NE						
HAVE SSOs REACHED "WATERS OF THE STATE" (LIST [EACH):	□Y ☑N □NA □NE						
PUMP STATIONS		⊠S □M □U □NA □NE					
NUMBER OF PUMP STATIONS IN SYSTEM: 11	NUMBER WITH BACKUP POV	WER: <u>11</u>					
HOW OFTEN ARE PUMP STATIONS INSPECTED/MONITORED: <u>Daily</u>							
ARE MAINTENANCE RECORDS AND/OR OPERATOR LOGS KEPT: Yes							
ADEQUATE INVENTORY OF SPARE PARTS: Yes							
TYPE OF REMOTE ELECTRONIC MONITORING USED (I.E. SCADA OR AUTO DIALERS): None							
BRIEF SUMMARY OF EMERGENCY PROCEDURES: Generator available							
NUMBER OF PUMP STATIONS VISITED DURING INSPECTION (SEE ATTACHED CHECKLISTS FOR EACH): 2							
SATELLITE SYSTEMS		□S □M □U ☑NA □NE					
DOES THE COLLECTION SYSTEM RECEIVE FLOW FROM	M SATELLITE SYSTEMS:						
TYPE(S) OF WASTE WATER RECEIVED:_ □RESIDENTIAL □COMMERCIAL □INDUSTRIAL □OTHER:							
BRIEFLY DESCRIBE THE SATELLITE SYSTEM:							
ANY KNOWN PROBLEMS WITH SATELLITE SYSTEM:							
NAME, ADDRESS AND PHONE NUMBER OF PERSON RESPONSIBLE FOR SATELLITE SYSTEM:							

PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)					
GENERAL INFORMATION AND OVERALL EVALUATION	ØS □M □U □NA				
NAME AND/OR LOCATION OF PUMP STATION: <u>Jr. High Pump Station; Pickens Street</u>					
TYPE(S) OF WASTE WATER RECEIVED: ZRESIDENTIAL	AL OTHER:				
NUMBER OF PUMPS: 2					
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE:	☑S □M □U □NA □NE				
EVIDENCE OF RECENT OVERFLOWS OR HIGH LEVELS:	□Y ☑N □NA □NE				
GENERAL OPERATION AND MAINTENANCE		⊠S □M □U □NA			
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAG EQUIPMENT:	⊠S □M □U □NA □NE				
GATES/DOORS/HATCHES/LIDS/ETC. LOCKED TO PREVE ACCESS AND/OR TAMPERING:	⊠S □M □U □NA □NE				
WET WELLS, SUMPS AND PITS ADEQUATELY COVERED PROTECTED:	⊠S □M □U □NA □NE				
ELECTRICAL CONTROLS COVERS CONDUIT AND EQUIP INSTALLED AND MAINTAINED:	⊠S □M □U □NA □NE				
GUARDS AND SHIELDS IN PLACE AROUND MOVING EQUENCES HAFTS, ETC.):	⊠S □M □U □NA □NE				
ADEQUATE VENTILATION TO PREVENT EXCESSIVE COL GASES AND FUMES:	⊠S □M □U □NA □NE				
ADEQUATE LIGHTING FOR ROUTINE INSPECTION/MAIN	☑S □M □U □NA □NE				
SEALS, VALVES AND PACKING ADEQUATELY MAINTAIN	☑S □M □U □NA □NE				
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN V	☑S □M □U □NA □NE				
BACKUP POWER AND ALARMS		⊠S □M □U □NA			
PROVISIONS FOR GENERATOR AND/OR EMERGENCY T	RANSFER PUMP:	☑S □M □U □NA □NE			
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT I	□S ☑M □U □NA □NE				
SCADA SYSTEM (LIST PARAMETERS MONITORED):	□Y □N ☑NA □NE				

PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)							
GENERAL INFORMATION AND OVERALL EVALUATION	ØS □M □U □NA						
NAME AND/OR LOCATION OF PUMP STATION: <u>Hwy 165 Pump Station</u>							
TYPE(S) OF WASTE WATER RECEIVED: MIRESIDENTIAL MICOMMERCIAL MINDUSTRIAL MOTHER:							
NUMBER OF PUMPS: 2							
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE:	☑S □M □U □NA □NE						
EVIDENCE OF RECENT OVERFLOWS OR HIGH LEVELS:	□Y ☑N □NA □NE						
GENERAL OPERATION AND MAINTENANCE		⊠S □M □U □NA					
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAG EQUIPMENT:		⊠S □M □U □NA □NE					
GATES/DOORS/HATCHES/LIDS/ETC. LOCKED TO PREVE ACCESS AND/OR TAMPERING:	⊠S □M □U □NA □NE						
WET WELLS, SUMPS AND PITS ADEQUATELY COVERED PROTECTED:	⊠S □M □U □NA □NE						
ELECTRICAL CONTROLS COVERS CONDUIT AND EQUIP INSTALLED AND MAINTAINED:	⊠S □M □U □NA □NE						
GUARDS AND SHIELDS IN PLACE AROUND MOVING EQUENCES HAFTS, ETC.):	⊠S □M □U □NA □NE						
ADEQUATE VENTILATION TO PREVENT EXCESSIVE COL GASES AND FUMES:	⊠S □M □U □NA □NE						
ADEQUATE LIGHTING FOR ROUTINE INSPECTION/MAIN	☑S □M □U □NA □NE						
SEALS, VALVES AND PACKING ADEQUATELY MAINTAIN	☑S □M □U □NA □NE						
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN V	☑S □M □U □NA □NE						
BACKUP POWER AND ALARMS		⊠S □M □U □NA					
PROVISIONS FOR GENERATOR AND/OR EMERGENCY T	RANSFER PUMP:	☑S □M □U □NA □NE					
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT I	□S ☑M □U □NA □NE						
SCADA SYSTEM (LIST PARAMETERS MONITORED):	□Y □N ☑NA □NE						

