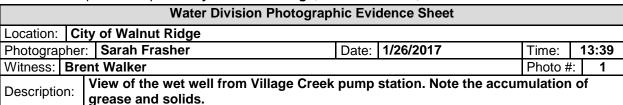
	NDFO	WATER DIVISION INSPECTION REPORT						
A R K A N S A S		AFIN: 38-00040 P	ERMIT #: AR0046566				DATE: 1/26/2017	
		COUNTY: 38 Lawre			±: 0955			MEDIA: WN
Dep	partment of Environmental Quality	GPS LAT: 36.06762						
NAME	FACILITY INFORMAT	ION	INSPECTION INFORMATION FACILITY TYPE: INSPECTOR ID#:				V	
City of Walnut Ridge			1 - Municipal	112347 S - State				
	22 West Oak Street		FACILITY EVALUATION RATING			SSO/Collection System		
	lnut Ridge		1 /	TRY TIME: 9:30	EXIT TI 14:3			FFECTIVE DATE:
NAME	RESPONSIBLE OFFIC	CIAL	.,,_0,_0					(PIRATION DATE:
Jonathan Kopp / General Manager			6/30/2021					
Cit	y of Walnut Ridge		FAYETTEVILLE SHALE RELATED: N FAYETTEVILLE SHALE VIOLATIONS: N					
	NG ADDRESS: S Southwest Fourth Street		INSPECTION PARTICIPANTS					
CITY,	STATE, ZIP:		NAME/TITLE/PHONE/FAX/EMAIL Jeremy Lewis/W		ator O	norate	or.	
	y ST 722222222 E & EXT: / FAX:		Jerenny Lewis/W	vasiew	alei C	регац	Ji	
	lnut Ridge AR / 72476							
EMAIL	<u>.</u>							
СО	NTACTED DURING INSPECTION:	: No						
	2-2)	AREA EVA atisfactory, M=Marginal, U=Unsati		Evaluated)				
S	PERMIT	N FLOW MEASUR		N		RMWA	TER	
S	RECORDS/REPORTS	N LABORATORY				VIEW		
M	OPERATION & MAINTENANCE	N EFFLUENT/REC	CEIVING WATER	N	SELF	-MONI	TORIN	IG PROGRAM
	SAMPLING	N SLUDGE HAND	LING/DISPOSAL	N	PRET	REAT	MENT	
N	OTHER:	CLIBABA A D.V. C	E FINDINGS					
		SUMMARY C	F FINDINGS					
 The following violations for Improper Operation and Maintenance in violation with Part III, Section B of the permit were noted at the time of the inspection: 1. The Village Creek Pump Station was observed with a high accumulation of grease and solids (Photo 1) 2. The Walmart pump station was observed with a pump not operational and no available access to the wet well (Photo 2) 								
		GENERAL (COMMENTS					
The City is planning a smoke test soon to test the collection system for I & I problems.								
Brent Walker, District 3 Water Inspector, also participated in this inspection.								
A Compliance Evaluation Inspection was performed in conjunction with this inspection.								
INS	INSPECTOR'S SIGNATURE: Sarah Frasher DATE: 2/24/2017					: 2/24/2017		
10	Ditte. Manual Control of the Control					,,_		
CI I	DEDVICOD'S SIGNATURE:	on Kalabang	an Dalambarah					. 2/27/2047

COLLECTION SYSTEM INSPECTION AND OVERALL RAT	⊠S □M □U □NA □NE				
PROVIDE A BRIEF DESCRIPTION OF THE COLLECTION SYSTEM: <u>Gravity flow with lift stations</u>					
POPULATION SERVED/NUMBER OF RESIDENTIAL AND (POPULATION SERVED/NUMBER OF RESIDENTIAL AND COMMERCIAL CONNECTIONS: ~2,200 connections				
FEET OF SEWER SYSTEM: ~ 6 miles	FEET OF SEWER SYSTEM: ~ 6 miles				
AGE OF SYSTEM: 1930s and newer					
DOES THE SYSTEM EXPERIENCE PROBLEMS DURING DRY OR WET WEATHER (EXPLAIN): 1 & 1					
IS THERE A SYSTEM IN PLACE FOR REPORTING SSOS Reported to ADEQ	ØY □N □NA □NE				
ARE ALL SSOs REPORTED REGARDLESS OF SIZE:	☑Y □N □NA □NE				
HAVE SSOs REACHED "WATERS OF THE STATE" (LIST DEACH):	□Y □N ☑NA □NE				
PUMP STATIONS		⊠S □M □U □NA □NE			
NUMBER OF PUMP STATIONS IN SYSTEM: 22	NUMBER WITH BACKUP PC	WER: <u>3</u>			
HOW OFTEN ARE PUMP STATIONS INSPECTED/MONITORED: 7/week for Main pump stations; 3/week for smaller pump stations					
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): N/A					
BRIEF SUMMARY OF EMERGENCY PROCEDURES: 3 portable generators available					
NUMBER OF PUMP STATIONS VISITED DURING INSPECTION (SEE ATTACHED CHECKLISTS FOR EACH): 3					
SATELLITE SYSTEMS		□S □M □U ØNA □NE			
DOES THE COLLECTION SYSTEM RECEIVE FLOW FROM 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	□S □M □U □NA			
NAME AND/OR LOCATION OF PUMP STATION: Oak Street				
TYPE(S) OF WASTE WATER RECEIVED: MIRESIDENTIAL	AL OTHER:			
NUMBER OF PUMPS: 2	NUMBER OPERATIONAL: 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		ØS □M □U □NA		
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAGE OF UNRELATED 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 EQUIPMENT PROPERLY INSTALLED AND MAINTAINED:		⊠S □M □U □NA □NE		
GUARDS AND SHIELDS IN PLACE AROUND MOVING EQUIPMENT (BELTS, PULLEYS, DRIVESHAFTS, ETC.):		⊠S □M □U □NA □NE		
ADEQUATE VENTILATION TO PREVENT EXCESSIVE CONDENSATION AND/OR GASES AND FUMES:		⊠S □M □U □NA □NE		
ADEQUATE LIGHTING FOR ROUTINE INSPECTION/MAIN	TENANCE:	☑S □M □U □NA □NE		
SEALS, VALVES AND PACKING ADEQUATELY MAINTAIN	ED TO PREVENT LEAKS:	☑S □M □U □NA □NE		
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN WET WELLS:		☑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	INFORMATION POSTED:	☑S □M □U □NA □NE		
SCADA SYSTEM (LIST PARAMETERS MONITORED):		□Y □N ØNA □NE		

PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)			
GENERAL INFORMATION AND OVERALL EVALUATION	□S □M □U □NA		
NAME AND/OR LOCATION OF PUMP STATION: <u>Village Creek</u>			
TYPE(S) OF WASTE WATER RECEIVED: Zersidential	AL DOTHER:		
NUMBER OF PUMPS: 2	NUMBER OPERATIONAL: 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 ØM □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 EQUENCESHAFTS, 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 WET WELLS:		□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	INFORMATION POSTED:	☑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	□S ☑M □U □NA			
NAME AND/OR LOCATION OF PUMP STATION: <u>Wal-Mart</u>				
TYPE(S) OF WASTE WATER RECEIVED: □RESIDENTIAL ☑COMMERCIAL □INDUSTRIAL □OTHER:				
NUMBER OF PUMPS: 2	NUMBER OPERATIONAL: 1			
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE:		□S □M ØU □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:	ØS □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 EQUIPINSTALLED AND MAINTAINED:	⊠S □M □U □NA □NE			
GUARDS AND SHIELDS IN PLACE AROUND MOVING EQUIPMENT (BELTS, PULLEYS, DRIVESHAFTS, ETC.):		⊠S □M □U □NA □NE		
ADEQUATE VENTILATION TO PREVENT EXCESSIVE COI 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	ED TO PREVENT LEAKS:	☑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 INFORMATION POSTED:		☑S □M □U □NA □NE		
SCADA SYSTEM (LIST PARAMETERS MONITORED):	□Y □N ☑NA □NE			





Photographer:Sarah FrasherDate:1/26/2017Time:13:51Witness:Brent WalkerPhoto #:2

Description: View of the Wal-Mart pump station. Note the wet well was inaccessible.

