

ADEQ

ARKANSAS
Department of Environmental Quality

June 20, 2018

Honorable Robert Tharp, Mayor
City of Decatur
P.O. Box 247
Decatur, AR 72722

RE: City of Decatur WWTP Inspection
AFIN: 04-00052 Permit No.: AR0022292

Dear Mayor Tharp:

On May 14 – 16, 2018, I performed a Compliance Sampling 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 the inspection report is enclosed for your records.

Please refer to the “Summary of Findings” section of the attached inspection report and provide a written response for each violation that was noted. This response should be mailed to the attention of the Office of Water Quality Compliance Branch at the address at the bottom of this letter 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. This corrective action should be completed as soon as possible, and the written response with all necessary documentation (i.e. photos) is due by **July 6, 2018**.

If I can be of any assistance, please contact me at grimesg@adeq.state.ar.us or 479-267-0811 ext. 16.

Sincerely,



Garrett Grimes
District 1 Field Inspector
Office of Water Quality



A R K A N S A S
Department of Environmental Quality

OFFICE OF WATER QUALITY INSPECTION REPORT

AFIN: 04-00052	PERMIT #: AR0022292	DATE: 5/14/2018
COUNTY: 04 Benton	PDS #: 103365	MEDIA: WN
GPS LAT: 36.34417 LONG: -94.47250 LOCATION: Outfall		

FACILITY INFORMATION	INSPECTION INFORMATION																
NAME: City of Decatur WWTP LOCATION: 985 Austin Ave. CITY: Decatur	FACILITY TYPE: 1 - Municipal INSPECTOR ID#: 104111 S - State FACILITY EVALUATION RATING: 2 - Marginal INSPECTION TYPE: Compliance Sampling																
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>DATE(S):</td> <td>ENTRY TIME:</td> <td>EXIT TIME:</td> <td>PERMIT EFFECTIVE DATE:</td> </tr> <tr> <td>5/14/2018</td> <td>10:30</td> <td>15:30</td> <td>10/1/2014</td> </tr> <tr> <td>5/15/2018</td> <td>14:30</td> <td>15:04</td> <td>PERMIT EXPIRATION DATE:</td> </tr> <tr> <td>5/16/2018</td> <td>09:00</td> <td>09:45</td> <td>9/30/2019</td> </tr> </table>	DATE(S):	ENTRY TIME:	EXIT TIME:	PERMIT EFFECTIVE DATE:	5/14/2018	10:30	15:30	10/1/2014	5/15/2018	14:30	15:04	PERMIT EXPIRATION DATE:	5/16/2018	09:00	09:45	9/30/2019
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5/15/2018	14:30	15:04	PERMIT EXPIRATION DATE:														
5/16/2018	09:00	09:45	9/30/2019														
RESPONSIBLE OFFICIAL																	
NAME / TITLE: Robert Tharp / Mayor COMPANY: City of Decatur MAILING ADDRESS: P.O. Box 247 CITY, STATE, ZIP: Decatur AR 72722 PHONE & EXT. / FAX: 479-212-0726 / EMAIL:	FAYETTEVILLE SHALE RELATED: N FAYETTEVILLE SHALE VIOLATIONS: N																
	INSPECTION PARTICIPANTS																
CONTACTED DURING INSPECTION: ***	NAME/TITLE/PHONE/FAX/EMAIL/ETC.: James Boston, Public Works Director, City of Decatur; Mike Liley, Lead Operator, City of Decatur; Ankush Nautiyal, District 1 Inspector, ADEQ; Garrett Grimes, District 1 Inspector, ADEQ																

AREA EVALUATIONS					
(S=Satisfactory, M=Marginal, U=Unsatisfactory, N=Not Applicable/Evaluated)					
U	PERMIT	S	FLOW MEASUREMENT	**	STORMWATER
M	RECORDS/REPORTS	S	LABORATORY	**	FACILITY SITE REVIEW
M	OPERATION & MAINTENANCE	S	EFFLUENT/RECEIVING WATER	**	SELF-MONITORING PROGRAM
M	SAMPLING	M	SLUDGE HANDLING/DISPOSAL	**	PRETREATMENT
U	OTHER: Sampling Inspection				

SUMMARY OF FINDINGS

The following violations were noted during the inspection:

1. **Effluent Limits and Monitoring Requirements; Part I, Section A of the permit.**
 - a. Multiple effluent limit exceedances have been noted on the Discharge Monitoring Reports (DMR) for the City of Decatur's Wastewater Treatment Plant (WWTP) in 2018. James Boston, Public Works Director, City of Decatur, stated that the WWTP is currently undergoing upgrades to remedy the noncompliance issues.
 - b. The effluent sample result for Ammonia Nitrogen (NH3-N) exceeded permitted discharge mass and concentration limitations (Table 1).

2. **Operation and Maintenance; Part II, Section B.1.A. of the permit.**
 - a. At the headworks of the facility grit is removed and deposited into a plastic bag which is transferred to a nearby waste bin (Photos #1 - #2). Solids and liquid were observed around the area and the bin was corroded and missing a plug (Photos #2 - #3).
 - b. The City of Decatur's WWTP utilizes a pond for sludge storage when overloaded and for winter use. An equalization pond located near the head of the facility is used for wastewater storage prior to entering the facility. Both ponds had excess vegetation growth at the time of the inspection (Photos #4 - #7, Attachment 1).

3. **Additional Monitoring by the Permittee; Part III, Section C.6. of the permit.**
 - a. The City of Decatur is required to sample the total Phosphorous of its effluent two times per week. However, total Phosphorous was sampled three times for two weeks in March 2018

Inspection Report: **City of Decatur WWTP**, AFIN: **04-00052**, Permit #: **AR0022292**
(Attachment 2). This was not documented on the DMR.

- b. As mentioned above, total Phosphorous was sampled two additional times in March 2018. A sample from March 15, 2018, was not reported on the DMR (Attachment 2, Page 8.)
4. Removed Substances; Part III, Section B.6. of the permit.
- a. As mentioned above solids and liquids were observed on the ground near the headworks of the facility (Photos #1 - #3). In addition, dewatered sludge from a rented sludge press was observed falling onto the parking area (Photos #8 - #9, Attachment 1).
 - b. Wastewater treatment solids from equipment maintenance were observed on the ground near the SBR (Photo #10).



GENERAL COMMENTS

- Large amounts of solids from Decatur's WWTP were observed deposited in Columbia Hollow Creek during a February 2, 2018 Reconnaissance Inspection. At the time of the inspection these solids were still observed around Outfall 001 (Photo #11). However, solids were not observed in the effluent leaving the plant. Mr. Boston stated that the solids observed previously were due to sludge overflow from the Sequencing Batch Reactor (SBR) from the WWTP's inability to remove and dewater sludge. As mentioned above, a sludge press is now used to increase the sludge dewatering capacity of the WWTP. Mr. Boston stated that WWTP is currently being upgraded and will include a Membrane Bioreactor (MBR). According to Mr. Boston the MBR should prevent future solid-laden discharges to Columbia Hollow Creek.

- During the inspection, Mr. Boston stated that the facility does not currently have any alarm system in place, but does have staff that monitors the plant at night. Mr. Boston did note that a SCADA system is currently planned to be installed as part of the WWTP upgrades. However, the City of Decatur should verify that the plant is adequately staffed and a system is in place to monitor for power outages and emergencies.

- Mr. Boston indicated that procedures for emergency treatment controls are established at the facility, but no records were provided. In addition, spare parts and equipment are not currently inventoried at the facility. These procedures and inventories should be documented and maintained by the City of Decatur.

- Lab results from the Compliance Sampling Inspection are included in Attachment 3.

INSPECTOR'S SIGNATURE:  Garrett Grimes	DATE: 06/15/2018
SUPERVISOR'S SIGNATURE:  Jason Bolenbaugh	DATE: 6/19/2018

SECTION A: PERMIT VERIFICATION	
PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS	<input type="checkbox"/> S <input checked="" 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: Multiple permit limit exceedances in 2018. NH3-N exceedance in CSI	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
SECTION B: RECORDKEEPING AND REPORTING EVALUATION	
RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT	<input type="checkbox"/> S <input checked="" 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: TP sample taken on March 15, 2018 not reported	<input type="checkbox"/> Y <input checked="" 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 type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" 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
SECTION C: OPERATIONS AND MAINTENANCE	
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:	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED: 1 megawatt generator	<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: no alarms, some night staff	<input type="checkbox"/> S <input checked="" 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: Mr. Boston and Mr. Liley are Class 4 operators	<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 type="checkbox"/> S <input type="checkbox"/> M <input checked="" 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: Maintenance program	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
10. PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED: No written plans	<input type="checkbox"/> Y <input checked="" 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: Manhole near the truck stop	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
12. IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
13. HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS: Pipe fixed	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
14. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
15. IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT: In DMRs	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

SECTION D: SAMPLING	
PERMITTEE SAMPLING MEETS PERMIT REQUIREMENTS	<input type="checkbox"/> S <input checked="" 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:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
SECTION E: FLOW MEASUREMENT	
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: 9" TYPE OF DEVICE: Parshall flume	<input 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:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
5. RECORDS MAINTAINED OF CALIBRATION PROCEDURES:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" 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
SECTION F: LABORATORY	
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: Environmental Services Co., DMR/ Pace Analytical, WET Test	
b. LAB ADDRESS: 1107 Century Street, Springdale, AR/ 9608 Loriet Blvd, Lanex, KS	
c. PARAMETERS PERFORMED:	
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 checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
d. RETESTS AND/OR TRE PERFORMED AS REQUIRED:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

SECTION G: EFFLUENT/RECEIVING WATERS OBSERVATIONS							
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: No solids in water during inspection, but large amounts deposited in the area.							
OUTFALL #:	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOATING SOLIDS	COLOR	OTHER
001	None	None	Some	Trace	None observed	Clear	--
SECTION H: SLUDGE DISPOSAL							
SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS						<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE	
DETAILS: Currently renting a sludge press as of April 2018. However, previous issues have resulted in solid deposits in the receiving stream.							
1. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY: Currently renting a sludge press						<input type="checkbox"/> S <input checked="" 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: Manifests maintained						<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
3. FOR LAND APPLIED SLUDGE, TYPE OF LAND APPLIED TO: (E.G., FOREST, AGRICULTURAL, PUBLIC CONTACT SITE): Applied out-of-state							
SECTION I: SAMPLING INSPECTION PROCEDURES							
SAMPLE RESULTS WITHIN PERMIT REQUIREMENTS						<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE	
DETAILS: Exceedance for Ammonia Nitrogen.							
1. SAMPLES OBTAINED THIS INSPECTION:						<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
2. TYPE OF SAMPLE: <input checked="" type="checkbox"/> GRAB:___ <input checked="" type="checkbox"/> COMPOSITE:___ METHOD:___ FREQUENCY:___							
3. SAMPLES PRESERVED:						<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input 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 checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
6. SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE:						<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
7. SAMPLE SPLIT WITH PERMITTEE:						<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED:						<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT:						<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
SECTION J: STORM WATER POLLUTION PREVENTION PLAN							
STORM WATER MANAGEMENT MEETS 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. SWPPP UPDATED AS NEEDED:___ DATE OF LAST UPDATE:___						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
2. SITE MAP INCLUDING ALL DISCHARGES AND SURFACE WATERS:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
3. POLLUTION PREVENTION TEAM IDENTIFIED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
4. POLLUTION PREVENTION TEAM PROPERLY TRAINED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
5. LIST OF POTENTIAL POLLUTANT SOURCES:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
6. LIST OF POTENTIAL SOURCES AND PAST SPILLS AND LEAKS:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" 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 type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
9. LIST OF NON-STRUCTURAL BMPS:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
10. BMPS PROPERLY OPERATED AND MAINTAINED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
11. INSPECTIONS CONDUCTED AS REQUIRED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	

FLOW CALCULATION SHEET

Date: **05/14/2018** Time: **11:55**

Head in Inches: Feet: **1.31**

Type & Size of Primary Flow Measurement Device: **9" Parshall Flume**

Name & Model of Secondary Flow Measurement Device: **ISCO Signature Series**

Date of last Calibration of Secondary Flow Device: **Monthly checks**

Recorded Flow at Date & Time Listed Above: **2.999** (Facility Flow Meter)

Calculated Flow at Date & Time Listed Above: **2.999**

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

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

% Error =	2.999	-	2.999	X 100	
	2.999				

% Error =	0	X 100	
	2.999		

% Error =	0	X 100	
-----------	---	-------	--

% Error =	0	%	
-----------	----------	---	--

Comments: **Facility meter calibration is checked monthly. Error is consistently < +/-10%.**

DMR Calculation Check

Reporting Period: From 18 03 01 To 18 03 31
 Year Month Day Year Month Day

Parameter Checked: Total Phosphorous

	Loading Mass Mo. Avg. - lbs/day	Concentration Monthly	
		Mo. Avg. - mg/l	7-day Avg. - mg/l
Reported Value:	<u>9.15</u>	<u>0.38</u>	<u>1.0</u>
Calculated Value:	<u>8.52</u>	<u>0.36</u>	<u>1.0</u>
Permit Value:	<u>18.3</u>	<u>1.0</u>	<u>1.0</u>

If calculated value does not equal reported value, explain:

Total P sample from March 15 not reported on DMR.

DMR Calculation Check

Reporting Period: From 18 03 01 To 18 03 31
 Year Month Day Year Month Day

Parameter Checked: Fecal Coliform

	Loading Mass Mo. Avg. - lbs/day	Concentration Monthly Mo. Avg. - mg/l	7-day Avg. - mg/l
Reported Value:	<u>N/A</u>	<u>637.4</u>	<u>20418</u>
Calculated Value:	<u>N/A</u>	<u>637</u>	<u>20418</u>
Permit Value:	<u>N/A</u>	<u>200</u>	<u>400</u>

If calculated value does not equal reported value, explain:

Rounding.

Table 1. Results of CSI with permit exceedances in red. Permit limits are listed on the right.

Effluent Characteristics	May 15-16, 2018 Sample Results		Discharge Limitations		
	Mass (lb/day, unless otherwise specified)	Concentration (mg/L, unless otherwise specified)	Mass (lb/day, unless otherwise specified)	Concentration (mg/L, unless otherwise specified)	
	Daily Max.	Daily Max.	Monthly Avg.	Monthly Avg.	7-day Avg.
Flow	NA	2.416	NA	Report MGD	Report MGD
CBOD5	136.01	6.75	183.5	10	15
TSS	136.01	6.75	275.2	15	22.5
NH3-N	290.2	14.4	29.4	1.6	3.9
DO	NA	8.09	NA	6.0 (Inst. Min.)	
FCB	NA	(colonies/100 mL)	NA	Colonies/100 mL	Colonies/100 mL
		68		200	400
TP	<10.1	<0.5	18.3	1.0	1.0
TN	23.17	1.15	183.5	10.0 (Inst. Max)	
pH	NA	7.43	NA	Min. 6.0 s.u.	Max. 9.0 s.u.

Office of Water Quality Photographic Evidence Sheet

Location:	City of Decatur WWTP		
Photographer:	Garrett Grimes, District 1 Inspector	Date:	5/14/2018
Witness:	Ankush Nautiyal, District 1 Inspector, ADEQ	Time:	10:53
Description:	Bag for grit screenings at the head of the facility.		



Photographer:	Garrett Grimes, District 1 Inspector	Date:	5/14/2018
Witness:	Ankush Nautiyal, District 1 Inspector, ADEQ	Time:	10:52
Description:	Trash bin with solids and liquids nearby.		



Office of Water Quality Photographic Evidence Sheet

Location:	City of Decatur WWTP			
Photographer:	Garrett Grimes, District 1 Inspector	Date:	5/14/2018	
Witness:	Ankush Nautiyal, District 1 Inspector, ADEQ	Time:	10:53	
Description:	Plug missing from the trash bin.		Photo #:	3



Photographer:	Garrett Grimes, District 1 Inspector	Date:	5/14/2018	
Witness:	Ankush Nautiyal, District 1 Inspector, ADEQ	Time:	12:16	
Description:	Sludge pond with vegetation growing.		Photo #:	4



Office of Water Quality Photographic Evidence Sheet

Location:	City of Decatur WWTP		
Photographer:	Garrett Grimes, District 1 Inspector	Date:	5/14/2018
Witness:	Ankush Nautiyal, District 1 Inspector, ADEQ	Time:	12:16
Description:	Continued from #4.		



Photographer:	Garrett Grimes, District 1 Inspector	Date:	5/14/2018
Witness:	Ankush Nautiyal, District 1 Inspector, ADEQ	Time:	12:30
Description:	Equalization pond. Vegetation is growing in and around the pond.		



Office of Water Quality Photographic Evidence Sheet

Location:	City of Decatur WWTP			
Photographer:	Garrett Grimes, District 1 Inspector	Date:	5/14/2018	
Witness:	Ankush Nautiyal, District 1 Inspector, ADEQ	Time:	12:31	
Description:	Continued from #6.		Photo #:	7



Photographer:	Garrett Grimes, District 1 Inspector	Date:	5/14/2018	
Witness:	Ankush Nautiyal, District 1 Inspector, ADEQ	Time:	12:10	
Description:	Sludge from the drying press on the parking area.		Photo #:	8



Office of Water Quality Photographic Evidence Sheet

Location:	City of Decatur WWTP			
Photographer:	Garrett Grimes, District 1 Inspector	Date:	5/14/2018	
Witness:	Ankush Nautiyal, District 1 Inspector, ADEQ	Time:	12:09	
Description:	Continued from Photo #8.		Photo #:	9



Photographer:	Garrett Grimes, District 1 Inspector	Date:	5/14/2018	
Witness:	Ankush Nautiyal, District 1 Inspector, ADEQ	Time:	11:02	
Description:	Examples of solids on the ground from maintenance activities near the SBR.		Photo #:	10



Office of Water Quality Photographic Evidence Sheet

Location:	City of Decatur WWTP				
Photographer:	Garrett Grimes, District 1 Inspector	Date:	5/14/2018	Time:	12:00
Witness:	Ankush Nautiyal, District 1 Inspector, ADEQ			Photo #:	11
Description:	Outfall 001. Effluent appears clear, but solids are still observable in the receiving stream.				



Decatur WWTP Map

1. Headworks
2. SBR
3. Active Flow
4. UV Treatment
5. Cascade Aerator
6. Outfall 001
7. Sludge Holding Tank
8. Rotary Fan Press Bldg. (Unused)
9. Sludge Drying Beds
10. Sludge Holding Ponds
11. Equalization Pond
12. Columbia Hollow Creek



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Control Number: 1803020046
 Customer Name : DECATUR WASTEWATER-EFFLUENT
 Customer/Permit No. : 1654 / AR0022292 001
 Report Date : 03/15/18

Composite Date: 03/06/18 -03/06/18
 Sample Time : 1000-1500/1345
 Sample Type : COMP/GRAB
 Sample From : EFFLUENT


Collected By: AF
 Delivery By : AEU
 Work Order :
 Purchase Order :

Laboratory Analysis

Date	Time	By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Quality Assurance Accuracy % Recovery
03/08	0900	TSB	Ammonia Nitrogen	28.1 mg/L	(b)		SM 1997 4500-NH3 F	0.00	103.4 *
03/13	1300	AEU	Phosphorus, Total	0.18 mg/L			EPA 365.3	0.00	108.0 *
03/09	1610	JCB	Solids, Total Suspended	5.7 mg/L			SM 1997 2540 D	27.53	N/A *
03/06	1700	JCB	Coliform, Fecal	4500 /100ml	(b)		SM 9222 D 1997	5.61	N/A *
03/07	1400	TSB	BOD, Carbonaceous	< 2.0 mg/L			SM 2001 5210 B	2.25	90.0 *
03/14	1000	AEU	Nitrate + Nitrite	0.8 mg/L			01/2013 HACH 10206	0.00	94.0

* QA data shown is from a different sample or standard on the same date.
 (b) Exceeds Permit Limits for Maximum Concentration

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

Signature  Environmental Services Co., Inc.

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Control Number: 1803020061 Customer Name : DECATUR WASTEWATER-EFFLUENT Customer/Permit No. : 1654 / AR0022292 001 Report Date : 03/15/18	Composite Date: 03/07/18 -03/07/18 Sample Time : 1000-1500/1320 Sample Type : COMP/GRAB Sample From : EFFLUENT
---	---

Collected By: AF
 Delivery By : AEU
 Work Order :
 Purchase Order :

Laboratory Analysis

Date	Time	BY	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Quality Assurance Accuracy % Recovery
03/08	0900	TSB	Ammonia Nitrogen	33.6 mg/L	(b)		SM 1997 4500-NH3	0.00	103.4 *
03/13	1300	AEU	Phosphorus, Total	0.16 mg/L			EPA 365.3	0.00	108.0 *
03/13	1608	AEU	Solids, Total Suspended	3.9 mg/L			SM 1997 2540 D	1.94	N/A *
03/07	1730	CLS	Coliform, Fecal	490 /100mL	(b)		SM 9222 D 1997	0.00	N/A *
03/07	1400	TSB	BOD, Carbonaceous	2.0 mg/L			SM 2001 5210 B	21.05	90.0 *
03/14	1000	AEU	Nitrate + Nitrite	0.6 mg/L			01/2013 HACH 10206	0.00	94.0 *

* QA data shown is from a different sample or standard on the same date.
 (b) Exceeds Permit Limits for Maximum Concentration

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

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Control Number: 1803020074
 Customer Name: DECATUR WASTEWATER-EFFLUENT
 Customer/Permit No.: 1654 / AR0022292 001
 Report Date: 03/16/18
 Composite Date: 03/08/18 -03/08/18
 Sample Time: 1000-1500/1410
 Sample Type: COMP/GRAB
 Sample From: EFFLUENT
 Collected By: AF
 Delivery By: JCB
 Work Order:
 Purchase Order:

Laboratory Analysis

Date	Time	By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Quality Assurance Accuracy % Recovery
03/09	1200	TSB	Ammonia Nitrogen	36.1 mg/L	(b)		SM 1997 4500-NH3 F	0.00	96.5 †
03/13	1300	AEU	Phosphorus, Total	0.24 mg/L			EPA 365.3	0.00	108.0 †
03/15	1108	AEU	Solids, Total Suspended	7.5 mg/L			SM 1997 2540 D	14.43	N/A †
03/08	1618	TSB	Coliform, Fecal	3600 /100ml	(b)		SM 9222 D 1997	0.00	N/A †
03/09	1400	TSB	BOD, Carbonaceous	< 2.0 mg/L			SM 2001 5210 B	14.83	113.0 †
03/14	1000	AEU	Nitrate + Nitrite	0.6 mg/L			01/2013 HACH 10206	0.00	94.0 †

* QA data shown is from a different sample or standard on the same date.
 (b) Exceeds Permit Limits for Maximum Concentration

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

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Control Number: 1803020130
 Customer Name : DECATUR WASTEWATER-EFFLUENT
 Customer/Permit No. : 1654 / AR0022292 001
 Report Date : 03/19/18
 Composite Date: 03/13/18 -03/13/18
 Sample Time : 1000-1500/1335
 Sample Type : COMP/GRAB
 Sample From : EFFLUENT
 Collected By: AF
 Delivery By : JCB
 Work Order :
 Purchase Order :

Laboratory Analysis

Analysis		Laboratory Analysis		Quality Assurance				
Date	Time By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Accuracy % Recover
03/14	0900 AEU	Ammonia Nitrogen	35.1 mg/L	(b)		SM 1997 4500-NH3 F	0.00	102.0
03/16	1200 AEU	Phosphorus, Total	0.21 mg/L			EPA 365.3	1.47	107.0
03/16	1102 AEU	Solids, Total Suspended	5.6 mg/L			SM 1997 2540 D	3.03	N/A
03/13	1718 AEU	Coliform, Fecal	6100 /100ml	(b)		SM 9222 D 1997	29.51	N/A
03/14	1400 TSB	BOD, Carbonaceous	2.3 mg/L			SM 2001 5210 B	5.14	107.0
03/14	1000 AEU	Nitrate + Nitrite	0.9 mg/L			01/2013 HACH 10206	0.00	94.0

* QA data shown is from a different sample or standard on the same date.
 (b) Exceeds Permit Limits for Maximum Concentration

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Control Number: 1803020138 Customer Name: DECATUR WASTEWATER-EFFLUENT Customer/Permit No.: 1654 / AR0022292 001 Report Date: 03/22/18	Composite Date: 03/14/18 -03/14/18 Sample Time: 1000-1500/1330 Sample Type: COMP/GRAB Sample From: EFFLUENT
--	--

Laboratory Analysis

Analysis Date	Time By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Quality Assurance Accuracy % Recover
03/14	0900 AFU	Ammonia Nitrogen	35.4 mg/L	(b)		SM 1997 4500-NH3 F	0.00	102.0 *
03/22	0800 TSB	Phosphorus, Total	0.15 mg/L			EPA 365.3	0.00	110.5
03/19	1425 AFU	Solids, Total Suspended	3.9 mg/L			SM 1997 2540 D	0.00	N/A *
03/14	1648 AFU	Coliform, Fecal	1320 /100ml	(b)		SM 9222 D 1997	10.07	N/A
03/14	1400 TSB	BOD, Carbonaceous	< 2.0 mg/L			SM 2001 5210 B	23.26	107.0 *
03/19	1300 TSB	Nitrate + Nitrite	0.6 mg/L			01/2013 HACH 10206	3.57	100.0 *

* QA data shown is from a different sample or standard on the same date.
 (b) Exceeds Permit Limits for Maximum Concentration

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Signature Environmental Services Co., Inc.

Environmental Services Company, Inc.

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---	--

Control Number: 1803020150
 Customer Name : DECATUR WASTEWATER-EFFLUENT
 Customer/Permit No. : 1654 / AR0022292 001
 Report Date : 03/26/18

Composite Date: 03/15/18 -03/15/18
 Sample Time : 1000-1500/1345
 Sample Type : COMP/GRAB
 Sample From : EFFLUENT


Collected By: AF
 Delivery By : JCB
 Work Order :
 Purchase Order :

Laboratory Analysis

Date	Time By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Accuracy % Recovery
03/16	1000 TSB	Ammonia Nitrogen	38.4 mg/L	(b)		SM 1997 4500-NH3 F	0.00	100.9 *
03/19	1300 CLS	Phosphorus, Total	0.11 mg/L			EPA 365.3	0.00	93.6
03/22	1558 AEU	Solids, Total Suspended	5.4 mg/L			SM 1997 2540 D	0.86	N/A *
03/15	1641 AEU	Coliform, Fecal	7600 /100ml	(b)		SM 9222 D 1997	13.95	N/A *
03/16	1400 TSB	BOD, Carbonaceous	2.5 mg/L			SM 2001 5210 B	4.15	101.9 *

* QA data shown is from a different sample or standard on the same date.
 (b) Exceeds Permit Limits for Maximum Concentration

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

Signature 
 Environmental Services Co., Inc.



Analytical Results

Lab Contact Info:

ADEQ Laboratory and Monitoring Services 5301 Northshore Drive, North Little Rock, AR 72118 www.adeq.state.ar.us	Lessie Redican Redican@adeq.state.ar.us 501-682-0937
---	--

Collector: Grimes, Garrett

Project: CSI

Project Description: City of Decatur CSI 2018 2055-2056

Date and Time Received: 05/16/2018 15:00

Work Order Number: WO-180516-08

Case Narrative:

The following quality control excursions occurred in this sample delivery group.

AMMONIA:

The data user must be made aware that the initial calibration verification (ICV) standard for ammonia failed at 111% recovery. The acceptance range is 90-110%.

The Matrix Spike/Matrix Spike duplicate samples failed to recover within acceptance criteria due to a high concentration of target analyte (Ammonia) in the parent sample. Both recoveries were qualified by "MBA" which means "Masked by Analyte" on the final report. The parent sample (2018-2055) required a 1/10 dilution in order to obtain a result within the instrument calibration range. The Ammonia result for 2018-2055 was NOT qualified as a result of this failure.

Sample Receipt Conditions:

Condition	Response	Comment
Is the COC completed properly?	Yes	
Temperature on Receipt	0.3°C	
Received on Ice	Yes	
Containers are Correct	Yes	
Custody Seals	Yes	
COC/Labels Agree	Yes	

Data Qualifiers

Qualifier Flag	Description
MBA	Masked by Analyte
N	See case narrative for explanation of qualifier
R	RPD value does not meet lab acceptance criteria

Analytical Results



Laboratory Name: ADEQ Laboratory and Monitoring Services	Email: Grimes@adeq.state.ar.us
Contact Name: Grimes, Garrett	Phone: 479-267-0811
Lab Address: 5301 Northshore Drive North Little Rock, AR 72118	Fax:

Collector: Grimes, Garrett	Site:	Work Order Number: WO-180516-08
Sample Classification: Compliance	Project: CSI	
Matrix: Water	Collected: 5/16/2018 15:04	
Sample Barcode: 	Sample Number: 2018-2055	

Ammonia Dist Method: SM 4500-NH3 H, 2011 Analyst: KH
Aliquot #: 2018-2055-2-1 Batch Number: AB-180517-005

Analyte(s)	Result	Units	Q	Reporting Limit	Dilution	Analysis Date and Time
Ammonia as Nitrogen	14.4	mg/L	N	0.03	10	5/17/2018 13:27

5 Day Carbonaceous Biochemical Oxygen Demand Method: SM 5210 B, 2011 Analyst: RG
Aliquot #: 2018-2055-1-1 Batch Number: AB-180516-032

Analyte(s)	Result	Units	Q	Reporting Limit	Dilution	Analysis Date and Time
Carbonaceous Biological Oxygen Demand	6.75	mg/L		2	1	5/16/2018 14:36

Dissolved Oxygen Method: SM 4500-O G, 2011 Analyst: GG
Aliquot #: 2018-2055-1-3 Batch Number: AB-180601-004

Analyte(s)	Result	Units	Q	Reporting Limit	Dilution	Analysis Date and Time
Dissolved Oxygen	8.09	mg/L			1	5/16/2018 9:45

ICP/OES Metals (Total) Method: EPA 200.7 Analyst: PR
Aliquot #: 2018-2055-3-1 Batch Number: AB-180612-004

Analyte(s)	Result	Units	Q	Reporting Limit	Dilution	Analysis Date and Time
Phosphorus	<0.500	mg/L		0.5	1	6/5/2018 10:53

Nitrate +Nitrite as N Method: SM 4500-NO3 F, 2011 Analyst: KH
Aliquot #: 2018-2055-2-2 Batch Number: AB-180517-008

Analyte(s)	Result	Units	Q	Reporting Limit	Dilution	Analysis Date and Time
Nitrite+Nitrate as Nitrogen	1.15	mg/L		0.05	1	5/18/2018 7:46



Analytical Results

Collector: Grimes, Garrett

Site:

Work Order Number: WO-180516-08

Sample Classification: Compliance

Project: CSI

Matrix: Water

Collected: 5/16/2018 15:04

Sample Barcode: 

Sample Number: 2018-2055

pH
Aliquot #: 2018-2055-1-4

Method: SM 4500-H+ B, 2000
Batch Number: AB-180601-001

Analyst: GG

Analyte(s)	Result	Units	Q	Reporting Limit	Dilution	Analysis Date and Time
pH	7.43	units			1	5/16/2018 9:25

Water Temperature
Aliquot #: 2018-2055-1-5

Method: SM 2550 B, 2000
Batch Number: AB-180601-005

Analyst: GG

Analyte(s)	Result	Units	Q	Reporting Limit	Dilution	Analysis Date and Time
Water Temperature	23.3	°C			1	5/16/2018 9:45

Total Suspended Solids
Aliquot #: 2018-2055-1-2

Method: SM 2540 D, 2011
Batch Number: AB-180516-009

Analyst: AH

Analyte(s)	Result	Units	Q	Reporting Limit	Dilution	Analysis Date and Time
Total Suspended Solids	6.75	mg/L	R	2	1	5/16/2018 16:20



Analytical Results

Collector: Grimes, Garrett

Site:

Work Order Number: WO-180516-08

Sample Classification: Compliance

Project: CSI

CS

Matrix: Water

Collected: 5/16/2018 9:25

Sample Barcode: 

Sample Number: 2018-2056

Fecal Coliform

Method: SM 9222 D, 2006

Analyst: KH

Aliquot #: 2018-2056-1-1

Batch Number: AB-180516-031

Analyte(s)	Result	Units	Q	Reporting Limit	Dilution	Analysis Date and Time
Fecal Coliform by MF	68.0	cfu/100ml		1	1	5/16/2018 15:42

QUALITY CONTROL REPORT

Project: **City of Decatur CSI 2018 2055-2056**

Date and Time Received: **05/16/2018 15:00**

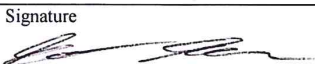

Analyte	Units	Method Blank	Reporting Limit	% Recovery LCS/LCSD	Limits	% RPD	Lab Dup Result	Limits	% RPD	% Recovery MS/MSD	Limits	% RPD	Limits	Qualifiers
Total Suspended Solids		SM 2540 D, 2011			Batch #: AB-180516-009		Parent Sample: 2018-2055							
Total Suspended Solids	mg/L	<2.00	2.00	100.3 /	90-110			-		/	-		-	R
Fecal Coliform		SM 9222 D, 2006			Batch #: AB-180516-031		Parent Sample: 2018-2056							
Fecal Coliform by MF	cfu/100ml	<1.00	1.00	/	-			-		/	-		-	
5 Day Carbonaceous Biochemical Oxygen Demand		SM 5210 B, 2011			Batch #: AB-180516-032		Parent Sample: 2018-2055							
Carbonaceous Biological Oxygen Demand	mg/L	<2.00	2.00	109.6 /	85-115			-		/	-		-	
Ammonia Dist		SM 4500-NH3 H, 2011			Batch #: AB-180517-005		Parent Sample: 2018-2055							
Ammonia Dist as Nitrogen	mg/L	<0.0300	0.03	91.0 /	80-120			-	N/A	MBA/MBA	80-120		-	MBA
Nitrate +Nitrite as N		SM 4500-NO3 F, 2011			Batch #: AB-180517-008		Parent Sample: 2018-2055							
Nitrite+Nitrate as Nitrogen	mg/L	<0.0500	0.05	100.5 /	80-120			-		95.0 / 91.7	80-120	1.2		

ICP/OES Metals (Total)		EPA 200.7			Batch #: AB-180612-004		Parent Sample: 2018-2055							
Analyte	Units	Method Blank	Reporting Limit	% Recovery LCS/LCSD	Limits	% RPD	Lab Dup Result	Limits	% RPD	% Recovery MS/MSD	Limits	% RPD	Limits	Qualifier
Phosphorus	mg/L	<0.500	0.50	103.1 /	85-115			-	N/A	104.8 / 104.2	80-120	0.6	-	

FIELD QUALITY CONTROL REPORT**Work Order #** WO-180516-08**Parent Sample** 2018-2055

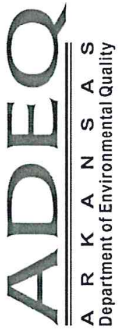
Analyte(s)	Parent Sample Result	Field Dup Result	Units	% RPD	Limits	Batch Number
Carbonaceous Biological Oxygen Deman	6.75	5.95	mg/L	12.60	0 - 20	AB-180516-032
Ammonia Dist as Nitrogen	14.4	14.4	mg/L	0.00	0 - 20	AB-180517-005
Dissolved Oxygen	8.09	8.12	mg/L	0.37	0 - 20	AB-180601-004
Fecal Coliform by MF	68.0	78.0	cfu/100ml	13.70	0 - 20	AB-180516-031
Phosphorus	<0.500	<0.500	mg/L	NA	0 - 20	AB-180612-004
Nitrite+Nitrate as Nitrogen	1.15	1.15	mg/L	0.00	0 - 20	AB-180517-008
pH	7.43	7.47	units	0.54	0 - 20	AB-180601-001
Total Suspended Solids	6.75	12.8	mg/L	61.54	0 - 5	AB-180516-009
Temperature	23.3	22.9	°C	1.73	0 - 20	AB-180601-005

W0-180576-08

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY CHAIN-OF-CUSTODY					
Date	May 16, 2018	Sampler (print)	Garrett Grimes		
Site Identification	City of Decatur CSI				
Site Address	985 Austin Ave, Decatur, AR 72722				
Sample ID	Sample Remarks	Time (hhmm)	Latitude	Longitude	Lab ID
Outfall 001	Composite - ^{COODS,} TSS - UV Building	15:04	36.34291	-94.47118	
Outfall 001	Composite - ^{NH3-N,} NO2+NO3-N - UV Building	15:04	36.34291	-94.47118	
Outfall 001	Composite - TP - UV Building	15:04	36.34291	-94.47118	
Outfall 001	Grab - FCB - Flume	9:25	36.34303	-94.47128	
Outfall 001 Dup	Composite - ^{COODS,} TSS - UV Building	15:04	36.34291	-94.47118	
Outfall 001 Dup	Composite - ^{NH3-N,} NO2+NO3-N - UV Building	15:04	36.34291	-94.47118	
Outfall 001 Dup	Composite - TP - UV Building	15:04	36.34291	-94.47118	
Outfall 001 Dup	Grab - FCB - Flume	9:25	36.34303	-94.47128	
Outfall 001	Grab - ^{Field measure} pH - Flume	9:25	36.34303	-94.47128	
Outfall 001 Dup	Grab - ^{Field measure} pH - Flume	9:25	36.34303	-94.47128	
Outfall 001	Grab - ^{Field measure} DO - outfall pipe	9:45	36.34405	-94.47217	
Outfall 001 Dup	Grab - ^{Field measure} DO - outfall pipe	9:45	36.34405	-94.47217	
Lab Use Only: Custody seal on each container?: YES <input checked="" type="radio"/> NO Labels/COC agree? <input checked="" type="radio"/> YES <input type="radio"/> NO					
Date/Time	Relinquished By	Received By			
Date	Name/Title	Name/Title			
5/16/18	Garrett Grimes / District Inspector	CHAD CARTWRIGHT / Chemist			
Time	Signature	Signature			
1500					
Date	Name/Title	Name/Title			
Time	Signature	Signature			
Date	Name/Title	Name/Title			
Time	Signature	Signature			
Date	Name/Title	Name/Title			
Time	Signature	Signature			



Arkansas Department of Environmental Quality
for Compliance, Enforcement, or Emergency Samples



Facility or Project Name	AFIN # / County	Date Collected (mm/dd/yy)	Time Collected (hh:mm)	Sample ID	Sample Characteristics		Parameters Requested		Container Type Code		Media Code		Preservation Code	
					Container Type	Media Code	Total No. of Containers	P	G	A	L	S	E	F
City of Decatur CSI	04-00052	05/15/18	15:04	Outfall 001	Grab (1) or Composite (2)	65 Preservative type 65 MVA Code	CDORs, TSS	NH3-N, NO3-N	TP	FCB	P = Polyethylene/Plastic	W = water	A = Cool to ≤ 6°C	
Printed Name of Sampler(s) Garrett Grimes		05/15/18	15:04	Outfall 001		65 Preservative type 65 MVA Code					G = Groundwater	B = Sulfuric Acid		
		05/15/18	15:04	Outfall 001		65 Preservative type 65 MVA Code					L = liquid (not water)	C = Nitric Acid		
		05/16/18	9:25	Outfall 001		65 Preservative type 65 MVA Code					O = Other (Specify)	D = NaOH		
		05/15/18	15:04	Outfall 001 Dup		65 Preservative type 65 MVA Code					Instantaneous Flow	E = Sodium Thiosulfate		
		05/15/18	15:04	Outfall 001 Dup		65 Preservative type 65 MVA Code					F = whole fish	F = Other (specify)		
		05/15/18	15:04	Outfall 001 Dup		65 Preservative type 65 MVA Code					B = other			
		05/16/18	9:25	Outfall 001		65 Preservative type 65 MVA Code					Field Measurements			
		05/16/18	9:25	Outfall 001 Dup		65 Preservative type 65 MVA Code					pH (SU)	Temp (°C)		
		05/16/18	9:25	Outfall 001 Dup		65 Preservative type 65 MVA Code					DO (mg/L)			
		05/16/18	9:45	Outfall 001		65 Preservative type 65 MVA Code								
		05/16/18	9:45	Outfall 001 Dup		65 Preservative type 65 MVA Code								

REMARKS / SAMPLE COMMENTS

-C0005 TSS NH3-N, NO3-N + TP Sampled on May 15, 2018 from the City of Decatur's Composite sample in the CU building. -PH, DO, +FCB Sampled on May 16, 2018 -PH and DO taken at the plant. -DO taken at the outfall pipe. -No Sodium Thiosulfate is used w/ FCB - the facility does NOT use Chlorine.

SAMPLE CONDITION UPON RECEIPT IN LAB	
1. Containers Correct	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. COC & Labels Agree	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Received On Ice	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4. Temp (°C) Upon Receipt	0.30C

FOR COMPLETION BY LAB ONLY

CST Calibration

Collector: Garrett Grimes

Study: City of Decatur WWTP CST

Sampling location:

Meter model: YSI Pro DSS Model

Serial No.: 15K102056

Date: May 16, 2018

Dissolved O₂

Time: 9:00

Initial % Sat = 95.7

Initial Concentration = 8.18

Barometric Pressure = 760.7 - from weather station

Altitude = N/A

Temp: 23.0°C

Calibrated % Sat: 100.2

Expected % Sat: 99.65

pH

Calibration Solution: pH 4 Buffer pH 7 Buffer pH 10 Buffer
 exp 10/18 exp 9/18 Exp. 2/19
 Lot: 662507 Lot: 661910 Lot: 7613647

Calibrations:

Time: 9:05

pH 4 Initial: 4.10

pH 4 Calibrated 4.00 Buffer temp: 23.1°C

pH 7 Initial 6.98

pH 7 Calibrated 7.00 - Buffer temp: 23.2°C 7 check

pH 10 Initial 10.04

pH 10 Calibrated 10.03 Buffer temp: 23.2°C

Slope 98.6

From: [James Boston](#)
To: [Water-Inspection-Report](#)
Subject: Decatur AR Inspection Report
Date: Tuesday, July 31, 2018 1:56:22 PM
Attachments: [Scan0149.pdf](#)

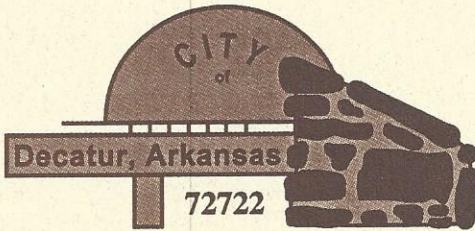
Mr. Bolenbaugh,

I have attached the Decatur Inspection follow up response letter. I have also attached two photo's of the lift stations that we have that were cleaned out last week. All of our lift stations were cleaned with a vacuum truck, and we hope to do this annually.

Please contact me at Decatur City Hall, phone number 479-752-3912 with any questions or concerns.

Sincerely,

James Boston
Public Works Manager
City of Decatur



310 Maple Avenue • Box 247
Phone: (479) 752-3912

July 30, 2018

Arkansas Department of Environmental Quality
Office of Water Quality Compliance Branch
5301 Northshore Drive
North Little Rock AR 72118-5317

RE: Decatur AR WWTP Inspection Response. AFIN: 04-00052, Permit No: AR0022292.

Dear Mr. Bolenbaugh,

This letter is in response to Mr. Grimes inspection, I will answer the questions under the Summary of Findings in the order the responses were listed. I would like to note that the Decatur WWTP is under a construction permit and substantial completion is expected to be the end of December 2018...

1. The sludge press does not fit all the way on the containment area due to the location of a pond to the south of the machine. Some of the dewatered sludge does not fall in the containment area due to the length of the sludge press. The press was not designed for this area; however, it was necessary to handle the amount of biosolids the plant is currently producing. There is no liquid sludge falling outside the containment area and the solids that do fall on the area outside the contained area are cleaned up every day and the unit is not run during rain fall events. The solution to this problem is coming. We have ordered through our plant expansion plans a new Screw Press that will be located inside the building where the old outdated sludge processing machine is located. The expansion schedule shows the new Screw Press going into service in September of this year and the rented belt press going away. A roof is also scheduled to be put up over the containment area to prevent unwanted rainwater going into the plant and to ensure biosolids are contained and kept dry.
2. The dumpster at the headworks that we put the trash or screenings from the influent to the plant, is leaking due to a split in the dumpster, and a missing plug. We are trying to get a newer dumpster, if we cannot we will start putting liners in the dumpsters to prevent any leakage. This dumpster is under a roof. In the meantime, we are making sure waste bags are tied securely and any debris is kept swept up.

I will address the lift station inspection that Mr. Grimes did the day after the plant inspection in the order of the comments...

1. We do have grease in our lift stations from time to time and probably most of the time, we have and continue to try various products on the market to keep it under control. We have been vary

fortunate that we have not had trouble due to grease. With that said, on July 26th we had a company come in and completely clean and remove all debris from our 5 lift stations and two at the treatment plant. This is the first time we have been able to do this but we hope to continue this on an annual basis. I will try to attach with this report or send them in separately a few photos of the completed work last week. I do wish we could have done this long before now, it is going to make a huge difference in lift station appearance and maintenance

2. Lift station number one does have an alarm on it as do all lift stations along with redundant pumps. We have spent a lot of money the past couple of years and we feel like our lift stations are better than most. Lift station #1 however is difficult to make the alarm go off during a test situation. We will get this fixed to be able to show that the alarm is working for the next inspection. I would like to note that as the money is available we are putting on each station a SCADA that notifies us during a power loss, high level and other situations. So far, we only have this on our busiest lift station number 4.

I will address the Summary of Findings related to Mr. Grimes effluent sampling report in the order listed...

1. We are having difficulty with our effluent limits especially ammonia and fecal coliform due to flows above plant design. Ammonia problems are caused in our case by not enough treatment time. We are currently under a CAO and doing our best to keep ammonia as low as possible. Our plant expansion will deal with this by giving us increased capacity along with doubling our aeration time and horsepower available to aerate.
2. I addressed the influent trash dumpster above. We will get this solved, and it is under roof already. The next note had to do with our ponds and vegetation. Two weeks ago, we had a company come in and spray our pond banks with aquatic weed killer. This fall we will go in and remove the dead vegetation, and trees from the pond banks. Due to the daily battle of our compliance issues, and the lack of use of the ponds they have gotten overgrown. We will address this problem.
3. Phosphorus sampling by our testing lab along with nitrates are sometimes done more often than they should. We are working with our testing lab to have them better watch the instructions on the chain of custody. As far as reporting it on the DMR, since we have went to NETDMR I do not know and have ask how to report an extra day or two of sampling of these two nutrients. Please advise because it looks like I can only report two days a week or three days a week. If I sample one extra time during a week I would be wrong reporting three times per week. Please advise on how to fix this please.
4. The last two comments have been addressed. We are working on the dumpster issue at the headworks to insure this is not a problem. The solids around the SBR have been picked up. With all the construction going on we are being extra vigilant on anything from the wastewater steam being outside of the plant.

The Decatur WWTP has been challenged for the last couple of years for sure. We feel like our expansion to an MBR plant will enable us to discharge a great effluent to our receiving stream. Unfortunately, it takes a lot of time from engineering to construction. At the end of 2018 we should be expanded and completely in compliance, shortly after completion, with our permit. In the mean time we will continue to work toward permit compliance.

I would like to note also that I did not receive the inspection report until July 24th. I do not know what route the documents took getting to me.

If you have any questions or concerns, please contact me at phone number 479-752-3912.

Sincerely,

A handwritten signature in black ink, appearing to read "Jim Boston". The signature is written in a cursive, flowing style.

James Boston
Public Works Manager
City of Decatur



Decatur
Lift Station #5



Decatur
Lift Station # 4



ARKANSAS
Department of Environmental Quality

August 20, 2018

Honorable Robert Tharp, Mayor
City of Decatur
P.O. Box 247
Decatur, AR 72722

RE: City of Decatur Inspection
AFIN: 04-00052 Permits No.: AR0022292 & ARR001284

Dear Mayor Tharp:

I have reviewed your response pertaining to my May 14 – 16, 2018, inspections of the above referenced facility. However, the information provided does not sufficiently address the violations referenced in my inspection report. Please provide the following:

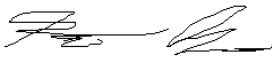
- 1. Violation of Part III, Section B.1 of permit AR0022292:** Your response states that the alarm on Lift Station #1 is difficult to test and that you will be able to show that the alarm is working during the next inspection. Please verify that the alarm has been tested and is currently operational.
- 2. Violations of Part III, Sections B.1.A & B.6 of permit AR0022292:** **A.)** Your response states that the leaking trash bin near the headworks is scheduled for replacement and that precautions are in place to prevent leaks from the bags. Please submit photographs showing the area is free of debris and wastewater. Please submit a timeline for replacement of the trash bin.
B.) Your response states that dewatered sludge from the sludge press will be removed from the parking area daily and that the press will not be used during rain events. Please submit photographs showing the area after housekeeping activities. In addition, please state how wasted sludge will be managed during rain events when the press is not in use to prevent discharges of solids in the outfall.
- 3. Violation of Part III, Section B.1.A of permit AR0022292:** Your response states that herbicide has been applied to the overgrown vegetation around the ponds and that the vegetation will be removed sometime in the fall. Please submit a timeline when this will occur.
- 4. Violation of Part III, Section B.6 of permit AR0022292:** Your response indicates unfamiliarity on how to report extra days of sampling on the DMR. The correct frequency of sampling code should be used to represent the amount of samples collected and analyzed in a given time period. Please contact Leslie-Allen Daniel, Enforcement Analyst, at 501-682-0630 for assistance. In addition, please revise the March 2018 DMR to incorporate all Phosphorous samples collected and the correct number of samples.
- 5. Violation of Part 1.7 of permit ARR001284:** Your response states that the sludge

press is unable to be moved fully over the sludge drying beds. Your response also states that the sludge press will not be used during rain events and that dewatered sludge in the parking area will be removed daily. However, since the end of the press, conveyer system, and sludge transport truck are over the parking area and exposed to stormwater; and since dewatered sludge will still continue to fall onto the parking area, the No-Exposure Certification is no longer applicable to the facility. Please contact Jessica Temple, P.E., ADEQ Office of Water Quality Permitting Branch, at 501-682-0621 to discuss full coverage requirements under the Industrial General Stormwater Permit.

The above items require your immediate attention. Please submit a written response to these items to the Office of Water Quality Compliance Branch of this Department. This response should be mailed to the address at the bottom of the first page of the letter or e-mailed to Water-Inspection-report@adeq.state.ar.us. This response is due by **September 5, 2018**.

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 grimesg@adeq.state.ar.us.

Sincerely,



Garrett Grimes
District 1 Field Inspector
Office of Water Quality



310 Maple Avenue • Box 247

Phone: (479) 752-3912

September 5, 2018

Arkansas Department of Environmental Quality
Office of Water Quality Compliance Branch
5301 Northshore Drive
North Little Rock AR 72118-5317

RE: Decatur AR WWTP Inspection Response. AFIN: 04-00052, Permit NO: AR0022292.

Dear Mr. Bolenbaugh,

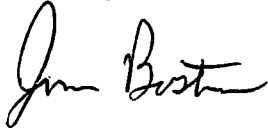
The follow up letter I received from our treatment plant inspection was received last week. I am responding to the items in the order they were listed...

1. The alarm on lift station #1 works fine. It was working when it was inspected and is working now. We did say it is hard to make alarm due to the type of level indicator which is a "candy cane" type of level indicator. There is a high level float in the lift station that when tripped by hand or high water, sets off the audial and visual alarm on the lift station panel.
2. The dumpster at the headworks was missing a plug. We have plugged the dumpster and if it leaks in the future we will request a new dumpster immediately. The dumpster is under a covered carport area to minimize exposure to rainfall. I do not have a photo of the dumpster but I can send one after this letter if you need one.
Part B of this question is simple, we have storage for sludge, we do not press on weekends or if it is raining. The last day of our temporary sludge press use is September 28th. The sludge press well be removed and our new sludge operation well start up the first week or so of October. The new sludge operation has complete containment. A roof is to be put over the sludge containment pad also.
3. There is no vegetation or very little growing around the ponds. With all hands working toward keeping the best water quality we can and startup and training of the new facility. We will remove the dead vegetation as soon as possible. We want it to get cooler to prevent any of our personnel from getting snake or insect bitten. Time line is before next April, but most likely right after startup training of our new facility in January we well slick up the pond banks for the next growing season. Picture included.
4. I have not had a chance to follow up with Ms. Daniel on correcting the DMR but I well have it done by the end of next week or 8/14/2018.

5. Item 5 we do not feel is necessary but I will contact Ms. Temple by the end of next week or 8/14/2018. The rented sludge press is temporary, its last day of usage will be 8/28/2018. It will then go on to its next job or destination. The sludge press was requested by ADEQ at a meeting we had in Little Rock last year as part of our CAO. The machine was not designed for our site but it has helped us tremendously to keep up with sludge production. We feel like we have good safe guards in place as discussed. Our new machine that will keep up with our production is on site now. It is inside the building, being assembled. Processed sludge will be augured to a tractor trailer on a contained pad for hauling. We feel like a full blown storm water permit is not needed for a requested situation by your department for a temporary piece of equipment, that will be dismantled starting on September 28th 2018. But I will contact Ms. Temple.

We are working very hard toward keeping good water going to the creek and working with our engineers and our contractor to get this facility expanded in and complete compliance. If you have any questions I can be reached at 479-752-3912.

Sincerely,

A handwritten signature in black ink that reads "Jim Boston". The signature is written in a cursive, flowing style.

James Boston
Public Words Manager
City of Decatur



Existing Sludge Press, or temp. Only Pressed Sludge is
slightly out of contained area. Last day we will use this
is 8/28/2018,

Decatur AR



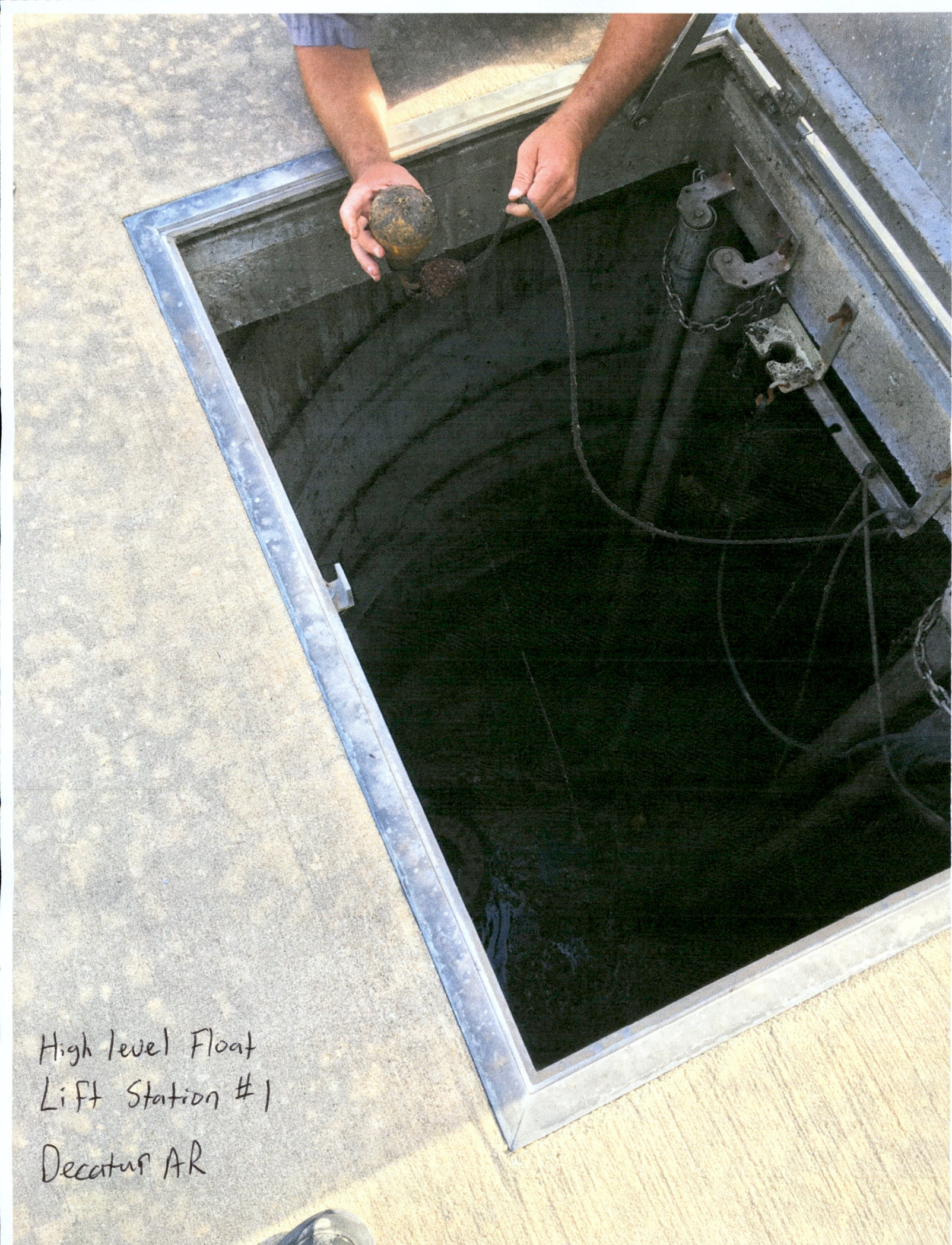
New Sludge Press that is sitting in place in Decatur.

Decatur AR



Example of how the pond banks look now. This is our
Eq. pond that is currently used.

Decatur AR



High level Float
Lift Station #1
Decatur AR

Decatur Water & Waste Water

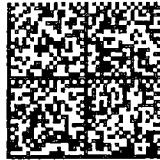
P.O. Box 247 • 310 Maple Ave.
Decatur, AR 72722

NW ARKANSAS

AR 727

07 SEP 18

PM 2 L



02 1P
0004723558 SEP 05 2018
MAILED FROM ZIP CODE 72722

\$ 000.68⁰

Arkansas Dept of Environmental Quality
5301 Northshore Drive
North Little Rock AR 72118-5317

72118-531799



ADEQ

ARKANSAS
Department of Environmental Quality

September 20, 2018

Robert Tharp, Mayor
City of Decatur
P.O. Box 247
Decatur, AR 72722

RE: City of Decatur Inspection
AFIN: 04-00052 Permit No.: AR0022292 & ARR001284

Honorable Robert Tharp:

I have reviewed your response pertaining to my May 14 – 16, 2018, inspection of the above referenced facility. However, the information provided does not sufficiently addresses the violations referenced in my inspection report. Please provide the following:

- **Violation of Part III, Section B.6 of permit AR022292:** Please submit notification the March 2018 DMR has been corrected.
- **Violation of Part 1.7 of permit ARR001284:** Please submit notification that the Permits Branch of the Office of Water Quality has been contacted and provide updates on the IGP permit status of the facility.

The above item requires your immediate attention. Please submit a written response to these items to the Office of Water Quality Compliance Branch of this Department. This response should be mailed to the address at the bottom of the first page of the letter or e-mailed to Water-Inspection-report@adeq.state.ar.us. This response is due by **October 14, 2018**.

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 grimesg@adeq.state.ar.us.

Sincerely,



Garrett Grimes
District 1 Field Inspector
Office of Water Quality

ADEQ

ARKANSAS
Department of Environmental Quality

CERTIFIED MAIL: 9489 0090 0027 6022 2308 41

November 15, 2018

Robert Tharp, Mayor
City of Decatur
P.O. Box 247
Decatur, AR 72722

RE: Failure to Respond to Inspection
AFIN: 04-00052 Permit No.: AR022292 & ARR001284

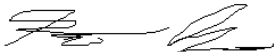
Honorable Robert Tharp:

A letter dated September 20, 2018, was sent to you by ADEQ. The letter requested additional information in regard to the May 14 – 16, 2018, inspection of the above referenced facility. The letter requested that a written response be submitted to the Office of Water Quality Compliance Branch of this Department by October 14, 2018. To date, no response has been received.

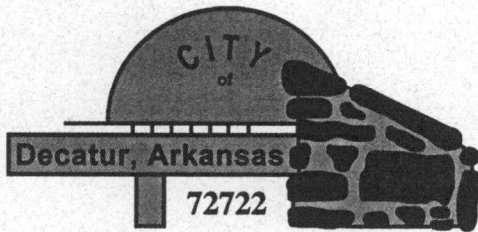
Please submit a written response by **December 1, 2018**. A copy of the inspection report has been included for your convenience.

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 grimesg@adeq.state.ar.us.

Sincerely,



Garrett Grimes
District 1 Field Inspector
Office of Water Quality



310 Maple Avenue • Box 247
Phone: (479) 752-3912

December 19, 2018

Arkansas Department of Environmental Quality
Office of Water Quality Compliance Branch
5301 Northshore Drive
North Little Rock AR 72118-5317

RE: Decatur AR WWTP Inspection Response. AFIN: 04-00052, Permit NO: AR0022292.

Dear Mr. Bolenbaugh,

I am responding to the follow up letter Mr. Garrett Grimes sent to the Mayor Bob Tharp pertaining to the plant inspection back in May of 2018.

The first part of his letter was about the correction to the March 2018 DMR for the number of samples taken for Nitrate and Phosphorus. I did correct this and I have enclosed a copy of the correction printed from NET DMR that was done.

The second part I think was a mistake, he referenced permit AR001284, our permit number is AR0022292.

If the second response was meant to be about the storm water from the belt press that we had rented and use to use then I am not sure how to respond. The belt press was removed from the site months ago as stated in the earlier responses, and all sludge production is back to being done completely on a contained sludge production area. We are going to go beyond and put a cover over this pad in the next couple of months to ensure we are not getting rainfall onto the pad and back into the head works of the plant. The cover is already on site.

If you have any questions or concerns please call me at 479-752-3912.

Sincerely,

James Boston
Public Words Manager
City of Decatur

DMR Copy of Record

Permit
 Permit #: **AR0022292** | Permittee: **DECATUR, CITY OF** | Facility: **DECATUR, CITY OF**
 Major: **Yes** | Permittee Address: **P.O. BOX 247
DECATUR, AR 72722** | Facility Location: **985 AUSTIN AV
DECATUR, AR 72722**
 Permitted Feature: **001
External Outfall** | Discharge: **001-B
001-MONTHLY-TRTD MUNICIPAL WW @ 2.2 MGD**
Report Dates & Status
 Monitoring Period: **From 03/01/18 to 03/31/18** | DMR Due Date: **04/25/18** | Status: **NetDMR Validated**

Considerations for Form Completion

Report flow as monthly average & daily maximum in MGD (million gallons/day). (S) Use Overflows (74062) to report total number of SSOs/Month. Use Overflow volume (74063) to report total volume of SSOs in gallons/month. Report "0" (zero), if no overflows during the entire month. See Part II. 5. (SSO), 04-00052

Principal Executive Officer

First Name: _____ | Title: _____ | Telephone: _____
 Last Name: _____
No Data Indicator (NODI)

Form NODI:

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading					Quality or Concentration			Units	# of Ex.	Frequency of Analysis	Sample Type	
					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2					Value 2
00300	Oxygen, dissolved [DO]	1 - Effluent Gross	0	-	Sample Permit Req.					=	6.7				19 - mg/L	03/07 - Three Per Week	GR - GRAB
					Value NODI					>=	6 INST MIN				19 - mg/L	03/07 - Three Per Week	GR - GRAB
00400	pH	1 - Effluent Gross	0	-	Sample Permit Req.					=	6.9		=	7.4	12 - SU	03/07 - Three Per Week	GR - GRAB
					Value NODI					>=	6 MINIMUM		<=	9 MAXIMUM	12 - SU	03/07 - Three Per Week	GR - GRAB
X 00530	Solids, total suspended	1 - Effluent Gross	0	-	Sample Permit Req.	=	1570.8		26 - lb/d	=	55.45		=	220.57	19 - mg/L	03/07 - Three Per Week	CP - COMPOS
					Value NODI	<=	275.2 MO AVG		26 - lb/d	<=	15 MO AVG		<=	22.5 7 DA AVG	19 - mg/L	03/07 - Three Per Week	CP - COMPOS
X 00810	Nitrogen, ammonia total [as N]	1 - Effluent Gross	1	-	Sample Permit Req.	=	637.8		26 - lb/d	=	29.9		=	37.3	19 - mg/L	03/07 - Three Per Week	CP - COMPOS
					Value NODI	<=	75.2 MO AVG		26 - lb/d	<=	4.1 MO AVG		<=	10.3 7 DA AVG	19 - mg/L	03/07 - Three Per Week	CP - COMPOS
00630	Nitrite + Nitrate total [as N]	1 - Effluent Gross	0	-	Sample Permit Req.	=	26.29		26 - lb/d				=	0.9	19 - mg/L	03/07 - Three Per Week	CP - COMPOS
					Value NODI	<=	183.5 MO AVG		26 - lb/d				<=	10 INST MAX	10 - mg/L	02/07 - Twice Every Week	CP - COMPOS
00665	Phosphorus, total [as P]	1 - Effluent Gross	0	-	Sample Permit Req.	=	9.15		26 - lb/d	=	0.38		=	1	19 - mg/L	03/07 - Three Per Week	CP - COMPOS
					Value NODI	<=	18.3 MO AVG		26 - lb/d	<=	1 MO AVG		<=	1 7 DA AVG	19 - mg/L	02/07 - Twice Every Week	CP - COMPOS
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0	-	Sample Permit Req.	=	2.08	=	3.5	03 - MGD						01/01 - Daily	TM - TOTALZ
					Value NODI		Req Mon MO AVG		Req Mon DAILY MX	03 - MGD					0	01/01 - Daily	TM - TOTALZ
50060	Chlorine, total residual	1 - Effluent Gross	0	-	Sample Permit Req.								<	.033 INST MAX	19 - mg/L	03/07 - Three Per Week	GR - GRAB
					Value NODI									9 - Conditional Monitoring - Not Required This Period			
X 74055	Coliform, fecal general	1 - Effluent Gross	0	-	Sample Permit Req.					=	637.4		=	20418	13 - #/100mL	03/07 - Three Per Week	GR - GRAB
					Value NODI	<=	200 30DA GEO			<=	400 7 DA GEO		<=		13 - #/100mL	03/07 - Three Per Week	GR - GRAB
74062	Overflows	S - See Comments	0	-	Sample Permit Req.	=	4		93 - occur/mo							999 - See Comments	999 - See Comments
					Value NODI		Req Mon MO TOTAL		93 - occur/mo						0	999 - See Comments	999 - See Comments
74063	Overflow volume [SS0 volume, CSO volume]	S - See Comments	0	-	Sample Permit Req.	=	11400		57 - gal							999 - See Comments	999 - See Comments
					Value NODI		Req Mon MO TOTAL		57 - gal						0	999 - See Comments	999 - See Comments
					Sample Permit Req.	=	141		26 - lb/d	=	5.5		=	14.9	19 - mg/L	03/07 - Three Per Week	CP - COMPOS

C

80052 BOD, carbonaceous [5 day, 20 C] 1 - Effluent Gross 0 - Reg. Value NODI <= 183.5 MO AVG 26 - lb/d <= 10 MO AVG <= 15.7 DA AVG 19 - mg/L 0 03/07 - Three Per Week CP - COMPOS

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

Code	Parameter Name	Monitoring Location	Field	Type	Description	Acknowledge
00530	Solids, total suspended	1 - Effluent Gross	Quantity or Loading Sample Value 1	Soft	The provided sample value is outside the permit limit. (Error Code: 1)	Yes
00530	Solids, total suspended	1 - Effluent Gross	Quality or Concentration Sample Value 2	Soft	The provided sample value is outside the permit limit. (Error Code: 1)	Yes
00530	Solids, total suspended	1 - Effluent Gross	Quality or Concentration Sample Value 3	Soft	The provided sample value is outside the permit limit. (Error Code: 1)	Yes
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	Quantity or Loading Sample Value 1	Soft	The provided sample value is outside the permit limit. (Error Code: 1)	Yes
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	Quality or Concentration Sample Value 2	Soft	The provided sample value is outside the permit limit. (Error Code: 1)	Yes
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	Quality or Concentration Sample Value 3	Soft	The provided sample value is outside the permit limit. (Error Code: 1)	Yes
74055	Coliform, fecal general	1 - Effluent Gross	Quality or Concentration Sample Value 2	Soft	The provided sample value is outside the permit limit. (Error Code: 1)	Yes
74055	Coliform, fecal general	1 - Effluent Gross	Quality or Concentration Sample Value 3	Soft	The provided sample value is outside the permit limit. (Error Code: 1)	Yes

Comments

We normally run Phosphorus and Nitrate 2 times per week. However one week we ran each three times. The DMR is being changed to reflect this, 03/07.

Attachments

Name	Type	Size
DecaturDMRNCRMarch2018.pdf	pdf	413191

Report Last Saved By

DECATUR, CITY OF

User: jbboston.cod@gmail.com
 Name: James Boston
 E-Mail: jbboston.cod@gmail.com
 Date/Time: 2018-09-17 14:51 (Time Zone: -05:00)

Report Last Signed By

User: jbboston.cod@gmail.com
 Name: James Boston
 E-Mail: jbboston.cod@gmail.com
 Date/Time: 2018-09-17 14:51 (Time Zone: -05:00)

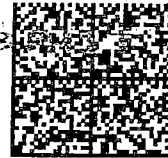
Decatur Water & Waste Water

P.O. Box 247 • 310 Maple Ave.

Decatur, AR 72722

NW ARKANSAS AR 727

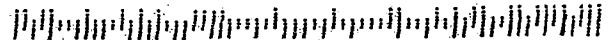
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0004723558 NOV 30 2018
MAILED FROM ZIP CODE 72722

Arkansas Dept. of Environmental Quality
Water Inspection Report
5301 Northshore Drive
North Little Rock AR 72118-5317

721185317



ADEQ

A R K A N S A S
Department of Environmental Quality

December 19, 2018

Honorable Robert Tharp, Mayor
City of Decatur
P.O. Box 247
Decatur, AR 72722

RE: City of Decatur WWTP Inspection
AFIN: 04-00052 Permit No.: AR0022292

Honorable Robert Tharp:

The Department has received your responses to the inspection conducted on May 14 - 16, 2018. Your response adequately addresses the request in the Summary of Findings section of the report. Acceptance of this response by the Department does not preclude any future enforcement action deemed necessary at this site or any other site.

If I need further information concerning this matter, I will contact you. Thank you for your attention to this matter. If I can be any assistance please feel free to contact me at grimesg@adeq.state.ar.us or 479.267.0811 ext. 16.

Sincerely,



Garrett Grimes
District 1 Field Inspector
Office of Water Quality