

January 14, 2019

Kathryn Catlin, Wastewater Manager City of Harrison P.O. Box 1715 Harrison, AR 72601

RE: City of Harrison WWTP Inspection (Boone Co)

AFIN: 05-00054 NPDES Permit No.: AR0034321

Dear Ms. Catlin:

On January 3, 2018, I performed a Reconnaissance 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.

No violations were noted at the time of the inspection. Please refer to the attached inspection report for any comments.

If I can be of any assistance, please contact me at schlicks@adeq.state.ar.us or (870) 424-3322 extension 2.

Sincerely,

Skyler Schlick

Skyler Schlid

District 2 Field Inspector

Office of Water Quality

Inspection Report: City of Harrison WWTP, AFIN: 05-00054, Permit #: AR0034321

	V DEO	WATER DIVISION INSPECTION REPORT							
AULU		AFIN: 05-00054 PI		ERMIT #: AR0034321				DATE: 1/3/2019	
ARKANSAS			UNTY: 05 Boon e	PDS #: 106136		36	MEDIA: WN		
Dep	partment of Environmental Quality	GPS LAT: 36.236990 LONG: -93.076433 LOCATION: General Area							
	FACILITY INFORMAT	INSPECTION INFORMATION							
City of Harrison WWTP			FACILITY TYPE: 1 - Municipal	INSPECTOR ID#: 117208 S - State					
1508 Silver Valley Road			5 - Satisfactory Rec				nnaissance		
Harrison				DATE(S): ENTRY TIME: EXIT TIME: 1/3/2019 08:45 09:18				PERMIT EFFECTIVE DATE:	
RESPONSIBLE OFFICIAL				1/3/2019 06:45 09:16 10/1/2007 PERMIT EXPIRATION DATE:					
NAME: / TITLE Kathryn Catlin / Wastewater Manager								9/30/2012	
COMPANY:			FAYETTEVILLE SHALE RELATED: N						
City of Harrison MAILING ADDRESS:			FAYETTEVILLE SHALE VIOLATIONS: N						
P.O. Box 1715			INSPECTION PARTICIPANTS						
CITY, STATE, ZIP: Harrison AR 72601			NAME/TITLE/PHONE/FAX/EMAIL/ETC.: Kathryn Catlin/ Wastewater Manager/ 870-741-5527/						
PHONE & EXT: / FAX:			kathryn.catlin@cityofharrison.com						
870 EMAIL)-741-5527 /	Mishael Orand Wasternatan Blant Orange is a 1 (070)							
kathryn.catlin@cityofharrison.com				Michael Crow/ Wastewater Plant Supervisor / (870)-741-2528/ michael.crow@cityofharrison.com					
CONTACTED DURING INSPECTION: Yes									
Samuel Schratz/ ADEQ District 2 Inspector								nspector	
AREA EVALUATIONS (S=Satisfactory, M=Marginal, U=Unsatisfactory, N=Not Applicable/Evaluated)									
**	PERMIT	** FLOW MEASUREMENT				RMWA	TER		
**	RECORDS/REPORTS	**	LABORATORT			* FACILITY SITE REVIEW			
**	OPERATION & MAINTENANCE	**		EIVING WATER	**			TORING PROGRAM	
S	SAMPLING OTHER: Reconnaissance	^^	SLUDGE HAND	LING/DISPOSAL		PREI	REAT	MENI	
S OTHER: Reconnaissance SUMMARY OF FINDINGS									
No violations were noted during the inspection.									
· ·									
GENERAL COMMENTS									
On January 3, 2019, a reconnaissance inspection was conducted in response to a complaint with the above-									
mentioned inspection participants.									
Outfall 004 was absented and the disabette was also There was a disabette with the disabette with the disabette was a disabette with the disabet									
Outfall 001 was observed and the discharge was clear. There was no evidence of an overflow or discharge of									
sludge. Sections of the plant were observed and all were operating properly and there were no issues observed. Kathryn Catlin stated that were no issue with the plant over the weekend or any sanitary sewer									
overflows. Ms. Catlin stated that SSOs are always reported to ADEQ.									
INS	SPECTOR'S SIGNATURE:	UZ_	Schlick Skyle	r Schlick				DATE: 1/10/2019	
INSPECTOR'S SIGNATURE: Skyler Schlick DATE: 1/10/2019									
SU	SUPERVISOR'S SIGNATURE: Kerri McCabe DATE: 1								

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Water Division Photographic Evidence Sheet

Location: City of Harrison WWTP

Photographer: Skyler Schlick Date: 1/3/2019 Time: 0917

Witness: Samuel Schratz Photo #: 1

Description: Effluent flowing towards Outfall 001 from treatment plant.



Photographer:Skyler SchlickDate:1/3/2019Time:0917Witness:Samuel SchratzPhoto #:2



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Water Division Photographic Evidence Sheet

Location: City of Harrison WWTP

Photographer: Skyler Schlick Date: 1/3/2019 Time: 0916

Witness: Samuel Schratz Photo #: 3

Description: Outfall 001.



Photographer:Skyler SchlickDate:1/3/2019Time:0917Witness:Samuel SchratzPhoto #:4



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