

ADEQ

ARKANSAS
Department of Environmental Quality

August 6, 2019

Mr. Marc E. Wilkins, PE, Director
North Little Rock Wastewater
P.O. Box 17898
North Little Rock, AR 72117

RE: NLR Faulkner Lake Plant Inspection
AFIN: 60-00274 Permit No.: AR0020303

Dear Mr. Wilkins:

On July 9, 2019, I performed a Compliance Evaluation 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 Bolenbaugh@adeq.state.ar.us or 501-682-0659.

Sincerely,



Jason Bolenbaugh
Compliance Branch Manager
Office of Water Quality

CC: Ms. Kristine M. Ramon, EC&S Superintendent, kramon@nlrwu.com



AR K A N S A S
Department of Environmental Quality

WATER DIVISION INSPECTION REPORT

AFIN: 60-00274	PERMIT #: AR0020303	DATE: 7/9/2019
COUNTY: 60 Pulaski	PDS #: 108802	MEDIA: WN
GPS LAT: 34.739100 LONG: -92.179910 LOCATION: Entrance		

FACILITY INFORMATION	INSPECTION INFORMATION
NAME: NLR Faulkner Lake Plant LOCATION: 7400 Baucum Pike CITY: North Little Rock	FACILITY TYPE: 1 - Municipal INSPECTOR ID#: 83321 S - State FACILITY EVALUATION RATING: 5 - Satisfactory INSPECTION TYPE: Compliance Evaluation
	DATE(S): 7/9/2019 ENTRY TIME: 08:00 EXIT TIME: 14:00 PERMIT EFFECTIVE DATE: 6/1/2019 PERMIT EXPIRATION DATE: 5/31/2024
RESPONSIBLE OFFICIAL	
NAME / TITLE: Mr. Marc E. Wilkins, PE / Director COMPANY: North Little Rock Wastewater MAILING ADDRESS: P.O. Box 17898 CITY, STATE, ZIP: North Little Rock AR 72117 PHONE & EXT. / FAX: 501-945-4752 / EMAIL: mwilkins@nlru.com	FAYETTEVILLE SHALE RELATED: N FAYETTEVILLE SHALE VIOLATIONS: N
CONTACTED DURING INSPECTION: No	INSPECTION PARTICIPANTS
	NAME/TITLE/PHONE/FAX/EMAIL/ETC.: Drew Waters, OWQ Inspector, ADEQ Lyle Leubner, Wastewater Superintendent, NLR Marybeth Eggleston, Technical Specialist, NLR Jana Kohlmann, Sr. Operator, NLR

AREA EVALUATIONS

(S=Satisfactory, M=Marginal, U=Unsatisfactory, N=Not Applicable/Evaluated)


S	PERMIT	S	FLOW MEASUREMENT	N	STORMWATER
S	RECORDS/REPORTS	S	LABORATORY	S	FACILITY SITE REVIEW
S	OPERATION & MAINTENANCE	S	EFFLUENT/RECEIVING WATER	S	SELF-MONITORING PROGRAM
S	SAMPLING	S	SLUDGE HANDLING/DISPOSAL	N	PRETREATMENT
**	OTHER:				

SUMMARY OF FINDINGS

- No violations were noted at the time of the inspection.
- The new permit was issued on June 1, 2019. WET testing in the permit is quarterly rather than the semi-annual reduction that was effective during the previous permit. Please ensure quarterly sampling is conducted until such time as a reduction request is submitted and approved (if applicable).
- The staff provided detailed operations and maintenance logs prior to the inspection and is working towards developing an electronic program to store all records and inventory.
- All treatment systems were operational. Clarifier #1 was operational but was not in service at the time of the inspection.

GENERAL COMMENTS

- The Design Flow of the facility is 12 MGD, and the treatment type consists of screening, primary clarification/grit removal, activated sludge, secondary clarification, and chlorine disinfection.
- A review of Discharge Monitoring Reports from January 2017 to May 2019 revealed no permit effluent limitation violations. However, the permittee has reported 62 Sanitary Sewer Overflows with a total volume estimate of 115,300 gallons.
- Sludge from primary clarification and secondary clarification is gravity thickened, belt pressed, and sent to a permitted landfill or land applied. State Permit Number 4665-WR-4 is currently pending. No sludge from the Faulkner Lake WWTP was land applied during the permit term for State Permit Number 43665-WR-3.
- On May 15, 2019 and in accordance with Part I, Section B of the permit, the permittee submitted written notification acknowledging the technical based local limits were based on current state water quality standards.
- An inspection of the facility's No-Exposure Exclusion (ARR000067) was conducted in conjunction with this inspection. Please refer to that inspection report for further details.

INSPECTOR'S SIGNATURE: ←Click text to left to add signature	-Inspector Name	DATE:
SUPERVISOR'S SIGNATURE: 	Jason Bolenbaugh	DATE: 7/27/2019

SECTION A: PERMIT VERIFICATION	
PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE: Mr. Marc Wilkins, P.O. Box 17898, NLR, 72117	<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 type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT: Single Outfall 001	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. ALL DISCHARGES ARE PERMITTED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
SECTION B: RECORDKEEPING AND REPORTING EVALUATION	
RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRS:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
a. DATES AND TIME(S) OF SAMPLING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
b. EXACT LOCATION(S) OF SAMPLING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
c. NAME OF INDIVIDUAL PERFORMING SAMPLING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
d. ANALYTICAL METHODS AND TECHNIQUES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
e. RESULTS OF CALIBRATIONS:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
f. RESULTS OF ANALYSES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
g. DATES AND TIMES OF ANALYSES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
h. NAME OF PERSON(S) PERFORMING ANALYSES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
SECTION C: OPERATIONS AND MAINTENANCE	
TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. TREATMENT UNITS PROPERLY OPERATED: All treatment units were in operation.	<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 checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED: 2 permanent backup generators on site.	<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: Plant is on SCADA	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
5. ALL NEEDED TREATMENT UNITS IN SERVICE: Clarifier 1 was not in operation but was 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: Lyle Leubner, Jana Kohlmann, Others (3 shifts/day)	<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: Provided by the permittee	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
8. OPERATION AND MAINTENANCE MANUAL AVAILABLE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
9. STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
10. PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
11. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR: Collection System Only (See General Comments)	<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:	<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: There are 4 influent pumps. Two pumps are 150 hp that can pump up to 9.8 MGD, and two are 350 hp that can pump up to 30 MGD. 30 MGD is the maximum amount of flow the plant can process and be effective over a short time.	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
15. IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE

SECTION D: SAMPLING	
PERMITTEE SAMPLING MEETS PERMIT REQUIREMENTS	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS:	
1. SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES: Sampling takes place at the Parshall Flume	<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: 24-hr Composites	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" 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: BOD₅, TSS, DO, FCB, TRC, and pH (once/day); TP (once/year); NO₃+NO₂-N (once/year); Total Recoverable Arsenic (once/quarter)	<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: BOD₅ and TSS (Daily); Total Recoverable Arsenic (Quarterly)	<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 type="checkbox"/> N <input checked="" 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: 4' Parshall Flume	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. FLOW MEASURED AT EACH OUTFALL AS REQUIRED: Daily Monitoring	<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: Meter calibrated by Jack Strickler on October 12, 2018.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
5. RECORDS MAINTAINED OF CALIBRATION PROCEDURES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
6. CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
7. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
8. FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
9. HEAD MEASURED AT PROPER LOCATION:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
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 type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
7. COMMERCIAL LABORATORY USED: Yes and No. In-house lab samples all permit parameters except WET.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
a. LAB NAME: Environmental Services Company, Inc.	
b. LAB ADDRESS: 13715 West Markham, Little Rock, AR 72211	
c. PARAMETERS PERFORMED: WET Testing Only	
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: Pimephales promelas (Chronic) & Ceriodaphnia dubia (Chronic)	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
b. PROPER DILUTION SERIES FOLLOWED: 3%, 5%, 6%, 8% (Critical), and 11%	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
c. PROPER TEST METHODS AND DURATION: EPA-821-R-02-013	<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: No Failures	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
Since the permit renewed June 1, 2019, no WET report was available for review under this permit. I reviewed the September 2016 report. The facility had received a testing reduction during the previous permit cycle but is now back testing on a quarterly basis until such time they request and receive another reduction.	

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: Discharge to Arkansas River not accessible. Visual observations made from Parshall Flume.							
OUTFALL #:	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOATING SOLIDS	COLOR	OTHER
001	NONE	NONE	NONE	NONE	NONE	CLEAR	--
SECTION H: SLUDGE DISPOSAL							
SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS						<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE	
DETAILS: Permit 4665-WR-4 is currently pending. No land application from Faulkner Lake WWTP occurred during the permit term for Permit 4665-WR-3.							
1. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY:						<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE	
2. SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503:						<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE	
3. FOR LAND APPLIED SLUDGE, TYPE OF LAND APPLIED TO: (E.G., FOREST, AGRICULTURAL, PUBLIC CONTACT SITE):							
SECTION I: SAMPLING INSPECTION PROCEDURES							
SAMPLE RESULTS WITHIN PERMIT REQUIREMENTS						<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
DETAILS:							
1. SAMPLES OBTAINED THIS INSPECTION:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
2. TYPE OF SAMPLE: <input type="checkbox"/> GRAB:___ <input type="checkbox"/> COMPOSITE:___ METHOD:___ FREQUENCY:___							
3. SAMPLES PRESERVED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
4. FLOW PROPORTIONED SAMPLES OBTAINED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
5. SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
6. SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
7. SAMPLE SPLIT WITH PERMITTEE:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT:						<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE	
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: Facility has an IGP No-Exposure Exclusion (ARR000067)							
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: **7/9/2019** Time: **08:27**

Head in Inches: Feet: **0.46**

Type & Size of Primary Flow Measurement Device: **4' Parshall Flume**

Name & Model of Secondary Flow Measurement Device: **Milltronics OCM III**

Date of last Calibration of Secondary Flow Device: **10/12/18 by Jack Strickler**

Recorded Flow at Date & Time Listed Above: **2.853 MGD** (Facility Flow Meter)

Calculated Flow at Date & Time Listed Above: **2.686 MGD**

(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 =	2.853	-	2.686	X 100	
	2.686				

% Error =	0.167	X 100	
	2.686		

% Error =	0.06217	X 100	
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% Error =	6.217	%	
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Comments: **Device is within ±10% of true discharge rate.**

DMR Calculation Check

Reporting Period: From 2018 06 01 To 2018 06 30
 Year Month Day Year Month Day

Parameter Checked: BOD₅

	Loading Mass Mo. Avg. - lbs/day	Concentration Monthly Mo. Avg. - mg/l	7-day Avg. - mg/l
Reported Value:	<u>265.3</u>	<u>7.6</u>	<u>9.3</u>
Calculated Value:	<u>265.3</u>	<u>7.6</u>	<u>9.3</u>
Permit Value:	<u>3002</u>	<u>30</u>	<u>45</u>

If calculated value does not equal reported value, explain:
 DMR calculation check based off previous permit limitations since the new permit became effective on June 1, 2019. 7-day average included data from May 27 to June 30. Calculations matched what was reported by the permittee.

DMR Calculation Check

Reporting Period: From 2018 02 01 To 2018 02 28
 Year Month Day Year Month Day

Parameter Checked: TSS

	Loading Mass Mo. Avg. - lbs/day	Concentration Monthly Mo. Avg. - mg/l	7-day Avg. - mg/l
Reported Value:	<u>440.5</u>	<u>4.5</u>	<u>5.8</u>
Calculated Value:	<u>440.5</u>	<u>4.5</u>	<u>5.8</u>
Permit Value:	<u>3002</u>	<u>30</u>	<u>45</u>

If calculated value does not equal reported value, explain:
 DMR calculation check based off previous permit limitations since the new permit became effective on June 1, 2019. 7-day average included data from January 27 to February 23. Calculations matched what was reported by permittee.

Water Division Photographic Evidence Sheet

Location:	NLR Faulkner Lake Plant		
Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	08:10
Description:		Photo #:	1



Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	08:10
Description:		Photo #:	2

Bar screen waste being disposed of in landfill dumpster.



Water Division Photographic Evidence Sheet

Location:	NLR Faulkner Lake Plant		
Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	08:12
		Photo #:	3
Description:	Wet well following treatment at the bar screen.		



Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	08:17
		Photo #:	4
Description:	Influent pumps.		



Water Division Photographic Evidence Sheet

Location:	NLR Faulkner Lake Plant		
Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	08:19
		Photo #:	5
Description:	Influent parshall flume.		



Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	08:20
		Photo #:	6
Description:	Influent primary flow measuring device.		



Water Division Photographic Evidence Sheet

Location:	NLR Faulkner Lake Plant		
Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	09:19
		Photo #:	7
Description:	Influent composite sampler was refrigerated at -1.7° C.		



Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	08:34
		Photo #:	8
Description:	Aeration Basin 1.		



Water Division Photographic Evidence Sheet

Location:	NLR Faulkner Lake Plant				
Photographer:	Jason Bolenbaugh	Date:	7/9/2019	Time:	08:36
Witness:				Photo #:	9
Description:	Aeration Basin 2.				



Photographer:	Jason Bolenbaugh	Date:	7/9/2019	Time:	08:38
Witness:				Photo #:	10
Description:	Clarifier 1 that was in service but was not in operation.				



Water Division Photographic Evidence Sheet

Location:	NLR Faulkner Lake Plant		
Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	08:40
		Photo #:	11
Description:	Clarifier 2 well maintained.		



Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	08:43
		Photo #:	12
Description:	Clarifier 2 cleaning schedules during the summer are at least twice/week.		



Water Division Photographic Evidence Sheet

Location:	NLR Faulkner Lake Plant				
Photographer:	Jason Bolenbaugh	Date:	7/9/2019	Time:	08:43
Witness:				Photo #:	13
Description:	Clarifier 2				



Photographer:	Jason Bolenbaugh	Date:	7/9/2019	Time:	08:45
Witness:				Photo #:	14
Description:	Return Activated Sludge Pump Station				



Water Division Photographic Evidence Sheet

Location:	NLR Faulkner Lake Plant		
Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	08:48
		Photo #:	15
Description:	Chlorine Contact Chamber		



Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	08:51
		Photo #:	16
Description:	One of eight chlorine contact chambers. If all eight are in operation and the flow is 30 MGD, contact time is approximately 30 minutes.		



Water Division Photographic Evidence Sheet

Location:	NLR Faulkner Lake Plant		
Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	08:27
		Photo #:	17
Description:	Effluent discharge through a 4' Parshall Flume.		

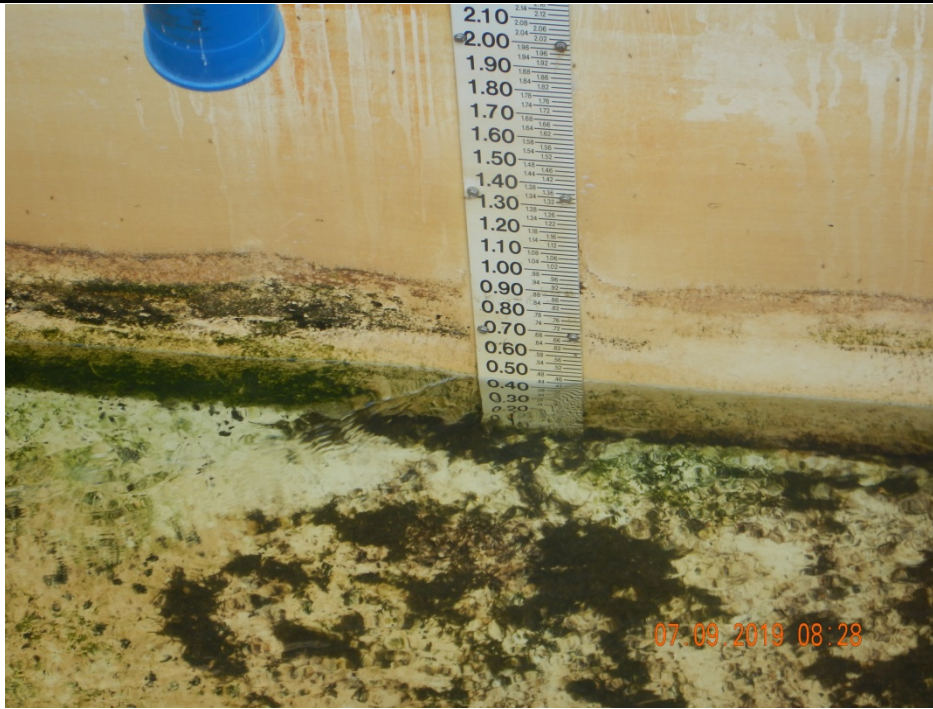


Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	08:27
		Photo #:	18
Description:	Flow meter reading of 2.853 MGD.		



Water Division Photographic Evidence Sheet

Location:	NLR Faulkner Lake Plant		
Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	08:28
		Photo #:	19
Description:	Primary flow measuring device reading 0.46 inches.		



Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	08:32
		Photo #:	20
Description:	Effluent composite sampler tubing in good condition.		



Water Division Photographic Evidence Sheet			
Location:	NLR Faulkner Lake Plant		
Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	09:00
		Photo #:	21
Description:	One of two sludge belt presses. Operation of the belt presses are on a monthly rotation.		
			
Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	09:01
		Photo #:	22
Description:	Sludge belt press in operation.		
			

Water Division Photographic Evidence Sheet

Location:	NLR Faulkner Lake Plant		
Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	09:04
		Photo #:	23
Description:	North Gravity Thickener		



Photographer:	Jason Bolenbaugh	Date:	7/9/2019
Witness:		Time:	09:08
		Photo #:	24
Description:	East Aerated Sludge Lagoon not in use.		



Water Division Photographic Evidence Sheet

Location:	NLR Faulkner Lake Plant				
Photographer:	Jason Bolenbaugh	Date:	7/9/2019	Time:	09:09
Witness:				Photo #:	25
Description:	West Aerated Sludge Lagoon in operation.				



City of North Little Rock – Faulkner Lake WWTP.

