



AR K A N S A S
Department of Environmental Quality

WATER DIVISION INSPECTION REPORT

AFIN: 18-00879	PERMIT #: AR0022039	DATE: 8/14/2019
COUNTY: 18 Crittenden	PDS #: 110229	MEDIA: WN
GPS LAT: 35.124212 LONG: -90.179016 LOCATION: Entrance		

FACILITY INFORMATION	INSPECTION INFORMATION																													
NAME: City of West Memphis WWTP LOCATION: 502 South Loop Rd. CITY: West Memphis	FACILITY TYPE: 1 - Municipal INSPECTOR ID#: 112347 S - State FACILITY EVALUATION RATING: N INSPECTION TYPE: SSO/Collection System DATE(S): 8/14/2019 ENTRY TIME: 10:10 EXIT TIME: 15:27 PERMIT EFFECTIVE DATE: 11/1/2018 PERMIT EXPIRATION DATE: 10/31/2023																													
RESPONSIBLE OFFICIAL	FAYETTEVILLE SHALE RELATED: N FAYETTEVILLE SHALE VIOLATIONS: N INSPECTION PARTICIPANTS NAME/TITLE/PHONE/FAX/EMAIL/ETC.: Paul Holloway/ Director of Wastewater Todd Pedersen/ General Manager Ward Wimbish/ Assistant General Manager																													
NAME / TITLE: Todd Pedersen / General Manager COMPANY: West Memphis Utilities MAILING ADDRESS: P.O. Box 1868 CITY, STATE, ZIP: West Memphis AR 72303 PHONE & EXT. / FAX: / EMAIL:																														
CONTACTED DURING INSPECTION: No																														
AREA EVALUATIONS <small>(S=Satisfactory, M=Marginal, U=Unsatisfactory, N=Not Applicable/Evaluated)</small>																														
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%;">U</td> <td style="width: 30%;">PERMIT</td> <td style="width: 5%;">N</td> <td style="width: 30%;">FLOW MEASUREMENT</td> <td style="width: 5%;">N</td> <td style="width: 25%;">STORMWATER</td> </tr> <tr> <td>S</td> <td>RECORDS/REPORTS</td> <td>N</td> <td>LABORATORY</td> <td>N</td> <td>FACILITY SITE REVIEW</td> </tr> <tr> <td>S</td> <td>OPERATION & MAINTENANCE</td> <td>N</td> <td>EFFLUENT/RECEIVING WATER</td> <td>N</td> <td>SELF-MONITORING PROGRAM</td> </tr> <tr> <td>N</td> <td>SAMPLING</td> <td>N</td> <td>SLUDGE HANDLING/DISPOSAL</td> <td>N</td> <td>PRETREATMENT</td> </tr> <tr> <td>N</td> <td colspan="5">OTHER:</td> </tr> </table>	U	PERMIT	N	FLOW MEASUREMENT	N	STORMWATER	S	RECORDS/REPORTS	N	LABORATORY	N	FACILITY SITE REVIEW	S	OPERATION & MAINTENANCE	N	EFFLUENT/RECEIVING WATER	N	SELF-MONITORING PROGRAM	N	SAMPLING	N	SLUDGE HANDLING/DISPOSAL	N	PRETREATMENT	N	OTHER:				
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SUMMARY OF FINDINGS																														
<p>The hose used for the line collapse on Woods Street had a hole in it that was resulting in an unpermitted discharge of untreated wastewater (Photo 18) in violation of A.C.A. §8-4-217.(b)(1).</p>																														
GENERAL COMMENTS																														
INSPECTOR'S SIGNATURE: Sarah Frasher	DATE: 12/3/2019																													
SUPERVISOR'S SIGNATURE: Brent L. Walker	DATE: 12/3/2019																													

COLLECTION SYSTEM INSPECTION AND OVERALL RATING		<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
PROVIDE A BRIEF DESCRIPTION OF THE COLLECTION SYSTEM: <u>Gravity and force main system</u>		
POPULATION SERVED/NUMBER OF RESIDENTIAL AND COMMERCIAL CONNECTIONS: <u>~26,000 population</u>		
FEET OF SEWER SYSTEM: <u>~167 miles</u>		
AGE OF SYSTEM: <u>1950s and newer</u>		
DOES THE SYSTEM EXPERIENCE PROBLEMS DURING DRY OR WET WEATHER (EXPLAIN): <u>High I&I</u>		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
IS THERE A SYSTEM IN PLACE FOR REPORTING SSOS TO ADEQ (DESCRIBE): <u>Environmental Quality Department reports to ADEQ</u>		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
ARE ALL SSOs REPORTED REGARDLESS OF SIZE:		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
HAVE SSOs REACHED "WATERS OF THE STATE" (LIST DATE AND LOCATION OF EACH): <u>See ADEQ Database</u>		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
PUMP STATIONS		<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
NUMBER OF PUMP STATIONS IN SYSTEM: <u>40</u>	NUMBER WITH BACKUP POWER: <u>0</u>	
HOW OFTEN ARE PUMP STATIONS INSPECTED/MONITORED: <u>5/week</u>		
ARE MAINTENANCE RECORDS AND/OR OPERATOR LOGS KEPT: <u>Yes</u>		
ADEQUATE INVENTORY OF SPARE PARTS: <u>Yes</u>		
TYPE OF REMOTE ELECTRONIC MONITORING USED (I.E. SCADA OR AUTO DIALERS): <u>SCADA</u>		
BRIEF SUMMARY OF EMERGENCY PROCEDURES: <u>2 auxiliary or electrical emergency bypass pumps; partnership with CWL and PLWC for parts and equipment</u>		
NUMBER OF PUMP STATIONS VISITED DURING INSPECTION (SEE ATTACHED CHECKLISTS FOR EACH): <u>3</u>		
SATELLITE SYSTEMS		<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DOES THE COLLECTION SYSTEM RECEIVE FLOW FROM SATELLITE SYSTEMS: <u>Yes</u>		
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:		
BRIEFLY DESCRIBE THE SATELLITE SYSTEM: <u>~75 residential customers</u>		
ANY KNOWN PROBLEMS WITH SATELLITE SYSTEM:		
NAME, ADDRESS AND PHONE NUMBER OF PERSON RESPONSIBLE FOR SATELLITE SYSTEM: <u>Crittenden County Sewer Board; West Memphis, AR, 870-735-4151</u>		

PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)	
GENERAL INFORMATION AND OVERALL EVALUATION	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: Station #1 (corner of Woods Street and Polk Avenue)	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: <u>2</u>	NUMBER OPERATIONAL: <u>2</u>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
EVIDENCE OF RECENT OVERFLOWS OR HIGH LEVELS:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
GENERAL OPERATION AND MAINTENANCE	
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAGE OF UNRELATED EQUIPMENT:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GATES/DOORS/HATCHES/LIDS/ETC. LOCKED TO PREVENT UNAUTHORIZED ACCESS AND/OR TAMPERING:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
WET WELLS, SUMPS AND PITS ADEQUATELY COVERED, GRATED OR OTHERWISE PROTECTED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ELECTRICAL CONTROLS COVERS CONDUIT AND EQUIPMENT PROPERLY INSTALLED AND MAINTAINED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GUARDS AND SHIELDS IN PLACE AROUND MOVING EQUIPMENT (BELTS, PULLEYS, DRIVESHAFTS, ETC.) :	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE VENTILATION TO PREVENT EXCESSIVE CONDENSATION AND/OR GASES AND FUMES:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE LIGHTING FOR ROUTINE INSPECTION/MAINTENANCE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SEALS, VALVES AND PACKING ADEQUATELY MAINTAINED TO PREVENT LEAKS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN WET WELLS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
BACKUP POWER AND ALARMS	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SCADA SYSTEM (LIST PARAMETERS MONITORED): <u>high/low levels, pump running, pH</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)	
GENERAL INFORMATION AND OVERALL EVALUATION	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: Pump Station #8 (corner of 7th Street and East Jefferson Avenue)	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input checked="" type="checkbox"/> COMMERCIAL <input checked="" type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: <u>4</u>	NUMBER OPERATIONAL: <u>4</u>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
EVIDENCE OF RECENT OVERFLOWS OR HIGH LEVELS:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
GENERAL OPERATION AND MAINTENANCE	
	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAGE OF UNRELATED EQUIPMENT:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GATES/DOORS/HATCHES/LIDS/ETC. LOCKED TO PREVENT UNAUTHORIZED ACCESS AND/OR TAMPERING:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
WET WELLS, SUMPS AND PITS ADEQUATELY COVERED, GRATED OR OTHERWISE PROTECTED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ELECTRICAL CONTROLS COVERS CONDUIT AND EQUIPMENT PROPERLY INSTALLED AND MAINTAINED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GUARDS AND SHIELDS IN PLACE AROUND MOVING EQUIPMENT (BELTS, PULLEYS, DRIVESHAFTS, ETC.) :	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE VENTILATION TO PREVENT EXCESSIVE CONDENSATION AND/OR GASES AND FUMES:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE LIGHTING FOR ROUTINE INSPECTION/MAINTENANCE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SEALS, VALVES AND PACKING ADEQUATELY MAINTAINED TO PREVENT LEAKS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN WET WELLS:	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
BACKUP POWER AND ALARMS	
	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SCADA SYSTEM (LIST PARAMETERS MONITORED): <u>high/low levels, pump running, pH</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)	
GENERAL INFORMATION AND OVERALL EVALUATION	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: Pump Station #4	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: <u>2</u>	NUMBER OPERATIONAL: <u>2</u>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
EVIDENCE OF RECENT OVERFLOWS OR HIGH LEVELS:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
GENERAL OPERATION AND MAINTENANCE	
<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA	
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAGE OF UNRELATED EQUIPMENT:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GATES/DOORS/HATCHES/LIDS/ETC. LOCKED TO PREVENT UNAUTHORIZED ACCESS AND/OR TAMPERING:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
WET WELLS, SUMPS AND PITS ADEQUATELY COVERED, GRATED OR OTHERWISE PROTECTED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ELECTRICAL CONTROLS COVERS CONDUIT AND EQUIPMENT PROPERLY INSTALLED AND MAINTAINED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GUARDS AND SHIELDS IN PLACE AROUND MOVING EQUIPMENT (BELTS, PULLEYS, DRIVESHAFTS, ETC.) :	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE VENTILATION TO PREVENT EXCESSIVE CONDENSATION AND/OR GASES AND FUMES:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE LIGHTING FOR ROUTINE INSPECTION/MAINTENANCE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SEALS, VALVES AND PACKING ADEQUATELY MAINTAINED TO PREVENT LEAKS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN WET WELLS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
BACKUP POWER AND ALARMS	
<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SCADA SYSTEM (LIST PARAMETERS MONITORED): <u>high/low levels, pump running, pH</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

Water Division Photographic Evidence Sheet

Location:	City of West Memphis WWTP		
Photographer:	Sarah Frasher	Date:	8/14/2019
Time:	13:34	Witness:	None
Photo #:	1	Description:	View of the Pump Station #1.



Photographer:	Sarah Frasher	Date:	8/14/2019
Time:	13:29	Witness:	None
Photo #:	2	Description:	View of the pumps of the inside of the pump station.



Water Division Photographic Evidence Sheet

Location:	City of West Memphis WWTP		
Photographer:	Sarah Frasher	Date:	8/14/2019
Time:	13:29	Witness:	None
Photo #:	3	Description:	View of the Pump Station #1 electrical equipment.



Photographer:	Sarah Frasher	Date:	8/14/2019
Time:	13:33	Witness:	None
Photo #:	4	Description:	View of the inside of the wet well of the Pump Station #1.



Water Division Photographic Evidence Sheet

Location:	City of West Memphis WWTP				
Photographer:	Sarah Frasher	Date:	8/14/2019	Time:	13:56
Witness:	None	Photo #:	5		
Description:	View of Pump Station #8.				



Photographer:	Sarah Frasher	Date:	8/14/2019	Time:	13:50
Witness:	None	Photo #:	6		
Description:	View of the inside of Pump Station #8.				



Water Division Photographic Evidence Sheet

Location:	City of West Memphis WWTP				
Photographer:	Sarah Frasher	Date:	8/14/2019	Time:	13:51
Witness:	None	Photo #:	7		
Description:	View of the pumps inside the Pump Station #8.				



Photographer:	Sarah Frasher	Date:	8/14/2019	Time:	13:53
Witness:	None	Photo #:	8		
Description:	View of the wet well for Pump Station #8.				



Water Division Photographic Evidence Sheet

Location:	City of West Memphis WWTP		
Photographer:	Sarah Frasher	Date:	8/14/2019
Time:	14:26	Witness:	None
Photo #:	9	Description:	View of Pump Station #4.



Photographer:	Sarah Frasher	Date:	8/14/2019
Time:	14:08	Witness:	None
Photo #:	10	Description:	View of the inside of Station #4



Water Division Photographic Evidence Sheet

Location:	City of West Memphis WWTP		
Photographer:	Sarah Frasher	Date:	8/14/2019
Time:	14:06	Witness:	None
Photo #:	11	Description:	View of the electrical equipment inside the Pump Station #8.



Photographer:	Sarah Frasher	Date:	8/14/2019
Time:	14:08	Witness:	None
Photo #:	12	Description:	View of the wet well for Pump Station #8.



Water Division Photographic Evidence Sheet

Location:	City of West Memphis WWTP				
Photographer:	Sarah Frasher	Date:	8/14/2019	Time:	13:38
Witness:	None			Photo #:	13
Description:	View of the collapsed line on Woods Street.				



Photographer:	Sarah Frasher	Date:	8/14/2019	Time:	13:46
Witness:	None			Photo #:	14
Description:	Overview of the collapsed line at the corner of Woods Street and Jackson Avenue.				



Water Division Photographic Evidence Sheet

Location:	City of West Memphis WWTP		
Photographer:	Sarah Frasher	Date:	8/14/2019
Time:	13:40	Witness:	None
Photo #:	15	Description:	View of the Pump Station on Woods Street.



Photographer:	Sarah Frasher	Date:	8/14/2019
Time:	13:42	Witness:	None
Photo #:	16	Description:	Close-up view of the Pump Station on Woods Street. Note the hoses used for wastewater transfer.



Water Division Photographic Evidence Sheet

Location:	City of West Memphis WWTP				
Photographer:	Sarah Frasher	Date:	8/14/2019	Time:	13:43
Witness:	None	Photo #:	17		
Description:	View of the line collapse on Woods Street. Note the hoses and broken concrete.				



Photographer:	Sarah Frasher	Date:	8/14/2019	Time:	13:43
Witness:	None	Photo #:	18		
Description:	View of the pump used for wastewater transfer. Note the hole in the hose.				



Water Division Photographic Evidence Sheet

Location:	City of West Memphis WWTP		
Photographer:	Sarah Frasher	Date:	8/14/2019
Time:	13:43	Witness:	None
Photo #:	19	Description:	View of the hose transferring wastewater.



Photographer:	Sarah Frasher	Date:	8/14/2019
Time:	14:39	Witness:	None
Photo #:	20	Description:	View of the manhole recently rehabbed.



Water Division Photographic Evidence Sheet

Location:	City of West Memphis WWTP				
Photographer:	Sarah Frasher	Date:	8/14/2019	Time:	14:38
Witness:	None	Photo #:	21		
Description:	View of the inside of the manhole.				



Photographer:	Sarah Frasher	Date:	8/14/2019	Time:	14:48
Witness:	None	Photo #:	22		
Description:	View of the inside of another recently rehabbed manhole.				





WEST MEMPHIS UTILITY COMMISSION
P O Box 1868 604 East Cooper
Phone: 870-735-3355 Fax: 870-732-7623
West Memphis, AR 72301

December 10, 2019

Arkansas Department of
Environmental Quality
Water Division
Inspection Branch
5301 Northshore Drive
North Little Rock, Arkansas 72118-5317

Re: City of West Memphis WWTP Inspection
AFIN: 18-00879 Permit No: AR0022039 & ARR00C405

Enclosed is the response to the Compliance Inspection performed August 14, 2019.

Summary of Findings: Wastewater Treatment Plant

1. Vegetation was observed growing in the Oxidation Ditches.

Vegetation was removed from the Oxidation Ditches. Currently, we are using Roundup. We will look for another product to use.



WWTP-Oxidation Ditch (Photo 1)



WWTP-Oxidation Ditch (Photo 2)

2. Accumulation of algae in the northwest and southwest clarifier weirs.

We will perform routine cleaning program on the weirs.

3. Vegetation was observed growing in the southwest clarifier.

Vegetation was removed. Will establish a cleaning program to monitor plant growth throughout the plant site.



WWTP-Clarifier (Photo1)



WWTP-Clarifier (Photo 2)



WWTP-Clarifier (Photo 3)

Additional Summary of Findings: Wastewater Treatment Plant

1. Roll-off dumpsters were not adequately covered and/or other Best Management Practices (BMPs) implemented as required by Part 3.1.2 of the permit.

The roll-off dumpster in question is the wastewater treatment plant trash dumpster that does not require a cover. There is no sludge in this dumpster. Water was visible out the dumpster. Gaskets on the doors will be replaced.

2. An overflow from the Oxidation Ditches was observed in violation of Part 3.1.3 of the permit.

We will modify the side boards on the channels to keep overflow from going on the ground.

3. A brief review of the SWPPP during the Reconnaissance Inspection revealed the SWPPP was not updated when the permit was renewed as required by Part 4.1 of the permit. The SWPPP must be updated by the effective date of the permit, which was July 1, 2019.

The SWPPP was updated the day of the inspection, which was August 14, 2019.

Summary of Findings: Collection System

The hose used for the line collapse on Woods Street had a hole in it that was resulting in an unpermitted discharge of untreated wastewater, in violation of A.C.A. 8-4-217(b)(1).

Leaking hose on the discharge side of the pump on Woods street. The hose was replaced the day of the inspection.



Collection System-Woods (Photo1)

If you need further assistance, please contact me at (870) 702-5110) or email me at tpedersen@citywm.com.

Sincerely,

Todd Pedersen
General Manager
West Memphis Utility