

February 2, 2021

Rhonda Halbrook, Mayor City of Melbourne P.O. Box 800 Melbourne, AR 72556

RE: City of Melbourne Inspection (Izard Co)

AFIN: 33-00026 NPDES Permit No.: AR0020036

Dear Honorable Mayor Halbrook:

On October 20, 2020, 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.

Please refer to the "Summary of Findings" section of the inspection report and provide a written response for each item that was noted. This response should be mailed to the attention of the Office of Water Quality Compliance Branch at the address below my signature or emailed to Water-Inspection-Report@adeq.state.ar.us. This response should contain documentation describing the course of action taken to correct each item noted. The corrective action(s) should be completed as soon as possible and the written response with all necessary documentation (i.e., photos) is due by February 16, 2021.

If I can be of any assistance please contact me at beck@adeq.state.ar.us or (479) 968-7339 extension 16.

Sincerely,

Amy Beck

Inspector, Office of Water Quality

5301 Northshore Drive, North Little Rock, AR, 72118



SAMPLING OTHER:

ENVIRONMENTAL QUALITY

FACILITY INFORMATION

OFFICE OF WATER QUALITY INSPECTION REPORT

AFIN: 33-00026 | PERMIT #: AR0020036 | DATE: 10/20/2020

COUNTY: **33 Izard** PDS #: **114797** MEDIA: **WN**

INSPECTION INFORMATION

N PRETREATMENT

GPS LAT: 36.059307 LONG: -91.926076 LOCATION: Entrance

| | y of Melbourne | | | 1 - Municipal | | 5537 | ID#: S - S | tate | |
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| LOCA | | | | FACILITY EVALUATION RAT 2 - Marginal | | | Compliance Evaluation | | |
| | lbourne | | | DATE(S): 10/20/2020 | 11:00 | | 13:0 | PERMIT EFFECTIVE DATE: | |
| | RESPONSIBLE OFFIC | CIAL | - | 10/20/2020 | | • | | 11/1/2015 PERMIT EXPIRATION DATE: | |
| | E / TITLE onda Halbrook / Mayor | | | | | | | 10/31/2020 | |
| COMF | PANY: | | FAYETTEVILL | E SH | ALE I | RELA | ATED: N | | |
| | y of Melbourne | FAYETTEVILL | E SH | ALE \ | VIOL | ATIONS: N | | | |
| | D. Box 800 | INSPECTION PARTICIPANTS | | | | | | | |
| | STATE, ZIP: Ibourne AR 72556 | | NAME/TITLE/PHONE/FAX/EMAIL/ETC.: Devin Ramsey, Class I Operator (#013050), | | | | | | |
| PHONE & EXT: / FAX: | | | | dramsey2015@hotmail.com; | | | | | |
| 870 | 0-368-4215 / 870-368-4721 | | | James Buckey | . 0 | .44 | | da a a a da a da a ada | |
| | yofmelbourne@centurytel.net | | | | | | | jineer, Landmark jdreher@landmarkeng.co; | |
| CC | INTACTED DURING INSPECTION | | | | | | | | |
| | | | Kerri McCabe, Inspector Supervisor, ADEE | | | | | | |
| | (\$=\$ | atisfac | AREA EVA tory, M=Marginal, U=Unsat | LUATIONS | hle/Evalu | ated) | | | |
| S | PERMIT | U | FLOW MEASUR | | | | STOR | RMWATER | |
| S | RECORDS/REPORTS | S | LABORATORY | | | M F | ACIL | LITY SITE REVIEW | |
| U | OPERATION & MAINTENANCE | S | EFFLUENT/REG | CEIVING WATE | R | M S | SELF- | -MONITORING PROGRAM | |

SUMMARY OF FINDINGS

S | SLUDGE HANDLING/DISPOSAL

- 1. Portions of the treatment system are not property maintained, violating of Part III, Section B. 1. A. of the permit. Specifically:
 - a. Floatables in the clarifier need to be skimmed,
 - b. Algae and debris must be removed from the Parshall flume, and;
 - c. The staff gauge needs to be cleaned.
- 2. All removed substance must be disposed of properly as required by Part III, Section B. 6. A. of the permit. During this inspection, screenings were observed on the ground, sludge overflow had not been properly cleaned up, and sludge was outside the drying beds.
- 3. The secondary flow measuring device must be calibrated as required by Part III, Section C. 2. of the permit. Annual calibration is recommended to show compliance with this permit requirement.

GENERAL COMMENTS

On Tuesday, October 20, 2020, Inspector Supervisor Kerri McCabe and I performed an inspection of the POTW with the participants listed above. The inspection consisted of facility assessment and record review.

Facility assessment:

The current treatment system consists of bar screen, oxidation ditch, dual secondary clarifiers, chlorination/ dechlorination, and cascade post-aeration. The facility has been previously cited for many of the maintenance items above and should immediately implement a maintenance or housekeeping schedule. The city is in the process of funding a significant rehabilitation of the treatment works, to include:

- Rehab of the oxidation ditch to remove the rotors and replace with diffuse air system.
- Re-plumb the clarifiers to work in series for polishing.
- Rehab of recirculation sludge pump.
- Replacing chlorination with ultraviolet disinfection.
- Looking into belt press for sludge handling with sludge disposal at landfill.

Record review:

DMR violations were reviewed from January 2019 to September 2020, revealing the facility has a history of permit non-compliance with NH3-N and TRC. The facility has a CAP to address effluent quality violations. Progress reports are submitted as required. A detailed DMR check was performed for four months in 2019: January, April, July, and October. Records are complete and organized. Sample results are accurately reported on DMR.

| -Amz Beck | |
|--------------------------------------|-----------------------|
| INSPECTOR'S SIGNATURE: Amy Beck | DATE: 1/28/2021 |
| Kerri M's Cale | |
| SUPERVISOR'S SIGNATURE: Kerri McCabe | DATE: 2/1/2021 |

| PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS DETAILS: CORRECT NAME AND MAILING ADDRESSES OF PERMITTEE: | DETAILS: | SECTION A: PERMIT VERIFICATION | |
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| 12. IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED: 13. HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS: 14. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT: 15. IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED: 16. IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED: 17. IN | 12. IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED: | 10. PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED: | ☑Y □N □NA □NE |
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| 13. HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS: 14. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT: 15. HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS: 16. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT: 17. INC. INC. INC. INC. INC. INC. INC. INC | 13. HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS: 14. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT: 17. DY IN DNA DNE | 12. IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED: | |
| 14. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT: | 14. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT: | 13. HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS: | |
| | | 14. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT: | |
| | | | |
| | | | |

| SI | ECTION D: SAMPLING | |
|-----|---|------------------|
| PI | ERMITTEE SAMPLING MEETS PERMIT REQUIREMENTS | ☑S □M □U □NA □NE |
| DI | ETAILS: | |
| 1. | SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT: | ☑y □n □na □ne |
| 2. | LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES: | ☑Y □N □NA □NE |
| 3. | FLOW PROPORTIONED SAMPLES OBTAINED WHEN REQUIRED BY PERMIT: | □Y □N ØNA □NE |
| 4. | SAMPLING AND ANALYSES COMPLETED ON PARAMETERS SPECIFIED IN PERMIT: | ☑y □n □na □ne |
| 5. | SAMPLING AND ANALYSES PERFORMED AT FREQUENCY SPECIFIED IN PERMIT: | ☑y □n □na □ne |
| 6. | SAMPLE COLLECTION PROCEDURES ADEQUATE: | ☑y □n □na □ne |
| í | a. SAMPLES REFRIGERATED DURING COMPOSITING: | □Y □N ☑NA □NE |
| - 1 | p. PROPER PRESERVATION TECHNIQUES USED: | ☑Y □N □NA □NE |
| (| c. CONTAINERS AND SAMPLE HOLDING TIMES CONFORM TO 40 CFR 136: | ☑y □n □na □ne |
| 7. | IF MONITORING IS PERFORMED MORE OFTEN THAN REQUIRED ARE RESULTS REPORTED ON THE DMR: | □y □n ☑na □ne |
| | | |
| SI | ECTION E: FLOW MEASUREMENT | |
| PI | ERMITTEE FLOW MEASUREMENT MEETS PERMIT REQUIREMENTS | □S □M ☑U □NA □NE |
| D | ETAILS: | |
| 1. | PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED: TYPE OF DEVICE: Parshall flume | □y ☑n □na □ne |
| 2. | FLOW MEASURED AT EACH OUTFALL AS REQUIRED: | ☑y □n □na □ne |
| 3. | SECONDARY INSTRUMENTS (TOTALIZERS, RECORDERS, ETC.) PROPERLY OPERATED AND MAINTAINED: | □y ☑n □na □ne |
| 4. | CALIBRATION FREQUENCY ADEQUATE: | □y ☑n □na □ne |
| 5. | RECORDS MAINTAINED OF CALIBRATION PROCEDURES: | □y □n ☑na □ne |
| 6. | CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE: | □y □n □na ☑ne |
| 7. | FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE: | ☑y □n □na □ne |
| 8. | FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES: | ☑Y □N □NA □NE |
| 9. | HEAD MEASURED AT PROPER LOCATION: | ☑Y □N □NA □NE |
| | | |
| SI | ECTION F: LABORATORY | |
| PI | ERMITTEE LABORATORY PROCEDURES MEET PERMIT REQUIREMENTS | ⊠S □M □U □NA □NE |
| D | ETAILS: | |
| 1. | EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(B) FOR SLUDGES): | ☑Y □N □NA □NE |
| 2. | IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED: | □y □n ☑na □ne |
| 3. | SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT: | ☑Y □N □NA □NE |
| 4. | QUALITY CONTROL PROCEDURES ADEQUATE: | ☑y □n □na □ne |
| 5. | DUPLICATE SAMPLES ARE ANALYZED ≥10% OF THE TIME: | ☑Y □N □NA □NE |
| 6. | SPIKED SAMPLES ARE ANALYZED ≥10% OF THE TIME: | ☑Y □N □NA □NE |
| 7. | COMMERCIAL LABORATORY USED: | ☑Y □N □NA □NE |
| í | a. LAB NAME: Arkansas Testing Laboratories | |
| ı | b. LAB ADDRESS: <u>Searcy, AR</u> | |
| (| c. PARAMETERS PERFORMED: <u>All parameters - CBOD5, TSS, FCB, pH, TRC, DO, NH3-N</u> | |
| 8. | BIOMONITORING PROCEDURES ADEQUATE: | □Y □N ☑NA □NE |
| í | a. PROPER ORGANISMS USED: | □Y □N ☑NA □NE |
| ı | p. PROPER DILUTION SERIES FOLLOWED: | □Y □N ☑NA □NE |
| (| c. PROPER TEST METHODS AND DURATION: | □y □n ☑na □ne |
| | d. RETESTS AND/OR TRE PERFORMED AS REQUIRED: | □Y □N ☑NA □NE |
| | | |

| | <u> </u> | <u> </u> | | • | 26, Permit #: ARU | 020036 | |
|----------------|---------------------|---------------------|---------------------|--------------------|-----------------------|-------------|------------|
| | : EFFLUENT/R | | | ATIONS | | | |
| BASED ON | N VISUAL OBS | ERVATIONS C | DNLY | | | ⊠S □M □ | U DNA DNE |
| DETAILS: | Observed at Mi | II Creek | | | | | |
| OUTFALL #: | OIL SHEEN | GREASE | TURBIDITY | VISIBLE FOAM | FLOATING SOLIDS | COLOR | OTHER |
| 001 | No | No | No | No | No | Clear | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| SECTION H | I: SLUDGE DIS | POSAL | | | | | |
| SLUDGE [| DISPOSAL ME | ETS PERMIT F | REQUIREMEN' | TS | | ØS □M □ | U DNA DNE |
| DETAILS: | Sludge land ap | plied under Sta | te No-Discharg | e permit 5081-V | <u>VR-1.</u> | | |
| 1. SLUDGE M | IANAGEMENT ADEQU | ATE TO MAINTAIN EF | FLUENT QUALITY: | - | | ⊠s □m | □u □na □ne |
| 2. SLUDGE R | ECORDS MAINTAINED | AS REQUIRED BY 40 | 0 CFR 503: | | | ⊠s □m | □U □NA □NE |
| 3. FOR LAND | APPLIED SLUDGE, TY | PE OF LAND APPLIE | D TO: (E.G., FOREST | , AGRICULTURAL, PU | BLIC CONTACT SITE): A | gricultural | |
| | | | | | | | |
| SECTION I: | SAMPLING IN | SPECTION PRO | CEDURES | | | | |
| SAMPLE F | RESULTS WITH | IIN PERMIT R | EQUIREMENT | S | | | U ⊠NA □NE |
| DETAILS: | | | | | | | |
| 1. SAMPLES | OBTAINED THIS INSPI | ECTION: | | | | □Y | □n ☑na □ne |
| 2. TYPE OF S | SAMPLE: GRAB: | □COMPOSITE: N | METHOD: FREQUE | ENCY: | | | |
| 3. SAMPLES | PRESERVED: | | | | | □Y | □n ☑na □ne |
| 4. FLOW PRO | PORTIONED SAMPLE | S OBTAINED: | | | | □Y | □n ☑na □ne |
| 5. SAMPLE O | BTAINED FROM FACIL | LITY'S SAMPLING DE\ | /ICE: | | | □Y | □n ☑na □ne |
| 6. SAMPLE R | EPRESENTATIVE OF | VOLUME AND NATUR | E OF DISCHARGE: | | | □Y | □n ☑na □ne |
| 7. SAMPLE S | PLIT WITH PERMITTEI | Ε: | | | | □Y | □n Øna □ne |
| 8. CHAIN-OF- | -CUSTODY PROCEDU | RES EMPLOYED: | | | | □Y | □n ☑na □ne |
| 9. SAMPLES | COLLECTED IN ACCO | RDANCE WITH PERM | IT: | | | □Y | □n ☑na □ne |
| | | | | | | | |
| SECTION J | : STORM WATI | ER POLLUTION | PREVENTION | PLAN | | | |
| STORM W | ATER MANAG | EMENT MEET | S PERMIT RE | QUIREMENTS | 3 | | U ⊠NA □NE |
| DETAILS: | | | | | | | |
| 1. SWPPP UF | PDATED AS NEEDED: | _ DATE OF LAST UP | DATE: | | | □Y | □n ☑na □ne |
| 2. SITE MAP | INCLUDING ALL DISCH | HARGES AND SURFA | CE WATERS: | | | □Y | □n ☑na □ne |
| 3. POLLUTIO | N PREVENTION TEAM | IDENTIFIED: | | | | □Y | □n ☑na □ne |
| 4. POLLUTIO | N PREVENTION TEAM | PROPERLY TRAINED |) : | | | □Y | □n Øna □ne |
| 5. LIST OF PO | OTENTIAL POLLUTANT | SOURCES: | | | | □Y | □n ☑na □ne |
| 6. LIST OF PO | OTENTIAL SOURCES A | AND PAST SPILLS ANI | D LEAKS: | | | □Y | □n ☑na □ne |
| 7. ALL NON-S | STORM WATER DISCH | ARGES ARE AUTHOR | RIZED: | | | □Y | □n Øna □ne |
| 8. LIST OF ST | TRUCTURAL BMPS: | | | | | □Y | □n Øna □ne |
| 9. LIST OF NO | ON-STRUCTURAL BMF | PS: | | | | □Y | □n Øna □ne |
| 10. BMPS PRO | PERLY OPERATED A | ND MAINTAINED: | | | | □Y | □n ☑na □ne |
| 11. INSPECTION | ONS CONDUCTED AS | REQUIRED: | | | | □Y | □n ☑na □ne |

DMR Calculation Check

| Reporting Period: | From | 2019 | 04 | 01 | _ To | 2019 | 04 | 30 |
|--------------------|------|----------|-------|-------|------|--------|-----------|--------|
| | | Year | Month | Day | | Year | Month | Day |
| Parameter Checked: | | TSS | _ | | | | | |
| | | Loading | | | | Concer | ntration | |
| | | Mass | | | | Mon | ithly | |
| | Mo. | Avg Ibs/ | day | Mo. A | vg r | mg/l | 7-day Avg | J mg/l |
| Reported Value: | | 31.7 | | | 8 | | 10 | |
| Calculated Value: | | 31.7 | | | 8 | | 10 | |
| Permit Value: | | 103 | | | 30 | | 45 | |

If calculated value does not equal reported value, explain:

DMR Calculation Check

| Reporting Period: | From | 2019 | 10 | 01 | _ To | 2019 | 10 | 31 | |
|--------------------|------|----------|-------|-------|------|--------|-----------|--------|--|
| | | Year | Month | Day | | Year | Month | Day | |
| Parameter Checked: | | FCB | _ | | | | | | |
| | | Loading | | | | Concer | tration | | |
| | | Mass | | | | Mon | thly | | |
| | Mo. | Avg Ibs/ | day | Mo. A | vg r | mg/l | 7-day Avg | j mg/l | |
| Reported Value: | | N/A | | | 7 | | 25 | | |
| Calculated Value: | N/A | | | 7 | | | 25 | | |
| Permit Value: | | N/A | | | 1000 | | 200 | 0 | |

If calculated value does not equal reported value, explain:

| Office of Water Quality Photographic Evidence Sheet | | | | | | | | | |
|---|---|------|--|--|-------|----------|---|--|--|
| Location: | Location: City of Melbourne | | | | | | | | |
| Photograp | Photographer: Kerri McCabe Date: October 20, 2020 | | | | Time: | 1212 | | | |
| Witness: | Amy | Beck | | | | Photo #: | 1 | | |

Description: Screenings should be disposed properly.



| Photographer: Kerri McCabe | Date: | October 20, 2020 | Time: | 1252 |
|----------------------------|-------|------------------|---------|------------|
| Witness: Amy Beck | | | Photo # | : 2 |

Description: Sludge overflow has not been properly cleaned up.

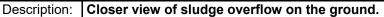


City of Melbourne Photographer: Kerri McCabe Witness: Amy Beck Office of Water Quality Photographic Evidence Sheet Date: October 20, 2020 Time: 1252 Photo #: 3

Description: Sludge overflow pooled at a low spot near the fence.



Photographer:Kerri McCabeDate:October 20, 2020Time:1256Witness:Amy BeckPhoto #:4





City of Melbourne Photographer: Kerri McCabe Witness: Amy Beck Office of Water Quality Photographic Evidence Sheet Date: October 20, 2020 Time: 1301 Photo #: 5

Description: Sludge outside the drying beds.



Photographer:Kerri McCabeDate:October 20, 2020Time:1234Witness:Amy BeckPhoto #:6



Office of Water Quality Photographic Evidence Sheet Location: City of Melbourne Photographer: Kerri McCabe Date: October 20, 2020 Time: 1250 Witness: Amy Beck Photo #: 7



Photographer:Kerri McCabeDate:October 20, 2020Time:1249Witness:Amy BeckPhoto #:8



Coation: City of Melbourne Photographer: Kerri McCabe Witness: Amy Beck Calibration sticker appears to be dated July 2019, 15 months prior to this inspection.



Photographer:Kerri McCabeDate:October 20, 2020Time:1254Witness:Amy BeckPhoto #:10



Figure 1. Google Earth image dated March 2016 showing POTW treatment components.

