

 <p><b>ENVIRONMENTAL QUALITY</b></p>	<b>OFFICE OF WATER QUALITY</b>				
	<b>INSPECTION REPORT</b>				
	AFIN: <b>38-00040</b>	PERMIT #: <b>AR0046566</b>	DATE: <b>8/19/2021</b>		
	COUNTY: <b>38 Lawrence</b>	PDS #: <b>118914</b>	MEDIA: <b>WN</b>		
GPS LAT: <b>36.067628</b> LONG: <b>-90.972202</b> LOCATION: <b>General Area</b>					
<b>FACILITY INFORMATION</b>		<b>INSPECTION INFORMATION</b>			
NAME: <b>City of Walnut Ridge</b> LOCATION: <b>West end of Oak St.</b> CITY: <b>Walnut Ridge</b>		FACILITY TYPE: <b>1 - Municipal</b> INSPECTOR ID#: <b>93162 S - State</b> FACILITY EVALUATION RATING: <b>N</b> INSPECTION TYPE: <b>SSO/Collection System</b>			
<b>RESPONSIBLE OFFICIAL</b>		DATE(S): <b>8/19/2021</b> ENTRY TIME: <b>11:25</b> EXIT TIME: <b>11:50</b> PERMIT EFFECTIVE DATE: <b>7/1/2016</b> PERMIT EXPIRATION DATE: <b>6/30/2021</b>			
NAME: / TITLE <b>Jonathan Kopp / General Manager</b> COMPANY: <b>City of Walnut Ridge</b> MAILING ADDRESS: <b>216 Southwest Fourth St.</b> CITY, STATE, ZIP: <b>Walnut Ridge AR 72476</b> PHONE & EXT: / FAX: <b>870-886-2312 /</b> EMAIL: <b>jonathan.kopp@yahoo.com</b> CONTACTED DURING INSPECTION: <b>Yes</b>		FAYETTEVILLE SHALE RELATED: <b>N</b> FAYETTEVILLE SHALE VIOLATIONS: <b>N</b> INSPECTION PARTICIPANTS NAME/TITLE/PHONE/FAX/EMAIL/ETC.: <b>Jonathan Kopp / General Manager / 870-886-2312 / jonathan.kopp@yahoo.com</b>			
<b>AREA EVALUATIONS</b>					
(S=Satisfactory, M=Marginal, U=Unsatisfactory, N=Not Applicable/Evaluated)					
<b>S</b>	PERMIT	<b>N</b>	FLOW MEASUREMENT	<b>N</b>	STORMWATER
<b>N</b>	RECORDS/REPORTS	<b>N</b>	LABORATORY	<b>N</b>	FACILITY SITE REVIEW
<b>S</b>	OPERATION & MAINTENANCE	<b>N</b>	EFFLUENT/RECEIVING WATER	<b>N</b>	SELF-MONITORING PROGRAM
<b>N</b>	SAMPLING	<b>N</b>	SLUDGE HANDLING/DISPOSAL	<b>N</b>	PRETREATMENT
<b>N</b>	OTHER:				
<b>SUMMARY OF FINDINGS</b>					
There were no violations noted at the time of the SSO inspection.					
<b>GENERAL COMMENTS</b>					
Brent Walker (DEQ OWQ Inspector Supervisor) also participated on this inspection which was performed in conjunction with a CEI of the WWTP.					
INSPECTOR'S SIGNATURE: 				DATE: <b>9/2/2021</b>	
SUPERVISOR'S SIGNATURE: 				DATE: <b>1/27/2022</b>	

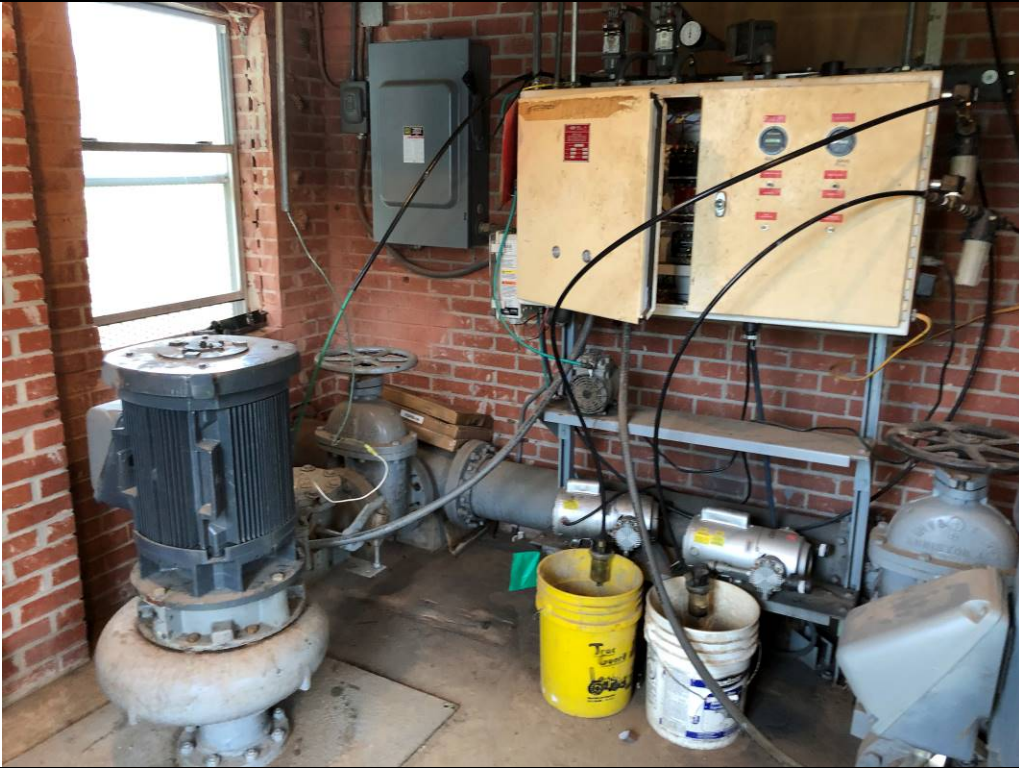
<b>COLLECTION SYSTEM INSPECTION AND OVERALL RATING</b>		<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
PROVIDE A BRIEF DESCRIPTION OF THE COLLECTION SYSTEM: <u>Gravity flow with lift stations</u>		
POPULATION SERVED/NUMBER OF RESIDENTIAL AND COMMERCIAL CONNECTIONS: <u>~2,200 connections</u>		
FEET OF SEWER SYSTEM: <u>~ 6 miles</u>		
AGE OF SYSTEM: <u>1930s and newer</u>		
DOES THE SYSTEM EXPERIENCE PROBLEMS DURING DRY OR WET WEATHER (EXPLAIN): <u>I &amp; 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>Reported to ADEQ by manager</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):		<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
<b>PUMP STATIONS</b>		<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>22</u>	NUMBER WITH BACKUP POWER: <u>3</u>	
HOW OFTEN ARE PUMP STATIONS INSPECTED/MONITORED: <u>7 times a week for Main pump stations; 3 times a week for smaller pump stations</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>N/A</u>		
BRIEF SUMMARY OF EMERGENCY PROCEDURES: <u>3 portable generators available</u>		
NUMBER OF PUMP STATIONS VISITED DURING INSPECTION (SEE ATTACHED CHECKLISTS FOR EACH): <u>3</u>		
<b>SATELLITE SYSTEMS</b>		<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
DOES THE COLLECTION SYSTEM RECEIVE FLOW FROM SATELLITE SYSTEMS: <u>No</u>		
TYPE(S) OF WASTE WATER RECEIVED: <u>NA</u> <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:		
BRIEFLY DESCRIBE THE SATELLITE SYSTEM: <u>NA</u>		
ANY KNOWN PROBLEMS WITH SATELLITE SYSTEM: <u>NA</u>		
NAME, ADDRESS AND PHONE NUMBER OF PERSON RESPONSIBLE FOR SATELLITE SYSTEM: <u>NA</u>		

<b>PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)</b>	
<b>GENERAL INFORMATION AND OVERALL EVALUATION</b>	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: <b>Oak St.</b>	
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
<b>GENERAL OPERATION AND MAINTENANCE</b>	
<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
<b>BACKUP POWER AND ALARMS</b>	
<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):	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE

<b>PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)</b>	
<b>GENERAL INFORMATION AND OVERALL EVALUATION</b>	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: <b>School</b>	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input checked="" type="checkbox"/> OTHER: <b>School</b>	
NUMBER OF PUMPS: <b>2</b>	NUMBER OPERATIONAL: <b>1 (found vacuum pump on pump #1 was out during inspection)</b>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE:	<input type="checkbox"/> S <input checked="" 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
<b>GENERAL OPERATION AND MAINTENANCE</b>	
<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
<b>BACKUP POWER AND ALARMS</b>	
<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):	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE

**Office of Water Quality Photographic Evidence Sheet**

Location:	<b>City of Walnut Ridge</b>		
Photographer:	<b>Wes Klasky</b>	Date:	<b>8/19/2021</b>
Witness:	<b>Brent Walker</b>	Time:	<b>11:28</b>
		Photo #:	<b>1</b>
Description:	<b>View of Oak St. pump station interior.</b>		



Photographer:	<b>Wes Klasky</b>	Date:	<b>8/19/2021</b>
Witness:	<b>Brent Walker</b>	Time:	<b>11:30</b>
		Photo #:	<b>2</b>
Description:	<b>View of Oak St. pump station wet well.</b>		





**Office of Water Quality Photographic Evidence Sheet**

Location:	<b>City of Walnut Ridge</b>		
Photographer:	<b>Wes Klasky</b>	Date:	<b>8/19/2021</b>
Witness:	<b>Brent Walker</b>	Time:	<b>11:48</b>
		Photo #:	<b>3</b>
Description:	<b>View of School pump station exterior.</b>		



Photographer:	<b>Wes Klasky</b>	Date:	<b>8/19/2021</b>
Witness:	<b>Brent Walker</b>	Time:	<b>11:38</b>
		Photo #:	<b>4</b>
Description:	<b>View of School pump station interior.</b>		



**Office of Water Quality Photographic Evidence Sheet**

Location:	<b>City of Walnut Ridge</b>				
Photographer:	<b>Wes Klasky</b>	Date:	<b>8/19/2021</b>	Time:	<b>11:38</b>
Witness:	<b>Brent Walker</b>	Photo #:	<b>5</b>		
Description:	<b>View of School pump station wet well.</b>				

