



**DIVISION OF
ENVIRONMENTAL
QUALITY**

Sarah Huckabee Sanders
GOVERNOR

Shane E. Khoury
SECRETARY

October 9, 2023

Honorable Roger Gardner, Mayor
City of Mountain View Wastewater Treatment Plant
PO Box 360
Mountain View, AR 72560
Via email to: mayor@cityofmntnview.com ; jessedandridge@gmail.com

RE: City of Mountain View WWTP Inspection (Stone Co)
AFIN: 69-00011 NPDES Permit No.: AR0020117

Honorable Mayor Gardner:

On September 21, 2023, I performed a Compliance Evaluation Inspection and an SSO/Collection System 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 each 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 **October 24, 2023**.

If I can be of any assistance, please contact me at travis.harmon@adeq.state.ar.us or (501) 837-2070.

Sincerely,

A handwritten signature in cursive script that reads "Travis Harmon".

Travis Harmon
Inspector, Office of Water Quality

 ENVIRONMENTAL QUALITY	OFFICE OF WATER QUALITY		
	INSPECTION REPORT		
	AFIN: 69-00011	PERMIT #: AR0020117	DATE: 9/21/2023
	COUNTY: 69 Stone	PDS #: 127585	MEDIA: WN
GPS LAT: 35.867014 LONG: -92.147231 LOCATION: General Area			

FACILITY INFORMATION	INSPECTION INFORMATION
NAME: City of Mountain View WWTP LOCATION: 340 Westwood Avenue CITY: Mountain View, AR 72560	FACILITY TYPE: 1 - Municipal INSPECTOR ID#: 34689 S - State FACILITY EVALUATION RATING: 1 - Unsatisfactory INSPECTION TYPE: Compliance Evaluation DATE(S): 9/21/2023 ENTRY TIME: 09:45 EXIT TIME: 12:30 PERMIT EFFECTIVE DATE: 8/1/2018 PERMIT EXPIRATION DATE: 7/31/2023
RESPONSIBLE OFFICIAL	FAYETTEVILLE SHALE RELATED: N
NAME / TITLE: Honorable Roger Gardner / Mayor COMPANY: City of Mountain View Wastewater Treatment Plant MAILING ADDRESS: PO Box 360 CITY, STATE, ZIP: Mountain View AR 72560 PHONE & EXT: / FAX: 870-269-9158 / EMAIL: mayor@cityofmntnview.com jessedandridge@gmail.com	FAYETTEVILLE SHALE VIOLATIONS: N
CONTACTED DURING INSPECTION: No	INSPECTION PARTICIPANTS
	NAME/TITLE/PHONE/FAX/EMAIL/ETC.: Keith Johnson/ Operator Jesse Dandridge/ C.O. via telephone

AREA EVALUATIONS					
(S=Satisfactory, M=Marginal, U=Unsatisfactory, N=Not Applicable/Evaluated)					
S	PERMIT	M	FLOW MEASUREMENT	N	STORMWATER
S	RECORDS/REPORTS	N	LABORATORY	N	FACILITY SITE REVIEW
N	OPERATION & MAINTENANCE	S	EFFLUENT/RECEIVING WATER	N	SELF-MONITORING PROGRAM
N	SAMPLING	S	SLUDGE HANDLING/DISPOSAL	N	PRETREATMENT
**	OTHER:				

SUMMARY OF FINDINGS
<p>1. The facility is currently operating under CAO LIS 18-091. From the September 12, 2023 progress report to Enforcement: "The new clarifier is now in operation with the old clarifier out of service for rehabilitation. Rehabilitation work to the old clarifier is almost complete and the equipment should be placed back into service in late September. The oxidation ditch cleaning is progressing. The only major items of work yet to begin are the UV Disinfection System improvements, and the BNR control panel replacement. These should begin in the fourth quarter of 2023." Inspection DMR review shows the facility reported FCB exceedances every month from August 2022 through July 2023, TSS exceedances January through March 2023, NH3-N exceedance in April 2023, and NO2+NO3-N exceedances in August and September 2022. These are violations of Part I.A of the permit. These exceedances were reported in monthly DMR and no inspection response is required for these exceedances. Please continue to submit CAO repair progress reports to Enforcement.</p> <p>2. The effluent staff gauge needs to be cleaned so that it is visible per Part III.B.1.A of the permit. Please submit an inspection response with photo regarding this item.</p>

GENERAL COMMENTS

Introduction

I inspected September 21, 2023. The inspection was scheduled. Mr. Keith Johnson, Operator, represented the facility during the inspection. The City of Mountain View operates a WWTP and collection system designed to treat 0.95 MGD. The facility is currently operating under CAO LIS 18-091. There is a CAP for the WWTP as well as the collection system.

WWTP Inspection

I inspected the WWTP from influent to final effluent. Treatment consists of screening and grit removal at the headworks, aerated equalization basin, which is rarely used; oxidation ditch with six rotors, aerobic digester, clarifier splitter, two secondary clarifiers one of which is new and the other currently out of service and being repaired, UV disinfection partially operating and pending repair. I observed and photographed each stage of treatment during the inspection and the facility should continue to conduct repairs and report to Enforcement Branch, per the CAO. Final effluent was viewed and appeared sufficiently treated at the time of inspection; however, the UV disinfection effectiveness cannot be assessed visually and the UV disinfection system is pending repair. The effluent staff gauge needing to be cleaned is the only operations and maintenance issue I found at the time of inspection needing addressed and which is not expected to be addressed by the CAO and CAP.

Records Review

I reviewed monthly DMR from August 2022 through July 2023. Exceedances are referenced in Item #1 in the "Summary of Findings" section. Mr. Johnson provided sample custody sheets, lab analysis, and flow records for July 2023 for load calculation and DMR averaging and reporting analysis. The flowmeter was calibrated December 7, 2022 by a technician.

INSPECTOR'S SIGNATURE: <i>Travis Harmon</i>	Travis Harmon	DATE: 9/28/2023
SUPERVISOR'S SIGNATURE: <i>Kerri McCabe</i>	Kerri McCabe	DATE: 10/9/2023

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:	<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:	<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 type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" 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 type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" 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 type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS: Repair of clarifier and UV disinfection per CAO in progress. Please see "General Comments" section.	
1. TREATMENT UNITS PROPERLY OPERATED:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
2. TREATMENT UNITS PROPERLY MAINTAINED:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
5. ALL NEEDED TREATMENT UNITS IN SERVICE: Rehabbing a clarifier per CAO; one in operation.	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED:	<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:	<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:	<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: Pending repairs for CAO	<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:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
15. IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input 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:	<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:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input 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:	<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:	<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 type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
DETAILS: Staff gauge needs cleaned	
1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED:___ TYPE OF DEVICE: <u>9 inch Parshall Flume</u>	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. FLOW MEASURED AT EACH OUTFALL AS REQUIRED:	<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: <u>Siemens Milltronics OCM III</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. CALIBRATION FREQUENCY ADEQUATE: <u>Calibrated December 7, 2022</u>	<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 type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
DETAILS:	
1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(B) FOR SLUDGES) :	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
3. SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
4. QUALITY CONTROL PROCEDURES ADEQUATE:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
5. DUPLICATE SAMPLES ARE ANALYZED ≥10% OF THE TIME:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
6. SPIKED SAMPLES ARE ANALYZED ≥10% OF THE TIME:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
7. COMMERCIAL LABORATORY USED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
a. LAB NAME: <u>Arkansas Testing Laboratories (certified contract lab)</u>	
b. LAB ADDRESS: <u>3301 Langley Drive, Searcy, AR 72143</u>	
c. PARAMETERS PERFORMED: <u>CBOD5, TSS, NH3-N, DO, FCB, NO3+NO2-N, pH</u>	
8. BIOMONITORING PROCEDURES ADEQUATE:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
a. PROPER ORGANISMS USED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
b. PROPER DILUTION SERIES FOLLOWED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
c. PROPER TEST METHODS AND DURATION:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
d. RETESTS AND/OR TRE PERFORMED AS REQUIRED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE

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: Viewed at flume and sample location. Note: UV disinfection operating but pending repair							
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: Sludge drying beds; taken to landfill							
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 checked="" type="checkbox"/> NA <input 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:							
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	

DMR Calculation Check

Reporting Period: From 2023 07 01 To 2023 07 31
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>20.69</u>	<u>3.7</u>	<u>6.0</u>
Calculated Value:	<u>20.54</u>	<u>3.67</u>	<u>6.0</u>
Permit Value:	<u>91.0</u>	<u>15.0</u>	<u>23.0</u>

If calculated value does not equal reported value, explain:

DMR Calculation Check

Reporting Period: From 2023 07 01 To 2023 07 31
 Year Month Day Year Month Day

Parameter Checked: CBOD

	Loading Mass Mo. Avg. - lbs/day	Concentration Monthly Mo. Avg. - mg/l	7-day Avg. - mg/l
Reported Value:	<u>10.51</u>	<u>2.0</u>	<u>2.0</u>
Calculated Value:	<u>10.45</u>	<u>2.0</u>	<u>2.0</u>
Permit Value:	<u>60.9</u>	<u>10</u>	<u>15</u>

If calculated value does not equal reported value, explain:

Office of Water Quality Photographic Evidence Sheet

Location:	City of Mountain View WWTP		
Photographer:	Travis Harmon	Date:	September 21, 2023
Time:	1036	Witness:	None- no other regulatory personnel
Photo #:	1	Description:	Influent screening and grit removal



Photographer:	Travis Harmon	Date:	September 21, 2023
Time:	1037	Witness:	None
Photo #:	2	Description:	Screening and grit removal



Office of Water Quality Photographic Evidence Sheet

Location: City of Mountain View WWTP			
Photographer: Travis Harmon	Date: September 21, 2023	Time: 1037	
Witness: None		Photo #: 3	
Description: Screening and grit removal waste bin			



Photographer: Travis Harmon			
Date: September 21, 2023	Time: 1038		
Witness: None		Photo #: 4	
Description: Equalization basin rarely used per operator			



Office of Water Quality Photographic Evidence Sheet

Location:	City of Mountain View WWTP		
Photographer:	Travis Harmon	Date:	September 21, 2023
Witness:	None	Time:	1041
Description:	Aerobic digester	Photo #:	5



Photographer:	Travis Harmon	Date:	September 21, 2023
Witness:	None	Time:	1043
Description:	Oxidation ditch	Photo #:	6



Office of Water Quality Photographic Evidence Sheet

Location:	City of Mountain View WWTP		
Photographer:	Travis Harmon	Date:	September 21, 2023
Witness:	None	Time:	1043
		Photo #:	7
Description:	Six covered rotors. Could not assess paddles but good movement observed		



Photographer:	Travis Harmon	Date:	September 21, 2023
Witness:	None	Time:	1046
		Photo #:	8
Description:	RAS		



Office of Water Quality Photographic Evidence Sheet

Location:	City of Mountain View WWTP			
Photographer:	Travis Harmon	Date:	September 21, 2023	
Witness:	None	Time:	1046	
Description:	Splitter to secondary clarifiers		Photo #:	9



Photographer:	Travis Harmon	Date:	September 21, 2023	
Witness:	None	Time:	1047	
Description:	Effluent to one clarifier while other is in repair		Photo #:	10



Office of Water Quality Photographic Evidence Sheet

Location:	City of Mountain View WWTP			
Photographer:	Travis Harmon	Date:	September 21, 2023	
Witness:	None	Time:	1047	
Description:	One clarifier out of service while being repaired		Photo #:	11



Photographer:	Travis Harmon	Date:	September 21, 2023	
Witness:	None	Time:	1048	
Description:	One clarifier in service at time of inspection. Skimmer operating.		Photo #:	12



Office of Water Quality Photographic Evidence Sheet			
Location:	City of Mountain View WWTP		
Photographer:	Travis Harmon	Date:	September 21, 2023
Witness:	None	Time:	1049
		Photo #:	13
Description:	Clarifier weir is covered. View of effluent.		



Photographer:	Travis Harmon	Date:	September 21, 2023
Witness:	None	Time:	1049
		Photo #:	14
Description:	View of effluent with cover raised		



Office of Water Quality Photographic Evidence Sheet

Location:	City of Mountain View WWTP		
Photographer:	Travis Harmon	Date:	September 21, 2023
Time:	1050	Witness:	None
Photo #:	15	Description: Sludge drying bed. Sludge disposed at landfill.	



Photographer:	Travis Harmon	Date:	September 21, 2023
Time:	1053	Witness:	None
Photo #:	16	Description: Flume, flowmeter, and staff gauge. Gauge needs cleaned.	





Office of Water Quality Photographic Evidence Sheet			
Location:	City of Mountain View WWTP		
Photographer:	Travis Harmon	Date:	September 21, 2023
Witness:	None	Time:	1051
		Photo #:	17
Description:	View of effluent at flume		
			
Photographer:	Travis Harmon	Date:	September 21, 2023
Witness:	None	Time:	1056
		Photo #:	18
Description:	View of final effluent at sample location. Appears sufficiently treated. Note: UV disinfection is pending repair.		
			

Figure 1. Google Earth image of treatment facility.



From: Jason Bolenbaugh (adpce.ad)
Sent: Friday, January 12, 2024 10:44 AM
To: Uniqika Marshall (adpce.ad)
Subject: FW: ADEQ Inspection

Please attach to PDS 127585 & 127586.

Thanks,

Jason Bolenbaugh | Manager
Division of Environmental Quality | Office of Water Quality
Compliance Branch
5301 Northshore Drive | North Little Rock, AR 72118
t: 501.682.0659 | c: [501.766.8153](tel:501.766.8153) | e: Jason.Bolenbaugh@adeq.state.ar.us



ARKANSAS
ENERGY & ENVIRONMENT

From: Travis Harmon (adpce.ad) <Travis.Harmon@adeq.state.ar.us>
Sent: Friday, January 12, 2024 9:09 AM
To: Jason Bolenbaugh (adpce.ad) <Jason.Bolenbaugh@adeq.state.ar.us>
Subject: FW: ADEQ Inspection

Jason,

Could you attach this response to PDS 127585 & 127586?

Travis Harmon | Inspector
Energy & Environment | Office of Water Quality
5301 Northshore Drive | North Little Rock, AR 72118
c: [501.837.2070](tel:501.837.2070) | e: travis.harmon@adeq.state.ar.us



ARKANSAS
ENERGY & ENVIRONMENT

From: jdandridge Dandridge [<mailto:jessedandridge@gmail.com>]
Sent: Wednesday, January 10, 2024 2:21 PM
To: Travis Harmon (adpce.ad) <Travis.Harmon@adeq.state.ar.us>
Subject: Re: ADEQ Inspection

Sorry for not getting back with you quicker. The Effluent Staff Gauge has been replaced with a new one. Pump for Altman has been repaired and sent back to us but we are waiting on the electrician for the same thing with South Bayou and Ivanton Stations..Grease in wet wells have vacuumed out and hose down get nearly all the grease. I will send you the picture off my phone if you like. I Will send them from my phone in different emails.. If any you like talk to me about feel free call me any time sir 1-432-703-7611

On Tue, Jan 9, 2024 at 10:18 AM Travis Harmon (adpce.ad) <Travis.Harmon@adeq.state.ar.us> wrote:

Mr. Dandridge,

I'm checking if you ever submitted an inspection response for my 9/21/2023 inspection at the WWTP?

Issues needing a response are:

Cleaning effluent staff gauge

A pump out at Altman, South Bayou, and Ivanton lift stations

Grease accumulated in Ivanton and South Bayou wet wells

Thanks,

Travis Harmon | Inspector

Energy & Environment | **Office of Water Quality**

5301 Northshore Drive | North Little Rock, AR 72118

c: [501.837.2070](tel:501.837.2070) | e: travis.harmon@adeq.state.ar.us



**DIVISION OF
ENVIRONMENTAL QUALITY**

Sarah Huckabee Sanders
GOVERNOR

Shane E. Khoury
SECRETARY

January 12, 2024

Honorable Roger Gardner, Mayor
City of Mt. View
P.O. Box 360
Mt. View, AR 72560

Email Address: mayor@cityofmtnview.com,

RE: Adequate Response to Inspection PDS# 127585 and 127586

AFIN: 69-00011

Permit No.: AR0020117

Dear Mayor Gardner:

I have reviewed the response pertaining to my inspection of the City of Mountain View POTW. The information provided sufficiently addresses the items referenced in my inspection report. At this time, the Division has no further comment concerning this inspection. Acceptance of this response by the Division does not preclude any future enforcement action deemed necessary at this site or any other site.

If I require further information concerning this matter, I will contact you. Thank you for your attention to this matter. Should you have any questions please contact me at (501) 837-2070 or you may email me at Travis.Harmon@adeq.state.ar.us.

Sincerely,

A handwritten signature in cursive script that reads "Travis Harmon".

Travis Harmon
Inspector, Office of Water Quality

CC: jessedandridge@gmail.com