

REPORT OF NON COMPLIANCE

NAME OF FACILITY MELBOURNE, CITY OF

PERMIT NUMBER AR0020036 001-A

PERIOD ENDING July 2016

PARAMETER VIOLATED	FECAL 30DA GEO	FECAL 7 DAY GEO	FECAL 7 DAY GEO				
REPORTED VIOLATIONS	865	1722	435				
PARAMETER VIOLATED	200	400	400				

WEEK OF Jul 06 16 Jul 27 16

Please fill out the following information

CAUSE OF VIOLATION in coilation with trying to meet chlorine parameters at low levels. the coliform, fecal general registered high @ time of sampling

DURATION OF VIOLATION 24 hours

CORRECTIVE ACTION turned chlorine to a higher level and wasted sludge

EXPECTED COMPLIANCE DATE August 2016

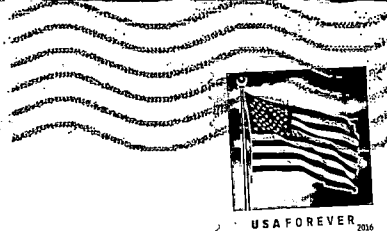
Dustin Payne 8/22/16
SIGNATURE / DATE

City of Melbourne

63 Municipal Dr.
P.O. Box 800
Melbourne, AR 72556

LITTLE ROCK AR 722

23 AUG 2016 PM 3 L



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5301 North Shore Dr.
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