NON-COMPLIANCE REPORT

Arkansas Department of Environmental Quality Office of Water Quality – Enforcement Branch 5301 Northshore Drive North Little Rock, AR 72118

| RE: Permit No: ARO | 020117 | Di | Discharge Number: 001-A | | |
|---------------------------|--|------------------------|-----------------------------|------------------|--|
| Facility: MOUNTAIN | VIEW, CITY OF-MOUNTAIN VIE | W WASTEWATER TR | EATMENT PLANT | | |
| Address: 340 WESTW | OOD AVE. | | | | |
| City: MOUNTAIN VIEW | | State: AR | Zip: 72560 | | |
| Contact: | | | | | |
| Date of Non-Compliance | Parameter Exceeded | Quantity or Loading | Quality or Concentration | Permit Limits | |
| 10/5/22 | DO MINIMUM | | 5.8 | 6.0 | |
| OCTOBER | FECAL 30 DAY GEO | | 1061.0 | 200.0 | |
| 10/5/22 | FECAL 7 DAY GEO | | 470.0 | 400.0 | |
| 10/11/22 | FECAL 7 DAY GEO | | 1516.0 | 400.0 | |
| Salt Engineering i | ng the problem in this man s working on it. | | | | |
| | | | | | |
| | it will take to correct prob can there working on it. | lem: | | | |
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| Sincerely, | | | | | |
| Jesse Dandridge | | 11/17/2022 | | | |
| Submitted Dry | | Data | | | |

☑ Submitted electronically via NetDMR

Certification Statement: I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. (Revised March 2016)