ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY MONITORING REPORT FOR DECENTRALIZED WASTEWATER TREATMENT FACILITIES VIA DRIP IRRIGATION MONTHLY MONITORING REPORT

PERMITTEE NAME			FACILITY NAME (IF DI		PERMIT NO. 4811-WR-4	4						
Benton County, Arkansas Suburban Sewer No 1 Villages of Cross Creek	District		Villages of Cross Creek									
PERMITTEE ADDRESS		FACILITY ADDRESS AFIN NO										
PO Box 9299		3302 N Dixieland Rd 04-00899										
Fayetteville AR 72703												
		WAS	TEWATER EFFLUENT MC	NITORING PER	IOD]						
		MM/DD/YYYY		MM/DD/YYYY								
		2/1/2016		2/29/2016								
TREATED WASTEWATER EFFLUENT SA	MPLING		 			1,8	ন					
PARAMETER		Limit	Sample Measurement	UNITS	Monitoring	Reporting						
Flow, Monthly total		REPORT	REPORT 0.528788 MG Total Flow per calendar month									
Flow, daily maximun		REPORT	0.020962	MGD	Daily							
Carbonaceous Biochemical Oxygen Demand (CBOD5)		30	14	mg/l								
Total Suspended Solids (TSS)		30	28	mg/l	_							
Fecal Coliform Bacteria (FCB)		10,000	< 4	colonies/100ml	Grab Sample once per month							
pH Total Phosphorus (TP)		6.0 - 9.0 7.1 s.u.					-					
		REPORT	6.3	mg/i		following Month						
Total Kjeldahl Nitrogén (TKN)		REPORT	40.3	mg/l								
Ammonia Nitrogen		REPORT	1.5	mg/l	Grab sample once per guarter							
Nitrate Nitrogen (NO3-N) + Nitrite Nitrogen (N	O2-N)	REPORT	3.2	mg/l	- Craz sample siles por quarter							
Plant Available Nitrogen (PAN)		REPORT 16.3 mg/l		mg/l								
Loading Rate		REPORT	**See Note Below**	gpd/ft 2	Daily							
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER I CERT	IFY UNDER PEN	NALTY OF LAW THAT I HAVE PERSONAL	LY EXAMINED AND AM WITH TH	IE INFORMATION	h)	TELEPHONE	DATE					
SUBMI	TTED HEREIN; /	AND BASED ON MY INQUIRY OF THOSE	INDIVIDUALS IMMEDIATELY RE	SPONSIBLE FOR	Termith Rogery		7/-/					
ОВТАН	NING THE INFO	ORMATION, I BELIEVE THE SUBMITT	ED INFORMATION IS TRUE, A	ACCURATE, AND	SIGNATURE OF PRINCIPAL	(479) 530-	1/ 1/2016					
Kathy Bartlett COMPI	LETE. I AM AWA	ARE THAT THERE ARE SIGNIFICANT PE	EXECUTIVE OFFICER OR	5926								
		SIBILITY OF FINE AND IMPRISONMENT.	·	AUTHORIZED AGENT		MM/DD/YYYY						
COMMENTS AND EXPLANATION OF VIOL	ATIONS (Re				was not designed to monitor to g in drip fields, and are in prod							

Environmental Services Company, Inc.

Corporate Office 13715 West Markham Little Rock, AR 72211 Tel. (501)221-2565 Fax (501)221-1341

Northwest Arkansas Branch 1107 Century Avenue Springdale, AR 72762 Tel. (479)750-1170 Fax (479)750-1172

Control Number: 1602020132

Customer Name : GREENFIELD CAP DEV-VIL @ CC EFF

Customer/Permit No. : 1698 / 4811-WR-2 001

Report Date : 02/19/16

Sample Date : 02/12/16

Sample Time: 1145

Sample Type : GRAB VILLAGES

Sample From : DOSE TANK EFFLUENT

Collected By: WDS Delivery By : WDS

Work Order : Purchase Order :

	Quality A	Assurance				
Analysis					Precision	Accuracy
<u>Date Time By</u>	Parameter	Result Notes	Quantity	<u> Method</u>	_ % RPD	% Recovery
02/18 1000 TSB	Ammonia Nitrogen	1.5 mg/L		SM 1997 4500-NH3 F	2.44	104.6 *
02/18 0830 TSB	Kjeldahl Nitrogen Total	40.30 mg/L		SM 1997 4500-NorgB	2.11	101.4 *
02/12 1145 WDS	рH	7.1 S.U.		SM 2000 4500-H+ B	0.0.0	N/A *
02/16 0915 TSB	Phosphorous, Total (as P)	6.3 mg/L		EPA 365.3	0.00	103.2 *
02/17 1220 MDR	Solids, Total Suspended	28.0 mg/L		SM 1997 2540 D	0.00	N/A *
02/13 1405 WDS	Coliform, Fecal	< 4 /100ml		SM 1997 9222 D	0.00	N/A *
02/12 1200 TSB	BOD, Carbonaceous	14.0 mg/L		SM 2001 5210 B	13.88	85.0 *
02/16 1330 TSB	Nitrate + Nitrite	3.2 mg/L		SM 2000 4500-NO3 E	0.66	101.4 *
02/18 1600 TSB	Nitrogen, Plant Available	16.3 mg/L	•	SM 1997 4500-N		

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

^{*} QA data shown is from a different sample or standard on the same date.

Environmental Services Company, Inc. Northwest Arkansas 1107 Century Street Springdale, Arkansas 72762 website: www.esclabs.com

Fav: 479-750-1172

Phone: 479-750-1170

Corporate Office, Little Rock, Arkansas 501-221-2565

Carlsbad, New Mexico 575-887-1ESC

CHAIN OF CUSTODY

Client Information				Project Information					Requested Parameters										
Company Name: Greenfield Capital-Villages @ Cross C					_						_	T	1000		 	<u> </u>		Ť	
			-villages @ Cross C		Permit/Project #:														
Address: _	······································	3302 N. Dixieland		Purcha			urchase Order #:								96			Ì	
Rogers AR									_	12		66)				ĺ			
Telephone: _		(479)936-0333	(Cell)		Sampler Name(s): \(\lambda \alpha \lambda \la							15.	1	₹	_			ĺ	
Telephone:									, —	J	ı		Įž	ਜ਼	(8)	43)			
' ' -					and Signature(s):							I,	5)N-	55(2	Œ		}	ĺ	
 ESC Client Nun	nber:	1698			und dignaturo(b).							2	1) T	lifo	ĺ		l	
	ple Iden			Sample	e Collection Sample Containers				ᅥ	8	Phos(25), NH ₃ -N(15.A)	TKN(16.A)N+N(91)	CBOD(70), TSS(28),PAN(99.99)	Fecal Coliform(43)		, ,	l		
Identificat		ESC Control #	Date	Time			Туре	Volume	1		#	pH(23)	ဋ	KN	BOI	eca)	·	
Dose Tank/E		1602020132	2-12-16	11:45	1	Matrix					_		1-	 	٥	 	-	·	
Dose rank/E	muent	1002020132	1-1 1-10	11.71	GRAB	Water	teflon	150 ml	none		1	X	┼	 	 	├	 	-	
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				GRAB	Water	Whirlpak	300ml	NaS2O4		1	<u>'</u>		<u> </u>		х				
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Relinquished By: (Signature and Printed Name) Date Time		Received, for Lab By: (Signature and Printed Name)) .	Date Time					oles pr	operly			ш					
			Kichard	Received for Lab By: (Signature and Printed Name) KUCHUM BNOWN RICHARD BROW							Yes 🖊			No					
Comments:							Field Test		Analysi				Resu	Result Units			}		
Manual 1994 1994 1994 1994 1994 1994 1994 199						Analyst: Time:		pH: Temp.:	11:45	4/25			7.(/7.X			r r			
					Reading:		DO:	17,12	1010		/-	- 0		_	<u>ٽ</u>	-	<u>.</u>	_	
						Units:		Debris:			二			İ					
Cool all samples to 6 degrees C.						Chlorinated? Yes No T				This Document is Page of									