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

PERMITTEE NAME Goshen Municipal POID		10 g (14, 16, 16, 16, 16) 39 x		RMIT NO. 15-WR-4	5 ²⁴						
3838 Oaklawn Drive Suite Dallas TX 75219			72	ब 							
		WASTE									
	,	MM/DD/YYYY 2/1/2016	MM/DD/YYYY 2/29/2016								
TREATED WASTEWATER EFFLUE	NT SAMPLING	r		32 - 12 S - 128			, , ,	3			
PARAMETER		Limit	Sample Measurement	UNITS	Monitoring	Reporting					
Flow, Monthly total		REPORT	0.7256	MG	Total Flow per calendar month		1				
Flow, daily maximun		REPORT	0.0025245 MGD		Daily						
Carbonaceous Biochemical Oxygen Demand (CBOD5)		15	2.4 mg/l								
Total Suspended Solids (TSS)		15 ·	6	6 mg/l							
Fecal Coliform Bacteria (FCB)		2,000	< 2	colonies/100ml	Grab Sample once per month						
рН		6.0 - 9.0	7.9	s.u.							
Total Phosphorus (TP)		REPORT	7.5	mg/l		Prior to the 15 following N					
Total Kjeldahl Nitrogen (TKN)		REPORT	54.2	mg/l							
Ammonia Nitrogen		REPORT	53.7	mg/l							
Nitrate Nitrogen		REPORT	1.5	mg/l	Grab sample once per quarter						
Nitrite Nitrogen		REPORT	1.5	mg/l							
Plant Available Nitrogen (PAN)		REPORT	55.4	mg/l							
Loading Rate		REPORT	** See Note below**	gpd/ft 2	Continuous						
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PER	NALTY OF LAW THAT I HAVE PERSONALLY	EXAMINED AND AM WITH TH	E INFORMATION	/	TEL	EPHONE	DATE			
	SUBMITTED HEREIN;	AND BASED ON MY INQUIRY OF THOSE IN	DIVIDUALS IMMEDIATELY RE	SPONSIBLE FOR	emeta Legren_			3-1-2016			
	OBTAINING THE INF	ORMATION, I BELIEVE THE SUBMITTED	INFORMATION IS TRUE, A	CCURATE, AND	SIGNATURE OF PRINCIPAL		9) 530-	Γ'			
Kathy Bartlett	COMPLETE. I AM AWA	ARE THAT THERE ARE SIGNIFICANT PENAL	TIES FOR SUBMITTING FALS	E INFORMATION,	EXECUTIVE OFFICER OR		926				
TYPED OR PRINTED		IBILITY OF FINE AND IMPRISONMENT.	AUTHORIZED AGENT		MM/DD/YYYY						
COMMENTS AND EXPLANATION OF Ponding in dripfield has been notice	,	,		ent at this site is submitted.	not installed to monitor this p	oarameter. A	-ermit re	vision has been			

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: 1602020205

Customer Name : GREENFIELD CAP DEV-WATERFORD

Customer/Permit No.: 1886 / 4815-WR-4

Report Date : 02/24/16

Sample Date : 02/17/16

Sample Time : 0830

Sample Type : GRAB WATERFORD Sample From : DOSE TANK EFFLUENT Collected By: WDS Delivery By : WDS

Work Order : Purchase Order :

	Quality Assurance					
Analysis					Precision	Accuracy
<u>Date Time By</u>	Parameter	Result Notes	Quantity	<u> Method</u>	% RPD	% Recovery
02/18 1000 TSB	Ammonia Nitrogen	53.7 mg/L		SM 1997 4500-NH3 F	0.69	103.0
02/23 0900 TSB	Kjeldahl Nitrogen Total	54.20 mg/L		SM 1997 4500-NorgB	0.00	100.4 *
02/17 0830 WDS	рH	7.9 S.U.		SM 2000 4500-H+ B	0.00	N/A *
	Phosphorous, Total (as P)	7.5 mg/L		EPA 365.3	2.86	102.8 *
	Solids, Total Suspended	6.0 mg/L		SM 1997 2540 D	33.33	N/A
02/17 1700 RHB	Coliform, Fecal	< 2 /100ml		SM 1997 9222 D	0.00	N/A *
02/17 1400 TSB	BOD, Carbonaceous	$2.4~{ m mg/L}$	•	SM 2001 5210 B	10.40	112.0 *
02/18 1400 TSB	Nitrate + Nitrite	1.5 mg/L		SM 2000 4500-NO3 E	0.00	102.5 *
02/24 1030 TSB	Nitrogen, Plant Available	55.4 mg/L		SM 1997 4500-N		

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

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.

Signature

Environmental Services Co., Inc.

Environmental Services Company, Inc. Northwest Arkansas 1107 Century Street Springdale, Arkansas 72762

website: www.esclabs.com



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

> Carlsbad, New Mexico 575-887-1ESC

CHAIN OF CLISTODY

Phone: 479-750		Fax: 479-750-1172		CH	IAIN C	OF CU													
Client Information					Project Information					Requested Parar					ame	eters	i		
Company Name: Waterford Estates				Permit/Project #:									66						
Address:	Idress: 1695 Electric Avenue			Purchase	Purchase Order #:							TSS(28),PAN(99.99)							
Springdale AR 72764				\overline{a}			1 (1 - 11			1		A N				-			
Telephone:		(479)751-8868			Sampler Name(s):			ude Schmitt					İ	J. (5	5)				
FAX:		(479)757-7650										1		(28	s(2	91)		ı İ	
	·	<u> </u>		 									(3)	135	Phos(25)	KN(16.A),N+N(91)			
ESC Client Nur	nher	1886			and Olyna	iuie(s).	- Will) E		7	Z				
	ple Iden		0		Callaction	-1112		Sample Containers				€	Coliform(43)	2	NH3(15.A),	6.A		.	
					Collection	T	<u> </u>	· · · · · ·				pH(23)	ပိ	CBOD(70),	H3(물			
Identificat		ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preservative		#		ш.	Ö	Z	Ě			
Dose Tank/E		1602020205	2-17-16	8:30	Grab	Water	Teflon	150 ml	none		1	X					\blacksquare		
Waterford E	states	<i> </i>		 	Grab	Water	whirlpak	300 ml	none/ice		1		X						
		1		Grab	Water	Plastic	1 qt	none/ice 1		1			х						
				. Grab	Water	Plastic	8 oz	H₂SO₄,pH	<2	· 1				х	х				
																			
									 -								一		
(-	4															_	_	+	_
Relitiquished By. (Signati	xe and Printed	es ant	2-17-16	9; Time	Received By: (Sig	nature and Printed	Name)	<u> </u>	Date	Tim	9	ľ	dy Se		$\overline{}$		<u>_</u>		ᅥ
Reffiquished By: (Signature and Printed Name)		27/76 Date	Time	Received By: (Signature and Printed Name)		Name)		Date Time			Jsed? Intact? urnaround:					\dashv			
						·				Regular 🗸			Special						
Relinquished By: (Signature and Printed Name)		Date	Time 4	Received for Lab/By: (Signature and Printer		Printed Name	ias 55	a196 948		Were samples		es pro	s properly preserved:			\exists			
Comments:				FLOW DATA Field				Analys	st	Resu		Result Units			\neg				
						pH:	8:30	WO			9								
						Time: Reading:		Temp.: DO:	8:30	Wo	JOS					°C °I		°F	\dashv
						Units:									士				
Cool all samples to 6 degrees C.						~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		Chlorinated	? Yes N	0		This	Doc	umei	nt is l	Page		of	

G:WP. JCIFORMSICHAIN.XLS