

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

PERMITTEE NAME

Waterford Estates at Hissom Ranch POA

FACILITY NAME (IF DIFFERENT)

Waterford Estates at Hissom Ranch POA

PERMIT NO.

4815-WR-1

PERMITTEE ADDRESS

3567 W New Hope Rd
Rogers, AR 72756

FACILITY ADDRESS

2323 Bowen Blvd
Fayetteville AR 72703


AFIN NO.

72-00974

WASTEWATER EFFLUENT MONITORING PERIOD		
MM/DD/YYYY		MM/DD/YYYY
6/1/2016		6/30/2016

TREATED WASTEWATER EFFLUENT SAMPLING

PARAMETER	Limit	Sample Measurement	UNITS	Monitoring	Reporting
Flow, Monthly total	REPORT	686,680	Gallons	Total Flow per calendar month	Prior to the 15th of the following Month
Flow, daily maximun	REPORT	28,383	Gallons	Daily	
Carbonaceous Blochemical Oxygen Demand (CBOD5)	15	3.7	mg/l	Grab Sample once per month	
Total Suspended Solids (TSS)	15	6	mg/l		
Fecal Collform Bacteria (FCB)	2,000	< 4	colonies/100ml		
pH	6.0 - 9.0	7.3	s.u.		
Total Phosphorus (TP)	REPORT	8.1	mg/l		
Total Kjeldahl Nitrogen (TKN)	REPORT	no report	mg/l	Grab sample once per quarter	
Ammonia Nitrogen (NH3-N)	REPORT	no report	mg/l		
Nitrate Nitrogen (NO3-N) + Nitrite Nitrogen (NO2-N)	REPORT	no report	mg/l		
Plant Available Nitrogen (PAN)	REPORT	no report	mg/l		
Loading Rate	REPORT	see attached	gpd/ft 2	Daily	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <div style="text-align: center;">Kathy Bartlett</div> TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.	<div style="text-align: center;">  SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT </div>	TELEPHONE (479) 530-5926	DATE 7/14/2016 MM/DD/YYYY
COMMENTS AND EXPLANATION OF VIOLATIONS (<i>Reference all attachments here</i>)				

WATERFORD ESTATES LOADING RATES	
Zone Identification	GPD/sq 2
Zone 1A	2,356
Zone 1B	2,242
Zone 2A	2,242
Zone 2B	2,129
Zone 3A	2,242
Zone 3B	2,242
Zone 4A	2,242
Zone 4B	2,242
Zone 5A	2,484
Zone 5B	2,600
Zone 6A	2,484
Zone 6B	2,838

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: 1606020141
Customer Name : GREENFIELD CAP DEV-WATERFORD
Customer/Permit No. : 1886 / 4815-WR-4
Report Date : 06/22/16

Sample Date : 06/16/16
Sample Time : 0955
Sample Type : GRAB WATERFORD
Sample From : DOSE TANK EFFLUENT

Collected By: VLP
Delivery By : VLP
Work Order :
Purchase Order :

Laboratory Analysis

Analysis							Quality Assurance	
Date	Time	By	Parameter	Result	Notes	Quantity	Method	Precision
								% RPD
06/16	0956	VLP	pH	7.3 S.U.			SM 2000 4500-H+ B	0.00
06/20	900	TSB	Phosphorous, Total (as P)	8.1 mg/L			EPA 365.3	1.83
06/20	1427	JCB	Solids, Total Suspended	6.0 mg/L			SM 1997 2540 D	0.00
06/16	1645	TSB	Coliform, Fecal	< 4 /100ml			SM 9222 D 1997	0.00
06/17	1400	VLP	BOD, Carbonaceous	3.7 mg/L			SM 2001 5210 B	7.34
								% Recovery
								N/A
								101.1 *
								N/A *
								N/A *
								86.0 *

* 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

Richard Brown
Environmental Services Co., Inc.

Carlsbad, New Mexico
575-887-1ESC

CHAIN OF CUSTODY

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