

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-4

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

3/1/2017

MM/DD/YYYY

3/31/2017

TREATED WASTEWATER EFFLUENT SAMPLING

PARAMETER	Limit	Sample Measurement	UNITS	Monitoring	Reporting
Flow, Monthly total	REPORT	0.968565	MG	Total Flow per calendar month	Prior to the 15th of the following Month
Flow, daily maximum	REPORT	0.034021	MGD	Daily	
Carbonaceous Biochemical Oxygen Demand (CBOD5)	15	< 2	mg/l	Grab Sample once per month	
Total Suspended Solids (TSS)	15	7.7	mg/l		
Fecal Coliform Bacteria (FCB)	2,000	< 4	colonies/100ml		
pH	6.0 - 9.0	7.7	s.u.		
Total Phosphorus (TP)	REPORT	7.6	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

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.

Kathy Bartlett

TYPED OR PRINTED



SIGNATURE OF PRINCIPAL

EXECUTIVE OFFICER OR

AUTHORIZED AGENT

TELEPHONE

(479) 530-5926

DATE

4/13/2017

MM/DD/YYYY

COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)

WATERFORD ESTATES LOADING RATES March 2017

Zone Identification	GPD/sq 2
Zone 1A	2,824
Zone 1B	2,688
Zone 2A	2,688
Zone 2B	2,552
Zone 3A	2,688
Zone 3B	2,688
Zone 4A	2,688
Zone 4B	2,688
Zone 5A	2,977
Zone 5B	3,116
Zone 6A	2,977
Zone 6B	3,402

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: 1703020146
Customer Name : GREENFIELD CAP DEV-WATERFORD
Customer/Permit No. : 1886 / 4815-WR-4
Report Date : 03/21/17

Sample Date : 03/15/17
Sample Time : 0930
Sample Type : GRAB WATERFORD
Sample From : DOSE TANK EFFLUENT

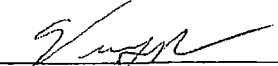
Collected By: JB
Delivery By : JB
Work Order :
Purchase Order :

Laboratory Analysis							Quality Assurance	
Analysis							Precision	Accuracy
Date	Time	By	Parameter	Result	Notes	Quantity	% RPD	% Recovery
03/15	0930	JCB	pH	7.7 S.U.			0.00	N/A *
03/20	1300	TSB	Phosphorous, Total (as P)	7.6 mg/L			0.00	100.7 *
03/17	1520	AEU	Solids, Total Suspended	7.7 mg/L			0.00	N/A *
03/15	1350	AEU	Coliform, Fecal	< 4 /100ml			0.00	N/A *
03/15	1400	TSB	BOD, Carbonaceous	< 2.0 mg/L			13.51	103.1 *
03/15	0930	JCB	Sample Collection/Travel	1 each				

* 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.

Carlsbad, New Mexico
575-887-1ESC

CHAIN OF CUSTODY