ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY

MONITORING REPORT FOR DECENTRALIZED WASTEWATER TREATMENT FACILITIES VIA DRIP IRRIGATION MONTHLY MONITORING REPORT

Waterford Estates at Hissom Ranch POA									
		PERMITTEE ADDRESS	F.,	٠.					
		3567 W New Hope Rd							
	_	Rogers, AR 72758							

PERMITTEE NAME

	FACILITY NAME (IF DIFFERENT)
	Waterford Estates at Hissom Ranch POA
	FACILITY ADDRESS
a.	FACILII T ADDRESS
	2323 W Bowen Blvd
	Fayetteville, AR 72703

1 -	PERMIT NO.	
	4815-WR-1	
_		
١ -	AFIN NO.	

72-00974

DEDMIT NO

	WASTEWATER EFFLUENT MONITORING PERIOD									
	MM/DD/YYYY	MM/DD/YYYY								
FROM	11/1/2015	11/30/2015								

		TREATED WASTEV	VATER EFFLUI	ENT SAMPLING					
PARAMET	PERMIT REQUIREMENT	SAMPLE ME	ASUREMENT	UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE			
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE	*****	4	1.4	MG/L	ONCE/ MONTH	GRAB			
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE		15		: 2	MG/L	ONCE/ MONTH	GRAB		
PH EFFLUENT GROSS VALUE		6 to 9	7		S.U.	ONCE/ MONTH	GRAB		
SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE		15	2.0		MG/L	ONCE/ MONTH	GRAB		
NITROGEN, AMMONIA TOTAL (AS N) EFFLUENT GROSS VALUE		*****	12.5		MG/L	ONCE/ MONTH	GRAB		
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE		2,000	450.0		N/100 ML	ONCE/ MONTH	GRAB		
FLOW, THRU CONDUIT OR TREATMENT UNIT EFFLUENT GROSS VALUE		*****	MONTHLY TOT 823,630			ONCE/ MONTH	TOTAL FLOW		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	1	LAW THAT I HAVE PERSONALLY EX	1 A	1 1 1 1		TELEPHONE	DATE		
Kathryn Bartlett	INDIVIDUALS IMMEDIATELY RES BELIEVE THE SUBMITTED INFOR	TTED HEREIN; AND BASED ON MY INC SPONSIBLE FOR OBTAINING THE MATION IS TRUE, ACCURATE, AND O	INFORMATION, I	SIGNATURE OF	PRINCIPAL	479 5305926	12/2/2015		
TYPED OR PRINTED		IGNIFICANT PENALTIES FOR SUB- OSSIBILITY OF FINE AND IMPRISONM		EXECUTIVE O AUTHORIZE		AREA NUMBER	MM/DD/YYYY		

COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)

We have noticed water ponding on the drip field, and have contacted the POA to obtain approval to have this probloem repaired. ADEQ will be receiving a letter addressing this issue soon or before this report is received with the CAP.

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: 1511020243

Customer Name : GREENFIELD CAP DEV-WATERFORD

Customer/Permit No.: 1886 / 4815-WR-3

Report Date : 11/24/15

Sample Date : 11/18/15

Sample Time : 0920

Sample Type : GRAB WATERFORD

Sample From : DOSE TANK EFFLUENT

Collected By: WDS Delivery By : WDS

Work Order :

Purchase Order :

	Quality Assurance					
Analysis					Precision	Accuracy
Date Time By	Parameter	Result Notes	Quantity	Method	% RPD	<u> የ Recovery</u>
11/19 1600 TSB	Ammonia Nitrogen	12.5 mg/L		SM 1997 4500-NH3 F	1.03	100.2 *
11/18 0920 WDS	Нq	7.5 S.U.		SM 2000 4500-H+ B	0.00	N/A *
11/23 0930 TSB	Phosphorous, Total (as P)	4.4 mg/L		EPA 365.3	1.80	104.2 *
11/19 1117 VLP	Solids, Total Suspended	2.0 mg/L		SM 1997 2540 D	44,44	N/A *
11/18 1535 VLP	Coliform, Fecal	450 /100ml		SM 1997 9222 D	0.00	N/A *
11/18 1200 TSB	BOD, Carbonaceous	< 2.0 mg/L		SM 2001 5210 B	2.73	92.6 *

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





Corporate Office, Little Rock, Arkansas

Carlsbad, New Mexico 575-887-1ESC

501-221-2565

CHAIN OF CUSTODY

Phone: 479-750	-1170	Fax: 479-750-1172		Cr	1AIN C)F CU	SIOI	JY											
Client Information				Project Information						Requested				l Parameters					
Company Name: Waterford Estates			Permit/Pro	Permit/Project #:															
Address: 1695 Electric Avenue			Purchase	Purchase Order #:															
i -		Springdale AR 727	64			$\overline{\Omega \setminus A}$				11						ļ			
Telephone:		(479)751-8868			Sampler N	Sampler Name(s):							<u>ڇ</u>	(2)	į				
FAX:		(479)757-7650			1			///	20 120					182	38(2				
-		(110)101 1000			and Signat	ture(s):	1/1					l	43)	TSS(28)	Ph				
ESC Client Nu	mher	1886			Jana Olgina	ture(s).	f-1/2)E	6	3				
	nple Iden			Sample	Collection		Γ	Sample (Containers	3		<u>(S</u>	Coliform(43)	Ğ	(15				
Identifica	 	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preserva		#	pH(23)	I.O.	CBOD(70),	NH3(15.A), Phos(25)				
Dose Tank/		1511020243	11-18-15	9:20	Grab	Water	Teflon	150 ml	попе			×							
Waterford E	· · · · · · · · · · · · · · · · · · ·	/	1	,	Grab	Water	whirlpak	300 ml	none/ice		1		x						
vvaleriora i	/			 	Grab	Water	Plastic	1 qt	none/ice		1		Ť	×					
/	<u></u>				Grab	Water	Plastic	8 oz	1	-2	1		<u> </u>	 ^	x				
ع ــــــــــــــــــــــــــــــــــــ					Glab	vvaler	Flastic	0 02	H₂SO₄,pH	~	1	\vdash	-	\vdash	 ^				
									•			\vdash	\vdash	 	\vdash		-		_
						 	· · · · · ·	[
					 				· · · · · · · · · · · · · · · · · · ·			 	-	 				-	
			-				ļ					-	├-	\vdash	 		-	-	
							 	<u> </u>	 			-	-	 		-		-	
Relinquished By: (Signature and Printed Name) Linde Mind 11-1875 9.75			9:45	Received By: (Signature and Printed Name) Date Time			1	Custody Seals: Jsed? Jotact?											
Relinquished By: (Signature and Printed Name)		Date	Time	h :-	Received By: (Signature and Printed Name)			Date	Tim	18	Turnarou Regular								
Relinquished By: (Signature and Printed Name)		Date	Time	Received for Lab	Received for Apb By: (Signature and Printed Name)		Bode	P1(18/15			Were	Were sample Yes		es properly preserved:		erved:			
Comments:					FLOW DATA F		Field Test				Resi			ult	Units				
					Analyst: Time:		pH: Temp.;	9:20	20 WOS		7.				°C °F				
						Reading:		DO:	1.2			1 40 C	<u> </u>		$\overline{}$	<u> </u>			
						Units:		Debris:											
		Cool all samples to 6 de	grees C.					Chlorinated	i? Yes N	lo		This	3 Doc	eume	ent is	Pag	e	of	