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

PERMITTEE NAME			PERMIT NO				
Waterford Estates at Hisson Ranch POA		V	4815-WR-4				
PERMITTEE ADDRESS		·	AFIN NO.				
3567 W New Hope Rd			72-00974				
Rogers, AR 72756							
		NITORING PERI	OD				
		MM/DD/YYYY			MM/DD/YYYY		
		9/1/2018		9/30/2018			
TREATED WASTEWATER EFFLUE	NT SAMPLING						
PARAMETER		Limit	Sample Measurement	UNITS	Monitoring	Reporting	
Flow, Monthly total		REPORT	1.0614	MG	Total Flow per calendar month		
Flow, daily maximun		REPORT	0.036202	MGD	Daily		
Carbonaceous Biochemical Oxygen Demand (CBOD5)		15	< 2.5	mg/l			
Total Suspended Solids (TSS)		15	< 2.5	mg/l			
Fecal Coliform Bacteria (FCB)		2,000	1,414	colonies/100ml	Grab Sample once per month		İ
рН		6.0 - 9.0	7.3	s.u.		Prior to the 15th of the	
Total Phosphorus (TP)		REPORT	7.51	mg/l		following Month	
Total Kjeldahl Nitrogen (TKN)		REPORT	No Report	mg/l			
Ammonia Nitrogen (NH3-N)		REPORT	No Report	mg/l	Grab sample once per quarter		
Nitrate Nitrogen (NO ₃ -N) + Nitrite Nitrogen (NO ₂ -N)		REPORT	No Report	mg/l			
Plant Available Nitrogen (PAN)	Plant Available Nitrogen (PAN)		No Report	mg/l			İ
Loading Rate		REPORT	See Attached	gpd/ft 2	Daily		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PE	NALTY OF LAW THAT I HAVE PERSONAL	LY EXAMINED AND AM WITH TH	HE INFORMATION →		TELEPHONE	DATE
	SUBMITTED HEREIN;	AND BASED ON MY INQUIRY OF THOSE	INDIVIDUALS IMMEDIATELY RE	SPONSIBLE FOR	omet Degay		40/4/0040
	OBTAINING THE INF	FORMATION, I BELIEVE THE SUBMITTE	SIGNATURE OF PRINCIPAL		10/4/2018		
Kathy Bartlett	COMPLETE. 1 AM AW	'ARE THAT THERE ARE SIGNIFICANT PEN	IALTIES FOR SUBMITTING FALS	E INFORMATION,	EXECUTIVE OFFICER OR	5926	
TYPED OR PRINTED		AUTHORIZED AGENT		MM/DD/YYYY			
COMMENTS AND EXPLANATION C	F VIOLATIONS (Re	eference all attachments here)					

Sept 2018 WATERFORD ESTATES I	OADING RATES 36,202 Max Day
Zone Identification	GPD/sq 2
Zone 1A	3,005
Zone 1B	2,860
Zone 2A	2,860
Zone 2B	2,715
Zone 3A	2,860
Zone 3B	2,860
Zone 4A	2,860
Zone 4B	2,860
Zone 5A	3,168
Zone 5B	3,316
Zone 6A	3,168
Zone 6B	3,620

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: 1809020121

Customer Name : WATERFORD UTILITY, LLC

Customer/Permit No.: 1886 / 4815-WR-4 Report Date: 09/24/18 Sample Date : 09/19/18

Sample Time: 0843

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

Work Order:
Purchase Order:

	Quality Assurance					
Analysis					Precision	Accuracy
Date Time By	<u>Parameter</u>	Result Notes	Quantity	Method	% RPD	<pre>% Recovery</pre>
09/19 0845 NTR	Нд	7.3 S.U.		SM 2000 4500-H+ B		
09/20 1330 TSB	Phosphorous, Total (as P)	7.510 mg/L		EPA 365.3	2.67	106.0 *
09/21 1100 TSB	Solids, Total Suspended	< 2.5 mg/L		SM 1997 2540 D	14.40	N/A *
09/19 1542 VLP	Fecal Coliform	1413.6 /100ml		06/2012 Colilert18	0.00	0.0 *
09/19 1400 TSB	BOD, Carbonaceous	< 2.5 mg/L		SM 2001 5210 B	0.62	100.0 *
09/19 0843 NTR	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.

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

Phone: 470.750.4470

CHAIN OF CUSTODY

Phone: 479-750-1170	Fax: 479-750-1172		CF	AIN C	JF GU	510	DY									
Client Information					Project Information					Requested			Parameters			
Company Name:	Waterford Estates			Permit/Pro	Permit/Project #:									\Box		
Address:	1695 Electric Avenue			Purchase	Order #:											1
Springdale AR 72764				1								}				ł
Telephone:				Sampler Name(s):		Ned Ruerson						25)	:_			
FAX:	(479)757-7650					7 = 1362				Œ.	ļ	Phos(25)	[6]			
				and Signature(s):			Ned Ryerson Med Ryers				(£)	_		=		
ESC Client Number:	1886		· · · · · · · · · · · · · · · · · · ·	1				0			E	16,	3	Ŕ		
Sample Ide	entification		Sample	Collection		Sample Containers			23)	Coliform(43.IF)	CBOD(70)	NH3(15.A),	TKN(16.A),N+N(91)			
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preserv	ative	# PH(23)	[H.	CBC	Ξ̈́	X		
Dose Tank/Effluent	1809020121	9-19-18	0843	Grab	Water	Teflon	150 ml	none		1 X						T
Waterford Estates		1		Grab	Water	whirlpak	300 ml	none/ice		1	х					
				Grab	Water	Plastic	1/2 gal	none/ice		1		x				
				Grab	Water	Plastic	8 oz	H₂SO₄,pF	l <2	1			х	х		1
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		1														T
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Relinquished By: (Signature and Prin	led Name)	Date	Time	Received By: (Signature and Printed Name)		d Name)	Date		Time		ustody Seals:					 -
Relinquished By: (Signature and Printed Name) Date Time		Time	Received By: (S	Received By: (Signature and Printed Name)			Date			urnaround:		<u> </u>	Intact	<u> </u>		
		Time	0: 1 15 10 (0) 10: 10:		3		7:		gular	Special oles properly preserved			1_			
Relinguished By Signature and Arinted Name) Date Time 714-18 354			A SOLUTION LAD	Received for Lab By: (Signature and Printed Name)		9//9/18	135°	γ Ivve	vvere sample Yes		openy	No No		7		
Comments: ()					FLOW D	ATA	Field Test	Time	Analyst		sult	Resi	_	Ū	Inits	
			·	····	Analyst: Time:		pH: Temp.:	0842	NTOR	-	7.3 5.5	7.	3	(C)	٩°	
					Reading:		DO:	204.3	1,4,1,5	1	2.3	123				
					Units:		Debris:					1	· · · ·			
< b	Cool all samples to 6 d	egrees C.						? Yes M	No	Th	is Dod	cume	nt is	Page	,	<u>↓</u> of _