

**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

**PERMITTEE ADDRESS**

3567 W New Hope Rd  
Rogers, AR 72756

**FACILITY NAME (IF DIFFERENT)**

Waterford Estates at Hissom Ranch POA

**FACILITY ADDRESS**

2323 Bowen Blvd  
Fayetteville AR 72703

**PERMIT NO.**

4815-WR-4

**AFIN NO.**

72-00974

**WASTEWATER EFFLUENT MONITORING PERIOD**

MM/DD/YYYY


9/1/2019

MM/DD/YYYY

9/30/2019

**TREATED WASTEWATER EFFLUENT SAMPLING**

PARAMETER	Limit	Sample Measurement	UNITS	Monitoring	Reporting
Flow, Monthly total	REPORT	0.867875	MG	Total Flow per calendar month	Prior to the 15th of the following Month
Flow, daily maximun	REPORT	0.038428	MGD	Daily	
Carbonaceous Biochemical Oxygen Demand (CBOD5)	15	5.6	mg/l	Grab Sample once per month	
Total Suspended Solids (TSS)	15	3.8	mg/l		
Fecal Collform Bacteria (FCB)	2,000	< 4.0	colonies/100ml		
pH	6.0 - 9.0	7.6	s.u.		
Total Phosphorus (TP)	REPORT	7.75	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.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
Kathy Bartlett			(479) 530-5926	10/14/2019
TYPED OR PRINTED				MM/DD/YYYY

COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)

Repaired 4 leaks where intaller had attached drip line with the wrong fitting and duct tape

Sept 2019 WATERFORD ESTATES LOADING RATES

Daily Max

38, 428

Zone Identification

GPD/sq 2

Zone 1A

3,189

Zone 1B

3,036

Zone 2A

3,036

Zone 2B

2,882

Zone 3A

3,036

Zone 3B

3,036

Zone 4A

3,036

Zone 4B

3,036

Zone 5A

3,362

Zone 5B

3,520

Zone 6A

3,362

Zone 6B

3,897

## 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: 1909020102  
Customer Name : WATERFORD UTILITY, LLC  
Customer/Permit No. : 1886 / 4815-WR-4  
Report Date : 10/03/19

Sample Date : 09/27/19  
Sample Time : 0925  
Sample Type : GRAB WATERFORD  
Sample From : DOSE TAN EFFLUENT

Collected By: JEW  
Delivery By : JEW  
Work Order :  
Purchase Order :

## Laboratory Analysis

Analysis			Parameter	Result	Notes	Quantity	Method
Date	Time	By					
09/27	0925	JEW	pH	7.6	S.U.		SM 2011 4500-H+ B
09/30	1330	TSB	Phosphorous, Total (as P)	7.750	mg/L		EPA 365.3
09/30	1030	TSB	Solids, Total Suspended	3.8	mg/L		SM 2011 2540 D
09/27	1600	TSB	Fecal Coliform (MPN/100mL)	< 4.0	/100ml		06/2012 Colilert18
09/27	1100	TSB	BOD, Carbonaceous	5.6	mg/L		SM 2001 5210 B

## Quality Assurance

<u>Precision</u>	<u>Accuracy</u>
<u>% RPD</u>	<u>% Recovery</u>
0.00	N/A *
2.23	112.0 *
0.00	N/A *
0.00	0.0 *
12.23	103.6 *

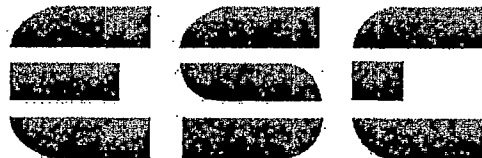
\* QA data shown is from a different sample or standard on the same date.

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

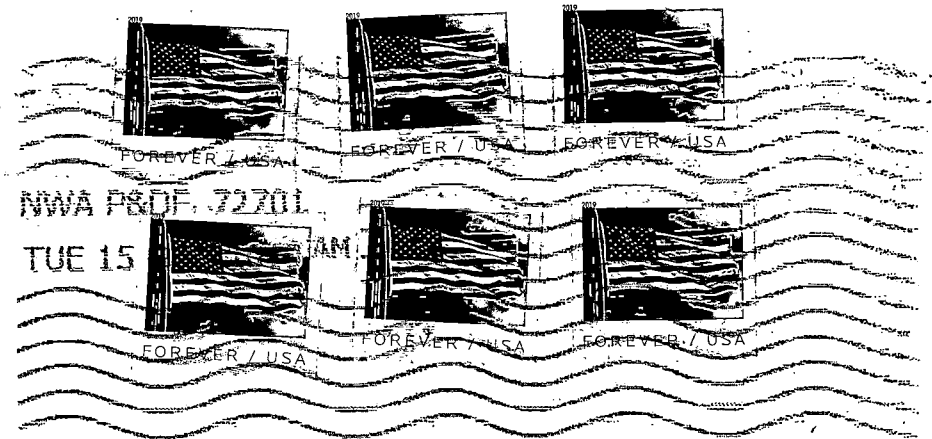
Phone: 479-750-1170 Fax: 479-750-1172

## CHAIN OF CUSTODY

Client Information						Project Information				Requested Parameters										
Company Name: Waterford Estates						Permit/Project #:				pH(23)	F. Coliform(43,IF)	CBOD(70), TSS(28)	Phos(25)							
Address: 1695 Electric Avenue						Purchase Order #:														
Springdale AR 72764																				
Telephone: (479)751-8868						Sampler Name(s): <i>James W. White</i>														
FAX: (479)757-7650						and Signature(s):														
ESC Client Number: 1886																				
Sample Identification		Sample Collection				Sample Containers														
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#											
Dose Tank/Effluent	1909020102	9-27-19	0925	Grab	Water	Teflon	150 ml	none	1	X										
Waterford Estates				Grab	Water	whirlpak	100 ml	none/ice	1		X									
				Grab	Water	Plastic	1/2 gal	none/ice	1			X								
				Grab	Water	Plastic	8 oz	H <sub>2</sub> SO <sub>4</sub> , pH <2	1				X							
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Custody Seals:												
<i>James W. White</i>		9-27-19	1040					Used? <input checked="" type="checkbox"/> Intact? <input type="checkbox"/>												
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Turnaround:												
								Regular <input checked="" type="checkbox"/> Special <input type="checkbox"/>												
Relinquished By: (Signature and Printed Name)		Date	Time	Received for Lab By: (Signature and Printed Name)		Date	Time	Were samples properly preserved:												
				<i>W. A. R. V. L. PATE</i>		9-27-19	1040	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>												
Comments:						FLOW DATA		Field Test	Time	Analyst	Result	Result	Units							
						Analyst:		pH:	0925	<i>GEW</i>	7.6	7.6								
						Time:		Temp.:	0925	<i>GEW</i>	25.3	25.4	(C) °F							
						Reading:		DO:												
						Units:		Debris:												
Cool all samples to 6 degrees C.						Chlorinated? Yes No				This Document is Page <u>1</u> of <u>1</u>										

NWA Utility Service  
PO BOX 9299  
Fayetteville, AR

72703



ADEQ  
Water Division  
Permits Branch  
5301 Northshore Drive  
N. Little Rock, AR

72118-5317