ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY

MONTHLY MONITORING REPORT FOR DECENTRALIZED WASTEWATER TREATMENT FACILITIES VIA DRIP IRRIGATION

PERMITTEE NA Sloan Estates PO PERMITTEE ADD PO Box 779 Springdale, Ar 73	A, Inc. RESS 7	FAC E	NAME (IF DIFFERENT) Sloan Estates ILITY ADDRESS 5088 E Sagely etteville, Ar 72703		PERMIT NO. 4837-W AFIN NO. 72-01074					
MAKE ADDITIONAL COPIES OF FUTURE USE. SUBMIT LAB AN FORM.	THIS FORM FOR	WASTEWATER MM/DD/YYYY 4/1/2019	EFFLUENT MONITORING PERIOD MM/DD/YYYY TO 4/30/2019	/						
TREATED WASTEWATER EFFLUENT SAMPLING										
PA	RAMETER	PERMIT REQUIREMENT	SAMPLE MEASUREMENT	UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE				
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE		****	7.6	MG/L	ONCE/ MONTH	GRAB				
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE		15	51	MG/L	ONCE/ MONTH	GRAB				
PH EFFLUENT GROSS VALUE		6 to 9	7.4	S.U.	ONCE/ MONTH	GRAB				
SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE		15	30	MG/L	ONCE/ MONTH	GRAB				
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE		10,000	<1	N/100 ML	ONCE/ MONTH	GRAB				
NITROGEN, TOTAL KJELDAHL (AS TKN) EFFLUENT GROSS VALUE		****	46	MG/L	ONCE/ MONTH	GRAB				
NITROGEN, AMMONIA TOTAL (AS NH₃N) EFFLUENT GROSS VALUE		*****	38.8	MG/L	ONCE/ MONTH	GRAB				
NITROGEN, NITRATE + NITRITE (AS NO ₃ N + NO ₂ -N) EFFLUENT GROSS VALUE		*****	1	MG/L	ONCE/ MONTH	GRAB				
PLANT AVAILABLE NITROGEN (AS PAN) CALCULATED VALUE		*****	42	MG/L	ONCE/ MONTH	GRAB				
FLOW, THRU CONDUIT OR TREATMENT UNIT EFFLUENT GROSS VALUE		****	MONTHLY TOTAL DAILY MAX 0.006 0.006	MGD	ONCE/ MONTH	TOTAL FLOW				
		HAVE PERSONALLY EXAMINED AND AM WITH THE		11	TELEPHONE	DATE				
	IMMEDIATELY RESPONSIBLE FOR OBTAININ	ASED ON MY INQUIRY OF THOSE INDIVIDUALS		501	501 888-0500					
MARK A DAVIS	INFORMATION IS TRUE, ACCURATE, AND COM			┨───┤	5/15/2019					
TYPED OR PRINTED	IMPRISONMENT.	AUTHORIZE			AREA NUMBER	MM/DD/YYYY				
	PENALTIES FOR SUBMITTING FALSE INFORI IMPRISONMENT. ION OF VIOLATIONS (Reference all att				AREA NUMBER CODE NUMBER	MM/DD/YYYY				

REPORT OF NON-COMPLIANCE WITH EFFLUENT LIMITATIONS

PERMITEE: Sloan Estates

REPORTING PERIOD: 4/1/2019-4/30/2019

PERMIT: 4837-W

REPORT DATE: 4/25/19

	NPDES	NPDES	NPDES	RESULT	DATE OF
PARAMETER (S)	<u>MIN</u>	AVG	MAX	<u>REPORTED</u>	EXCURSION
CBOD			15	51	4/17/2019
TSS			15	30	4/17/2019

COMMENTS:

We will clean our dose tank and check all pumps for propper operation

SIGNATURE

TITLE

DATE

Month

cognizant official

5/15/2019

NewWaterSystems

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