

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

**PERMITTEE NAME**  
 Greenfield Capital Development

**FACILITY NAME (IF DIFFERENT)**  
 Sloan Estates

**PERMIT NO.**  
 4837-W

NEW PERMIT IN THE PROCESS OF BEING APPLIED FOR BY SLOAN ESTATES POA

**PERMITTEE ADDRESS**  
 PO Box 9299  
 Fayetteville, AR 72703


**FACILITY ADDRESS**  
 5088 E Sagely  
 WC AR

**AFIN NO.**  
 72-01074

**WASTEWATER EFFLUENT MONITORING PERIOD**  
 FROM MM/DD/YYYY 8/1/2014 TO MM/DD/YYYY 8/31/2014

**TREATED WASTEWATER EFFLUENT SAMPLING**

PARAMETER	PERMIT REQUIREMENT	SAMPLE MEASUREMENT		UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE	*****	6.9		MG/L	ONCE/MONTH	GRAB
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE	15	8.1		MG/L	ONCE/MONTH	GRAB
PH EFFLUENT GROSS VALUE	6 to 9	6.5		S.U.	ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE	15	5		MG/L	ONCE/MONTH	GRAB
NITROGEN, AMMONIA TOTAL (AS N) EFFLUENT GROSS VALUE	*****	4.5		MG/L	ONCE/MONTH	GRAB
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE	10,000	72		N/100 ML	ONCE/MONTH	GRAB
FLOW, THRU CONDUIT OR TREATMENT UNIT EFFLUENT GROSS VALUE	*****	MONTHLY TOTAL	DAILY MAX	GPD	ONCE/MONTH	TOTAL FLOW
		40,747				

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
Kathryn Bartlett				479 530-5926	9/3/2014
TYPED OR PRINTED		AREA CODE	NUMBER	MM/DD/YYYY	

**COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)**

# 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: 1408020264	Sample Date : 08/20/14	Collected By: WDS
Customer Name : GREENFIELD CAP DEV-SLOAN EST.	Sample Time : 0840	Delivery By : WDS
Customer Number : 1678	Sample Type : GRAB-SLOAN ESTATES	Work Order :
Report Date : 08/26/14	Sample From : EFFLUENT	Purchase Order :

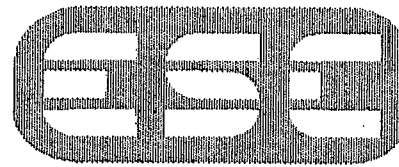
<u>Laboratory Analysis</u>							<u>Quality Assurance</u>	
<u>Analysis</u>			<u>Result</u>	<u>Notes</u>	<u>Quantity</u>	<u>Method</u>	<u>Precision</u>	<u>Accuracy</u>
<u>Date</u>	<u>Time</u>	<u>By</u>					<u>Parameter</u>	<u>% RPD</u>
08/21	1045	TSB	Ammonia Nitrogen	4.5 mg/L		SM 1997 4500-NH3 F	0.00	96.6 *
08/20	0840	WDS	pH	6.5 S.U.		SM 2000 4500-H+ B	0.00	N/A *
08/25	0930	TSB	Phosphorous, Total (as P)	6.9 mg/L		EPA 365.3	0.00	107.4 *
08/21	0900	KIK	Solids, Total Suspended	5.0 mg/L		SM 1997 2540 D	0.00	N/A *
08/20	1130	WDS	Coliform, Fecal	72 /100ml		SM 1997 9222 D	0.00	N/A *
08/20	1030	KIK	BOD, Carbonaceous	8.1 mg/L		SM 2001 5210 B	15.17	104.6 *

\* 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 Richard Brown  
 Environmental Services Co., Inc.

Environmental Services Company, Inc.  
 Corporate Office  
 13715 West Markham P.O. Box 55146  
 Little Rock, AR 72211 Little Rock, AR 72215  
 website: www.esclabs.com



Environmental Services Company, Inc.  
 Northwest Branch  
 1107 Century  
 Springdale, AR 72764

Phone: 501-221-2565 Fax: 501-221-1341

### CHAIN OF CUSTODY

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

Client Information						Project Information					Requested Parameters									
Company Name:		Greenfield Cap. Dev.-Sloan Estates				Permit/Project #:					pH (23)	Phos(25), NH <sub>3</sub> -N (15.A)	CBOD (70), TSS (28)	F. COLIFORM (43)						
Address:		1849 Trillium Lane Fayetteville, Ar 72704				Purchase Order #:														
Telephone:		(479)936-0333 (Cell)				Sampler Name(s):		Vade Schmitt												
Telephone:						and Signature(s):														
ESC Client Number:		1678																		
Sample Identification			Sample Collection			Sample Containers														
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#											
EFFLUENT	1408020264	8-20-14	8:40	GRAB	Water	teflon	150 ml	none	1	x										
EFFLUENT	I	I	I	GRAB	Water	Plastic	8 oz	H <sub>2</sub> SO <sub>4</sub> , pH<2	1		x									
EFFLUENT	I	I	I	GRAB	Water	Plastic	1 qt	none/ice	1			x								
EFFLUENT	I	I	I	GRAB	Water	Whirlpak	125 ml	Na <sub>2</sub> S <sub>2</sub> O <sub>3</sub>	1				x							
Cool all samples to 6 degrees C.																				
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Custody Seals:												
		8-20-14	11:25					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:												
						8-20-14	11:25	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>												
Comments:						FLOW DATA	Field Test	Time	Analyst	Result	Result	Units								
						Analyst:	pH:	8:40	WOS	6.5										
						Time:	Temp.:						°C	°F						
						Reading:	DO:													
						Units:	Debris:													
Cool all samples to 6 degrees C.						Chlorinated? Yes No			This Document is Page ___ of ___											

GCD  
P.O. Box 9299  
Fayetteville, AR 72703



SEP 04  
USPS

ADEQ Water Division  
Permits Branch  
5301 Northshore Dr  
N Little Rock, AR 72118-5317

