

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

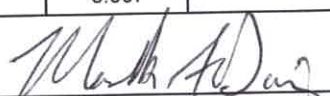
PERMITTEE NAME
Sloan Estates POA, Inc.
PERMITTEE ADDRESS
PO Box 7797 Springdale, Ar 72766

FACILITY NAME (IF DIFFERENT)
Sloan Estates
FACILITY ADDRESS
5088 E Sagely Fayetteville, Ar 72703

PERMIT NO.
4837-W
AFIN NO.
72-01074

MAKE ADDITIONAL COPIES OF THIS FORM FOR FUTURE USE. SUBMIT LAB ANALYSES WITH THIS FORM.

WASTEWATER EFFLUENT MONITORING PERIOD			
MM/DD/YYYY		MM/DD/YYYY	
FROM 12/1/2017		TO 12/31/2017	

TREATED WASTEWATER EFFLUENT SAMPLING							
PARAMETER	PERMIT REQUIREMENT	SAMPLE MEASUREMENT	UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE		
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE	*****	6.8	MG/L	ONCE/ MONTH	GRAB		
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE	15	67.5	MG/L	ONCE/ MONTH	GRAB		
PH EFFLUENT GROSS VALUE	6 to 9	6.8	S.U.	ONCE/ MONTH	GRAB		
SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE	15	36	MG/L	ONCE/ MONTH	GRAB		
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE	10,000	>6000	N/100 ML	ONCE/ MONTH	GRAB		
NITROGEN, TOTAL KJELDAHL (AS TKN) EFFLUENT GROSS VALUE	*****	42	MG/L	ONCE/ MONTH	GRAB		
NITROGEN, AMMONIA TOTAL (AS NH ₃ N) EFFLUENT GROSS VALUE	*****	38.7	MG/L	ONCE/ MONTH	GRAB		
NITROGEN, NITRATE + NITRITE (AS NO ₃ N + NO ₂ -N) EFFLUENT GROSS VALUE	*****	0	MG/L	ONCE/ MONTH	GRAB		
PLANT AVAILABLE NITROGEN (AS PAN) CALCULATED VALUE	*****	40	MG/L	ONCE/ MONTH	GRAB		
FLOW, THRU CONDUIT OR TREATMENT UNIT EFFLUENT GROSS VALUE	*****	MONTHLY TOTAL	DAILY MAX	MGD	ONCE/ MONTH	TOTAL FLOW	
		0.007	0.007				
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.				TELEPHONE		DATE
MARK A DAVIS	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		501	888-0500	1/23/2017		
TYPED OR PRINTED			AREA CODE	NUMBER	MM/DD/YYYY		
COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)							

REPORT OF NON-COMPLIANCE WITH EFFLUENT LIMITATIONS

PERMITEE: Sloan Estates

PERMIT: 4837-W

REPORTING PERIOD: 12/1/2017-12/31/2017

REPORT DATE: 1/5/18

<u>PARAMETER (S)</u>	<u>NPDES</u> <u>MIN</u>	<u>NPDES</u> <u>AVG</u>	<u>NPDES</u> <u>MAX</u>	<u>RESULT</u> <u>REPORTED</u>	<u>DATE OF</u> <u>EXCURSION</u>
Solids, Total Suspended			15	36	12/20/2017
CBOD			15	68	12/20/2017

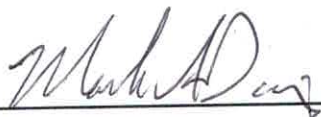
COMMENTS:

Will clean the spin filters

SIGNATURE

TITLE

DATE



cognizant official

1/23/2017

From: [Anderson, Alan](#)
To: [Deardoff, Amy](#)
Subject: FW: New Water MMR's
Date: Friday, February 09, 2018 2:40:15 PM
Attachments: [BRW30F772170A03_005063.pdf](#)

Hi Amy:

New Water MMRs

From: Bryant Floyd [mailto:bryan@newwatersystems.com]
Sent: Friday, January 26, 2018 4:06 PM
To: Anderson, Alan
Subject: New Water MMR's

Alan,

Attached are New Water's MMR's

Thanks
Bryan