## 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	FAC 5 Faye	NAME (IF DIFFERENT) Sloan Estates ILITY ADDRESS 088 E Sagely otteville, Ar 72703		PERMIT NO.   4837-W   AFIN NO.   72-01074					
MAKE ADDITIONAL COPIES OF THIS FORM FOR FUTURE USE. SUBMIT LAB ANALYSES WITH THIS	MM/DD/YYYY OM 2/1/2017	WASTEWATER EFFLUENT MONITORING PERIOD   MM/DD/YYYY MM/DD/YYYY   1 2/1/2017 TO 2/28/2017							
TREATED WASTEWATER EFFLUENT SAMPLING									
PARAMETER	PERMIT REQUIREMENT	SAMPLE MEASUREME	ENT UNITS	ANALYSIS	SAMPLE TYPE				
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE	*****	4.9	MG/L	ONCE/ MONTH	GRAB				
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE	15	44.6	MG/L	ONCE/ MONTH	GRAB				
PH EFFLUENT GROSS VALUE	6 to 9	7	S.U.	ONCE/ MONTH	GRAB				
SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE	15	41.6	MG/L	ONCE/ MONTH	GRAB				
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE	10,000	588,000	N/100 ML	ONCE/ MONTH	GRAB				
NITROGEN, TOTAL KJELDAHL (AS TKN) EFFLUENT GROSS VALUE	*****	26	MG/L	ONCE/ MONTH	GRAB				
NITROGEN, AMMONIA TOTAL (AS NH₃N) EFFLUENT GROSS VALUE	****	21.4	MG/L	ONCE/ MONTH	GRAB				
NITROGEN, NITRATE + NITRITE (AS NO <sub>3</sub> N + NO <sub>2</sub> -N) EFFLUENT GROSS VALUE	*****	1	MG/L	ONCE/ MONTH	GRAB				
PLANT AVAILABLE NITROGEN (AS PAN) CALCULATED VALUE	*****	24	MG/L	ONCE/ MONTH	GRAB				
FLOW, THRU CONDUIT OR TREATMENT UNIT EFFLUENT GROSS VALUE	****	and a state of the second s	Y MAX MGD	ONCE/ MONTH	TOTAL FLOW				
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER I CERTIFY UNDER PENALTY OF LAW T	HAT I HAVE PERSONALLY EXAMINED AN	ND AM WITH THE	111	TELEPHONE	DATE				
IMMEDIATELY RESPONSIBLE FOR OBT	HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED WRATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT SIGNATURE OF PRINCIPAL 501 888-0500 3/24								
TYPED OR PRINTED IMPRISONMENT.	NFORMATION, INCLUDING THE POSSIBILI	TY OF FINE AND EXEC	CUTIVE OFFICER OR THORIZED AGENT	AREA CODE NUMBER	MM/DD/YYYY				
COMMENTS AND EXPLANATION OF VIOLATIONS (Reference a	Il attachments here )								

## REPORT OF NON-COMPLIANCE WITH EFFLUENT LIMITATIONS

#### PERMITEE: Sloan Estates

#### **PERMIT: 4837-W**

## REPORTING PERIOD: 2/1/2017-2/28/2017

## REPORT DATE: 2/24/17

	NPDES	NPDES	NPDES	RESULT	DATE OF
PARAMETER (S)	MIN	AVG	MAX	REPORTED	EXCURSION
Fecal			10000	588,000	2/14/2017
BOD, Carbonaceous			15	45	2/14/2017
Solids, Total Suspended			15	42	2/14/2017

#### COMMENTS:

Corrective action plan has been submitted will be working with the engineer to get this system in compliance

SIGNATURE

Mul Dr

TITLE

DATE

cognizant official

3/24/2017

Amy:

MMRs from New Water Client facilities

From: Bryan Floyd [mailto:Bryan@newwatersystems.com] Sent: Tuesday, April 04, 2017 2:48 PM To: Anderson, Alan Subject: MMR's

Alan,

Attached are the MMR's for February. Sorry they are late.

Thanks

Bryan

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