

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

PERMITTEE NAME
Greenfield Capital Development
PERMITTEE ADDRESS
PO Box 9299 Fayetteville, AR 72703


FACILITY NAME (IF DIFFERENT)
Sloan Estates
FACILITY ADDRESS
5088 E Sagely WC AR

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

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

WASTEWATER EFFLUENT MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
FROM 2/1/2015	TO 2/28/2015

TREATED WASTEWATER EFFLUENT SAMPLING						
PARAMETER	PERMIT REQUIREMENT	SAMPLE MEASUREMENT		UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE	*****	5.8		MG/L	ONCE/MONTH	GRAB
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE	15	3		MG/L	ONCE/MONTH	GRAB
PH EFFLUENT GROSS VALUE	6 to 9	7.2		S.U.	ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE	15	2		MG/L	ONCE/MONTH	GRAB
NITROGEN, AMMONIA TOTAL (AS N) EFFLUENT GROSS VALUE	*****	5.8		MG/L	ONCE/MONTH	GRAB
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE	10,000	3,600		N/100 ML	ONCE/MONTH	GRAB
FLOW, THRU CONDUIT OR TREATMENT UNIT EFFLUENT GROSS VALUE	*****	MONTHLY TOTAL	DAILY MAX	GPD	ONCE/MONTH	TOTAL FLOW
		49,275				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Kathryn Bartlett TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND 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
			479 530-5926	3/5/2015
			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: 1502020226	Sample Date : 02/18/15	Collected By: WDS
Customer Name : GREENFIELD CAP DEV-SLOAN EST.	Sample Time : 0835	Delivery By : WDS
Customer Number : 1678	Sample Type : GRAB SLOAN	Work Order :
Report Date : 02/24/15	Sample From : EFFLUENT	Purchase Order :

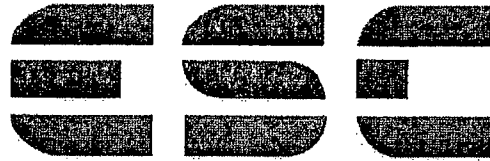
Laboratory Analysis							Quality Assurance		
Analysis							Precision	Accuracy	
Date	Time	By	Parameter	Result	Notes	Quantity	Method	% RPD	% Recovery
02/19	1000	TSB	Ammonia Nitrogen	5.8 mg/L			SM 1997 4500-NH3 F	0.00	107.0 *
02/18	0835	WDS	pH	7.2 S.U.			SM 2000 4500-H+ B	0.00	N/A *
02/19	1500	TSB	Phosphorous, Total (as P)	5.8 mg/L			EPA 365.3	0.00	90.0 *
02/20	1550	KIK	Solids, Total Suspended	2.0 mg/L			SM 1997 2540 D	0.00	N/A *
02/18	1615	RHB	Coliform, Fecal	3600 /100ml			SM 1997 9222 D	0.00	N/A *
02/18	1200	KIK	BOD, Carbonaceous	3.0 mg/L			SM 2001 5210 B	2.47	94.9 *

* 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.
 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:		Greenfield Cap. Dev.-Sloan Estates		Permit/Project #:							pH (23)	Phos(25), NH ₃ -N (15.A)	CBOD (70), TSS (28)	F. COLIFORM (43)							
Address:		1849 Trillium Lane		Purchase Order #:																	
		Fayetteville, Ar 72704		Sampler Name(s):																	
Telephone:		(479)936-0333 (Cell)		and Signature(s):																	
Telephone:																					
ESC Client Number:		1678																			
Sample Identification		Sample Collection				Sample Containers															
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#												
EFFLUENT	1502020226	2-18-15	8:35	GRAB	Water	teflon	150 ml	none	1	x											
EFFLUENT	I	I	I	GRAB	Water	Plastic	8 oz	H ₂ SO ₄ , 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 ₂ S ₂ O ₃	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:		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:		Yes <input checked="" type="checkbox"/>		No <input type="checkbox"/>									
Comments:				FLOW DATA		Field Test		Time	Analyst	Result	Result	Units									
				Analyst:		pH:		8:35	WDS	7.2											
				Time:		Temp.:						°C °F									
				Reading:		DO:															
				Units:		Debris:															
Cool all samples to 6 degrees C.										Chlorinated? Yes No		This Document is Page <u> </u> of <u> </u>									