

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

PERMITTEE NAME

Bethel Oaks Property Owners Association Inc

FACILITY NAME

Bethel Oaks Subdivision

PERMIT NO.

4875-WR-3

PERMITTEE ADDRESS

12531 Bethel Oaks Dr
Farmington AR 72730

FACILITY ADDRESS

CR 62 Farmington AR

AFIN NO.

72-01656

WASTEWATER EFFLUENT MONITORING PERIOD

MM/DD/YYYY

8/1/2019

MM/DD/YYYY

8/31/2019

TREATED WASTEWATER EFFLUENT SAMPLING

Parameter	Limit	Sample Measurement	Units	Monitoring	Reporting
Flow, Monthly total	REPORT	0.225877	MG	Total Flow per calendar month	Prior to the 15th of the following Month
Flow, daily maximum *	REPORT	8,496	GD	Daily	
Carbonaceous Biochemical Oxygen Demand (CBOD5)	30	< 2	mg/l	Grab Sample once per month	
Total Suspended Solids (TSS)	45	27	mg/l		
Fecal Coliform Bacteria (FCB)	7,800	< 2	colonies/100ml		
pH	6.0 - 9.0	7.2	s.u.		
Total Phosphorus (TP)	REPORT	7.73	mg/l		
Total Kjeldahl Nitrogen (TKN)	REPORT	No Report	mg/l	Grab sample once per quarter	
Ammonia Nitrogen	REPORT	No Report	mg/l		
Nitrate Nitrogen (NO ₃ -N) + Nitrite Nitrogen (NO ₂ -N)	REPORT	No Report	mg/l		
Plant Available Nitrogen (PAN)	REPORT	No Report	mg/l		

NAME OF PRINCIPAL EXECUTIVE OFFICER

Kathy Bartlett

TYPED OR PRINTED

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 COGNIZANT OFFICIAL

TELEPHONE

(479) 530-5926

DATE

9/10/2019

COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)

*** LOADING RATE BY ZONE**

Zone 1	708.00	Zone 5	708.00	Zone 9	708.00
Zone 2	708.00	Zone 6	708.00	Zone 10	708.00
Zone 3	708.00	Zone 7	708.00	Zone 11	708.00
Zone 4	708.00	Zone 8	708.00	Zone 12	708.00

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: 1908020070
 Customer Name : BETHEL OAKS UTILITY,LLC
 Customer/Permit No. : 1855 / 4875-WR-3
 Report Date : 08/26/19

Sample Date : 08/16/19
 Sample Time : 1520
 Sample Type : GRAB BETHEL OAKS
 Sample From : EFFLUENT


Collected By: JEW
 Delivery By : JEW
 Work Order :
 Purchase Order :

Laboratory Analysis

Analysis						Quality Assurance			
Date	Time	By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Accuracy % Recovery
08/16	1520	JEW	pH	7.2	S.U.		SM 2011 4500-H+ B	0.00	N/A *
08/19	1500	TSB	Phosphorous, Total (as P)	7.730	mg/L		EPA 365.3	0.00	107.0 *
08/20	1406	TSB	Solids, Total Suspended	27.0	mg/L		SM 2011 2540 D	1.24	N/A *
08/16	1730	TSB	Fecal Coliform (MPN/100mL)	< 2.0	/100ml		06/2012 Colilert18	0.00	0.0
08/16	0800	TSB	BOD, Carbonaceous	< 2.0	mg/L		SM 2001 5210 B	0.65	114.0 *
08/19	1433	TSB	Solids, % Total by mass	0.040	%		SM 1997 2540 G	24.18	N/A

* QA data shown is from a different sample or standard on the same date.

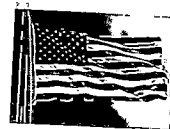
All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

Signature 
 Environmental Services Co., Inc.

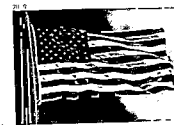
NWA Utility Services

PO BOX 9299

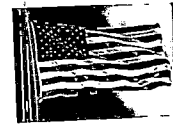
Fayetteville AR 72704



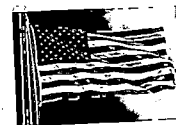
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ADEQ

Water Division / Permits
Branch

5301 Northshore Blvd

N. Little Rock, AR

72178-5317

