

# ADEQ

ARKANSAS  
Department of Environmental Quality

February 4, 2020

Ryan Russell  
Legacy Estates Homeowners Association, Inc.  
PO Box 8835  
Fayetteville, AR 72702

Re: Permit Number 4890-WR-2, AFIN 72-01642

Dear Mr. Russell:

Please be advised that the above referenced permit will expire on October 31, 2020. To date, our records show that you have not reapplied for the renewal permit. We are aware that you still have time in which to submit a renewal application. However, in order to continue operating after the expiration date of the existing permit, a **complete** renewal application must be received by the Office of Water Quality no later than **May 4, 2020**.

Please be advised, **the subject permit is no longer valid after the expiration date**. If a complete renewal application or request for an extension is not received by **May 4, 2020**, this will be in violation of your current permit and state regulations.

If our records are incorrect, or if you do not desire to renew your permit, please respond by letter as soon as possible. If you need more time to submit the renewal application, please submit your request in writing to the Director of the Division of Environmental Quality prior to **May 4, 2020**. Documents may be submitted in PDF format to [water-permit-application@adeq.state.ar.us](mailto:water-permit-application@adeq.state.ar.us).

A copy of the application forms can be obtained at the following website:  
<https://www.adeq.state.ar.us/water/permits/nodischarge/individual/>

A checklist is enclosed with this letter for your convenience. The checklist is to assist in submitting an administratively complete application. Any questions regarding the permit renewal forms should be communicated to the contact person listed below.

Thank you for your cooperation. If you have any questions, please feel free to contact Katherine McWilliams, P.E. at (501) 682-0651 or by email at [mcwilliamsk@adeq.state.ar.us](mailto:mcwilliamsk@adeq.state.ar.us).

Sincerely,



Jamal Solaimanian, Ph.D., P.E.  
Engineer Supervisor

JS:ad

Encl.: Drip Irrigation Renewal Checklist

cc: Richard Healey, Enforcement Branch Manager

## Drip Irrigation

| Yes                      | No                       |                                                                                                    |
|--------------------------|--------------------------|----------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <b>A. Complete Permit Application</b>                                                              |
| <input type="checkbox"/> | <input type="checkbox"/> | i. Owner Name on Application matches Arkansas Secretary of State <sup>1</sup>                      |
| <input type="checkbox"/> | <input type="checkbox"/> | ii. Proof of Good Standing with the Arkansas Secretary of State and State of Origin, if applicable |
| <input type="checkbox"/> | <input type="checkbox"/> | iii. Application signed by Responsible Official <sup>2</sup>                                       |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>B. Complete Disclosure Statement<sup>3</sup></b>                                                |
| <input type="checkbox"/> | <input type="checkbox"/> | i. Applicant Name on Disclosure Statement matches Arkansas Secretary of State <sup>1</sup>         |
| <input type="checkbox"/> | <input type="checkbox"/> | ii. Disclosure Statement signed by Responsible Official <sup>2</sup>                               |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>C. Proof of ownership or control of land (Deed/Lease)</b>                                       |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>D. Arkansas Department of Health notification letter (New or Modified Applications)</b>         |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>E. Complete Waste Management Plan<sup>4</sup></b>                                               |
| <input type="checkbox"/> | <input type="checkbox"/> | i. WMP signed, dated, and stamped by an Arkansas Registered Professional Engineer                  |
| <input type="checkbox"/> | <input type="checkbox"/> | ii. Construction Drawings certified by an Arkansas Registered Professional Engineer                |
| <input type="checkbox"/> | <input type="checkbox"/> | iii. Aerial and Topographic maps showing location of system                                        |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>F. Complete Nonmunicipal Domestic Sewage Treatment Works Form, if applicable</b>                |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>G. Complete Operations and Maintenance Manual</b>                                               |

### Permit Application

PDF: <https://www.adeq.state.ar.us/water/permits/pdfs/subsurface-drip-irrigation-app.pdf>

Word: <https://www.adeq.state.ar.us/water/permits/pdfs/subsurface-drip-irrigation-app.docx>

### Disclosure Statement

PDF: [https://www.adeq.state.ar.us/ADEQ\\_Disclosure\\_Statement.pdf](https://www.adeq.state.ar.us/ADEQ_Disclosure_Statement.pdf)

### Nonmunicipal Domestic Sewage Treatment Works Form

PDF: <https://www.adeq.state.ar.us/water/permits/pdfs/ndstw-trust-fund-certification-form.pdf>

Word: <https://www.adeq.state.ar.us/water/permits/pdfs/ndstw-trust-fund-certification-form.doc>

<sup>1</sup> Not required for sole proprietorships/private, municipal, state, federal, or other public facility

<sup>2</sup> See last page of application for signatory requirements

<sup>3</sup> See exemptions on Disclosure Statement. All others must complete the Disclosure Statement.

<sup>4</sup> See Technical Requirements in the application.