

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

PERMITTEE NAME
Legacy Estates Homeowners Association Inc

FACILITY NAME (IF DIFFERENT)
Legacy Estates Wastewater Treatment Facility

PERMIT NO.
4890-WR-2

PERMITTEE ADDRESS
PO Box 8835
Fayetteville AR 72702

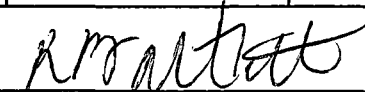
FACILITY ADDRESS
13158 Randolph Rd
Tontitown AR

AFIN NO.
72-01642

WASTEWATER EFFLUENT MONITORING PERIOD

MM/DD/YYYY	MM/DD/YYYY
8/1/2019	8/31/2019

TREATED WASTEWATER EFFLUENT SAMPLING					
PARAMETER	Limit	Sample Measurement	UNITS	Monitoring	Reporting
Flow, Monthly total	REPORT	0.286037	MG	Total Flow per calendar month	Prior to the 15th of the following Month
Flow, daily maximum	REPORT	0.012228	MGD	Daily	
Carbonaceous Biochemical Oxygen Demand (CBOD5)	15	< 2	mg/l	Grab Sample once per month	
Total Suspended Solids (TSS)	15	11.4	mg/l		
Fecal Coliform Bacteria (FCB)	2,000	2,092	colonies/100ml		
pH	6.0 - 9.0	7.4	s.u.		
Total Phosphorus (TP)	REPORT	8.26	mg/l		
Total Kjeldahl Nitrogen (TKN)	REPORT	58	mg/l	Grab sample once per quarter	
Ammonia Nitrogen	REPORT	55	mg/l		
Nitrate Nitrogen (NO ₃ -N) + Nitrite Nitrogen (NO ₂ -N)	REPORT	0.89	mg/l		
Plant Available Nitrogen (PAN)	REPORT	56.8	mg/l		
Loading Rate	REPORT	See Attached	gpd/ft ²	Daily	

NAME/TITLE 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 PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			(479) 530-5926	9/10/2019 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: 1908020072
 Customer Name : LEGACY UTILITY, LLC
 Customer/Permit No. : 2440 / 4890-WR-2 N/A
 Report Date : 08/26/19

Sample Date : 08/16/19
 Sample Time : 1620
 Sample Type : GRAB LEGACY
 Sample From : EFFLUENT

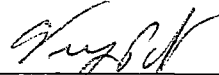
Collected By: JEW
 Delivery By : JEW
 Work Order :
 Purchase Order :

Laboratory Analysis

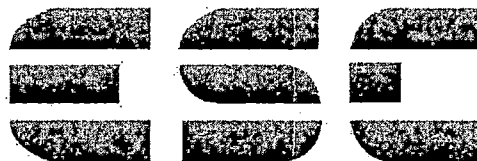
Analysis			Laboratory Analysis				Quality Assurance		
Date	Time	By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Accuracy % Recovery
08/19	1230	TSB	Ammonia as N, (HACH 10205)	55.00 mg/L			SM 2011 4500-NH3 F	0.76	103.2 *
08/20	0900	TSB	Total Kjeldahl Nitrogen	58.0 mg/L			02/2014 HACH 10242	0.00	99.0 *
08/16	1620	JEW	pH	7.4 S.U.			SM 2011 4500-H+ B	0.00	N/A *
08/19	1500	TSB	Phosphorous, Total (as P)	8.260 mg/L			EPA 365.3	0.00	107.0 *
08/20	1406	TSB	Solids, Total Suspended	11.4 mg/L			SM 2011 2540 D	1.24	N/A *
08/16	1730	TSB	Fecal Coliform (MPN/100mL)	2092.4 /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 *
08/23	1230	TSB	Nitrate + Nitrite	0.89 mg/L			01/2013 HACH 10206	0.39	96.0
08/23	1700	TSB	Nitrogen, Plant Available	56.8 mg/L			SM 1997 4500-N		

* 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.

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: Legacy Estates						Permit/Project #:					pH (23)	T-Phos (25)	CBOD (70), TSS (28)	Fecal Coliform (43.IF)	NO ₃ +NO ₂ (91), s-TKN (16)	NH ₃ -N (15.A), PAN (99.99)
Address: 13158 Randolph Rd. Tontitown, AR 72770						Purchase Order #:										
Telephone: Ken Gregory's Cell- (479) 790-3813						Sampler Name(s): <i>James Wiltz, James Wiltz</i>										
Telephone:						and Signature(s):										
ESC Client Number: 2440																
Sample Identification		Sample Collection				Sample Containers										
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#							
EFFLUENT	1908020072	8-16-19	1620	GRAB	Water	glass	150 ml	none		X						
EFFLUENT				GRAB	Water	Plastic	8 oz	H ₂ SO ₄ , pH<2	1		X		X	X		
EFFLUENT				GRAB	Water	Plastic	1/2 gal	none/ice	1			X				
EFFLUENT				GRAB	Water	Whirlpak	100 ml	Na ₂ S ₂ O ₃	1				X			
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)				Date	Time	Custody Seals:						
<i>James Wiltz, James Wiltz</i>		8-16-19	1650							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:						
				<i>James Wiltz, James Wiltz</i>				8-16-19	1650	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>			
Comments:						FLOW DATA	Field Test	Time	Analyst	Result	Result	Units				
Quarterly						Analyst:	pH:	1620	JEW	7.4	7.4					
						Time:	Temp.:	1620	JEW	26.0	26.0	°C				
						Reading:	DO:									
						Units:	Debris:									
Cool all samples to 6 degrees C.										Chlorinated? Yes No		This Document is Page 1 of 1				

SK

Aug 2019 LEGACY ESTATES

PERMIT # 4890-WR-1

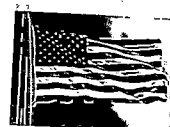
MAXIMUM DAILY FLOW GPD 12228.00

ZONE IDENTIFICATION	LOADING RATE BY ZONE
A 1	997.8048
B 1	919.5456
C 1	547.8144
D 1	1403.7744
E 1	1403.7744
F 1	760.5816
G 1	656.6436
H 1	678.654
I 1	1000.2504
J 1	1099.2972
K 1	1320.624
L 1	1434.3444

NWA Utility Services

PO BOX 9299

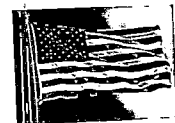
Fayetteville AR 72704



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ADEQ

Water Division / Permits
Branch

5301 Northshore Blvd

N. Little Rock, AR

72178-5317

