ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY

MONITORING REPORT FOR DECENTRALIZED WASTEWATER TREATMENT FACILITIES VIA DRIP IRRIGATION MONTHLY MONITORING REPORT

Legacy Estates Homeowners Association Inc PERMITTEE ADDRESS PO Box 8835 Fayetteville AR 72702				ESS .		L	4890-WR-2 AFIN NO.					
PO Box 8835		WASTE	13158 Randolph			Г	AEINI NO					
Fayetteville AN 12102		WASTE		FACILITY ADDRESS 13158 Randolph Rd								
		I MACTE	WASTEWATER EFFLUENT MONITORING PERIOD									
			MM/DD/YYYY									
		MM/DD/YYYY 10/1/2019		10/31/2019								
		10/1/2010	<u> </u>									
TREATED WASTEWATER EFFLUENT SAMPL	NG	T	·									
PARAMETER		Limit	Sample Measurement	UNITS	Monitoring	Re	porting					
Flow, Monthly total		REPORT	0.403726	MG	Total Flow per calendar month							
Flow, daily maximun		REPORT	0.017375	MGD	Daily							
Carbonaceous Biochemical Oxygen Demand (CBO	5)	15	2	mg/l								
Total Suspended Solids (TSS)		16	5.91	mg/l								
Fecal Coliform Bacteria (FCB)	-	2,000	< 1.0	colonies/100ml	Grab Sample once per month							
рН		6.0 - 9.0	7.4	s.u.		Prior to th	he 15th of the					
Total Phosphorus (TP)		REPORT	5.91	mg/l		follow	ing Month					
Total Kjeldahl Nitrogen (TKN)		REPORT	43.8	mg/l								
Ammonia Nitrogen		REPORT	25.2	mg/l	Grab sample once per quarter							
Nitrate Nitrogen (NO3-N) + Nitrite Nitrogen (NO2-N)		REPORT	4.13	mg/l	Crab sample office per quarter							
Plant Available Nitrogen (PAN)		REPORT	34.9	mg/l								
Loading Rate		REPORT	See Attached	gpd/ft 2	Daily							
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER I CERTIFY U	IDER PE	NALTY OF LAW THAT I HAVE PERSONALLY	1		TELEPHONE	DATE						
SUBMITTED	HEREIN;	AND BASED ON MY INQUIRY OF THOSE IN	DIVIDUALS IMMEDIATELY RE	Mountait								
OBTAINING	THE INF	FORMATION, I BELIEVE THE SUBMITTED	CCURATE, AND	SIGNATURE OF PRINCIPAL		(479) 530-	11/14/2019					
Kathy Bartlett COMPLETE.	AM AW	ARE THAT THERE ARE SIGNIFICANT PENAL	TIES FOR SUBMITTING FALS	E INFORMATION,	EXECUTIVE OFFICER OR	į	5926					
		SIBILITY OF FINE AND IMPRISONMENT.			AUTHORIZED AGENT		MM/DD/YYYY					
COMMENTS AND EXPLANATION OF VIOLATION	NS (Re	eference all attachments here)										

2019 LEGACY ESTATES

PERMIT # 4890-WR-1

MAXIMUM DAILY FLOW GPD

17375.00

ZONE IDENTIFICATION	LOADING RATE BY ZONE
A 1	1417
B 1	1306
C 1	774
D 1	1994
E 1	1994
F 1	1080
G 1	941
H 1	972
11	1421
J 1	1562
K 1	1876
L1	2038

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: 1910020133

Customer Name : LEGACY UTILITY, LLC

Customer/Permit No.: 2440 / 4890-WR-2 N/A

10/22 1500 TSB Nitrogen, Plant Available

Report Date : 10/28/19

Sample Date : 10/18/19 Sample Time : 0848

Sample Type : GRAB

Sample From : EFFLUENT

Collected By: NTR Delivery By : NTR

Work Order : Purchase Order :

,	Quality F	Assurance				
Analysis	•				Precision	Accuracy
Date Time By	Parameter	Result Notes	Quantity	Method	% RPD	% Recovery
10/18 1345 TSB	Ammonia as N, (HACH 10205)	25.20 mg/L		SM 2011 4500-NH3 F	1.14	98.0 *
10/21 1230 TSB	Total Kjeldahl Nitrogen	43.8 mg/L		02/2014 HACH 10242	2.11	95.2 *
10/18 0850 NTR	рН	7.4 S.U.		SM 2011 4500-H+ B	0.00	N/A *
10/21 1544 TSB	Phosphorous, Total (as P)	5.91 mg/L		EPA 365.3	0.90	108.0 *
10/23 1430 TSB	Solids, Total Suspended	5.7 mg/L		SM 2011 2540 D	4.85	N/A *
10/18 1500 TSB	Fecal Coliform (MPN/100mL	< 1.0 /100ml	ė	06/2012 Colilert18	0.00	0.0 *
10/18 0800 TSB	BOD, Carbonaceous	< 2.0 mg/L		SM 2001 5210 B	6.84	118.0 *
10/21 1300 TSB	Nitrate + Nitrite	4.13 mg/L		01/2013 HACH 10206	1.82	98.4 *

34.9 mg/L

* OA 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.

SM 1997 4500-N

Environmental Services Company, Inc. Northwest Arkansas 1107 Century Street Springdale, Arkansas 72762 website: www.esclabs.com

Fax: 479-750-1172

Phone: 479-750-1170

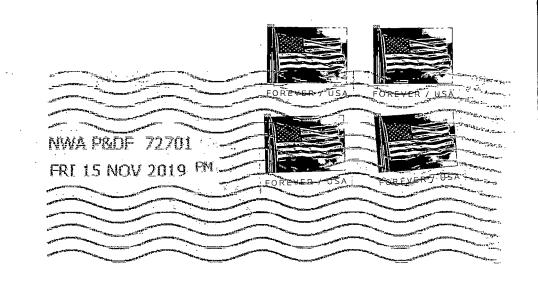
Corporate Office, Little Rock, Arkansas 501-221-2565

> Carlsbad, New Mexico 575-887-1ESC

CHAIN OF CUSTODY

Client Information					Project Information						Requested Parameters						3				
Company Name	ame: Legacy Estates				Permit/Project #:																
Address:	Iress: 13158 Randoplh Rd.				Purchase Order #:						İ	İ	}				l				
Tontitown, AR 72770										}			(16)	(66.6	1	1					
Telephone: Ken Gregory's Cell- (479) 790-3813					Sampler Name(s): Ned R) CASO	1			8	Ē	s-TKN	(99		1				
Telephone:					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			7 - 30		1		TSS (28)	43.	S-T	X		l				
i elehione.					and Signature(s):			n. O. C	d Rycrson Dre				TS	E	£.	2					
ESC Client Number: 2440					and dignature(3).			1947	2 mgs -				<u> </u> 6	냺	2 (6	15.4					
	ole Iden			1		Ç.	mnlo	Collection Sa			Sample Containers				T-Phos (25)	СВОD (70),	Fecal Coliform (43.IF)	NO ₃ +NO ₂ (91),	NH ₃ -N (15.A), PAN		ĺ
-			Control #	Η,					Tuno	Volume			# Land	<u> </u> $\frac{1}{4}$		90	õ	표			
Identification				Date		Time D&4-3		Туре	1	Туре		1	ative 1		+	₽	1-	=	=	\vdash	-
EFFLU		1910	0020133	10-	8-19	08	4-8	GRAB	Water	glass	150 ml	попе		X		╁	├		7.45		
EFFLU			<u> </u>	-			 	GRAB	Water	Plastic	8 oz	H₂SO₄,pH<		Ч-	X		├—		X		
EFFLU	JENT		<u> </u>	<u> </u>	<u> </u>		1	GRAB	Water	Plastic	1/2 gal	none/ice		<u>'</u>	┿	X	+	├			
EFFLU	JENT			<u> </u>			<u></u>	GRAB	Water	Whiripak	100 ml	Na ₂ S ₂ O ₃		Ц_	ـــ	ــ	X	ـــــ			
	_					<u> </u>						<u> </u>			<u> </u>	<u> </u>	<u> </u>	<u> </u>	ļ		
						<u> </u>				<u> </u>											ļ
															<u></u>						
															-		-				
											-		ŀ		1	Γ					
				ļ				<u> </u>													
Relinquished By: (Signature	e and Printed	Name)			Date	Time Received By: (Si			d By: (Signature and Printed Name)			Date	Time		-	ody Seals:			······································		
Relinquished By: (Signature and Printed Name) Date Time				Received By: (Signature and Printed Name) Date Time				Jsed? N Intact?													
									egular X Special												
Relinquished By (Signature and Printed Name) Date Time 16-18-19-69-50				Received for beb	Received for Leo By: (Signature and Printed Visine)		1018-19	950	Wer		amples properly preserved: es X No			!							
Comments: ()					LOW WILL	FLOW D	ATA	Field Test		Analyst	Res					Units					
								Analyst:		pH:	0850	NM		1.4		74 Su					
Quarterly							Time:		Temp.:	0850	Nin		R. R	18	9	(°C)		°F			
								Reading: Units:		DO: Debris:			+		-		 				
		Cool all	samples t	060	degree	es C.				4	Chlorinated	i? Yes N	lo lo	This Document is Page					e <u>1</u>	of _r	
CANAL ACIEODA	CHAIL JOEOBASICHAIN YIS								;										1 7		

NWA Utility Sewicul PO POXX 9299 FAYLTTEVIIIE, AR 72703



APEQ Water DIVISION Permits Branch 5301 Northshore Dr North LITTLE ROCK, AR 72118-5317