

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

PERMITTEE NAME
City of Cave Springs
PERMITTEE ADDRESS
PO Box 5 Cave Springs AR 72718


FACILITY NAME (IF DIFFERENT)
City of Cave Springs WWTS
FACILITY ADDRESS
The Creeks Golf Course 1499 S Main St Cave Springs AR 72718

PERMIT NO.
4893-WR-2

AFIN NO.
04-01642

WASTEWATER EFFLUENT MONITORING PERIOD		
MM/DD/YYYY		MM/DD/YYYY
4/1/2018		4/30/2018

TREATED WASTEWATER EFFLUENT SAMPLING					
PARAMETER	Limit	Sample Measurement	UNITS	Monitoring	Reporting
Carbonaceous Biochemical Oxygen Demand (CBODs)	15	3.7	mg/l	GRAB SAMPLE ONCE A MONTH	Prior to the 15th of the following month
Total Suspended Solids (TSS)	15	5.9	mg/l		
Fecal Coliform Bacteria (FCB)	10,000	700	colonies/100ml		
pH	6.0 - 9.0	6.3	s.u.		
Total Phosphorus (TP)	REPORT	5.8	mg/l		
Total Kjeldahl Nitrogen (TKN)	REPORT	17.9	mg/l		
Ammonia Nitrogen (NH ₃ -N)	REPORT	9.7	mg/l		
Nitrate Nitrogen (NO ₃ -N)	REPORT	35.3	mg/l		
Nitrite Nitrogen (NO ₂ -N)	REPORT	0.464	mg/l		
Total Solids	REPORT	0.038	Percentage (%)		
Plant Available Nitrogen (PAN)	REPORT	47.9	mg/l		
Flow Monthly Total	REPORT	2.380181	MGD		
Flow Daily Maximum	REPORT	0.095683	MGD		

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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	5/8/2018
TYPED OR PRINTED				

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

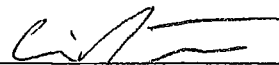
Northwest Arkansas Branch
 1107 Century Avenue
 Springdale, AR 72762
 Tel. (479)750-1170 Fax (479)750-1172

Control Number: 1804020057	Sample Date : 04/04/18	Collected By: AEU
Customer Name : CAVE SPRINGS, CITY OF OUTFALL 2	Sample Time : 1207	Delivery By : AEU
Customer/Permit No. : 2379 / 4893-WR-2 002	Sample Type : GRAB	Work Order :
Report Date : 04/26/18	Sample From : EFFLUENT DIVERTER BX	Purchase Order :

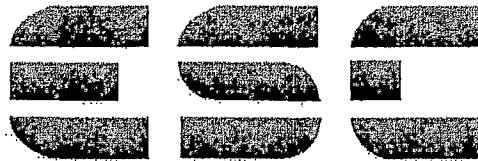
<u>Laboratory Analysis</u>							<u>Quality Assurance</u>	
<u>Analysis</u>			<u>Result</u>	<u>Notes</u>	<u>Quantity</u>	<u>Method</u>	<u>Precision</u>	<u>Accuracy</u>
<u>Date</u>	<u>Time</u>	<u>By</u>					<u>Parameter</u>	<u>% RPD</u>
04/04	1200	TSB	Ammonia Nitrogen	9.7 mg/L		SM 1997 4500-NH3 F	0.00	100.5 *
04/10	0800	TSB	Total Kjeldahl Nitrogen	17.9 mg/L		02/2014 HACH 10242	2.78	99.8 *
04/05	1230	TSB	Nitrate Nitrogen	35.30 mg/L		01/2013 HACH 10206	0.00	107.0 *
04/05	0900	TSB	Nitrite Nitrogen	0.464 mg/L		06/2017 HACH 10207	4.55	102.0 *
04/04	1209	AEU	pH	6.3 S.U.		SM 2000 4500-H+ B	0.00	N/A *
04/05	1200	TSB	Phosphorous, Total (as P)	5.8 mg/L		EPA 365.3	0.00	100.8 *
04/10	1540	AEU	Solids, Total Suspended	5.9 mg/L		SM 1997 2540 D	7.96	N/A *
04/04	1650	TSB	Coliform, Fecal	700 /100ml		SM 9222 D 1997	0.00	N/A *
04/18	1400	TSB	BOD, Carbonaceous	3.7 mg/L		SM 2001 5210 B	0.56	115.0 *
04/13	1300	AEU	Solids, % Total by mass	0.038 %		SM 1997 2540 G	3.08	N/A *
04/10	1450	TSB	Nitrogen, Plant Available	47.9 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: Cave Springs Plant 2				Permit/Project #:						pH(23) Fecal Coliform(43) CBOD(70), TSS(28), NO2(19) NH3(15.A), P(25), TKN(16.A), NO3(18) PAN(99.99), %Solids(82)							
Address: PO BOX 5				Purchase Order #:													
Cave Springs 72718				Sampler Name(s): <i>Amber Underwood</i>													
Telephone: 479 248-1040				and Signature(s): <i>[Signature]</i>													
FAX:				ESC Client Number: 2379													
Sample Identification		Sample Collection				Sample Containers											
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#	pH(23)	Fecal Coliform(43)	CBOD(70), TSS(28), NO2(19)	NH3(15.A), P(25), TKN(16.A), NO3(18)	PAN(99.99), %Solids(82)			
Effluent Diverter Box	18041020057	4/4/18	1207	Grab	Water	Teflon	150 ml	none	1	X							
				Grab	Water	whirlpak	300 ml	none/ice	1		X						
				Grab	Water	Plastic	1 qt	none/ice	1			X		X			
				Grab	Water	Plastic	8 oz	H ₂ SO ₄ , pH <2	1				X				
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)				Date	Time	Custody Seals:							
<i>[Signature]</i>		4/4/18	1430	<i>[Signature]</i>						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>[Signature]</i>				4-4-18	1430	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>				
Comments:				FLOW DATA		Field Test		Time	Analyst	Result	Result	Units					
Sample(s) Received On ICE				Analyst:		pH:		1209	AEW	10.3	10.2						
Temp: 4.0 °C				Time:		Temp.:				23.6	13.8	°C					
				Reading:		DO:											
				Units:		Debris:											
Cool all samples to 6 degrees C.								Chlorinated? Yes No		This Document is Part <u>1</u> of <u>1</u>							