

**ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY  
MONITORING REPORT FOR DECENTRALIZED WASTEWATER TREATMENT FACILITIES VIA DRIP IRRIGATION  
NO DISCHARGE MONTHLY MONITORING REPORT**

<b>PERMITTEE NAME</b>
CITY OF CAVE SPRINGS
<b>PERMITTEE ADDRESS</b>
PO Box 5 Cave Springs AR 72718


<b>FACILITY NAME</b>
CAVE SPRINGS WASTEWATER TREATMENT PLANT
<b>FACILITY ADDRESS</b>
The Creeks Golf Course 1499 S Main St Cave Springs AR 72718

<b>PERMIT NO.</b>
4893-WR-3
<b>AFIN NO.</b>
04-01642

<b>MONITORING PERIOD</b>		
MM/DD/YYYY	TO	MM/DD/YYYY
6/1/2019		6/30/2019

**EFFLUENT LIMITS, MONITORING, AND REPORTING REQUIREMENTS**

PARAMETER	PERMIT LIMIT	SAMPLE MEASUREMENT	UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE
CARBONACEOUS BIOCHEMICAL OXYGEN DEMAND (CBOD5)	30	< 2.2	MG/L	Once per Month / Grab	
TOTAL SUSPENDED SOLIDS (TSS)	45	8	MG/L		
FECAL COLIFORM BACTERIA (FCB)	10,000	< 1	COLONIES/100ml		
pH	6.0 - 9.0	6.2	s.u		
TOTAL PHOSPHOROUS (TP)	Report	8.4	MG/L		
TOTAL KJELDAHL NITROGEN (TKN)	Report	No Report	MG/L	Once per Quarter / Grab	
NITROGEN AMMONIA NITROGEN (NH <sub>3</sub> - N)	Report	No Report	MG/L		
NITRITE NITROGEN (NO <sub>2</sub> - N) + NITRATE NITROGEN (NO <sub>3</sub> - N)	Report	No Report	MG/L		
PLANT AVAILABLE NITROGEN (PAN)	Report	No Report	MG/L		
TOTAL FLOW		MONTHLY TOTAL 3.440288 MG	DAILY MAX 269,256	GPD	

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.	 <b>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT</b>	TELEPHONE		DATE
Kathy Bartlett			479	790-3813	7/1/2019
TYPED OR PRINTED			AREA CODE	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)

TABLE II

DRIP ZONES LOADING RATE LIMITS, MONITORING AND REPORTING REQUIREMENTS June 2019

						DAILY MAXIMUM FLOW TOTAL	269,256
Zone ID	Limit	Units	Maximum Volume Limit	Units	Monitoring	Reported Maximum	
Leach Field 1	0.55	gpd/ft2	26,000	gpd	Daily	19387	
Zone 1	0.42		19,524			<i>zones not being used</i>	
Zone 2	0.45		19,309				
Zone 3	0.4		16,424				
Zone 4	0.46		10,811				
Zone 5	0.2		13,059			9963	
Zone 6	0.2		7,723			5924	
Zone 7	0.2		10,910			8078	
Zone 8	0.3		7,081			5386	
Zone 9	0.4		18,291			13733	
Zone 10	0.3		9,450			7001	
Zone 11	0.2		4,110			3232	
Zone 12	0.4		7,522			5655	
Zone 13	0.25		5,717			4309	
Zone 14	0.15		6,097			4578	
Zone 15	0.2		8,378			6463	
Zone 16	0.4		9,427			7001	
Zone 17	0.23		3,694			2693	
Zone 19	0.35		13,778			10232	
Zone 20	0.2		5,766			4309	
Zone 21	0.4		17,040			12925	
Zone 22	0.5		28,113			21002	
Zone 23	0.25		15,640			11579	
Zone 24	0.25		9,547			7270	
Zone 25	0.2		4,436			3232	
Zone 26	0.3		9,334			7001	
Zone 27	0.31		16,511			12386	
Zone 28	0.31		13,018			9694	
Zone 29	0.2		3,923			2962	
Zone 30	0.55		10,116			7540	
Zone 31	0.3		5,714			4309	

# 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

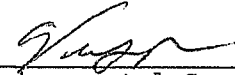
Control Number: 1906020024	Sample Date : 06/05/19	Collected By: JEW
Customer Name : CAVE SPRINGS, CITY OF OUTFALL 2	Sample Time : 1610	Delivery By : JEW
Customer/Permit No. : 2379 / 4893-WR-3 002	Sample Type : GRAB	Work Order :
Report Date : 06/12/19	Sample From : EFFLUENT DIVERTER BX	Purchase Order :

<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>
06/05	1620	JEW	pH	6.2 S.U.		SM 2011 4500-H+ B	0.00	N/A *
06/07	0900	AKA	Phosphorous, Total (as P)	8.400 mg/L		EPA 365.3	2.76	108.0 *
06/10	1344	TSB	Solids, Total Suspended	8.0 mg/L		SM 2011 2540 D	2.88	N/A *
06/05	1713	TSB	Fecal Coliform (MPN/100mL)	< 1.0 /100ml		06/2012 Colilert18	0.00	0.0 *
06/05	0800	TSB	BOD, Carbonaceous	< 2.2 mg/L		SM 2001 5210 B	15.51	82.3 *

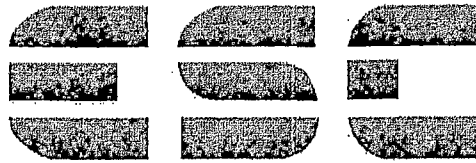
\* QA data shown is from a different sample or standard on the same date.

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

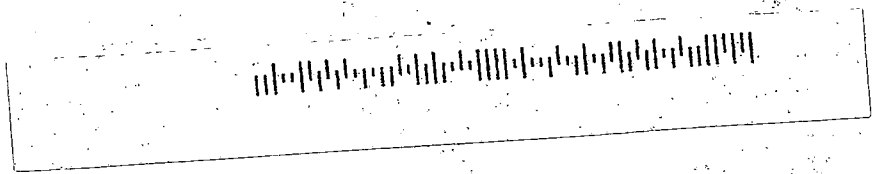
Carlsbad, New Mexico  
 575-887-1ESC

Phone: 479-750-1170 Fax: 479-750-1172

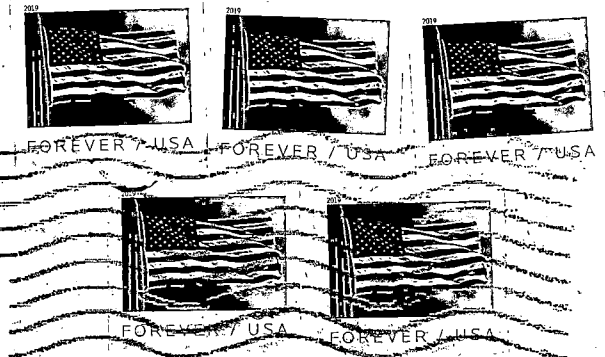
### CHAIN OF CUSTODY

Client Information				Project Information						Requested Parameters											
Company Name: Cave Springs Plant 2				Permit/Project #:						pH(23)	Fecal Coliform(43.1F)	CBOD(70), TSS(28)	Total P (25)								
Address: PO BOX 5				Purchase Order #:																	
Cave Springs 72718				Sampler Name(s): James Wiltse James W. Hise																	
Telephone: 479 248-1040				and Signature(s):																	
FAX:																					
ESC Client Number: 2379																					
Sample Identification		Sample Collection				Sample Containers															
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#												
Effluent Diverter Box	1906020024	6-5-19	1610	Grab	Water	Teflon	150 ml	none	1	X											
				Grab	Water	whirlpak	300 ml	none/ice	1		X										
				Grab	Water	Plastic	0.5 gal	none/ice	1			X									
				Grab	Water	Plastic	8 oz	H <sub>2</sub> SO <sub>4</sub> , pH <2	1				X								
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)				Date	Time	Custody Seals:											
James Wiltse James Wiltse		6-5-19	1645							Used?	<input 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 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:											
				James Wiltse James Wiltse				6-5-19	1645	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>								
Comments:				FLOW DATA		Field Test	Time	Analyst	Result	Result	Units										
				Analyst:		pH:	1620	JEW	6.2	6.2	°C										
				Time:		Temp.:	1620	JEW	23.5	23.6	°F										
				Reading:		DO:															
				Units:		Debris:															
Cool all samples to 6 degrees C.								Chlorinated? Yes No			This Document is Page ___ of ___										

GCD  
P.O. Box 9299  
Fayetteville, AR 72703



NWA P&DF 72701  
TUE 02 JUL 2019 PM



ADEQ Water Division  
Permits Branch  
5301 Northshore Dr  
N Little Rock, AR 72118-5317

