

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

PERMITTEE NAME
CANE ISLAND SUBDIVISION

FACILITY NAME (IF DIFFERENT)
Cane Island Subdivision

PERMIT NO.
4899-WR-2


PERMITTEE ADDRESS
DANNY HAMES 6800 SHADOW VALLEY ROAD Rogers, AR 72756

FACILITY ADDRESS
west side of CR 7002 in northern Marion County

AFIN NO.
45-00214

WASTEWATER EFFLUENT MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
FROM 3/1/2016	3/31/2016

TREATED WASTEWATER EFFLUENT SAMPLING						
PARAMETER	PERMIT REQUIREMENT	SAMPLE MEASUREMENT		UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE	REPORT	2.64		MG/L	ONCE/ MONTH	GRAB
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE	15	< 2		MG/L	ONCE/ MONTH	GRAB
PH EFFLUENT GROSS VALUE	6 to 9	7.05		S.U.	ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE	15	2		MG/L	ONCE/ MONTH	GRAB
NITROGEN, AMMONIA TOTAL (AS N) EFFLUENT GROSS VALUE	REPORT	0.2		MG/L	ONCE/ MONTH	GRAB
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE	2,000	< 2		colonies/100ml	ONCE/ MONTH	GRAB
TOTAL KJELDAHL NITROGEN EFFLUENT GROSS VALUE	REPORT	0.9		MG/L	ONCE/ MONTH	GRAB
NITRATE NITROGEN EFFLUENT GROSS VALUE	REPORT	10.23		MG/L	ONCE/ MONTH	GRAB
NITRITE NITROGEN EFFLUENT GROSS VALUE	REPORT	< 0.010		MG/L	ONCE/ MONTH	GRAB
PLANT AVAILABLE NITROGEN EFFLUENT GROSS VALUE	REPORT	10.49		MG/L	ONCE/ MONTH	GRAB
FLOW, THRU CONDUIT OR TREATMENT UNIT EFFLUENT GROSS VALUE	REPORT	MONTHLY TOTAL	DAILY MAX	GPD	ONCE/ MONTH	TOTAL FLOW
		5,696	474			

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	4/8/2016
TYPED OR PRINTED			AREA CODE	NUMBER	MM/DD/YYYY
COMMENTS AND EXPLANATION OF VIOLATIONS (<i>Reference all attachments here</i>)					

Arkansas Testing Laboratories

3301 Langley Drive · Searcy, AR 72143 (501) 268-6431 f(501) 268-9314

NPDES Wastewater Monitoring
 Water and Wastewater Analysis
 Concrete, Asphalt, and Aggregate Testing
 Geotechnical Testing
 Industrial and Construction Quality Control

CANE ISLAND

Collection Date: March 2, 2016

Collection Time: 11:30 AM

Collected By: THS

Wastewater Analysis

Collection Place: Final Discharge Point

Parameter	Analysis Begin		Analysis End		Results	Unit	Loading	Analyst	% Spike	Rel %	Sample Type	Ref #
	Date / Time		Date / Time				lb/dy					
CBOD	03/02	3:20 PM	03/07	8:30 AM	< 2.0	mg/l	NA	KLB/KLB	112.6	0.00	Grab	1
TSS	03/03	8:05 AM	NA		2.0	mg/l	NA	EET	NA	5.31	Grab	2
Fecal Coliform	03/02	3:00 PM	03/03	2:10 PM	< 2	N/100mls	NA	THS/KLB	NA	0.00	Grab	3
pH	03/02	11:30 AM	NA		7.05	S.U.	NA	THS	NA	0.00	Grab	4
Ammonia Nitrogen	03/04	10:15 AM	NA		0.2	mg/l	NA	KLB	94.0	0.72	Grab	7
Total Kjeldahl Nitrogen	03/04	10:15 AM	NA		0.90	mg/l	NA	KLB	94.0	0.72	Grab	7
Total Phosphorus	03/05	3:30 PM	NA		2.64	mg/l	NA	KLB	96.6	7.73	Grab	8
Nitrate Nitrogen	03/03	9:15 AM	NA		10.23	mg/l	NA	KLB	90.1	6.16	Grab	9
Nitrite Nitrogen	03/03	9:15 AM	NA		< 0.010	mg/l	NA	KLB	90.1	6.16	Grab	9
Nitrate + Nitrite					10.24	mg/l					CALC	
Solids, Percent (%)	03/07	8:55 AM	NA		0.057	%	NA	KLB	NA	2.27	Grab	10
Plant Available Nitrogen					10.49	mg/l					CALC	

Quality Assurance: All Parameters include 10% duplication studies by random selection. The following equipment is checked and calibrated daily: pH meter, balance, incubators, water baths, drying oven and sterilizing apparatus. Ammonia Nitrogen and Oil & Grease Analysis include duplication and spike studies at a rate of at least 10%.

Notes: Samples iced at collection. Preserved with H₂SO₄ to pH₂: Oil & Grease, Ammonia, COD

References:

Analysis complies with 40 CFR Part 136:

- | | |
|----------------------|------------------------------------|
| 1. SM 5210 B-2001 | 6. SM 4500-OG |
| 2. SM 2540 D-1997 | 7. SM 4500 NH ₃ -G-1997 |
| 3. SM 9222 D-1997 | 8. SM 4500-P-E-1999 |
| 4. SM 4500-HB-2000 | 9. SM 4500NO ₃ E-2000 |
| 5. SM 4500-CI-G-2000 | 10. SM 2540 B-1997 |


 Neville Adams, Manager

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 arkatl@sbcglobal.net

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CHAIN OF CUSTODY / ANALYSIS REQUEST FORM

CLIENT: Cane Island Estates						4899-WR-2				PARAMETERS						
SAMPLE MATRIX		SAMPLED BY: <i>THS</i>				FECAL COLIFORM				# = no of bottles Q, L, H = Qrt, Ltr, Half Gal P, G = Plastic, Glass						
W=H2O S=SLUDGE D=SOIL C=WELL		DATE	TIME	Flow	Grab	FECAL COLIFORM	DISH #	START TIME	MLS	pH	CALIBRATION <i>400 T</i>			PRESERVATIVES		
SAMPLE TYPE																
Effluent		W	<i>3/2/16</i>	<i>1130 AM</i>	X				1-120-P	<i>7.05</i>				1-H-P	1-L-P	

Comments:

Number of bottles: 3
 Sample on ice: Y

COLLECT:

Relinquished by:	Date/Time	Received by:	Date/Time
<i>[Signature]</i>	<i>3/2/16 3:00 pm</i>	<i>[Signature]</i>	<i>3-2-16 3:00 pm</i>