

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

PERMITTEE NAME
Cane Island Estates LLC
PERMITTEE ADDRESS
Danny Hames 39 Nottingham Lane Rogers, AR 72758

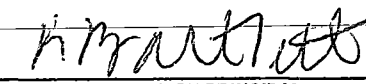
FACILITY NAME (IF DIFFERENT)
Cane Island Subdivision
FACILITY ADDRESS
CR 7002 Bull Shoals Rd. Marion County

PERMIT NO.
4899-WR-3
AFIN NO.
45-00214

MONITORING PERIOD		
MM/DD/YYYY	TO	MM/DD/YYYY
12/1/2020		12/31/2020

EFFLUENT LIMITS, MONITORING, AND REPORTING REQUIREMENTS					
PARAMETER	PERMIT LIMIT	SAMPLE MEASUREMENT		UNITS	FREQUENCY OF ANALYSIS
CARBONACEOUS BIOCHEMICAL OXYGEN DEMAND (CBOD5)	30	2.26		MG/L	Once per Month / Grab
TOTAL SUSPENDED SOLIDS (TSS)	45	< 5.00		MG/L	
FECAL COLIFORM BACTERIA (FCB)	2000	305.7		COLONIES/100ml	
pH	6.0 - 9.0	7.3		s.u	
TOTAL PHOSPHOROUS (TP)	Report	6.2		MG/L	Once per Quarter / Grab
TOTAL KJELDAHL NITROGEN (TKN)	Report			MG/L	
NITROGEN AMMONIA NITROGEN (NH ₃ - N)	Report			MG/L	
NITRITE NITROGEN (NO ₂ - N) + NITRATE NITROGEN (NO ₃ - N)	Report			MG/L	
PLANT AVAILABLE NITROGEN (PAN)	Report			MG/L	
TOTAL FLOW		MONTHLY TOTAL	DAILY MAX	GPD	
		20,419	1,400		

DRIP ZONES LOADING RATE LIMITS, MONITORING AND REPORTING REQUIREMENTS						
Zone ID	Limit	Units	Maximum Volume Limit	Units	Monitoring	Reported maximum
Zone 1	0.62	gpd/ft ²	15,563	gpd	Daily	1,400
Zone 2	0.62		37,529	gpd	Daily	Not Used

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.		TELEPHONE			
Kathy Bartlett			479	530-5926	1/15/2020	
			AREA CODE	NUMBER	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: 2012010089
 Customer Name : CANE ISLAND ESTATES POA
 Customer Number : 3859
 Report Date : 12/10/20

Sample Date : 12/03/20
 Sample Time : 0935
 Sample Type : GRAB WWATER
 Sample From : FINAL EFFLUENT

Collected By: WGW
 Delivery By : WGW
 Work Order :
 Purchase Order :

Laboratory Analysis

<u>Analysis</u>							<u>Quality Assurance</u>		
<u>Date</u>	<u>Time</u>	<u>By</u>	<u>Parameter</u>	<u>Result</u>	<u>Notes</u>	<u>Quantity</u>	<u>Method</u>	<u>Precision</u>	<u>Accuracy</u>
								<u>% RPD</u>	<u>% Recovery</u>
12/03	0940	WGW	pH	7.3	S.U.		SM 2011 4500-H+B	0.00	N/A *
12/08	1020	EDA	Phosphorus, Total (as P)	6.200	mg/L		HACH 10209	0.00	103.0 *
12/04	0941	ZWA	Solids, Total Suspended	< 5.00	mg/L		SM 2011 2540 D	10.86	N/A *
12/03	1619	BXW	Fecal Coliform	305.7	/100ml		06/2012 Colilert18	0.00	N/A
12/04	0642	BXW	BOD, Carbonaceous	2.26	mg/L		SM 2011 5210 B	0.00	104.0 *

* 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.

20419
1400

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