

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

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

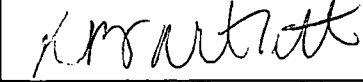
<b>FACILITY NAME (IF DIFFERENT)</b>
Cane Island Subdivision
<b>FACILITY ADDRESS</b>
CR 7002 Bull Shoals Rd. Marion County

<b>PERMIT NO.</b>
4899-WR-3
<b>AFIN NO.</b>
45-00214

<b>MONITORING PERIOD</b>		
MM/DD/YYYY	TO	MM/DD/YYYY
3/1/2020		3/31/2020

EFFLUENT LIMITS, MONITORING, AND REPORTING REQUIREMENTS					
PARAMETER	PERMIT LIMIT	SAMPLE MEASUREMENT	UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE
CARBONACEOUS BIOCHEMICAL OXYGEN DEMAND (CBOD5)	30	2.1	MG/L	Once per Month / Grab	
TOTAL SUSPENDED SOLIDS (TSS)	45	< 2.9	MG/L		
FECAL COLIFORM BACTERIA (FCB)	2000	< 1.0	COLONIES/100ml		
pH	6.0 - 9.0	6.8	s.u		
TOTAL PHOSPHOROUS (TP)	Report	5.78	MG/L	Once per Quarter / Grab	
TOTAL KJELDAHL NITROGEN (TKN)	Report		MG/L		
NITROGEN AMMONIA NITROGEN (NH <sub>3</sub> - N)	Report		MG/L		
NITRITE NITROGEN (NO <sub>2</sub> - N) + NITRATE NITROGEN (NO <sub>3</sub> - N)	Report		MG/L		
PLANT AVAILABLE NITROGEN (PAN)	Report		MG/L		
TOTAL FLOW		MONTHLY TOTAL	DAILY MAX	GPD	
		19,078	1,065		

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 <sup>2</sup>	15,563	gpd	Daily	1,065
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.	 <b>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT</b>	TELEPHONE		
			479	530-5926	4/13/2020
<b>TYPED OR PRINTED</b>			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: 2003010127  
 Customer Name : CANE ISLAND ESTATES POA  
 Customer Number : 3859  
 Report Date : 03/13/20


Sample Date : 03/05/20  
 Sample Time : 0833  
 Sample Type : GRAB WWATER  
 Sample From : FINAL EFFLUENT

Collected By: NTR  
 Delivery By : NTR  
 Work Order :  
 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>
03/05	0834	NTR	pH	6.8 S.U.		SM 2011 4500-H+B	0.00	N/A *
03/12	0650	NTR	Phosphorous, Total (as P)	5.780 mg/L		HACH 10209	4.65	110.0 *
03/10	1330	ATL	Solids, Total Suspended	< 2.90 mg/L		SM 2011 2540 D	5.45	N/A *
03/05	1550	NTR	Fecal Coliform	< 1.0 /100ml		06/2012 Colilert18	0.00	N/A *
03/06	0700	DWC	BOD, Carbonaceous	2.10 mg/L		SM 2011 5210 B	0.00	97.6 *

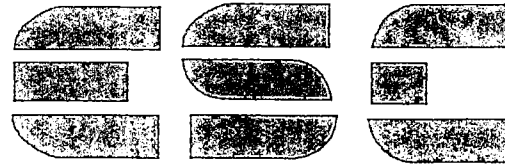
\* QA data shown is from a different sample or standard on the same date.

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.

TX, 167  
 19,078  
 1065  
 BY

Environmental Services Company, Inc.  
 Corporate Office  
 13715 West Markham P.O. Box 55146  
 Little Rock, AR 72211 Little Rock, AR 72215  
 website: www.esclabs.com



Springdale, Arkansas  
 479-750-1170  
 Carlsbad, New Mexico  
 575-887-1ESC

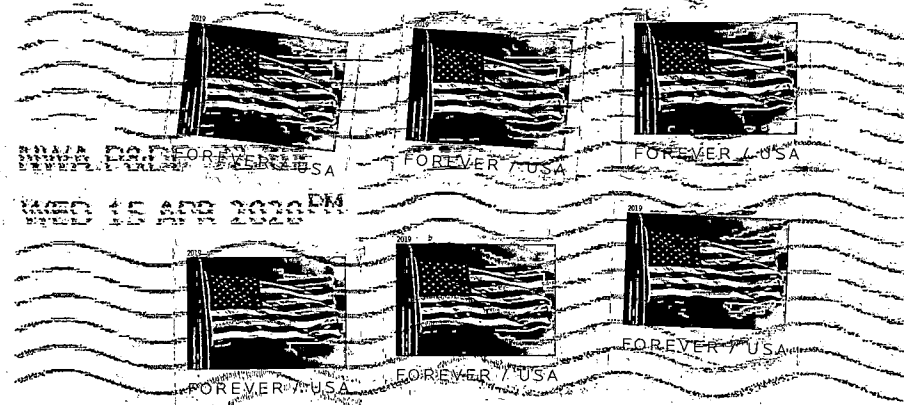
Phone: 501-221-2565 Fax: 501-221-1341

### CHAIN OF CUSTODY

Client Information				Project Information							Requested Parameters									
Client:		Cane Island Estates POA		Permit/Project #:							TSS(28), CBOD(70)	Total P(25)	Fecal Coliform(43,IF)							
Address:		39 Nottingham Lane		Purchase Order #:																
		Rogers, AR 72758		Work Order #			111816-AEG2													
Phone:		479-619-8450		Sampler Name(s):			Ned Ryerson													
Fax:		rhamen@nwark.com		and Signature(s):			<i>Ned Ryerson</i>													
Contact:		Mr. Rusty Hames		ESC Client Number:			3859 Monthly													
Sample Identification		Sample Collection				Sample Containers														
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#											
Final Effluent	2003010127	3/5/20	6833	Grab	Wwater	Plastic	1/2 Gal	Cool ≤ 6° C	1	X										
I	I	I	I	Grab	Wwater	Plastic	1 Liter	Cool ≤ 6° C, H2SO4 to pH <2	1		X									
				Grab	Wwater	Whirlpak	4 oz.	Cool <10° C, Na2S2O3	1			X								
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)			Date	Time	Custody Seals:		Used?	Intact?								
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)			Date	Time	Turnaround:		Regular	Special								
Relinquished By: (Signature and Printed Name)		Date	Time	Received for Lab By: (Signature and Printed Name)			Date	Time	Were samples properly preserved:		Yes	No								
Comments:		Site Address: 1364 Cane Island Road Flippin, AR 72634		Flow Data	Field Test	Time	Analyst	Result	Result	Units										
					pH:	0834	NTR	6.8	6.3	SU										
					Fecal Start:	1550	NTR	This Document is Page 1 of 1												

NWA UTILI

PO Box 9299  
Fayetteville, AR  
72703



ADEQ  
Water Div. Permits Branch  
5301 Northshore Dr.  
N Little Rock, AR

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