

**From:** [McWilliams, Katherine](#)  
**To:** [Deardoff, Amy](#)  
**Subject:** FW: Revised table for NTSDW Form 4899-WR-3  
**Date:** Monday, August 13, 2018 7:38:34 AM  
**Attachments:** [Cane Island.pdf](#)  
**Importance:** High

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4899-WR-3\_Revised table for NTSDW Form

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**From:** Kathy Bartlett [mailto:kathy@aquatechsys.com]  
**Sent:** Friday, August 10, 2018 5:27 PM  
**To:** McWilliams, Katherine  
**Cc:** Leamons, Bryan  
**Subject:** Revised table for NTSDW Form 4899-WR-3  
**Importance:** High

Katherine

Regarding the ADEQ correspondence dated 7/23/18, please see the revised NDSTW Form for 4899-WR-3

If you need anything further, please advise me.

Thank You

*Kathryn Bartlett*  
Internal Operations Manager  
NWA Utility Services, Inc  
[www.nwutilityservices.com](http://www.nwutilityservices.com)  
Direct: 479-530-5926

## Nonmunicipal Domestic Sewage Treatment Works Trust Fund Requirement Form

Permittee (Legal) Name: Cane Island Estates LLC  
Facility Name: Cane Island Subdivision  
Permit No. 4899-WR-2

### **Section A – Information Requiring Engineering Certification**

#### **Part I – Operating and Maintenance Expenses**      **REVISED TABLE 8/7/2018**

	Units/Year	Unit Cost	Annual Cost	5-Year Cost <sup>1</sup>
<b>Operating Expenses</b>				
Operating Labor <sup>2</sup>	12	180.00	2160.00	10,800.00
Electricity <sup>3</sup>	12	200.00	2400.00	12,000.00
Supplies & Chemicals This facility uses no chemicals	0	0	0	0
Analytical Testing	12	250.00	3000.00	15,000.00
Generator Fuel Based on generator rental				1950.00 7 days
Other Mowing dripfield	7	25.00	175.00	875.00
<b>Maintenance Expenses</b>				
Maintenance Labor <sup>2</sup>				1000.00 Sludge removal
Parts & Supplies				1000.00 Replacement Pumps
Other	0	0	0	0
<b>Administrative Expenses</b>				
Administrative Labor <sup>2</sup>	Included with operating labor			
Customer Fee Collection	0	0	0	0
Insurance & Bonding	0	0	0	0
Consulting and Legal Fees				1000.00 Permit renewal fee
Interest Expenses	0	0	0	0
Property Taxes	1		93.20	466.00
Permit Fees	1	700.00	700.00	3500.00
<b>Other Miscellaneous Expenses</b>	0	0	0	0
<b>TOTAL</b>			8528.20	47,591.00

The above O & M costs are based on actual historical figures for this facility and are a true representation of forecasted costs based on similar facilities utilizing the same treatment technology and equipment.

#### **Part II – Capital Expenditures**

- The wastewater treatment plant (WWTP) must be examined by a Professional Engineer registered in the State of Arkansas to determine all necessary capital expenditures, system upgrades, or significant repairs which may be needed within the following five (5) years. A list of all of these items must be attached to this document.

#### **ENGINEERS STATEMENT:**

*This facility has no planned repairs, upgrades, capital expenditures or significant repairs required for the next five years.*



## Nonmunicipal Domestic Sewage Treatment Works Trust Fund Requirement Form

- A milestone schedule for completion of the capital expenditures, system upgrades, or significant repairs must be attached to this document.

*Not Applicable*

### **Part III – Financial Plan**

A financial plan that demonstrates to the Department's satisfaction the permittee's ability to operate and maintain the WWTP for five (5) years must be prepared. This plan should also include a comprehensive connection summary listing the number of connections and types of connections based on Appendix B of the Arkansas Department of Health Rules and Regulations Pertaining to Onsite Wastewater Systems. The summary should include the number of existing connections and an estimated number of new connections for the next five (5) years. The financial plan must be attached to this document.

*See Attachment B*

### **Part IV – Certification**

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Printed Name of AR Professional Engineer: Charles L. Presley

Registration License Number: 3081

Signature of AR Professional Engineer: Charles L. Presley

Date: 8/10/2018 Telephone Number: 479-738-2979

E-mail: cjpres@madisoncounty.net Fax Number: \_\_\_\_\_

Stamp of AR Professional Engineer

