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

PERMITTEE NAME			(IF DIFFERENT)	PERMIT NO.
First Asset Holdings, LLC		Deer Haven	Subdivision	4908-WR-1
PERMITTEE ADDRESS	<u> 44)</u>	经检验FACILITY /	ADDRESS	AFIN NO.
PO Box 7	* 1	Smith Ridge Rd G	04-01681	
Fort Smith, AR 72902		1,4	. 1	
	J_	WASTEWATER EFFLU	ENT MONITORING PERIOD	
		MM/DD/YYYY	MM/DD/YYYY	
	FROM	12/1/2014	12/31/2014	

PARAMETER	PERMIT REQUIREMENT	SAMPLE MEASUREMENT	UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
HOSPHOROUS, TOTAL (AS P) FFLUENT GROSS VALUE	REPORT	7.8	MG/L	ONCE/ MONTH	GRAB	
BOD, 5-DAY (20 DEG. C) FFLUENT GROSS VALUE	15 , , , ,	< 2	MG/L	ONCE/ MONTH	, GRAB	
H FFLUENT GROSS VALUE	6 to 9	7.3	S.U.	ONCE/ MONTH	GRAB	
OLIDS, TOTAL SUSPENDED FFLUENT GROSS VALUE	15	< 2	MG/L	ONCE/ MONTH	GRAB	
ITROGEN, AMMONIA TOTAL (AS N) FFLUENT GROSS VALUE	REPORT	19.8	MG/L	ONCE/ MONTH	GRAB	
OLIFORM, FECAL GENERAL FFLUENT GROSS VALUE	10,000	160	colonies/100ml	ONCE/ MONTH	GRAB	
OTAL KJELDAHL NITROGEN FFLUENT GROSS VALUE	REPORT	22.4	MG/L	ONCE/ MONTH	GRAB	
ITRATE NITROGEN FFLUENT GROSS VALUE	REPORT	20.5	MG/L	ONCE/ MONTH	GRAB	
ITRITE NITROGEN FFLUENT GROSS VALUE	REPORT	0.397	MG/L	ONCE/ MONTH	GRAB	
LANT AVAILABLE NITROGEN FFLUENT GROSS VALUE :	REPORT	41.5	MG/L	ONCE/ MONTH	GRAB	
LOW, THRU CONDUIT OR TREATMENT UNIT	REPORT	MONTHLY TOTAL DAILY MAX 50,121 33,280	GPD	ONCE/ MONTH;	TOTAL FLOW	
	F LAW THAT I HAVE PERSONALLY EXA	1 1 /		TELEPHONE	DATE	
INDIVIDUALS IMMEDIATELY F Kathy Bartlett BELIEVE THE SUBMITTED INF	MITTED HEREIN; AND BASED ON MY INC RESPONSIBLE FOR OBTAINING THE DRMATION IS TRUE, ACCURATE, AND C	PRINCIPAL	479 530-5926	1/2/2015		
TYPED OR PRINTED I	SIGNIFICANT PENALTIES FOR SUB POSSIBILITY OF FINE AND IMPRISONME	AREA NUMBER	MM/DD/YYYY			

## 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: 1412020152

Customer Name : GREENFIELD CAP DEV-DEER HAVEN

Customer/Permit No.: 1821 / 4908-WR-1

Report Date : 12/16/14

Sample Date : 12/10/14

Sample Time : 1200

Sample Type : GRAB DEER HAVEN
Sample From : DOSE TANK EFFLUENT

Collected By: WDS

Delivery By : WDS Work Order :

Purchase Order :

		Laboratore, Analysis			
7007		<u>Laboratory Analysis</u>		Quality A	Assurance
Analysis				Precision	Accuracy
<u>Date</u> Time By	Parameter	Result Notes Quant	1 + 2 Mark - 4		
12/11 1400 TSB				% RPD	<pre>% Recovery</pre>
	Ammonia Nitrogen	19.8 mg/L	SM 1997 4500-NH3 F	0.00	101.9 *
12/12 0800 TSB	Kjeldahl Nitrogen Total	22.40 mg/L	SM 1997 4500-NorgB		
12/11 1430 TSB	Nitrate Nitrogen	<b>3</b> .			97.4 *
		20.50 mg/L	SM 2000 4500-NO3 E	1.24	101.6 *
12/10 1400 TSB	Nitrite Nitrogen	0.397 mg/L	SM 2000 4500 NO2 B	0.33	97.0 *
12/10 1200 WDS	На	7.3 S.U.			
	-		SM 2000 4500-H+ B	0.00	N/A *
12/11 1330 TSB	Phosphorous, Total (as P)	7.8 mg/L	EPA 365.3	0.00	89.0 *
12/15 1600 KIK	Solids, Total Suspended	< 2.0 mg/L		<del>-</del>	
12/10 1620 BUD	Coliform, Fecal	· · · · · · · · · · · · · · · · · · ·	SM 1997 2540 D	25.00	N/A *
		160 /100ml	SM 1997 9222 D	0.00	N/A *
12/10 1600 KIK	BOD, Carbonaceous	< 2.0 mg/L	SM 2001 5210 B		
				13.33	91.4 *
12/12 1/50 155	Nitrogen, Plant Available	41.5 mg/L	SM 1997 4500-N		

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.

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

## Environmental Services Company, Inc. Northwest Arkansas 1107 Century Street Springdale, Arkansas 72762 website: www.esclabs.com

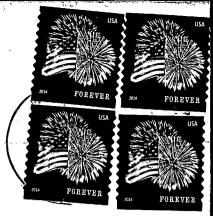
Corporate Office, Little Rock, Arkansas 501-221-2565

> Carlsbad, New Mexico 575-887-1ESC

## **CHAIN OF CUSTODY** Fax: 479-750-1172

Phone: 479-750-1170	Fax: 479-750-1172		Cl	HAIN (	OF CU	STO	DY ·											
Client Information				Project Information					Requested Parameters									
Company Name:	Deer Haven Subd	ivision		Permit/Pro	oject#:				***************************************			<u>@</u>						
Address: PO Box 127				Purchase							TP(25),NH5-N(15.A),TKN(16.A),N02(15.A)NO2(19)							
	Avoca Ar 72711										5.A)N	(66						
Telephone:				Sampler Name(s):		1/2/01	Lule Shant					NG3(1	CBOD(70), TSS(28), PAN(99.99)					
Telephone:		······································				1/2/1/						(6.A).	PA P					
Totaphone.					and Signature(s):		010					TAN.	(28)	£				•
ESC Client Number:	1821		·	land Signa	iture(s):						l	5.A).	138	E E				
		T				<del></del>			·		-	L-NC	6	Coliform (43)				
Sample Ide		-	Sample	Collection	7	<b>!</b>	Sample	Container	s		pH(23)	5),N	ò	3				
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preserv	ative	#	픕	TP(S	S	ш				
Dose Tank/Effluent /	1442020152	12-10-14	12:00	GRAB	Water	teflon	150 ml	none		_1	x							
				GRAB	Water	Plastic	8 oz	H₂SO₄,pH	<2	1		х	Г					
	· /		. /	GRAB	Water	Plastic	1 qt	none/ice		1			x					
		da market	1	GRAB	Water	Whirlpak	<del>                                     </del>	none/ice		1				x				
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WE Wale	Schnit	12-10-14	15:45	Time			֓֟֟ <i>֡</i>	Useď		Intact?					1			
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name) Date Time						round		$\geq$				·····		
Relinquished By: (Signature and Printe	ed Name)	Date	Time	Received for Lab By: (Signature and Printed Name)  Rickard Brown Richard Brown  12-10-14  1545			e \	Regu Were		oles pr	operly	Spe prese		بـــا	L			
				Rickand Brown Rich				12-10-14	1545			Yes	2	$\setminus$		No		<u> </u>
Comments:				FLOW DA	\TA	Field Test	Time	Analyst		Resu		Resu	ılt		Units	}		
					Analyst: Time:		pH: Temp.:	12:00	Mas	,	7.	<u> </u>	<b></b>		°C		°F	
				· · · · · · · · · · · · · · · · · · ·	Reading:		DO:			-			<b></b>	-	Ť		<del></del>	
					Units:		Debris:		<del>                                     </del>				<del>                                     </del>					
Cool all samples to 6 degrees C.							Chlorinated	? Yes N	lo	-	This	Doc	ume	nt is	Page	e	of	
G:\W. OCIFORMSICHAIN.X	ILS			1	1			**************************************								7		

GCD P.O. Box 9299 Fayetteville, AR 72703



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