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

PERMITTEEINAME
First Asset Holdings, LLC
PERMITTEE'ADDRESS
PO Box 7
Fort Smith, AR 72902

FACILITY NAME (IF DIFFERENT)

Deer Haven Subdivision

FACILITY ADDRESS

Smith Ridge Rd Garfield AR 72752

PERMITINO. 4908-WR-1 AFIN:NO. 04-01681

	WASTEWATER EFFLUENT MONITORING PERIOD										
	MM/DD/YYYY	MM/DD/YYYY									
FROM	1/1/2015	1/31/2015									

PARAMET	TER .	PERMIT REQUIREMENT	SAMPLE MEASUREMENT		UNITS		QUENCY OF	SAMPLE TYPE		
HOSPHOROUS, TOTAL (AS P) FFLUENT GROSS VALUE		REPORT	7.9	MG/L		ONCE/ MONTH	GRAB			
BOD, 5-DAY (20 DEG. C) FFLUENT GROSS VALUE		15	3		MG/L		ONCE/ MONTH	GRAB		
H FFLUENT GROSS VALUE		6 to 9	7.2		S.U.		ONCE/ MONTH	GRAB		
OLIDS, TOTAL SUSPENDED FFLUENT GROSS VALUE		15	< 2		MG/L		ONCE/ MONTH	GRAB		
TROGEN, AMMONIA TOTAL (AS N) FFLUENT GROSS VALUE		REPORT	13.8		MG/L		ONCE/ MONTH	GRAB		
OLIFORM, FECAL GENERAL FFLUENT GROSS VALUE		10,000	800	colonies/100ml		ONCE/ MONTH	GRAB			
TOTAL KJELDAHL NITROGEN EFFLUENT GROSS VALUE		REPORT	16.8		MG/L		ONCE/ MONTH	GRAB		
NITRATE NITROGEN EFFLUENT GROSS VALUE		REPORT	21.1		MG/L	ONCE/ MONTH		GRAB		
NITRITE NITROGEN EFFLUENT GROSS VALUE		REPORT	3.41		MG/L	ONCE/ MONTH		GRAB		
LANT AVAILABLE NITROGEN FFLUENT GROSS VALUE		REPORT	39.2 MG/L		MG/L		ONCE/ MONTH	GRAB		
LOW, THRU CONDUIT OR TREAT FFLUENT GROSS VALUE	MENT UNIT	REPORT	MONTHLY TOTAL 47,331	GPD		ONCE/ MONTH	TOTAL FLOW			
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						ELEPHONE	DATE		
Kathy Bartlett	INDIVIDUALS IMMEDIATELY RESI BELIEVE THE SUBMITTED INFORM	PONSIBLE FOR OBTAINING THE MATION IS TRUE, ACCURATE, AND (EPRÍNCIPAL	479	530-5926	2/2/2015				
TYPED OR PRINTED OMMENTS AND EXPLANATION C	INFORMATION, INCLUDING THE PO	GNIFICANT PENALTIES FOR SUBMITTING FALSE EXECUTIVE OF CONSIBILITY OF FINE AND IMPRISONMENT. AUTHORIZE				AREA NUMBER		MM/DD/YYYY		

Environmental Services Company,

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: 1501020147

Customer Name : GREENFIELD CAP DEV-DEER HAVEN

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

Report Date ': 01/20/15

Sample Date : 01/13/15

Sample Time : 1500

Sample Type : GRAB DEER HAVEN Sample From : DOSE TANK EFFLUENT Collected By: KIK Delivery By : KIK

Work Order :

Purchase Order :

	Quality A	Assurance				
Analysis					Precision	Accuracy
Date Time By	Parameter	Result Notes	Quantity	Method	% RPD	% Recovery
01/16 0830 TSB		13.8 mg/L		SM 1997 4500-NH3 F		98.5 *
01/14 0900 TSB	Kjeldahl Nitrogen Total	16.80 mg/L		SM 1997 4500-NorgB		96.0
01/14 1000 TSB		21.10 mg/L		SM 2000 4500-NO3 E		90.0 *
01/13 1600 TSB	Nitrite Nitrogen	3.410 mg/L		SM 2000 4500 NO2 B	0.59	101.5 *
01/13 1500 KIK		7.2 S.U.		SM 2000 4500-H+ B	0.00	N/A *
01/15 1000 TSB	Phosphorous, Total (as P)	7.9 mg/L		EPA 365.3	0.00	98.0 *
01/15 1050 TSB	Solids, Total Suspended	< 2.0 mg/L		SM 1997 2540 D	0.00	N/A *
01/13 1620 TSB	Coliform, Fecal	800 /100ml		SM 1997 9222 D	0.00	N/A *
01/14 1600 RHB	BOD, Carbonaceous	3.0 mg/L		SM 2001 5210 B	1.10	99.7 *
01/19 1300 RHB	Nitrogen, Plant Available	39.2 mg/L		SM 1997 4500-N	1.10	23.1 "

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.

Environmental Services Co., Inc.

^{*} 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

Phone: 479-750-1170 Fax: 479-750-1172

CHAIN OF CUSTODY

Client Information				Project Information						П	Red	ques	sted	Par	ame	eter	s	
Company Name:	Deer Haven Subdivision			Permit/Project #:								6						
Address:	PO Box 127			Purchase	Order #:				*****		1	102(1						•
	Avoca Ar 72711					·	 	**************************************		······································	1	15.A)N	66					
Telephone:		******		Sampler N	Sampler Name(s): Kulk			Plan				NO3(66)					
Telephone:		······	· · · · · · · · · · · · · · · · · · ·					7				16.A)	PA	İ				
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ESC Client Number:	1821		· · · · · · · · · · · · · · · · · · ·	ario Signa	iuie(s).	(/ S)	/_/		••••			(15.A)	TSS	E				
Sample Ider	····	T	Sample	Collection		T	Sample (0				TP(25),NH3-N(15.A),TKN(16.A),N03(15.A)NO2(19)	CBOD(70), TSS(28), PAN(99.99)	Coliform (43)				
Identification	ESC Control #	Date	T	1	NA-4-t-	 		Containers			pH(23)	(25)	8					
Dose Tank/Effluent		1-13-15	Time	Туре	Matrix	Туре	Volume	Preserva	ative	#		<u> </u>	ō	u.			ļ	
Dose rank/Enluent	1501020147	1/12-12	1500	GRAB	Water	teflon	150 ml	none		1	X		<u> </u>				<u> </u>	<u> </u>
	1	<u> </u>		GRAB	Water	Plastic	8 oz	H₂SO₄,pH<	2	1	_	X	_	<u> </u>			<u> </u>	
				GRAB	Water	Plastic	1 qt	none/ice		1		<u> </u>	x					
				GRAB	Water	Whirlpak	100 ml	none/ice		1				x				
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Relinquished By: (Signature and Printed Name) Date Time			Passing fact at D4 (0)			B-4-		Regu			Specia Specia							
Time Care Time			Richard	Received for Lab By: (Signature and Printed Name) Kichard Brown Richard Brow			1-13-15	Time W					ples properly		ny preservea: No			
Comments:							Field Test	Time	Analys		Resu				Units			
				Analyst:			pH:	1500	KIK		7.	7	`					
					Time: Reading:		Temp.: DO:								°C		°F	
	······	Units:		Debris:			\dashv			<u> </u>								
				Chlorinated	? Yes N	0		This	Doc	ume	nt is	Page	9	of_				