## 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	

Deer Haven Subdivision

FACILITY/ADDRESS

Smith Ridge Rd Garfield AR 72752

PERMITINO.

04-01681

 #WASTEWATER EFFLUENT; MONITORING PERIOD

 MM/DD/YYYY
 MM/DD/YYYY

 FROM
 3/1/2015
 3/31/2015

PARAMETER	PERMIT REQUIREMENT	SAMPLE MEASUREMENT	UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE	REPORT	7.7	MG/L	ONCE/ MONTH	GRAB	
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE	15	< 2	MG/L	ONCE/ MONTH	GRAB	
PH EFFLUENT GROSS VALUE	6 to 9	7.2	S.U.	ONCE/ · MONTH	GRAB	
OLIDS, TOTAL SUSPENDED FFLUENT GROSS VALUE	. 15	. 4		ONCE/ MONTH	GRAB	
ITROGEN, AMMONIA TOTAL (AS N) FFLUENT GROSS VALUE	REPORT	4.6	MG/L	ONCE/ MONTH	GRAB	
OLIFORM, FECAL GENERAL FFLUENT GROSS VALUE	10,000	344	colonies/100ml	ONCE/ MONTH	GRAB	
OTAL KJELDAHL NITROGEN FFLUENT GROSS VALUE	REPORT	11.2	MG/L	ONCE/ MONTH	GRAB	
IITRATE NITROGEN FFLUENT GROSS VALUE	REPORT	24.8	MG/L	ONCE/ MONTH	GRAB	
ITRITE NITROGEN FFLUENT GROSS VALUE	REPORT	14.25	MG/L	ONCE/ MONTH	GRAB	
LANT AVAILABLE NITROGEN FFLUENT GROSS VALUE	REPORT	45.6	MG/L	ONCE/ MONTH	GRAB	
LOW, THRU CONDUIT OR TREATMENT UNIT	REPORT	MONTHLY TOTAL DAILY MAX 59,664 33,280	GPD	ONCE/ MONTH	TOTAL FLOW	
	Y OF LAW THAT I HAVE PERSONALLY EX	TELEPHONE	DATE			
INDIVIDUALS IMMEDIATELY Kathy Bartlett BELIEVE THE SUBMITTED I	JBMITTED HEREIN; AND BASED ON MY IN RESPONSIBLE FOR OBTAINING THE NFORMATION IS TRUE, ACCURATE, AND	479 530-5926	4/13/2015			
TYPED OR PRINTED AWARE THAT THERE AI INFORMATION, INCLUDING	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: 1503020111

Customer Name : GREENFIELD CAP DEV-DEER HAVEN

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

Report Date : 03/18/15

Sample Date : 03/11/15

Sample Time : 1240

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

Collected By: WDS
Delivery By : KIK

Work Order :

Purchase Order :

	•						
		<u>Laboratory Analysi</u>	s			Quality A	Assurance
Analysis						Precision	Accuracy
<u>Date Time By</u>	Parameter	Result	Notes	Quantity	Method	% RPD	% Recovery
03/12 1100 TSB	Ammonia Nitrogen	4.6 mg/L			SM 1997 4500-NH3 F	0.00	102.0 *
- 03/16 1330 TSB	Kjeldahl Nitrogen Total	11.20 mg/L			SM 1997 4500-NorgB		98.0
03/16 1045 TSB	Nitrate Nitrogen	24.80 mg/L			SM 2000 4500-NO3 E		103.4 *
03/12 1030 TSB	Nitrite Nitrogen	14.250 mg/L			SM 2000 4500 NO2 B		107.4 *
	Н	7.2 S.U.		•	SM 2000 4500-H+ B	0.00	N/A *
03/12 1345 TSB	Phosphorous, Total (as P)	7.7 mg/L			EPA 365.3	0.00	98.0
03/13 1450 TSB	Solids, Total Suspended	4.0 mg/L			SM 1997 2540 D	28.57	N/A *
03/11 1615 TSB	Coliform, Fecal	344 /100			SM 1997 9222 D	0.00	N/A *
	BOD, Carbonaceous	< 2.0 mg/L			SM 2001 5210 B	0.00	•
· .	Nitrogen, Plant Available				SM 1997 4500-N	0.00	97.0

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

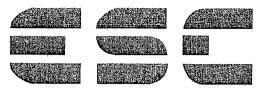
All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of 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.

## 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**

Phone: 479-750-1170	Fax: 479-750-1172		CI	HAIN (	OF CU	STO	DY											
Client Information				Project Information							Red	ques	ted	Par	ame	eters	3	
Company Name: Deer Haven Subdivision			Permit/Project #:							<u></u>								
Address: PO Box 127		Purchase	Purchase Order #:							TP(25),NH3-N(15.A),TKN(16.A),N03(15.A)NO2(19)								
	Avoca Ar 72711						0 01					5.A)N	(66					
Telephone:				Sampler Name(s):			1,5	- boit			ı	N03(1	CBOD(70),TSS(28),PAN(99.99)					
Telephone:				104mpler (tame(a): 10 40		401201					(P.A)	PAN				ŀ		
releptione.				1 10 1 1		<del></del>					\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	28).	13)					
ESC Client Number:	1821	<u></u>		and Signature(s):							5.A)	ISS(	Coliform (43)					
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Sample Ider	7	-	Sample	Collection	n		Sample Containers			pH(23)	5).N	ac	8			ĺ		
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preservative		#	표	TP(2	B	ш				
Dose Tank/Effluent	1503020111	3-11-15	12:40	GRAB	Water	teflon	150 ml	none		1	x							
<u> </u>				GRAB	Water	Plastic	8 oz	H₂SO₄,pH<	<2	1		х					$\Box$	
		1 7		GRAB	Water	Plastic	1 qt	none/ice		1			x					
		1,		GRAB	Water	Whirlpak	1			1				х				
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1/2- Wine Shenitt		3-11-15	13 time	received by. (G	Buarda e aud Liviter	з мате)		Date	1		Used <sup>*</sup>	Jsed?			Intac	12 <b>Г</b>	_	
Relinquished By: (Signature and Printed Name)		Date /			eceived By: (Signature and Printed Name)			Date	Tim	В	Turna	around		/				$\neg$
Relinquished By: (Signature and Printed Name) Date Time			Received for Lab By: (Signature and Printed Name)		<u> </u>	Date Time			Regul	ılar samp	1/	20-14	Spec					
, , , , , , , , , , , , , , , , , , ,		Richard B	roun KICH	HARDISP	CONN	3-11-15	130	0		Yes	7/	pheny		No T	$\neg$			
Comments:					FLOW DATA Field Tes		Field Test	Time	Analys	nalyst Res		esult Result		lt	Units			
					Analyst: Time:		pH:	12:40	2125		7,	2			00		· · ·	$\Box$
		<del></del>			Reading:	<del></del>	Temp.; DO:			$\dashv$		-			°C		°F	
					Units:		Debris:											$\dashv$
Cool all samples to 6 degrees C.				Chlorinated? Yes No T				This	Doc	ume	nt is	Page	,(	of				