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

PERMITTEE NAME	
First Asset Holdings, LLC	
PERMITTEE ADDRESS	
PO Box 7	
Fort Smith AD 72002	

FACILITY NAME (IF DIFFERENT)
Deer Haven Subdivision
 FACILITY ADDRESS
Smith Ridge Rd Garfield AR 72752

	PERMIT NO.	
	4908-WR-1	
Г	AFIN NO.	٦
Г	04-01681	٦

Γ	WASTEWATER E	FFLUENT MONITORING PERIOD	
Γ	MM/DD/YYYY	MM/DD/YYY	<i>'</i>
FROM	10/1/2012	10/31/2012	
	TREATED WASTEW	VATER EFFLUENT SAMPLING	
	PERMIT REQUIREMENT	SAMPLE MEASUREMENT	UNITS

PARAMETER	PERMIT REQUIREMENT	PERMIT REQUIREMENT SAMPLE MEAS		SUREMENT UNITS		QUENCY OF NALYSIS	SAMPLE TYPE																																		
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE	REPORT	7.9 MG/L		MG/L	ONCE/ MONTH		GRAB																																		
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE	15	< 2.0 MG/L		ONCE/ MONTH		GRAB																																			
PH EFFLUENT GROSS VALUE	6 to 9	6.2 S.U.			ONCE/ MONTH	GRAB																																			
SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE	15	4		15 4 MG/L		MG/L	1	ONCE/ MONTH	GRAB																																
NITROGEN, AMMONIA TOTAL (AS N) EFFLUENT GROSS VALUE	REPORT	4.1		M G/L	I .	ONCE/ MONTH	GRAB																																		
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE	10,000	< 2		colonies/100ml	•	ONCE/ MONTH	GRAB																																		
TOTAL KJELDAHL NITROGEN EFFLUENT GROSS VALUE	REPORT	7		MG/L	II.	ONCE/ MONTH	GRAB																																		
NITRATE NITROGEN EFFLUENT GROSS VALUE	REPORT	30.12	!	MG/L		ONCE/ MONTH	GRAB																																		
NITRITE NITROGEN EFFLUENT GROSS VALUE	REPORT	0.056	0.056		ONCE/ MONTH		GRAB																																		
PLANT AVAILABLE NITROGEN EFFLUENT GROSS VALUE	REPORT	35.1		MG/L	ONCE/ MONTH		GRAB																																		
FLOW, THRU CONDUIT OR TREATMENT UNIT EFFLUENT GROSS VALUE	REPORT	MONTHLY TOTAL 46,224	DAILY MAX 33,280	GPD	ONCE/ MONTH																																				TOTAL FLOW
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER I CERTIFY UNDER PENALT	TE	LEPHONE	DATE																																						
WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I KATHING BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM SIGNATURE OF PRINCIPAL																																									
TYPED OR PRINTED AWARE THAT THERE A	RE SIGNIFICANT PENALTIES FOR SU THE POSSIBILITY OF FINE AND IMPRISONI		EXECUTIVE O		AREA CODE	NUMBER	MM/DD/YYYY																																		
COMMENTS AND EXPLANATION OF VIOLATIONS (Referen	nce all attachments here)																																								

DEC 1 0 2012 Revised December 13, 20

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: 1210020225

Customer Name : GREENFIELD CAP DEV-DEER HAVEN

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

Report Date : 10/18/12

Sample Date : 10/10/12

Sample Time : 1110

Sample Type : GRAB

Sample From : DEER HAVEN EFFLUENT

Collected By: SJI'

Delivery By : SJI Work Order :

Purchase Order :

		Laboratory Analysis		Quality A	ssurance
Analysis				Precision	Accuracy
Date Time By	Parameter	Result Notes	Quantity Method	% RPD	% Recover
10/11 0915 M NM	Ammonia Nitrogen	4.1 mg/L	SM 18th 4500-NH3 H	6.50	93.3
	Kjeldahl Nitrogen Total	6.72 mg/L	SM 18th 4500-NorgB	0.60	99.4
10/16 1030 MNM	Nitrate Nitrogen	30.12 mg/L	SM 18th 4500-NO3 E	2.02	97.0
10/15 1430 MNM	Nitrite Nitrogen	0.056 mg/L	SM 18th 4500 NO2 B	8.28	92.0
10/10 1115 SJI	pН	6.2 S.U.	SM 18th 4500-H+ B	0.00	N/A
	Phosphorous, Total (as P)	7.9 mg/L	EPA 365.3	14.49	105.9
10/13 1020 SJI	Solids, Total Suspended	4.0 mg/L	SM 18th 2540D	0.00	N/A
10/10 1410 SJI	Coliform, Fecal	< 2 /100ml	SM 18th 9222D	0.00	N/A
10/10 1330 SJI	BOD, Carbonaceous	< 2.0 mg/L	SM 18th 5210B	0.00	109.0
10/18 1000 RHB	Nitrogen, Plant Available	35.1 mg/L	SM 18th 4500-NH3E		

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.

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

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



Environmental Services Company, Inc. Northwest Branch 1107 Century Springdale, AR 72764

Phone: 501-221-2565 Fax: 501-221-1341 CHAIN OF CUSTODY Phone 479-750-1170 Fax:: 479-750-11)-1172								
Client Information				Project Information								Req	ues	ted	Para	ame	ters
Company Name: Deer Haven Subdivision			Permit/Project #:														
Address: PO Box 127			Purchase Order #:														
	Avoca Ar 72711																Ì
Telephone:				Sampler Name(s): Sam J. Isaacks							_	AN					
Telephone:				1			حـــــ					Š	7,F				
				and Signat	ure(s):							X,	N.	Z.			
ESC Client Number:	1821			1	(-,-							P, NH ₃ -N,TKN,N03	CBOD,TSS,NO2,PAN	COLIFORM			
Sample Ide	entification		Sample	Collection			Sample 0	Containers				Ŧ,	dc,	ğ			
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preserva	tive	#	표	P, P	CB	F. 0			
Dose Tank/Effluent	1210020221	Proliz	1110	GRAB	Water	teflon	150 ml	none		1	x						
		1	i	GRAB	Water	Plastic	1 qt	H ₂ SO ₄ ,pH<	2	1		х					
			GRAB	Water	Plastic	1 qt	none/ice		1			x					
		—		GRAB	Water	Whirlpak	300ml	none/ice		1				x			
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Relinquished By: (Signature and Prin		19w/n	Time	Received By: (Signature and Printed Name) Date Time				ne	Custody Seals:								
Sam J. Isaacks Relinquished By: (Signature and Prin		Date	/230 Time	Received By: (Signature and Printed Name) Date Time			ne	Used	d? aroun	IC:	1	Inta	ct?				
, (- -								Regi		×		Special					
Relinquished By: (Signature and Printed Name) Date Time		Received for Lab By: (Signature and Printed Name)			12					property preserved:							
Comments:				FLOW D	ATA	Field Test	Time	Analy		Res	sult	Res	ult		Units	ŝ	
							225	2	198		_	°C °F		°F			
		Time:		Temp.: DO:	1	-		17	4	+-							
					Reading: Units:		Debris:		\vdash				+		+		
	Cool all samples to 6 degrees C.						Chlorinate	d? Yes N	lo	-	Thi	s Do	cum	ent is	s Pag	e :	of _\