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

FACILITY NAME (IF DIFFERENT)

Deer Haven Subdivision

PERMIT NO.4908-WR-1

PO Box 7 Fort Smith, AR 72902 FACILITY ADDRESS
Smith Ridge Rd Garfield AR 72752

AFIN NO. 04-01681

 WASTEWATER EFFLUENT MONITORING PERIOD

 MM/DD/YYYY
 MM/DD/YYYY

 FROM
 10/1/2014
 10/31/2014

TREATED WASTEWATER FEEL HENT SAMPLING

PARAMETER	PERMIT REQUIREMENT	SAMPLE MEAS	MEASUREMENT UNITS		FREQUENCY OF ANALYSIS	SAMPLE TYPE	
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE	REPORT	6.8		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	6 to 9 6.1		S.U.	ONCE/ MONTH	GRAB	
SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE	15	< 2		MG/L	ONCE/ MONTH	GRAB	
NITROGEN, AMMONIA TOTAL (AS N) EFFLUENT GROSS VALUE	REPORT	8.5		MG/L	ONCE/ MONTH	GRAB	
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE	10,000	< 2		colonies/100ml	ONCE/ MONTH	GRAB	
TOTAL KJELDAHL NITROGEN EFFLUENT GROSS VALUE	REPORT	11.2	11.2		ONCE/ MONTH	GRAB	
NITRATE NITROGEN EFFLUENT GROSS VALUE	REPORT	37.82	37.82		ONCE/ MONTH	GRAB	
NITRITE NITROGEN EFFLUENT GROSS VALUE	REPORT	0.069	0.069		ONCE/ MONTH	GRAB	
PLANT AVAILABLE NITROGEN EFFLUENT GROSS VALUE	REPORT	47.2	47.2		ONCE/ MONTH	GRAB	
FLOW, THRU CONDUIT OR TREATMENT UNIT EFFLUENT GROSS VALUE	REPORT	MONTHLY TOTAL 52,200	33,280	GPD	ONCE/ MONTH	TOTAL FLOW	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER 1 CERTIFY UNDER PENALT	TELEPHONE	DATE					
INDIVIDUALS IMMEDIATEL	WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I 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 (OFFICER OR	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: 1410020088

Customer Name : GREENFIELD CAP DEV-DEER HAVEN

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

Report Date : 10/16/14

Sample Date : 10/08/14

Sample Time : 1035

Sample Type : GRAB DEERHAVEN
Sample From : EFFLUENT DOSE TANK

Collected By: WDS

Delivery By : WDS

Work Order : Purchase Order :

	Quality Assurance				
Analysis				Precision	
<u>Date Time By</u>	Parameter	Result Notes Quantity	Method		Accuracy
10/10 1430 TSB	Ammonia Nitrogen	8.5 mg/L		% RPD	% Recovery
		J ,	SM 1997 4500-NH3 F		100.5 *
10/14 0030 HBB	Microgen rotal	11.20 mg/L	SM 1997 4500-NorgB	2.16	99.2 *
	Nitrate Nitrogen	37.82 mg/L	SM 2000 4500-NO3 E	0.00	101.6
	Nitrite Nitrogen	0.069 mg/L	SM 2000 4500 NO2 B		99.8 *
10/08 1035 WDS	рН	6.1 S.U.	SM 2000 4500-H+ B		
10/13 1345 TSB	Phosphorous, Total (as P)		· · · · · · · · · · · · · · · · · · ·	0.00	N/A *
	Solids, Total Suspended	6.8 mg/L	EPA 365.3	3.77	95.0 *
10/10 1550 755	solids, local suspended	< 2.0 mg/L	SM 1997 2540 D	18.18	`N/A *
	Coliform, Fecal	< 2 /100ml	SM 1997 9222 D	0.00	N/A *
10/08 1000 KIK	BOD, Carbonaceous	< 2.0 mg/L	SM 2001 5210 B		
10/15 0830 TSB	Nitrogen, Plant Available	47.2 mg/L		9.13	96.3 *
	Traine ilvarrable	47.2 mg/L	SM 1997 4500-N		

* 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					Requested Parameters									
Company Name:	Deer Haven Subdivision			Permit/Pro	oject #:				************			<u></u>		Г			T
Address: PO Box 127		Purchase Order #:					pH(23)	02(15									
								·		5.A)N	66						
Telephone:	Avoca Ar 72711 Telephone:			Sampler N	lame/s\·	1/	le Shailt				103(1	66)			1		
Telephone:			1			196 KAMI!!				(A)	PAN						
				and Signature(s):		/)					Z.	28),	(43)				
ESC Client Number:	1821	**************************************	· · · · · · · · · · · · · · · · · · ·	_and Signa	ture(s):	NZ	Ź					(S.A)	CBOD(70),TSS(28),PAN(99.99)	E E			
Sample Ide		T	01-								Ž,	6	Coliform (
			1	Collection	T		T	Containers			[23	N'(52)go	3			
Identification ESC Control at Dose Tank/Effluent 140020088	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preserv	ative	#	된	F (2)	S	u.			
	1910020088	108-14	10:35	GRAB	Water	teflon	150 ml	none		1	x						T
				GRAB	Water	Plastic	8 oz	H₂SO₄,pH	<2	1		x					T
				GRAB	Water	Plastic	1 qt	none/ice		1			х				T
		مسلر		GRAB	Water	Whirlpak	100 mi	100 ml none/ice		1				х			十
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W/2 Waterhand 10001 1205									Used?	?	Intact?			1			
			Received By: (Signature and Printed Name)				Date	Tim		Turna Regul		:			7		
Relinquished By: (Signature and Printed Name) Date Time Comments:		Received for Lab	Received for Leb By: (Signature and Printed Name) Rucherd Brown Richard Brown			Date	Tim	18				les properly preserve		ed:			
		FLEHAND BROWN FLOHARD BRO		るw ^ル Field Test	10-8-14/120		5		Yes 🗸		No	0	L				
				Analyst:		pH:	Time 10:35			Resu		Result L		U	nits		
		· · · · · · · · · · · · · · · · · · ·			Time:		Temp.:	10 ,70	100	2	<u>o , </u>	<u> </u>		\dashv	°C	°F	
				****	Reading:		DO:										
Cool all samples to 6 degrees C.				Units:		Debris:		L	_								
Cool an samples to 0 degrees C.							Chlorinated	? Yes N	0	1	I his	Doc	ume	nt is	Page	of	

5 MG: SCIFORMSICHAIN.XLS

P.O. Box 9299

Fayetteville, AR 72703



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