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

SASS.	PERMITTEE NAME		
	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

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

WASTEWATER EFFLUENT MONITORING PERIOD						
	MM/DD/YYYY	MM/DD/YYYY				
FROM	9/1/2013	9/30/2013				

		TREATED WASTE	WATER EFFLUENT SA	MPLING					
PARAMETER		PERMIT REQUIREMENT	SAMPLE MEASUREMENT		UNITS		QUENCY OF ANALYSIS	SAMPLE TYPE	
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE		REPORT	7.1 • _		MG/L	ONCE/ MONTH		GRAB	
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE		15	<2		MG/L	ONCE/ MONTH		GRAB	
H FFLUENT GROSS VALUE	LUENT GROSS VALUE 6 to 9 6.5		6.5		S.U.	ONCE/ GR		GRAB	
OLIDS, TOTAL SUSPENDED FFLUENT GROSS VALUE		15	5 4 MG/L		MG/L		ONCE/ MONTH	GRAB	
TROGEN, AMMONIA TOTAL (AS N) FFLUENT GROSS VALUE		REPORT	3.4 MG/L			ONCE/ MONTH	GRAB		
OLIFORM, FECAL GENERAL FFLUENT GROSS VALUE		10,000	6 colonies/100ml		colonies/100ml		ONCE/ GRAE		
TOTAL KJELDAHL NITROGEN EFFLUENT GROSS VALUE		REPORT	9		MG/L	ONCE/ MONTH		GRAB	
NITRATE NITROGEN EFFLUENT GROSS VALUE		REPORT	33.01		MG/L	ONCE/ MONTH		GRAB	
NITRITE NITROGEN EFFLUENT GROSS VALUE		REPORT	0.117		MG/L	ONCE/ MONTH		GRAB	
LANT AVAILABLE NITROGEN FFLUENT GROSS VALUE		REPORT .	38.2		MG/L	ONCE/ MONTH		GRAB	
FLOW, THRU CONDUIT OR TREATMENT UNIT EFFLUENT GROSS VALUE		REPORT	MONTHLY TOTAL 50,732	DAILY MAX 33,280	GPD	ONCE/ MONTH		TOTAL FLOW	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER   CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM					Δ.	T	ELEPHONE	DATE	
Kathy Bartlett	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						530-5926	10/8/2013	
TYPED OR PRINTED	AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.  AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.  AUTHORIZED AGENT					AREA CODE	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: 1309020135

Customer Name : GREENFIELD CAP DEV-DEER HAVEN

Customer/Permit No.: 1821 / 4908-WR-1 Report Date: 09/19/13 Sample Date : 09/11/13 Sample Time : 1050

Sample Type : GRAB

Sample From : DOSE TANK EFFLUENT

Collected By: WDS Delivery By: WDS

Work Order:
Purchase Order:

Laboratory Analysis						Quality Assurance		
Analysis				•	į	Precision	Accuracy	
Date Time By	Parameter	Result	Notes Notes	Quantity	Method	% RPD	% Recover	
09/12 1100 TS.	Ammonia Nitrogen	3.4	mg/L	•	SM 18th 4500-NH3 H	2.63	102.7	
09/12 0945 TSB	Kjeldahl Nitrogen Total	9.00	mg/L		SM 18th 4500-NorgB	12.63	100.5	
09/18 0830 TSB	Nitrate Nitrogen	33.01	mg/L		SM 18th 4500-NO3 E	0.00	105.0	
09/12 1310 MNM	Nitrite Nitrogen	0.117	mg/L	•	SM 18th 4500 NO2 B	2.00	100.0	
09/11 1050 WDS	рн	6.5	S.U.		SM 18th 4500-H+ B	1.09	N/A	
09/13 1300 TSB	Phosphorous, Total (as P)	7.1	mg/L		EPA 365.3	1.29	99.0	
09/12 0900 KIK	Solids, Total Suspended	4.0	mg/L		SM 18th 2540D	0.00	N/A	
09/11 1555 KIK	Coliform, Fecal	б	/100ml		SM 18th 9222D	0.00	N/A	
09/11 1600 KIK	BOD, Carbonaceous	< 2.0	mg/L		SM 18th 5210B	0.00	102.5	
09/19 0700 MNM	Nitrogen, Plant Available	38.2	mg/L		SM 18th 4500-NH3E			

\* 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. 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

## **CHAIN OF CUSTODY**

Fax: 501-221-1341 Phone: 501-221-2565 Phone 479-750-1170 Fax:: 479-750-1172 Project Information Client Information Requested Parameters Company Name: Deer Haven Subdivision Permit/Project #: P[25],NH3-N(15.A),TKN(16.A),N03(15.A)NO2(19) Address: PO Box 127 Purchase Order #: CBOD(70),TSS(28),PAN(99.99) Avoca Ar 72711 Sampler Name(s): Telephone: Telephone: Coliform (43) and Signature(s): ESC Client Number: 1821 pH(23) Sample Identification Sample Collection Sample Containers # Identification ESC Control # Date Time Type Matrix Type Volume | Preservative 9-11-1.3 309020135 Dose Tank/Effluent 10150 GRAB x Water teflon 150 ml none **GRAB** Water Plastic 8 oz H2SO4.pH<2 **GRAB** Water Plastic 1 at none/ice **GRAB** Water Whirlpak 100 ml none/ice Received By: (Signature and Printed Name) Custody Seals: Used? Intact? Relinquished By: (Signature and Printed Name) Received By: (Signature and Printed Name) Turnaround Special Regular (Signature and Printed Name) Relinquished By: (Signature and Printed Name) 9/11/13 Were samples properly preserved: Yes Νo Field Test Analyst Result Units Comments: Result 10:50 DΗ: 1205 Analyst: Time: Temp.: Reading: DO: Units: Debris: Chlorinated? Yes No Cool all samples to 6 degrees C. This Document is Page

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