

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

<b>PERMITTEE NAME</b>
Deer Haven Utility
<b>PERMITTEE ADDRESS</b>
PO Box 9299 Fayetteville AR 72703

<b>FACILITY NAME</b>
Deer Haven Subdivision
<b>FACILITY ADDRESS</b>
15046 Smith Ridge Rd Garfield AR 72732

<b>PERMIT NO.</b>
4908-WR-2

<b>AFIN NO.</b>
04-01681

<b>WASTEWATER EFFLUENT MONITORING PERIOD</b>		
MM/DD/YYYY		MM/DD/YYYY
1/1/2021		1/31/2021

<b>TREATED WASTEWATER EFFLUENT SAMPLING</b>					
Parameter	Limit	Sample Measurement	Units	Monitoring	Reporting
Flow, Monthly total	REPORT	0.298,808	MG	Total Flow per calendar month	Prior to the 15th of the following Month
Flow, daily maximum *	REPORT	0.013,860	GPD	Daily	
Carbonaceous Biochemical Oxygen Demand (CBOD5)	30	6.1	mg/l	Grab Sample once per month	
Total Suspended Solids (TSS)	45	30.3	mg/l		
Fecal Coliform Bacteria (FCB)	4,000	> 12098.0	colonies/100ml		
pH	6.0 - 9.0	7.4	s.u.		
Total Phosphorus (TP)	REPORT	9.81	mg/l		
Total Kjeldahl Nitrogen (TKN)	REPORT	72.6	mg/l	Grab sample once per quarter	
Ammonia Nitrogen	REPORT	69.6	mg/l		
Nitrate Nitrogen ( NO <sub>3</sub> -N) + Nitrite Nitrogen ( NO <sub>2</sub> -N)	REPORT	0.63	mg/l		
Plant Available Nitrogen (PAN)	REPORT	71.1	mg/l		

<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; padding: 2px;">NAME OF PRINCIPAL EXECUTIVE OFFICER</td> </tr> <tr> <td style="text-align: center; padding: 2px;">Kathy Bartlett</td> </tr> <tr> <td style="text-align: center; padding: 2px;">TYPED OR PRINTED</td> </tr> </table>	NAME OF PRINCIPAL EXECUTIVE OFFICER	Kathy Bartlett	TYPED OR PRINTED	<p>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 INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; padding: 2px;"><b>SIGNATURE OF COGNIZANT OFFICIAL</b></td> <td style="text-align: center; padding: 2px;"><b>TELEPHONE</b></td> </tr> <tr> <td style="height: 40px;"></td> <td style="text-align: center; padding: 2px;">(479) 530-5926</td> </tr> <tr> <td></td> <td style="text-align: center; padding: 2px;"><b>DATE</b></td> </tr> <tr> <td></td> <td style="text-align: center; padding: 2px;">2/12/2021</td> </tr> </table>	<b>SIGNATURE OF COGNIZANT OFFICIAL</b>	<b>TELEPHONE</b>		(479) 530-5926		<b>DATE</b>		2/12/2021
NAME OF PRINCIPAL EXECUTIVE OFFICER													
Kathy Bartlett													
TYPED OR PRINTED													
<b>SIGNATURE OF COGNIZANT OFFICIAL</b>	<b>TELEPHONE</b>												
	(479) 530-5926												
	<b>DATE</b>												
	2/12/2021												

COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)

* LOADING RATE BY ZONE							
Zone 1		2310	Zone 5		2310		
Zone 2		2310	Zone 6		2310		
Zone 3		2310					
Zone 4		2310					

January 2021 VILLAGES OF CROSS CREEK LOADING RATES

Daily Max	29,811
Zone Identification	GPD/sq 2
1	3369
2	3369
3	3369
4	3369
5	3369
6	3369
7	3190
8	3074
9	Not used
10	Combined with 8
11	3,333
12	Not used
13	Not used
14	Not used
15	Not used
16	Not used
17	Not used

## NON-COMPLIANCE REPORT

Arkansas Department of Environmental Quality  
Office of Water Quality – Enforcement Branch  
5301 Northshore Drive  
North Little Rock, AR 72118

RE: Permit No: 4808-WR-2 Discharge Number: \_\_\_\_\_

Facility: Deewr Haven

Address: 15046 Smith Ridge Rd

City: Garfield State: AR Zip: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of Non-Compliance	Parameter Exceeded	Quantity or Loading	Quality or Concentration	Permit Limits
Jan 2021	Fecal Coliform Bacteria	12,098		10,000

We feel this problem was due to:

unsure, drying to determine the cause of elevated FCB

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

We plan on correcting the problem in this manner:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Time estimated that it will take to correct problem:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sincerely,

K M Little

2/12/21

Submitted By:

Date

☐ Submitted electronically via NetDMR

**Certification Statement:** I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. (Revised March 2016)

# 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: 2101020057  
Customer Name : DEER HAVEN UTILITY LLC  
Customer/Permit No. : 1821 / 4908-WR-1  
Report Date : 02/02/21

Sample Date : 01/20/21  
Sample Time : 1140  
Sample Type : GRAB  
Sample From : EFFLUENT

Collected By: HNS  
Delivery By : HNS  
Work Order :  
Purchase Order :

## Laboratory Analysis

Analysis							Quality Assurance	
Date	Time	By	Parameter	Result	Notes	Quantity	Method	Precision
								% RPD
								% Recovery
01/25	1000	HNS	Ammonia as N, (HACH 10205)	69.60 mg/L			SM 2011 4500-NH3 F	6.17
02/02	1115	TWM	Total Kjeldahl Nitrogen	72.6 mg/L			02/2014 HACH 10242	3.17
01/20	1145	HNS	pH	7.4 S.U.			SM 2011 4500-H+ B	0.00
01/22	1130	HNS	Phosphorous, Total (as P)	9.81 mg/L			EPA 365.3	1.65
01/25	1330	HNS	Solids, Total Suspended	30.3 mg/L			SM 2011 2540 D	25.94
01/20	1630	HNS	Fecal Coliform (MPN/100mL)	> 12098.0 /100ml	(b)		06/2012 Colilert18	0.00
01/21	0730	TWM	BOD, Carbonaceous	6.1 mg/L			SM 2001 5210 B	0.00
01/26	1210	HNS	Nitrate + Nitrite	0.63 mg/L			01/2013 HACH 10206	5.23
02/02	1450	TWM	Nitrogen, Plant Available	71.1 mg/L			SM 1997 4500-N	

\* QA data shown is from a different sample or standard on the same date.  
(b) Exceeds Permit Limits for Maximum Concentration

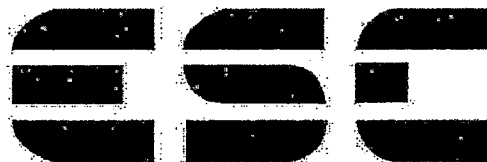
All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of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

298808  
13864

Environmental Services Company, Inc.  
Northwest Arkansas  
1107 Century Street  
Springdale, Arkansas 72762  
website: [www.esclabs.com](http://www.esclabs.com)



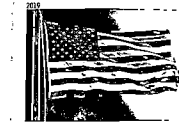
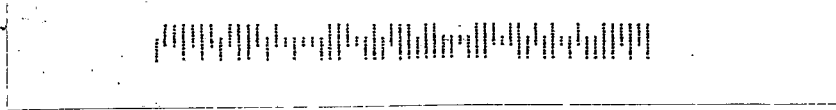
Corporate Office, Little Rock, Arkansas  
501-221-2565

Carlsbad, New Mexico  
575-887-1ESC

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

## CHAIN OF CUSTODY

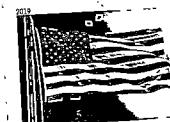
Client Information						Project Information					Requested Parameters								
Company Name: Deer Haven Utility LLC						Permit/Project #:					TP(25), NH <sub>3</sub> -N(15.A), s-TKN (16.C), NO <sub>3</sub> + NO <sub>2</sub> (91), CBOD(70), TSS(28), PAN(99.99) F. Coliform (43.IF) pH(23)								
Address: PO Box 127 Avoca Ar 72711						Purchase Order #:													
Telephone:						Sampler Name(s): <i>Hayden Smith</i>													
Telephone:						and Signature(s): <i>Hough</i>													
ESC Client Number: 1821																			
Sample Identification		Sample Collection				Sample Containers													
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#										
Dose Tank/Effluent	2101020057	1-20-21	1140	GRAB	Water	Plastic	8 oz	H <sub>2</sub> SO <sub>4</sub> , pH<2	1	X	X								
Dose Tank/Effluent	↓	↓	↓	GRAB	Water	Plastic	1 qt	none/ice	1			X							
Dose Tank/Effluent	↓	↓	↓	GRAB	Water	Sterile	100 ml	none/ice	1				X						
Dose Tank/Effluent	↓	↓	↓	GRAB	Water	Glass	8 oz	none/ice	0					X					
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)			Date	Time	Custody Seals:										
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)			Date	Time	Used? <input checked="" type="checkbox"/> Intact? <input type="checkbox"/>										
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)			Date	Time	Turnaround:										
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)			Date	Time	Regular <input checked="" type="checkbox"/> Special <input type="checkbox"/>										
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)			Date	Time	Were samples properly preserved:										
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)			Date	Time	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>										
Comments:						FLOW DATA	Field Test	Time	Analyst	Result	Result	Units							
						Analyst:	pH:	1143	14NS	7.4	7.4								
						Time:	Temp.:					°C °F							
						Reading:	DO:												
						Units:	Debris:												
						Chlorinated? Yes No				This Document is Page 1 of 1									



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***NWA Utility Services Inc***

***PO Box 9299***

***Fayetteville, AR 72703***

ADEQ  
WATER DIVISION/PERMITS BRANCH  
5301 Northshore Drive  
N Little Rock, AR 72118-5317