

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

PERMITTEE NAME
First Asset Holding

FACILITY NAME
Deer Haven Subdivision

PERMIT NO.
4908-WR-2

PERMITTEE ADDRESS
PO Box 7
Ft Smith AR 72902


FACILITY ADDRESS
15046 Smith Ridge Rd
Garfield AR 72732

AFIN NO.
04-01681

WASTEWATER EFFLUENT MONITORING PERIOD

MM/DD/YYYY 7/1/2018	MM/DD/YYYY 7/31/2018
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TREATED WASTEWATER EFFLUENT SAMPLING					
Parameter	Limit	Sample Measurement	Units	Monitoring	Reporting
Flow, Monthly total	REPORT	0.117374	MG	Total Flow per calendar month	Prior to the 15th of the following Month
Flow, daily maximum *	REPORT	6,876	GPD	Daily	
Carbonaceous Biochemical Oxygen Demand (CBOD5)	30	< 2	mg/l	Grab Sample once per month	
Total Suspended Solids (TSS)	45	8.6	mg/l		
Fecal Coliform Bacteria (FCB)	4,000	20	colonies/100ml		
pH	6.0 - 9.0	7.2	s.u.		
Total Phosphorus (TP)	REPORT	11.1	mg/l		
Total Kjeldahl Nitrogen (TKN)	REPORT	37.9	mg/l	Grab sample once per quarter	
Ammonia Nitrogen	REPORT	34.5	mg/l		
Nitrate Nitrogen (NO3-N) + Nitrite Nitrogen (NO2-N)	REPORT	24.9	mg/l		
Plant Available Nitrogen (PAN)	REPORT	60.4	mg/l		

NAME OF PRINCIPAL EXECUTIVE OFFICER	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.	 SIGNATURE OF MONITORING OFFICIAL	TELEPHONE (479) 530-5926
Ken Gregory			DATE
TYPED OR PRINTED			8/6/2018

COMMENTS AND EXPLANATION OF VIOLATIONS (*Reference all attachments here*)

* LOADING RATE BY ZONE							
Zone 1		1148.29	Zone 5		1148.29		
Zone 2		1148.29	Zone 6		1148.29		
Zone 3		1148.29					
Zone 4		1148.29					

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: 1807020142	Sample Date : 07/13/18	Collected By: CLS
Customer Name : DEER HAVEN UTILITY LLC	Sample Time : 1315	Delivery By : CLS
Customer/Permit No. : 1821 / 4908-WR-1	Sample Type : GRAB DEER HAVEN	Work Order :
Report Date : 07/20/18	Sample From : DOSE TANK EFFLUENT	Purchase Order :

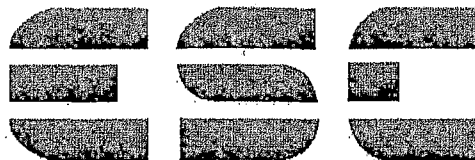
Laboratory Analysis							Quality Assurance		
Analysis							Precision	Accuracy	
Date	Time	By	Parameter	Result	Notes	Quantity	Method	% RPD	% Recovery
07/13	1000	JCB	Ammonia Nitrogen	34.5 mg/L			SM 1997 4500-NH3 F	0.00	101.0
07/19	1000	TSB	Total Kjeldahl Nitrogen	37.9 mg/L			02/2014 HACH 10242	10.99	98.5 *
07/13	1315	CLS	pH	7.2 S.U.			SM 2000 4500-H+ B	0.00	N/A *
07/18	1245	CLS	Phosphorous, Total (as P)	11.1 mg/L			EPA 365.3	4.15	109.0 *
07/19	1030	TSB	Solids, Total Suspended	8.6 mg/L			SM 1997 2540 D	18.54	N/A *
07/13	1430	CLS	Fecal Coliform	20.0 /100ml			06/2012 Colilert18	2.74	0.0 *
07/13	1400	TSB	BOD, Carbonaceous	< 2.0 mg/L			SM 2001 5210 B	0.92	109.0 *
07/16	1345	TSB	Nitrate + Nitrite	24.9 mg/L			01/2013 HACH 10206	1.74	95.7 *
07/19	1500	TSB	Nitrogen, Plant Available	60.4 mg/L			SM 1997 4500-N		
07/13	1410	CLS	Sample Collection/Travel	1 each				0.00	100.0 *

* 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

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 #:						<p>pH(23)</p> <p>TP(25),NH₃-N(15.A), s-TKN(15.C),NO₃ + NO₂(91)</p> <p>CBOD(70),TSS(28),PAN(99.99)</p> <p>F. Coliform (43)</p>											
Address: PO Box 127				Purchase Order #:																	
Avoca Ar 72711				Sampler Name(s): <i>Chris Stange</i>																	
Telephone:				and Signature(s): <i>[Signature]</i>																	
ESC Client Number: 1821																					
Sample Identification		Sample Collection				Sample Containers															
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#												
Dose Tank/Effluent	1807020142	7/13/18	1315	GRAB	Water	teflon	150 ml	none	1	<input checked="" type="checkbox"/>											
Dose Tank/Effluent	↓	↓	↓	GRAB	Water	Plastic	8 oz	H ₂ SO ₄ , pH<2	1	<input checked="" type="checkbox"/>											
Dose Tank/Effluent	↓	↓	↓	GRAB	Water	Plastic	1 qt	none/ice	1		<input checked="" type="checkbox"/>										
Dose Tank/Effluent	↓	↓	↓	GRAB	Water	Whirlpak	100 ml	none/ice	1			<input checked="" type="checkbox"/>									
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)				Date	Time	Custody Seals:											
<i>[Signature]</i>		7/13/18	1400	<i>[Signature]</i>						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:											
										Regular <input checked="" type="checkbox"/> Special <input type="checkbox"/>											
Relinquished By: (Signature and Printed Name)		Date	Time	Received for Lab By: (Signature and Printed Name)				Date	Time	Were samples properly preserved:											
				<i>[Signature]</i>				7/13/18	1400	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>											
Comments:						FLOW DATA		Field Test	Time	Analyst	Result	Result	Units								
						Analyst:		pH:	1315	CS	7.2	7.2									
						Time:		Temp.:	Y	Y	77.7	77.5	°F								
						Reading:		DO:													
						Units:		Debris:													
Cool all samples to 6 degrees C.								Chlorinated?		Yes	No	This Document is Page 1 of 1									