

PERMIT TRANSFER FORM

PERMIT NUMBER: 4908-WR-2

SELECT ALL OF THE FOLLOWING THAT APPLY:

- ☒ Permittee (legal name) change [CHANGE OF OWNERSHIP]
☐ Facility name change

- ☐ Permittee (legal name) change [NAME CHANGE ONLY]
☒ Responsible official name change

I. CURRENT PERMITTEE INFORMATION

Permittee (legal name):

Facility Name:

Responsible Official Name (see Section IV below):

Is the permittee identified above, the owner of the facility?

If No, list owner name:

First Asset Holding, LLC
Deer Haven Subdivision
Charles Cook
☒ Yes ☐ No currently but
changing to new permittee

II. NEW PERMITTEE INFORMATION

Permittee (legal name):

Facility Name (if different from Permittee Name):

Is the Permittee the owner of the facility? ☒ Yes ☐ No If No, list owner name:

Responsible Official Name (see Section IV below):

Responsible Official Title: V President

Responsible Official E-mail: kathy@aquatechsys.com

Permittee Mailing Address: PO Box 9299

Permittee City: Fayetteville

Permittee State: AR Zip: 72704

Permittee Phone No.: (479) 530-5926

Permittee Type:

☐ STATE ☐ PARTNERSHIP

☐ FEDERAL ☐ PUBLIC

☒ CORPORATION/LLC

State of Incorporation: _____

☐ SOLE PROPRIETORSHIP

☐ OTHER: _____

Is the new permittee registered with the Arkansas Secretary of State?

☒ Yes ☐ No

If yes, the Permittee (legal name) above must EXACTLY match the name registered with the Arkansas Secretary of State.

A current Certificate of Good Standing from the State of Incorporation must be submitted with this form.

Facility Mailing Address: PO Box 9299

Facility City: Fayetteville

Facility State: AR Zip: 72704

Facility Contact Person Name: Ken Gregory

Contact Person Title: Plant Operator

Phone Number: (479) 790-3813 Fax Number: _____

E-mail: Ken@

Invoice Contact Person: Kathy Bartlett

City: aquatechsys.com

Invoice Mailing Address: PO Box 9299

City: Fayetteville

Invoice Mailing Address: _____

State: AR Zip: 72704

Phone: (479) 530-5926

Cognizant Official Name*: Kathy Bartlett

Cognizant Official Title: V President

Phone Number: (479) 530-5926 Fax Number: None

E-mail: Kathy@

aquatechsys.com

* Duly Authorized Representative as outlined in 40 CFR 122.22(b)

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY
5301 NORTHSHORE DRIVE / NORTH LITTLE ROCK / ARKANSAS 72118-5317
TELEPHONE 501-682-0744 / FAX 501-682-0880 / www.adeq.state.ar.us

PERMIT TRANSFER FORM

III. OWNERSHIP CHANGE AGREEMENT

Please note you must complete Section III only if this permit transfer is for a change of ownership.

Please specify the closing date for this transaction: 5/8/20

Current Permittee (Seller): First Asset Holding, LLC

Signature of Responsible Corporate Officer: [Signature]

Title of Responsible Corporate Officer: Vice President

Printed Name of Responsible Corporate Officer: CHARLES COOK

Date: 5/8/20

New Permittee (Buyer): DEER HAVEN UTILITY

Signature of Responsible Corporate Officer: [Signature]

Title of Responsible Corporate Officer: V President

Printed Name of Responsible Corporate Officer: KATHY BARTLETT

Date: 5/8/20

Disclosure Statement:

Disclosure Statement must be submitted for new permittee. Disclosure Statement is not required for Stormwater Permits.

Is Disclosure Statement enclosed: ☐ Yes ☐ No

Trust Fund Requirements:

If this facility is subject to the trust fund requirements (Ark. Code Ann. §8-4-203(b)(1)(B)), the permittee must also submit the ADEQ Trust Fund Requirements form with this transfer form. A form may be obtained from the ADEQ website:

<https://www.adeg.state.ar.us/water/permits/npdes/individual/pdfs/ndstw-trust-fund-certification-form.pdf>

Land Use Contract:

For land application permits you must submit a new land use contracts for all the sites permitted under the current permit for land application. The new land use contract must be signed by the new permittee and land owner.

IV. CERTIFICATION OF NEW PERMITTEE (Responsible Official in Section II)

"I certify that the cognizant official designated in this Permit Transfer Form (Section II) is qualified to act as a duly authorized representative under the provisions of 40 CFR Part 122.22(b). If no cognizant official has been designated, I understand that the Department will accept reports signed by the applicant. 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 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."

In addition, I certify that there will be no operational changes that warrant a permit modification. (Please note that if there are changes that warrant a permit modification, then you must submit a complete application, updated plans, design calculations and specifications, and the permit modification fee along with this Ownership Change Form. The transfer may be made effective prior to permit modification.)

Typed or Printed Name: KATHY BARTLETT

Signature: [Signature]

Title: V President

Date: 5/8/20

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY
5301 NORTHSHORE DRIVE / NORTH LITTLE ROCK / ARKANSAS 72118-5317
TELEPHONE 501-682-0744 / FAX 501-682-0880 / www.adeg.state.ar.us

Nonmunicipal Domestic Sewage Treatment Works Trust Fund Requirement Form

Permittee (Legal) Name: Deer Haven Utility LLC
 Facility Name: Deer Haven Subdivision
 Permit No. 4908-WR-2

Section A – Information Requiring Engineering Certification

Part I – Operating and Maintenance Expenses

	Units/Year	Unit Cost	Annual Cost	5-Year Cost ¹
Operating Expenses				
Operating Labor ²	12	1000.00	12,000.00	63,600.00
Electricity ³	12	250.00	2952.00	15,645.00
Supplies & Chemicals	3	125.00	375.00	1987.50
Analytical Testing	12	102.00	1224.00	6487.00
Generator Fuel	1	350.00	350.00	1855.00
Other: Mowing drip field	8	485.00	3880.00	20,564.00
Maintenance Expenses				
Maintenance labor	Included with operating Labor			0
Parts & Supplies			500.00	2650.00
Other: SLUDGE REMOVAL	3	290.00	870.00	4611.00
Administrative Expenses				
Administrative Labor ²	12	500.00	6,000.00	31,800.00
Customer Fee Collection	0	0	0	0
Insurance & Bonding	12	75.00	900.00	4797.00
Consulting and Legal Fees	1 every 5 years			1200.00
Interest Expenses	0	0	0	0
Property Taxes	1	505.00	505.00	2676.50
Permit Fees	1		750.00	3975.00
Other Miscellaneous Expenses				
	0	0	0	0
TOTAL			30,306.00	161,781.05

The above O & M costs are based on actual historical figures for this facility and are an accurate representation thereof.

Part II – Capital Expenditures

- The wastewater treatment plant (WWTP) must be examined by a Professional Engineer registered in the State of Arkansas to determine all necessary capital expenditures, system upgrades, or significant repairs which may be needed within the following five (5) years. A list of all of these items must be attached to this document.

ENGINEERS STATEMENT:

This facility has no planned repairs, upgrades, capital expenditures or significant repairs required for the next five years.

- A milestone schedule for completion of the capital expenditures, system upgrades, or significant repairs must be attached to this document.

Not Applicable

Nonmunicipal Domestic Sewage Treatment Works Trust Fund Requirement Form

Part III – Financial Plan

A financial plan that demonstrates to the Department's satisfaction the permittee's ability to operate and maintain the WWTP for five (5) years must be prepared. This plan should also include a comprehensive connection summary listing the number of connections and types of connections based on Appendix B of the Arkansas Department of Health Rules and Regulations Pertaining to Onsite Wastewater Systems. The summary should include the number of existing connections and an estimated number of new connections for the next five (5) years. The financial plan must be attached to this document.

See Attachment B

Part IV – Certification

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.

Printed Name of AR Professional Engineer: Charles L. Presley

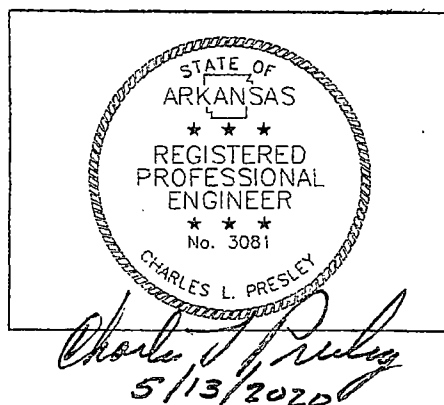
Registration License Number: 3081

Signature of AR Professional Engineer: Charles L. Presley

Date: May 13, 2020 Telephone Number: (479) 738-2979

E-mail: cjpres@mcclaincounty.net Fax Number:

Stamp of AR Professional Engineer



Nonmunicipal Domestic Sewage Treatment Works Trust Fund Requirement Form

Section B – Service Area Information and Certification of Compliance

Part I – Legal Description

A legal description of the service area *must be attached to this document*. This requirement may be satisfied by providing a plat for the area served by the non-municipal domestic sewage treatment works.

See Attached Exhibit A

Part II – Potable Water Sources

A list of the sources of the potable water for the service area *must be attached to this document*.

Benton County Water District #1

Part III – Certification of Compliance

Has the permit applicant complied with all local zoning ordinances, local planning authority regulations, local permitting requirements, and any other applicable local regulations necessary for the construction and operation of this facility?

Yes X No

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.

Printed Name of Permittee Responsible Official: Kathryn Bartlett

Signature of Permittee Responsible Official: _____

Date: 5/12/20

Telephone Number: 479-530-5926

E-mail: kathy@aquatechsys.com Fax Number: None

LINE	BEARING & DISTANCE
L1	S 67°56'00" E 308.76'
L2	S 71°39'10" F 98.42'
L3	S 78°42'42" E 35.87'
L4	S 86°14'14" E 105.72'
L5	S 87°11'18" F 120.00'
L6	N 75°29'25" E 62.10'
L7	N 50°38'32" F 62.10'
L8	N 38°08'01" E 150.53'
L9	N 50°31'35" E 73.38'
L10	N 68°31'12" E 28.11'
L11	N 40°10'00" E 69.68'

FRONT	25.0'
SIDE (Interior)	10.0'
SIDE (Exterior)	25.0'
REAR	25.0'

GENERAL NOTES:

- 1) NO WORK WERE SET AT ALL TOP CORNERS.
- 2) SURVEYING PROVIDED BY INTERVIEWED LAND SURVEYORS. LOOKING ENGINEERING CONFORMANTS ACCEPTS NO RESPONSIBILITY FOR SURVEYING.
- 3) CALCULATIONS TO BE USED FOR DESIGN AND DRAWING.
- 4) ALL DIMENSIONS TO BE IN METERS.
- 5) ALL BEARING ANGLES TO BE IN UNLESS OTHERWISE NOTED.
- 6) DISTANCES TO HAVE 3 DECIMALS OF 25 METERS UNLESS OTHERWISE NOTED.
- 7) ATTENTION IS DRAWN TO ADDITIONAL PLAN SHEETS A SURVEY FOR LOCATION OF BUILDING IS PROVIDED SEPARATELY.
- 8) THERE ARE NO ADEQUATE PHOTOGRAPHS OR EVIDENCE OF RECORDING AS RELATED TO THIS PROPERTY.
- 9) DESIGN - BEING SET BY ARCHITECT.
- 10) ARCHITECTURALLY LIES OUT OF THIS MATTERING RECORD.

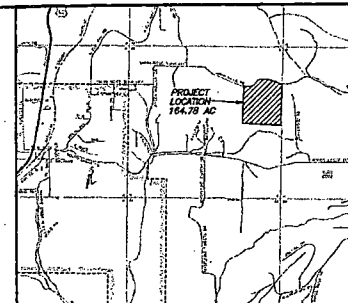
FLOOD CERTIFICATION:

BASED UPON REVIEW OF THE FEDERAL EMERGENCY MANAGEMENT AGENCY (FEMA),
FLOOD INSURANCE RATE MAP (FIRM), PANEL 79 OF 252, CONDUITY-PANEL
NUMBER 630072 0075 Z, EFFECTIVE DATE: SEPTEMBER 18, 1991, THE PROPERTY
DEPicted ON THIS PLAN APPEARS TO BE LOCATED WITHIN ZONE X.

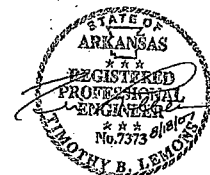
Branda Deshields-Circuit Clerk
Benton County, AR
Book/Pg: 2007/761
Term/Cashier: CASHS/KJACSON
09/07/2007 10:34:44AM
Trans 12837
Total Fees: \$15.00
Book 2007 Page 761
Recorded in the Above
PLAT Book & Page
09/07/2007



REDUCED DRAWING
NOT TO SCALE



VICINITY MAP
1" = 2000'



CERTIFICATE OF ENGINEERING ACHIEVEMENT

I, TIMOTHY E. LEWIS, HEREBY CERTIFY THAT THIS PLAT CORRECTLY REPRESENTS A PLAT MADE BY ME, OR UNDER MY SUPERVISION, AND THAT ENGINEERING REQUIREMENTS OF THE BENTON COUNTY SUBDIVISION RULES AND REGULATIONS HAVE BEEN COMPLIED WITH.

3/18/07

THOMAS D. REYNOLDS, REGISTERED
PROFESSIONAL ENGINEER NO. 7373
ARKANSAS

CERTIFICATE OF SURVIVING ASSURANCE

I, CLOYDE W. SUTTERFIELD, PLS. HEREBY CERTIFY THAT THIS PLAT CORRECTLY REPRESENTS A BOUNDARY SURVEY MADE BY ME AND ALL MONUMENTS SHOWN HEREON ACTUALLY EXIST AND THEIR LOCATION, SIZE, TYPE AND MATERIAL ARE CORRECTLY SHOWN.

8-17-07

Ch. Sprague
CLOVIS W. SPRAGUE, REGISTERED LAND
SURVEYOR, NO. 147
ARKANSAS

CERTIFICATE OF DEATH

WE, THE UNDERSIGNED, OWNERS OF THE REAL ESTATE SHOWN AND DESCRIBED HEREIN, DO HEREBY CERTIFY THAT WE HAVE Laid OFF, PLATTED, AND SUBDIVIDED, AND DO HEREBY LAY OFF, PLAT AND SUBDIVIDE SAID REAL ESTATE IN ACCORDANCE WITH THIS PLAT.

DATE 8/25/10

OWNER Franklin D. Miller
Maxine B. Miller

STATE OF ARKANSAS:

BE IT REMEMBERED THAT ON THIS DAY I CAME BEFORE ME THE UNDERSIGNED,

AND ACTING LIKE
THAT THEY HAD
AND SET FORBID

...SUCH NOTARY PUBLIC, ON THIS July

MY COMMISSION IS

April - 28, 2015

CERTIFICATE OF RECORDING:

THIS DOCUMENT, FILED FOR RECORD _____
IN PLAT BOOK _____, PAGE _____

DATE _____

SIGNED _____
BENTON COUNTY CLERK

CERTIFICATE OF ABERGONAL:

LANDS DEDICATED FOR EASEMENTS, RIGHTS-OF-WAY, AND OTHER PUBLIC USES
AREA ACCEPTED FOR THE PUBLIC BY THE COUNTY OF BENTON. THIS CERTIFICATE
IS NOT AN ACCEPTANCE OF THE RESPONSIBILITY TO MAINTAIN ROADS WHICH ARE
CONSTRUCTED BY RIGHTS-OF-WAY.

8-27-07

Harry D. Black
SIGNED
COUNTY JUDGE

CERTIFICATE OF APPROVAL:

ROADS AND DRAINAGE SYSTEMS IN RIGHTS-OF-WAY DEDICATED TO THE PUBLIC HAVE BEEN INSPECTED AND ARE HEREBY ACCEPTED FOR MAINTENANCE BY THE COUNTY HIGHWAY DEPARTMENT.

8-27-07
DATE OF EXECUTION

Nary D. Black
SIGNED
COUNTY JUDGE

NOTE: NO CHANGES IN THIS PLAT ARE PERMITTED
WITHOUT APPROVAL OF BENTON COUNTY PLANNING COMMISSION

**FINAL PLAT
DEER HAVEN**
PART OF THE E 1/2 OF THE NW 1/4 OF SECTION 15,
T-20-N, R-2-W, GENTON COUNTY, ARKANSAS

UP Development
1000 Captain Good Street
Pao Ridge, AR 72751

Attachment A

FINANCIAL PLAN FOR LONG TERM OPERATIONS AND MAINTENANCE

All homes that have an active water meter in this subdivision are subject to the monthly sewer fee. This is billed monthly and collected by Benton County Water District #1 with their water bill. Benton County Water District #1 issues a check each month to Deer Haven Utility for the collected wastewater fees.

CURRENT AND FORECASTED CONNECTION SUMMARY

YEAR	ESTIMATED CONNECTIONS	CONNECTION TYPE	MONTHLY SEWER RATE	ANNUAL REVENUE
2020	95	Residential	50.00	57,000.00
2021	115	Residential	50.00	69,000.00
2022	128	Residential	50.00	76,800.00
2023	128	Residential	50.00	76,800.00
2024	128	Residential	50.00	76,800.00

BILL OF SALE

KNOW ALL MEN BY THESE PRESENTS that **First Asset Holdings, LLC**, an Arkansas limited liability company (the "***Seller***"), in accordance with the terms of that certain Asset Purchase Agreement, dated effective as of May 8, 2020 (the "***Purchase Agreement***"), by and among Seller and **Deer Haven Utility, LLC**, an Arkansas limited liability company (the "***Purchaser***"), and for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, does grant, bargain, sell, deliver and transfer unto Buyer, effective as of May 8, 2020, all of Seller's right, title and interest in and to the Assets (as defined in the Purchase Agreement), other than the Excluded Assets (as defined in the Purchase Agreement).

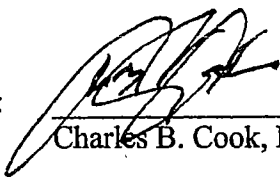
This Bill of Sale is being made and given pursuant to the Purchase Agreement. All of the covenants, indemnifications, representations and warranties made by Seller in the Purchase Agreement, but subject to the same terms, conditions, limitations and remedies therein pertaining to the Assets, are hereby incorporated into this Bill of Sale and made a part hereof.

IN WITNESS WHEREOF, Seller has made and executed this Bill of Sale this 8th day of May, 2020.

SELLER:

First Asset Holdings, LLC,
an Arkansas limited liability company

By: _____



Charles B. Cook, Manager

Personal Property

All personal property related to or utilized for the operation of a decentralized wastewater treatment system located at 15046 Smith Ridge Road, Garfield, Arkansas (the "**Facility**") that treats and disburses wastewater for residential homes located in Deer Haven Subdivision, Benton County, Arkansas, including all sewer rights, sewer storage tanks, sewer transmission lines, pumps, motors, generators, sewer treatment equipment, tools, valves, controls, and meters, and all cash, bank accounts, customer deposits, accounts receivable, leases, permits, manufacturer warranties, licenses or franchises, and which also includes:

Lift Station:

1. Electrical Building / Control Room
2. Automatic transfer panel for backup generator
3. Three-phase power converter which includes two banks of capacitors and 10hp motor
4. Duplex 3 phase control panel for pumps
5. Two (2) Flowserve three-phase submersible pumps in wet well
6. Pump lifting hoist with base
7. Spare Flowserve 3 phase submersible pump in electric room
8. Backup power generator
9. Propane gas tank
10. Privacy fence around lift station
11. All discharge pipe(s), valves, and check valves

Treatment Plant:

1. Control room which includes metal shelves
2. Automatic transfer switch for electrical power
3. Backup power generator
4. Propane gas tank
5. Chain link fence around treatment plant and tanks
6. Drip equipment
7. EQ control panel

8. Treatment plant(s) control panel
9. Drip control panel
10. Two (2) EQ pumps with rails and lifting chains
11. Two (2) Bioclere treatment plants
12. All tanks as already installed to include: primary settling, EQ, final settling, and drip pump tanks
13. All flow meters as installed

This bill of sale is not intended to convey any rights, obligations or ownership of the personal property used for the operation of the gravity collection sewer lines located on private property, common property or utility easements within Deer Haven Subdivision - and any rights, obligations or ownership relating to the gravity collection sewer lines in Deer Haven Subdivision are specifically disclaimed by Seller and Purchaser.

QUITCLAIM DEED

KNOW ALL MEN BY THESE PRESENTS:

THAT **First Asset Holdings, LLC**, herein called Grantor, a limited liability company organized under and by virtue of the State of Arkansas, for and in consideration of the sum of Ten Dollars (\$10.00) and other good and valuable consideration in hand paid by Grantees, the receipt of which is hereby acknowledged, do hereby grant, bargain, sell, convey and quitclaim unto **Deer Haven Utility, LLC**, an **Arkansas Limited Liability Company**, hereinafter called Grantees, and unto its successors and assigns forever, the following lands lying in Benton County, Arkansas, to-wit:

See attached Exhibit A for legal description.

SUBJECT to existing easements, mineral reservations, conveyances and/or leases, and covenants and restrictions of record, if any.

TO HAVE AND TO HOLD the same unto the said Grantees, and unto its successors and assigns forever, together with all improvements thereon and all rights, privileges and appurtenances thereunto belonging.

Prepared under the supervision of:

Caitlin J. Murphy
624 W Walnut St.
Rogers, AR 72756
479-631-8274

I certify under penalty of false swearing that documentary stamps or a documentary symbol in the legally correct amount has been placed on this instrument. 20-3972


GRANTEE/AGENT

MAIL TAX STATEMENTS TO:

8533 Apple Glen
Rogers, AR 72756 - 3003

WITNESS our hands and seals this 8th day of May, 2020..

First Asset Holdings, LLC, an Arkansas Limited Liability Company

By: [Signature]
Charles B. Cook, Manager

ACKNOWLEDGMENT

State of Arkansas)
County of Benton)ss

ON THIS DAY before the undersigned, a Notary Public, duly qualified and acting, within and for the said County and State aforesaid, personally appeared **Charles B. Cook, Manager**, who stated that he is the **Manager of First Asset Holdings, LLC**, and that he is duly authorized and had executed and delivered said foregoing instrument for the consideration, uses, and purposes therein mentioned and set forth..

IN WITNESS WHEREOF, I have hereunto set my hand and official seal this 8th day of May, 2020.

My commission expires: 11/8/2021

[Signature]
NOTARY PUBLIC

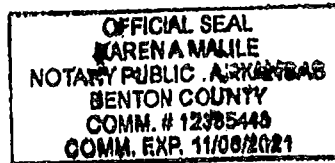


EXHIBIT A

TRACT 1: PART OF THE SOUTHEAST QUARTER OF THE SOUTHEAST QUARTER OF SECTION 10, TOWNSHIP 20 NORTH, RANGE 29 WEST, BENTON COUNTY, ARKANSAS, BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS: COMMENCING AT AN EXISTING REBAR MARKING THE NORTHEAST CORNER OF THE SOUTHEAST QUARTER OF THE SOUTHEAST QUARTER; THENCE ALONG THE EAST LINE OF SAID FORTY, SOUTH 02 DEGREES 30 MINUTES 04 SECONDS WEST, 522.04 FEET; THENCE LEAVING SAID EAST LINE, WEST 480.49 FEET TO A SET REBAR WITH CAP AND THE POINT OF BEGINNING; THENCE SOUTH 59 DEGREES 16 MINUTES 03 SECONDS WEST 81.34 FEET TO A SET REBAR WITH CAP; THENCE SOUTH 48 DEGREES 17 MINUTES 26 SECONDS WEST, 291.10 FEET TO A SET REBAR WITH CAP; THENCE NORTH 30 DEGREES 47 MINUTES 24 SECONDS WEST, 120.86 FEET TO A SET REBAR WITH CAP; THENCE NORTH 40 DEGREES 03 MINUTES 57 SECONDS WEST, 139.58 FEET TO A SET REBAR WITH CAP; THENCE NORTH 49 DEGREES 59 MINUTES 23 SECONDS WEST, 268.15 FEET TO A SET REBAR WITH CAP; THENCE NORTH 40 DEGREES 28 MINUTES 03 SECONDS EAST, 200.38 FEET TO A SET REBAR WITH CAP; THENCE NORTH 53 DEGREES 39 MINUTES 31 SECONDS EAST 232.42 FEET TO A SET REBAR WITH CAP; THENCE SOUTH 41 DEGREES 49 MINUTES 48 SECONDS EAST, 404.14 FEET TO A SET REBAR WITH CAP; THENCE SOUTH 22 DEGREES 49 MINUTES 26 SECONDS EAST, 148.55 FEET TO THE POINT OF BEGINNING, CONTAINING 4.98 ACRES AND SUBJECT TO ROAD RIGHTS OF WAY AND ANY EASEMENTS OF RECORD.

ALSO

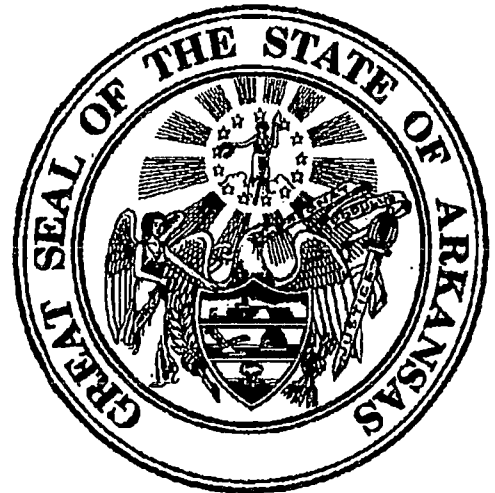
TRACT 2: PART OF THE SOUTHEAST QUARTER OF THE SOUTHEAST QUARTER OF SECTION 10, TOWNSHIP 20 NORTH, RANGE 29 WEST, BENTON COUNTY, ARKANSAS, BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS: COMMENCING AT AN EXISTING REBAR MARKING THE NORTHEAST CORNER OF THE SOUTHEAST QUARTER OF THE SOUTHEAST QUARTER; THENCE ALONG THE EAST LINE OF SAID FORTY, SOUTH 02 DEGREES 30 MINUTES 04 SECONDS WEST, 684.54 FEET; THENCE LEAVING SAID EAST LINE, WEST 391.27 FEET TO A SET REBAR WITH CAP AND THE POINT OF BEGINNING; THENCE SOUTH 25 DEGREES 48 MINUTES 57 SECONDS EAST, 260.00 FEET TO A SET REBAR WITH CAP; THENCE SOUTH 64 DEGREES 11 MINUTES 03 SECONDS WEST, 260.00 FEET TO A SET REBAR WITH CAP; THENCE NORTH 25 DEGREES 48 MINUTES 57 SECONDS WEST, 260.00 FEET TO A SET REBAR WITH CAP; THENCE NORTH 64 DEGREES 11 MINUTES 03 SECONDS EAST, 260.00 FEET TO THE POINT OF BEGINNING, CONTAINING 1.55 ACRES AND SUBJECT TO ANY EASEMENTS OF RECORD.

ALSO

ANY RIGHTS OR INTERESTS IN AND TO EASEMENTS AS SHOWN ON SURVEY FOR FIRST ASSET HOLDINGS LLC DONE BY GENE E. BUESCHER R.L.S. #1181, DATED MAY 20, 2016, REFERENCING STATE DOC NOS. 20090218003, 200807090047, AND ALSO ANY EASEMENTS AS SHOWN ON SURVEYS FILED WITH THE ARKANSAS DIVISION OF LAND SURVEYS.

LESS AND EXCEPT

OIL, GAS AND OTHER MINERALS AND MINERAL RIGHTS RESERVED ON DEED 2009-62234



**CERTIFICATE OF RECORD
STATE OF ARKANSAS, COUNTY OF BENTON**

I hereby certify that this instrument was
Filed and Recorded in the Official Records
in Doc Num L202026438

05/11/2020 11:09:07 AM

Brenda DeShields
BENTON COUNTY Circuit Clerk & Recorder

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY DISCLOSURE STATEMENT

Instructions for the Completion of this Document:

- A. Individuals, firms or other legal entities with no changes to an ADEQ Disclosure Statement, complete items 1 through 5 and 18.
- B. Individuals who never submitted an ADEQ Disclosure Statement, complete items 1 through 4, 6, 7, and 16 through 18.
- C. Firms or other legal entities who never submitted an ADEQ Disclosure Statement, complete 1 through 4, and 6 through 18.

If Not Submitting by ePortal, Mail Original to:

ADEQ

DISCLOSURE STATEMENT

[List Proper Division(s)]

5301 Northshore Drive

North Little Rock, AR 72118-5317

1. APPLICANT: (Full Name)

Deer Haven Utility LLC

2. MAILING ADDRESS: (Number and Street, P.O.Box Or Rural Route)

PO Box 9299

3. CITY, STATE, AND ZIPCODE:

Fayetteville AR 72704

4a. Applicant Type:

☐ Individual ☒ Corporate or Other Entity

4b. Reason for Submission:

☒ Permit ☐ License ☐ Certification ☐ Operational Authority

☐ New Application ☒ Modification ☐ Renewal Application (If no changes from previous disclosure statement, complete number 5 and 18.)

4c. Programs:

☐ Air ☒ Water ☐ Hazardous Waste ☐ Regulated Storage Tank ☐ Mining ☐ Solid Waste ☐ Used Tire Program

5. Declaration of No Changes:

The violation history, experience and credentials, involvement in current or pending environmental lawsuits, civil and criminal, have not changed since the last Disclosure Statement that was filed with ADEQ on _____

6. Describe the experience and credentials of the Applicant, including the receipt of any past or present permits, licenses, certifications or operational authorization relating to environmental regulation. (Attach additional pages, if necessary.)

Currently operates this facility for existing permittee and has so for permit # 4908-WR, 4908-WR-1 and 4908-WR-3

7. List and explain all civil or criminal legal actions by government agencies involving environmental protection laws or regulations against the Applicant * in the last ten (10) years including:

1. Administrative enforcement actions resulting in the imposition of sanctions;
2. Permit or license revocations or denials issued by any state or federal authority;
3. Actions that have resulted in a finding or a settlement of a violation; and
4. Pending actions.

(Attach additional pages, if necessary.)

None

* Firms or other legal entities shall also include this information for all persons and legal entities identified in sections 8-16 of this Disclosure Statement.

8. List all officers of the Applicant. (add additional pages, if necessary.)

NAME: Thomas Bartlett TITLE: President

STREET: 8533 Apple Gl

CITY, STATE, ZIP: Rogers AR 72756

NAME: Kathryn Bartlett TITLE: V President

STREET: 8533 Apple Glen

CITY, STATE, ZIP: Rogers AR 72756

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

9. List all directors of the Applicant. (Add additional pages, if necessary.)

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

10. List all partners of the Applicant. (Add additional pages, if necessary.)

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

11. List all persons employed by the Applicant in a supervisory capacity or with authority over operations of the facility subject to this application.

NAME: Kenneth Gregory TITLE: Level III Plant Operator (Employee)

STREET: PO Box 9299

CITY, STATE, ZIP: Fayetteville AR 72756

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

12. List all persons or legal entities, who own or control more than five percent (5%) of the Applicant's debt or equity.

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

13. List all legal entities, in which the Applicant holds a debt or equity interest of more than five percent (5%).

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

14. List any parent company of the Applicant. Describe the parent company's ongoing organizational relationship with the Applicant.

NAME: NWA Utility Servixes, Inc

STREET: PO Box 9299

CITY, STATE, ZIP: Fayetteville AR 72704

Organizational Relationship:

Member of LLC

15. List any subsidiary of the Applicant. Describe the subsidiary's ongoing organizational relationship with the Applicant.

NAME: _____

STREET: _____

CITY, STATE, ZIP: _____

Organizational Relationship:

16. List any person who is not now in compliance or has a history of noncompliance with the environmental law or regulations of this state or any other jurisdiction and who through relationship by blood or marriage or through any other relationship could be reasonably expected to significantly influence the Applicant in a manner which could adversely affect the environment.

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

17. List all federal environmental agencies and any other environmental agencies outside this state that have or have had regulatory responsibility over the Applicant.

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18. VERIFICATION AND ACKNOWLEDGEMENT

The Applicant agrees to provide any other information the director of the Arkansas Department of Environmental Quality may require at any time to comply with the provisions of the Disclosure Law and any regulations promulgated thereto. The Applicant further agrees to provide the Arkansas Department of Environmental Quality with any changes, modifications, deletions, additions or amendments to any part of this Disclosure Statement as they occur by filing an amended Disclosure Statement.

DELIBERATE FALSIFICATION OR OMISSION OF RELEVANT INFORMATION FROM DISCLOSURE STATEMENTS SHALL BE GROUNDS FOR CIVIL OR CRIMINAL ENFORCEMENT ACTION OR ADMINISTRATIVE DENIAL OF A PERMIT, LICENSE, CERTIFICATION OR OPERATIONAL AUTHORIZATION.

COMPLETE THIS SECTION ONLY IF SUBMITTING OTHER THAN BY EPORTAL:

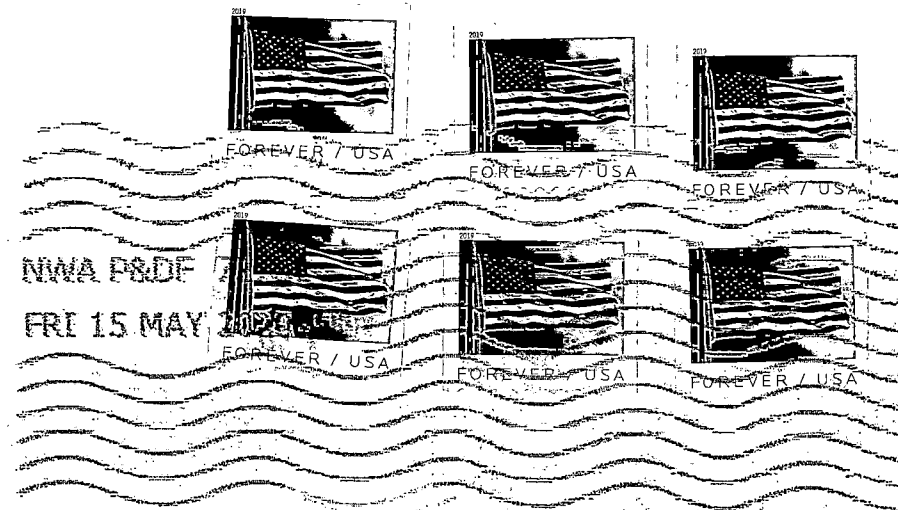
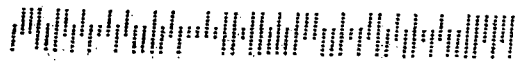
I, Kathryn Bartlett, certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or 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 fines and imprisonment for knowing violation.

APPLICANT
SIGNATURE:



TITLE: Vice President

DATE: May 15, 2020



NWA Utility Services Inc
PO Box 9299
Fayetteville, AR 72703

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