ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY

MONITORING REPORT FOR DECENTRALIZED WASTEWATER TREATMENT FACILITIES VIA DRIP IRRIGATION MONTHLY MONITORING REPORT

PERMITTEE NAME
Joyce Street Cottages Propert Owners Assoc

PERMITTEE ADDRESS
4181 Rolling Meadows
Fayetteville, AR

	FACILIT	YNAME	(IF D	IFFERENT)	
Joyce S	Street Cott	ages Pro	perty	Owners Ass	sociation

FACILITY ADDRESS	-	-	` _	
3578 E Joyce Blvd				
Fayetteville AR 72703				

PERMIT	NO.
4957-W	R-2

AFIN NO. 72-01805

	WASTEWATER EFFLUENT MONITORING PERIOD									
	MM/DD/YYYY	MM/DD/YYYY								
FROM	6/1/2018	6/30/2018								

		TREATED WASTEW	ATER EFFLUEN	FSAMPLING	j				
PARAMET	ER	PERMIT REQUIREMENT	SAMPLE MEAS	UREMENT	UNITS		QUENCY OF NALYSIS	SAMPLE TYPE	
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE		****** 5.8			MG/L	1	ONCE/ MONTH	GRAB	
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE		15 <2		MG/L	1	ONCE/ MONTH	GRAB		
PH EFFLUENT GROSS VALUE		6 to 9	6 to 9 7.1		S.U.	ONCE/ MONTH		GRAB	
SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE		15	6.6		MG/L	1	ONCE/ MONTH	GRAB	
SOLIDS, % TOTAL		****	0.03		MG/L	ONCE/ MONTH		GRAB	
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE		3,000	< 10		N/100 ML	1	ONCE/ MONTH	GRAB	
FLOW, THRU CONDUIT OR TRE EFFLUENT GROSS VALUE	ATMENT UNIT	****	MONTHLY TOTAL 79,724	DAILY MAX 3,305	GPD	ONCE/ MONTH		TOTAL FLOW	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	1	LAW THAT I HAVE PERSONALLY EX	111		1	TE	ELEPHONE	DATE	
	INDIVIDUALS IMMEDIATELY RES	FTED HEREIN; AND BASED ON MY INC SPONSIBLE FOR OBTAINING THE I MATION IS TRUE, ACCURATE, AND C	479 5305926		7/3/2018				
TYPED OF PRINTED	AWARE THAT THERE ARE SI	ELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM SIGNATURE OF PRINCIPAL WARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE FORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT CODE NUMBER							

COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)

June 2018 JOYCE STREET COTTAGES LOADING RATES 3,305 Gal Max day							
Zone Identification	GPD/sq 2						
Zone 1	473						
Zone 2	588						
Zone 3	621						
Zone 4	631						
Zone 5	720						
Zone 6	254						

Environmental Services Company, Inc.

Sample Date : 06/20/18

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: 1806020167

Customer Name : JOYCE STREET UTILITY LLC

Customer/Permit No. : 1827 / 4957-WR-2 001

Report Date : 06/29/18

Sample From : EFFLUENT

Sample Time: 0938

Sample Type : GRAB JOYCE STREET

Collected By: JTR Delivery By : JTR

Work Order :

Purchase Order :

	Quality I	<u>Assurance</u>			
Analysis				Precision	Accuracy
Date Time By	Parameter	Result Notes Q	uantity Method	- % RPD	% Recovery
06/20 0944 JCB	На	7.1 S.U.	SM 2000 450	0-H+ B 0.00	N/A *
06/21 0935 TSB	Phosphorous, Total (as P)	5.8 mg/L	EPA 365.3	1.45	100.0 *
06/26 1330 TSB	Solids, Total Suspended	6.6 mg/L	SM 1997 254	0 D 0.00	N/A *
06/20 1617 VLP	Coliform, Fecal	< 10 /100ml	SM 9222 D 1	997 66.67	N/A *
06/20 1400 TSB	BOD, Carbonaceous	< 2.0 mg/L	SM 2001 521	0 B 14.30	101.8 *
06/28 0845 TSB	Solids, % Total by mass	0.030 %	SM 1997 254	0 G 3.28	N/A
,	Sample Collection/Travel	1 each		}	

* OA 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.

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Northwest Arkansas Branch 1107 Century Avenue Springdale, AR 72762 Tel. (479) 750-1170 Fax (479) 750-1172

Control Number: 1806020172

Customer Name : WATERFORD UTILITY, LLC Customer/Permit No.: 1886 / 4815-WR-4

Report Date : 06/28/18

Sample Date : 06/20/18

Sample Time : 0831

Sample Type : GRAB WATERFORD

Sample From : DOSE TANK EFFLUENT

Collected By: NTR Delivery By : NTR

Work Order : Purchase Order :

		Quality A	Assurance				
Analysis						Precision	Accuracy
Date Time By	Parameter	Result	Notes	Quantity	Method	_ % RPD	% Recovery
06/20 0831 JCB	рН	7.7 ន.ប	•		SM 2000 4500-H+ B	0.00	N/A *
06/21 0935 TSB	Phosphorous, Total (as P)	8.7 mg/	L		EPA 365.3	1.45	100.0 *
06/26 1330 TSB	Solids, Total Suspended	5.7 mg/	L		SM 1997 2540 D	0.00	N/A *
06/20 1617 VLP	Coliform, Fecal	1019 /10	Oml		SM 9222 D 1997	66.67	N/A *
06/20 1400 TSB	BOD, Carbonaceous	< 2.0 mg/	L		SM 2001 5210 B	14.30	101.8 *
06/20 0900 NTR	Sample Collection/Travel	1 eac	h	•	į		

* 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.

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

1 1101.10. 47 0-7 00-1 17 0	Client Information			Project Information						Requested Parameters								
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Company Name:	Joyce St. Utility LL			Permit/Project #:								ন					.	
Address:	1849 Trillium Lane	<u></u>		Purchase	Order#:								Solids(82)					
No. 41 - 14 - 14 - 14 - 14 - 14 - 14 - 14	Fayetteville Ar 72704							_					흥					
Telephone:	(479)936-0333	(Cell)		Sampler N	lame(s):	Ne	ed T	Ruers	on			. !	8 %					
Telephone:			1	. ,			, /											
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FOO Oliont Number	1827		 	and Olyman	iui e(s).		Ug I	y				_	<u> </u>	E				
ESC Client Number:		1				T					$\overline{\sim}$	Phos(25)	CBOD(70),TSS(28)	Coliform				
Sample Id	dentification	ļ	Sample	Collection				Containers	T		(23)	so:	[[}	
Identification	ESC Control #	Date	Time	Туре	Matrix	Type	Volume	Preserva	ative	#)Hd	五	끙	п.				
EFFLUENT	1806020167	6-26-18	0938	GRAB	Water	teflon	150 ml	none		1	X							
EFFLUENT	Y 1		\	GRAB	Water	Plastic	8 oz	H₂SO₄,pH<	:2	1		X						
EFFLUENT	-			GRAB	Water	Plastic	1/2 gal	none/ice		1			х					
EFFLUENT	-]		1	GRAB	Water	Whirlpak	125 ml	Na ₂ S ₂ O ₃		1				х				
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5-12-1-1-15-15	(-1-4N)	Date	Time	Descripted Day (Ole	gnature and Printed	(Name)		D-1-	777		Used'			<u> </u>	Intac	.17		_
Relinquished By: (Signature and Pr	rinted Name)	Date	i ine	Received by. (5%	Augrale sua Luuteo	i Name)		Date	Tim	ı	Regul	around Ilar	 	l	Spec	cial	\neg	- 1
Relinquished By: (Signature and Pr	rinted Name	Date	Time	Received for Lab	By: (Signature and	Printed Name) /	6 20/18	Tim	9	Were	samp	les pr	òperly	prese	rved:		
		Horrow	by w	10hn 12/			105			Yes	X			No		_		
Comments: 0	· · · · · · · · · · · · · · · · · · ·			V	FLOW D/ Analyst:		Field Test pH:	Time 0944	Analys	¥.	Result		Résult Uni		Sh.		\neg	
·		•			Time:		Temp.:	UTT	/\/	L X -			_7.	2	°C	٦u	°F_	_
		,			Reading:		DO;											
					Units:		Debris:		L									
	Cool all samples to 6 degrees C.						Chlorinated	l? Yes N	0		This	Doc	ume	nt is	Page	' <u>「</u>	øf	