

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

FACILITY NAME (IF DIFFERENT)
 Joyce Street Cottages Property Owners Association

PERMIT NO.
 4957-WR-2

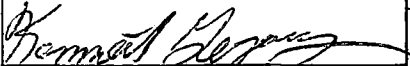
PERMITTEE ADDRESS
 4181 Rolling Meadows
 Fayetteville, AR

FACILITY ADDRESS
 3578 E Joyce Blvd
 Fayetteville AR 72703

AFIN NO.
 72-01805

WASTEWATER EFFLUENT MONITORING PERIOD

MM/DD/YYYY	MM/DD/YYYY
FROM 3/1/2018	3/31/2018

TREATED WASTEWATER EFFLUENT SAMPLING								
PARAMETER	PERMIT REQUIREMENT	SAMPLE MEASUREMENT	UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE			
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE	*****	4.4	MG/L	ONCE/MONTH	GRAB			
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE	15	< 2.6	MG/L	ONCE/MONTH	GRAB			
PH EFFLUENT GROSS VALUE	6 to 9	7.2	S.U.	ONCE/MONTH	GRAB			
SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE	15	3.3	MG/L	ONCE/MONTH	GRAB			
SOLIDS, % TOTAL	*****	0.047	MG/L	ONCE/MONTH	GRAB			
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE	3,000	< 2	N/100 ML	ONCE/MONTH	GRAB			
FLOW, THRU CONDUIT OR TREATMENT UNIT EFFLUENT GROSS VALUE	*****	MONTHLY TOTAL	DAILY MAX	GPD	ONCE/MONTH			
		163,228	8,792			TOTAL FLOW		
NAME/TITLE 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.			TELEPHONE		DATE		
Kathryn Bartlett				 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		479	5305926	4/7/2018
TYPED OR PRINTED				AREA CODE	NUMBER	MM/DD/YYYY		
COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)								

March 2018 JOYCE STREET COTTAGES LOADING RATES 8,792 Max Day

Zone Identification	GPD/sq 2
Zone 1	1,257
Zone 2	1,565
Zone 3	1,653
Zone 4	1,679
Zone 5	1,917
Zone 6	685

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: 1803020190
 Customer Name : JOYCE STREET UTILITY LLC
 Customer/Permit No. : 1827 / 4957-WR-2 001
 Report Date : 03/27/18

Sample Date : 03/21/18
 Sample Time : 1000
 Sample Type : GRAB
 Sample From : EFFLUENT

Collected By: JCB
 Delivery By : JCB
 Work Order :
 Purchase Order :

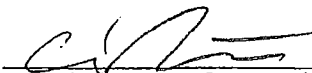
Laboratory Analysis

Analysis						Quality Assurance			
Date	Time	By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Accuracy % Recovery
03/21	1000	JCB	pH	7.2	S.U.		SM 2000 4500-H+ B	0.00	N/A
03/22	0800	TSB	Phosphorous, Total (as P)	4.4	mg/L		EPA 365.3	0.00	110.5 *
03/27	0930	JCB	Solids, Total Suspended	3.3	mg/L		SM 1997 2540 D	9.03	N/A *
03/21	1440	AEU	Coliform, Fecal	< 2	/100ml		SM 9222 D 1997	0.00	N/A *
03/21	1400	TSB	BOD, Carbonaceous	< 2.6	mg/L		SM 2001 5210 B	5.15	114.0 *
03/26	0935	JCB	Solids, % Total by mass	0.047	%		SM 1997 2540 G	1.69	N/A *
03/21	1000	JCB	Sample Collection/Travel	1	each				

* QA data shown is from a different sample or standard on the same date.

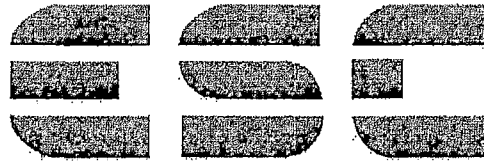
All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of 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: Joyce St. Utility LLC						Permit/Project #:					pH(23)	Phos(25)	CBOD(70), TSS(28) % Solids(82)	F. Coliform (43)							
Address: 1849 Trillium Lane						Purchase Order #:															
Fayetteville Ar 72704						Sampler Name(s): <i>John Byrd</i>															
Telephone: (479)936-0333 (Cell)						and Signature(s): <i>John Byrd</i>															
ESC Client Number: 1827																					
Sample Identification		Sample Collection				Sample Containers															
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#												
EFFLUENT	1803020190	3/21/18	1000	GRAB	Water	teflon	150 ml	none	1	x											
EFFLUENT				GRAB	Water	Plastic	8 oz	H ₂ SO ₄ , pH<2	1		x										
EFFLUENT				GRAB	Water	Plastic	1 qt	none/ice	1			x									
EFFLUENT				GRAB	Water	Whirlpak	125 ml	Na ₂ S ₂ O ₃	1				x								
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Custody Seals:		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:		Yes <input checked="" type="checkbox"/>		No <input type="checkbox"/>									
Comments:				FLOW DATA		Field Test		Time	Analyst	Result	Result	Units									
Sample(s) Received On ICE				Analyst:		pH:		1000	SCB	7.2	7.2	°F									
Temp: 04 °C				Time:		Temp.:				13.1	13.1										
				Reading:		DO:															
				Units:		Debris:															
Cool all samples to 6 degrees C.										Chlorinated? Yes No		This Document is Page 1 of 1									