ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY

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

3	PERMITTEE NAME
Joyce Stre	eet Cottages Propert Owners Assoc

PERMITTEE ADDRESS
4181 Rolling Meadows
Favetteville, AR

FACILITY NAME (IF DIFFERENT)

Joyce Street Cottages Property Owners Association

FACILITY ADDRESS
3578 E Joyce Blvd
Favetteville AR 72703

PERMIT NO. 4957-WR-2

AFIN NO. 72-01805

	WASTEWATER EFFLUENT MONITORING PERIOD								
	MM/DD/YYYY	MM/DD/YYY							
FROM	5/1/2017	5/31/2017							

		TREATED WASTEV	VATER EFFLUEN	T SAMPLING	i					
PARAMET	rer	PERMIT REQUIREMENT	SAMPLE MEAS	SUREMENT	UNITS		UENCY OF NALYSIS	SAMPLE TYPE		
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE		****	2.3		MG/L	l	ONCE/ MONTH	GRAB		
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE		15	15 < 2		MG/L	ONCE/ MONTH		GRAB		
PH EFFLUENT GROSS VALUE		6 to 9	7.4		S.U.	ONCE/ MONTH		GRAB		
SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE		15	3.1		MG/L	ONCE/ MONTH		GRAB		
SOLIDS, % TOTAL		*****	0.03		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 269,479	DAILY MAX 9,762	GPD	ONCE/ MONTH		TOTAL FLOW		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF I	LAW THAT I HAVE PERSONALLY EX	AMINED AND AM			TELEPHONE		DATE		
Kathryn Bartlett	INDIVIDUALS IMMEDIATELY RES	TED HEREIN; AND BASED ON MY IN SPONSIBLE FOR OBTAINING THE MATION IS TRUE, ACCURATE, AND (F PŘÍNCIPÁL	479 5305926		6/10/2017				
TYPED OR PRINTED	INFORMATION, INCLUDING THE PO	SIGNIFICANT PENALTIES FOR SUB DSSIBILITY OF FINE AND IMPRISONME	AREA CODE	NUMBER	MM/DD/YYYY					

COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)

May 2017 JOYCE STREET COTTAGES LC	DADING RATES 9,762 Daily Max
Zone Identification	GPD/sq 2
Zone 1	1,356
Zone 2	1,738
Zone 3	1,835
Zone 4	1,865
Zone 5	2,128
Zone 6	752

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: 1705020175

Customer Name : JOYCE STREET UTILITY LLC
Customer/Permit No. : 1827 / 4957-WR-2 001

Report Date : 05/23/17

Sample Date : 05/17/17

Sample Time : 1012 Sample Type : GRAB

Sample From : EFFLUENT

Collected By: AEU Delivery By : AEU

Work Order : Purchase Order :

	Quality <i>I</i>	<u>Assurance</u>				
Analysis	•	Laboratory Analysis			Precision	Accuracy
Date Time By	Parameter	Result Notes	Quantity	Method	<u> </u> % RPD	% Recovery
05/17 1015 AEU	Н	7.4 S.U.		SM 2000 4500-H+ B	0.00	N/A *
05/18 1000 TSB	Phosphorous, Total (as P)	2.3 mg/L		EPA 365.3	0.00	103.2 *
05/22 1330 JCB	Solids, Total Suspended	3.1 mg/L		SM 1997 2540 D	5.13	N/A *
05/17 1540 RHB	Coliform, Fecal	< 2 /100ml		SM 9222 D 1997	0.00	N/A *
05/17 1400 TSB	BOD, Carbonaceous	< 2.0 mg/L		SM 2001 5210 B	11.54	108.1 *
05/18 1410 AEU	Solids, % Total by mass	0.030 ₺		SM 1997 2540 G	0.53	N/A *
05/17 1015 AEU	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

CHAIN OF CUSTODY

Phone: 479-750-1170	Fax: 4/9-750-11/2		<u> </u>	174114												, 	
Client Information				Project Information					ᆚ	Re	ques	sted	Para	ame	eters	-	
Company Name;	Joyce St. Utility LL0	.C Permit/Pro			oject #:					ļ	\ \alpha						
Address:	1849 Trillium Lane			Purchase	Order #:					_		Solids(82)					
·	Fayetteville Ar 72704					Λ	1 -/	1/1 /a		1/							
Telephone:	(479)936-0333				ampler Name(s): Ambly (Molling)					4		%		,			
Telephone:												(28)	<u></u>		İ		
			and Signature(s):								ISS	1 (43)					
ESC Client Number:	1827										્રિ	CBOD(70),TSS(28)	Coliform			ŀ	
Sample Ide	ntification		Sample	Collection	Sample Containers			733	Phos(25)) ()	8						
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preservat	ive #	ij	Ĺ	Č	LL.			-11.51	
EFFLUENT	1905020195	5/17/17	1012	GRAB	Water	teflon	150 ml	none		×							
EFFLUENT	1			GRAB	Water	Plastic	8 oz	H ₂ SO ₄ ,pH<2	2 .		х						
EFFLUENT				GRAB	Water	Plastic	1 qt	none/ice				х					
EFFLUENT	1		1	GRAB	Water	Whirlpak	125 ml	Na ₂ S ₂ O ₃					х				
											T						
				1							T						
						Ì											
													Γ				
						İ											
2 . (2					1											
Relinguished By: (Stanature and Print	ed Name)	5/17/17	1050	Received By: (Signature and Printed Name) Date Time					Custody Seals: Used? // Intact?								
Relinquished By: (Signature and Printe	<i>1607 UNSULTOOS</i> ed Name)	Date	1050 Time				rnarour				-						
				1	5. T. (0)	n = 10 N = 10		Date	Time		gular ere sam	nples p		Spec			
Relinquished By: (Signature and Printe	ed Name)	Date	Time	Received for Lab	CYS AMO	n torx	15		050		Yes	X	1		No		
Comments:				FLOW D	ATA	Field Test		Analyst		sult	Res			Units		-	
				Analyst:		pH:	1015	HEU 7.		<u>ч</u> _	7.4	_	PC)		°F		
					Time:		Temp.: DO:	1015	_1	-la	,4	197	<u>∵ (</u>	5			
					Reading: Units:		Debris:			+		+		 			
Cool all complete to 6 degrees C				· , · · · · · · · · · ·	OTALO.			? Yes No)	TF	is Do	cume	ent is	Page	e <i>l</i>	of	ī
Cool all samples to 6 degrees C.							-1110111100							٠٠٠.			أسبسية

//FORMS/CHAIN.XLS G:\WP5