#### 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

FACILITY NAME (IF DIFFERENT)

Joyce Street Cottages Property Owners Association

FACILITY ADDRESS
3578 E Joyce Blvd
Fayetteville AR 72703

WASTEWATER EFFLUENT MONITORING PERIOD

MM/DD/YYYY

11/30/2017

MM/DD/YYYY

11/1/2017

FROM

PERMIT NO. 4957-WR-2

**AFIN NO.** 72-01805

	TREATED WASTEV	VATER EFFLUENT	SAMPLING	i .		,		
PARAMETER	PERMIT REQUIREMENT	SAMPLE MEASU	UNITS		QUENCY OF NALYSIS	SAMPLE TYPE		
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE	*****	4.3	MG/L	1	ONCE/ MONTH	GRAB		
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE	15 < 2 MG/L		MG/L	ONCE/ MONTH		GRAB		
PH EFFLUENT GROSS VALUE	6 to 9	7.3 S.U.		S.U.	1	ONCE/ MONTH	GRAB	
SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE	15	4		MG/L	ONCE/ MONTH		GRAB	
SOLIDS, % TOTAL	****	0,025		MG/L	1	ONCE/ MONTH	GRAB	
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE	3,000	< 4		N/100 ML	1	ONCE/ MONTH	GRAB	
FLOW, THRU CONDUIT OR TREATMENT UNIT EFFLUENT GROSS VALUE	****	MONTHLY TOTAL 101,085	DAILY MAX 3,823	GPD	ONCE/ MONTH		TOTAL FLOW	
TO WILL THIRD THE EXCEPTION OF THE EXCEP	LAW THAT I HAVE PERSONALLY EX		1	TELEPHONE		DATE		
INDIVIDUALS IMMEDIATELY RE	ITTED HEREIN; AND BASED ON MY INC ESPONSIBLE FOR OBTAINING THE RMATION IS TRUE, ACCURATE, AND (	INFORMATION, I	mell 60 SIGNATURE OF	PRINCIPAL	479	5305926	12/5/2017	
AWARE THAT THERE ARE	AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.  AUTHORIZED AGENT							

Nov 2017 JOYCE STREET COTTAGES LOADING RATES 3,823 max day					
Zone Identification	Zone Identification GPD/sq 2				
Zone 1	547				
Zone 2	680				
Zone 3	719				
Zone 4	730				
Zone 5	833				
Zone 6	294				

#### 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: 1711020149

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

Report Date : 11/20/17

Sample Date : 11/15/17 Sample Time: 0956

Sample Type : GRAB Sample From : EFFLUENT Collected By: AEU Delivery By : AEU

Work Order : Purchase Order :

	Quality Assurance						
Analysis						Precision	Accuracy
Date Time By	<u>Parameter</u>	Result	Notes _	Quantity	<u>Method</u>	% RPD	% Recovery
11/15 1002 AEU	рН	7.3	S.U.		SM 2000 4500-H+ B	0.00	N/A *
11/16 1045 TSB	Phosphorous, Total (as P)	4.3	mg/L		EPA 365.3	0.00	103.6 *
11/16 1220 JCB	Solids, Total Suspended	4.0	mg/L	,	SM 1997 2540 D	37.84	N/A *
11/15 1650 JCB	Coliform, Fecal	< 4	/100ml		SM 9222 D Ì997	20.00	N/A *
11/15 1400 TSB	BOD, Carbonaceous	< 2.0	mg/L		SM 2001 5210 B	10.81	88.0 *
11/15 1435 JCB	Solids, % Total by mass	0.025	%		SM 1997 2540 G	8.00	n/a
11/15 1002 ART	Sample Collection/Travel	٦	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.

### 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: 479-750-117	70	Fax: 479-750-1172		Cr	IAIN C	)F CU	<b>510</b> 1	JY											
Client Information				Project Information							Requested Parameters								
Company Name:		Joyce St. Utility LLC			Permit/Pro	oject #:								)					
Address:		1849 Trillium Lane			Purchase	Order #:								Solids(82)					
		Fayetteville Ar 7270	04					M O						olids		i			
Telephone:		(479)936-0333	(Cell)		Sampler Name(s):			her Untlewood						s %					
Telephone:					1 1 2 1 1 2		$\gamma$ ,						28)						
				<del></del>	and Signature(s):		had						SS(	(43					
ESC Client Numbe	er:	1827					- <del> </del>	17 ( 107)					2	CBOD(70),TSS(28)	Coliform (43)	ŀ			
Sample	Iden	tification		Sample	Collection	Collection		Sample Containers				23)	Phos(25)	000	Colif				
Identification		ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preserva	ative	#	pH(23)	Ph	8	F. 0				
EFFLUE	NT	171020149	11/15/17	09%	GRAB	Water	teflon	150 ml	none		1	х							
EFFLUE	NT	1	1" 1	ĵ	GRAB	Water	Plastic	8 oz	H₂SO₄,pH•	<2	1		х						
EFFLUE	NT	1	1		GRAB	Water	Plastic	1 qt	none/ice		1			х					
EFFLUE	NT				GRAB	Water	Whirlpak	125 ml	Na <sub>2</sub> S <sub>2</sub> O <sub>3</sub>		1				х				
																			_
							<del></del>				7					_			_
		, <u>, , . , </u>																	
									-			7	$\neg$	$\dashv$	一	$\dashv$	$\neg$		
Relinquished By: (Signature an			Date	Time	Received By: (Signature and Printed Name) Date				Date	Tim			dy Sea		1	, <u>l</u> ,	<u>_</u>		
Relinquished By: (Signature and Printed Name) / Date Time		)11/5/17-	100	Received By: (Signature and Printed		Name)		Date	Tim	U: Time Ti		? round:	M		Intac	t?			
		()							egul		X		Spec						
telinquished By: (Signature and Printed Name) Date Time			Received for lab By: (Signature and Printed Nam			Blas	8 14541 1100		)  "		sampl Yes	es pro	perly		ved: No				
Comments:			<u> </u>	FLOW DA	\TA	Field Test	Time	Analys	t R	esu	lt I	Resu		******	Uņits				
					Analyst: Time:		pH: Temp.:	1002							°C °F				
· · · · · · · · · · · · · · · · · · ·				Reading:			DO:		1 4		<u> </u>	<del>-</del>	i Ci	′′-	ے		<del></del> -		
						Units:		Debris:								-			_
Cool all samples to 6 degrees C.						~		Chlorinated	l? Yes N	lo	Ţ	his	Docu	ımei	nt is	Page	, <del> </del>	of]	