## ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY DECENTRALIZED WASTEWATER TREATMENT FACILITIES VIA DRIP IRRIGATION MONTHLY MONITORING REPORT

	PERMITTEE NAME
Joyce St	reet Cottages Property Owners Association Inc
	PERMITTEE ADDRESS
	4200 Gabel Dr
	Fayetteville AR 72703

 FACILITY NAME	
 Joyce Street Cottages	
FACILITY ADDRESS	
3578 E Joyce Blvd	
Fayetteville AR 72703	

PERMIT NO. 4957-WR-3

> AFIN NO. 72-01805

WASTEWATER EFFLUENT MONITORING PERIOD								
MM/DD/YYYY	MM/DD/YYYY							
2/1/2021	·	2/28/2021						

TREATED WASTEWATER EFFLUENT SAME	PLING							
Parameter	•	Limit	Sample Measurement	Units	Monitoring	Reporting		
Flow, Monthly total		REPORT	0.0352,911	MG	Total Flow per calendar month			
Flow, daily maximum *		REPORT	Daily	•				
Carbonaceous Biochemical Oxygen Demand (CB	OD5)	30						
Total Suspended Solids (TSS)		45	7.5	mg/l				
Fecal Coliform Bacteria (FCB)		3,000	< 1.0	colonies/100ml	Grab Sample once per month			
рН		6.0 - 9.0 7.3 s.u.						
Total Phosphorus (TP)		REPORT	2.32	mg/l		_		
Total Kjeldahl Nitrogen (TKN)		REPORT 15.9 mg/l						
Ammonia Nitrogen		REPORT	9.76	mg/l	Grab sample once per quarter			
Nitrate Nitrogen ( NO3-N) + Nitrite Nitrogen ( NO2-	N)	REPORT	2.31	mg/l	- Grab sample once per quarter			
Plant Available Nitrogen (PAN)		REPORT	13.9					
NAME OF PRINCIPAL EXECUTIVE OFFICER  Kathy Bartlett  TYPED OR PRINTED	INFORMATION SUI IMMEDIATELY RES INFORMATION IS TI PENALTIES FOR S	RTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM WITH THE RMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED RMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT SIGNATURE OF COGNIZANT OFFICIAL ALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND						
IMPRISONMENT.   COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)						3/10/2021		

## \* LOADING RATE BY ZONE

Zone 1	0.143	2218
Zone 2	0.178	2760
Zone 3	0.188	2915
<b>Z</b> опе 4	0.191	2962
Zone 5	0.218	3381
Zone 6	0.082	4273

## 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.  $(479)750-\overline{1}170$  Fax (479)750-1172

Control Number: 2102020070

Customer Name : JOYCE STREET UTILITY LLC

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

Report Date : 03/10/21

Sample Date : 02/24/21

Sample Time: 1340

Sample Type : GRAB

Sample From : EFFLUENT

Collected By: TWM

Delivery By : TWM

Work Order : Purchase Order :

		Laboratory Analysis			·	Quality P	<u>Assurance</u>
Analysis						Precision	Accuracy
Date Time By	Parameter	Result	Notes _	Quantity	<u> Method</u>	% RPD	<pre>% Recovery</pre>
03/02 0730 HNS	Ammonia as N, (HACH 10205)	9.76 mg/L			SM 2011 4500-NH3 F	0.61	96.0 *
03/08 1000 TWM	Total Kjeldahl Nitrogen	15.9 mg/L			02/2014 HACH 10242	3.17	103.0 *
02/24 1345 TWM	На	7.3 S.U.		·	SM 2011 4500-H+ B	0.00	· N/A
03/02 1200 HNS	Phosphorous, Total (as P)	2.32 mg/L			EPA 365.3	0.18	105.0 *
03/01 0800 HNS	Solids, Total Suspended	7.5 mg/L			SM 2011 2540 D	0.00	N/A *
02/24 1610 HNS	Fecal Coliform (MPN/100mL	< 1.0 /100ml			06/2012 Colilert18	0.00	N/A *
	BOD, Carbonaceous	< 2.0 mg/L			SM 2001 5210 B	0.00	91.5
	Nitrate + Nitrite	2.31 mg/L			01/2013 HACH 10206	0.62	101.0 *
	Nitrogen, Plant Available				SM 1997 4500-N		

\* 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.

Environmental Services Company, Inc. Northwest Arkansas 1107 Century Street Springdale, Arkansas 72762 website: www.esclabs.com

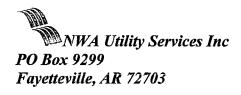


Corporate Office, Little Rock, Arkansas 501-221-2565

> Carlsbad, New Mexico 575-887-1ESC

## **CHAIN OF CUSTODY**

Phone: 479-750-1170	Fax: 479-750-1172		CF	IAIN C	)F GU	SIOI	JY											
Client Information				Project Information							Requested				Par	ame	eters	3
Company Name: Joyce St. Utility LLC			Permit/Project #: Quarterly															
Address: 1849 Trillium Lane Fayetteville Ar 72704			Purchase	Order#:			····				اخ	$NO_3+NO_2$ (91)						
		04									5.A	02						
Telephone:	(479)936-0333	(Cell)		Sampler Name(s):			& week						Z Z	(28)	, ,	ŀ		
Telephone:				1		$\neg \tau$						물	ğ		(43.IF)			
	<del></del>		and t		ture(s):									TS	43			
ESC Client Number:	1827	<del></del>	<u>.</u>		ta/0(0).							(25), NH <sub>3</sub> -N (15.A),	9.0	6	Coliform (	99.		
Sample Ide			Sample	Collection			Sample (	Containers			(23)	SO	ž	5	뚩	6		
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preserva	T-1	#	) Hd	T-Phos	s-TKN(16.C),	CBOD(70), TSS	II.	PAN (99.99)		
EFFLUENT	2102020070	2/24/2)	1340	GRAB	Water	Glass	150 ml	none		1	X			_		<u> </u>		
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EFFLUENT	<del> /</del>	<del>                                     </del>		GRAB	Water			1	$\vdash$	1	<b> </b>	X	<del> </del>	1		_		
EFFLUENT	+ - /		<del>-                                    </del>	GRAB Water Plastic 1/2 gal			<del>                                     </del>		-		$\vdash$		<del>  ^-</del>	X	<del> </del>			
EFFLUENT				GRAB	Water	Sterile	100 ml	Na <sub>2</sub> S <sub>2</sub> O <sub>3</sub>		1	<b>-</b>	$\vdash$			<del>  ^</del>			
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Relinquished By: (Signature and Prin	nted Name)	Date	Time	Received By: (Signature and Printed Name)				Date	Time		Custody Seals: Used? N Intact?							
Relinquished By: (Signature and Prin	ited Name)	Date	Time	Received By: (Signature and Printed Name) Date Time			1	1	around		!		• • •		! H			
Delinquiched Bra (Signibiture and Brinted Name)		Time	Received for Lab By: (Signature and Printed Name)  Date Time 2-24-7 15-30				Regu Were	ilar sampi	X oies pr		Spe y prese		<u> </u>	l				
Relinquished By: (Signature and Printed Name) 2/24/21 1537		1533	House	Lutte	<u> </u>		2-24-7	153		<u> </u>	Yes	Х	<u> </u>	-	No		Ŀ	
Comments: /				FLOW D	ATA	Field Test		Analys		Resi		Rest		<u> </u>	Unit	S	سند	
					Analyst: Time:		pH: Temp.:	1345	7w	<u>~</u>	7.	25	<u> </u>	35	°C.		°F.	<u></u>
		<del>.</del>			Reading:		DO:	· · · · · ·			···		_		<u> </u>			
· · · · · · · · · · · · · · · · · · ·	···				Units:		Debris:	†	<u> </u>									
/ Cool all samples to 6 degrees C.										Doc	ume	nt is	Pag	<u>е</u>	of_			



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

