

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

PERMITTEE NAME

Joyce Street 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
7/1/2019	7/31/2019

TREATED WASTEWATER EFFLUENT SAMPLING

Parameter	Limit	Sample Measurement	Units	Monitoring	Reporting
Flow, Monthly total	REPORT	0.085042	MG	Total Flow per calendar month	Prior to the 15th of the following Month
Flow, daily maximum *	REPORT	5,305	GPD	Daily	
Carbonaceous Biochemical Oxygen Demand (CBOD5)	30	< 2	mg/l	Grab Sample once per month	
Total Suspended Solids (TSS)	45	9	mg/l		
Fecal Coliform Bacteria (FCB)	3,000	< 1	colonies/100ml		
pH	6.0 - 9.0	7.4	s.u.		
Total Phosphorus (TP)	REPORT	4.37	mg/l		
Total Kjeldahl Nitrogen (TKN)	REPORT	No Report	mg/l	Grab sample once per quarter	
Ammonia Nitrogen	REPORT	No Report	mg/l		
Nitrate Nitrogen (NO ₃ -N) + Nitrite Nitrogen (NO ₂ -N)	REPORT	No Report	mg/l		
Plant Available Nitrogen (PAN)	REPORT	No Report	mg/l		

NAME OF PRINCIPAL EXECUTIVE OFFICER Ken Gregory	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.	 SIGNATURE OF COGNIZANT OFFICIAL	TELEPHONE (479) 530-5926
			DATE 8/7/2019

COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)

*** LOADING RATE BY ZONE**

Zone 1	758.62	Zone 5	1156.49
Zone 2	944.29	Zone 6	435.01
Zone 3	997.34		
Zone 4	1013.26		

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: 1907020098
 Customer Name : JOYCE STREET UTILITY LLC
 Customer/Permit No. : 1827 / 4957-WR-2 001
 Report Date : 07/25/19

Sample Date : 07/17/19
 Sample Time : 1100
 Sample Type : GRAB JOYCE STREET
 Sample From : EFFLUENT

Collected By: JEW
 Delivery By : JEW
 Work Order :
 Purchase Order :

Laboratory Analysis

<u>Analysis</u>						<u>Quality Assurance</u>			
<u>Date</u>	<u>Time</u>	<u>By</u>	<u>Parameter</u>	<u>Result</u>	<u>Notes</u>	<u>Quantity</u>	<u>Method</u>	<u>Precision</u>	<u>Accuracy</u>
								<u>% RPD</u>	<u>% Recovery</u>
07/17	1100	JEW	pH	7.4	S.U.		SM 2011 4500-H+ B	0.00	N/A
07/23	1200	TSB	Phosphorous, Total (as P)	4.370	mg/L		EPA 365.3	0.00	103.0 *
07/22	1443	TSB	Solids, Total Suspended	9.0	mg/L		SM 2011 2540 D	9.05	N/A *
07/17	1654	TSB	Fecal Coliform (MPN/100mL)	< 1.0	/100mL		06/2012 Colilert18	0.00	0.0 *
07/17	1700	TSB	BOD, Carbonaceous	< 2.0	mg/L		SM 2001 5210 B	2.68	90.0 *

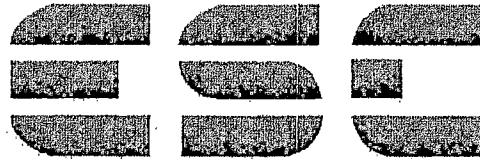
* QA data shown is from a different sample or standard on the same date.

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 #: Monthly						pH (23)	T-Phos (25)	CBOD (70), TSS (28)	F. Coliform (43.IF)								
Address: 1849 Trillium Lane				Purchase Order #:																	
Fayetteville Ar 72704				Sampler Name(s): <i>James Witte James Witte</i>																	
Telephone: (479)936-0333 (Cell)				and Signature(s):																	
ESC Client Number: 1827																					
Sample Identification		Sample Collection				Sample Containers															
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#												
EFFLUENT	1907020098	7-17-19	1100	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	1/2 gal	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:											
<i>James Witte James Witte</i>		7-17-19	1205							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:											
				<i>James Witte James Witte</i>				7-17-19	1205	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>											
Comments:				FLOW DATA		Field Test		Time	Analyst	Result	Result	Units									
				Analyst:		pH:		1100	UEW	7.4	7.4										
				Time:		Temp.:		1100	UEW	26.5	26.6	°C									
				Reading:		DO:															
				Units:		Debris:															
Cool all samples to 6 degrees C.				Chlorinated? Yes No				This Document is Page 1 of 1													