From:
 Byrne, Timothy

 To:
 Deardoff, Amy

 Subject:
 FW: 4957-WR-3 PN

**Date:** Friday, September 28, 2018 10:16:54 AM

Attachments: Joyce Street Cottages Sewer Transfer Form.pdf signed.pdf

#### 4957-WR-3 New Responsible Official Info

**From:** Kathy Bartlett [mailto:kathy@aquatechsys.com]

Sent: Friday, September 28, 2018 8:14 AM

To: Byrne, Timothy

Subject: RE: 4957-WR-3 PN

#### Tim

Here is the transfer paperwork and the new NDSTW Trust Form for Joyce St Cottages

Kathryn Bartlett
Internal Operations Manager
NWA Utility Services, Inc
www.nwautilityservices.com

Direct: 479-530-5926

From: Byrne, Timothy [mailto:ByrneT@adeq.state.ar.us]

Sent: Tuesday, September 25, 2018 12:39 PM

To: 'Kathy Bartlett'

Subject: FW: 4957-WR-3 PN

#### Kathy,

It looks like we will be needing a permit transfer form to be filled out to change the responsible official and other new info for the permittee. The Public Notice will be on hold until we receive updated information.

If you have any questions, please feel free to call.

## Tim Byrne

Engineer ADEQ, Water Division 5301 Northshore Dr. NLR, AR 72118 (501)682-0648

From: Deardoff, Amy

Sent: Tuesday, September 25, 2018 11:49 AM

**To:** Byrne, Timothy **Subject:** 4957-WR-3 PN

Just got a call from Cathy at the NW AR DemGaz. She called Meredith Chisolm to arrange payment, and Ms. Chisolm told her that she has sold her house and has nothing more to do

with Joyce Street Cottages POA. New contact info is below.

Andy Hague Real Clear Neighborhoods 479-236-7262

 $\underline{info@realclearneighborhoods.com} \ (Obviously \ this \ isn't \ his \ individual \ address, \ but \ I \ found \ it \ on \ the \ web \ and \ it \ may \ get \ to \ him. \ \boxdot)$ 

Cathy is going to hold onto the PN stuff, so when you figure out what we need to do, just let me know.

Amy Deardoff P: 501-682-0650 F: 501-682-0880

# Nonmunicipal Domestic Sewage Treatment Works Trust Fund Requirement Form

Permittee (Legal) Name: Joyce Street Cottages Property Owners' Association, Inc.

Facility Name: Joyce Street Cottages

Permit No. 4957-WR-2

# Section A - Information Requiring Engineering Certification

Part I - Operating and Maintenance Expenses

O & M Expense	Frequency/Year	Unit Cost	Annual Cost	5-Year Cost
Labor	12	350.00	4200.00	22,386.00
Electricity	12	175.00	2100.00	11,130.00
Water	12	15.00	180.00	959.40
Supplies/Chemicals	6	100.00	600.00	3198.00
Analytical Sampling and Testing	12	127.00	1524.00	8122.93
Mowing Dripfield	7	200.00	1400.00	
Insurance Liability and WC	1	200.00	360.00	7420.00
Replacement Pumps			360.00	1918.80
Sludge Pumping				1000.00
ADEQ Permit & Trust Fund	1	700.00		1000.00
The state of the s		700.00	700.00	3500.00
Total	4112			60,635.13

The above O & M costs are based on actual historical figures for this facility and are a true representation of forecasted costs based on similar facilities utilizing the same treatment technology and equipment.

## Part II - Capital Expenditures

 The wastewater treatment plant (WWTP) must be examined by a Professional Engineer registered in the State of Arkansas to determine all necessary capital expenditures, system upgrades, or significant repairs which may be needed within the following five (5) years. A list of all of these items must be attached to this document.

### **ENGINEERS STATEMENT:**

This facility has no planned repairs, upgrades, capital expenditures or significant repairs required for the next five years.

 A milestone schedule for completion of the capital expenditures, system upgrades, or significant repairs must be attached to this document.

Not Applicable

## Nonmunicipal Domestic Sewage Treatment Works Trust Fund Requirement Form

#### Part III - Financial Plan

A financial plan that demonstrates to the Department's satisfaction the permittee's ability to operate and maintain the WWTP for five (5) years must be prepared. This plan should also include a comprehensive connection summary listing the number of connections and types of connections based on Appendix B of the Arkansas Department of Health Rules and Regulations Pertaining to Onsite Wastewater Systems. The summary should include the number of existing connections and an estimated number of new connections for the next five (5) years. The financial plan must be attached to this document.

See Attachment B

#### Part IV - Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Printed Name of AR Professional Engineer:	Charles L. Presley
Registration License Number: 308/	
Signature of AR Professional Engineer:	Marle Therey
Date: July 18, 2018	_ Telephone Number: 479-738-2979
E-mail: <u>cipres@madison</u> county.net	Fax Number:
Stamp of AR Professional Engineer	

ARKANŠAS

REGISTĒRED
PROFESSIONAL
ENGINEER
No 3081

Chals J Luly

ADEQ Office of Water Quality

September 2017

# Nonmunicipal Domestic Sewage Treatment Works Trust Fund Certification Form

## Section B - Service Area Information and Certification of Compliance

### Part I - Legal Description

A legal description of the service area must be attached to this document. This requirement may be satisfied by providing a plat for the area served by the non-municipal domestic sewage treatment works.

### Part II - Potable Water Sources

A list of the sources of the potable water for the service area must be attached to this document.

## Part III - Certification of Compliance

Yes\_X

Has the permit applicant complied with all local zoning ordinances, local planning authority
regulations, local permitting requirements, and any other applicable local regulations necessary
for the construction and operation of this facility?

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or

No\_\_\_

persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.
Printed Name of Permittee Responsible Official: Andy Hague
Signature of Permittee Responsible Official:
Date: 9/27/18 Telephone Number: 479-236-7262
E-mail:andy@realclearneighborhoods.com Fax Number:

## FINANCIAL PLAN FOR LONG TERM OPERATIONS AND MAINTENANCE

As per the terms of the contract executed between Joyce Street Cottages Property Owners Association, Inc. and Joyce St. Utility LLC, a NWA Utility Services company; this facility has secured long term operations and maintenance for the facility. The following pertinent language is defined in the terms of the executed agreement.

. WHEREAS, OWNER is the governing authority of that real estate subdivision that is described on Exhibit A, attached hereto (the "Subdivision"); and

WHEREAS, OWNER desires to retain Utility to operate and maintain that waste water treatment plant and lift station that is located on or adjacent to the Subdivision described in on Exhibit A (the "Plant") in accordance with all applicable federal, state and local rules and regulations (the "Applicable Laws"); and

WHEREAS, Utility is willing to provide said services in exchange for that compensation that is referenced herein;

NOW, THEREFORE, in consideration of the covenants and conditions referenced and exchanged herein, and for other good and valuable consideration received, and intending to be fully and legally bound hereby, the parties hereto covenant and agree as follows:

- 1. OWNER Responsibilities. OWNER shall be responsible for the following duties and obligations in connection with the operations and maintenance of the Plant:
  - a. Allowing Utility and its agents and employees unlimited access to the "Plant" at any time during regular business hours for routine operations and maintenance or at any time in order to perform its duties in an alarm situation.
  - b. Provide and pay associated costs for electric service to the "Plant".
  - c. Maintain and pay all associated costs for the ADEQ permit of the "Plant".
  - d. Supply to all current and any future homeowners a copy of the Initial Rules and Regulations pertaining to the system included herein as <a href="Exhibit B">Exhibit B</a>
- 2. <u>Utility Responsibilities.</u> Utility shall be responsible for the following duties and Obligations in connection with the operations and maintenance of the Plant (collectively, the "Operations and Maintenance Services"):
  - a. Providing all Plant operations and maintenance as outlined in <a href="Exhibit C">Exhibit C</a> that are in accordance with current Applicable Laws as outlined in the Permit Conditions for AFIN No 72-01805 Permit No 4957-W and subsequently renewed permits
  - b. Coordinating lab to obtain wastewater samples and pay all associated costs related to sampling. Upon request, Utility will forward copies of the labs Chain of Custody and Lab Analysis along with the associating monthly monitoring reports submitted to the ADEQ by Utility.

- c. Provide and pay associated costs for the water service to the "Plant".
- d. Maintaining records and files as required by all Applicable Laws including, but not limited to, ADEQ monthly monitoring reports as outlined in the Permit Conditions for AFIN No 72-01805 Permit No 4957-W and subsequently renewed permit.
- e. Maintain records and files and comply with all rules and regulations concerning community sewer systems for responsible managing entities as set forth by Washington County, AR.
- f. Utilizing the Plant only for its intended and approved purposes.
- g. Maintaining all necessary licenses associated with the operation of the Plant.
- h. Bill and collect a monthly wastewater service fee directly to all homeowners in the subdivision. Utility reserves the right to bill and collect the monthly wastewater service fee directly to a homeowners tenant upon that tenant's credit approval. If the tenant fails to pay any portion of their service fee it will become the responsibility of the homeowner to pay said amount to Utility Id. Currently this fee is set at \$47.00 per customer. Utility reserves the right to increase this fee each year by an amount equal to the greater of \$3.00 per month or any increases in the Consumer Price Index. Utility may also increase this fee at any time on an as-needed basis by an amount necessary to pay costs associated with any subsequently enacted or required Health Department, Department of Environmental Quality, or other federal, state, county, city or local rule or regulation, and/or by any other objectively demonstrable increase in the operation of the Plant.

### FORECASTED CONNECTION SUMMARY

YEAR	CONNECTIONS	CONNECTION TYPE	MONTHLY SEWER RATE	ANNUAL REVENUE
2018	29	Residential	47.00	16,356.00
2019	29	Residential	47.00	16,356.00
2020	29	Residential	47.00	16,356.00
2021	29	Residential	47.00	16,356.00
2022	29	Residential	47.00	16,356.00

# LIST OF POTABLE WATER SOURCE

City of Fayetteville

### LEGAL DESCRIPTION OF PROPERTY

#### SURVEY DESCRIPTION:

PART OF THE SOUTHWEST QUARTER (SW 1/4) OF THE SOUTHEAST QUARTER (SE 1/4) OF SECTION 19, TOWNSHIP 17 NORTH, RANGE 29 WEST, WASHINGTON COUNTY ARKANSAS, MORE PARTICULARLY DESCRIBED AS FOLLOWS:

COMMENCING AT A FOUND IRON PIN AT THE NORTHWEST CORNER OF SAID SW1/4 OF THE SE1/4 OF SECTION 19; THENCE S87°30′29″E 954.83 FEET TO A FOUND IRON PIN AND THE POINT OF BEGINNING; THENCE S87°31′22″E 330.04 FEET TO A FOUND IRON PIN; THENCE S02°35′16″W 1320.01 FEET TO THE SOUTH LINE OF SAID SW1/4 OF THE SE1/4 OF SECTION 19; THENCE ALONG SAID SOUTH LINE N87°30′37″W 329.95 FEET; THENCE DEPARTING SAID SOUTH LINE N02°35′02″E 1319.94 FEET TO THE POINT OF BEGINNING, CONTAINING 10.00 ACRES, MORE OR LESS, SUBJECT TO THE RIGHT-OF-WAY OF WASHINGTON COUNTY ROAD 553 ALONG THE SOUTH SIDE THEREOF, AND ALSO SUBJECT TO ANY EASEMENTS, COVENANTS OR RESTRICTIONS OF RECORD OR FACT.

JOYCE ST COTTAGES WASTEWATER SYSTEM COMPONENT	QTY	AVERAGE LIFE	LAST REPLACED	REPLACEMENT COST
<u>LIFT STATION</u>				YER ON!
Submersible Non Clog Pumps Barnes SE 774	2	10-15 yrs	1 replaced June 2011	900.00
TREATMENT AND DRIP IRRIGATION SYSTEM				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
10 Fiberglass Primary Settling Tank	↦	30 Yrs		16,000.00
4K Fiberglass Equalization Tank	<del> </del> 1	30 Yrs		10.400.00
EQ Control Panel *	<del>j1</del>	30 Yrs		5.000.00
EQ Pump #SE411 or equal	2	5 - 7 Yrs	1 replaced Aug 2016	466.00
Zabel Effluent Filters A300 and A600	2	10-15 yrs	ţ	1.100.00
Bioclere Model 30/24 Trickling Filter Treatment Plant	⊢	30 Yrs		53,250.00
Bioclere Control Panel *	<b>⊢</b>	30 Yrs		5,000.00
Recirulation Pump Goulds 1DW51E1EA or equal	⊢	5 - 7 Yrs	1 replaced Mar 2016	630.00
Dosing Pumps Goulds 1DW51E1EA or equal	2	5 - 7 Yrs		630.00
Effluent Filters vault #5041-0030 or equal	<b>⊢</b>	10-15 Yrs		550.00
Junction Box	Ь	7 - 10 Yrs		236.00
Fan Grainger 4C720 or equal	<del></del>	5 - 7 Yrs		96.00
Chlorine Chamber Norweco 4000 Series Tablet Feeder	ы	10-15 yrs		935.00
4K Fiberglass Final Settling Tank	₩.	30 Yrs		10,400.00
10K Fiberglass Dosing Tank	₽	30 Yrs		14,600.00
Effluent Pump #5032-0007 or equal	2	7 - 10 Yrs		420.00
Geoflow Dripline #WF-PC 16-2-24 or equal	35,000	15 - 20 Yrs		0.32
Replacement Screen AP SCR 1.5/2F-100M	ш	3 - 5 Yrs		94.77
Headworks Box #WHW ULTRA 1F-A	سن	15 - 20 Yrs	X	2,045.00
Flow Meter 1" disc or equal	<del>  - 1</del>	5 - 7 Yrs		300.00
2" solenoid valves	7	10-15 yrs		165.00
Drip System Control Panel *	lund	30 Yrs	Jun-12	2,800.00

operational. The price listed above is for a complete new panel \* Control Panels have an extensive list of parts used in the design of the panel and can be replaced on an as needed basis to keep the panel fully

### PERMIT TRANSFER FORM

(Revised 2017)

	ase select one of the lonown					
A. 1	Permittee (legal name) chang	ge B. Facility	name change		C. Responsible offi	cial name change
	A □ B	<b>™</b> C	□ A & B	□ A & C	□B&C	□ A & B & C
	PERMIT NUMBE	R: 4957	WR-3	Make Malakan kan sa		
I.	CURRENT PERMITTEI				-	
	Permittee (legal name):	Joyce	1 5+12L	t COtt	ASSOCIA	+1m. 160.
	Facility Name:	Prope	14-6	10107	1 64 01	14-11-11-6
	Responsible Official Name	e (see Section IV below);	M	iridith	Chisho	Im
	Is the permittee identified			Yes No		7771
	If you mark No, please list					
II.	NEW PERMITTEE INFO	ORMATION				
	Permittee (legal name):			Samo	as al	nove
	Facility Name (if different	from Permittee Name):		1		
	Is the permittee identified a	above, the owner of the fa	acility?	Yes No		- Maria Mari
	If you mark No, please list	the name of the owner:	***************************************			
	Responsible Official Name	(see Section IV below):	An	11 14	AKAL	
	Official Title of Responsib		1114x	104 11	N. J. N. S	
	E-mail: Lnly C			hoodsic	1/DM Overna	r Type:
		578 E. JOY	1 5 t	TV VICO II		☐ PARTNERSHIP
	Permittee City:	FAYU	tulle		-	SCORPORATION
	Permittee State:	AR	Zip: 72	703	SOLE PROPRIE	
	Permittee Telephone No.:	(479) 23(	0-7262	_		
	Is the new permittee registe	ered with the Arkansas Se	cretary of State	:?	TYes T	∃ No
	If yes, please provide the fu permittee name listed above	all name of corporation if	different than t	he legal	to the second se	
	Facility Mailing Address:	4200 Gab	Upr	Facility City:	FAYETT	Wille.
				Facility State:	1 10	72703
	Facility Contact Person Nar	- And Ita	ique		3.0	
	Telephone Number:	1 12/02	•	Contact	Person Title:	anujer
	-	andy Hagu	Number:		E-mail: ON	ME KA KHOVE
	Invoice Mailing Address: 4	4 4 4 4	Dr		City: FAYCHC	VIIIC
	Invoice Mailing Address:		q- #			Zip: 72703
	Cognizant Official Name*:	Kin mrin	0/1	Telepho	<i></i>	+ numeritar
	Telephone Number: 14	D-7817 En	Yumber:	_ cognizant On	ficial Title: ////	O WILL FIRM
1	* Duly Authorized Representative	as outlined in 40 CFR 122.22	(b) .		E-mail: <u>MCN</u>	E AGUATECITY?
***	or (474) 50	0-3924				1 ( ) / /

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY

5301 NORTHSHORE DRIVE / NORTH LITTLE ROCK / ARKANSAS 72118-5317 / TELEPHONE 501-682-0744 / FAX 501-682-0880 www.adeq.state.ar.us

### PERMIT TRANSFER FORM

(Revised 2017)

Please note you must complete this Section (III.) only if the	permit has a new owner or a new ownership.
Please specify the closing date for this transaction:	
Current Permittee (Seller):	
Signature of Responsible Corporate Officer: Title of Responsible Corporate Officer: Printed Name of Responsible Corporate Officer: Date:	
New Permittee (Buyer):	
Signature of Responsible Corporate Officer: Title of Responsible Corporate Officer: Printed Name of Responsible Corporate Officer: Date:	
<u>Disclosure Statement:</u> Disclosure Statement must be submitted for new permittee. form may be obtained from the ADEQ web site at:	Disclosure Statement is not required for Stormwater Permits. The
https://www.adeq.state.ar.us/ADEQ_Disclosure_Statement.pd	<u>df</u>
Is Disclosure Statement enclosed: Yes	No
https://www.adeq.state.ar.us/water/permits/npdes/inc	lividual/pdfs/ndstw-trust-fund-certification-form.pdf
Land Use Contract:  For land application permits you must submit a new land u application. The new land use contract must be signed by the	se contracts for all the sites permitted under the current permit for land
IV. CERTIFICATION OF NEW PERMITTEE	
Department will accept reports signed by the applicant. were prepared under my direction or supervision in accordant gather and evaluate the information submitted. Based on persons directly responsible for gathering the information	ermit Transfer Form (Section II) is qualified to act as a duly authorized 2(b). If no cognizant official has been designated, I understand that the I certify under penalty of law that this document and all attachments dance with a system designed to assure that qualified personnel properly a my inquiry of the person or persons who manage the system, or those in submitted is, to the best of my knowledge and belief, true, accurate, alties for submitting false information, including the possibility of fine
	anges that warrant a permit modification. (Please note that if there are t submit a complete application, updated plans, design calculations and this Ownership Change Form. The transfer may be made effective prior
Typed or Printed Name:	Title: Plant Operator
Signature:	Date: 9/27/18