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

PERMITTEE NAME		FACILITY NAME								
Joyce Street Cottages Property Owner		Joyce Street Cottages								
PERMITTEE ADDRES		7	AFI	N NO.						
4200 Gabel Dr			FACILITY ADDRESS 3578 E Joyce Blvd							
Fayetteville AR 72703										
			WASTEWATER EFFLUENT MONITORING PERIOD							
	MM/DD/YYYY				MM/DD/YYYY					
		10/1/2020				10/31/2020				
TREATED WASTEWATER EFFLUENT S	AMPLING				·		t			
Parameter		Limit		Sample Measurement	Units	Monitoring	Reportin	g .		
Flow, Monthly total	REPO	RT	0.0286,253	MG	Total Flow per calendar month					
Flow, daily maximum *	REPO	RT	0.010,900	GPD	Daily					
Carbonaceous Biochemical Oxygen Demand (CBOD5)		30		< 2.0	mg/l					
Total Suspended Solids (TSS)		45		8.8	mg/l					
Fecal Coliform Bacteria (FCB)		3,00	0	2.00	colonies/100ml	Grab Sample once per month				
рН		6.0 - 9	9.0	7.2	s.u.		Prior to the 15th following Mo			
Total Phosphorus (TP)		REPO	RT	5.9	mg/l					
Total Kjeldahl Nitrogen (TKN)		REPO	RT		mg/l					
Ammonia Nitrogen		REPO	RT		mg/l	Grab sample once per quarter				
Nitrate Nitrogen (NO ₃ -N) + Nitrite Nitrogen (NO ₂ -N)		REPORT mg/l REPORT mg/l		Orab sample ones per quarter						
Plant Available Nitrogen (PAN)					mg/l					
NAME OF PRINCIPAL EXECUTIVE OFFICER	E OF PRINCIPAL EXECUTIVE OFFICER I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM WITH THE							EPHONE		
	l l	JBMITTED HEREIN; AN	Kmall.1	(479	9) 530-					
Kathy Bartlett	I I	SPONSIBLE FOR OBTA	MINUULT		926					
		TRUE, ACCURATE, AND	SIGNATURE OF COGNIZANT O	FFICIAL D	DATE					
TYPED OR PRINTED PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.							11/1	12/2020		
COMMENTS AND EXPLANATIO	N OF VIOLATIONS (Refe	rence all attachments h	ere)							
										
* LOADING RATE BY ZONE										

1558

1940

2049 2082

2376 895

Zone 1

Zone 2 Zone 3

Zone 4 Zone 5

Zone 6

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: 2010020074

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

Report Date : 10/30/20

Sample Date : 10/21/20

Sample Time : 0840

Sample Type : GRAB
Sample From : EFFLUENT

Collected By: HNS Delivery By: HNS

Work Order :

Purchase Order :

	Quality Assurance					
Analysis	-				Precision	Accuracy
Date Time By	Parameter	Result Notes	Quantity	<u> Method</u>	% RPD	% Recovery
10/21 0842 HNS	рН	7.2 S.U.		SM 2011 4500-H+ B	0.00	N/A
10/27 1100 HNS	Phosphorous, Total (as P)	5.90 mg/L		EPA 365.3	0.00	96.0 *
10/23 0920 HNS	Solids, Total Suspended	8.8 mg/L		SM 2011 2540 D	0.00	N/A *
10/21 1624 HNS	Fecal Coliform (MPN/100mL	2.0 /100ml		06/2012 Colilert18	0.00	N/A *
10/23 0800 TWM	BOD, Carbonaceous	< 2.0 mg/L		SM 2001 5210 B	0.00	85.5 *

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

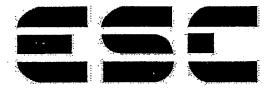
All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

Signature

invizonmental Services Co., Inc.

KNN 28U263

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



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

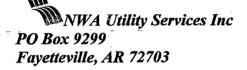
Carlsbad, New Mexico 575-887-1ESC

Phone: 479-750-1170

Fax: 479-750-1172

CHAIN OF CUSTODY

Client Information				Project Information						Requested				Parameters			
Company Name:				Permit/Project #: Monthly													
Address:	1849 Trillium Lane		:	Purchase (Orger #:												
	Fayetteville Ar 727	04								(28)							
Telephone:	(479)936-0333	(Cell)		Sampler Name(s): Hayden			den S	Smith									
Telephone:							eden Smith			TSS		Coliform (43.IF)					
				and Signature(s): Hayer			lu Sonth			(c)	2	n (4					
ESC Client Number:	1827									(70)	2	forn	(
Sample Ide	entification		Sample	Collection		Sample Containers			go	T-Phos (25)		(23)					
Identification	ESC Control #	Date	Time	Type	Matrix	Туре	Volume	Preservative	#	аово	라_	С	Hd				
EFFLUENT	2010020074	низ 10/2 6/2 0	0340	GRAB	Water	Plastic	1/2 gal	None, Cool	1	Х							
EFFLUENT	,	1	1	GRAB	Water	Plastic	8 oz	H₂SO₄,pH<2	1		X						
EFFLUENT				GRAB	Water	Sterile	125 mL	Na2S2O3	1			X					
EFFLUENT	Ţ		4	GRAB	Water	Glass	250 mL	None	0				Х				
													<u> </u>				
													_				
	ì																
Relinquished By: (Signature and Printed Name) Date Time			Received By: (Signature and Printed Name) Date Time Transle Link 10/21/740 840				Custody Seals: Used? N Intact?										
Relinquished By: (Signature and Printed Name) Date		Date	Time	Received By: (Signature and Printed Name) Da			Date Tir	ne	Tuma	around		 				 	
Relinquished By: (Signature and Printed Name) Date 10/21/20		16 Jimes	Received for Lab By: (Signature and Printed Name)		h	Oper Time		Regular X Were samples property Yes X				Special rly preserved:			 		
Comments:			- / /	FLOW DA	ATA	Field Test	Time Analy		Res	uit	Res	ult		Unit	3		
				Analyst:		pH:	DAYA HNS		7.	1.2 7.3		3	°C °F				
					Time: Reading:		Temp.: DO:	· · · · · · · · · · · · · · · · · · ·		 		\vdash	.	٦		Г	
HAS					Units:		Debris:	 		 		 					
Cool all samples to 6 degrees C.					· · · · · · · · · · · · · · · · · · ·		Chlorinated	? Yes No		This	Doc	ume	ent is	Pag	e	of_	



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

