

ADEQ

ARKANSAS
Department of Environmental Quality

April 6, 2012

Honorable James J. Hudson
Mayor, City of Flippin
P.O. Box 40
Flippin, AR 72634

Re: NPDES Permit Number AR0021717 – AFIN 45-00021

Dear Mayor Hudson:

The application for renewal of your NPDES permit was received on 3/30/2012. In accordance with Department policy, your application has been reviewed and determined to be incomplete. The enclosed ADEQ Form 1 and EPA Form 2A Part B.6 must be completed and returned to the Department no later than 4/30/2012. Failure to submit the required information will result in your application being placed in an inactive status.

Existing NPDES permits cannot be continued past their expiration dates under the provisions of Arkansas Pollution Control and Ecology Commission Regulation No. 6 until a complete application for renewal has been received by the Department. Consequently, failure to provide the information requested could result in an unpermitted discharge upon expiration of your current permit and subject you to enforcement action by the Department. However, upon receipt of the information requested, your application will be determined to be complete, and processing of your renewal application will begin.

Thank you for your cooperation in this matter. If there are any questions concerning this submittal, please contact me at (501) 682-06213 or permit engineer Marysia Jastrzebski, P.E. at (870) 446-5939 or by email at marysia@adeq.state.ar.us.

Sincerely,



Scott Waller
Administrative Assistant
Water Division

Enclosure

FACILITY NAME AND PERMIT NUMBER:

City of Flippin AR0021717

Form Approved 1/14/99
OMB Number 2040-0086

c. If the answer to B.5.b is "Yes," briefly describe, including new maximum daily inflow rate (if applicable).

N/A

d. Provide dates imposed by any compliance schedule or any actual dates of completion for the implementation steps listed below, as applicable. For improvements planned independently of local, State, or Federal agencies, indicate planned or actual completion dates, as applicable. Indicate dates as accurately as possible.

Implementation Stage	Schedule	Actual Completion
	MM / DD / YYYY	MM / DD / YYYY
- Begin construction	__ / __ / __	__ / __ / __
- End construction	__ / __ / __	__ / __ / __
- Begin discharge	__ / __ / __	__ / __ / __
- Attain operational level	__ / __ / __	__ / __ / __

e. Have appropriate permits/clearances concerning other Federal/State requirements been obtained? Yes No

Describe briefly: _____

B.6. EFFLUENT TESTING DATA (GREATER THAN 0.1 MGD ONLY).

Applicants that discharge to waters of the US must provide effluent testing data for the following parameters. Provide the indicated effluent testing required by the permitting authority for each outfall through which effluent is discharged. Do not include information on combined sewer overflows in this section. All information reported must be based on data collected through analysis conducted using 40 CFR Part 136 methods. In addition, this data must comply with QA/QC requirements of 40 CFR Part 136 and other appropriate QA/QC requirements for standard methods for analytes not addressed by 40 CFR Part 136. At a minimum, effluent testing data must be based on at least three pollutant scans and must be no more than four and one-half years old.

Outfall Number: 001 _____

POLLUTANT	MAXIMUM DAILY DISCHARGE		AVERAGE DAILY DISCHARGE			ANALYTICAL METHOD	ML / MDL
	Conc.	Units	Conc.	Units	Number of Samples		
CONVENTIONAL AND NONCONVENTIONAL COMPOUNDS.							
AMMONIA (as N)							
CHLORINE (TOTAL RESIDUAL, TRC)							
DISSOLVED OXYGEN							
TOTAL KJELDAHL NITROGEN (TKN)							
NITRATE PLUS NITRITE NITROGEN							
OIL and GREASE							
PHOSPHORUS (Total)							
TOTAL DISSOLVED SOLIDS (TDS)							
OTHER							

**END OF PART B.
REFER TO THE APPLICATION OVERVIEW TO DETERMINE WHICH OTHER PARTS OF FORM 2A YOU MUST COMPLETE**