

Nancy Koon (adpce.ad)

From: Nancy Koon (adpce.ad) on behalf of Water Permit Application
Sent: Tuesday, October 18, 2022 7:02 AM
To: Nancy Koon (adpce.ad)
Subject: FW: Paradise Valley WWTP revised documents
Attachments: Disclosure Statement 10-14-22.pdf; Revised Assembly Cost Estimate stamped 10-14-22.pdf

Follow Up Flag: Follow up
Flag Status: Flagged

-----Original Message-----

From: Bryan Leamons (adpce.ad)
Sent: Monday, October 17, 2022 5:18 PM
To: Water Permit Application
Subject: Fw: Paradise Valley WWTP revised documents

From: Doug Ford <DFord@pmico.com>
Sent: Monday, October 17, 2022 11:09:28 AM
To: Bryan Leamons (adpce.ad)
Subject: Paradise Valley WWTP revised documents

Bryan:

Attached is the signed Disclosure Statement and the stamped cost estimate for your review. Please let me know if you have any questions or need additional information.

Respectfully,

William Doug Ford, P.E.
Principal
Pollution Management, Inc.
3512 South Shackleford
Little Rock, AR 72205
Office: 501-221-7122
Fax: 501-221-7775
Cell: 501-837-5610
Email: dford@pmico.com<<mailto:dford@pmico.com>>

This message is intended for use by the person to whom it is expressly addressed and may contain information that is confidential and legally privileged. If you are the intended recipient, you are hereby notified that any use, reliance on, reference to, review, disclosure or copying of this message and the information it contains for any purpose is prohibited. Opinions, conclusions and other information in this message that do not relate to the official business of Pollution Management, Inc. shall be understood as neither given nor endorsed by PMI.

**PARADISE VALLEY WWTP
ASSEMBLY AND COMMISSIONING**

Paradise Valley WWTP is already owned by Pulaski County Property Owners Multipurpose Improvement District No. 2021-2.

The structure of the WWTP is in good condition but will require assembly and some new components. Below is an estimate of the assembly cost and necessary components for commissioning and operation.

1. Book Value			
Value of new treatment plant			\$525,000
Annual Depreciation=\$17,500/yr			
Accumulated depreciation = 16 yrsx\$17,500/yr			<u>\$280,000</u>
Book Value		SUBTOTAL:	\$245,000
2. Site Improvements			
Dirt Fill	1,600 cy @	\$6.00 per cy =	\$9,600
Concrete Slab	2,000 s.f. @	\$7.00 per s.f. =	\$14,000
Security Fence	530 l.f. @	\$15.00 per l.f. =	\$7,950
Seed and Mulch	1 l.s. @	\$1,500.00	\$1,500
Water Line	1 l.s. @	\$2,200.00	<u>\$2,200</u>
		SUBTOTAL:	\$35,250
3. Assembly			
Welding Structure - labor and materials			\$15,800
Electrical - labor and materials			\$14,500
Piping - labor and materials			<u>\$15,000</u>
		SUBTOTAL:	\$45,300
4. Operation Component Replacement/Add			
Blower	1 @	\$8,500.00 =	\$8,500
Sand for filters	1 @	\$1,400.00 =	\$1,400
Aerators	8 @	\$300.00 =	\$2,400
Flow Equalization Pumps	2 @	\$1,800.00 =	\$3,600
Electric Panel Components	1 @	\$1,200.00 =	\$1,200
Mudwell Pump	1 @	\$3,500.00	\$3,500
Clearwell Pump	1 @	\$3,500.00	<u>\$3,500</u>
		SUBTOTAL:	\$24,100
5. Standby Generator:			\$40,800
		TOTAL:	<u><u>\$390,450</u></u>



ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY DISCLOSURE STATEMENT

Instructions for the Completion of this Document:

A. Individuals, firms or other legal entities with no changes to an ADEQ Disclosure Statement, complete items 1 through 5 and 18.

B. Individuals who never submitted an ADEQ Disclosure Statement, complete items 1 through 4, 6, 7, and 16 through 18.

C. Firms or other legal entities who never submitted an ADEQ Disclosure Statement, complete 1 through 4, and 6 through 18.

If Not Submitting by ePortal, Mail Original to:

ADEQ
DISCLOSURE STATEMENT
[List Proper Division(s)]
5301 Northshore Drive
North Little Rock, AR 72118-5317

1. APPLICANT: (Full Name)

Pulaski County Property Owners Multipurpose Improvement District 2021-2

2. MAILING ADDRESS: (Number and Street, P.O.Box Or Rural Route)

P. O. Box 23670

3. CITY, STATE, AND ZIPCODE:

Little Rock, AR 72221

4a. Applicant Type:

Individual Corporate or Other Entity

4b. Reason for Submission:

Permit License Certification Operational Authority

New Application Modification Renewal Application (If no changes from previous disclosure statement, complete number 5 and 18.)

4c. Programs:

Air Water Hazardous Waste Regulated Storage Tank Mining Solid Waste Used Tire Program

5. Declaration of No Changes:

The violation history, experience and credentials, involvement in current or pending environmental lawsuits, civil and criminal, have not changed since the last Disclosure Statement that was filed with ADEQ on _____

6. Describe the experience and credentials of the Applicant, including the receipt of any past or present permits, licenses, certifications or operational authorization relating to environmental regulation. (Attach additional pages, if necessary.)

Pulaski Co. Property Owners Multipurpose Improvement District 2021-2 will be chaired by Rick Ferguson who is also chairman of the Waterview Estates wastewater treatment plant. The Multipurpose Improvement District 2021-2 will use a licensed wastewater operator (Arlo Jason Cyz) that is experienced in the operation of residential treatment plants.

7. List and explain all civil or criminal legal actions by government agencies involving environmental protection laws or regulations against the Applicant* in the last ten (10) years including:

1. Administrative enforcement actions resulting in the imposition of sanctions;
2. Permit or license revocations or denials issued by any state or federal authority;
3. Actions that have resulted in a finding or a settlement of a violation; and
4. Pending actions.

(Attach additional pages, if necessary.)

Waterview Estates (WVE) Property Owners Association Inc., which is partially owned by Rick Ferguson, has the following Consent Orders issued:
- CAO US 06-031 - Resolved and closed 3-6-2005
- CAO US 21-124 - Resolved and closed 12-8-2021

* Firms or other legal entities shall also include this information for all persons and legal entities identified in sections 8-16 of this Disclosure Statement.

8. List all officers of the Applicant (add additional pages, if necessary.)

NAME: Rick Ferguson TITLE: Chairman
STREET: P. O. Box 23670
CITY, STATE, ZIP: Little Rock, AR 72221

NAME: Brock Ferguson TITLE: Commissioner
STREET: PO Box 23670
CITY, STATE, ZIP: Little Rock, AR 72221

NAME: German Jimenez TITLE: Commissioner
STREET: PO Box 23670
CITY, STATE, ZIP: Little Rock, AR 72221

9. List all directors of the Applicant. (Add additional pages, if necessary.)

NAME: Rick Ferguson TITLE: Chairman
STREET: PO Box 23670
CITY, STATE, ZIP: Little Rock, AR 72221

NAME: Brock Ferguson TITLE: Commissioner
STREET: PO Box 23670
CITY, STATE, ZIP: Little Rock, AR 72221

NAME: German Jimenez TITLE: Commissioner
STREET: PO Box 23670
CITY, STATE, ZIP: Little Rock, AR 72221

10. List all partners of the Applicant. (Add additional pages, if necessary.)

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

11. List all persons employed by the Applicant in a supervisory capacity or with authority over operations of the facility subject to this application.

NAME: Arlo J. Cyz TITLE: Treatment Plant Operator
STREET: 17 Tanglewood Drive
CITY, STATE, ZIP: Bryant, AR 72022

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

12. List all persons or legal entities, who own or control more than five percent (5%) of the Applicant's debt or equity.

NAME: Rick Ferguson TITLE: President

STREET: PO Box 23670

CITY, STATE, ZIP: Little Rock, AR 72221

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

13. List all legal entities, in which the Applicant holds a debt or equity interest of more than five percent (5%).

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

14. List any parent company of the Applicant. Describe the parent company's ongoing organizational relationship with the Applicant.

NAME: _____

STREET: _____

CITY, STATE, ZIP: _____

Organizational Relationship:

15. List any subsidiary of the Applicant. Describe the subsidiary's ongoing organizational relationship with the Applicant.

NAME: _____

STREET: _____

CITY, STATE, ZIP: _____

Organizational Relationship:

16. List any person who is not now in compliance or has a history of noncompliance with the environmental law or regulations of this state or any other jurisdiction and who through relationship by blood or marriage or through any other relationship could be reasonably expected to significantly influence the Applicant in a manner which could adversely affect the environment.

NAME: _____ **TITLE:** _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ **TITLE:** _____

STREET: _____

CITY, STATE, ZIP: _____

17. List all federal environmental agencies and any other environmental agencies outside this state that have or have had regulatory responsibility over the Applicant.

EPA and Arkansas Department of Health

18. VERIFICATION AND ACKNOWLEDGEMENT

The Applicant agrees to provide any other information the director of the Arkansas Department of Environmental Quality may require at any time to comply with the provisions of the Disclosure Law and any regulations promulgated thereto. The Applicant further agrees to provide the Arkansas Department of Environmental Quality with any changes, modifications, deletions, additions or amendments to any part of this Disclosure Statement as they occur by filing an amended Disclosure Statement.

DELIBERATE FALSIFICATION OR OMISSION OF RELEVANT INFORMATION FROM DISCLOSURE STATEMENTS SHALL BE GROUNDS FOR CIVIL OR CRIMINAL ENFORCEMENT ACTION OR ADMINISTRATIVE DENIAL OF A PERMIT, LICENSE, CERTIFICATION OR OPERATIONAL AUTHORIZATION.

COMPLETE THIS SECTION ONLY IF SUBMITTING OTHER THAN BY EPORTAL:

I, Rick Ferguson, 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 fines and imprisonment for knowing violation.

APPLICANT
SIGNATURE:



TITLE: President

DATE: 10/14/22