

FW: Ricky Lane Clark Co. Gum Springs Ar.

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Deena Thuston (adpce.ad) on behalf of Water Permit Application

Mark as unread

Thu 5/2/2024 11:07 AM

To: Nancy Koon (adpce.ad);

Flag for follow up. Start by Thursday, May 02, 2024. Due by Thursday, May 02, 2024.

📎 4 attachments

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Attached is a NOI for an ARG55 in Clark County.

**Deena Thuston** | Administrative Analyst  
**Division of Environmental Quality** | **Office of Water Quality**  
**Permits Branch**

5301 Northshore Drive | North Little Rock, AR 72118

t: 501.682.0929 | e : [deena.thuston@adeq.state.ar.us](mailto:deena.thuston@adeq.state.ar.us)

**ARKANSAS**  
ENERGY & ENVIRONMENT

**From:** Sheldon Hadley <sheldon.hadley@me.com>**Sent:** Thursday, May 2, 2024 10:35 AM**To:** Water Permit Application <Water-Permit-Application@adeq.state.ar.us>**Cc:** David Wilson <David.Wilson@arkansas.gov>; Bud Thornton <Thorntonsdozer@gmail.com>**Subject:** Ricky Lane Clark Co. Gum Springs Ar.

See attached NOI for Ricky Lane in Gum Springs Ar. located in Clark Co.  
Thanks

**ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY  
NOTICE OF INTENT  
INDIVIDUAL TREATMENT FACILITIES  
NPDES GENERAL PERMIT ARG550000**

**Application Type:**      New ☒      Renewal ☐ (Permit # ARG55 \_\_\_\_\_)

**I. PERMITTEE/OPERATOR INFORMATION**

Permittee (Legal Name): <u>Richard Lane</u>	Operator Type:
Permittee Mailing Address: <u>2038 Hasley Rd.</u>	<input type="checkbox"/> State <input type="checkbox"/> Partnership
Permittee City: <u>Arkadelphia</u>	<input type="checkbox"/> Federal <input type="checkbox"/> Corporation*
Permittee State: <u>Ar.</u> Zip: <u>71923</u>	X <input type="checkbox"/> Sole Proprietorship/Private
Permittee Telephone Number: <u>870-245-9131</u>	*State of Incorporation: _____
Permittee Fax Number: <u>N/A</u>	The legal name of the Permittee must be identical to the name listed with the Arkansas Secretary of State.
Permittee E-mail Address: <u>Rickylane870@yahoo.com</u>	

**II. INVOICE MAILING INFORMATION (Home owners are exempt.)**

Invoice Contact Person: <u>N/A</u>	City: <u>N/A</u>
Invoice Mailing Company: <u>N/A</u>	State: <u>N/A</u> Zip: <u>N/A</u>
Invoice Mailing Address: <u>N/A</u>	Telephone: <u>N/A</u>

**III. FACILITY INFORMATION**

Facility Name: <u>Richard Lane ATU</u>	Facility Contact Person: <u>Richard Lane</u>
Facility Address: <u>2039 Hasley Rd.</u>	Telephone Number: <u>870-245-9131</u>
Facility County: <u>Clark</u>	Facility City, State & Zip: <u>Arkadelphia, Ar. 71923</u>
Facility Latitude: <u>34 Deg 1 Min 27.8394 Sec</u>	Facility Longitude: <u>-93 Deg 5 Min 4.5594 Sec</u>
Datum	
Accuracy: <u>20m</u> Method: <u>GPS</u>	: <u>NAD83</u> Scale: <u>N/A</u> Description: <u>Driveway</u>

**IV. DISCHARGE INFORMATION**

Outfall Number: <u>1</u>	Flow: <u>150 gpd (Gallons per Day)</u>
Stream Segment: <u>2G</u>	Hydrologic Basin Code: <u>8040103</u>
Outfall Latitude: <u>34 Deg 1 Min 27.9912 Sec</u>	Outfall Longitude: <u>-93 Deg 5 Min 8.1594 Sec</u>
Datum	
Accuracy: <u>20m</u> Method: <u>GPS</u>	: <u>NAD83</u> Scale: <u>N/A</u> Description: <u>Discharge</u>
Type of Treatment: <u>NORWECO Singulair Green CL2 disinfection</u>	
Receiving Stream: <u>Ouachita</u>	

**V. FACILITY PERMIT INFORMATION**

NPDES Individual Permit Number (If Applicable): <u>AR00N/A</u>	
NPDES General Permit Number (If Applicable): <u>ARG550000</u>	
State Construction Permit Number: <u>N/A</u>	
NPDES General Construction Stormwater Permit Number (If Applicable): <u>ARR15N/A</u>	

WATER DIVISION  
5301 NORTHSORE DRIVE / NORTH LITTLE ROCK, ARKANSAS 72118  
PHONE 501-682-0623 / FAX 501-682-0880  
www.adeq.state.ar.us

## VI. OTHER INFORMATION:

Operator Name: Sheldon Hadley  
Operator License Number: 007836 License Class: II  
  
Consultant Contact Name: N/A  
Consultant Email Address: N/A  
Consultant Address: N/A City: N/A State: N/A Zip: N/A  
Consultant Phone Number: N/A Consultant Fax Number: N/A

Has this treatment system been approved by AHD? Yes ☒ No ☐

### Disclosure Statements:

Arkansas Code Annotated Section 8-1-106 requires that all applicants for the issuance or transfer of any permit, license, certification or operational authority issued by the Arkansas Department of Environmental Quality (ADEQ) file a disclosure statement with their applications. The filing of a disclosure statement is mandatory. No application can be considered complete without one. You must submit a new disclosure statement even if you have one on file with the Department. The form may be obtained from ADEQ web site at: [http://www.adeq.state.ar.us/disclosure\\_stmt.pdf](http://www.adeq.state.ar.us/disclosure_stmt.pdf).

## VII. CERTIFICATION OF OPERATOR

     (Initial) "I certify that, if this facility is a corporation, it is registered with the Secretary of the State of Arkansas."

→ SL (Initial) "I certify that the cognizant official designated in this Application is qualified to act as a duly authorized representative under the provisions of 40 CFR 122.22(b). If no cognizant official has been designated, I understand that the Department will accept reports signed only by the Applicant."

→ SL (Initial) "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 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."

→ Responsible Official Printed Name: Richard A Lane Title: Homeowner

→ Responsible Official Signature: [Signature] Date: 4/29/24 →

→ Responsible Official Email: ricky lane870@yahoo.com

Cognizant Official Printed Name: N/A Title: N/A

Cognizant Official Signature: N/A Telephone: N/A

Cognizant Official Email: N/A

## X. PERMIT REQUIREMENT VERIFICATION

Please check the following to verify completion of permit requirements.

Yes No \* If No is answered for any of the questions, then a permit can not be issued!

Submittal of Complete NOI? ☒ ☐

Submittal of Required Permit Fee? ☐ ☒ Check Number: Private Homeowner

Submittal of AHD Form EHP-19? ☒ ☐

Submittal of Site Map? ☒ ☐

Submittal Statement of Disclosure Statement? ☐ ☒ Private Homeowner

WATER DIVISION  
5301 NORTHSORE DRIVE / NORTH LITTLE ROCK, ARKANSAS 72118  
PHONE 501-682-0623 / FAX 501-682-0880  
[www.adeq.state.ar.us](http://www.adeq.state.ar.us)



# Arkansas Department of Health

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4815 West Markham Street • Little Rock, Arkansas 72205-3867 • Telephone (501) 661-2000

**Governor Sarah Huckabee Sanders**

**Renee Mallory, RN, BSN, Secretary of Health**

**Jennifer Dillaha, MD, Director**

April 10, 2024

Richard Lane  
2038 Hasley Rd.  
Arkadelphia, AR 71923  
Permit # 26649350

The plans and specifications for the above captioned project have been received and reviewed. Please be advised that as the owner you are responsible for the following:

1. All costs relating to the operation and maintenance of the system.
2. Meeting all effluent requirements.
3. Financial responsibility for effluent monitoring and sampling by a Certified Maintenance Person.
4. Filing for the National Pollutant Discharge Elimination System (NPDES) General Permit (ARG550000) permit with the Arkansas Department of Environmental Quality before any construction begins.
5. Any changes from the specified design will require a new maintenance contract and a resubmission of the permit.
6. This approval is for an on-site retention scheme for all effluent generated from the specified residence on the permit on 15.58 acres near 2038 Hasley Rd. Arkadelphia, Arkansas in Clark County. Any off-site discharge or further subdivision of the property may void this approval. Additional measures to ensure on-site retention of all sewage effluent generated may be required at a later date should the discharge leave the property.

This system must be installed to meet the specifications for the design attached to the construction permit, and installation should not begin until the installer has reviewed these specifications. Health Department approval of this project does not release the owner of any liability resulting from the discharge of sewage effluent.

If you have any questions, please contact the local environmental health specialist at your local health department.

Sincerely

David Wilson, EHS  
Southwest Region Onsite Specialist  
Arkansas Department of Health  
870-260-6851





Arkansas Department of Health  
Environmental Health Protection

Receipt Number  
**26649350**

Individual Onsite Wastewater System Permit Application

Permit Type ☒ New Installation  
☐ Alteration / Repair

DR Environmental ID #

7 6 0 2 1 1 7 1 6 8

Fee Schedule for Structures		V
Structures 1500 sq ft or less	\$ 30.00	<input checked="" type="checkbox"/>
Structures more than 1500 sq ft and up to 2000 sq ft	\$ 45.00	<input type="checkbox"/>
Structures more than 2000 sq ft and up to 3000 sq ft	\$ 90.00	<input type="checkbox"/>
Structures more than 3000 sq ft and up to 4000 sq ft	\$120.00	<input type="checkbox"/>
Structures more than 4000 sq ft	\$150.00	<input type="checkbox"/>
Alteration and Repair	\$ 30.00	<input type="checkbox"/>

Part 1 Application

Treatment Type (check one)

Disposal Method (check one)

- ☐ STD = Standard Septic Tank  
☐ ISF = Intermittent Sand Filter  
☐ PMF = Proprietary Media Filter  
☐ OTH = Other (Describe)
- ☒ ATU = Aerobic Treatment Unit  
☐ RSF = Re-circulating Sand Filter  
☐ RGF = Re-circulating Gravel Filter  
☐ HLD = Holding Tank
- ☐ STD = Standard Absorption Field  
☒ SUR = Surface Discharge  
☐ CPF = Capping Fill  
☐ OTH = Other
- ☐ LPD = Low Pressure Distribution  
☐ HLD = Holding Tank  
☐ SRL = Serial Distribution  
☐ DRP = Drip Irrigation

1. Owner's/Applicant's Name Richard Lane and Roger Lane		2. Phone Number 870-245-9131 Ricky 870-245-9111- Roger	
3. Mailing Address 2049 Hasley Rd. Arkadelphia, AR 71923		4. County Clark	
5. Address of Proposed System (If a 911 address is not available, attach detailed directions or map) 2038 Hasley Rd. Arkadelphia, AR 71923			
6. Subdivision Name NA	7. Approval Date NA	8. Date Recorded NA	9. Lot Number NA
10. Lot Dimensions App. 1013'x260'x221'x208'x234'x190'x931'x649'	11. Total Area (Acres) 15.58	12. # Bedrooms # People 1 Bedroom Shop	13. Daily Flow (GPD) 150
14. Brief Legal Description of Property (Attach a separate sheet of paper, if necessary) Part of the S 1/2 N 1/2 SW 1/4 of Section 19, Township 8S, Range 19 W			
15. Water Supply (Specify supplier if Public Water) Gum Springs Water		16. GPS Coordinates Discharge 34.024442 -93.085600 34°01'27.99" -93°05'08.16"	

17. Loading Rates		(gpd/ft <sup>2</sup> )		18. System Specifications			
Primary Area	No Load	a. Size of Septic Tank	500GPD ATU	gal	f. Trench Depth	NA	inches
Secondary Area	No Load	b. Size of Dose Tank	NA	gal	g. Trench Spacing	NA	feet
Percolation Test	(min/in)	c. Absorption Area	NA	ft <sup>2</sup>	h. Trench Media (List Below)		i. Trench Width
Primary Area Avg	NA	d. Number of Field Lines	NA		NA		NA in
Secondary Area	NA	e. Length of Field Lines	NA	ft	NA		NA in

TO THE OWNER

The permit for construction may be deemed invalid by the local Environmental Health Specialist before the start of construction, if the site and/or soil conditions have changed after approval of this permit, or if the information within this permit is inaccurate or has been found to be misrepresented. Approval for operation does not constitute a guarantee that the system will function properly. The approval states that the system was designed and installed according to the Arkansas Department of Health, Rules and Regulations Pertaining to Onsite Wastewater Systems, unless there are exceptions or deviations noted in the comments. A Permit for Construction is valid for one (1) year from the date of approval. The authorized agent must revalidate a permit more than one (1) year old prior to the start of any construction.

19. Utilization Verification

I hereby attest that item 12, the number of bedrooms (number of persons for commercial) and square footage of the structure that will utilize the designed individual onsite wastewater system in this permit application, is accurate. I have reviewed the permit application and understand the layout, installation, maintenance, operation and expense(s) that may be associated with this system.

Owner/Applicant Signature See attached EHP-19, Opt A Date 3/30/24

20. I certify that I have conducted the above tests and that the above listed information is in accordance with the latest requirements of the Arkansas Department of Health Rules and Regulations Pertaining to Onsite Wastewater Systems.

*Bud Thornton*

Designated Representative Soil Certified ☒ Yes ☐ No

Bud Thornton

Title

501-282-7814

Print Name

3/30/24

Date

Phone Number

21. Approval of Health Authority

The information and specifications in the application has been reviewed and found to meet the requirements of the Arkansas Department of Health Rules and Regulations Pertaining To Onsite Wastewater Systems. A PERMIT FOR CONSTRUCTION is hereby issued.

*David Libson*

331

4-10-24

Environmental Specialist Signature

EHS Number

Date

## Individual Onsite Wastewater System Permit Application

Receipt Number

Continue Part 1

22. Soil Criteria (Primary Area)		Indicate the depth to items a-f, if observed in the soil (designate in inches)					
a. Bedrock	b. BSWT	c. MSWT	d. LSWT	e. Adj. MSWT	f. Adj. LSWT	g. H.C./Depth	h. Loading Rate (gpd/ft <sup>2</sup> )
48"+	3"	6"	16"	5"	10"	Mod	No Load
23. Soil Criteria (Secondary Area)		Indicate the depth to items a-f, if observed in the soil (designate inches)					
a. Bedrock	b. BSWT	c. MSWT	d. LSWT	e. Adj. MSWT	f. Adj. LSWT	g. H.C./Depth	h. Loading Rate (gpd/ft <sup>2</sup> )
48"+	1"	4"	16"	3"	9"	Mod	No Load
24. Seasonal Water Table (SWT) Classes Detail							
Primary Area			List Redoximorphic Features and/or Clay Content Restrictions				
Brief	3	in	FE Concentrations and Depletions				
Moderate	6	in	Chroma 2 Depletions				
Long	16	in	Chroma 2 Depletions in greater than 50% of mass				
Secondary Area			List Redoximorphic Features and/or Clay Content Restrictions				
Brief	1	in	FE Concentrations and Depletions				
Moderate	4	in	Greater than 20% Chroma 3 depletions				
Long	16	in	Chroma 2 Depletions in greater than 50% of mass				
Comments SWT too high. No load. Also pit # 3 in field Brief-2" Moderate 2"							

## Part 2 Installation Inspection

Septic tank manufacturer	Pump information
Septic tank material	Trench media and width
Dose tank manufacturer	Depth of interceptor drain
Dose tank material	Depth of settled fill
Name of Installer	License Number
Installation Inspected by <input type="checkbox"/> Environmental Health Specialist <input type="checkbox"/> Designated Representative (check one or installer signs System Installation Verification below)	
Signature	EHS / License Number Date
System Installation Verification I have installed this system as designed and in compliance with all Rules and Regulations Pertaining to Onsite Wastewater Systems.	
Installer Signature	License Number Date

## Part 3 Permit for Operation

The information contained in Part 1 and 2 of this form has been reviewed and found to meet the requirements of the Arkansas Department of Health. THE PERMIT FOR OPERATION of this system is hereby issued.		
Environmental Health Specialist	Signature	EHS Number Date
Comments		
Site Revalidation conducted by <input type="checkbox"/> Environmental Health Specialist <input type="checkbox"/> Designated Representative (check one)		
Signature	EHS / License Number	Date



Clark County Health UNIT

605 S 10th St, Arkadelphia, AR 71923

Follow S 10th St and Walnut St to US-67 S

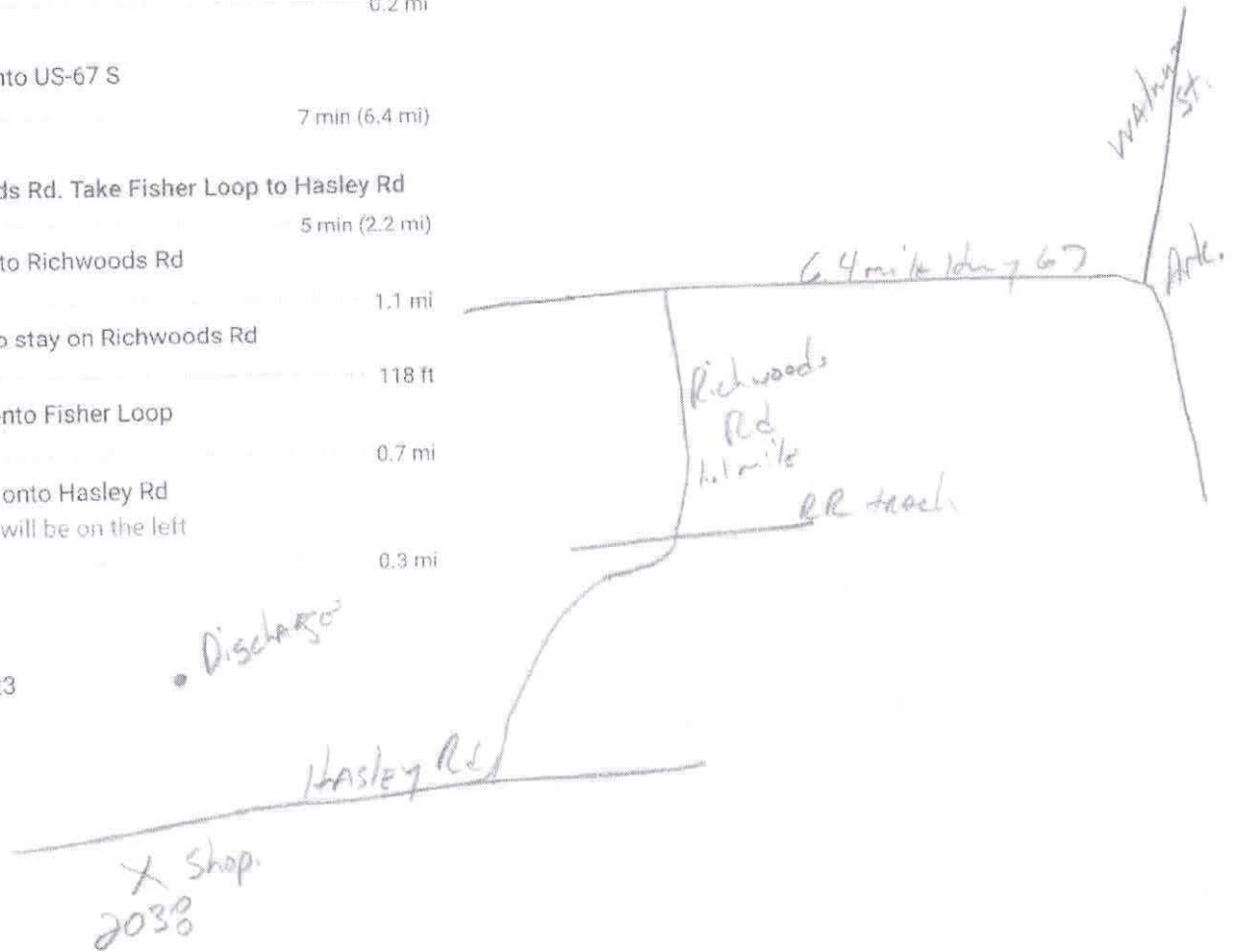
- 1 min (0.4 mi)  
↑ 1. Head south on S 10th St toward O'Connell St
- 0.1 mi  
← 2. Keep left to stay on S 10th St
- 308 ft  
← 3. Turn left onto Walnut St
- 0.2 mi  
→ 4. Turn right onto US-67 S
- 7 min (6.4 mi)

Continue on Richwoods Rd. Take Fisher Loop to Hasley Rd

- 5 min (2.2 mi)  
← 5. Turn left onto Richwoods Rd
- 1.1 mi  
→ 6. Turn right to stay on Richwoods Rd
- 118 ft  
→ 7. Turn right onto Fisher Loop
- 0.7 mi  
↗ 8. Slight right onto Hasley Rd
- 0.3 mi  
① Destination will be on the left

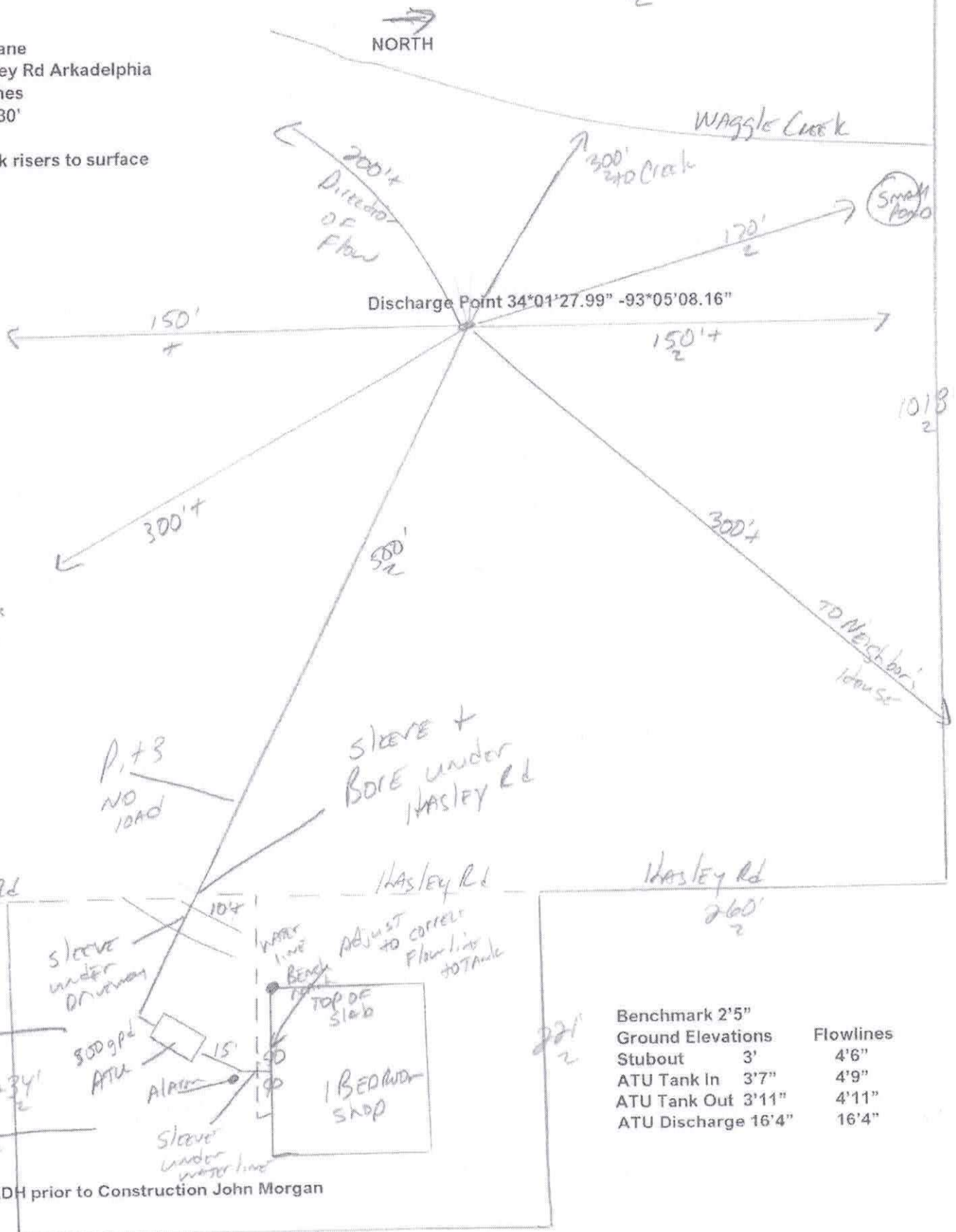
2038 Hasley Rd

Arkadelphia, AR 71923



Richard Lane  
2038 Hasley Rd Arkadelphia  
18" trenches  
Scale 1"=30'

Install tank risers to surface



Waterline must be installed at least 10' from any part of the septic system  
Bud Thornton 501-282-7814