



# ARG (NPDES non-stormwater general permit) Notice of Intent - ARG160000, ARG250000, ARG500000, ARG550000, ARG640000, ARG670000, ARG750000, and ARG790000 Applications for New Permit Coverage

version 1.23

(Submission #: HQ6-DX57-HF0Q5, version 1)

## Details

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Submission ID HQ6-DX57-HF0Q5

## Form Input

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### Type of Permit Application

#### Permit Type

ARG550000 - Individual Treatment System for Domestic Waste

#### Is this permit for an individual homeowner?

Yes

#### Initial Fee (in dollars)

0

#### Total Fee due with Application (in dollars)

0

### ARG550000: Specific Information

#### Exclusions

Please note that the following discharges are excluded from coverage under the ARG550000 general permit:

1. Systems with multiple discharges,
2. Facilities requiring financial assurance in accordance with Arkansas Code Annotated 8-4-203(b), and
3. Discharges that include non-domestic waste

**I certify that to the best of my knowledge, this facility is not subject to the exclusions listed above.**

Yes

#### Other Exclusions

In addition to the above exclusion, waterbody-specific exclusions and/or other exclusions may be applicable.

See the permit for details:

<https://www.adeq.state.ar.us/downloads/WebDatabases/PermitsOnline/NPDES/Permits/ARG550000.pdf>

The Aquaview application may be useful if you wish to check the status of receiving waters for the facility:

<https://arkansasdeq.maps.arcgis.com/apps/webappviewer/index.html?id=fb5a6aa70fd940cda4c9a3d7bc2fbb15>

#### Site Map

Please attach a site map that shows the following:

1. Entrance/driveway of the facility/residence,

- 2. Location of the treatment system, and
- 3. Location of the outfall

Site Map

Patricia Jackson home.pdf - 09/05/2024 03:39 PM

Comment

NONE PROVIDED

Please attach approval from the Arkansas Department of Health (typically the EHP-19 form)

EHP-19 Patricia Jackson.pdf - 09/05/2024 03:39 PM

Comment

NONE PROVIDED

Permittee Information

AFIN (Enter if available)

NONE PROVIDED

Permittee (Legal Name)

The permittee means any person (an individual, association, partnership, corporation (i.e. LLC or Inc.), municipality, state, or federal agency) who has the primary management and ultimate decision-making responsibility over the operation of a facility or activity.

For individual homeowners, the permittee must be the name of the homeowner or homeowners, e.g. "Jane Doe" or "John and Jane Doe"

For corporations, the permittee legal name must be an EXACT MATCH with the Arkansas Secretary of State (including all punctuation). Below is a link to verify the match:

[Arkansas Secretary of State](#)

Permittee (Legal Name)

Patricia Jackson

Permittee Type

Individual Homeowner

Permittee Mailing Information

Prefix

Ms.

First Name

Patricia

Middle Name

NONE PROVIDED

Last Name

Jackson

Title

NONE PROVIDED

Phone Type

Mobile

Number

5013725816

Extension

Email

carsonassociates@yahoo.com

Address

1310 W DAISY L GATSON BATES DR  
LITTLE ROCK, AR 72202

Is the invoice address the same as the mailing address for permit documents?

Yes

Is there an active consultant for this facility?

Yes

Consultant Information

Prefix

Mr.

First Name

Jon

Middle Name

Jon

Last Name

Miller

Title

Designated Representative

Consulting Firm Name

Miller Septic Design

Phone Type

Mobile

Number

501-834-4080

Extension

Email

jkmiller@aristotle.net

Address

420 SIMLER RD

SHERWOOD, AR 72120

United States

Facility/Site Information

Facility/Site Name

10123 Chrystal Hill Road

Location of the Facility/Site

Please provide the 911 address if available. If a 911 address is not available, please provide a description of the site location (e.g. 0.5 miles north of intersection of A Street and B Street).

Facility/ Site Information

Facility/Site Contact

Prefix

Ms.

First Name

Patricia

Middle Name

NONE PROVIDED

Last Name

Jackson

Title

Homeowner

Phone Type

Other

Number

5013725816

Extension

Email

carsonassociates@yahoo.com

Facility/Site Address

10123 CRYSTAL HILL RD

N LITTLE ROCK, AR 72113

Facility County (if the facility/site is in multiple counties, choose "other" and explain)

Pulaski

Coordinates of the Facility/Site Entrance. This should be the driveway or front gate for most facilities, or the location of the project trailer/other local staging point for hydrostatic testing

34.818007,-92.374130

Common SIC & NAICS Codes

| Facility Type                           | SIC Code | NAICS Code |
|---|----------|------------|
| Individual Homeowner (sewage treatment) | 4952     | 221320     |

| Facility Type                                      | SIC Code | NAICS Code |
|--|----------|------------|
| Solid Waste Landfill                               | 4953     | 562212     |
| Construction Sand and Gravel                       | 1442     | 212321     |
| Crushed and Broken Limestone                       | 1422     | 212321     |
| Crushed and Broken Stone, Not Elsewhere Classified | 1429     | 212319     |
| Water Supply                                       | 4941     | 221310     |
| Carwashes  | 7542     | 811192     |

For other SIC and NAICS codes, you can search the following website:

<https://www.naics.com/search/>

**Primary SIC Code**

4952

**Primary NAICS Code**

221320

**Other applicable SIC codes and/or NAICS codes**

NONE PROVIDED

**Permit Numbers and/or names of any permits issued by DEQ or EPA for an activity located in Arkansas that is presently held by the applicant or its parent or subsidiary corporation**

| Permit Name | Permit Number | Held By |
|-------------|---------------|---------|
|-------------|---------------|---------|

Licensed Wastewater Operator(s) (if applicable). ARG55 coverage requires a Class II Municipal or higher license. ARG64 coverage requires a Class I Municipal or Basic Industrial, or higher license. ARG16 and ARG79 coverage requires a Basic Industrial or higher license or higher. ARG67 coverage does not require a licensed operator. Other ARG coverage may or may not require a licensed operator depending on the type of treatment, see the permits for details.

| Operator Name | License Number | Municipal License Class | Industrial License Class |
|---------------|----------------|-------------------------|--------------------------|
|---------------|----------------|-------------------------|--------------------------|

## Discharge/Outfall Information

### Receiving Stream Information

Below is a link the DEQs AquaView Mapping Tool that may be useful for receiving stream information and ultimate receiving stream information. You can also check for special waterbody designations and impairments that could exclude discharges from coverage under a general permit.

[Aquaview](#)

**The outfall latitude and longitude must be entered in decimal format (like 36.1234, -92.1234). Do you have a Degree/Minute/Second measurement (like 36°12'34.56", 92°12'34.56") that you need to convert?**

No

### Outfall Information

| Outfall Number | Latitude | Longitude | Estimated Flow - Please include units, such as MGD or GPD | Effluent Description | Name of Receiving Stream (i.e. an unnamed tributary of Mill Creek, thence into Mill Creek, thence into the Arkansas River) | Type of Treatment System (Include all components of the treatment system. Can be "none" if no treatment is used) | Coordinates Check |
|----------------|----------|-----------|---|----------------------|--|--|-------------------|
|----------------|----------|-----------|---|----------------------|--|--|-------------------|

| Outfall Number | Latitude      | Longitude     | Estimated Flow - Please include units, such as MGD or GPD | Effluent Description   | Name of Receiving Stream (i.e. an unnamed tributary of Mill Creek, thence into Mill Creek, thence into the Arkansas River) | Type of Treatment System (Include all components of the treatment system. Can be "none" if no treatment is used) | Coordinates Check |
|----------------|---------------|---------------|---|------------------------|--|--|-------------------|
| 001            | 34.818007     | -92.374130    | 740 GPD   | Treated sanitary waste | unnamed tributary thence Arkansas river  | Aerobic treatment with re-aeration and chlorine  | NONE PROVIDED     |
| NONE PROVIDED  | NONE PROVIDED | NONE PROVIDED | NONE PROVIDED   | NONE PROVIDED          | NONE PROVIDED  | NONE PROVIDED  | NONE PROVIDED     |
| NONE PROVIDED  | NONE PROVIDED | NONE PROVIDED | NONE PROVIDED   | NONE PROVIDED          | NONE PROVIDED  | NONE PROVIDED  | NONE PROVIDED     |

## Responsible and Cognizant Official Information

### Cognizant Official (duly authorized representative)

40 CFR 122.22(b) states that all reports required by the permit, or other information requested by the Director, shall be signed by the applicant (or person authorized by the applicant) or by a duly authorized representative of that person. A person is a duly authorized representative only if:

- (1) the authorization is made in writing by the applicant (or person authorized by the applicant);
- (2) the authorization specifies either an individual or a position having responsibility for the overall operation of the regulated facility or activity responsibility, or an individual or position having overall responsibility for environmental matters for the company.

### Cognizant Official Designation

No Cognizant Official - the Responsible Official will sign all reports and other required documents

### Responsible Official

In accordance with 40 CFR 122.22, all NOI shall be signed as follows:

- 1) For a corporation: by a responsible corporate officer. For purposes of this section, a responsible corporate officer means:
  - a. A president, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation; or
  - b. The manager of one or more manufacturing, production, or operating facilities, provided, the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to ensure long term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.
- 2) For a partnership or sole proprietorship: by a general partner or the proprietor, respectively;
- 3) For a municipality, State, Federal or other public agency: by either a principal executive or ranking elected official. For purposes of this section, a principal executive officer of a Federal agency includes:
  - a. The chief executive officer of the agency; or
  - b. A senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency.

For individual homeowners seeking coverage under the ARG550000 general permit, the homeowner is the responsible official. For joint ownership, one of the co-owners must sign as the responsible official.

Responsible Official Information

Prefix

Ms.

| First Name | Middle Name   | Last Name |
|------------|---------------|-----------|
| Patricia   | NONE PROVIDED | Jackson   |

Title

Homeowner

| Phone Type | Number | Extension |
|------------|--------|-----------|
|------------|--------|-----------|

|       |              |  |
|-------|--------------|--|
| Other | 501-372-5816 |  |
|-------|--------------|--|

Email

NONE PROVIDED