# ARG (NPDES non-stormwater general permit) Notice of Intent - ARG160000, ARG250000, ARG500000, ARG550000, ARG6400000, ARG670000, ARG750000, and ARG790000 Applications for New Permit Coverage

Digitally signed by:
nform
DPEPORTALIIS.ADPCEDM
Date: 2025.01.13 16:18:01 -06:00
Reason: Copy Of Record
Location: North Little Rock, Arkansas

version 1.30

(Submission #: HQ9-BFKK-490ZF, version 2)

## **Details**

Reference # ARG550894

Submission ID HQ9-BFKK-490ZF

# Form Input

# 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.adeg.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: <a href="https://arkansasdeq.maps.arcgis.com/apps/webappviewer/index.html?id=fb5a6aa70fd940cda4c9a3d7bc2fbb15">https://arkansasdeq.maps.arcgis.com/apps/webappviewer/index.html?id=fb5a6aa70fd940cda4c9a3d7bc2fbb15</a>

#### Site Map

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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

<u>Jared Myrkle - Entrance Overhead.png - 01/02/2025 04:50 PM</u> <u>Jared Myrkle - System Location.png - 01/02/2025 04:50 PM</u> <u>Jared Myrkle - Discharge.png - 01/02/2025 04:50 PM</u>

Comment

NONE PROVIDED

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

Jared Myrkle EHP-19.pdf - 01/02/2025 04:32 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 lnc.), 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:

<u>Arkansas Secretary of State</u>

#### Permittee (Legal Name)

Jared Myrkle

## **Permitee Type**

Individual Homeowner

## **Permittee Mailing Information**

**Prefix** 

Mr.

First Name Middle Name Last Name
Jared NONE PROVIDED Myrkle

**Title** 

NONE PROVIDED

Phone Type Number Extension

Mobile 630-956-3765

**Email** 

jmyrkle@icloud.com

**Address** 

856 Hwy 27 N

Murfreesboro, AR 71958

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

Yes

## Is there an active consultant for this facility?

Yes

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#### **Consultant Information**

**Prefix** 

NONE PROVIDED

**First Name** Middle Name Last Name Matthew Tyler Johnson

**Title** 

CMP / Installer

Consulting Firm Name NONE PROVIDED

Phone Type Number Extension

Mobile 870-584-6664

**Email** 

johnsonsofdq@yahoo.com

**Address** 

PO Box 123

876 Johnson Bridge Road De Queen, AR, AR 71832

**United States** 

# Facility/Site Information

## **Facility/Site Name**

Jared Myrkle

## 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** 

Mr.

First Name Middle Name Last Name
Jared NONE PROVIDED Myrkle

Title

Homeowner

Phone Type Number Extension

Mobile 630-956-3765

**Email** 

jmyrkle@icloud.com

**Facility/Site Address** 

856 Hwy 27 N

Murfreesboro, AR 71958

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

Dika

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

34.08102883749871,-93.66844057906971

#### **Common SIC & NAICS Codes**

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Facility Type	SIC Code	NAICS Code
Individual Homeowner (sewage treatment)	4952	221320
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
Sheldon Hadley	007836	II	N/A

# **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 36.1234.56", 92.1234.56") that you need to convert?

## **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
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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	34.081000	-93.667430	370	Treated Effluent From an ATU	Unamed tributary, thence to Spring Creek, thence to Prairie Creek, thence to Little Missouri River, thence to Ouachita River	Clearstream 600 with UV Light Disinfection	NONE PROVIDED
NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE
PROVIDED	PROVIDED	PROVIDED	PROVIDED	PROVIDED	PROVIDED	PROVIDED	PROVIDED
NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE
PROVIDED	PROVIDED	PROVIDED	PROVIDED	PROVIDED	PROVIDED	PROVIDED	PROVIDED

## CORRECTION REQUEST (CORRECTED)

#### **Correct Stream Path**

The correct stream path should be "Unnamed tributary, thence to Spring Creek, thence to Prairie Creek, thence to Little Missouri River, thence to Ouachita River"

Created on 1/13/2025 11:01 AM by Ryan Grandgenett

#### 1 COMMENT

Matthew Johnson (johnsonsofdq@yahoo.com) (1/13/2025 4:10 PM)

Corrected

# 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

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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** 

NONE PROVIDED

First Name Middle Name Last Name
Jared NONE PROVIDED Myrkle

**Title** 

Homeowner

Phone Type Number Extension

Mobile 630-956-3765

**Email** 

jmyrkle@icloud.com

## Revisions

Revision	Revision Date	Revision By
Revision 1	1/2/2025 4:29 PM	Matthew Johnson
Revision 2	1/13/2025 4:07 PM	Matthew Johnson

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