

ARG640000 Recertification Notice of Intent for Water Treatment Facilities with a Wastewater Discharge

version 1.8

(Submission #: HPA-ARNV-3CADC, version 1)

Details

Submitted	7/19/2021 (35 days ago) by Mark Yardley
AFIN	17-00059
Reference #	ARG640009
Submission ID	HPA-ARNV-3CADC
Description	Recertification ARG640009- City of Alma WWTP
Submission Reason	Renewal
Submission Assigned Staff	Barry Manasco
Status	Submitted

Form Input

Review Existing Permittee Information

Facility/Contact Information

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

For the purpose of this permit, the permittee refers "Permittee" means any person (any state agency, municipality, governmental subdivision of the state or the United States, public or private corporation, individual, partnership, association, or other entity) who has the primary management and decision-making responsibility over a permitted operation, facility, or activity. The permittee is responsible for ensuring compliance with all applicable environmental regulations and conditions. The permittee is the entity named as such on an individual permit or the entity covered by a general permit.

If the permittee is a corporation, the permittee legal name has to be an identical match with the Arkansas Secretary of State. Below is a link to verify the legal name:

[Arkansas Secretary of State Business Entity Search Website](#)

Permit Number

ARG640009

AFIN

17-00059

Permittee Legal Name

City of Alma

Facility Name

Alma Water Treatment Plant

Facility Address

643 City Park Road

Facility City

Alma

Facility State

AR

Facility Zip Code

72921

Mailing Address

811 Fayetteville Ave.

Mailing Address City

Alma

Mailing Address State

AR

Mailing Address Zip Code

72921

Responsible Official Name & Title

Mark Yardley

Responsible Official Email

mark@cityofalma.org

Cognizant Official Name & Title

Mark Yardley

Cognizant Official Email

NONE PROVIDED

Primary Phone Number

(479) 632-4169

Contact Person

Mark Yardley

Contact Person Email

mark@cityofalma.org

Contact Person Phone Number

479-632-4169

Invoice Address (line 1)

MARK YARDLEY

Invoice Address (line 2)

CITY OF ALMA

Invoice Address (line 3)

811 FAYETTEVILLE AVE

Invoice Address City

ALMA

Invoice Address State

AR

Invoice Address Zip Code

729210000

Outfall Information

First Outfall Number

101

First Outfall Latitude Degrees

35

First Outfall Latitude Minutes

29

First Outfall Latitude Seconds

38

First Outfall Longitude Degrees

-94

First Outfall Longitude Minutes

13

First Outfall Longitude Seconds

23

Second Outfall Number (if applicable)

NONE PROVIDED

Second Outfall Latitude Degrees (if applicable)

NONE PROVIDED

Second Outfall Latitude Minutes (if applicable)

NONE PROVIDED

Second Outfall Latitude Seconds (if applicable)

NONE PROVIDED

Second Outfall Longitude Degrees (if applicable)

NONE PROVIDED

Second Outfall Longitude Minutes (if applicable)

NONE PROVIDED

Second Outfall Longitude Seconds (if applicable)

NONE PROVIDED

Third Outfall Number (if applicable)

NONE PROVIDED

Third Outfall Latitude Degrees (if applicable)

NONE PROVIDED

Third Outfall Latitude Minutes (if applicable)

NONE PROVIDED

Third Outfall Latitude Seconds (if applicable)

NONE PROVIDED

Third Outfall Longitude Degrees (if applicable)

NONE PROVIDED

Third Outfall Longitude Minutes (if applicable)

NONE PROVIDED

Third Outfall Longitude Seconds (if applicable)

NONE PROVIDED

Is the above outfall information correct?

Yes

Conditional Monitoring Requirements

Instructions

Please check if our current information on file for this permit regarding water source, usage of aluminum-based coagulants in the treatment process, and usage of chlorination is correct. If any of the items is incorrect, please select "No" for the question at the end of this section.

Facility uses groundwater as a water source

No

Facility uses aluminum-based coagulants in the treatment process

Yes

Facility uses chlorinated water for filter backwash, AND the treatment pond(s) retention time is less than 24 hours

No

Is the above information about water source, aluminum-based coagulant usage, and chlorination/pond(s) retention time correct?

Yes

Monitoring Frequency Reductions

Please refer to Part 3.4 of the permit for more information.

[Click here to view Part 3.4 of the Permit](#)

Does the facility have reduced monitoring frequency requirements for Aluminum, Iron, Manganese, TRC, or TSS?

Yes

Facility/Contact info Corrections

Instructions

Include any necessary corrections in this form. If the permittee legal name or facility name needs to be corrected, a permit transfer form must be attached to this submission.

Permittee Legal Name (currently in DEQ's records)

City of Alma

Permittee Legal Name (correction, if needed)

NONE PROVIDED

Permit Transfer Form

If the Permittee Legal Name changes, a Permit Transfer Form will be required to be submitted with this Recertification Notice of Intent. The Permit Transfer Form is found at

the link below. Please fill out the Permit Transfer Form and attach the form to this Recertification Notice of Intent.

[Click here to view the Permit Transfer Form online](#)

Attach the Permit Transfer Form

NONE PROVIDED

Comment

NONE PROVIDED

Facility Name (currently in DEQ's records)

Alma Water Treatment Plant

Facility Name (correction, if needed)

NONE PROVIDED

Facility Address (currently in DEQ's records)

643 City Park Road

Facility Address (correction, if needed)

NONE PROVIDED

Facility City (currently in DEQ's records)

Alma

Facility City (correction, if needed)

NONE PROVIDED

Facility State (currently in DEQ's records)

AR

Facility State (correction, if needed)

NONE PROVIDED

Facility Zip Code (currently in DEQ's records)

72921

Facility Zip Code (correction, if needed)

NONE PROVIDED

Mailing Address (currently in DEQ's records)

811 Fayetteville Ave.

Mailing Address (correction, if needed)

NONE PROVIDED

Mailing Address City (currently in DEQ's records)

Alma

Mailing Address City (correction, if needed)

NONE PROVIDED

Mailing Address State (currently in DEQ's records)

AR

Mailing Address State (correction, if needed)

NONE PROVIDED

Mailing Address Zip Code (currently in DEQ's records)

72921

Mailing Address Zip Code (correction, if needed)

NONE PROVIDED

Responsible Official Name & Title (currently in DEQ's records)

Mark Yardley

Responsible Official Name & Title (correction, if needed; for example: John Doe, President)

NONE PROVIDED

Responsible Official Email (currently in DEQ's records)

mark@cityofalma.org

Responsible Official Email (correction, if needed)

NONE PROVIDED

Cognizant Official Name & Title (currently in DEQ's records)

Mark Yardley

Cognizant Official Name & Title (correction, if needed; for example: John Doe, President)

NONE PROVIDED

Cognizant Official Email (currently in DEQ's records)

NONE PROVIDED

Cognizant Official Email (correction, if needed)

NONE PROVIDED

Primary Phone Number (currently in DEQ's records)

(479) 632-4169

Primary Phone Number (correction, if needed)

NONE PROVIDED

Contact Person (currently in DEQ's records)

Mark Yardley

Contact Person (correction, if needed)

NONE PROVIDED

Contact Person Email (currently in DEQ's records)

mark@cityofalma.org

Contact Person Email (correction, if needed)

NONE PROVIDED

Contact Person Phone Number (currently in DEQ's records)

479-632-4169

Contact Person Phone Number (correction, if needed)

NONE PROVIDED

Invoice Address (line 1; currently in DEQ's records)

MARK YARDLEY

Invoice Address (line 1; correction, if needed)

NONE PROVIDED

Invoice Address (line 2, if applicable; currently in DEQ's records)

CITY OF ALMA

Invoice Address (line 2, if applicable; correction, if needed)

NONE PROVIDED

Invoice Address (line 3, if applicable; currently in DEQ's records)

811 FAYETTEVILLE AVE

Invoice Address (line 3, if applicable; correction, if needed)

NONE PROVIDED

Invoice Address City (currently in DEQ's records)

ALMA

Invoice Address City (correction, if needed)

NONE PROVIDED

Invoice Address State (currently in DEQ's records)

AR

Invoice Address State (correction, if needed)

NONE PROVIDED

Invoice Address Zip Code (currently in DEQ's records)

729210000

Invoice Address Zip Code (correction, if needed)

NONE PROVIDED

Other Comments/Notes

NONE PROVIDED

Monitoring Frequency Reductions

Instructions

For Aluminum, Iron, Manganese, or TRC:

The monitoring frequency may be reduced to once/year if the requirements of Part 3.4.1 of the permit are met.

For TSS for permittees subject to Part 2.1 (Outfall Type 101):

The monitoring frequency may be reduced to once/6 months if the requirements of Part 3.4.2 of the permit are met.

For TSS for permittees subject to Part 2.2 (Outfall Type 102) or Part 2.3 (Outfall Type 103):

The monitoring frequency may be reduced to once/quarter if the requirements of Part 3.4.3 of the permit are met.

Please select all existing monitoring frequency reductions for the facility:

Aluminum

Iron

Manganese

Total Residual Chlorine (TRC)

Total Suspended Solids (TSS)

ALUMINUM: Would you like to request continuation of the current reduced monitoring frequency requirements for this parameter?

Yes

ALUMINUM

Please note the permittee must meet the requirements of Part 3.4.1 to qualify for this continuation. DEQ will review the permittee's most recent two (2) years of reported data for Aluminum to determine compliance with the permit limit.

IRON: Would you like to request continuation of the current reduced monitoring frequency requirements for this parameter?

Yes

IRON

Please note the permittee must meet the requirements of Part 3.4.1 to qualify for this continuation. DEQ will review the permittee's most recent two (2) years of reported data for Iron to determine compliance with the permit limit.

MANGANESE: Would you like to request continuation of the current reduced monitoring frequency requirements for this parameter?

Yes

MANGANESE

Please note the permittee must meet the requirements of Part 3.4.1 to qualify for this continuation. DEQ will review the permittee's most recent two (2) years of reported data for Manganese to determine compliance with the permit limit.

TOTAL RESIDUAL CHLORINE (TRC): Would you like to request continuation of the current reduced monitoring frequency requirements for this parameter?

Yes

TOTAL RESIDUAL CHLORINE (TRC)

Please note the permittee must meet the requirements of Part 3.4.1 to qualify for this continuation. DEQ will review the permittee's most recent two (2) years of reported data for TRC to determine compliance with the permit limit.

TOTAL SUSPENDED SOLIDS (TSS): Would you like to request continuation of the current reduced monitoring frequency requirements for this parameter?

Yes

TOTAL SUSPENDED SOLIDS (TSS)

Please note the permittee must meet the requirements of Part 3.4.2 (for Outfall Type 101, i.e. a discharge flow of less than or equal to 0.5 MGD) or Part 3.4.3 (for Outfall Types 102 or 103, i.e. a discharge flow greater than 0.5 MGD) to qualify for this continuation. DEQ will review the permittee's most recent two (2) years of reported data for TSS to determine compliance with the permit limit.

Disclosure Statement

Declaration of No Changes

This facility is owned by a municipality or county, or is a public water authority.

Attachments

Date	Attachment Name	Context	User
8/20/2021 1:17 PM	ARG640009_Alma FULL Compliance Review_20210820.pdf	NOTE	Myrl Lawrence
8/20/2021 1:17 PM	ARG640009_Alma 5 Yr DMR Data_2021-08-20.xlsx	NOTE	Myrl Lawrence
8/6/2021 3:09 PM	ARG640009 City of Alma WWTP Proof of Payment Grid.pdf	Submission	Barry Manasco
8/6/2021 3:09 PM	ARG640009 City of Alma WWTP Form Checklist.docx	Submission	Barry Manasco
7/27/2021 2:45 PM	eportal cert.PDF	Submission	Kealey Burrow

