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

version 1.9

(Submission #: HPC-X9A0-0NR7A, version 1)

Details

Submitted	11/1/2021 (15 days ago) by Lura Owen
AFIN	30-00089
Reference #	ARG640100
Submission ID	HPC-X9A0-0NR7A
Description	Recertification ARG640100- Lake DeGray Water Treatment Plant
Submission Reason	Renewal
Submission Assigned Staff	f Barry Manasco
Status	In Review
Active Steps	Update Renewal PN Date in Access and PN the Renewal NOI - ASIII

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: <u>Arkansas Secretary of State Business Entity Search Website</u>

Permit Number ARG640100

AFIN 30-00089

Permittee Legal Name Kimzey Regional Water District

Facility Name Lake DeGray Water Treatment Plant

Facility Address 482 Chestnut Drive Facility City Bismarck

Facility State

Facility Zip Code 71929

Mailing Address P.O. Box 722

Mailing Address City Malvern

Mailing Address State

Mailing Address Zip Code 72104

Responsible Official Name & Title Charles Ford, Manager

Responsible Official Email cjford@windstream.net

Cognizant Official Name & Title Charles Ford, Manager

Cognizant Official Email NONE PROVIDED

Primary Phone Number (501) 337-0037

Contact Person Charles Ford, Manager

Contact Person Email cjford@windstream.net

Contact Person Phone Number 501-337-0037

Invoice Address (line 1) NONE PROVIDED

Invoice Address (line 2) KIMZEY REGIONAL WATER DISTRICT

Invoice Address (line 3) 319 WEST THIRD

Invoice Address City MALVERN

Invoice Address State AR

Invoice Address Zip Code 721040000

Outfall Information

First Outfall Number 101

First Outfall Latitude Degrees 34

First Outfall Latitude Minutes 16

First Outfall Latitude Seconds 54

First Outfall Longitude Degrees -93

First Outfall Longitude Minutes 10

First Outfall Longitude Seconds 53

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. <u>Click here to view Part 3.4 of the Permit</u>

Does the facility have reduced monitoring frequency requirements for Aluminum, Iron, Manganese, TRC, or TSS? No

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)

Kimzey Regional Water District

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) Lake DeGray Water Treatment Plant

Facility Name (correction, if needed) NONE PROVIDED

Facility Address (currently in DEQ's records) 482 Chestnut Drive

Facility Address (correction, if needed) NONE PROVIDED

Facility City (currently in DEQ's records) Bismarck 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) 71929

Facility Zip Code (correction, if needed) NONE PROVIDED

Mailing Address (currently in DEQ's records) P.O. Box 722

Mailing Address (correction, if needed) NONE PROVIDED

Mailing Address City (currently in DEQ's records) Malvern

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) 72104

Mailing Address Zip Code (correction, if needed) NONE PROVIDED

Responsible Official Name & Title (currently in DEQ's records) Charles Ford, Manager

Responsible Official Name & Title (correction, if needed; for example: John Doe, President) NONE PROVIDED

Responsible Official Email (currently in DEQ's records) cjford@windstream.net

Responsible Official Email (correction, if needed) NONE PROVIDED

Cognizant Official Name & Title (currently in DEQ's records) Charles Ford, Manager

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) (501) 337-0037

Primary Phone Number (correction, if needed) NONE PROVIDED

Contact Person (currently in DEQ's records) Charles Ford, Manager

Contact Person (correction, if needed) NONE PROVIDED

Contact Person Email (currently in DEQ's records) cjford@windstream.net

Contact Person Email (correction, if needed) NONE PROVIDED

Contact Person Phone Number (currently in DEQ's records) 501-337-0037

Contact Person Phone Number (correction, if needed) NONE PROVIDED

Invoice Address (line 1; currently in DEQ's records) NONE PROVIDED

Invoice Address (line 1; correction, if needed) NONE PROVIDED

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

Invoice Address (line 2, if applicable; correction, if needed) NONE PROVIDED

Invoice Address (line 3, if applicable; currently in DEQ's records) 319 WEST THIRD

Invoice Address (line 3, if applicable; correction, if needed) NONE PROVIDED

Invoice Address City (currently in DEQ's records) MALVERN

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) 721040000

Invoice Address Zip Code (correction, if needed) NONE PROVIDED

Other Comments/Notes NONE PROVIDED

Disclosure Statement

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 DEQ.

Attachments

Date	Attachment Name	Context	User
11/15/2021 8:07 AM	Certification of ePortal Submission.PDF	Submission	Nancy Koon
11/3/2021 1:37 PM	ARG640100 Lake DeGray WTP Form Checklist.docx	Submission	Barry Manasco
11/3/2021 1:36 PM	ARG640100 Lake DeGray WTP Proof of Payment Grid.pdf	Submission	Barry Manasco

Internal Data

Label	Value
Type of treatment	

Status History

	User	Processing Status
11/1/2021 10:15:58 AM	Lura Owen	Draft
11/1/2021 10:43:32 AM	Lura Owen	Submitting
11/1/2021 10:43:46 AM	Lura Owen	Submitted
11/3/2021 10:43:15 AM	Barry Manasco	In Review

Audit

Event	Event Description	Event By	Event Date
Submission Locked	Submission Locked	Kealey Burrow	11/2/2021 1:36 PM

Processing Steps

Step Name	Assigned To/Completed By	Date Completed
Form Submitted	Lura Owen	11/1/2021 10:43:46 AM
Initial processing and assign to an engineer - ASIII	Kealey Burrow	11/2/2021 1:37:57 PM
Technical Review - Check for Outstanding Fees & 303(d) listings. Assign compliance review in next step based on permittee legal name - Permit Engineer	Barry Manasco	11/3/2021 1:37:53 PM
Attach Compliance Review - Enforcement Analyst	Danielle Harbin	11/3/2021 2:36:15 PM
Technical Review - Verify forms complete & request additional info if needed - Permit Engineer	Barry Manasco	11/3/2021 1:38:00 PM
Technical Review - Enter Info into Database - Permit Engineer	Barry Manasco	11/3/2021 1:38:04 PM
Enter updated info into PDS - ASIII	Nancy Koon	11/17/2021 8:00:31 AM
Update Renewal PN Date in Access and PN the Renewal NOI - ASIII	Nancy Koon	

Step Name	Assigned To/Completed By	Date Completed
Engineer Supervisor Review: Delete Planning steps if not applicable	Carrie McWilliams	
Planning Coordinator - Assign Staff to Review	Jim Wise	
Planning Section Review		
Review Comments from Planning Section and work with Engineer to resolve any issues	Carrie McWilliams	
Merge appropriate recertification NOC - ASIII	Nancy Koon	
Review recertification NOC - Permit Engineer	Barry Manasco	
Review recertification NOC - Engineer Supervisor	Carrie McWilliams	
Review recertification NOC - Senior Operations Manager	Bryan Leamons	
Mail NOC to permittee - Scan complete package and save on E-drive/Zylab/etc ASIII	Nancy Koon	