

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

version 1.9

(Submission #: HP9-AEW5-P1B6M, version 1)

Details

Submitted	9/16/2021 (5 days ago) by roy young
AFIN	36-00523
Reference #	ARG640103
Submission ID	HP9-AEW5-P1B6M
Description	Recertification ARG640103- Clarksville Water Treatment Plant
Submission Reason	Renewal
Submission Assigned Staff	Zachary Carroll
Status	In Review

NOTE (CREATED)

Compliance Review

There are no enforcement issues with this permit at this time. This facility is not under formal or informal enforcement. An enforcement action has not been proposed. A CAP has not been requested.

Created on 9/17/2021 2:02 PM by **Leslie Allen-Daniel**

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

ARG640103

AFIN

36-00523

Permittee Legal Name

Clarksville Connected Utilities

Facility Name

Clarksville Water Treatment Plant

Facility Address

1400 South Palmer Road

Facility City

Clarksville

Facility State

AR

Facility Zip Code

72830

Mailing Address

PO Box 1807

Mailing Address City

Clarksville

Mailing Address State

AR

Mailing Address Zip Code

72830

Responsible Official Name & Title

Roy Young

Responsible Official Email

roy.young@clarksvillelightwater.com

Cognizant Official Name & Title

Roy Young

Cognizant Official Email

roy.young@clarksvilleconnected.net

Primary Phone Number

(479) 754-3148

Contact Person

Roy Young

Contact Person Email

roy.young@clarksvilleconnected.net

Contact Person Phone Number

(479) 754-3148x405

Invoice Address (line 1)

ROY YOUNG

Invoice Address (line 2)

CLARKSVILLE CONNECTED UTILITIY

Invoice Address (line 3)

PO BOX 1807

Invoice Address City

CLARKSVILLE

Invoice Address State

AR

Invoice Address Zip Code

72830

Outfall Information

First Outfall Number

101

First Outfall Latitude Degrees

35

First Outfall Latitude Minutes

27

First Outfall Latitude Seconds

9.46

First Outfall Longitude Degrees

93

First Outfall Longitude Minutes

26

First Outfall Longitude Seconds

21.45

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?

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)

Clarksville Connected Utilities

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)

Clarksville Water Treatment Plant

Facility Name (correction, if needed)

NONE PROVIDED

Facility Address (currently in DEQ's records)

1400 South Palmer Road

Facility Address (correction, if needed)

NONE PROVIDED

Facility City (currently in DEQ's records)

Clarksville

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)

72830

Facility Zip Code (correction, if needed)

NONE PROVIDED

Mailing Address (currently in DEQ's records)

PO Box 1807

Mailing Address (correction, if needed)

NONE PROVIDED

Mailing Address City (currently in DEQ's records)

Clarksville

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)

72830

Mailing Address Zip Code (correction, if needed)

NONE PROVIDED

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

Roy Young

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

NONE PROVIDED

Responsible Official Email (currently in DEQ's records)

roy.young@clarksvillelightwater.com

Responsible Official Email (correction, if needed)

roy.young@clarksvilleconnected.net

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

Roy Young

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

NONE PROVIDED

Cognizant Official Email (currently in DEQ's records)

roy.young@clarksvilleconnected.net

Cognizant Official Email (correction, if needed)

NONE PROVIDED

Primary Phone Number (currently in DEQ's records)

(479) 754-3148

Primary Phone Number (correction, if needed)

NONE PROVIDED

Contact Person (currently in DEQ's records)

Roy Young

Contact Person (correction, if needed)

NONE PROVIDED

Contact Person Email (currently in DEQ's records)

roy.young@clarksvilleconnected.net

Contact Person Email (correction, if needed)

NONE PROVIDED

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

(479) 754-3148x405

Contact Person Phone Number (correction, if needed)

NONE PROVIDED

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

ROY YOUNG

Invoice Address (line 1; correction, if needed)

NONE PROVIDED

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

CLARKSVILLE CONNECTED UTILITIY

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

NONE PROVIDED

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

PO BOX 1807

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

NONE PROVIDED

Invoice Address City (currently in DEQ's records)

CLARKSVILLE

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)

72830

Invoice Address Zip Code (correction, if needed)

NONE PROVIDED

Other Comments/Notes

NONE PROVIDED

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
9/21/2021 1:16 PM	ARG640103 Recert Checklist.pdf	Submission	Zachary Carroll
9/17/2021 8:52 AM	ARG640103_InvoiceGridCopyList.pdf	Submission	Zachary Carroll