

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

version 1.13

(Submission #: HPV-JEN1-X2KDQ, version 1)

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Reason: Copy Of Record
Location: North Little Rock, Arkansas



Details

AFIN 09-00241
Submission ID HPV-JEN1-X2KDQ
Submission Reason Renewal

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 to **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

ARG640119

AFIN

09-00241

Permittee Legal Name

City of Eudora

Facility Name

Eudora Water Treatment Plant

Facility Address

528 South Main

Facility City

Eudora

Facility State

AR

Facility Zip Code

71640

Mailing Address

239 South Main

Mailing Address City

Eudora

Mailing Address State

AR

Mailing Address Zip Code

71640

Responsible Official Name & Title

HonorableTomeka Butler

Responsible Official Email

tomekabutler@eudoraar.com

Cognizant Official Name & Title

Robert Bunn

Cognizant Official Email

NONE PROVIDED

Primary Phone Number

(870) 355-1994

Contact Person

Arthur James

Contact Person Email

NONE PROVIDED

Contact Person Phone Number

(870) 355-4436

Invoice Address (line 1)

Mayor Tomeka Butler

Invoice Address (line 2)

City Of Eudora

Invoice Address (line 3)

239 S Main

Invoice Address City

Eudora

Invoice Address State

AR

Invoice Address Zip Code

71640

Outfall Information

First Outfall Number

101

First Outfall Latitude Degrees

33

First Outfall Latitude Minutes

06

First Outfall Latitude Seconds

54

First Outfall Longitude Degrees

-91

First Outfall Longitude Minutes

15

First Outfall Longitude Seconds

44

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

Yes

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 Eudora

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)

Eudora Water Treatment Plant

Facility Name (correction, if needed)

NONE PROVIDED

Facility Address (currently in DEQ's records)

528 South Main

Facility Address (correction, if needed)

NONE PROVIDED

Facility City (currently in DEQ's records)

Eudora

Facility City (correction, if needed)

NONE PROVIDED

Facility State (currently in DEQ's records)

Facility State (correction, if needed)

NONE PROVIDED

Facility Zip Code (currently in DEQ's records)

71640

Facility Zip Code (correction, if needed)

NONE PROVIDED

Mailing Address (currently in DEQ's records)

239 South Main

Mailing Address (correction, if needed)

NONE PROVIDED

Mailing Address City (currently in DEQ's records)

Eudora

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)

71640

Mailing Address Zip Code (correction, if needed)

NONE PROVIDED

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

HonorableTomeka Butler

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

NONE PROVIDED

Responsible Official Email (currently in DEQ's records)

tomekabutler@eudoraar.com

Responsible Official Email (correction, if needed)

NONE PROVIDED

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

Robert Bunn

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

Cameron D. Thomas, SR

Cognizant Official Email (currently in DEQ's records)

NONE PROVIDED

Cognizant Official Email (correction, if needed)

cameronthomas@eudoraar.com

Primary Phone Number (currently in DEQ's records)

(870) 355-1994

Primary Phone Number (correction, if needed)

8703555015

Contact Person (currently in DEQ's records)

Arthur James

Contact Person (correction, if needed)

Cameron D. Thomas, SR

Contact Person Email (currently in DEQ's records)

NONE PROVIDED

Contact Person Email (correction, if needed)

cameronthomas@eudoraar.com

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

(870) 355-4436

Contact Person Phone Number (correction, if needed)

8703555015

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

Mayor Tomeka Butler

Invoice Address (line 1; correction, if needed)

NONE PROVIDED

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

City Of Eudora

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

NONE PROVIDED

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

239 S Main

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

NONE PROVIDED

Invoice Address City (currently in DEQ's records)

Eudora

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)

71640

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.

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:

NONE PROVIDED

Please select any new monitoring frequency reductions you would like to apply for at this time:

NONE PROVIDED

Does the facility have multiple outfalls with different monitoring frequency reductions (or requested reductions)?

No

Disclosure Statement

Declaration of No Changes

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