

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

version 1.10

(Submission #: HPD-8DKV-P83ZN, version 1)

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Date: 2021.11.17 15:04:31 -0600
Reason: Copy Of Record
Location: North Little Rock, Arkansas



Details

AFIN 17-00061
Submission ID HPD-8DKV-P83ZN
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

ARG640123

AFIN

17-00061

Permittee Legal Name

City of Mulberry

Facility Name

Mulberry Water Treatment Plant

Facility Address

7721 Rock Creek Road

Facility City

Mulberry

Facility State

AR

Facility Zip Code

72947

Mailing Address

PO Box 448

Mailing Address City

Mulberry

Mailing Address State

AR

Mailing Address Zip Code

72947

Responsible Official Name & Title

Mayor Gary Baxter

Responsible Official Email

mayor@cityofmulberry.org

Cognizant Official Name & Title

Channon Phipps

Cognizant Official Email

NONE PROVIDED

Primary Phone Number

(479) 997-1321

Contact Person

Jim Julian

Contact Person Email

jim@cityofmulberry.org

Contact Person Phone Number

479-430-8928

Invoice Address (line 1)

ACCOUNTS PAYABLE

Invoice Address (line 2)

CITY OF MULBERRY

Invoice Address (line 3)

PO BOX 448

Invoice Address City

MULBERRY

Invoice Address State

AR

Invoice Address Zip Code

729470000

Outfall Information

First Outfall Number

101

First Outfall Latitude Degrees

35

First Outfall Latitude Minutes

32

First Outfall Latitude Seconds

49.65

First Outfall Longitude Degrees

-94

First Outfall Longitude Minutes

4

First Outfall Longitude Seconds

24.11

Second Outfall Number (if applicable)

201

Second Outfall Latitude Degrees (if applicable)

35

Second Outfall Latitude Minutes (if applicable)

32

Second Outfall Latitude Seconds (if applicable)

51.3

Second Outfall Longitude Degrees (if applicable)

-94

Second Outfall Longitude Minutes (if applicable)

4

Second Outfall Longitude Seconds (if applicable)

24.5

Third Outfall Number (if applicable)

301

Third Outfall Latitude Degrees (if applicable)

35

Third Outfall Latitude Minutes (if applicable)

32

Third Outfall Latitude Seconds (if applicable)

51.31

Third Outfall Longitude Degrees (if applicable)

-94

Third Outfall Longitude Minutes (if applicable)

4

Third Outfall Longitude Seconds (if applicable)

24.52

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, but I would like to apply for reduction(s) at this time

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 Mulberry

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)

Mulberry Water Treatment Plant

Facility Name (correction, if needed)

NONE PROVIDED

Facility Address (currently in DEQ's records)

7721 Rock Creek Road

Facility Address (correction, if needed)

NONE PROVIDED

Facility City (currently in DEQ's records)

Mulberry

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)

72947

Facility Zip Code (correction, if needed)

NONE PROVIDED

Mailing Address (currently in DEQ's records)

PO Box 448

Mailing Address (correction, if needed)

NONE PROVIDED

Mailing Address City (currently in DEQ's records)

Mulberry

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)

72947

Mailing Address Zip Code (correction, if needed)

NONE PROVIDED

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

Mayor Gary Baxter

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

NONE PROVIDED

Responsible Official Email (currently in DEQ's records)

mayor@cityofmulberry.org

Responsible Official Email (correction, if needed)

NONE PROVIDED

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

Channon Phipps

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)

channon@cityofmulberry.org

Primary Phone Number (currently in DEQ's records)

(479) 997-1321

Primary Phone Number (correction, if needed)

NONE PROVIDED

Contact Person (currently in DEQ's records)

Jim Julian

Contact Person (correction, if needed)

NONE PROVIDED

Contact Person Email (currently in DEQ's records)

jim@cityofmulberry.org

Contact Person Email (correction, if needed)

NONE PROVIDED

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

479-430-8928

Contact Person Phone Number (correction, if needed)

NONE PROVIDED

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

ACCOUNTS PAYABLE

Invoice Address (line 1; correction, if needed)

NONE PROVIDED

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

CITY OF MULBERRY

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

NONE PROVIDED

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

PO BOX 448

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

NONE PROVIDED

Invoice Address City (currently in DEQ's records)

MULBERRY

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)

729470000

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:NONE PROVIDED

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

Aluminum

Iron

Manganese

Total Residual Chlorine (TRC)

Total Suspended Solids (TSS)

ALUMINUM

Please note the permittee must meet the requirements of Part 3.4.1 to qualify for this monitoring frequency reduction. The permittee must have at least two (2) years of reported sampling data for this parameter available, which DEQ will review to determine compliance with the permit limit.

IRON

Please note the permittee must meet the requirements of Part 3.4.1 to qualify for this monitoring frequency reduction. The permittee must have at least two (2) years of reported sampling data for this parameter available, which DEQ will review to determine compliance with the permit limit.

MANGANESE

Please note the permittee must meet the requirements of Part 3.4.1 to qualify for this monitoring frequency reduction. The permittee must have at least two (2) years of reported sampling data for this parameter available, which DEQ will review to determine compliance with the permit limit.

TOTAL RESIDUAL CHLORINE (TRC)

Please note the permittee must meet the requirements of Part 3.4.1 to qualify for this monitoring frequency reduction. The permittee must have at least two (2) years of reported sampling data for this parameter available, which DEQ will review to determine compliance with the permit limit.

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 monitoring frequency reduction. The permittee must have at least two (2) years of reported sampling data for this parameter available, which DEQ will review to determine compliance with the permit limit.

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

No

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.