



August 29, 2019

Mr. Adam Yates  
Water Division Engineer  
NPDES Branch, ADEQ  
5301 Northshore Drive  
North Little Rock, AR 72118-5317

**RE: Siloam Springs, 2018/2019 Annual Pretreatment Performance Summary  
NPDES Permit #AR0020273**

Dear State Representatives:

The enclosed report covers the 2019 annual pretreatment report for our NPDES Permit # AR0020273. The 2019 report covers the reporting period of July 1, 2018 thru June 30, 2019. The 2019 annual performance reports meet all applicable requirements of 40 CFR Part 403.12(I) and the applicable requirements of the City's NPDES permit.

The City of Siloam Springs would like to report that none of its permitted industrial users met the criteria of significant non-compliance as defined in 40 CFR 403.8.

No interference, pass through, upset, or POTW permit violations were known or suspected to have been caused by industrial contributors during the reporting period.

If you have any questions or comments regarding the 2019 annual report, or if you need additional information, please feel free to contact me at (479)-524-5623.

Sincerely,

A handwritten signature in black ink, appearing to read 'Thomas A. Myers'.

Thomas A. Myers  
Wastewater Superintendent

Cc: Steve Gorszcyk, Water/Wastewater Manager  
Renea Ellis, City Clerk  
Wastewater File









**ATTACHMENT C**

PRETREATMENT PERFORMANCE SUMMARY (PPS)

**NOTE:** ALL QUESTIONS REFER TO THE INDUSTRIAL PRETREATMENT PROGRAM AS APPROVED BY ADEQ. THE PERMITTEE SHOULD NOT ANSWER THE QUESTIONS BASED ON CHANGES MADE TO THE APPROVED PROGRAM WITHOUT DEPARTMENT AUTHORIZATION.

I. General Information

Control Authority Name CITY OF SILOAM SPRINGS

Address 975 Anderson Avenue, P.O. Box 80

City Siloam Springs State/Zip 72761  
Water Pollution Control Facility

Contact Person Thomas A. Myers Position Superintendent

Contact Telephone 479-524-5623 NPDES Permit Nos. AR0020273

Reporting Period July 1, 2018 June 30, 2019  
 (Beginning Month and Year) (Ending Month and Year)

Total Number of Categorical IUs 1

Total Number of Significant Noncategorical IUs 2

Total Number of Non-Significant (yet permitted) IUs 0

II. Significant Industrial User Compliance

	<u>SIGNIFICANT INDUSTRIAL USERS</u>	
	<u>Categorical</u>	<u>Noncategorical</u>
1) No. of SIUs Submitting BMRs/Total No. Required. . . . .	<u>0/0</u>	<u>N/A*</u>
2) No. of SIUs Submitting 90-Day Compliance Reports/No. Required. . . . .	<u>0/0</u>	<u>N/A*</u>
3) No. of SIUs Submitting Semiannual Reports/ Total No. Required. . . . .	<u>1/1</u>	<u>2/2</u>
4) No. of SIUs Meeting Compliance Schedule/ Total No. Required to Meet Schedule . . . . .	<u>0/0</u>	<u>0/0</u>
5) No. of SIUs in Significant Noncompliance/ Total No. of SIUs . . . . .	<u>0/0</u>	<u>0/0</u>
6) Rate of Significant Noncompliance for all SIUs (categorical and noncategorical) . . . . .		<u>0/3</u>

III. Compliance Monitoring Program


	<u>SIGNIFICANT INDUSTRIAL USERS</u>	
	<u>Categorical</u>	<u>Noncategorical</u>
1) No. of Control Documents Issued/Total No. Required. . . . .	<u>1/1</u>	<u>2/2</u>
2) No. of Nonsampling Inspections Conducted. . . . .	<u>1/1</u>	<u>2/2</u>
3) No. of Sampling Visits Conducted. . . . .	<u>1/1</u>	<u>2/2</u>
4) No. of Facilities Inspected (nonsampling) . . . . .	<u>1/1</u>	<u>2/2</u>
5) No. of Facilities Sampled . . . . .	<u>1/1</u>	<u>2/2</u>

IV. Enforcement Actions

	<u>SIGNIFICANT INDUSTRIAL USERS</u>	
	<u>Categorical</u>	<u>Noncategorical</u>
1) No. of Compliance Schedules Issued/No. of Schedules Required . . . . .	<u>0/0</u>	<u>0/0</u>
2) No. of Notices of Violations Issued to SIUs	<u>0</u>	<u>6</u>
3) No. of Administrative Orders Issued to SIUs	<u>0</u>	<u>0</u>
4) No. of Civil Suits Filed. . . . .	<u>0</u>	<u>0</u>
5) No. of Criminal Suits Filed . . . . .	<u>0</u>	<u>0</u>
6) No. of Significant Violators (attach newspaper publication). . . . .	<u>0</u>	<u>0</u>
7) Amount of Penalties (not surcharges) Collected (total dollars/IUs assessed) . . . . .	<u>0/0</u>	<u>0/0</u>
8) Other Actions (sewer bans, etc.). . . . .	<u>0</u>	<u>0</u>

The following certification must be signed in order for this form to be considered complete:

I certify that the information contained herein is complete and accurate to the best of my knowledge.


Thomas A. Myers  
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 Authorized Representative Date August 29, 2019