



**Arkansas Department of Health
Environmental Health Protection Section
On-Site Wastewater Renovation Program**

4815 West Markham: Slot 46
Little Rock, AR 72205 - 3867

Local Contact: Clark Co. Health Unit, 605 S. 10th ST, AR 71923-7053
Phone: 870-246-4471/ Fax: 870-246-9619

Property Owner Septic System Permit Information Sheet

Permit Name: Joseph Franz Issue Date: 2 December 2009

Mailing Address: 27 Dogwood Drive Arkadelphia, AR 71923

Site Location: N 34° 07.582' W 93° 06.987'

System Description	<input type="checkbox"/> Holding Tank	<input type="checkbox"/> Field Lines <u>NA</u>	<input checked="" type="checkbox"/> Surface Discharge
Septic Tank Size (Gallons): <u>1000 existing</u>	Pump Brand: <u>NA</u>		<input type="checkbox"/> Demand Dose
Pump Tank Size (Gallons): <u>NA</u>	Siphon Brand: <u>NA</u>		<input type="checkbox"/> Timed Dose
Pump Vault Brand: _____			
Field Area Type	<input type="checkbox"/> Standard <input type="checkbox"/> Media	<input type="checkbox"/> LPD	<input type="checkbox"/> Capping Fill <input type="checkbox"/> Other
Trench Depth (inches): <u>NA</u>	Number of Lines: _____	Length (Feet): _____	
Trench Width (inches): _____			
Distribution Type			
<input type="checkbox"/> Distribution Box	<input type="checkbox"/> Diversion Valve	<input type="checkbox"/> Pressure Manifold	
Surface Discharge			
<input checked="" type="checkbox"/> Aerobic Treatment Unit <u>AS 500</u>	<input type="checkbox"/> Lagoon	<input type="checkbox"/> Sand or Media Filter	<input type="checkbox"/> Other
Designated Representative: <u>P. Beatty</u>			
System Installer: _____			
System Maintenance Record			
Date	Contractor	Description of Work	

IMPORTANT NOTICE TO PROPERTY OWNER

The Arkansas Department of Health's approval of a discharging sewage system **does not** relieve the property owner of any other local, state, or federal requirement regarding sewage discharging systems. Please be advised that **all** wastewater systems that discharge sewage to the surface are required to notify:

Arkansas Department of Environmental Quality

ATTN: Permits Branch

5301 North Shore Drive

North Little Rock, AR 72118

Phone Number: 501-682-0623

Web Site: www.adeq.state.ar.us



ARKANSAS DEPARTMENT OF

Health

Keeping Your Hometown Healthy

Clark County Health Unit
605 South 10th Street
Arkadelphia, AR 71923-7053
Office: 870-246-4471
Fax: 870-246-9619
Email: John.Morgan2@arkansas.gov

Robbie's

Date: 2 December 2009

RE: Joseph Franz Individual Wastewater Permit # 16091205

Dear Mr. Franz:

The plans and specifications for the above captioned project have been received and reviewed. Approval for construction is granted provided the system is installed as submitted. Please be advised that as the owner you are responsible for the following:

1. All costs relating to the operation and maintenance of the system.
2. Meeting all existing effluent requirements.
3. Financial responsibility for effluent monitoring and sampling by a Certified Maintenance Person.
4. Filing for an NPDES perm with the Arkansas Department of Environmental Quality is required (contact information is provided).
5. Any changes from the specified design and unit will require a new maintenance contract and a resubmission of the permit.
6. This approval is for an on-site retention scheme for all domestic wastewater generated from one building on 2.0 acres. Any changes to discharge or further subdivision of the property may void this approval. Additional requirements may be required in the future should Arkansas Department of Health or Arkansas Department of Environmental Quality regulations change.

This system must be installed to meet the specifications for design attached to the construction permit, and installation may not begin until final approval is granted from the Arkansas Department of Environmental Quality. Department of Health acceptance of this project does not release the owner from any liability from any additional state or federal requirements.

If you have any questions, please contact the local environmental health specialist.

Sincerely,

John R. Morgan
Environmental Health Specialist # 740
Arkansas Department of Health

Date: 12/1/2009



Arkansas
Department of Health
Keeping Your Hometown Healthy

SEPTIC TANK PERMIT

Customer Name: RON BEATY

Customer No: 1001111765

Transaction Date: 12/1/2009

Transaction No: 16091205

Amount Received: \$30.00

Paid By: FRANZ JOSEPH & BONNIE

Owner's Name:	FRANZ JOE
Site Location:	27 DOGWOOD DR ARKADELPHIA ARK 71923
Subdivision:	CEDAR BROOK
Lot Number:	
Designated Rep:	
Sanitarian:	Morgan, John

Thank you for your payment

Clark County Health Unit - Arkadelphia
605 S 10th St

Arkadelphia

AR 71923

**Arkansas Department of Health
Environmental Health Protection**

Receipt Number
16091205

Individual Onsite System Permit Application

Permit Type New Installation
 Alteration / Repair

Fee Schedule for Structures		✓
Structures 1500 sq ft or less	\$ 30.00	X
Structures more than 1500 sq ft and up to 2000 sq ft	\$ 45.00	
Structures more than 2000 sq ft and up to 3000 sq ft	\$ 90.00	
Structures more than 3000 sq ft and up to 4000 sq ft	\$120.00	
Structures more than 4000 sq ft	\$160.00	
Alteration and Repair	\$ 30.00	

DR Environmental I.D. #

7601098927

Part 1 Treatment Type (check one)

Disposal Method (check one)

- STD = Standard Septic Tank
 ISF = Intermittent Sand Filter
 PMF = Proprietary Media Filter
 OTH = Other (Describe)
- ATU = Aerobic Treatment Plant
 RSF = Re-circulating Sand Filter
 RGF = Re-circulating Gravel Filter
 HLD = Holding Tank

- STD = Standard Absorption Field
 SUR = Surface Discharge
 CPF = Capping Fill
 OTH = Other
- LPD = Low Pressure Distribution
 HLD = Holding Tank
 SRL = Serial Distribution
 DRP = Drip Irrigation

1. Owner's/Applicant's Name Joe Franz		2. Phone Number 870-246-8896	
3. Mailing Address 27 Dogwood Dr. Arkadelphia, AR 71923		4. County Clark	
5. Address of Proposed System (If a 911 address is not available, attach detailed directions or map.) Same as Above			
6. Subdivision Name Cedar Brook	7. Approval Date 6-27-85	8. Date Recorded 6-27-85	9. Lot Number 14
10. Lot Dimensions 210 X 101 X 230 X 226 X 294	11. Total Area (Acres) 2	12. # Bedrooms # People 4	13. Daily Flow (GPD) 450
14. Brief Legal Description of Property (Attach a separate sheet of paper if necessary.) W 1/2 SW 1/4 Sec 14 T95 R20W			
15. Water Supply (Specify supplier if Public Water.) Arkadelphia City		16. GPS Coordinates N 34° 07' 58" W 89° 30' 9" E	

17. Soil Determination (Primary Area) Indicate the depth to items a-f if observed in the soil (designate inches).							
a. Bedrock	b. BSWT	c. MSWT	d. LSWT	e. Adj. MSWT	f. Adj. LSWT	g. H.C./Depth	h. Loading Rate (GPD/ft ²)
48"	4	10	-	8	-	Low	W1092

18. Soil Determination (Secondary Area) Indicate the depth to items a-f if observed in the soil (designate inches).							
a. Bedrock	b. BSWT	c. MSWT	d. LSWT	e. Adj. MSWT	f. Adj. LSWT	g. H.C./Depth	h. Loading Rate (GPD/ft ²)
48"	-	8	-	8	-	Low	W1092

19. Percolation Test (min/in)		20. System Size 1000	
Rate for Hole 1	a. Size of Septic Tank	Existing gal	f. Trench Depth
Rate for Hole 2	b. Size of Dose Tank	- gal	g. Trench Spacing
Rate for Hole 3	c. Absorption Area	- ft ²	h. Trench Media
Alt Area Perc.	d. Number of Field Lines	-	Trench Width
Average Perc. (1-3)	e. Length of Field Lines	- ft	in.

Comments
AS500 ATU Chlorinated or UV light

21. I certify that I have conducted the above tests and that the above listed information is in accordance with the latest requirements of the Arkansas Department of Health Rules and Regulations Pertaining to Onsite Wastewater Systems, Designated Representatives and Installers.

Ron Beatty Signature Title **D. R.** Soil Certified Yes No
Ron Beatty Typed Name Date **11-30-09** Phone Number **870-246-6465**
870-403-1608

22. Approval of Health Authority: The information above has been reviewed and found to meet the requirements of the Arkansas Department of Health for Onsite Wastewater Systems, Designated Representatives and Installers.

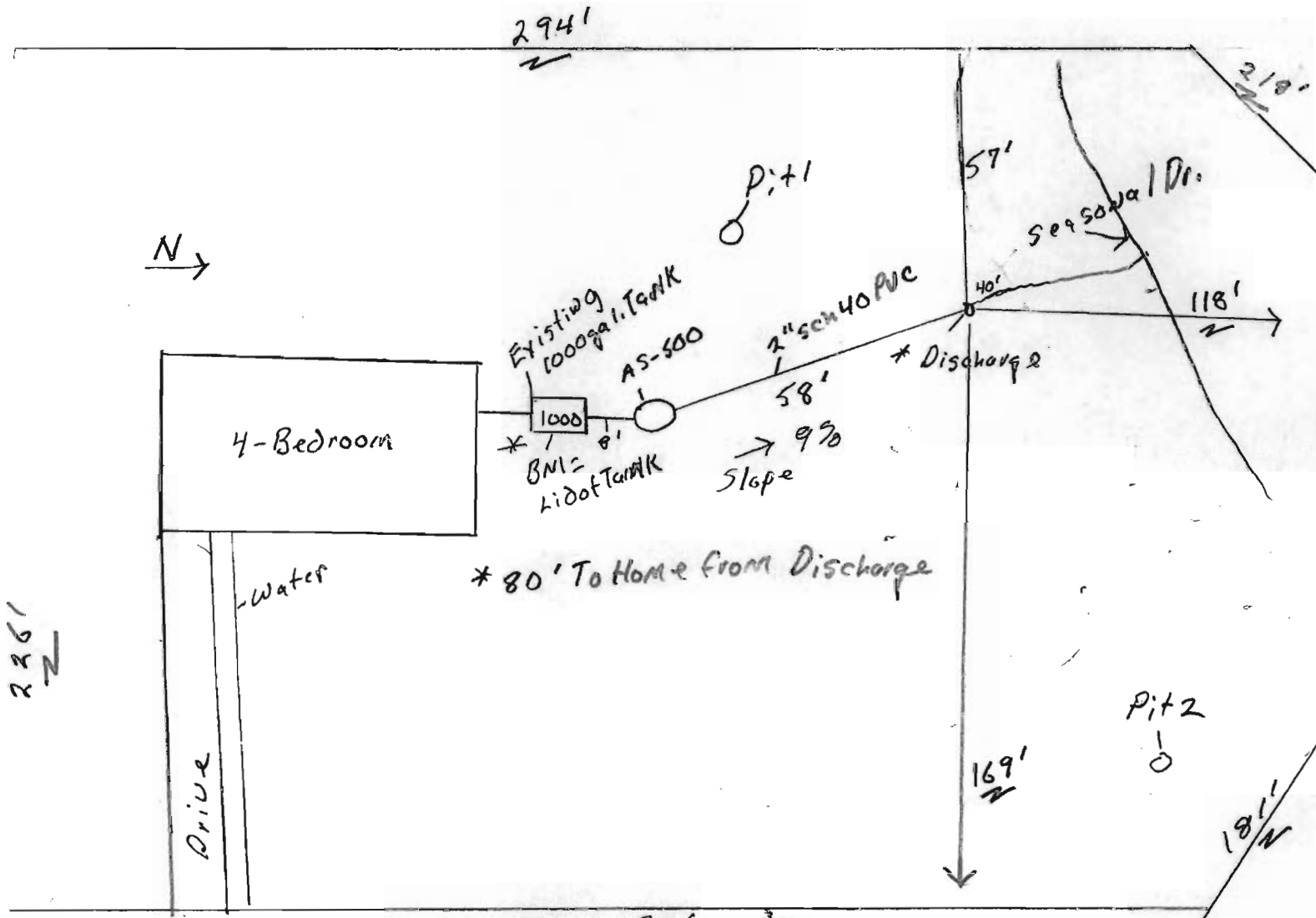
A PERMIT FOR CONSTRUCTION is hereby issued.

Environmental Health Specialist **J. R. Moya** Date **2009 2009**

Joe Frowz Repair

Seals 1" to 30'

A.S 500 ATU

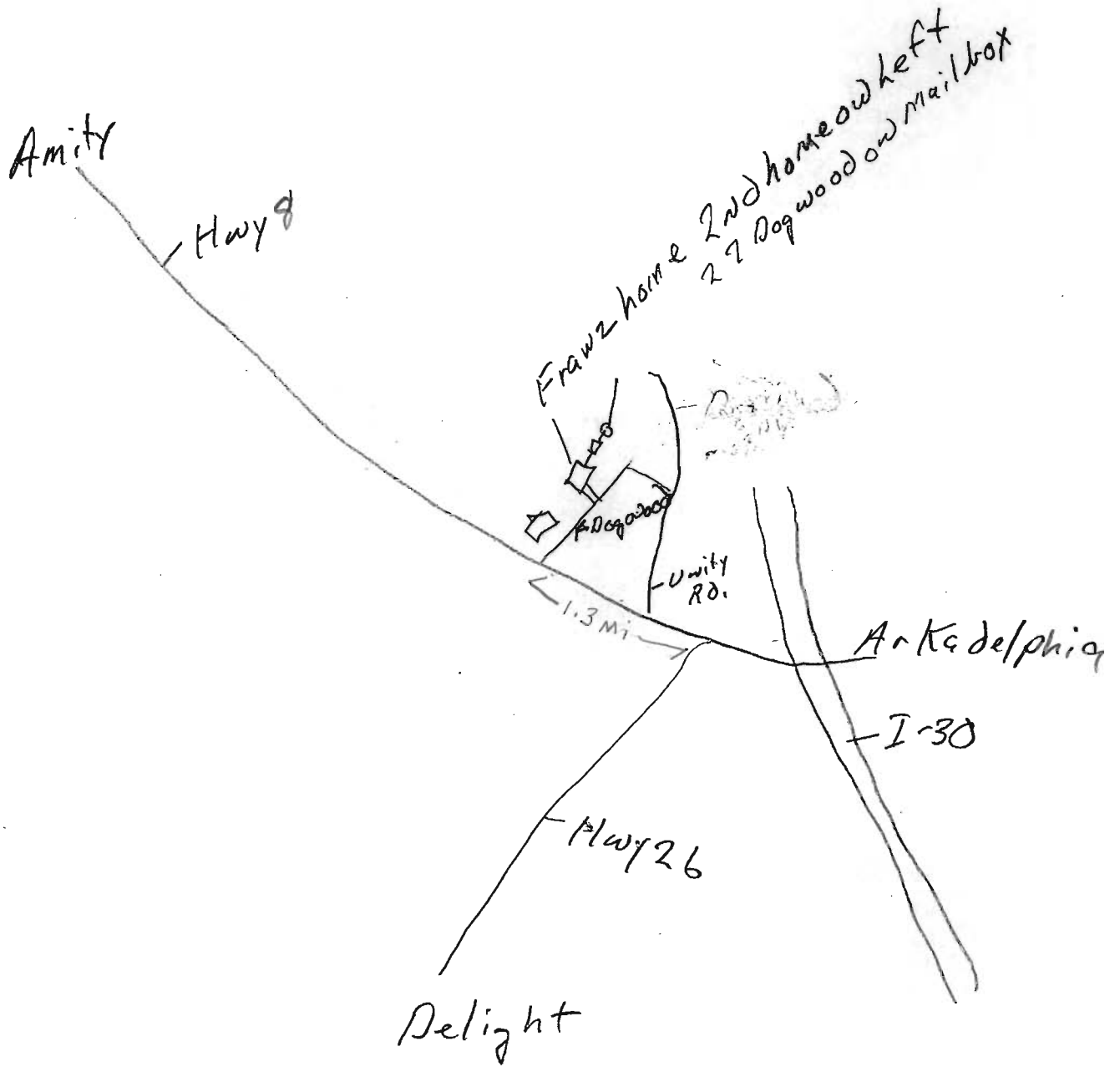


Elevations

BM = Old Tank Lid	= 3'10"	Ground	2 30'
AS 500 =	3'6"	Flowline	5'1"
Discharge =	10'	(outlet = 4'11")	10'

* Use Existing 1000 gal Tank as Trash Tank

Joe Frawz (Repair) Vicinity Map



SIT EVALUATION FORM

Date 11-30-09

Applicant: Joe Franz

Inspector: Ron Beatty

Part of location: Pit 1 Lower Pit (Shovel pits)

Horizon	Depth	Matrix Color	Other Features	Remarks
A	0-4	Dr. Br	None	SL
B	4-10	Br	Fecalc	"
C	10+	Br & Gray	Fecalc Croma 2	"

Depth to bedrock: 48"
 Soil depth: 4
 Moisture: 10
 Low: -
 High: -
 Moisture: -
 Low: X

Redox in soil at Flag from shovel pit

Part of location: Pit 2 (Close to Rd by seasonal Dr)

Horizon	Depth	Matrix Color	Other Features	Remarks
A	0-5	Br.	None	SL
B	5-8	Br	"	SL
C	8"	Br & Gray	Croma 2	"

Depth to bedrock: 48"
 Soil depth: 8
 Moisture: 8
 Low: -
 High: -
 Moisture: -
 Low: X

Two best pits of McGwy in yard



Aerobic Wastewater Solutions

104 Timber Lane
White Hall, Arkansas 71602
Voice (870) 247-7634 Fax (870) 247-0268
1-877-247-7643

Customer: Joe Franz Contract Begins: _____
ADH Permit#: _____ ADEQ Permit#: _____
Mailing Address: 27 Dogwood Dr Physical Address: at same
City, State Zip: Arkadelphia AR 71923 Phone Number: 870-246-6888 Fax Number: _____
Plant Installation Date: _____ Installing Dealer: _____
Plant Model: AS500 Plant Serial #: _____ Air Pump Serial #: _____

This agreement provides a comprehensive service program that will insure continuous, trouble free operation of your on-site wastewater treatment plant. As with any mechanical device, your on-site wastewater treatment plant requires periodic servicing to prevent major operational failures.

5 year service agreement "Surface Discharging Systems" W/ 5yr pro rate Per ARQ55

We, *Aerobic Wastewater Solutions*, being the authorized Aqua Safe® Distributor for the State of Arkansas, offer a full service program that will keep your unit functioning properly and to detect major trouble before it starts. This service consists of the following:

1. Routine inspections will be conducted every SIX months or as required by the Arkansas Department of Health, Arkansas Department of Environmental Quality and/or the NSF.
2. Each inspection will consist of taking the required data requested by the Arkansas Health Department, also data we, *Aerobic Wastewater Solutions*, take for our personal records.
3. Under the ADEQ permit ARG55 and *Aerobic Wastewater Solutions*, you will be required to be set up with a certified lab (SORRELLS RESEARCH LABORATORY AND FIELD SERVICES) to have a routine schedule for the following lab test: (Estimated flow, Biochemical Oxygen Demand, Total Suspended Solids, Dissolved Oxygen, Fecal Coliform Bacteria, and P.H.)
4. Maintenance items, such as air filters, are included in this agreement. Manufacturer warrants system air compressor for a limited pro-rated 5 year period thus: First two years – 100%, 2nd to 3rd year – 75%, 3rd to 4th year – 50%, and 4th to 5th year period 25% of the manufacturers list price, provided a five-year continuous service contract is maintained on the system. This applies only to AS500, AS600, and AS750.
5. This service agreement is voided if not used according to the owner's manual. Discharging chemicals (drain cleaners, anti-bacterial soaps, bleach) or other foreign materials (tampons, feminine napkins, paper towels, plastics, other non-biodegradable material) into system which kill bacteria and cause system failure.
6. Service Calls due to alarms will cost \$150.00. Depending on the nature of the problem, charges will apply to the material basis at the time of service. We strongly recommend the regular use of "Septictrine" as distributed by Aerobic Wastewater Solutions as a drain cleaner and system digestive enhancement. It contains enzymes that are specifically suited for digestion of paper (cellulose), grease, soap, and vegetable waste. It will significantly reduce sludge build-up.
7. Chlorinator, if so equipped, will be the owner's responsibility to keep the required chlorine in the chlorinator. We supply and deliver Norweco Blue Crystal® (*Calcium hypochlorite*) chlorine tablets for use in a low flow situation and Norweco Bio-Sanitizer® (*Calcium hypochlorite*) chlorine tablets for use in a high flow situation in your Aqua Safe® system. These are the only product listed on the "Approved Products List" of the Arkansas Department of Health for use in wastewater treatment plants. As individual flows may vary, chlorine usage can vary. The supply in your chlorinator may not last the entire time

MEMORANDUM OF AGREEMENT

SUBJECT: HOME SEWAGE TREATMENT SYSTEM

This is an agreement that the alternative/experimental sewage system installed on this property has been permitted under authority of Act 402 of 1977 and by the Arkansas Department of Health with the understanding that the following provisions are met:

1. The property owner assumes all responsibility for the proper operation of the system and the maintenance of a valid service contract with a Certified Maintenance Personnel approved to service and monitor such home sewage treatment systems. The service contract shall include provisions for the monitoring of free chlorine and PH and reporting to ADH as required.
2. The Arkansas Department of Health has no responsibility in the operation and maintenance of such systems.
3. That the Arkansas Department of Health may monitor the system as to its operation capabilities.
4. That the Arkansas Department of Health is granted permission to make such inspections as deemed necessary.
5. That, on the sale of the property, the perspective buyer will be notified of this agreement, and both the buyer and seller are to sign such memoranda and contracts.
6. Any participation in the design or construction of such experimental systems by the Arkansas Department of Health shall not be considered as a conflict of interest with other parties, and such participation shall not place the Arkansas Department of Health as a responsible party if malfunctions occur.
7. The owner may be required to file an application to the Arkansas Department of Environmental Quality (ADEQ) for a National Point Discharge Elimination System (NPDES) permit. The Arkansas Department of Health will notify the ADEQ of all permits issued for systems that discharge sewage, when applicable.

SIGNED: Joe [Signature]
(Property Owner)

SIGNED: [Signature]
(Health Department)

DATE: 11-30-2009

DATE: 2 Dec. 2009



Site ID Number

Onsite Maintenance Program Site Profile

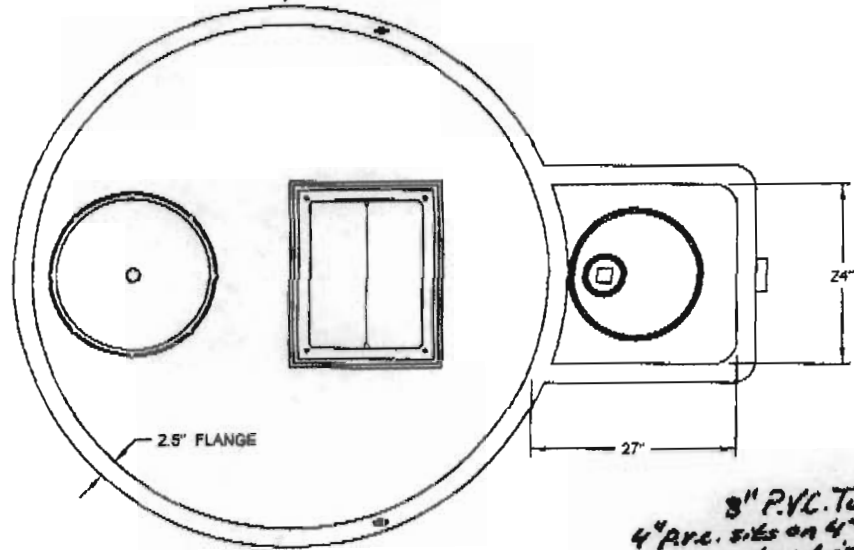
1 Owner <i>Joe Franz</i>		2 Phone Number <i>870-246-8896</i>			
3 Mailing Address <i>27 Dogwood</i>		City <i>Arkadelphia</i>	State <i>Ar</i>	Zip <i>71923</i>	
4 911 Address of System <i>27 Dogwood</i>		City <i>Arkadelphia</i>	State <i>Ar</i>	Zip <i>71923</i>	
5 Permit Number	6 Date of Final Inspection				
7 County <i>Clark</i>	8 Region				
9 Type of System <input checked="" type="checkbox"/> ATU <input type="checkbox"/> RPF <input type="checkbox"/> RSF <input type="checkbox"/> ISF <input type="checkbox"/> OXD <input type="checkbox"/> LPD <input type="checkbox"/> OTH				Does the system discharge? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
10 Certified Maintenance Person <i>Nick Purdy</i>		11 CMP Number			

Comments

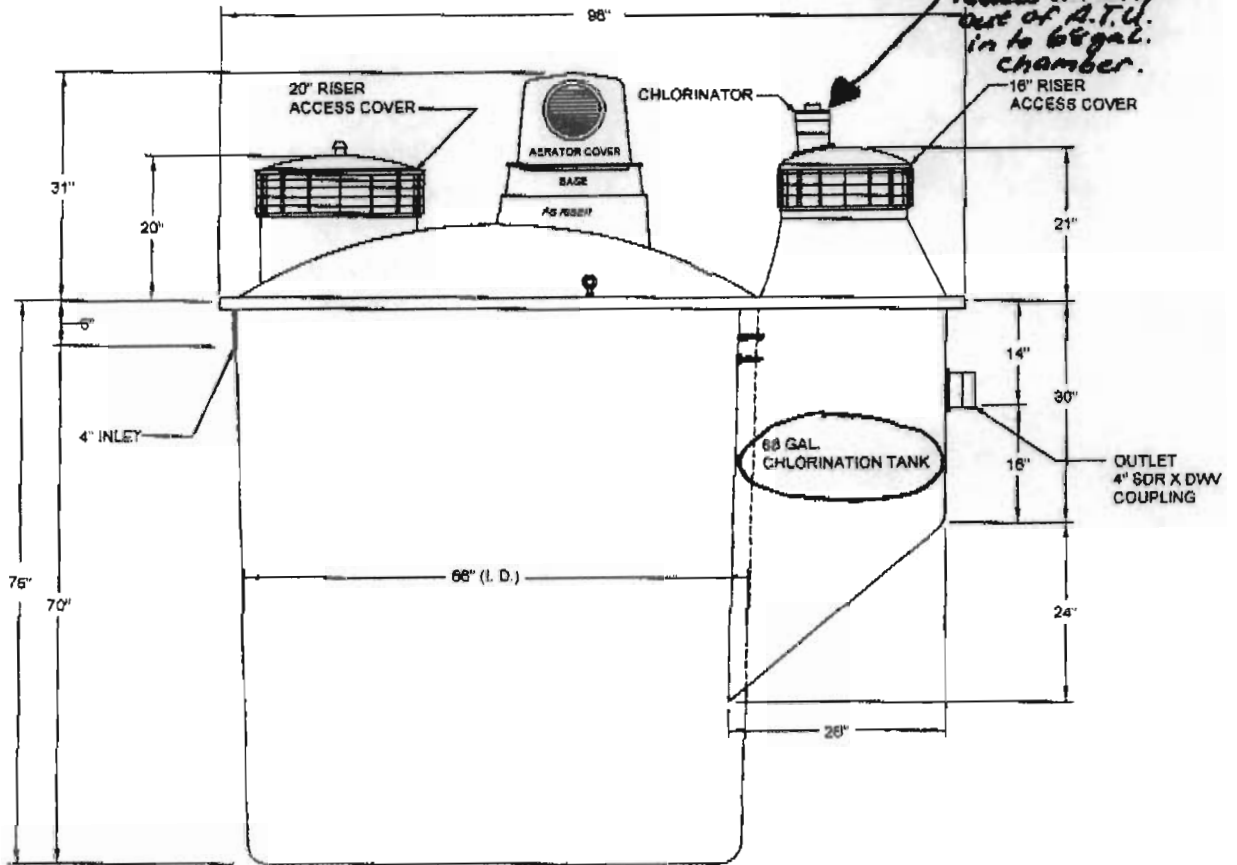
Environmental Specialist	Environmental Specialist ID Number	Date
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Aqua Safe
AS 500cu

chlorinator meets requirements
by State.



TOP VIEW

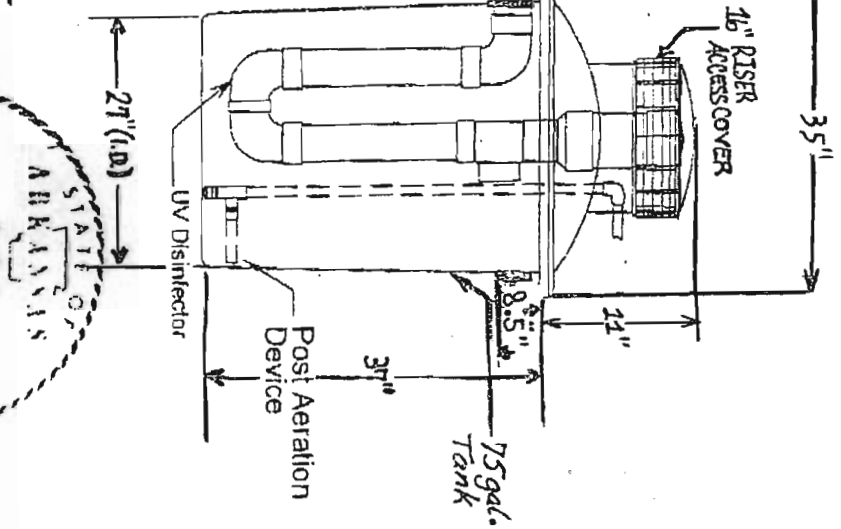
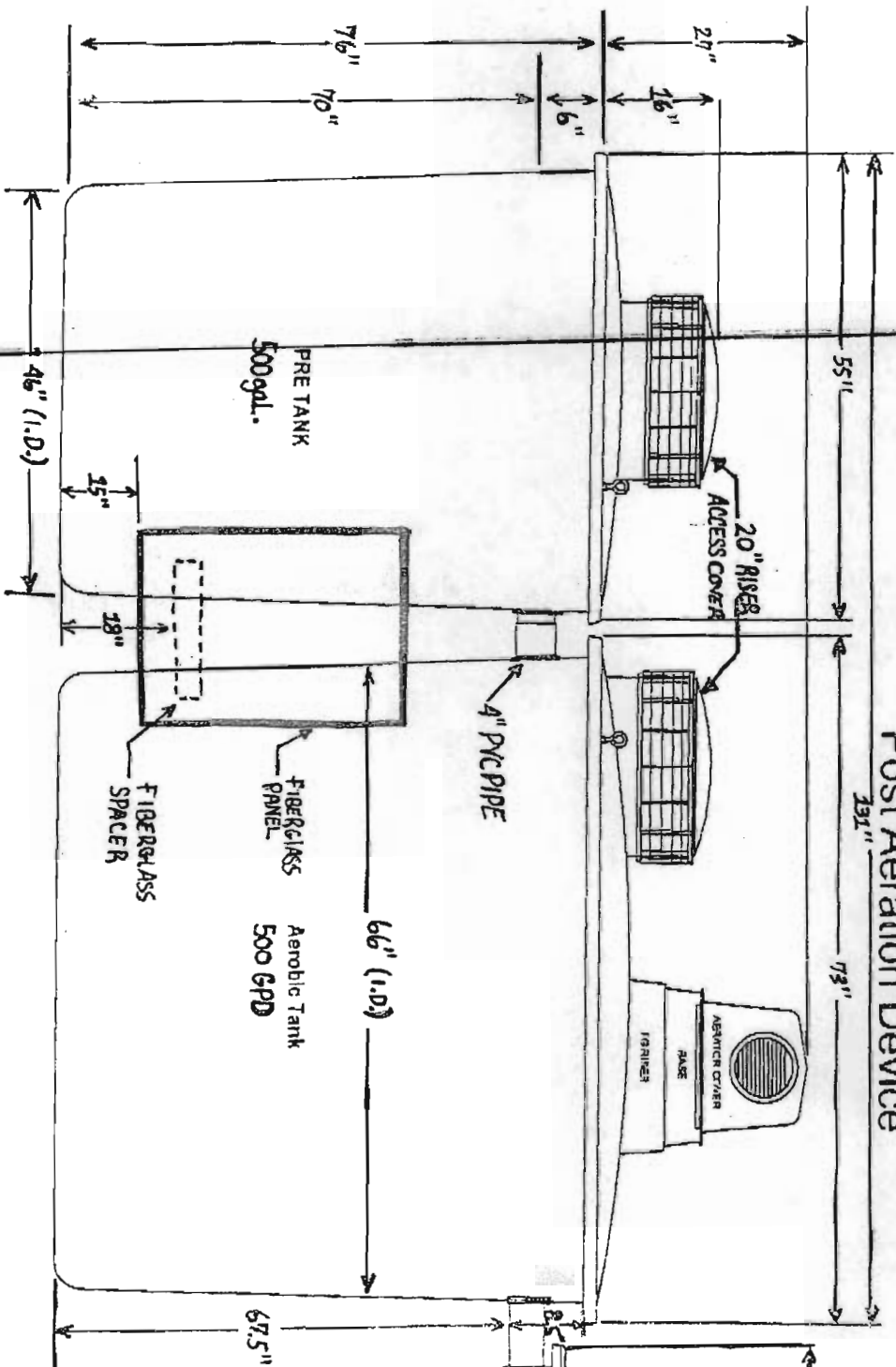


SIDE VIEW

ALL DIMENSIONS IN INCHES

TITRATION:				
LASSOO CU WITH EZ TOP				
Capacity: 500 GPD		Flow Line Volume: 1000 GALL		
Rev: 1.201 ADAY				
D-TA-034	REV: 0	DATE: 11/4/98	SCALE: FULL	ENG: RD
SICAL TANKS, INC.				
7101 NORTH				
LAL, LA 71124				
817 OFFICE				
817 FAX				
NO PART OF THIS DOCUMENT IS TO BE REPRODUCED, STORED IN ANY RETRIEVAL SYSTEM OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC, MECHANICAL, PHOTOCOPYING, RECORDING OR OTHERWISE WITHOUT THE WRITTEN PERMISSION OF SICAL TANKS, INC.				

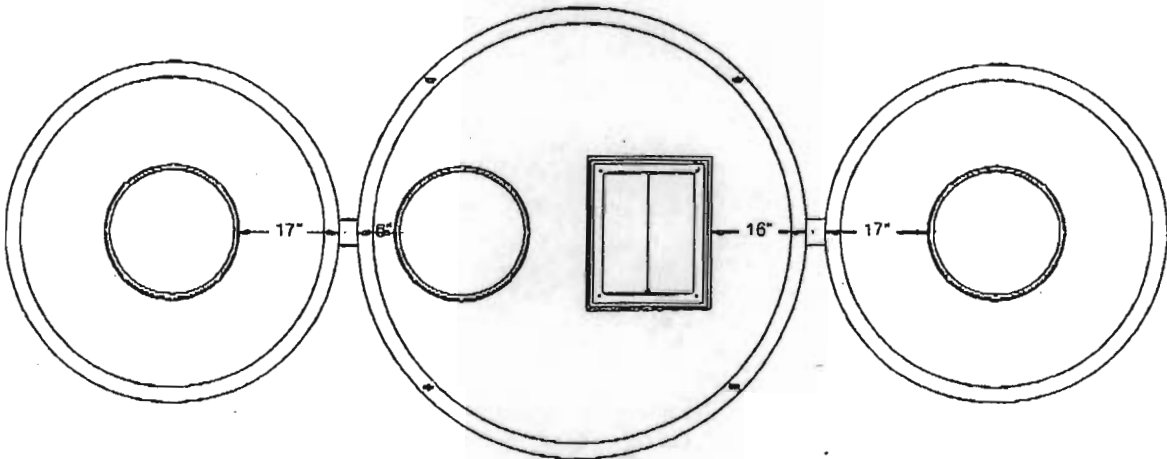
Ecological Tanks, Inc.
 Aqua Safe Model AS500+5 EZ Pre with
 EZ Top, UV Disinfection Device and
 Post Aeration Device



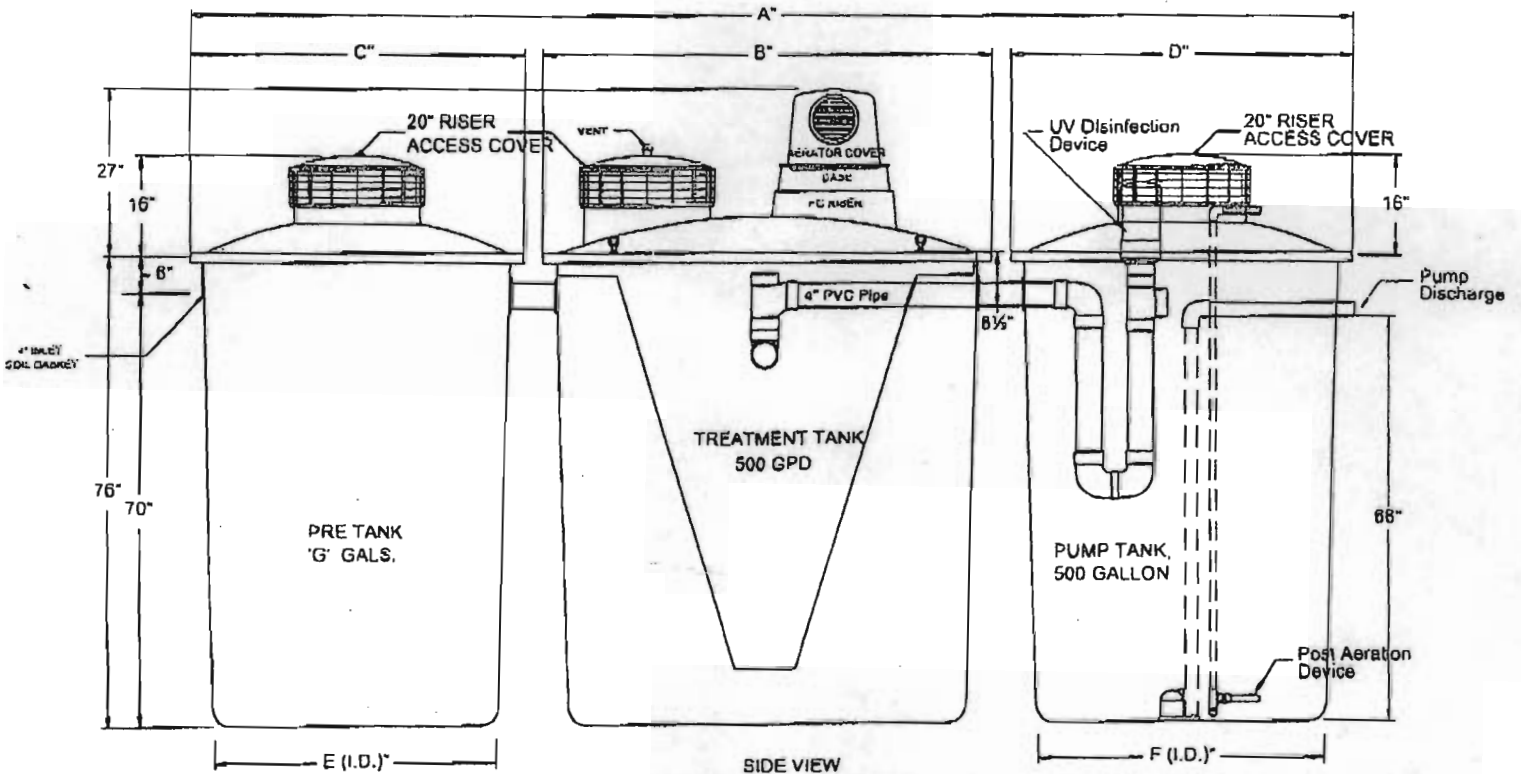
Treatment Capacity: 500 GPD	Flow Line Volume: 1000 GAL
Flow Line Length: 135 ft	

STATE OF ARKANSAS
 REGISTERED PROFESSIONAL
 ENGINEER
 NO. 2179
 R. SUMMERFORD

Handwritten signature and date:
 [Signature]
 11/16/01



TOP VIEW



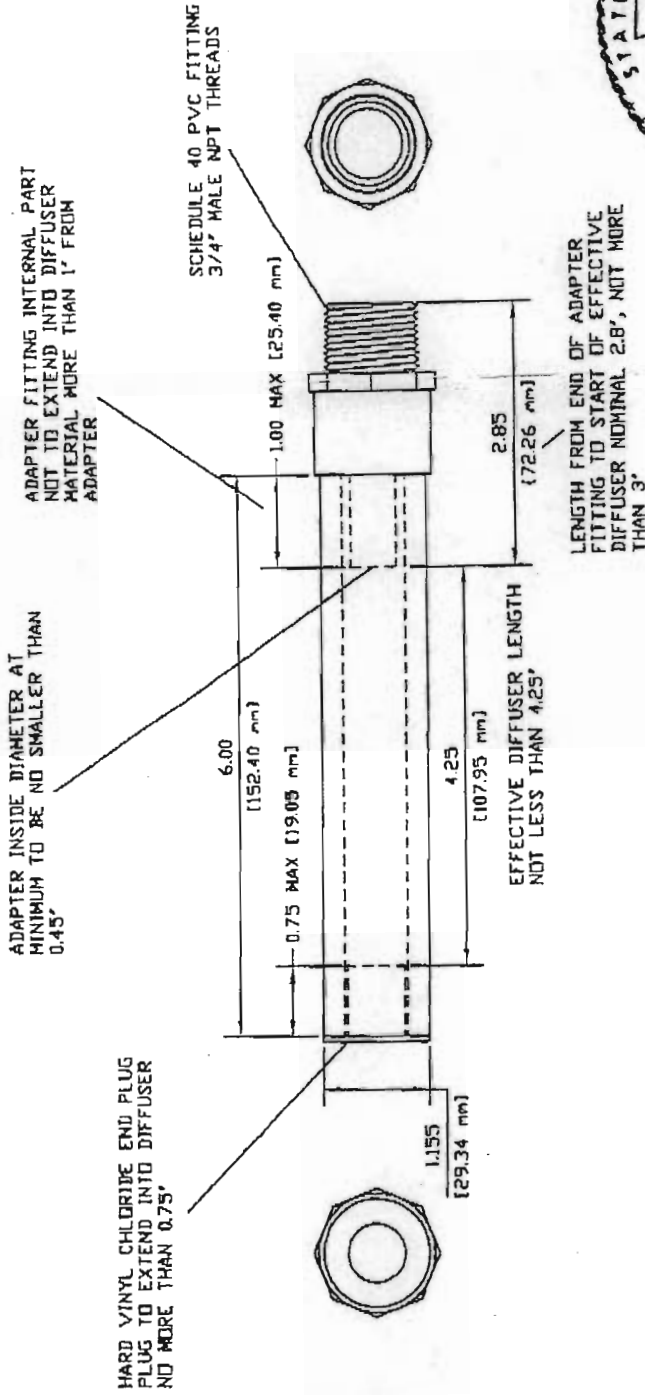
SIDE VIEW

DESCRIPTION:
 TRIO MODEL WITH EZ TOP
 (Pre-treatment tank, Pump Tank,
 UV Disinfection, Post Aeration, and Lift Pump)
 ALL DIMENSIONS IN INCHES
 SOLO Loading AS NOTED IN CHART
 DWG REF: D-1A-NW (REV'S) (DATE: 11/27/09) (SCALE: FULL) (ENGR: JRC)
 ECOLOGICAL TANKS, INC.
 15100 N. 10TH AVE.
 SUITE 100
 DENVER, CO 80231

Designation	Trmt Capacity	BOD Loading	Total Volume	Aeration Volume	Clarifier Volume	A	B	C	D	E	F	G
AS500	500GPD	1.25	1000	648	162	189	72	55	55	46	46	500
AS600	600GPD	1.50	1190	1000	190	205 1/2	79 1/2	64	55	55	46	750
AS750	750GPD	1.85	1516	1288	228	228	87	72	55	64	46	1000

STATE OF ARKANSAS
 REGISTERED PROFESSIONAL ENGINEER
Charles R. Sumnerford
 No. 2179
 CHARLES R. SUMNERFORD
 12/16/09

TD: NICK



STATE OF ARKANSAS
 REGISTERED PROFESSIONAL ENGINEER
 CHARLES R. SUMMERFORD
 No. 2179
 11/16/09

DIFFUSER, SMALL DIAMETER,
 TP500 MATERIAL

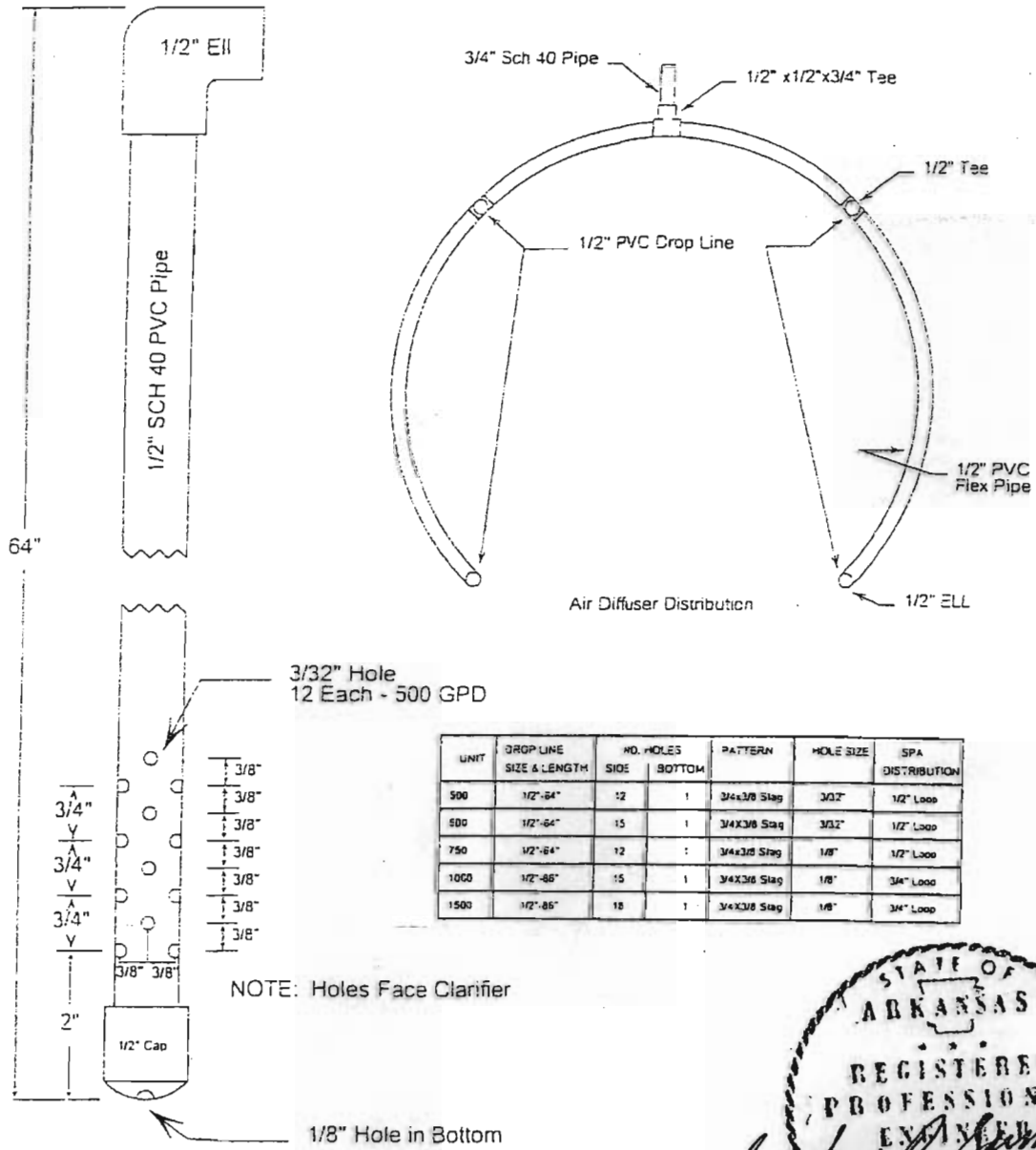
DWG NO.	DIF500S	REV	0
SCALE:	1:2	SIZE:	A
DATE:	4/3/07	SHT	

NOTES

- ALL DIMENSIONS IN INCHES
- DIFFUSER MATERIAL - TP500 PORUS POLYPROPYLENE TUBING
 NOMINAL ID - 0.693"
 NOMINAL OD - 1.155"
- DIFFUSER ASSEMBLY DESIGN PROPRIETARY TO ECOLOGICAL TANKS, INC

NO PART OF THIS DOCUMENT MAY BE REPRODUCED, STORED IN ANY RETRIEVAL SYSTEM OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC, MECHANICAL, PHOTOCOPYING, RECORDING OR OTHERWISE WITHOUT THE PRIOR WRITTEN PERMISSION OF ECOLOGICAL TANKS, INC.

AQUA SAFE TREATMENT PLANTS AIR LINE DIFFUSION



3/32" Hole
 12 Each - 500 GPD

UNIT	DROP LINE SIZE & LENGTH	NO. HOLES		PATTERN	HOLE SIZE	SPA DISTRIBUTION
		SIDE	BOTTOM			
300	1/2"-64"	12	1	3/4"x3/8" Stag	3/32"	1/2" Loop
500	1/2"-64"	15	1	3/4"x3/8" Stag	3/32"	1/2" Loop
750	1/2"-64"	12	1	3/4"x3/8" Stag	1/8"	1/2" Loop
1000	1/2"-85"	15	1	3/4"x3/8" Stag	1/8"	3/4" Loop
1500	1/2"-85"	18	1	3/4"x3/8" Stag	1/8"	3/4" Loop

NOTE: Holes Face Clarifier

STATE OF ARKANSAS
 REGISTERED PROFESSIONAL ENGINEER
Charles R. Summerford
 No. 2179
 CHARLES R. SUMMERFORD
 11/16/09

ECOLOGICAL TANKS, INC.

04/2002