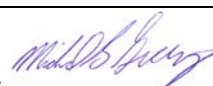

 A R K A N S A S Department of Environmental Quality		WATER DIVISION INSPECTION REPORT					
		AFIN: 62-00070		PERMIT #: AR0020087		DATE: 4/17/2014	
		COUNTY: 62 St. Francis			PDS #: 077729		MEDIA: WN
		GPS LAT: 34.997413 LONG: -90.835236 LOCATION: Entrance					
FACILITY INFORMATION				INSPECTION INFORMATION			
NAME: Forrest City WWTP LOCATION: Approximately 3 miles west of Forrest City, at the end of SFC 209 CITY: Forrest City, AR				FACILITY TYPE: 1 - Municipal		INSPECTOR ID#: 86009 S - State	
				FACILITY EVALUATION RATING: N		INSPECTION TYPE: SSO/Collection System	
				DATE(S): 4/17/2014		ENTRY TIME: 11:05	
				EXIT TIME: 13:00		PERMIT EFFECTIVE DATE: 8/1/2012	
						PERMIT EXPIRATION DATE: 7/31/2017	
RESPONSIBLE OFFICIAL							
NAME: / TITLE Larry Bryant / Mayor COMPANY: Forrest City WWTP MAILING ADDRESS: P.O. Box 1074 CITY, STATE, ZIP: Forrest City AR 72336 PHONE & EXT: / FAX: 870-261-1424 / EMAIL: N/A				FAYETTEVILLE SHALE RELATED: N FAYETTEVILLE SHALE VIOLATIONS: N			
CONTACTED DURING INSPECTION: No				INSPECTION PARTICIPANTS			
				NAME/TITLE/PHONE/FAX/EMAIL/ETC.: Joel Thetford / Operator / 870-270-0201			
AREA EVALUATIONS							
(S=Satisfactory, M=Marginal, U=Unsatisfactory, N=Not Applicable/Evaluated)							
S	PERMIT	**	FLOW MEASUREMENT	**	STORMWATER		
M	RECORDS/REPORTS	**	LABORATORY	**	FACILITY SITE REVIEW		
M	OPERATION & MAINTENANCE	**	EFFLUENT/RECEIVING WATER	**	SELF-MONITORING PROGRAM		
**	SAMPLING	**	SLUDGE HANDLING/DISPOSAL	**	PRETREATMENT		
M	OTHER: SSO						
SUMMARY OF FINDINGS							
<p>This Sanitary Sewer Overflow Inspection was performed during the course of a routine Compliance Evaluation Inspection. No violations were noted at the time of inspection. However, it appears there is a lack of organization for SSO reporting. Additionally, the City experiences significant Infiltration and Inflow (I&I) volumes during storm events, in which the influent is diverted to the lagoons. There is a concern that the required 3 feet of freeboard in the lagoon may not be maintained. A collection system evaluation and corrective action plan may be required to address I&I issues if lagoon freeboard becomes inadequate or other violations occur.</p>							
GENERAL COMMENTS							
Refer to the April 17, 2014 Compliance Evaluation Inspection for additional information.							
INSPECTOR'S SIGNATURE:  Michael Greenway						DATE: 5/9/2014	
SUPERVISOR'S SIGNATURE:  Jason Bolenbaugh						DATE: 5/9/2014	

COLLECTION SYSTEM INSPECTION AND OVERALL RATING		<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
PROVIDE A BRIEF DESCRIPTION OF THE COLLECTION SYSTEM: Combination gravity and forced main system		
POPULATION SERVED/NUMBER OF RESIDENTIAL AND COMMERCIAL CONNECTIONS:		
FEET OF SEWER SYSTEM: Approximately 53,000		
AGE OF SYSTEM: 1920 and newer		
DOES THE SYSTEM EXPERIENCE PROBLEMS DURING DRY OR WET WEATHER (EXPLAIN): Significant I&I problems	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
IS THERE A SYSTEM IN PLACE FOR REPORTING SSOS TO ADEQ (DESCRIBE): Recent change in management, currently no organized reporting system in place.	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
ARE ALL SSOs REPORTED REGARDLESS OF SIZE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE	
HAVE SSOs REACHED "WATERS OF THE STATE" (LIST DATE AND LOCATION OF EACH): Multiple SSO's have been reported. A list of SSO's can be obtained through the ADEQ website database.	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE	
PUMP STATIONS		<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
NUMBER OF PUMP STATIONS IN SYSTEM: 19	NUMBER WITH BACKUP POWER: 3	
HOW OFTEN ARE PUMP STATIONS INSPECTED/MONITORED: Twice Daily		
ARE MAINTENANCE RECORDS AND/OR OPERATOR LOGS KEPT: Yes		
ADEQUATE INVENTORY OF SPARE PARTS: Yes		
TYPE OF REMOTE ELECTRONIC MONITORING USED (I.E. SCADA OR AUTO DIALERS): Auto Dialers in use		
BRIEF SUMMARY OF EMERGENCY PROCEDURES: Portable generators		
NUMBER OF PUMP STATIONS VISITED DURING INSPECTION (SEE ATTACHED CHECKLISTS FOR EACH): 1		
SATELLITE SYSTEMS		<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
DOES THE COLLECTION SYSTEM RECEIVE FLOW FROM SATELLITE SYSTEMS:		
TYPE(S) OF WASTE WATER RECEIVED: <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:		
BRIEFLY DESCRIBE THE SATELLITE SYSTEM:		
ANY KNOWN PROBLEMS WITH SATELLITE SYSTEM:		
NAME, ADDRESS AND PHONE NUMBER OF PERSON RESPONSIBLE FOR SATELLITE SYSTEM:		

PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)	
GENERAL INFORMATION AND OVERALL EVALUATION	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: <u>Mallory (Main Pump Station on SFC 200)</u>	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input checked="" type="checkbox"/> COMMERCIAL <input checked="" type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: <u>3</u>	NUMBER OPERATIONAL: <u>3</u>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
EVIDENCE OF RECENT OVERFLOWS OR HIGH LEVELS: <u>High level, no overflow</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
GENERAL OPERATION AND MAINTENANCE	
<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA	
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAGE OF UNRELATED EQUIPMENT:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GATES/DOORS/HATCHES/LIDS/ETC. LOCKED TO PREVENT UNAUTHORIZED ACCESS AND/OR TAMPERING:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
WET WELLS, SUMPS AND PITS ADEQUATELY COVERED, GRATED OR OTHERWISE PROTECTED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ELECTRICAL CONTROLS COVERS CONDUIT AND EQUIPMENT PROPERLY INSTALLED AND MAINTAINED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GUARDS AND SHIELDS IN PLACE AROUND MOVING EQUIPMENT (BELTS, PULLEYS, DRIVESHAFTS, ETC.) :	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE VENTILATION TO PREVENT EXCESSIVE CONDENSATION AND/OR GASES AND FUMES:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE LIGHTING FOR ROUTINE INSPECTION/MAINTENANCE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SEALS, VALVES AND PACKING ADEQUATELY MAINTAINED TO PREVENT LEAKS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN WET WELLS:	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
BACKUP POWER AND ALARMS	
<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SCADA SYSTEM (LIST PARAMETERS MONITORED): <u>High Level and Power</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

Water Division Photographic Evidence Sheet

Location:	Forrest City WWTP, Mallory Pump Station		
Photographer:	Michael Greenway	Date:	4/17/2014
Witness:	None	Time:	12:29
		Photo #:	1
Description:	View of the wet well access at the Mallory Pump Station. Note the debris on the steps from high wastewater level.		



ADEQ

ARKANSAS
Department of Environmental Quality

CERTIFIED MAIL: 91 7199 9991 7030 4911 0364

June 19, 2014

Larry Bryant, Mayor
Forrest City WWTP
P.O. Box 1074
Forrest City, AR 72336

RE: Failure to respond to inspection, Forrest City WWTP
AFIN: 62-00070 Permit No.: AR0020087

Dear Mayor Bryant:

A letter dated May 12, 2014 was sent by the ADEQ to you. The letter outlined the findings of my April 17, 2014 inspection of the above referenced facility. The letter requested that a written response be submitted to the Water Division Inspection Branch of this Department by May 30, 2014. To date, no response has been received.

Please submit a written response by **July 2, 2014**. A copy of the inspection report has been included for your convenience.

Thank you for your attention to this matter. Should you have any questions, feel free to contact me at 870-935-7221 or by e-mail at greenway@adeq.state.ar.us.

Sincerely,



Michael Greenway
District 3 Field Inspector
Water Division