



Douglas A. Ducey
Governor

ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY



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Director

Aquifer Protection Permit Field Inspection Report

This checklist is provided as a tool for permit holders and ADEQ staff to have a consistent understanding of the major compliance expectations under this permit. This checklist is designed to be easy to read and follow. It is intended only to address the permit requirements that ADEQ feels are the most important to protect human health and the environment. This list does not include every permit condition and permit holders should ensure they understand the full requirements of their permit. This list does not supplant or supersede any legal requirement and is not binding on the permit holder or ADEQ staff.

Facility Name: Pine Creek Canyon Domestic WWTS Place ID: 278	Inspection No: 338913 Inspection Date: 12/5/19
Inventory/Permit #: 102949 Current LTF#: 28565	Inspector(s): Jocelyn Hicks
Facility Address: T12N, R8E, S25 City, State, Zip: Pine, AZ County: Gila	Inspector Phone: Office: 602-771-8724, Cell: 602-620-0459 Inspector Email: hicks.jocelyn@azdeq.gov
Permittee/Responsible Party: Pine Creek Canyon Domestic Water Improvement District Contact: Harry Jones Mailing Address: PO Box 945 City, State, Zip: Pine, AZ 85544 Phone: 328-595-1111 Email: harryjoneshdj@msn.com	WWTP Population Served: >100 avg Treatment Plant Grade: 2 Collection System Grade: 1
Operator/ID: Patrick Carpenter/ OP007600 Phone: 928-606-0498 Email: pataqualitywater@gmail.com Op. Cert. Grade/Expiration: 3W & 2C 6/30/22	Compliance Summary: Certified Operator <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Physical Facilities <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Monitoring and Reporting <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Results of Inspection:

- ☐ No deficiencies were noted during the course of the inspection. No ADEQ action will result from this inspection.
- ☒ Potential deficiencies were noted during the course of the inspection. Additional correspondence regarding this inspection may be forthcoming.
- ☐ Notice of Opportunity to Correct Deficiencies (NOC)
- ☐ Notice of Violation (NOV)

Inspection Report Issued: Via email from ADEQ office

Facility Initial:

ADEQ Initial:

Potential Deficiencies:

No 5/30 day reports have been received for the high levels of nitrogen noted in the potential deficiencies reports. This is part of the contingency reporting requirements.

SMRF revisions will need to be made to eliminate the false high flow events.

It is also recommended to add the physical facility inspections to the daily log sheets. This information can be found in Table II of the permit.

PHOTOGRAPHS TAKEN DURING INSPECTIONS ARE AVAILABLE ON REQUEST

Requirements: C: Compliance, NC: Non-Compliance, P: Pending, N/A: Not Applicable

Documentation:	Requirement met?	Comments
Non-submittals or exceedances within the last six quarters of SMRF reporting.	<input type="checkbox"/> C <input checked="" type="checkbox"/> NC <input checked="" type="checkbox"/> P <input type="checkbox"/> N/A	Currently undergoing SMRF Revisions for the potential deficiencies sent to the facility. The high flow events still need to be revised.
The required notifications provided for violation of any permit condition, discharge limit, or exceedance of an alert level. <i>(list notifications in Comments)</i>	<input type="checkbox"/> C <input checked="" type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	No Contingency Reports received, however the facility is looking to purchase a new, more easily controllable blower to prevent future nitrate exceedances.
SMRFs and monitoring requirements were discussed with the facility.	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	
Facility has any outstanding or overdue compliance schedule items. (Section 3.0 in the permit)	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	
A copy of the current signed permit on-site.	<input type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	
A copy of the operations and maintenance manual on-site.	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	
A copy of the approved contingency/emergency response plan on-site.	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	
Unauthorized discharge of suspected hazardous, toxic, or non-hazardous materials. If so list corrective actions taken. (Section 2.6.5)	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	
Facility Description and Operational Monitoring Requirements	Requirement met?	Comments
Log book of the inspections and measurements required by this permit updated and current.	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input checked="" type="checkbox"/> P <input type="checkbox"/> N/A	It is strongly encouraged to put the permit requirements from Table II into the log sheets.
Facility treatment processes match what is in the current permit.	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	
Facility being maintained according to the Operations and Maintenance Manual.	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	
Pump Integrity: Good Working Condition	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	
Treatment plant components appear to be in working order.	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	Back Up UV bulb has been ordered. There was evidence of roots, but they are near the top of the tanks and the facility reps have stated that they trim them on a monthly basis.
Berm Integrity: No visible erosion.	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	
Free Board in Percolation Pond: Minimum of 2 ft.	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	Only pond in use.
Free Board in Evaporrrtion Pond: Minimum of 3 ft.	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	This pond is not currently in use.

Compliance Monitoring	Requirement met?	Comments
POC #1 – Southeast, downgradient of the WWTP Loc: 34° 23' 32" N 111° 27' 28" W <ul style="list-style-type: none"> Location verified? Does the well appear to be in working order? 	<input type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input checked="" type="checkbox"/> N/A <input type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input checked="" type="checkbox"/> N/A	Compliance samples taken after UV disinfection. No POC well.
Field Methods – Facility is using applicable on-site calibrations and quality assurance for BOD, T, pH, and turbidity?	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	
Facility has a written QA manual for all analysis done on-site.	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	
ADHS approved methods used for all analyses.	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	
Facility has a method detection limit study for lab methods?	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	
On-site lab instruments properly calibrated.	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	
On-site calibration and baseline reagents within expiration dates.	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	
On-site flow meters properly calibrated.	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	Calibrated every 6 months.
Facility has bench log sheets.	<input checked="" type="checkbox"/> C <input type="checkbox"/> NC <input type="checkbox"/> P <input type="checkbox"/> N/A	

RECOMMENDATIONS AND POTENTIAL DEFICIENCIES:

- Please submit 5/30 day reports for any exceedances that occur. Going forward submit reports via either MyDEQ or email to appcontingencyreports@azdeq.gov.
- Please submit reports for the recent nitrogen exceedences identified in the potential deficiencies reports.
- Please add the items from Table II of the permit to the log sheets.

AQUIFER PROTECTION PERMIT

PERMIT NUMBER P-102949

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TABLE II
FACILITY INSPECTION

Parameter	Performance Levels	Inspection Frequency
Pump Integrity	Good Working Condition	Daily
Treatment Plant Components	Good Working Condition	Daily
Berm Integrity	No Visible Erosion	Weekly
Free Board in Percolation Pond	Minimum of 2 feet measured from elevation 5516 MSL	Daily
Free Board in Evaporation Pond	Minimum of 3 feet	Daily

Modified 6/28/01