AUKE BAY WASTEWATER TREATMENT FACILITY- JUNEAU, ALASKA

Juneau, Alaska AUGUST 2016

		FLOWS			3-33			NFLUEN							0,			EFFLUEN	T				Misc	ELLAN	EOUS
DAY		INTELLIFICATION OF	WASTE			D.O.	S.S.	S.S	BOD	BOD	FOG				D.O	S.S.	S.8.	B.O.D	BOD	FOG	Enterro	FECAL	СЬ	Ch	Na2S0
DAY	DATE	MGD	SLUDGE	TEMP °C	pH	mg/L	mg/L	LBS	mg/L	LBS	mg/L	NH3	*C	pH	mg/L	mg/L	LBS	mg/L	LBS	mg/L	MPN/ 100ml	/100 ml	the second second second	USED	USE
SUN	31	0.05373	0.00150	- C		marc	Ingr	LDS	IIIGIL	LES	myr		ŭ		mg/L	mgr	LDS	riig/L	LBS	mg/L	IOOMI	/100 mi	mg/L	4.00	LBS 2.48
MON	1	0.06123	0.00300	15.0	7,6	5.1							16,4	7.4	3.8								0.07	4.00	2.48
TUE	2	0.05850	0.00300	15.7	7.5	4.9	167.0	81.5	180.0	87.8			16.4	7.4	4.2	52.0	25.4	33.0	16.1		52	5	0.28	5.00	4.03
WED	3	0.06753	0.00300	18.0	7.8	4.3	740.0	416.8	540.0	304.1			16.2	7.4	3.9	62.0	34.9	34.0	19.1		UL.		0.06	6,00	3.72
THU	4	0.06858	0.00250	16.6	8.3	5.2			- 1412				16.2	7.4	4.0		01.0	00	10.7				0.03	6.00	4.34
FRI	- 5	0.09120	0.00250	15.9	7.7	5.5							16.4	7.4	4.6								0.22	6.00	4.03
SAT	6	0.05681	0.00150										1911										UZZ	5.00	4.34
SUN	7	0.05120	0.00150																					5.00	4.34
MON	8	0.07582	0.00200	16.7	7.7	5.2							16.6	7,4	3.6					_			0.02	6.00	4.34
TUE	9	0.07097	0.00400	17.3	8.0	5.1	250.0	148.0	240.0	142.1			16.5	7.4	3.9	58.0	34.3	29.0	17.2			10	0.02	6.00	4.65
WED	10	0.09362	0.00350	16.4	7.3	4.3	210.0	164.0	250.0	195.2			18.6	7.4	3.8	65.0	50.7	30.0	23.4	_		10	0.12	6.00	4.65
THU	11	0.06898	0.00150	15.7	7.8	5.5	2.00	101.0	200,0	100,2			16.3	7.3	4.2	00.0	30,7	50,0	20.4				0.25	7.00	4.34
FRI	12	0.06898	0.00150	17.1	7.8	5.7							16.1	7.3	3.2				-				0.23	7.00	6.82
SAT	13	0.07977	0.00150	1101	1.0	0.1							10.1	7.5	3.2								0.07	5.00	2.48
SUN	14	0.08283	0.00150																	_			_	5.00	3.10
MON	15	0.09737	0.00300	17.9	7.49	6,84							16.3	7.36	3.43								0.05	6.00	4.03
TUE	16	0.06481	0.00200	14.7	7.49	6.18	196.0	105.9	210.0	113.5			16.2	7.20	2.76	24.0	13.0	8.8	4.8	_		1	0.00		_
WED	17	0.06471	0.00200	16.7	7.76	4.90	287.0	154.9	330.0	178.1			16.2	7.34	4.22	19.0	10.3	12.0	6.5					5.00	3.10
THU	18	0.06883	0.00250	16.1	7.70	5,49	201.0	104.8	330,0	170-1			16.0	7.40	7.81	18,0	10.3	12.0	0,0				0.04	5.00	4.65
FRI	19	0.06062	0.00250	14.6	7.47	5.22		_					16.2	7.36	4.36							-	0.02	4.00	4.65
SAT	20	0.06122	0.00150	17.0	7.41	J.22							10,2	1.30	4.30					-			0.12	4.00	3.72
SUN	21	0.06024	0.00150																					3,00	2.48
MON	22	0.06991	0.00250	15.9	7.64	5.23							16.8	7.33	4 22								0.00	3.00	3.41
TUE	23	0.06221	0.00250	16.5	7.86	5.12	190,0	98.6	240.0	124,5		_	1.57		4.33	40.0	0.0	44.0	6.7			40	0.03	4.00	4,65
WED	24	0.00221	0.00200	15.0	7.59	5.08	240.0	194.9	210.0	170.5			16.5	7.31	4.28	18.0	9.3	11.0	5.7			18	0.02	3.00	4.65
THU	25	0.08157	0.00200	15.1	7.86	4.11	295.0	200.7	340.0	231.3			16.5	7.32	3.99	48.0	39.0	28.0	22.7				0.04	4,00	4,03
FRI	26	0.07623	0.00200	15.4	7.30	5.90	430.0	273.4	330.0	209.8			16.7	7.24	4.30	22.0	15.0	22.0	15.0				0.01	4.00	4.65
SAT	27	0.06595	0.00150	10.4	7.50	3,50	430.0	2/3/4	330,0	209.0			10.7	1,24	4,30	15.0	9.5	7,6	4.8				0.19	4.00	3.72
SUN	28	0.06183	0.00150																	_				4.00	2,48
MON	29	0.07488	0.00200	17.2	9.04	7,29	900.0	562.0	760.0	474.6			16,4	7.32	2.00	40.0	0.4						- 45	4.00	2.48
TUE	30	0.07488	0.00200	16.5	7.73	4.81	276.0	172.4	330.0	206.1			18.5	7.34	3.29	13.0	8.1	7.5	4.7			_	0.17	4.00	2.48
WED	31	0.07718	0.00200	16.6	7.72			_							4.80	13.0	8.1	8.0	5.0			5	0.01	4.00	3.72
THU	1	0.07718	0.00250	15.5	7.64	5.11	516.0 250.0	332.1 127.5	450.0	289.7			16.2	7.43	4.23	8.4	5.4	9.6	6.2				0.08	3.00	3.72
FRI	2	0.06115	0.00250	15.1	7.51	4.71 5.22	290.0	147.9	310.0	158,1 158,1			16.3	7.45	4.19	12.0	6.1	7.1	3,6				0.01	3.00	3.10
SAT	3	0.07430	0.00250	15.1	16.1	5.22	280.0	147.9	310.0	108,1			16,6	7.37	4.06	9.0	4.6	3,8	1.9				0.28	3,00	2.79
TOTAL	3	2.21581	0.06650																					3,00	2,79
MUMUM		0.09737	0.00400	17.0	0.0	7.0	000.0	500.0	700.0	474.0			40.0											147.00	
INIMUM		0.09737		17.9	9.0	7.3	900.0	562.0	760.0	474.6			16.8	7.5	7.8	65.0	50.7	34.0	23.4		52	18	0.3	7.0	6.8
VERAGE			0.00150	14.6	7.3	4.1	167.0	81.5	180.0	87.8			16.0	7.2	2.8	8.4	4.6	3.8	1.9		52	1	0.0	3.0	2.5
LOF ANALYSIS		0.07148	0.00215	16.0	23	5.3	349.1	212.0	335.3	202.9	п	9	16.4	- 23	4.1	29.2	18.3	16.8	10.4		52	5	0.1	4.7	3.9

Aug 1-Aug 31 used to deculate Monthly Tetal, Min, Max & Averages.
Jul 31-Sept 3 used to calculate the Weekly averages only.

Ť			WEEKLY					
	WEEK	BC	DD	TS	S	CHLC	COLIFORM	
1		mg/l	tbs.	mg/l	lbs	mg/l	Gal	Geo. Mean
ï	1	34	18	57	30	30	5	5
ı	2	30	20	62	43	43	6	10
ı	3	10	6	22	12	12	5	1
ı	4	17	12	26	18	18	4	18
Ϊ	5	7	4	11	6	6	3	5
H	MAX	34	20	62	43	43	6	18

% REMOVAL							
B,O,D	95.0						
S.S.	91.6						

Alaska Department of Environmental Conservation Monthly Discharge Monitoring Report (DMR)

CONTACT NAME: Catherine Carlson MAILING ADDRESS: 2009 Radcliffe Juneau, AK 99801

FACILITY: Auke Bay WWTF LOCATION: 11825 GLACIER HWY Juneau, AK 99801

TO

PERMIT NUMBER: AKG572004

OUTFALL / MONITORING POINT: 001A Discahrge into Auke Bay

MONITORING PERIOD: 8/1/2016

8/31/2016 NO DISCHARGE Quantity or Loading Quality or Concentration Frequency of Sample Type Minimum Analysis Average Average Maximum **Dissolved Oxygen** Sample **** ***** 4.1 meas. 1 - Final Effluent mg/l Monthly Grab Permit daily minimun 00300 reqmt **Blochemical Oxygen Demand** Sample ***** 10 23 17 34 (BODS) meas. 1 - Final Effluent 40 ***** 30 Grab-Composite 60 mg/l Monthly Permit nonthly average dally maximum daily maximum 00310 reqmt Blochemical Oxygen Demand Sample ***** **** ***** 335 (BOD5) meas. ***** ***** Report mg/l G - Influen Monthly Grab-Composite Permit monthly average 00310 reqmt Biochemical Oxygen Demand Sample ***** ***** ***** 20 34 (BOD5) meas. ***** Grab-Composite W - See Comment 45 mg/l Monthly Permit weekly average 00310 reqmt. рΗ Sample ***** ***** 7.2 7.5 meas. ***** 1 - Final Effluent S.U. 3X Weekly Grab Permit daily minimum dally maxim 00400 reqmt Total Suspended Solids Sample ***** 18 51 29 65 1 meas ***** Grab-Composite 1 - Final Effluent ma/l Monthly Permit nonthly average daily maximum monthly average dally maximum 00530 reqmt Total Suspended Solids Sample ***** ***** ***** 349 meas ***** ***** ***** G - Influent Report mg/l Monthly Grab-Composite Permit nthly averag 00530 reqmt **Total Suspended Solids** Sample 43 ***** ***** 62 2 ***** W - See Comments mg/l Grab-Composite Monthly Permi weekly average 00530 Flow Sample ***** ***** ***** 0.07 0.10 meas. ***** ***** 1 - Final Effluent 0,16 MGD 5X Weekly Measured Permit daily maximu onthly average 50050 reqmt Total Residual Chlorine Sample ***** **** ***** 0.1 0.3 meas. ***** ***** ***** 1 - Final Effluent 0.5 1.0 3X Weekly mg/i Grab Permi dally maxim monthly average 50060 reqmt. Enterococci Sample ***** **** **** ***** 52 ****** 1 - Final Effluent ***** ts/100 m See Permit Grab Permit dally maximus Regulrements 61211 regmt Fecal Coliform Sample ***** ***** ***** 5 18 ***** 200 1 - Final Effluent ts/100 n Grab Permi dally maximum monthly 74055 ometric mea BOD5 Minimum % Removal Sample ***** ***** 95 ***** ***** ****** ***** ***** K - Percent Remova Monthly Calculation Permi inknum percei 81010 reqmt Total Suspended Solids Minimum Sample ***** ***** 92 ***** ***** % Removal ***** ****** K - Percent Removal Calculation Permi

COMMENTS: PLEASE SEE THE ATTACHED NONCOMPLIANCE NOTIFICATION REPORTS DATED 8/15/2016 AND 8/24/2016.

W = Average Weekly Effluent Limits; For Enterococci Bacteria monitoring requirements see Section 2.4 of the permit

B1011

Mall this report when completed to ADEC, Division of Water, 555 Cordova Street, Anchorage, AK 99501-2617 Attach an explanation of any violations. Reference all attachments below.

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NAME/TITLE PRINCIPLE EXECUTIVE OFFICE	I certify under penalty of law that this document and all attachments were		TELEPHONE	DATE
CATHERINE CARLSON/Wastewater Treatment Plant Operator	prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the	De nou 2 Box Osc	907 586-0393	16/09/12
Treatment take operator	Information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant	SIGNATURE OF PRINCIPAL	907 386-0393	16/09/12
TYPED OR PRINTED	penalties for submitting false Information, including the possibility of fine and imprisonment for knowing violations.	EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA/NUMBER	YY/MM/DD



Alaska Department of Environmental Conservation
Division of Water, Compliance and Enforcement Program
555 Cordova Street

Anchorage, Alaska 99501

Nationwide Toll Free: 1(877) 569-4114 Anchorage/International: (907) 269-4114 Fax: (907) 269-4604 E-mail address: dec-wqreporting@alaska.gov.

NONCOMPLIANCE NOTIFICATION

O	ION	PERMIT# (if any):							
Owner or Operator: CBJ		Facility Name: Auke Bay WWTP	Permit # AKG 572004	1	Location: Glacier Highway, Juneau, AK 99803				
Person Reporting: Catherine Carlson		Phone Numbers of Pe 907 586-0393 or (9	erson Reporting: 907)723-7849	Reporte	Reported How? (e.g. by phone): Phone- National non-compliance hot-line				
Date/Time Event was Not 8/24/2016 1:00 pm	iced:	Date/Time Reported: 8/24/2016 1:15 pm		Name of 1-907-2	Name of DEC Staff Contacted: 1-907-269-4114 Left msg. on hotline				
VERBAL NOTIFICATION	ON MUST B	E MADE TO ADEC WI	V OF NONCOMPLIANCE						
NCIDENT DETAIL	S (attach	E MADE TO ADEC WITHIN 24 HOURS OF DISCOVERY OF NONCOMPLIANCE additional sheets, lab reports, and photos as necessary)							
reriod of		/Time (exact): 8/10/201							
Noncompliance					e (exact): 8/10/2016 8:05 am				
V/A	Deen Correct	ed, provide a statement	regarding the anticipate	d time the i	noncompliance is expected to continue:				
Stimated Quantity involved in the facility exceeded in the facility exceeded in the facility and the facilit	ts Total Su 13/2016.	spended Solids Maxi	imum Daily on 8/10/2	016 and it	s Average Weekly limit for the we				
otal Suspended Solid	s Maximun I on 7/25/2	n Daily and Average 1	Weekly limits were e	xceeded.	The facility was still recovering fro				
otice) Please see co	rrective act	tions listed below.		Well Owners	not to drink from wells until further				
Permit Condition Deviation	n (Identify e	lions listed delow.	ceeded during the event.	.)					
Permit Condition Deviation	n (Identify e	ach permit condition ex	ceeded during the event. <u>Exceedance (sample re</u>	.)	Sample Date				
Permit Condition Deviation	n (Identify e	ach permit condition ex	ceeded during the event.	.)					
Permit Condition Deviation Parameter (e.g. BOD pH) Total Suspended Solidate Corrective Actions (Attachhances of recurrence.) That is a suspended solidate that had entered that had entered ettleability throughout hlorine contact chamber Environmental Damage	s (Identify e Perison Administrations and description Administrations and the plant. There while mass (if yes, pro	ach permit condition exmit Limit ng/l Maximum Daily ng/l Average Weekly on of corrective actions to continued to monitor to n 7/25/2016 and a The CI2 dosing continual intaining a <0.50 mg	Exceedance (sample ref. 65mg/l 61.5mg/l aken to restore the syste, evaluate and make ddress the filamentonued to be closely mog/l avg. in the final eff.	m to norma adjustmer us bacteria onitored to luent.	Sample Date 8/10/2016 8/7/2016 — 8/13/2016 I operation and to minimize or eliminates to reduce the impact of the separation of the sepa				
Permit Condition Deviation Parameter (e.g. BOD pH) Potal Suspended Solids Potal Suspended S	s (Identify e Perison Adescription Operations ed the plant the plant. There while make: (if yes, proow)	ach permit condition exemit Limit ng/I Maximum Daily ng/I Average Weekly on of corrective actions to continued to monitor to on 7/25/2016 and a The CI2 dosing continuantaining a <0.50 mg vide details	Exceedance (sample reference) Exceedance (sample reference) 65mg/l 61.5mg/l aken to restore the syster, evaluate and make ddress the filamento nued to be closely mog/l avg. in the final efference	m to norma adjustmer us bacteria onitored to luent.	Sample Date 8/10/2016 8/7/2016 — 8/13/2016 If operation and to minimize or eliminates to reduce the impact of the separation and the separation				
ermit Condition Deviation Sarameter (e.g. BOD pH) Total Suspended Solidation Solidation Suspended Solidation	s (Identify e Perison Adescription Operations ed the plant the plant the plant the plant (if yes, proow) n Environment	ach permit condition exemit Limit ng/I Maximum Daily ng/I Average Weekly on of corrective actions to continued to monitor to on 7/25/2016 and a limit of the CI2 dosing continuation and a limit of the limit of the cI2 dosing continuation and a limit of the cI2 dosing continuation a limit of the lim	Exceedance (sample reference) Exceedance (sample reference) 65mg/l 61.5mg/l aken to restore the syste, evaluate and make ddress the filamenton used to be closely may always. In the final effectives in detail): Unknown	m to norma adjustmer us bacteria onitored to luent.	Sample Date 8/10/2016 8/7/2016 — 8/13/2016 If operation and to minimize or eliminates to reduce the impact of the separation of the sep				
Permit Condition Deviation Parameter (e.g. BOD pH) Total Suspended Solidation Total Suspended Solidation Soli	s (Identify e S 60n S 45n A description Description	ach permit condition exemit Limit ng/l Maximum Daily ng/l Average Weekly on of corrective actions to continued to monitor to no 7/25/2016 and a The Cl2 dosing continual to the cl2 dosing to the cl2 dosing continual to the cl2 dosing to the	Exceedance (sample reference) 65mg/l 61.5mg/l aken to restore the syste, evaluate and make ddress the filamenton used to be closely more and the final effective of the systematics. Unknown the indetail): Unknown the information submitted. Based of the information submitted in the information submitted in the information submitted.	m to norma adjustmer us bacteria onitored to luent. No n	Sample Date 8/10/2016 8/7/2016 — 8/13/2016 I operation and to minimize or eliminates to reduce the impact of the separation of the sepa				



Alaska Department of Environmental Conservation
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NONCOMPLIANCE NOTIFICATION

CENTER I										
GENERAL INFORMATI	ON	PERMIT# (if any):								
Owner or Operator: CBJ		Facility Name: Auke Bay WWTP F	Permit # AKG 57200		Location: Glacier Highway, Juneau, AK 99803					
Person Reporting: Randall Brown		Phone Numbers of Pe 907 586-0393 or (9	rson Reporting: 107)723-7849		Reported How? (e.g. by phone): Phone- National non-compliance hot-line					
Date/Time Event was Notion 8/15/2016 11:15am	ced:	Date/Time Reported: 8/16/2016 8:16 am			f DEC Staff Contacted: 69-4114 Left msg. on hotline					
VERBAL NOTIFICATIO	N MUST B	BE MADE TO ADEC WI	MADE TO ADEC WITHIN 24 HOURS OF DISCOVERY OF NONCOMPLIANCE							
INCIDENT DETAILS	S (attach	additional sheets, lal	dditional sheets, lab reports, and photos as necessary)							
Period of Noncompliance	Start Date	e/Time (exact): 8/03/201	l6 8:05am	End Date/Time (exact): 8/3/2016 8:05 am						
If noncompliance has not b N/A	een correc	ted, provide a statement i	regarding the anticip	ated time the	noncompliance is expected to continue:					
Estimated Quantity involved The facility exceeded it of 7/31/2016 through 8/Description of the noncompart of the second control of t	s Total Sเ /6/2016	uspended Solids Maxi	mum Daily on 8/3/	2016 and it's	Average Weekly limit for the week					
	s Maximu	m Daily and Average	Weekly limits were	e exceeded.	The facility was still recovering from					
Actions taken to reduce, eliminate, and prevent reoccurrence of noncompliance and Actual/Potential Impact on Environmental Health (describe in detail) (e.g. Supplied drinking water to nearby well owners and informed well owners not to drink from wells until further notice) Please see corrective actions listed below.										
Permit Condition Deviation			ceeded during the eve	ent.)						
Parameter (e.g. BOD pH)		rmit Limit	Exceedance (sample	e result)	Sample Date					
Total Suspended Solids	60	mg/l Maximum Daily	62mg/l		8/3/2016					
Total Suspended Solids	45	mg/l Average Weekly	ge Weekly <u>57mg/l</u>		7/31/2016 - 8/6/2016					
Corrective Actions (Attach a description of corrective actions taken to restore the system to normal operation and to minimize or eliminate chances of recurrence.) The plant was still recovering from the 7/27/2016 event. Operations continued to monitor, evaluate and make adjustments to reduce the impact of the septic material and address the filamentous bacteria overgrowth that was inhibiting settlability throughout the plant. The CI2 dosing continued to be closely monitored to maintain a higher residual in the chlorine contact chamber while maintaining a <0.50 mg/l avg. in the final effluent.										
Environmental Damage belo		ovide details	Yes	I No	✓ Unknown					
Actual /Potential Impact on Environment/Public Health (describe in detail): Unknown										
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.										
Wastewater Treatment Plant Name: Catherine Carlson Title: Operator Signature A WAR OF THE EVENT. FORMS MUST BE SENT TO ADEC WITHIN FIVE DAYS OF BECOMING AWARE OF THE EVENT.										