

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS  
 JUNEAU, CITY AND BOROUGH OF  
 155 SOUTH SEWARD  
 JUNEAU, ALASKA 99801  
 FACILITY:  
 AUK BAY TREATMENT FACILITY  
 LOCATION:  
 JUNEAU, ALASKA

PERMIT NUMBER  
 AK0021407  
 MONITORING PERIOD  
 YR 99 MO 06 DAY 01 to YR 99 MO 06 DAY 30  
 DISCHARGE NUMBER  
 001 A

| PARAMETER                                | MEASUREMENT REQUIREMENT               | QUANTITY OR LOADING |         | QUALITY OR CONCENTRATION |         |                     | NO. EX           | FREQUENCY OF ANALYSIS | SAMPLE TYPE |
|--|---------------------------------------|---------------------|---------|--------------------------|---------|---------------------|------------------|-----------------------|-------------|
|  |                                       | AVERAGE             | MAXIMUM | MINIMUM                  | AVERAGE | MAXIMUM             |                  |                       |             |
| TEMPERATURE, WATER DEG, CENTIGRADE       | SAMPLE MEASUREMENT PERMIT REQUIREMENT |                     |         |                          |         | 14.1                | 16.3             |                       |             |
| EFFLUENT GROSS VALUE                     |                                       |                     |         |                          |         | REPORT DAILY AVG    | REPORT DAILY MAX | 0                     | DAILY GRAB  |
| BOD, 5-DAY (20 DEG. C)                   | SAMPLE MEASUREMENT PERMIT REQUIREMENT | 9.5                 | 12.7    |                          |         | 14                  | 19               | 0                     | 1/MO COMP   |
| EFFLUENT GROSS VALUE                     |                                       |                     |         |                          |         | 30 DAILY AVG        | 60 DAILY MAX     | COMP 24 - ONCE/MONTH  |             |
| pH                                       | SAMPLE MEASUREMENT PERMIT REQUIREMENT |                     |         | 7.2                      |         |                     | 8.1              | 0                     | 5/7 GRAB    |
| 00400 1 0 0                              | SAMPLE MEASUREMENT PERMIT REQUIREMENT |                     |         | 6.0 MIN.                 |         |                     | 9.0 MAXIMUM      |                       | DAILY GRAB  |
| EFFLUENT GROSS VALUE                     |                                       |                     |         |                          |         | 8                   | 13               | 0                     | 1/MO COMP   |
| SOLIDS, TOTAL SUSPENDED                  | SAMPLE MEASUREMENT PERMIT REQUIREMENT | 5.1                 | 8.7     |                          |         | 30 DAILY AVG        | 60 DAILY MAX     | COMP 24 - ONCE/MONTH  |             |
| 00530 1 0 0                              | SAMPLE MEASUREMENT PERMIT REQUIREMENT |                     |         |                          |         |                     | 0.00             | 0                     | 1/MO GRAB   |
| EFFLUENT GROSS VALUE                     |                                       |                     |         |                          |         | REPORT DAILY AVG    | REPORT DAILY MAX |                       | DAILY GRAB  |
| SOLIDS, SETTLEABLE                       | SAMPLE MEASUREMENT PERMIT REQUIREMENT |                     |         |                          |         | 31                  | 350              | 0                     | 1/MO GRAB   |
| 00545 1 0 0                              | SAMPLE MEASUREMENT PERMIT REQUIREMENT |                     |         |                          |         | 200                 | 400              |                       | DAILY GRAB  |
| EFFLUENT GROSS VALUE                     |                                       |                     |         |                          |         | 30 DAY GEO7 DAY GEO | 100 ML           |                       |             |
| COLIFORM, FECAL MF, M-FC BROTH, 44.5C    | SAMPLE MEASUREMENT PERMIT REQUIREMENT |                     |         |                          |         |                     |                  | 0                     | 7/7 CONT.   |
| 31616 1 0 0                              | SAMPLE MEASUREMENT PERMIT REQUIREMENT |                     |         |                          |         |                     |                  |                       | DAILY       |
| EFFLUENT GROSS VALUE                     |                                       |                     |         |                          |         |                     |                  |                       |             |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT | SAMPLE MEASUREMENT PERMIT REQUIREMENT | 0.080               |         |                          |         |                     |                  |                       |             |
| 50050 1 0 0                              | SAMPLE MEASUREMENT PERMIT REQUIREMENT |                     |         |                          |         |                     |                  |                       |             |
| EFFLUENT GROSS VALUE                     |                                       |                     |         |                          |         |                     |                  |                       |             |

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC 1001 AND 22 USC 1319 (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$ 10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 5 MONTHS AND SIX YEARS.)

NAME/TITLE PRINCIPAL EXEC. OFFICER  
 Andrew W. Bronson  
 TELEPHONE 907 789 789  
 DATE 99 07 08

ANDREW BRONSON- WASTEWATER UTILITIES SUPERINTENDENT  
 COMMENT AND EXPLANATION OF ANY VIOLATIONS (REFERENCE ALL ATTACHMENTS HERE)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

F - FINAL

|   |                   |           |                  |
|---|-------------------|-----------|------------------|
| PERMITTEE NAME/ADDRESS<br>JUNEAU, CITY AND BOROUGH OF<br>155 SOUTH SEWARD<br>JUNEAU, ALASKA 99801<br>FACILITY:<br>AUK BAY TREATMENT FACILITY<br>LOCATION:<br>JUNEAU, ALASKA |                   | AK0021407 | 001 A            |
| NAME:   | PERMIT NUMBER     |           | DISCHARGE NUMBER |
| ADDRESS:  | MONITORING PERIOD |           | YEAR MONTH DAY   |
| FACILITY:   | YEAR              | MONTH     | DAY              |
| LOCATION:   | 99                | 06        | 01               |
|   | 99                | 06        | 30               |
|   | MAJOR (SUBR 01)   |           |                  |

| PARAMETER                | QUANTITY OF LOADING |         | QUALITY OR CONCENTRATION |                  | NO. EX | FREQUENCY ANALYSIS | SAMPLE TYPE    |
|--------------------------|---------------------|---------|--------------------------|------------------|--------|--------------------|----------------|
|                          | AVERAGE             | MAXIMUM | MIN.                     | MAXIMUM          |        |                    |                |
| CHLORINE, TOTAL RESIDUAL |                     |         |                          |                  |        |                    |                |
| 60060 1 0 0              |                     |         |                          | 3.00             |        | 0                  | 777            |
| EFFLUENT GROSS VALUE     |                     |         |                          | REPORT DAILY MAX |        |                    | GRAB-WEEK DAYS |
|                          |                     |         |                          | REPORT DAILY AVG |        |                    |                |
|                          |                     |         |                          |                  |        |                    |                |
|                          |                     |         |                          |                  |        |                    |                |
|                          |                     |         |                          |                  |        |                    |                |
|                          |                     |         |                          |                  |        |                    |                |
|                          |                     |         |                          |                  |        |                    |                |
|                          |                     |         |                          |                  |        |                    |                |
|                          |                     |         |                          |                  |        |                    |                |
|                          |                     |         |                          |                  |        |                    |                |
|                          |                     |         |                          |                  |        |                    |                |

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|   |                           |                  |
|---|---------------------------|------------------|
| NAME/TITLE PRINCIPAL EXEC. OFFICER<br>Andrew W. Bronson   | TELEPHONE<br>907 789 9919 | DATE<br>99 07 08 |
| ANDREW BRONSON- WASTEWATER UTILITIES SUPERINTENDENT<br>COMMENT AND EXPLANATION OF ANY VIOLATIONS (REFERENCE ALL ATTACHMENTS HERE)<br>CONCERNING VIOLATIONS PLEASE SEE ATTACHED. |                           |                  |
|   |                           | PG 2 OF 2        |