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

MINOR

( SUBR 01)

F - FINAL

PERMITTEE NAME/ADDRESS	3					AK0021407				001 A	
NAME:	JUNEAU, CITY AND BOROUGH OF				PERMIT NUMBER				DISCHARGE NUMBER		
ADDRESS:	155 90UTH 9EWA	RD			MONITORINO PE				NOD		
	JUNEAU, ALASKA	99801			YR	МО	DAY		YEAR	мо	DAY
FACILITY:	AUKE BAY TREAT	MENT FACILITY	`	FROM	2004	02	01	то	2004	02	29
LOCATION:	JUNEAU, ALASKA								MAJOR (SUBR 01)		
PARAMETER	QUANTITY OR LOADING			G	QUALITY OR CONCENTRATION			-	NO. FREQUENCY SAME		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	OF ANALYSIS	TYPE
TEMPERATURE, WATER DEG, CENTIGRADE	SAMPLE MEASUREMENT	****	*****		*****	9.9	10.5	( 04)	0	5/7	
00010 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****		*****	*****	REPORT DAILY AVG	REPORT DAILY MAX	DEG. C		DAILY	GRAB
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	7.4	7.4	( 26)	****	12.1	12.1	( 19)	0	1/MO	
00310 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	25 DAILY AVG	50 DAILY MAX	LBS/DAY	*****	30 DAILY AVG	60 DAILY MAX	MG/L		ONCE/MONTH	COMP 24
рН	SAMPLE MEASUREMENT	****	****		6.4	*****	6.8	( 12)	0	5/7	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MIN:	*****	9.0 MAXIMUM	SU		DAILY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	6.9	6.9	( 26)	*****	11.3	11.3	( 19)	0	1/MO	
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	25 DAILY AVG	50 DAILY MAX	LBS/DAY	*****	30 DAILY AVG	60 DAILY MAX	MG/L		ONCE/MONTH	COMP 24
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****		*****	0.0	0.0	( 25)	0	1/MO	
00545 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT DAILY AVG	REPORT DAILY MAX	ML/L		DAILY	GRAB
COLIFORM, FECAL MF, M-FC BROTH, 44.5C	SAMPLE MEASUREMENT	*****	****		*****	2.0	2.0	( 13)	0	1/MO	
31616 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	200 30 DAY GEO	400 7 DAY GEO	# / 100 ML		ONCE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.070	*****	( 03)	*****	*****	*****		0	7/7	CONT.
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.10 30.DAY AVG	*****	MGD	*****	*****	*****	*****		DAILY	

NAME/TITLE PRINCIPAL EXEC. OFFICER	TELEPHONE			DATE		
SCOTT JEFFERS, WW UTILITY SUPERINTENDENT	907	586	0393	2004	03	8
COMMENT AND EXPLANATION OF ANY VIOLATIONS (REFERENCE ALL A TACHMENTS HERE)	,					
CONCERNING VIOLATIONS PLEASE SEE ATTACHED.						PG 1 OF 2

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

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001 A

JUNEAU, CITY AND BOROLIGH OF PERMIT NUMBER DISCHARGE NUMBER NAME: MONITORING PERIOD ADDRESS: 155 SOUTH SEWARD JUNEAU, ALASKA 99801 YEAR MONTH DAY YEAR MONTH DAY FACILITY: AUKE BAY TREATMENT FACILITY EDOM 2004 n1 TO 2004 29 LOCATION: JUNEAU, ALASKA MAJOR (SUBR 01) NO. FREQUENCY SAMPLE QUALITY OR CONCENTRATION PARAMETER QUANTITY OR LOADING AVERAGE MAXIMUM UNITS MIN. AVERAGE MAXIMUM UNIIS ANALYSIS TYPE 2.60 7/7 CHLORINE, TOTAL SAMPLE 1.37 ( 19) 0 \*\*\*\*\* \*\*\*\*\* \*\*\*\*\* RESIDUAL MEASUREMENT 50060 1 0 0 PERMIT REPORT REPORT \*\*\*\*\* \*\*\*\*\* \*\*\*\*\* \*\*\*\*\* DAILY MAX DAILY GRAB MG/L EFFLUENT GROSS VALUE REQUIREMENT DAILY AVG SAMPLE MEASUREMENT REQUIREMENT MEASUREMENT EQUIREMENT SAMPLE MEASUREMENT REQUIREMENT SAMPLE MEASUREMENT REQUIREMENT SAMPLE MEASUREMENT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT 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. SE 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.) SCOTT JEFFERS, WW UTILITY SUPERINTENDENT

COMMENT AND EXPLANATION OF ANY VIOLATIONS (REFERENCE ALL ATTICHMENTS HERE)

CONCERNING VIOLATIONS PLEASE SEE ATTACHED. TELEPHONE DATE 907 586 0393 2004 03 PG 2 OF 2

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