EPA REPORT

AUKE BAY WASTEWATER TREATMENT FACILITY Juneau, Alaska

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Printer State Committee		NVE A	RAIN	F14(DWS				NELUEN	IT .						- EEE	LUENT					April	
DAY	DATE	TÉMP	FALL	INFLUENT	WASTE			D.O.	S,S.	S.S.	B.O.D.	B.O.D.			D.O.	I ss.	S.S.	B.O.D.	1.005			CELLANEO	
		°F	INCHES		MGD	TEMP	рH						TEMP	рH			0.5.	D.U.U.	B.O.D.	FECAL	Cl ₂	Cſ₂	Na2SO3
SUN	3	37	0.15		0.0030	1		mg/L:	mg/L	LBS	mg/L	LBS	°C :		mg/L	mg/L	LBS	mg/L	LBS	/100 ml	RESIDUAL mg/L	USED	USED
MON	4	37	0.04		0.0030	+	 	 	ļ														LBS
TUE	5	43	0.02		0.0030	 	ļ		ļ					6.5							0.09	2.01	6.20
WED	6	40	0.00	0.05632	0.0030	44.4															0.09	2.01	5.58
THU	7	38	0.00	0.08932	0.0030	11.1	6.6	2.2	192	101	197	104	11.1	6.6	2.2	4.0	2.1	13,0	6.8	56.0	0.00	1.34	4.96
FRI	8	37	0.00	0.03685	0.0030	 		<u> </u>	ļ										0.0	30.0	0.00	1.34	3.72
SAT	9	42	0.20	0.05999		 								6.8							0.07	1.34	4.34
SUN	10	42	0.08	0.06212	0.0030																0.07	6.70	4.03
MON	11	40	0.07	0.06212	0.0030	 				<u> </u>												0.67	2.80
TUE	12	42	0.00		0.0030									6.4						-	0.00	2.01	6.20
WED	13	42	0.07	0.05788	0.0030																0.00	2.01	4.96
THU	14	40	0.07	0.05956	0.0030									6.6								3.35	6.20
FRI	15	39		0.06510	0.0030																0.18	2.01	5,58
SAT	16		0.00	0.05294	0.0020									7.0								2.68	4.96
SUN		42	0.00	0.05842	0.0030																0.06	8.04	4.65
MON	17 18	44	0.00	0.05874	0.0030																	0.67	4.30
TUE		39	0.68	0.06239	0.0030									6.8								2.01	6.20
WED	19	44	1.07	0.06047	0.0030									0.0							0.00	1.34	6.20
	20	47	0.18	0.07465	0.0030									6.6								4.02	6.82
THU	21	49	0.26	0.06828	0.0030									0.0							0.47	4.02	3.72
FRI	22	46	0.00	0.07022	0.0025	10.5	7.0	2.9						6.6								2.68	3.72
SAT	23	50	0.00	0.05697	0.0015									0.0							0.00	5.36	5.27
SUN	24	51	0.00	0.09990	0.0030									<u> </u>								1.34	2.48
MON	25	52	0.00	0.07328	0.0030					. 1				6.3				\longrightarrow				2.01	3.72
TUE	26	51	0.00	0.04666	0.0020								-	0.3							0.01	2.01	3.72
WED	27	55	0.00	0.06092	0.0025	13.4	7.3	6.3						6.7								5.36	5.27
THU	28	53	0.00	0.05814	0.0050									6.7							0.36	2,68	2.79
FRI	29	54	0.00	0.06549	0.0040																	2.01	4.34
SAT	30	55	0.00	0.06380	0.0030				· ·					6.7							0.00	2.01	4.34
Billion District House Page	58 - 18 - 18 - 18 - 18 - 18 - 18 - 18 -	100000000000000000000000000000000000000																				1.34	3.10
TOTA	The state of the s		2.84	1.76768	0.08050													delate delate	la la companya da la				
MAXIN	STREET, STREET	55	1.07	0.09990	0.00500	13.4	7.3	6.3	192	101	197	104	11.1	7.0								74.37	
MINIM	······································	37	0.00	0.03685	0.00100	10.5	6.6	2.2	192	101	197	104	11.1	7.0	2.2	4	2	13	7	56.0	0.47	8.04	6.82
AVERA		44.7	0.10	0.06313	0.00288	11.7	7.0	3.8	192	101	197	104	11.1	6.3	2.2	4	2	13	7	56.0	.0.00	0.67	2.48
NO.OF ANAI				28		3	3	3	1	1	1	104	11.1	6.6	2.2	4	2	13	7	56.0	0.10	2.66	4.65
COMMENTS	<u>S:</u>							-	•	•	'	1	1	12	1	1	1	1	1	1 ·	12		

*GEOMETRIC MEAN WAS USED TO CALCULATE THE AVERAGE FECAL COLIFORM COLONIES

WEEK	В	OD 🕍 🥬	WEEKLY A		CHL	- WEEKLY COLIFORM	
	mg/l	j. Ibs	mg/l	lbs	mg/l	SANSTANTANCE AND AND ASSOCIATION	Geo. Mean
1	13.0	6.8	4.0	2.1	0.05		56.0
2					0.08	2.97	
3					0.16	2.97	
4					0.12	2.49	
parengennesin	FIII da mara da da mara da mar	edenomento e a a a composições					
MAX::	13.0	6.84	4.0	2.1	0.16	2.97	560

%REMOVAL								
B.O.D.	93							
S.S.	98							

Permit number: AKG-57	7-1000-013	Expires: J	Tuly 20, 2009)	Submit this	report to:	ADEC and EPA to the addresses on Part D 11 of the NPDES general permit.				
ADEC File number: 151	3.45.009].		· · · · · · · · · · · · · · · · · · ·	862	, , , , , , , , , , , , , , , , , , ,	<u> </u>		<u>F</u>		
Applicant Name: City an	nd Borough of Juneau				Res	ponsible party:	Scott Teffer	/\\\/\\\/\\\/\\	tilities Super	rintandent	
Address: 155 South Sew					1	Phone / email:			Illines puper	ппенает	
Facility: Auke Bay Was					r	Onsite Contact:	 				
Location: Auke Bay, Jur		71111/									
Document 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1044					r none.	(907)586-03		* D. J. A	······································	
Required Reporting F	requency Monthly	Discharge	e: Secondar	y treated waste	ewater disch	erged into		Ţ	ole Period		
1		Auke Bay			J 77 W. C. J	argou iii.o	From:	+	4/3/2005		
		*			· · · · · · · · · · · · · · · · · · ·		To:	<u> </u>	4/30/200)5	
		T						T	 		
			30 day		1	Number of	Number of			G:t-	
Param	<u>neter</u>	Min. Value	Average	7 day Average	Max. Value	Analyses	Violations	Units	Frequency of Analysis	<u>Sample</u> Method	
Discharge 1								1	<u> </u>	4.40-41.1	
Flow Rate (effluent or	Estmt'd/ Measure		0.06313		0.0999	28	0	Γ		Measured/	
influent)	Permit Limits	N/A	report	N/A	0.16	report	report	mgd	Daily 5/week	recorded	
Biochemical Oxygen	Analytical Results	1	197	197	197	1	0	 		Grab or	
Demand (influent)	Permit Limits	N/A	report	report	report	report	report	mg/l	1/month .	Composite	
Biochemical Oxygen	Analytical Results		13	13	13	1	0	 		Grab or	
Demand (effluent)	Permit Limits	N/A	30	45	60	report	report	mg/l	1/month	Composite	
Biochemical Oxygen —	Analytical Results		6.8	6.8	6.8	1	0	 	 	Grab or	
Demand (effluent)	Permit Limits	N/A	40	60	80.1	report	report	lbs/day	1/month	Composite	
Biochemical Oxygen	Analytical Results	93.4					0		 		
Demand % removal	Permit Limits	85%	N/A	N/A	N/A	report	report	- %	1/month	Calculated	
Total Suspended Solids	Analytical Results		192	192	192	1	0	 	· ·	Grab or	
	Permit Limits	N/A	report	report	report	report	report	mg/l	1/month	Grab or Composite	
	Analytical Results		4	4	4	1 1	0			Grab or	
	Permit Limits	N/A	30	45	60	report	report	mg/l	1/month	Composite	
Total Suspended Solids	 		2.1	2.1	2.1	1	0			Grab or	
	Permit Limits	N/A	40	60	80.1	report	report	lbs/day	1/month	Composite	
Total Suspended Solids	Analytical Results	97.9				******	0				
1/ 1	Permit Limits	85%	N/A	N/A	N/A	report	report	%	1/month	Calculated	
Fecal Coliform Bacteria	Analytical Results		56		56	1	0				
	Permit Limits	N/A	200	N/A	800	report	report	#/100 ml	1/month	Grab	
	Analytical Results	2.2				1	0			·	
-m	Permit Limits	2	N/A	N/A	N/A	report	report	mg/l	1/month	Grab	
	Analytical Results	6.3			6.97	12	n				
OLI (eminent)	Permit Limits	6	N/A	N/A	9	report	report	Std. Units	3/week	Grab	
Total Residual Chlorine			0.1		0.47	12	0				
effluent)	Permit Limits	N/A	0.5	N/A	1	report	report	mg/l	3/week	Grab	
CERTIFY UNDER PENALT WITH A SYSTEM DESIGNEI OF THE PERSON OR PERSO SUBMITTED IS, TO THE BES SUBMITTING FALSE INFOR	Y OF LAW THAT THIS D D TO ASSURE THAT QU ONS WHO MANAGE THE ST OF MY KNOWLEDGE	OCUMENT A ALIFIED PERS SYSTEM, OR E AND BELIEF	AND ALL ATTA SONNEL PRO R THOSE PERS F. TRUE, ACCU	ACHMENTS WE DERLY GATHE SONS DIRECTL URATE, AND C	ERE PREPARE ER AND EVALU LY RESPONSIB	ED UNDER MY DUATE THE INFOI BLE FOR GATHEI AM AWARE THA	DIRECTION OF PRMATION SUI PRING THE INF	BMITTED.	BASED ON I	MY INQUIRY	
NAME, TITLE OF PRINCIPAL 1	PARCILLIAN VERICED			aran minn or							
	WW Superintendent			SIGNATURE OF	PRINCIPAL, EX	ECUTIVE OFFIC	CER OR AUTHORIZED AGENT				
	5/6/2005 (907) 586-0393 DATE TELEPHONE										
COMMENT AND EXPLANA											
CHECK HERE IF T	HERE WAS NO DISCHAL	RGE DURING	THE ENTIRE	REPORTING P	ERIO			· · · · · · · · · · · · · · · · · · ·			

Permit number: AKG-57-1000-013	Expires: July 20, 2009	Submit this report ADEC and EPA to the addresses on Part D 11 of the NPDES general permit.
ADEC File number: 1513.45.009		January Parinte

Applicant Name: City and Borough of Juneau	Responsible party: Scott Jeffers/WW Utilities Superintender
Address: 155 South Seward, Juneau, AK 99801	Phone / email: (907)586-0393
Facility: Auke Bay Wastewater Treatment Facility	Onsite Contact: Cort Franklin
Location: Auke Bay, Juneau	Phone: (907)586-0393

			Sample Period
Required Reporting Frequency Monthly	Discharge: Secondary treated wastewater discharged into Auke Bay	From:	4/3/2005
	discharged into Auke Bay	To:	4/30/2005

Mixing Zone

1									· · · · · · · · · · · · · · · · · · ·	
<u>Parameter</u>		Min. Value	30 day Average	7 day Average	<u>Max.</u> <u>Value</u>	Number analyses	Number violations	<u>Units</u>	Frequency of Analysis	Sample Method
Fecal Coliform	Analytical Results		6.67		6.67	1	0	"""	Twice per	Grab
Bacteria (Edge of MZ)	Permit Limits	N/A	14	N/A	43	report	report	#/100 ml	year – 2/year	
Fecal Coliform	Analytical Results		3.33		3.33	1	0	"""	Twice per	Grab
Bacteria (Shoreline)	Permit Limits	N/A	NA	N/A	NA	report	report	#/100 ml	year 2/year	
Dissolved Oxygen	Analytical Results					X		,	Upon	Grab
	Permit Limits	6	N/A	N/A	17	report	report	mg/l	request by ADEC	
pН	Analytical Results				8.5	1 .	0	0.1.77	Upon	Grab
	Permit Limits	6.5	N/A	N/A	8.5	report	report	Std. Units	request by ADEC	
Total Chlorine (if chlorine is used as disinfectant)	Analytical Results				0.11	1	1	,,	Twice per	Grab
	Permit Limits	N/A	N/A	N/A	0.0075	report	report	mg/l	year – 2/year	

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.

NAME, TITLE OF P	RINCIPAL EXECUTIVE OFFICER	SIGNATURE OF PRINCIPAL, EXECUTIVE OFFICER OR AUTHORIZED AGENT	
Scott Jeffers	WW Superintendent	5/6/2005 (907)586-0393 DATE TELEPHONE	_
COMMENT AND	EXPLANATION OF ANY VIOLATIONS (F	EFERENCE ALL ATTACEMENT HERE) See letter dated 5/6/05	
CHECK I	HERE IF THERE WAS NO DISCHARGE DUF	ING THE ENTIRE REPORTING PERIOD	