

Permit number: AK-G-57-1000-013 Expires: July 20, 2009 Submit this report to: ADEC and EPA to the addresses on Part III B of the NPDES general permit.
 ADEC File number: 1513.45.009

Applicant Name: City and Borough of Juneau
 Address: 155 South Seward, Juneau, AK 99801
 Facility: Auke Bay Wastewater Treatment Facility
 Location: Auke Bay, AK


Responsible party: Scott Jeffers/W/W Utilities Superintendent
 Phone / email: (907)586-0393
 Onsite Contact: Cort Franklin
 Phone: (907)586-0393

Required Reporting Frequency Monthly Discharge: Secondary treated wastewater discharged into Auke Bay
 Sample Period
 From: 6/3/2007
 To: 6/30/2007

Parameter	Results	Min. Value	Monthly Average	Weekly Average	Max. Value	Number of Analyses	Number of Violations	Units	Frequency of Analysis	Sample Method
Dissolved Oxygen (effluent)	00300 1	2.8	N/A	N/A	N/A	1	0	mg/l	1/month	Grab
Biochemical Oxygen Demand (influent)	00310 G	N/A	349	349	349	1	0	mg/l	1/month	Grab or Composite
Biochemical Oxygen Demand (effluent)	00310 1	N/A	3.5	3.5	3.5	1	0	lbs/day	1/month	Grab or Composite
Biochemical Oxygen Demand (effluent)	00310 1	N/A	40	60	80.1	1	0	mg/l	1/month	Grab or Composite
pH (effluent)	00400 1	6.6	7.1	7.1	7.1	1	0	Std. Units	3/week	Grab
Total Suspended Solids (influent)	00530 G	6.0	N/A	N/A	9.0	1	0	mg/l	1/month	Grab or Composite
Total Suspended Solids (effluent)	00530 W	N/A	308	308	308	1	0	mg/l	1/month	Grab or Composite
Total Suspended Solids (effluent)	00530 1	N/A	4.0	4.0	4.0	1	0	lbs/day	1/month	Grab or Composite
Total Suspended Solids (effluent)	00530 1	N/A	8.0	8.0	80.1	1	0	mg/l	1/month	Grab or Composite
Fecal Coliform Bacteria (effluent)	31616 1	N/A	30	45	60	1	0	mg/l	1/month	Grab or Composite
Flow Rate (effluent or influent)	50050 1	N/A	4.0	4.0	4.0	1	0	#/100 ml	1/month	Grab
Total Residual Chlorine (effluent)	50060 1	N/A	0.0599	0.0637	0.0696	28	0	mgd	Daily 5/week	Measured/recorded
Biochemical Oxygen Demand % removal	81010 K	98.0	0.08	0.150	0.42	12	0	mg/l	3/week	Grab
Total Suspended Solids % removal	81011 K	97.4	N/A	N/A	N/A	report	0	%	1/month	Calculated

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 IS, INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.

NAME, TITLE OF PRINCIPAL EXECUTIVE OFFICER
 Scott Jeffers WW Superintendent

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT


DATE 7/9/07 TELEPHONE (907) 586-0393

COMMENT AND EXPLANATION OF ANY VIOLATIONS (REFERENCE ALL ATTACHMENT NUMBERS)
 CHECK HERE IF THERE WAS NO DISCHARGE DURING THE ENTIRE REPORTING PERIOD

AUKE BAY WASTEWATER TREATMENT FACILITY
Juneau, Alaska

June 2007

DAY	DATE	WEATHER			FLOWS				EFFLUENT										MISCELLANEOUS		
		RAIN INCHES	FALL INCHES	INFILTR MGD	WASTE SLUDGE MGD	TEMP °C	PH	D.O. mg/L	S.S. mg/L	B.O.D. LBS	B.O.D. mg/L	S.S. LBS	B.O.D. mg/L	FECAL COLIFORM /100 ml	CH RESIDUAL mg/L	USED LBS	USED LBS	NA2S03 LBS			
SUN	3			0.0522	0.0020							6.8				0.29	3.35	2.48	3.10		
MON	4			0.05987	0.0015							8.0	4	7.1	4	3.35	2.48	2.48	2.48		
TUE	5			0.06051	0.0015											0.00	2.68	2.48	2.48		
WED	6			0.06141	0.0030												3.35	2.48	2.48		
THU	7			0.05586	0.0015											0.02	2.68	3.72	1.56		
FRI	8			0.05641	0.0030												1.34	2.48	2.48		
SAT	9			0.05729	0.0025												2.01	2.48	2.48		
SUN	10			0.05826	0.0025											0.00	2.01	2.48	2.48		
MON	11			0.06524	0.0020												2.68	2.48	2.48		
TUE	12			0.06955	0.0020											0.03	3.35	3.10	2.48		
WED	13			0.06620	0.0020												2.68	2.48	2.48		
THU	14			0.06240	0.0030											0.01	4.02	1.86	2.48		
FRI	15			0.06500	0.0025												0.67	2.17	2.48		
SAT	16			0.06949	0.0025												5.36	2.48	2.48		
SUN	17			0.06057	0.0030											0.05	2.68	2.48	2.48		
MON	18			0.05765	0.0015												0.67	2.48	2.48		
TUE	19			0.06660	0.0030												0.67	2.48	2.48		
WED	20			0.05883	0.0030												1.34	2.48	2.48		
THU	21			0.05921	0.0015											0.03	2.68	2.48	2.48		
FRI	22			0.05667	0.0030												2.01	2.17	2.48		
SAT	23			0.05663	0.0035												2.68	2.48	2.48		
SUN	24			0.05612	0.0035											0.42	2.68	2.48	2.48		
MON	25			0.05722	0.0030												2.68	2.48	2.48		
TUE	26			0.06036	0.0035												2.68	2.48	2.48		
WED	27			0.05470	0.0045												2.01	3.10	2.48		
THU	28			0.05225	0.0030											0.02	2.01	4.02	1.55		
FRI	29			0.06053	0.0030												2.01	4.02	1.55		
SAT	30			0.06711	0.0030																
TOTAL				1.67716	0.07350											0.42	5.36	4.02	2.59		
MAXIMUM				0.06955	0.00450											0.00	0.67	1.55			
MINIMUM				0.05225	0.00150											0.08	2.51	2.59			
AVERAGE				0.05990	0.00263											0.12	70.35				

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

WEEK	FLOW	BOD	TSS	CHLORINE	COLIFORM	Geo. Mean
	mg/l	lbs	mg/l	lbs	mg/l	lbs
1	0.05808	7.1	3.5	8.0	4.0	3.2
2	0.06373					2.5
3	0.05945					0.04
4	0.05833					0.15
MAX	0.06373	7.1	3.55	8.0	4.0	3.2

% REMOVAL	B.O.D.	S.S.
	98.0	97.4