

Permit number: AKG-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	Responsible party: Denny Kay / Auke Bay WWTP Supervisor
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, AK	Phone: (907)586-0393

Required Reporting Frequency Monthly	Discharge: Secondary treated wastewater discharged into Auke Bay	Sample Period	
		From: 11/1/2009	To: 11/28/2009

Outfall 001

Parameter	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	2.9				1	0	mg/l	1/month	Grab
	2.0	N/A	N/A	N/A	report	report			
Biochemical Oxygen Demand (influent) 00310 G	227	227	227	227	1	0	mg/l	1/month	Grab or Composite
	N/A	report	report	report	report	report			
Biochemical Oxygen Demand (effluent) 00310 W 00310 1	1.9	1.9	1.9	1.9	1	0	lbs/day	1/month	Grab or Composite
	N/A	40	60	80.1	report	report			
Biochemical Oxygen Demand (effluent) 00310 W 00310 1	3.3	3.3	3.3	3.3	1	0	mg/l	1/month	Grab or Composite
	N/A	30	45	60	report	report			
pH (effluent) 00400 1	6.6			7.2	12	0	Std. Units	3/week	Grab
	6.0	N/A	N/A	9.0	report	report			
Total Suspended Solids (influent) 00530 G	300	300	300	300	1	0	mg/l	1/month	Grab or Composite
	N/A	report	report	report	report	report			
Total Suspended Solids (effluent) 00530 W 00530 1	2.3	2.3	2.3	2.3	1	0	lbs/day	1/month	Grab or Composite
	N/A	40	60	80.1	report	report			
Total Suspended Solids (effluent) 00530 W 00530 1	4.0	4.0	4.0	4.0	1	0	mg/l	1/month	Grab or Composite
	N/A	30	45	60	report	report			
Fecal Coliform Bacteria (effluent) 31616 1	1.0	1.0	1.0	1.0	1	0	#/100 ml	1/month	Grab
	N/A	200	400	800	report	report			
Flow Rate (effluent or influent) 50050 1	0.06677	0.07371	0.10031	0.10031	28	0	mgd	Daily 5/week	Measured/recorded
	N/A	report	report	0.16	report	report			
Total Residual Chlorine (effluent) 50060 1	0.01	0.03	0.03	0.03	12	0	mg/l	3/week	Grab
	N/A	0.50	N/A	1.0	report	report			
Biochemical Oxygen Demand % removal 81010 K	98.5					0	%	1/month	Calculated
	85%	N/A	N/A	N/A	report	report			
Total Suspended Solids % removal 81011 K	98.7					0	%	1/month	Calculated
	85%	N/A	N/A	N/A	report	report			

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 PRINCIPAL EXECUTIVE OFFICER Joe Myers WW Superintendent	SIGNATURE OF PRINCIPAL, EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Joe Myers by Denny Kay</i>	DATE 12/3/09	TELEPHONE (907) 586-0393
--	--	-----------------	-----------------------------

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

CHECK HERE IF THERE WAS NO DISCHARGE DURING THE ENTIRE REPORTING PERIOD

DAY	DATE	WEATHER		FLOWS		WASTE		INFLUENT		EFFLUENT		MISCELLANEOUS														
		TEMP °F	RAIN FALL INCHES	INFLUENT MGD	SLUDGE MGD	TEMP °C	pH	D.O. mg/L	S.S. mg/L	S.S. LBS	B.O.D. mg/L	B.O.D. LBS	TEMP °C	pH	D.O. mg/L	S.S. mg/L	S.S. LBS	B.O.D. mg/L	B.O.D. LBS	FECAL COLIFORM /100 ml	RESIDUAL mg/L	Ch ₂ USED LBS	Na2SO3 USED LBS			
SUN	1	38	0.28	0.06730	0.0030																					
MON	2	40	0.25	0.09306	0.0045																					
TUE	3	38	0.11	0.05580	0.0060																					
WED	4	40	0.01	0.06948	0.0015																					
THU	5	45	0.59	0.10031	0.0030																					
FRI	6	41	0.51	0.06390	0.0030																					
SAT	7	40	0.49	0.06612	0.0030																					
SUN	8	38	0.04	0.04514	0.0030																					
MON	9	34	0.14	0.06669	0.0060																					
TUE	10	37	0.17	0.05677	0.0045																					
WED	11	38	0.12	0.06846	0.0045				300																	
THU	12	36	0.88	0.07885	0.0060																					
FRI	13	33	0.30	0.06699	0.0030																					
SAT	14	34	1.26	0.07841	0.0030																					
SUN	15	31	0.00	0.06600	0.0030																					
MON	16	32	0.20	0.06516	0.0060																					
TUE	17	33	0.08	0.09294	0.0045																					
WED	18	27	0.20	0.04963	0.0045																					
THU	19	25	0.04	0.06786	0.0030																					
FRI	20	26	0.04	0.05062	0.0030																					
SAT	21	29	0.19	0.05060	0.0030																					
SUN	22	30	0.00	0.06592	0.0030																					
MON	23	33	0.08	0.05978	0.0030																					
TUE	24	36	0.05	0.05835	0.0030																					
WED	25	37	0.34	0.07607	0.0045																					
THU	26	40	0.11	0.07277	0.0045																					
FRI	27	38	0.17	0.05223	0.0030																					
SAT	28	37	0.19	0.06433	0.0030																					
TOTAL			6.78	1.86954	0.10500																					
MAXIMUM		45	1.26	0.10031	0.00600																					
MINIMUM		25	0.00	0.04514	0.00150																					
AVERAGE		34.9	0.24	0.06677	0.00375																					
NO. OF ANALYSIS									28																	

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

WEEK	FLOW	WEEKLY AVERAGE				WEEKLY			
		BOD mg/l	TSS mg/l	CHLORINE mg/l	COLIFORM Geo. Mean	BOD lbs	TSS lbs	CHLORINE lbs	COLIFORM
1	0.07371			0.00	2.0				
2	0.06590	3.3	1.9	4.0	2.3	0.01	2.1	1.0	
3	0.06326					0.01	1.8		
4	0.06421					0.01	1.9		
MAX	0.07371	3.3	1.88	4.0	2.3	0.01	2.1	1.0	

% REMOVAL	
B.O.D.	98.5
S.S.	98.7