

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: Tom Trego/WW Utilities Superintendent
Address: 155 South Seward, Juneau, AK 99801	Phone / email: (907)586-0393
Facility: Auke Bay Wastewater Treatment Facility	Onsite Contact: Denny Kay
Location: Auke Bay, AK	Phone: (907)586-0393

Required Reporting Frequency Monthly	Discharge: Secondary treated wastewater discharged into Auke Bay	Sample Period	
		From: 9/26/2010	To: 10/30/2010

**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 I	Results	2.9			1	0	mg/l	1/month	Grab
		Limits	2.0	N/A	N/A	N/A	report			
Biochemical Oxygen Demand (influent)	00310 G	Results	195.5	195.5	220	1	0	mg/l	1/month	Grab or Composite
		Limits	N/A	report	report	report	report			
Biochemical Oxygen Demand (effluent)	00310 W 00310 I	Results	17.5	17.5	18.2	1	0	lbs/day	1/month	Grab or Composite
		Limits	N/A	40	60	80.1	report			
Biochemical Oxygen Demand (effluent)	00310 W 00310 I	Results	26.2	26.2	29.4	1	0	mg/l	1/month	Grab or Composite
		Limits	N/A	30	45	60	report			
pH (effluent)	00400 I	Results	7.1		7.3	15	0	Std. Units	3/week	Grab
		Limits	6.0	N/A	N/A	9.0	report			
Total Suspended Solids (influent)	00530 G	Results	188	188	216	1	0	mg/l	1/month	Grab or Composite
		Limits	N/A	report	report	report	report			
Total Suspended Solids (effluent)	00530 W 00530 I	Results	4.9	4.9	6.8	1	0	lbs/day	1/month	Grab or Composite
		Limits	N/A	40	60	80.1	report			
Total Suspended Solids (effluent)	00530 W 00530 I	Results	7.5	7.5	11.0	1	0	mg/l	1/month	Grab or Composite
		Limits	N/A	30	45	60	report			
Fecal Coliform Bacteria (effluent)	31616 I	Results	17	17	46	1	1	#/100 ml	1/month	Grab
		Limits	N/A	200	400	800	report			
Flow Rate (effluent or influent)	50050 I	Results	0.0719	0.0766	0.1109	35	0	mgd	Daily 5/week	Measured/ recorded
		Limits	N/A	report	report	0.16	report			
Total Residual Chlorine (effluent)	50060 I	Results	0.06		0.27	15	0	mg/l	3/week	Grab
		Limits	N/A	0.50	N/A	1.0	report			
Biochemical Oxygen Demand % removal	81010 K	Results	86.6				0	%	1/month	Calculated
		Limits	85%	N/A	N/A	N/A	report			
Total Suspended Solids % removal	81011 K	Results	97.4				0	%	1/month	Calculated
		Limits	85%	N/A	N/A	N/A	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	SIGNATURE OF PRINCIPAL, EXECUTIVE OFFICER OR AUTHORIZED AGENT
Tom Trego WW Superintendent	Nathan D. McCombs <small>Digitally signed by Nathan D. McCombs DN: cn=Nathan D. McCombs, o=CBJ, ou=BJ Public Utilities, email=Nathan.McCombs@ci.juneau.ak.us, c=US Date: 2010.11.08 10:11:51 -0900</small>
	(907) 586-0393
	DATE TELEPHONE

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

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

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			

Applicant Name: City and Borough of Juneau	Responsible party: Tom Trego/WW Utilities Superintendent
Address: 155 South Seward, Juneau, AK 99801	Phone / email: (907)586-0393
Facility: Auke Bay Wastewater Treatment Facility	Onsite Contact: Denny Kay
Location: Auke Bay, AK	Phone: (907)586-0393

Required Reporting Frequency Monthly	Discharge: Secondary treated wastewater discharged into Auke Bay	Sample Period	
		From: 9/26/2010	To: 10/30/2010

### Mixing Zone

Parameter		Min. Value	Monthly Average	Weekly Average	Max. Value	Number analyses	Number violations	Units	Frequency of Analysis	Sample Method
Fecal Coliform Bacteria (Edge of MZ)	Analytical Results							#/100 ml	Twice per year – 2/year	Grab
	Permit Limits	N/A	14	N/A	43	report	report			
Fecal Coliform Bacteria (Shoreline)	Analytical Results							#/100 ml	Twice per year – 2/year	Grab
	Permit Limits	N/A	NA	N/A	NA	report	report			
Dissolved Oxygen	Analytical Results							mg/l	Upon request by ADEC	Grab
	Permit Limits	6	N/A	N/A	17	report	report			
pH	Analytical Results							Std. Units	Upon request by ADEC	Grab
	Permit Limits	6.5	N/A	N/A	8.5	report	report			
Total Chlorine (if chlorine is used as disinfectant)	Analytical Results							mg/l	Twice per year – 2/year	Grab
	Permit Limits	N/A	N/A	N/A	0.01	report	report			

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NAME, TITLE OF PRINCIPAL EXECUTIVE OFFICER		SIGNATURE OF PRINCIPAL, EXECUTIVE OFFICER OR AUTHORIZED AGENT	
Tom Trego	WW Superintendent	Nathan D. McCombs	(907)586-0393
		DATE	TELEPHONE
COMMENT AND EXPLANATION OF ANY VIOLATIONS (REFERENCE ALL ATTACHMENT HERE)			
CHECK HERE IF THERE WAS NO DISCHARGE DURING THE ENTIRE REPORTING PERIOD			

Digitally signed by Nathan D. McCombs  
 DN: cn=Nathan D. McCombs, o=CBI,  
 ou=CBI Public Utilities,  
 email=nathan\_mccombs@juneau.ak  
 us, c=US  
 Date: 2010.11.08.10:12:46-09'00

EPA REPORT

AUKE BAY WASTEWATER TREATMENT FACILITY  
Juneau, Alaska

October 2010

DAY	DATE	FLOWS				INFLUENT				EFFLUENT				MISCELLANEOUS						
		INFLUENT MGD	WASTE SLUDGE MGD	TEMP °C	pH	D.O. mg/L	S.S. mg/L	B.O.D. mg/L	S.S. LBS	B.O.D. LBS	TEMP °C	pH	D.O. mg/L	S.S. mg/L	B.O.D. mg/L	B.O.D. LBS	FECAL COLIFORM /100 ml	Chl RESIDUAL mg/L	Chl USED LBS	Na2SO2 USED LBS
SUN	26	0.07198	0.0030	16.6	7.7	6.0														
MON	27	0.11091	0.0025	17.5	7.5	6.2														
TUE	28	0.05998	0.0025	17.9	7.5	7.3														
WED	29	0.08146	0.0025	16.5	7.6	6.9														
THU	30	0.07521	0.0025	17.7	7.6	7.1														
FRI	1	0.07084	0.0030																	
SAT	2	0.07098	0.0030																	
SUN	3	0.07274	0.0020																	
MON	4	0.07304	0.0020	16.3	7.6	6.5														
TUE	5	0.07444	0.0020	17.9	7.6	6.6														
WED	6	0.07437	0.0020	15.8	7.6	5.4	216	134	171	106										
THU	7	0.06940	0.0020	16.4	7.2	6.4														
FRI	8	0.07230	0.0030	20.1	7.4	5.5														
SAT	9	0.07684	0.0020																	
SUN	10	0.07962	0.0025																	
MON	11	0.07357	0.0020	18.7	7.4	6.5														
TUE	12	0.08708	0.0020	16.3	7.4	6.6														
WED	13	0.07698	0.0020																	
THU	14	0.07335	0.0020	19.3	7.1	6.3														
FRI	15	0.06712	0.0020	15.7	7.6	6.3														
SAT	16	0.07175	0.0020																	
SUN	17	0.08068	0.0020																	
MON	18	0.08139	0.0020	13.4	7.5	4.9														
TUE	19	0.07524	0.0020	16.0	7.2	7.0														
WED	20	0.06687	0.0020	15.3	7.5	6.5														
THU	21	0.08700	0.0020	19.6	7.4	6.0	180	116	220	160										
FRI	22	0.04188	0.0020	17.4	7.5	5.5														
SAT	23	0.06133	0.0020																	
SUN	24	0.06957	0.0025																	
MON	25	0.07487	0.0020	17.3	7.6	6.1														
TUE	26	0.05057	0.0020	16.1	7.5	6.8														
WED	27	0.06043	0.0020	14.0	8.6	7.8														
THU	28	0.07060	0.0020	16.8	7.9	6.3														
FRI	29	0.05361	0.0020	15.6	8.0	6.0														
SAT	30	0.05876	0.0020																	
TOTAL		2.51585	0.0770																	
MAXIMUM		0.11091	0.0030	20.1	8.6	7.8	216	134	220	160										
MINIMUM		0.04188	0.0020	13.4	7.1	4.9	160	116	171	106										
AVERAGE		0.07188	0.0022	16.8417	7.5625	6.3554	188	125	186	133										
Number of Analyses		35	35	24	24	24	2	2	2	2										

COMMENTS:  
\*GEOMETRIC MEAN WAS USED TO CALCULATE THE AVERAGE FECAL COLIFORM COLONIES  
\*SEE ENCLOSED VIOLATION LETTER

WEEK	FLOW	BOD		TSS		CHLORINE		WEEKLY COLIFORM
		mg/L	lbs	mg/L	lbs	mg/L	lbs	
1	0.07664							
2	0.07341	29.4	18.2	11.0	6.8	0.00	5.07	46
3	0.07564					0.09	4.50	6
4	0.07309					0.11	2.97	
5	0.06263					0.07	2.78	
MAX	0.07664	28.4	18.2	11.0	6.8	0.04	1.72	48

WEEKLY AVERAGE	BOD		TSS		CHLORINE		WEEKLY COLIFORM
	mg/L	lbs	mg/L	lbs	mg/L	lbs	
2	24	24	24	24	2	2	2
15							15

% REMOVAL	
B.O.D.	86.6
S.S.	97.4