

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

NO DISCHARGE

PERMITTEE NAME/ADDRESS		AK-002321-3		001 A			
NAME:		PERMIT NUMBER		DISCHARGE NUMBER			
ADDRESS:		MONITORING PERIOD (calendar month)					
FACILITY:		YR	MO	DAY	YEAR	MO	DAY
LOCATION:		99	10	01	99	10	31
		MAJOR (SUBR 01)					
PARAMETER	QUANTITY OR LOADING	QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MINIMUM	AVERAGE	MAXIMUM	UNITS		
TU STAT 1HR CHR DEND RASTER EXCENTRICUS	*****	N/A	*****	*****	(73)	0	24 HR
TKF3N 1 0 0	*****	REPORT	*****	*****	TOXIC UNITS		COMP
EFFLUENT GROSS VALUE	*****	N/A	*****	*****	(73)	0	COMP24
TU STAT 48HR CHR MYTIL US GALLOPROVINCIALIS	*****	REPORT	*****	*****	TOXIC UNITS		24 HR
TKG3P 1 0 0	*****	REPORT	*****	*****	(04)	0	COMP
EFFLUENT GROSS VALUE	*****	*****	11.6	14.0	UNITS	0	COMP24
TEMPERATURE, WATER DEG. CENTIGRADE	*****	*****	REPORT	REPORT	DEG.C		GRAB
00010 1 0 0	*****	*****	30DA AVG	DAILY MAX			GRAB
EFFLUENT GROSS VALUE	*****	*****	109	*****	(19)	0	24 HR
BOD, 5-DAY (20 DEG. C)	*****	*****	REPORT	*****	mg/L		COMP
00310 G 0 0	*****	*****	REPORT	*****			COMP24
RAW SEW / INFLUENT	*****	*****	6	6	(19)	0	24 HR
BOD, 5-DAY (20 DEG. C)	*****	*****	139	*****			COMP
00310 1 0 0	*****	*****	690	45	mg/L		COMP24
EFFLUENT GROSS VALUE	*****	6.6	MO AVG	WKLY AVG	(12)	0	GRAB
pH	*****	6.0	*****	7.1			GRAB
00400 1 0 0	*****	MIN MUM	*****	8.5	SU		GRAB
EFFLUENT GROSS VALUE	*****	*****	137	*****	(19)	0	24 HR
SOLIDS, TOTAL SUSPENDED	*****	*****	REPORT	*****	mg/L		COMP
00530 G 0 0	*****	*****	REPORT	*****			COMP24
RAW SEW / INFLUENT	*****	*****	MO AVG	*****			COMP24

"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 PRINCIPAL EXEC. OFFICER: Andrew W. Bronson TELEPHONE: (907) 789-9919 YEAR: 99 MONTH: 11 DAY: 09

COMMENT AND EXPLANATION OF ANY VIOLATIONS: See attached letter dated 26 Oct 99 regarding high quarterly copper results.

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

NO DISCHARGE

PERMITTEE NAME/ADDRESS		JUNEAU, CITY AND BOROUGHO OF 155 SOUTH SEWARD STREET JUNEAU, ALASKA 99801		AK-002321-3		001 A	
NAME:		JUNEAU, CITY AND BOROUGHO OF		PERMIT NUMBER		DISCHARGE NUMBER	
ADDRESS:		155 SOUTH SEWARD STREET		MONITORING PERIOD (calendar month)			
FACILITY:		JUNEAU-DOUGLAS TREATMENT PLANT		YEAR	MONTH	YEAR	MONTH
LOCATION:		JUNEAU, AK 99801		99	10	99	10
				to			
				MAJOR (SUBR. 01)			
PARAMETER	MEASUREMENT	QUANTITY OR LOADING	QUALITY OR CONCENTRATION	NO. EX	FREQUENCY ANALYSIS	SAMPLE TYPE	
SOLIDS, TOTAL SUSPENDED	PERMIT REQUIREMENT	AVERAGE MAXIMUM	AVERAGE MAXIMUM UNITS	0	1/MO	24 HR COMP	
00530 1 0 0	104	132	(26)				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	MO AVG WKLY AVG #/DAY	MO AVG WKLY AVG mg/L		ONCE/MONTH	COMP24	
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	*****	*****	0	1/QTR	GRAB	
00610 1 0 0	690	1035	(19)				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****				
ARSENIC, TOTAL RECOVERABLE	SAMPLE MEASUREMENT	*****	*****	0	1/QTR	24HR COMP	
00978 1 0 0	*****	*****	(28)				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****				
COPPER	SAMPLE MEASUREMENT	*****	*****	1	1/QTR	24HR COMP	
TOTAL RECOVERABLE	PERMIT REQUIREMENT	*****	*****				
01119 1 0 0	*****	*****	(28)				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****				
COLIFORM, FECAL MF, M-FC BROTH, 44.5C	SAMPLE MEASUREMENT	*****	*****	0	1/WK	GRAB	
31616 1 0 0	*****	*****	(13)				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	*****	*****	0	CONT	RCORDR	
50050 1 0 0	2.221	*****	(03)				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****				
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	0	1/DAY	GRAB	
50060 1 0 1	REPORT MO AVG	*****	(28)				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****				
ADMIN	SAMPLE MEASUREMENT	*****	*****	0	WEEK DAYS	GRAB	
50060 1 0 1	*****	*****	(28)				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****				

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