

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

NO DISCHARGE

PERMITTEE NAME/ADDRESS	JUNEAU, CITY AND BOURGHOUGH OF 155 SOUTH SEWARD STREET JUNEAU, AK 99801	AK-002321-3	001 A
NAME:	JUNEAU, CITY AND BOURGHOUGH OF	PERMIT NUMBER	DISCHARGE NUMBER
ADDRESS:	155 SOUTH SEWARD STREET JUNEAU, AK 99801	MONITORING PERIOD (calendar month)	
FACILITY:	JUNEAU-DOUGLAS TREATMENT PLANT	YR	MO
LOCATION:	JUNEAU, AK 99801	2001	05
		05	01
		to	2001
			05
			31
		MAJOR (SUBR 01)	

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TU STAT 1HR CHR DEND	SAMPLE	*****	*****	N/A	*****	*****	(73)	0	24 HR
RASTER EXCENTRICUS	MEASUREMENT	*****	*****	REPORT	*****	*****	TOXIC UNITS		COMP24
TKF3N 1 0 0	PERMIT	*****	*****	REPORT	*****	*****	TOXIC UNITS	0	24 HR
EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	N/A	*****	*****	(73)		COMP24
TU STAT 48HR CHR MYTL	SAMPLE	*****	*****	REPORT	*****	*****	TOXIC UNITS	0	24 HR
US GALLOPROVINCIALIS	MEASUREMENT	*****	*****	REPORT	*****	*****	TOXIC UNITS		COMP24
TKG3P 1 0 0	PERMIT	*****	*****	REPORT	*****	*****	TOXIC UNITS	0	24 HR
EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	11.8	14.3	*****	(04)	0	1/DAY
TEMPERATURE, WATER	SAMPLE	*****	*****	REPORT	*****	*****	DEG.C		GRAB
DEG. CENTIGRADE	MEASUREMENT	*****	*****	REPORT	*****	*****	DEG.C		GRAB
00010 1 0 0	PERMIT	*****	*****	30DA AVG	57	*****	(19)	0	1/MO
EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	REPORT	*****	*****	DEG.C		COMP24
BOD, 5-DAY	SAMPLE	1346	*****	REPORT	*****	*****	(19)	0	24 HR
(20 DEG. C)	MEASUREMENT	*****	*****	REPORT	*****	*****	mg/L		COMP24
00310 G 0 0	PERMIT	*****	*****	REPORT	*****	*****	mg/L		COMP24
RAW SEW / INFLUENT	REQUIREMENT	*****	*****	REPORT	*****	*****	mg/L		COMP24
BOD, 5-DAY	SAMPLE	66	66	3	3	*****	(19)	0	24 HR
(20 DEG. C)	MEASUREMENT	*****	*****	REPORT	*****	*****	mg/L		COMP24
00310 1 0 0	PERMIT	690	1035	30	45	*****	mg/L	0	ONCE/
EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	MO AVG	6.9	*****	(12)	0	MONTH
pH	SAMPLE	*****	*****	6.4	6.9	*****	(12)	0	1/DAY
00400 1 0 0	MEASUREMENT	*****	*****	6.0	8.5	*****			GRAB
EFFLUENT GROSS VALUE	PERMIT	*****	*****	MINIMUM	*****	*****	SU		GRAB
SOLIDS, TOTAL	REQUIREMENT	*****	*****	398	*****	*****	(19)	0	WEEK
SUSPENDED	SAMPLE	4512	*****	REPORT	*****	*****	SU		DAYS
00530 G 0 0	MEASUREMENT	*****	*****	REPORT	*****	*****	(19)	0	1/DAY
RAW SEW / INFLUENT	PERMIT	*****	*****	REPORT	*****	*****	mg/L		24 HR
	REQUIREMENT	*****	*****	MO AVG	*****	*****	mg/L		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: *[Signature]* TELEPHONE: (907) 586-5254 YEAR: 2001 MONTH: 06 DAY: 07

COMMENT AND EXPLANATION OF ANY VIOLATIONS: None

Reporting the period: April 29 through June 2, 2001

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

NO DISCHARGE

PERMITTEE NAME/ADDRESS	JUNEAU, CITY AND BOROUGH OF	AK-002321-3	001 A
NAME:	155 SOUTH SEWARD STREET	PERMIT NUMBER	DISCHARGE NUMBER
ADDRESS:	JUNEAU, ALASKA 99801	MONITORING PERIOD (calendar month)	
FACILITY:	JUNEAU-DOUGLAS TREATMENT PLANT	YEAR MONTH DAY	YEAR MONTH DAY
LOCATION:	JUNEAU, AK 99801	2001 05 01	2001 05 31
PARAMETER		MAJOR (SUBR 01)	

PARAMETER	QUANTITY OR LOADING	QUALITY OR CONCENTRATION		NO. EX	FREQUENCY ANALYSIS	SAMPLE TYPE			
		AVERAGE	MAXIMUM				MIN.	MAXIMUM	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT 91	195	(26)	7	11	(19)	0	1/DAY	24 HR COMP
EFFLUENT GROSS VALUE	PERMIT 690	1035		30	45		0	ONCE/MONTH	COMP24
NITROGEN, AMMONIA	SAMPLE MEASUREMENT *****	*****		MO AVG	WKLY AVG		0	1/QTR	GRAB
TOTAL (AS N)	PERMIT *****	*****		*****	REPORT INST MAX		0	QTRLY	GRAB
EFFLUENT GROSS VALUE	REQUIREMENT *****	*****		N/A	N/A		0	1/QTR	24HR COMP
ARSENIC, TOTAL RECOV	SAMPLE MEASUREMENT *****	*****		1.4	3.8		0	QTRLY	COMP24
ERABLE	PERMIT *****	*****		MO AVG	WKLY AVG		0	2/MO	24HR COMP
EFFLUENT GROSS VALUE	REQUIREMENT *****	*****		10	12		0	QTRLY	COMP24
COPPER	SAMPLE MEASUREMENT *****	*****		18.5	26.7		0	QTRLY	COMP24
TOTAL RECOVERABLE	PERMIT *****	*****		MO AVG	WKLY AVG		0	1/WK	GRAB
01119 1 0 0	REQUIREMENT *****	*****		3	8		0	WEEKLY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT *****	*****		400	800		0	CONT	RCORDR
FECAL COLIFORM, MPN, EC MED, 44.5C	PERMIT *****	*****		30DA GEO	7 DA GEO		0	CONT	RCORDR
31615 1 0 0	REQUIREMENT *****	*****		*****	*****		0	CONT	RCORDR
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT *****	*****		*****	*****		0	CONT	RCORDR
THRU TREATMENT PLANT	PERMIT *****	*****		*****	*****		0	CONT	RCORDR
50050 1 0 0	REQUIREMENT *****	*****		*****	*****		0	CONT	RCORDR
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT *****	*****		*****	*****		0	CONT	RCORDR
CHLORINE, TOTAL RESIDUAL	PERMIT *****	*****		*****	*****		0	CONT	RCORDR
50060 1 0 1	REQUIREMENT *****	*****		*****	*****		0	CONT	RCORDR
EFFLUENT GROSS VALUE	PERMIT *****	*****		*****	*****		0	CONT	RCORDR

"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 GATHERED 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 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: ERNIE MUELLER, Director of Public Works

TELEPHONE: (907) 586-5254

YEAR: 2001

MONTH: 06

DAY: 07

COMMENT AND EXPLANATION OF ANY VIOLATIONS: None

Reporting the period: April 29 through June 2, 2001

NOTE = Chlorine no longer used to disinfect the plant effluent. PG 2 OF 3

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

NO DISCHARGE

PERMITTEE NAME/ADDRESS

NAME: JUNEAU, CITY AND BOURGHOUGH OF

ADDRESS: 155 SOUTH SEWARD STREET

JUNEAU, AK 99801

FACILITY: JUNEAU-DOUGLAS TREATMENT PLANT

LOCATION: JUNEAU, AK 99801

AK-002321-3

PERMIT NUMBER

MONITORING PERIOD (calendar month)

YR MO DAY

2001 05 01

to

001 A  
DISCHARGE NUMBER

YEAR MO DAY

2001 05 31

MAJOR (SUBR 01)

PARAMETER	SAMPLING METHOD	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
BOD, 5-DAY PERCENT REMOVAL	SAMPLE MEASUREMENT PERMIT	*****	*****	****	85	*****	*****	0	ONCE/MONTH	CALCTD
81010 K 0 0	PERMIT REQUIREMENT	*****	*****	****	MO AVG	*****	*****			
SOLIDS, SUSPENDED PERCENT REMOVAL	SAMPLE MEASUREMENT PERMIT	*****	*****	****	98.0	*****	*****	0	ONCE/MONTH	CALC
81011 K 0 0	PERMIT REQUIREMENT	*****	*****	****	MO AVG	*****	*****			
PERCENT REMOVAL	SAMPLE MEASUREMENT PERMIT			****						
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT PERMIT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT PERMIT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT PERMIT									
	PERMIT REQUIREMENT									

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NAME/TITLE PRINCIPAL EXEC. OFFICER

ERINIE MUELLER, Director of Public Works

COMMENT AND EXPLANATION OF ANY VIOLATIONS: None

TELEPHONE

(907) 586-5254

YEAR

2001

MONTH

06

DAY

07

Reporting the period:

April 29 through June 2, 2001

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

NO DISCHARGE

PERMITTEE NAME/ADDRESS: JUNEAU, CITY AND BOURGHOUGH OF  
 ADDRESS: 155 SOUTH SEWARD STREET  
 JUNEAU AK 99801  
 FACILITY: JUNEAU-DOUGLAS TREATMENT PLANT  
 LOCATION: JUNEAU, AK 99801

AK-002321-3  
 PERMIT NUMBER: 2001  
 MONITORING PERIOD (calendar month): YR 2001 MO 05 DAY 01 to YR 2001 MO 05 DAY 31  
 REC 1  
 DISCHARGE NUMBER: 2001  
 MAJOR (SUBR 01): 05 31

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. OF ANALYSIS	FREQUENCY	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TEMPERATURE, WATER	MEASUREMENT	*****	*****		*****	*****	N/A	(04)	0	1/QTR	GRAB
DEG. CENTIGRADE	PERMIT	*****	*****	****	*****	*****	REPORT			QTRLY	GRAB
00010 1 0 0	REQUIREMENT			****			REPORT			QTRLY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		N/A	*****	N/A	(12)	0	1/QTR	GRAB
pH	PERMIT	*****	*****	****	*****	*****	REPORT			QTRLY	GRAB
00400 1 0 0	REQUIREMENT			****			REPORT			QTRLY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	N/A	(22)	0	1/QTR	GRAB
SALINITY	PERMIT	*****	*****	****	*****	*****	REPORT			QTRLY	GRAB
00480 1 0 0	REQUIREMENT			****			REPORT			QTRLY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	N/A	(19)	0	1/QTR	GRAB
NITROGEN, AMMONIA	PERMIT	*****	*****	****	*****	*****	REPORT			QTRLY	GRAB
TOTAL (AS N)	REQUIREMENT			****			REPORT			QTRLY	GRAB
00610 1 0 0	REQUIREMENT			****			REPORT			QTRLY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	2	(13)	0	1/QTR	GRAB
FECAL COLIFORM, MPN,	PERMIT	*****	*****	****	*****	*****	REPORT	#		QTRLY	GRAB
EC MED, 44.5C	REQUIREMENT			****			REPORT	100mL		QTRLY	GRAB
31616 0 1 0	REQUIREMENT			****			REPORT			QTRLY	GRAB
SEE COMMENT BELOW	SAMPLE MEASUREMENT										
	PERMIT										
	REQUIREMENT										

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NAME/TITLE PRINCIPAL EXEC. OFFICER: ERNIE MUELLER, Director of Public Works  
 TELEPHONE: (907) 586-5254  
 YEAR: 2001 MONTH: 06 DAY: 07  
 COMMENT AND EXPLANATION OF ANY VIOLATIONS: None  
 AMBIENT SAMPLING FOR FECAL COLIFORM (SEASON 1 = MARCH - AUGUST AND SEASON 2 = SEPTEMBER - FEBRUARY) SHALL BE CONDUCTED JUST OUTSIDE THE MIXING ZONE.  
 Reporting the period: April 29 through June 2, 2001  
 (Season 1 = 31616 0 1 0 and season 2 = 31616 0 2 0)  
 PG 1 OF 1