DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS(Include Facility name/Location if different)

Form Approved.

OMB No. 2040-0004 MAJOR (SUB 01) OMB No. 2
F - FINAL
EFFLUENT
*** NO DISCHARGE
NOTE: Read instructions before completing this form.

JUNEAU, CITY AND BOROUGH OF NAME: ADDRESS: 155 SOUTH SEWARD, JUNEAU, ALASKA 98801 JUNEAU-DOUGLAS TREATMENT PLANT JUNEAU, ALASKA 98801 FACILITY: LOCATION: Scott Jeffers WW Utilities Superintendent ATT:

AK-002321-3 PERMIT NUMBER 001 A DISCHARGE NUMBER MONITORING PERIOD MO 8

PARAMETER		QI	JANTITY OR LOAD	ING	QUA	LITY OR CONCENT	RATION	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
		AVERAGE	IVIAAIIVIUIVI	ONTO	Will till City	7,114,014	19.9	(04)	0		
TEMPERATURE, WATER	SAMPLE	*****	*****	*****	*****	****				5/7	
DEG, CENTIGRADE	MEASUREMENT						REPORT			WEEK	GRAB
00010 1 0 0	PERMIT	*****	*****	*****	*****	*****	DAILY MAX	DEG. C		DAYS	
EFFLUENT GROSS VALUE	REQUIREMENT SAMPLE				3.7		4,1	(19)	0		
OXYGEN, DISSOLVED		*****	*****	*****		*****				1/7	
(DO)	MEASUREMENT			1	2.0	****	17.0			ONCE/	GRAB
00300 1 0 0	PERMIT	*****	*****	*****	Daily Min.	*****	DAILY MAX	MG/L		WEEK	
EFFLUENT GROSS VALUE	REGUIREMENT				Daily Will.	295	<u> </u>	(19)	0		
BOD, 5-DAY	SAMPLE	*****	*****	*****	*****		*****			1/30	
(20 DEG. C)	MEASUREMENT			-		REPORT				ONCE/	COMP 24
00310 G 0 0	PERMIT	*****	*****	*****	*****	MO AVG	*****	MG/L		MONTH	
RAW SEW/INFLUENT	REQUIREMENT	57.0		(26)		4.0		(19)	0		
BOD, 5-DAY	SAMPLE	57.0	*****	(20)	*****		*****	, ,		1/30	
(20 DEG. C)	MEASUREMENT	4005		-		45				ONCE/	COMP 24
00310 W 0 0	PERMIT	1035 WKLY AVG	****	LBS/DAY	*****	WKLY AVG	*****	MG/L		MONTH	
SEE COMMENTS BELOW	REQUIREMENT		57.0	(26)		4.0	4.5	(19)	0		
BOD, 5-DAY	SAMPLE	44.9	57.0	(20)	*****	7.0		,		1/30	
(20 DEG. C)	MEASUREMENT		1380	-		30	60			ONCE/	COMP 24
00310 1 0 0	PERMIT	090	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX	MG/L		MONTH	
EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY WAX	LEGIDAI	6.4	INIO AVO	6.9	(12)	0		
рH	SAMPLE	*****	*****	*****	0.4	*****	0.0	\ /		5/7	
	MEASUREMENT	*****	*****	, , ,	6.0	ļ	8.5			WEEK	GRAB
00400 1 0 0	PERMIT	*****	*****	*****	MIN.	*****	MAXIMUM	su		DAYS	
EFFLUENT GROSS VALUE	REQUIREMENT	*****		ļ	IVIII V.	377	III VIIII OIII	(19)	0		
SOLIDS, TOTAL	SAMPLE		*****	*****	*****	311	*****	(,0,		1/30	1
SUSPENDED	MEASUREMENT	*****	*****	1		REPORT				ONCE/	COMP 24
00530 G 0 0	PERMIT		*****	*****	*****	MO AVG	*****	MG/L		MONTH	
RAW SEW/INFLUENT	REQUIREMENT	*****			AND BASED ON MY IN	OLUDY OF THOSE INDIV	ADUALS IMMEDIATELY	RESPONSIBLE			
I CERTIFY UNDER PENALTY OF LAW THAT I FOR OBTAINING THE INFORMATION. 1 SEL	AVE PERSONALLY EXAM	NED AND AM FAMILIAR	ACCURATE AND COM	IN SUBMITTED HEREIN.	AT THERE ARE SIGN	FICANT PENALTIES FO	R SUBMITTING FALSE	INFORMATION,		# # UADE	
INCLUDING THE POSSIBILITY OF FINE AND	MPRISONMENT. SEE 18 L	I.S.C. 1001 AND 33 U.S.	C. & 1819.	1	(Penalties under these	statutes may include fine	TELEPHONE	naximum imprisonment o	petyeen o months an	DATE	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			10-	1000-		007		-0393	2003	1 9	8
Scott Jeffers			870	WV -		907	380	-0383	2000	 	
Wastewater Utilities Superinten	dent	7		PRINČIPAL EXECUTIV		AREA	DI IONE NIII	#BED	YEAR	мо	DAY
TYPED OR PRINTED)			AUTHORIZED AGENT		CODE	PHONE NU	MOER	IEAR		
COMMENT AND EXPLANATION OF AN			(REFERENCE AL	L ATTACHMENTS H	ERE)						
			V								
							00434/981209 1904				PAGE 1 OF 3
EDA Form 2220 1 /02 00) Previous editions	ms Previous editions may	be used.	(REPLACES EPA FO	RM T-40 WHICH MAY I	NOT BE USED).		00434/961209 1904				

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(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED).

FROM

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

PERMITTEF NAME/ADDRESS(Include Facility name/Location if different)

Form Approved.
OMB No. 2040-0004 MAJOR (SUB 01) F - FINAL EFFLUENT
*** NO DISCHARGE *** NO DISCHARGE
NOTE: Read instructions before completing this form.

001 A DISCHARGE NUMBER

мо 8

DAY 31

AK-002321-3 PERMIT NUMBER JUNEAU, CITY AND BOROUGH OF NAME: ADDRESS: 155 SOUTH SEWARD, JUNEAU, ALASKA 99801 JUNEAU-DOUGLAS TREATMENT PLANT JUNEAU, ALASKA 99801 Scott Jeffers WW Utilities Superintendent MONITORING PERIOD YEAR 2003 FACILITY: LOCATION: ATT: то FROM

PARAMETER		QUANTITY OR LOADING			QUA	LITY OR CONCENTR	ATION	NO. FX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MUMINIM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL	SAMPLE	79.3	*****	(26)	*****	8.9	*****	(19)	0	1/30	
SUSPENDED	MEASUREMENT	1035				45				ONCE/	COMP 24
00530 W 0 0	PERMIT REQUIREMENT	WKLY AVG	*****	LBS/DAY	*****	WKLY AVG	*****	MG/L		MONTH	
SEE COMMENTS BELOW	SAMPLE	84.8	207.3	(26)		7.8	14.9	(19)	0		
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	04.0	201.3	(20)	*****	1.0	14.0	(,		1/30	
00530 1 0 0	PERMIT	690	1380			30	60	Γ		ONCE/	COMP 24
		MO AVG	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX	MG/L		MONTH	
EFFLUENT GROSS VALUE	REQUIREMENT	N/A	N/A	LUGIDIAI		N/A	N/A	(19)	0		
NITROGEN, AMMONIA	SAMPLE	N/A	IN/A	*****	*****	OF C	1977	(,	-	1/180	
TOTAL (AS N)	MEASUREMENT	REPORT	REPORT			REPORT	REPORT			SEMI-	COMP 24
00610 1 0 0	PERMIT	MO AVG	DAILY MAX	*****	*****	MO AVG	DAILY MAX	MG/L		ANNUAL	
EFFLUENT GROSS VALUE	REQUIREMENT	MOAVG	DAILTIVIAN			14	D/ ULT W/ V	(13)	0		
COLIFORM, FECAL MF,		*****	*****	*****	*****	1.4	*****	(,	-	1/7	
M-FC BROTH, 44.5C	MEASUREMENT					800				ONE /	GRAB
31616 W 0 0	PERMIT	*****	*****	*****	*****	WKLY GEO	*****	#/100ML		WEEK	
SEE COMMENTS BELOW	REQUIREMENT					14	30	(13)	0		
COLIFORM, FECAL MF,	SAMPLE	*****	*****	*****	*****	'-7	"	(10)	•	1/7	ļ
M-FC BROTH, 44.5C	MEASUREMENT					400	1200			ONE /	GRAB
31616 1 0 0	PERMIT	*****	*****	*****	*****	MO GEO	DAILY MAX	#/100ML		WEEK	
EFFLUENT GROSS VALUE	REQUIREMENT		2.5530			IVIO GEO	DAIL I WAX	#/ TOOKIL	0	*****	
FLOW, IN CONDUIT OR	SAMPLE	1.2835	2.5530	(3)	*****	*****	*****	*****	•	7/7	
THRU TREATMENT PLANT	MEASUREMENT							F		CONTINUOS	RECORDED
50050 1 0 0	PERMIT	2.76	6.0	1400	*****	*****	*****	*****		0011111000	1120011022
EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MAX	MGD	99			(23)	0		
BOD, 5-DAY PERCENT	SAMPLE	*****	*****	*****	33	*****	*****	(20)	·	1/30	
REMOVAL	MEASUREMENT	*****	******	******	85					ONCE/	CALCTD
81010 K 0 0	PERMIT	*****	*****	*****	MN % RMV	*****	*****	PERCENT		MONTH	0,2012
PERCENT REMOVAL I CERTIFY UNDER PENALTY OF LAW THAT I HAV	REQUIREMENT			I A IN PERSON I POPUL	AND DACED ON AN INC	NURY OF THOSE INDIV	IDUALS IMMEDIATELY	DESDONSIBLE		111011111	
FOR OBTAINING THE INFORMATION. BELIE	VE PERSONALLY EXAM	NED AND AM FAMILIAR	ACCURATE AND COME	PLATE. I AM AWARE TH							
INCLUDING THE POSSIBILITY OF FINE AND IM	PRISONMENT. SEE 18 L	J.S.C. 1001 AND 33(056.0	. & 1319.	Μ	(Penalties under these s	tatutes may include fine		naximum imprisonment of i	between 6 months and		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	- XA-XE	11/200			TELEPHONE	2000	2003	DATE 9	T 8
Scott Jeffers			2 m/ 6	11201		(907)	586	-0393	2003	1	· · ·
Wastewater Utilities Superintendent				RINCIPAL EXECU		AREA					D
TYPED OR PRINTED				AUTHORIZED AGE		CODE	PHON	E NUMBER	YEAR	MO	DAY
COMMENT AND EXPLANATION OF ANY VIO	LATIONS		(REFERENCE ALL	ATTACHMENTS HER	RE)						
							00434/981209 1904				PAGE 2 OF 3
EPA Form 3320-1 (03-99) Previous editions ma	Previous editions may	be used.	(REPLACES EPA FOI	RM T-40 WHICH MAY	NOT BE USED).		30434/981209 1904				, AGE 2 OF G

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

MAJOR
(SUB 01)
F - FINAL
EFFLUENT
*** NO DISCHARGE
NOTE: Read instructions b

Form Approved.

OMB No. 2040-0004

MONITORING PERIOD

то

DAY

PERMITTEE NAME/ADDRESS(Include Facility name/Location if different)

NAME JUNEAU, CITY AND BOROUGH OF ADDRESS: 155 SOUTH SEWARD, JUNEAU, ALASKA 99801 JUNEAU-DOUGLAS TREATMENT PLANT JUNEAU, ALASKA 90801 Scott Jeffers WW Utilities Superintendent FACILITY: LOCATION: ATT:

AK-002321-3 PERMIT NUMBER

001 A DISCHARGE NUMBER

PARAMETER		QUANTITY OR LOADING			QUALI	TY OR CONCEN	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OLIDS, SUSPENDED	SAMPLE				98			(23)	0	1 4/00	
ERCENT REMOVAL	MEASUREMENT	*****	*****	*****		*****	*****			1/30 ONCE/	CALCTD
1011 K 0 0	PERMIT			1	85		*****			MONTH	CALCID
ERCENT REMOVAL	REQUIREMENT	. *****	*****	*****	MN % RMV	*****		PERCENT		NONTH	COMP 24
OPPER	SAMPLE				*****	N/A	N/A	(28)	0	1/90	CONIF 24
OTAL RECOVERABLE	MEASUREMENT	*****	*****	******	*****	DEDODT	REPORT	├		ONCE/	
1119 1 0 0	PERMIT			*****	*****	REPORT				QUARTER	
FFLUENT GROSS VALUE	REQUIREMENT	*****	*****	*****	*****	MO AVG	DAILY MAX	ug/L (73)	0	CONTIEN	
OXICITY,	SAMPI F		*****	*****	*****	*****	N/A	(73)	U	1/90	
galloprovincialis	MEASUREMENT	*****	*****				REPORT	 -		ONCE/	COMP 24
(G3P 1 0 0	PERMIT		l	<u> </u>			MAXIMUM	TUc		QUARTER	001111 2
FFLUENT GROSS VALUE	REQUIREMENT	Start 1/02	/2004 through 4/3	30/2005	ļ		N/A	(73)	0	QUARTER	
OXICITY,	SAMPLE		*****	*****		*****	N/A	(/3)	Ü	1/90	
.excentricus	MEASUREMENT	*****	*****	******			REPORT	l -		ONCE/	COMP 24
KF3N 1 0 0	PERMIT				l		MAXIMUM	TUc		QUARTER	OOM E
FFLUENT GROSS VALUE	REGUIREMENT	Start 1/02	/2004 through 4/3	30/2005			MAXIMUM	100		QUARTER	
	SAMPLE				1			1			
	MEASUREMENT			-				1 1			
	PERMIT		,					1			
	REQUIREMENT										
	SAMPLE			i		i					
	MEASUREMENT			4				i i			
	PERMIT	ĺ		1	Ì		}				
	REQUIREMENT						 	<u> </u>			
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	SAMPLE										
	MEASUREMENT			1	-	<u> </u>		1 1			
	PERMIT REQUIREMENT		1		I						
CERTIFY UNDER PENALTY OF LAW THAT I H		INFO AND AM FAMILIAS	WITH THE INFORMATIO	ON SUBMITTED HEREIN	: AND BASED ON MY IN	QUIRY OF THOSE INDI	VIDUALS IMMEDIATELY	RESPONSIBLE			
				PETE. IAM AWARE T	HAT THERE ARE SIGNI	FIGANT PENALTIES FO	R SUBMITTING FALSE	INFORMATION, maximum imprisonment of i	whenen & months at	d 5 vears.	
CLUDING THE POSSIBILITY OF FINE AND I	VIPRISONMENT. SEE TO	J.S.C. 1001 AMD 3 U.S.	C. 0.1343.	1_	(Penalties under these .	Statutes may muluue iiti	TELEPHONE	nexament interior		DATE	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		1 X	3A >A/1	HNO		(907)		-0393	2003	9	8
cott Jeffers	14	1		PRINCIPAL EXECU	ITIVE	AREA					
Jastewater Utilities Superintend		1 ′	OKEICER MR	AUTHORIZED	AGENT	CODE	PHON	E NUMBER	YEAR	MO	DAY
TYPED OR PRINTE				L ATTACHMENTS I			<u> </u>				
MMENT AND EXPLANATION OF AN	VIOLATIONS		(NEFERENCE VAL	LA I I A CI I MILIVI SI	·-··/						

EPA Form 3320-1 (03-99) Previous editions ma Previous editions may be used.

FROM

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

PERMITTEE NAME/ADDRESS(Include Facility name/Location if different)

MAJOR (SUB 01) Form Approved.

OMB No. 2040-0004

F - FINAL

UPSTREAM RECEIVING WATER
*** NO DISCHARGE

eting this form

AK-002321-3 REC 1 JUNEAU, CITY AND BOROUGH OF NAME: DISCHARGE NUMBER PERMIT NUMBER ADDRESS: 155 SOUTH SEWARD, MONITORING PERIOD JUNEAU, ALASKA 99801 JUNEAU-DOUGLAS TREATMENT PLANT JUNEAU, ALASKA 99801 <u>мо</u> 8 FACILITY: мо 8 DAY YEAR 2003 TO FROM 2003 LOCATION: Scott Jeffers WW Utilities Superintendent ATT: SAMPLE TYPE QUALITY OR CONCENTRATION QUANTITY OR LOADING NO. EX FREQUENCY OF ANALYSIS PARAMETER MINIMUM AVERAGE UNITS MAXIMUM UNITS AVERAGE 0 COLIFORM, FECAL MF, SAMPLE 23.0 (13)1/30 ONCE/MONTH ***** ***** M-FC BROTH, 44.5C MEASUREMENT GRAB REPORT REPORT 31616 1 0 0 PERMIT ***** MG/L MAY-OCT DAILY MAX ***** MO AVG EFFLUENT GROSS VALUE REQUIREMENT LBS/DAY AND 2/180 MEASUREMENT 2 TIMES GRAB NOV-APR REQUIREMENT MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT MEASUREMENT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT MEASUREMENT PERMIT REQUIREMENT MITTED HEREIN: AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE

I MA AWARE THAT THERE ARE SIGNIFICANT DENALTIES FOR SUBMITTING FAIRS INFORMATION.

(Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.

TELEPHONE I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFOF FOR OBTAINING THE INFORMATION. I BELIEVE IT IS SUBMITTED INFORMATION IS THAT, ACCUPANT AND NOLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT, SEE IS U.S.C. 1001 AND 32M.S.C. & 1318. DATE NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Scott Jeffers 2003 9 8 586-0393 (907) SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT (REFERENCE ALL ANTACHMENTS HERE) Wastewater Utilities Superintendent AREA CODE PHONE NUMBER YEAR MO DAY TYPED OR PRINTED
COMMENT AND EXPLANATION OF ANY VIOLATIONS

EPA Form 3320-1 (03-99) Previous editions ma Previous editions may be used.

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED).

PAGE 1 OF 1

JUNEAU-DOUGLAS WASTEWATER TREATMENT FACILITY

EPA REPORT

Juneau, Alaska

AUGUST 2003

	EPURI	Julieau, Alaska								A00001 2000							
		V	EATHER	₹	,	INFLUENT					EFFLUENT						
DAY	DATE	TEMP °F	RAIN FALL INCHES	HIGH TIDE FEET	J-D TTL EFFL MGD	s.s. mg/L	s.s. LBS	B O D mg/L	R O D LBS	TEMP °C	рH	n o mg/L	SS mg/L	S.S. LBS	B.O.D. mg/L	B.O.D.	FECAL Coliform /100 ml
SUN	3		0.05	16.5	1 1170	282	2627						7.2	67			
MON	4	54	0.14	16.2	1.6430	343	4700			17.3	6.7		8.8	121			
TUE	5	61	0.01	15.9	1.1350	290	2745			16.8	6.6		6.4	61			
WED	ь	62	0.00	15.6	1.1470	263	2516	112	1071	17.4	6.7	4.1	7.2	69	3.4	32.8	2.0
THU	7	61	0.00	15.8	1.0360	400	3456			17.4	6.8		8.0	69			
FRI	8	66	0.00	16.3	0.9650					19.5	6.9						
SAT	9		0.00	17.0	0.9070												
SUN	10		0.00	17.0	0.9890	508	4190						6.2	51			
MON	11	62	0.00	18.1	1 1310	477	4499			17.3	6.7		6.0	57			
TUE	12	60	0.06	18.0	1.1940	680	6771			17.5	6.6		6.6	66			
WED	13	59	0.10	18.0	1.5330	516	6597	542	6930	17.8	6.9	4.1	10.8	138			30.0
THU	14	58	0.62	17.6	1.6420	336	4601			18.0	6.6		5.8	79			
FRI	15	60	0.31	16.8	1.4380					19.9	6.6						
SAT	16		0.37	15.9	1.7980												
SUN	17		0.10	15.2	1.2100	616	6216						5.6	57			
MON	18	56	0.01	14.4	1.0890	402	3651			17.9	6.6		5.6	51			
TUE	19	55	0.29	13.7	1.5260					17.0	6.5		7.4	94			
WED	20	50	0.27	13.1	1.5260	302	3844			16.9	6.5	4.0	10.8	137	4.5	57.0	30
THU	21	52	0.01	12.9	1.6740	192	2681			16.0	6.4		14.9	207			
FRI	22	56	0.00	13.3	0.7700					16.8	6.5						
SAT	23		0.01	14.2	1.0760												
SUN	24		0.08	15.3	1.1060	379	3496						7.6	70			
MON	25	58	0.00	14.1	1.1060	474				17.0	6.4		7.8	72			
TUE	26		0.00	16.5	1.1550	406				16.3	6.5		8.8	85			
WED	27	54	0.29	17.4	1.1830	138	1362	230	2269	17.1	6.6	3.7	7.6	75			23
THU	28	57	0.01	18.0	1.1270	162	1523			16.3	6.4		7.6	71			
FRI	29	57	0.07	18.1	1.1630					16.8	6.6						
SAT	30		0.78	17.8	2.5530												
то	TAL		3.58		35.9390												
MAX	IMUM	66	0.78	18.10	2.5530	680	6771	542	6930	19.9	6.9	4.1	14.9	207	4.5	57.0	30
MINI	MUM	50	0.00	12.90	0.7700	138	1362	112	1071	16.0	6.4	3.7	5.6	51	3.4	32.8	2
AVE:	RAGE	58	0.13	16.03	1.2835	377	3851	295	3423	17.4	6.6	4.0	7.8	85	4.0	44.9	14

<u>COMMENTS: On 8/6/03 the Eff Fecal grab was < 2.0.</u> 8/19/03 Inf. Sampler down no sample.

% REN	IOVAL
B.O.D.	99
S.S.	98

Copper	N/A	ug/L
NH3	N/A	mg/L
NH3	N/A	lbs

Weekly					Weekly	
TSS,BOD	TS	s	BOI	Coliform		
Aver.	mg/l	lbs	mg/l	lba	Geo. Mean	
WEEK1	7.5	78.2	3.4	32.8	2	
WEEK2	7.1	78.2	3.4	32.8	30	
WEEK3	8.9	79.3	4.5	57.0	30	
WEEK4	7.9	74.6	4.5	57.0	23	
WEEK5						
Maey	8.9	79.3	4.5	57.0	14	