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

ATT:

MAJOR

Form Approved.
OMB No. 2040-0004

(SUB 01) F - FINAL EFFLUENT *** NO DISCHARGE

NOTE: Read instructions before comple eting this form.

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

AK-00: PERMIT	2321-3 NUMBER					1 A E NUMBER
		1	MONITORING PERIC	D		
YR	MO	DAY		YEAR	MO	DAY
2003	9	1	ТО	2003	9	30

PARAMETER		Q	UANTITY OR LOAD	DING	QUA	LITY OR CONCENT	RATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER	SAMPLE						17.1	(04)	0		
DEG, CENTIGRADE	MEASUREMENT	*****	*****	*****	*****	*****				5/7	
00010 1 0 0	PERMIT			1	***		REPORT			WEEK	GRAB
EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	*****	*****	*****	DAILY MAX	DEG. C		DAYS	
XYGEN, DISSOLVED	SAMPLE				4.0		7.4	(19)	0		
(DO)	MEASUREMENT	*****	*****	*****	L	*****				1/7	
0300 1 0 0	PERMIT			1	2.0	-	17.0			ONCE/	GRAB
EFFLUENT GROSS VALUE	REQUIREMENT	****	*****	*****	Daily Min.	*****	DAILY MAX	MG/L		WEEK	
BOD, 5-DAY	SAMPLE					112.4		(19)	0		
(20 DEG. C)	MEASUREMENT	*****	*****	*****	*****		*****			1/30	
00310 G 0 0	PERMIT					REPORT				ONCE/	COMP 24
RAW SEW/INFLUENT	REQUIREMENT	*****	*****	*****	****	MO AVG	*****	MG/L		MONTH	
BOD, 5-DAY	SAMPLE	89.3		(26)		6.9		(19)	0		
(20 DEG. C)	MEASUREMENT		*****		*****		*****			1/30	
00310 W 0 0	PERMIT	1035				45				ONCE/	COMP 24
SEE COMMENTS BELOW	REQUIREMENT	WKLY AVG	*****	LBS/DAY	*****	WKLY AVG	*****	MG/L		MONTH	
BOD, 5-DAY	SAMPLE	89.3	89.3	(26)		6.9	6.9	(19)	n		
(20 DEG. C)	MEASUREMENT				*****			ļ		1/30	
00310 1 0 0	PERMIT	690	1380			30	60			ONCE/	COMP 24
EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX	MG/L		MONTH	
ρΗ	SAMPLE				5.5		7.0	(12)	0		
	MEASUREMENT	*****	*****	*****		*****				5/7	
00400 1 0 0	PERMIT				6.0		8.5			WEEK	GRAB
EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	*****	MIN.	*****	MAXIMUM	SU		DAYS	
SOLIDS, TOTAL	SAMPLE					233		(19)	0	1	
SUSPENDED	MEASUREMENT	*****	*****	*****	*****		*****			1/30	
00530 G 0 0	PERMIT					REPORT				ONCE/	COMP 24
RAW SEW/INFLUENT	REQUIREMENT	*****	*****	*****	*****	MO AVG	*****	MG/L		MONTH	
CERTIFY UNDER PENALTY OF LAW THAT I H FOR OBTAINING THE INFORMATION. I BEL INCLUDING THE POSSIBILITY OF FINE AND II	IEVE THE SUBMITTED IN	VFORMATION IS TRUE,	ACCURATE AND COM	PLETE. I AM AWARE TH	iat there are signii	FICANT PENALTIES FOI	IDUALS IMMEDIATELY F R SUBMITTING FALSE I s up to \$10,000 and or m	NFORMATION,	hetween & months on	d 5 vegre	
IME/TITLE PRINCIPAL EXECUTIVE OFFICE			. \ \\\\		1) Chalaco arao, picoo	lataco may moraco mo	TELEPHONE	animam impriodimicin of		DATE	
Scott Jeffers		800	M XX	evr		907	586-	0393	2003	10	8
Vastewater Utilities Superintend	lent i			PRINCIPAL EXECUTIV	/E	AREA					
TYPED OR PRINTED			7.7.7.11	AUTHORIZED AGENT		CODE	PHONE NUM	BER	YEAR	MO I	DAY
OMMENT AND EXPLANATION OF AN				LATTACHMENTS H							
					-						

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

FROM

MAJOR
(SLIB 01)
F - FINAL
EFFLUENT
*** NO DISCHARGE
NOTE: Read Instructions before

Form Approved.
OMB No. 2040-0004

g this form.

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

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

	2321-3 NUMBER				DISCHARG	1 A E NUMBER
			MONITORING PERIO	OD		
YR	MO	DAY		YEAR	MO	DAY
2003	9	1 1	⊤ то	2003	9	30

PARAMETER		G	UANTITY OR LOADIN	IG	QU	ALITY OR CONCENTR	ATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL	SAMPLE MEASUREMENT	565.2	*****	(26)	*****	19.2	*****	(19)	0	1/30	
SUSPENDED	PERMIT	1035				45		T		ONCE/	COMP 24
00530 W 0 0	REQUIREMENT	WKLY AVG	*****	LBS/DAY	*****	WKLY AVG	*****	MG/L		MONTH	
SEE COMMENTS BELOW	OAMPLE	248.4	1920.2	(26)		12.3	56.5	(19)	1		
SOLIDS, TOTAL	MEASUREMENT	240.4	1320.2	(20)	*****					1/30	
SUSPENDED	PERMIT	690	1380			30	60	l l		ONCE/	COMP 24
00530 1 0 0	1	MO AVG	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX	MG/L		MONTH	
EFFLUENT GROSS VALUE	REQUIREMENT SAMPLE	N/A	N/A	LDOIDIN		N/A	N/A	(19)	0		
NITROGEN, AMMONIA	MEASUREMENT	N/A	WA.	*****	****			'		1/180	i
TOTAL (AS N)		REPORT	REPORT			REPORT	REPORT			SEMI-	COMP 24
00610 1 0 0	PERMIT	MO AVG	DAILY MAX	*****	*****	MO AVG	DAILY MAX	MG/L		ANNUAL	1
EFFLUENT GROSS VALUE	REQUIREMENT	IOIC ACCS	THAT T WAY			30		(13)	0		
COLIFORM, FECAL MF,		*****	*****	****	*****		*****	, ,		1/7	1
M-FC BROTH, 44.5C	MEASUREMENT					800				ONE /	GRAB
31616 W 0 0	PERMIT REQUIREMENT	*****	*****	44444	*****	WKLY GEO	*****	#/100ML		WEEK	l
SEE COMMENTS BELOW						12	30	(13)	0		
COLIFORM, FECAL MF,	SAMPLE	*****	*****	*****	*****	i '-	••	[,,		1/7	
M-FC BROTH, 44.5C	MEASUREMENT					400	1200	l		ONE /	GRAB
31616 1 0 0	PERMIT	*****	*****	*****	*****	MO GEO	DAILY MAX	#/100ML		WEEK	
EFFLUENT GROSS VALUE	REQUIREMENT	2,1328	5.5420	(3)		1			0		
FŁOW, IN CONDUIT OR	SAMPLE	2.1320	5,5420	(3)	*****	*****	*****	*****		7/7	
THRU TREATMENT PLANT	MEASUREMENT	2.76	6.0			 		İ -		CONTINUOS	RECORDED
50050 1 0 0	PERMIT	MO AVG	DAILY MAX	MGD	*****	*****	*****	*****			
EFFLUENT GROSS VALUE	REQUIREMENT	IVIO AVG	DAIL! WA	IVIGD	94			(23)	0		
BOD, 5-DAY PERCENT	SAMPLE	*****	*****	*****) "	*****	*****	(/		1/30	l
REMOVAL	MEASUREMENT				85			1 1		ONCE/	CALCTD
81010 K 0 0	PERMIT	*****	*****	*****	MN % RMV	*****	*****	PERCENT		MONTH	
PERCENT REMOVAL I CERTIFY UNDER PENALTY OF LAW THAT I	REQUIREMENT	INED AND AM FAMILIAR	WITH THE INFORMATIO	N SUBMITTED HEREIN	AND DAOFD ON AND IN	QUIRY OF THOSE INDIV	DUALS IMMEDIATELY	RESPONSIBLE			
I CERTIFY UNDER PENALTY OF LAW THAT I FOR OBTAINING THE INFORMATION. I BE INCLUDING THE POSSIBILITY OF FINE AND	LIEVE THE SUBMITTED I	INFORMATION IS TRUE,	ACCURATE AND COM	POETE. I AM AWARE TI	HAT THERE ARE SIGN	FICANT PENALTIES FO	R SUBMITTING FALSE	INFORMATION, maximum imprisonment of i		ed E venera	
		U.S.C. 1001 AND 33 U.S.	0. 8 1319.		(Penaities under these	statutes may include line	TELEPHONE	Maximum Imprisoriment or	DOLVISCH O MONING W.	DATE	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		Azas	11/SK	1/11		(907)		-0393	2003	10	8
Scott Jeffers		10		PRINCIPAL EXECU	TNE	AREA		5555			1
Wastewater Utilities Superintendent		1 6		AUTHORIZED AGE		CODE	PHONE NUMBER		YEAR	l MO	DAY
TYPED OR PRINTE		<u> </u>				CODE	FHON	L I TOMBLIN	1,20,41		
COMMENT AND EXPLANATION OF ANY	IOLATIONS		(REFERENCE ALL	ATTACHMENTS HER	(E)						
Please see attached											
	m / dili		/DEDI ACES EDA FOI		NOT BE LICEDY		00434/981209 1904				PAGE 2 OF 3

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

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

FROM

00434/981209 1904

PAGE 2 OF

MAJOR
(SUD 01)
F - FINAL
EFFLUENT
*** NO DISCHARGE
NOTE: Read instructions before comp Form Approved.
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS(Include Facility name/Location if different) (2-16) AK-002321-3 PERMIT NUMBER 001 A DISCHARGE 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 MO 9 DAY 1 MO 9 FACILITY: LOCATION: то FROM ATT:

			ANTITY OR LOAD	-	40,14	TY OR CONCEN			EX	OF ANALYSIS	TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		1	
SOLIDS, SUSPENDED	RAMPLE			*****	95	*****	*****	(23)	0	1/30	
PERCENT REMOVAL	MEASUREMENT	*****	*****	*****				ļ .		ONCE/	CALCTD
31011 K 0 0	PERMIT		*****	*****	85	*****	*****	PERCENT		MONTH	0,120.2
PERCENT REMOVAL	REQUIREMENT	. *****	*****	******	MN % RMV	N/A	N/A	(28)	0		COMP 24
COPPER	SAMPLE	*****	*****	****	*****	NA	14/2	(20)	·	1/90	
TOTAL RECOVERABLE	MEASUREMENT			-		REPORT	REPORT			ONCE/	
1119 1 0 0	PERMIT	*****	*****	*****	*****	MO AVG	DAILY MAX	ug/L		QUARTER	
EFFLUENT GROSS VALUE	REQUIREMENT					MOTIVO	N/A	(73)	0		
TOXICITY,	SAMPLE	*****	*****	*****	*****	*****				1/90	
1.galloprovincialis	MEASUREMENT			1			REPORT	Ι Γ		ONCE/	COMP 24
KG3P 1 0 0	PERMIT	Start 1/03	 2/2004 through 4/3	0/2005			MAXIMUM	TUc		QUARTER	
EFFLUENT GROSS VALUE	REQUIREMENT SAMPLE	Ottale 1/02		1			N/A	(73)	0		
TOXICITY,	MEASUREMENT	****	*****	*****	*****	*****				1/90	
0.excentricus FKF3N 1 0 0	PERMIT			1			REPORT			ONCE/	COMP 24
EFFLUENT GROSS VALUE	REQUIREMENT	Start 1/02	2/2004 through 4/3	30/2005			MAXIMUM	TUc		QUARTER	
ITT EDENT GROOD WILDE	SAMPLE						1				
	MEASUREMENT				L			i L		·	
	PERMIT			1			1				
	REQUIREMENT			~							
	SAMPLE			1							
	MEASUREMENT]			 	 			
	PERMIT			l			1	1		1	
	REQUIREMENT		<u> </u>				 			-	
	SAMPLE				1						
	MEASUREMENT			+				† †			
	PERMIT				Ì			} [
	REQUIREMENT		 	 							
	SAMPLE MEASUREMENT				1] [
	PERMIT		 	1						1	
			1		l						
FOR OBTAINING THE INFORMATION. BEI	AVE PERSONALLY EXAM	NED AND AM FAMILIA	WITH THE INFORMATION	ON SUBMITTED HEREIN	: AND BASED ON MY IN	QUIRY OF THOSE INDIV	VIDUALS IMMEDIATELY	RESPONSIBLE			
FOR OBTAINING THE INFORMATION. BEI	LIEVE THE SUBMITTED I	NFORMATION IS TRUE	, ACCURATE AND COM	NLEIE. IAM AWARET	(Penaities under these	statutes may include fine	es up to \$10,000 and or	maximum imprisonment of	between 6 months an	d 5 years.	
INCLUDING THE POSSIBILITY OF FINE AND NAME/TITLE PRINCIPAL EXECUTIVE (IMPRISONMENT, SEE 18 C	.o.c. 1001 AND 33 U.S	1	11/1			TELEPHONE			DATE	8
NAME/TITLE PRINCIPAL EXECUTIVE C Scott Jeffers	OI I IOLIX	AZ	50 \ JP/1	106		(907)	586	-0393	2003	10	
Wastewater Utilities Superinten	dent	<u></u>	SIGNATURE OF	AUTHORIZED	JTIVE	AREA			VEAD	мо	DAY
TYPED OR PRINTE		(OFFICER OF	AUTHORIZED	AGENT	CODE	PHON	E NUMBER	YEAR	I WIO	DAI
COMMENT AND EXPLANATION OF AN			(REFERENCE AL	LATTACHMENTS I	HERE)						
Committee and Edition of the											
				RM T-40 WHICH MAY			00434/981209 1904				PAGE 3 OF 3

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

MAJOR (SUB 01) F - FINAL EFFLUENT *** NO DISCHARGE

NOTE: Read instructions be

YEAR

200

MONITORING PERIOD

TO

DAY

Form Approved.

OMB No. 2040-0004

MO

._ ...

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

NAME: JUNEAU, CITY AND BOROUGH OF
ADDRESS:

155 SOUTH SEWARD,
JUNEAU, ALASKA 99801
FACILITY: JUNEAU-DOUGLAS TREATMENT PLANT
LOCATION: JUNEAU, ALASKA 99801
ATT: Scott Jeffers WW Utilities Superintendent

AK-002321-3
PERMIT NUMBER

МО

YR

2003

FROM

REC 1 DISCHARGE NUMBER

DAY

30

FREQUENCY SAMPLE NO. QUALITY OR CONCENTRATION QUANTITY OR LOADING PARAMETER EX OF ANALYSIS TYPE AVERAGE MAXIMUM MINIMUM AVERAGE MAXIMUM UNITE UNITS 0 (23)COLIFORM, FECAL MF, SAMPLE 1/30 ONCE/MONTH ***** M-FC BROTH, 44.5C 31616 1 0 0 MEASUREMENT GRAB 85 ***** ***** PERCENT MAY-OCT ***** **** MN % RMV EFFLUENT GROSS VALUE REQUIREMENT AND 1/80 2 TIMES GRAB NOV-APRIL I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN. AND BASED ON MY INDUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTIND FALSE INFORMATION, I DELIEVE THE SUBMITTED INFORMATION, I DELIEVE THE SUBMITTING FALSE INFORMATION, I DELIEVE THOSE INFORMATION, I DELIEVE THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE TO CERTIFY UNDER FENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION, SUBMITTED HEREIN: AND BASED ON MY INDUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE TO CONFIDENT INFORMATION, I BELIEVE THE SUBMITTED INFORMATION, STRUE, ACCURATE AND CONFIDENT. I HAVE AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTION FALSE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION, STRUE, ACCURATE AND CONFIDENT. I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION, SUBMITTED HEREIN: AND BASED ON MY INDUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE. INFORMATION, STRUE, ACCURATE AND CONFIDENT. I HAVE AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTION FALSE INFORMATION, STRUE, ACCURATE AND CONFIDENT. INFORMATION, SUBMITTED HEREIN. AND ASSED ON MY INDUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE. INFORMATION, STRUE, ACCURATE AND CONFIDENT. INFORMATION, STRUE, ACCURATE AND CONFIDENT. INFORMATION, STRUE, ACCURATE AND CONFIDENT. INFORMATION, (Penalties under those statutes may include fines up to \$10,000 and or maximum immissions. (Penalties under those statutes may include fines up to \$10,000 and or maximum immissions.)

TELEPHONE

**TELEPHO ent of between 6 months and 5 years. DATE 8 2003 10 (907)586-0393 Scott Jeffers SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT AREA Wastewater Utilities Superintendent DAY YEAR МО CODE PHONE NUMBER TYPED OR PRINTED (REFERENCE ALL ATTACHMENTS HERE) COMMENT AND EXPLANATION OF ANY VIOLATIONS

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

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

00434/981209 1904

PAGE 1 of 1

JUNEAU-DOUGLAS WASTEWATER TREATMENT FACILITY

EPA	REPORT	

Jur	neau.	Α	asi	ka

SEPTEMBER 2003

EPAR	EPURI							au, Alas	or\a						. L_ VIL	JLI\ 20	-
		V	/EATHER				NFLUEN				p. 15.07 518 1515 1518 1			LUENT			FECAL
DAY	DATE	TEMP °₽	RAIN FALL INOHES	HIGH TIDE FEET	J-D TTL EFFL MGD	S.S. mg/L	S.S. Les	B.O.D. mg/L	B.O.D.	TEMP °C	рН	D.O. mg/L	S.S. mg/L	S.S. LRS	B.O.D. mg/L	B,O.D.	Coliform /100.ml
SUN	31			18.0	1.6250	42	569						10	138			
MON	1	52	1.22	17.5	3.3500					17.1	6.6		16	447			
TUE	2	57	0.26	16.7	1.8680	128	1994			14.3	6.9		12	187			
WED	3	53	0.26	15.6	1.5450	108	1392	81	1040	14.9	6.8	3.5	14	178	6.9	89.3	30
THU	4	56	0.00	14.9	1.2070					15.5	6.6		19	187			
FRI	5	55	0.19	14.8	1.2350					16.6	7.0						
SAT	6		0.16	15.5	1.2340											,	
SUN	7		0.47	16.4	4.0750	230	7817						57	1920			
MON	8	51	0.70	15.6	3.3580	84	2338			16.3	6.7						
TUE	9	53	0.02	16.5	2.0250					14.5	6.7		8	135			
WED	10	51	0.49	17.6	2.0280	98	1658			14.6	6.7	5.3	6	101			
THU	11	52	0.11	17.6	1.9470	150	2436	64	1039	15.2	6.7		6	104			5
FRI	12	53	0.37	17.3	1.9850					14.9	6.6						
SAT	13		1.36	17.0	3.8230												
SUN	14		0.22	16.4	1.9570	194	3166						11	183			
MON	15	51	0.01	15.6	1.3520	216	2436			14.6	6.5		4	50			
TUE	16	50	0.00	14.8	1.1450	452	4316			13.3	6.8		8	73			
WED	17	40	0.01	13.8	1.2900	680	7316	161	1947	14.9	0.8	4.0	0	96			5
THU	18	45	0.26	12.9	1.2020	186	1865			15.1	6.7		8	84			
FRI	19	47	0.20	12.4	1.6930					14.4	6.5						
SAT	20		0.57	12.8	1.5790												
SUN	21		0.31	13.8	1.4080	450	5284						9	106			
MON	22	46	0.01	15.2	1.1680	530	5221			14.0	6.7	6.4	6	62			
TUE	23	42	0.27	15.1	2.1420	204	3644			14.6	6.6		9	161			
WED	24	49	0.95	16.5	3.1500	102	2680	124	3258	13.6	6.6	6.1	15	399			30
THU	25	51	0.28	17.8	2.2130	108	1993			13.1	6.8	7.4	6	118			
FRI	26	51	0.25	18.9	2.5730					13.4	7.0	7.3	ļ 				
SAT	27		1.20	19.5	5.5420												
TC	TAL		10.15		59.7190					ļ	-					25 -	
MAX	(IMUM	57	1.36	19.5	5.5420	680	7817	181	3258	17.1	7.0	7.4	57	1920	6.9	89.3	
MIN	IMUM	40	0.00	12.4	1.1450	42	569	64	1039	13.1	6.5	3.5	4	50	6.9	89.3	40
AVE	RAGE	50.3	0.38	15.9	2.1328	233	3301	112	1821	14.7	6.7	5.7	12	248	6.9	89.3	12

COMMENTS:

9/01/03 & 9/09/03 no Inf Sx - Sampler malfunction 9/9/03 no Eff Sx, Sampler hose went over the welr due to high flows.

% REMOVAL									
B.Q.D.	94								
S.S.	95								

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

Weekly TSS,BOD Aver	TSS		BOD		Weekly Coliform
	mg/l	lbs	mg/l	lbs	Geo. Mean
WEEK1	14	227	6.9	89.3	30
WEEK2	19	565	6.9		5
WEEK3	8	95	6.9		5
WEEK4	9	169	6.9		30
Мах	19	565	6.9	89.3	30