

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

MAJOR (SUB 01)  
F - FINAL  
EFFLUENT  
\*\*\* NO DISCHARGE  
NOTE: Read instructions before completing this form.

Form Approved.  
OMB No. 2040-0004

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

NAME: JUNEAU, CITY AND BOROUGH OF  
ADDRESS: JUNEAU, ALASKA 99801  
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

001 A  
DISCHARGE NUMBER

MONITORING PERIOD							
FROM	YR	MO	DAY	TO	YEAR	MO	DAY
	2003	12	1		2003	12	31

PARAMETER	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG, CENTIGRADE 00010 1 0 0	MEASUREMENT	*****	*****	*****	*****	*****	11.6	(04)	0	5/7	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	DEG. C		WEEK DAYS	GRAB
OXYGEN, DISSOLVED (DO) 00300 1 0 0	MEASUREMENT	*****	*****	*****	5.8	*****	8.0	(19)	0	1/7	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	2.0 Daily Min.	*****	17.0 DAILY MAX	MG/L		ONCE/WEEK	GRAB
BOD, 5-DAY (20 DEG. C) 00310 G 0 0	MEASUREMENT	*****	*****	*****	*****	*****	162.6	(19)	0	1/30	
RAW SEW/INFLUENT	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT MO AVG	MG/L		ONCE/MONTH	COMP 24
BOD, 5-DAY (20 DEG. C) 00310 W 0 0	MEASUREMENT	67.3	*****	(26)	*****	*****	6.1	(19)	0	1/30	
SEE COMMENTS BELOW	PERMIT REQUIREMENT	1035 WKLY AVG	*****	LBS/DAY	*****	*****	45 WKLY AVG	MG/L		ONCE/MONTH	COMP 24
BOD, 5-DAY (20 DEG. C) 00310 1 0 0	MEASUREMENT	50.4	67.3	(26)	*****	*****	4.1	(19)	0	1/30	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	690 MO AVG	1380 DAILY MAX	LBS/DAY	*****	*****	30 MO AVG	MG/L		ONCE/MONTH	COMP 24
pH	MEASUREMENT	*****	*****	*****	6.8	*****	7.7	(12)	0	5/7	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MIN.	*****	8.5 MAXIMUM	SU		WEEK DAYS	GRAB
SOLIDS, TOTAL SUSPENDED 00530 G 0 0	MEASUREMENT	*****	*****	*****	*****	*****	282	(19)	0	1/30	
RAW SEW/INFLUENT	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT MO AVG	MG/L		ONCE/MONTH	COMP 24

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY 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 SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. 1001 AND 26 U.S.C. 6139.

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

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
Scott Jeffers  
Wastewater Utilities Superintendent

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  
*Scott Jeffers*

TELEPHONE  
907 586-0393

DATE  
2004 1 9

TYPED OR PRINTED  
OFFICER OR AUTHORIZED AGENT

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

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

MAJOR (SUB 01)  
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LOCATION: JUNEAU, ALASKA 99801  
ATT: Scott Jeffers WW Utilities Superintendent

AK-002321-3  
PERMIT NUMBER

001 A  
DISCHARGE NUMBER

MONITORING PERIOD							
FROM	YR	MO	DAY	TO	YR	MO	DAY
	2003	12	1		2003	12	31

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 W 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	154.3	*****	(26)	*****	11.3	*****	(19)	0	1/30	COMP 24
	SAMPLE MEASUREMENT	1035	*****	LBS/DAY	*****	45	*****	MG/L		ONCE/MONTH	
SOLIDS, TOTAL SUSPENDED 00530 1 0 0	PERMIT REQUIREMENT	136.0	648.6	(26)	*****	8.5	19.6	(19)	0	1/30	COMP 24
	SAMPLE MEASUREMENT	690	1380	LBS/DAY	*****	30	60	MG/L		ONCE/MONTH	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	99.6	99.6	*****	*****	6.8	6.8	(19)	0	1/180	COMP 24
	SAMPLE MEASUREMENT	REPORT	REPORT	*****	*****	REPORT	REPORT	MG/L		SEMI-ANNUAL	
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0	PERMIT REQUIREMENT	MO AVG	DAILY MAX	*****	*****	MO AVG	DAILY MAX	MG/L		ONCE/MONTH	
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	50	*****	(13)	0	1/7	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	800	*****	#/100ML		ONE / WEEK	
COLIFORM, FECAL MF, M-FC BROTH, 44.5C 31616 W 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	26	50	(13)	0	1/7	GRAB
	SAMPLE MEASUREMENT	*****	*****	*****	*****	400	1200	#/100ML		ONE / WEEK	
COLIFORM, FECAL MF, M-FC BROTH, 44.5C 31616 1 0 0	PERMIT REQUIREMENT	1.7567	3.9680	(3)	*****	*****	*****	*****	0	7/7	RECORDED
	SAMPLE MEASUREMENT	2.76	6.0	MGD	*****	*****	*****	*****		CONTINUOUS	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		CONTINUOUS	RECORDED
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****		CONTINUOUS	RECORDED
FLOW IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		CONTINUOUS	RECORDED
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****		CONTINUOUS	RECORDED
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		CONTINUOUS	RECORDED
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****		CONTINUOUS	RECORDED
BOD, 5-DAY PERCENT REMOVAL 81010 K 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		CONTINUOUS	RECORDED
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****		CONTINUOUS	RECORDED
PERCENT REMOVAL	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		CONTINUOUS	RECORDED
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****		CONTINUOUS	RECORDED

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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
Scott Jeffers  
Wastewater Utilities Superintendent  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  
TELEPHONE (907) 550-0593  
DATE 2004 1 3  
AREA CODE PHONE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (REFER TO ALL ATTACHMENTS HERE)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
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MAJOR (SUB 01)  
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 JUNEAU, ALASKA 99801  
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 LOCATION: JUNEAU, ALASKA 99801  
 ATT: Scott Jeffers WW Utilities Superintendent

(2-18)  
**AK-002321-3**  
 PERMIT NUMBER

**001 A**  
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MONITORING PERIOD							
FROM	YR	MO	DAY	TO	YEAR	MO	DAY
	2003	12	1		2003	12	31

PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 K 0 0	SAMPLE MEASUREMENT	*****	*****	*****	97	*****	*****	(23)	0	1/30	
PERCENT REMOVAL	PERMIT REQUIREMENT	*****	*****	*****	85 MN % RMV	*****	*****	PERCENT		ONCE/MONTH	CALCTD
COPPER TOTAL RECOVERABLE 01119 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	6.7	6.7	(28)	0	1/90	COMP 24
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MO AVG	REPORT DAILY MAX	ug/L		ONCE/QUARTER	
TOXICITY, M.galloprovincialis TKG3P 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	N/A	(73)	0	1/90	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	Start 1/02/2004 through 4/30/2005			*****	*****	REPORT MAXIMUM	TUc		ONCE/QUARTER	COMP 24
TOXICITY, D.excentricus TKF3N 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	N/A	(73)	0	1/90	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	Start 1/02/2004 through 4/30/2005			*****	*****	REPORT MAXIMUM	TUc		ONCE/QUARTER	COMP 24
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Scott Jeffers  
 Wastewater Utilities Superintendent

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  
 (REFERENCE ALL ATTACHMENTS HERE)

TELEPHONE  
 (907) 586-0393

DATE  
 2004 1 9

TYPED OR PRINTED  
 AREA CODE PHONE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS



**JUNEAU-DOUGLAS WASTEWATER TREATMENT FACILITY**

Juneau, Alaska

DECEMBER 2003

**EPA REPORT**

DAY	DATE	WEATHER			INFLUENT					EFFLUENT							
		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	B.O.D. LBS	TEMP °C	pH	D.O. mg/L	S.S. mg/L	S.S. LBS	B.O.D. mg/L	B.O.D. LBS	FECAL Coliform /100 ml
SUN	30				1.10	216	1980					6.6	60.0				
MON	1	36	0.47	14.6	3.97	150	4964			9.6	7.0	6.8	19.6	649			
TUE	2	38	0.24	15.0	1.78	130	1924			7.8	7.3	7.4	14.0	207			
WED	3	35	0.01	15.6	1.32	224	2457	143	1568	9.1	7.4	7.2	8.4	92	6.1	67.3	23.0
THU	4	38	0.00	16.1	1.20	382	3823			6.1	7.4	7.0	8.0	80.1			
FRI	5	37	0.00	15.8	1.13					8.0	7.7	7.0					
SAT	6		0.00	17.0	1.06												
SUN	7		0.08	17.2	1.12	462	4319					11.6	108.5				
MON	8	34	0.01	17.3	1.11	320	2954			10.5	7.4	6.7	9.2	84.9			
TUE	9	30	0.00	17.3	1.03	384	3289			9.8	7.5	6.8	11.2	95.9			
WED	10	26	0.01	17.1	1.11	280	2594	343	3178	9.7	7.3	5.8	12.0	111.2		50.0	
THU	11	34	0.09	16.7	1.37	376	4280			10.1	7.6	6.8	7.2	82.0			
FRI	12	36	0.06	16.2	1.28					9.7	7.3	6.8					
SAT	13		0.01	15.5	0.99												
SUN	14		0.01	14.6	0.96	700	5739					8.2	67.2				
MON	15	34	0.55	14.1	1.71	237	3388			9.8	7.2	7.1	5.2	74.3			
TUE	16	38	0.40	14.4	2.94	184	4516			9.6	7.2	6.5	7.4	181.6			
WED	17	39	0.33	14.9	3.51	134	3923			8.2	7.2	7.8	8.0	234.2			
THU	18	39	0.66	15.8	2.99	154	3842	80	1996	8.7	7.4	7.9	10.8	269.4		50	
FRI	19	41	0.43	16.9	3.56					9.1	7.0	7.2					
SAT	20		0.09	15.0	2.87												
SUN	21		0.85	19.0	3.51	116	3400										
MON	22	45	0.61	19.8	3.66	172	5246			8.6	7.4	7.3	7.8	237.9			
TUE	23	38	0.66	20.2	2.74	153	3498			8.5	7.1	8.0	6.8	155.4			
WED	24	37	0.09	20.1	2.01	146	2441	61	1022	9.3	7.2	6.9	6.2	103.7	2.0	33.4	14
THU	25	34	0.23	19.5	1.64	152	2074			9.1	7.1	6.9	8.8	120.1			
FRI	26	29	0.00	16.4	1.32					9.2	7.3	6.9					
SAT	27		0.00	17.0	1.14												
SUN	28		0.00	15.8	1.10	626						6.0	55.0				
MON	29	30	0.03	15.3	1.15	407	3904	166	1784	9.0	7.1	6.9	6.4	61.4		14	
TUE	30	32	0.01	14.9	1.34	270	3024			9.0	7.4	6.9	5.8	65.0			
WED	31	33	0.03	14.7	1.11	304	2812					6.0	3.6	33.3			
THU	1	30	0.00	14.6	0.69	372	2764			6.1	7.2	7.5	4.6	34.2			
FRI	2	21	0.00	15.0	0.89					11.6	6.8	7.1					
SAT	3		0.00	15.3	0.87												
TOTAL			6.06		61.46												
MAXIMUM		45	0.85	20.20	3.97	700	5739	343	3178	11.6	7.7	8.0	19.6	648.6	6.1	67.3	50
MINIMUM		21	0.00	14.10	0.67	116	1924	61	1022	6.1	6.8	5.8	3.6	33.3	2.0	33.4	14
AVERAGE		34.66	0.18	16.46	1.76	282	3465	163	1910	9.1	7.3	7.0	6.3	136.0	4.1	50.4	25

**COMMENTS:**

% REMOVAL	
B.O.D.	97.5
S.S.	97.0

Copper	6.7	ug/L
NH3	6.8	mg/L
NH3	99.6	lbs

Tox TU <sub>5</sub>	N/A
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Weekly	TSS		BOD		Weekly Coliform
	mg/l	lbs	mg/l	lbs	
Aver	11.3	96.5	6.1	67.3	23.0
WEEK1	11.3	96.5	6.1	67.3	23.0
WEEK2	10.2	96.5	6.1	67.3	50.0
WEEK3	7.9	88.2	6.1	67.3	50.0
WEEK4	7.4	154.3	6.1	33.4	14.0
WEEK5	5.3	49.8	6.1	67.3	14.0
Max	11.3	154.3	6.1	67.3	50.0