MAJOR
(SUB 01)
F - FINAL
EFFLUENT
*** NO DISCHARGE
NOTE: Read Instructions be

Form Approved.
OMB No. 2040-0004

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 001 A DISCHARGE NUMB								
		M	ONITORING PERIO	OD				
YR	MO	DAY		YEAR	MO	DAY		
2004	04	01	то	2004	04	30		

PARAMETER		QI	QUANTITY OR LOADING			ITY OR CONCENT	RATION	NO. EX	OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
EMPERATURE, WATER EG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	14.3	(04)	0	5/7	
0010 1 0 0	PERMIT	*****	*****	*****	*****	*****	REPORT DAILY MAX	DEG. C		WEEK DAYS	GRAB
XYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*****	*****	*****	4.0	****	6.6	(19)	0	1/7	
0300 1 0 0	PERMIT REQUIREMENT	****		*****	2.0 DAILY MIN.	*****	17:0 DAILY MAX	MG/L		ONCE/ WEEK	GRAB
FFLUENT GROSS VALUE OD, 5-DAY	SAMPLE	****	*****	*****	*****	542.8	*****	(19)	0	1/7	
(20 DEG. C) 0310 G 0 0	MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MO AVG	*****	MG/L		ONCE/ MONTH	COMP 24
AW SEW/INFLUENT	SAMPLE	153.6	*****	(26)	*****	12	*****	(19)	0	1/30	
(20 DEG. C) 0310 W 0 0	MEASUREMENT PERMIT REQUIREMENT	1035 WKLY AVG	*****	LBS/DAY	*****	45 WKLY AVG	*****	MG/L		ONCE/ MONTH	COMP 24
EE COMMENTS BELOW BOD, 5-DAY	SAMPLE	153.6	153.6	(26)	*****	12.0	12.0	(19)	0	1/30	
(20 DEG. C) 00310 1 0 0	MEASUREMENT PERMIT	690	1380 DAILY MAX	LBS/DAY	*****	30 MO AVG	60 DAILY MAX	MG/L		ONCE/ MONTH	COMP 24
FFLUENT GROSS VALUE H	REQUIREMENT SAMPLE	MO AVG	DAILT WAX	LDS/DAT	6.5	*****	7.1	(12)	0	5/7	
0400 1 0 0	MEASUREMENT PERMIT	*****	*****	*****	6.0 MIN.	****	8.5 MAXIMUM	su		WEEK DAYS	GRAB
FFLUENT GROSS VALUE OLIDS, TOTAL	REQUIREMENT SAMPLE	*****	*****	*****	*****	397	*****	(19)	0	5/7	
USPENDED 0530 G 0 0	MEASUREMENT PERMIT	*****	*****		*****	REPORT MO AVG	*****	MG/L		ONCE/ MONTH	COMP 24
AW SEW/INFLUENT CERTIFY UNDER PENALTY OF LAW THAT I OR OBTAINING THE INFORMATION. I BE	REQUIREMENT HAVE PERSONALLY EXAMI LIEVE THE SUBMITTED II	NED AND AM FAMILIAR NFORMATION IS TRUE.	WITH THE INFORMATIC ACCURATE AND COM	N SUBMITTED HEREIN PLETE. I AM AWARE TI	AND BASED ON MY IN AT THERE ARE SIGNI	OURY OF THOSE INDIV	DUALS IMMEDIATELY I R SUBMITTING FALSE s up to \$10,000 and or n	RESPONSIBLE INFORMATION.	hetween 6 months an	d 5 years.	
INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 1		I.S.C. 1001 AND 33 U.S.	C. & 1319.	//	(renames dilder mese :	нациоз тау прице те	TELEPHONE	and the state of t	DATE		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Scott Jeffers		<u></u>	Zott O	18VP		(907)		0393	2004	05	10
Wastewater Utilities Superintendent				RINCIPAL EXECUTI AUTHORIZED AGENT		AREA CODE	PHONE NUM	IBER	YEAR	мо	DAY
TYPED OR PRINTE OMMENT AND EXPLANATION OF A		l		ATTACHMENTS							

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

PAGE 1 OF 3

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

MONITORING PERIOD

то

NOTE: Read instructions before co

YEAR 2004 Form Approved.

OMB No. 2040-0004

MO 04

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

 NAME:
 JUNEAU, CITY AND BOROUGH OF

 ADDRESS:
 155 SOUTH SEWARD,

 JUNEAU, ALASKA 99801
 100 STATE STREATMENT PLANT

 FACILITY:
 JUNEAU, ALASKA 99801

 LOCATION:
 JUNEAU, ALASKA 99801

 ATT.
 Soott Joffcor WW Utilities Superintendent

AK-002321-3 PERMIT NUMBER

> YR 2004

FROM

MO 04 001 A DISCHARGE NUMBER

QUALITY OR CONCENTRATION FREQUENCY SAMPLE QUANTITY OR LOADING PARAMETER EΧ OF ANALYSIS TYPE UNITO (19) MAXIMUM AVERAGE 105.6 MAXIMUM UNITS MINIMUM AVERAGE 0 (26) SOLIDS, TOTAL SUSPENDED SAMPLE ***** 5/7 ONCE/ MEASUREMENT COMP 24 45 1035 00530 W 0 0 SEE COMMENTS BELOW WKLY AVG 7.0 ***** ***** MONTH LBS/DAY MG/L WKLY AVG 78.1 REQUIREMENT 10.4 (19) n 237.0 (26) 5/7 ONCE/ SUSPENDED 00530 1 0 0 MEASUREMENT COMP 24 690 1380 DAILY MAX N/A MONTH DAILY MAX N/A LBS/DAY ***** MO AVG N/A MG/L MO AVG EFFLUENT GROSS VALUE NITROGEN, AMMONIA REQUIREMENT 0 N/A SAMPLE 1/180 SEMI-**** ***** TOTAL (AS N) 00610 1 0 0 EAGUREMENT COMP 24 REPORT REPORT REPORT REPORT PERMIT ANNUAL MG/L (13) ***** **** MO AVG DAILY MAX DAILY MAX EFFLUENT GROSS VALUE REQUIREMENT MO AVG 0 COLIFORM, FECAL MF, M-FC BROTH, 44.5C SAMPLE ***** MEASUREMENT ONE / GRAB 800 31616 W 0 0 PERMIT **** ***** **** #/100ML WEEK ***** WKLY GEO SEE COMMENTS BELOW REQUIREMENT 23 0 (13) COLIFORM, FECAL MF M-FC BROTH, 44.5C ***** MEASUREMENT ONE / GRAB 1200 400 31616 1 0 0 EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT PERMIT ***** #/100ML WEEK DAILY MAX MO GEO ***** REQUIREMENT 1.2533 2.7320 (3) SAMPLE ***** ***** ***** ***** MEASUREMENT CONTINUOS RECORDED 50050 1 0 0 EFFLUENT GROSS VALUE BOD, 5-DAY PERCENT 6.0 2.76 ***** ***** ***** ***** MO AVG DAILY MAX MGD REQUIREMENT (23) 0 98 MEASUREMENT CALCTD FREEDT

OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE

PENALTIES FOR SUBMITTING FALSE INFORMATION,
may include fines up to \$10,000 and or maximum imprisonment MONTH MIN % RMV

IND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN: AND BASED ON MY I ANTION IS TRUE, ACCURATE AND COMPLETE, I AM AWARE THAT THERE ARE SIGN CCURATE AND COMPL & 1319. n 6 months and 5 years TELEPHONE SIGNATURE OF P NAME/TITLE PRINCIPAL EXECUTIVE OFFICER 2004 10 PHICIPAL EXECUTIVE (907) AREA 586-0393 Wastewater Utilities Superintendent OFFICER OR AUTHORIZED AGENT (REFERENCE ALL ATTACHMENTS HERE) PHONE NUMBER YEAR DAY CODE TYPED OR PRINTED COMMENT AND EXPLANATION OF ANY VIOLATIONS

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

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

00434/981209 1904

PAGE 2 OF 3

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/I ocation if different)

NAME: ADDRESS:

JUNEAU, CITY AND BOROUGH OF

155 SOUTH SEWARD,

AK-002321-3 PERMIT NUMBER

001 A DISCHARGE NUMBER

193 SOUTH SEWARD, JUNEAU, ALASKA 99801 JUNEAU-DOUGLAS TREATMENT PLANT JUNEAU, ALASKA 99801 Scott Jeffers WW Utilities Superintendent MONITORING PERIOD FACILITY: LOCATION: ATT: FROM

PARAMETER		QU	ANTITY OR LOA	DING	QUAL	TY OR CONCEN	NO.	FREQUENCY OF ANALYSIS	SAMPLE TYPE		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, SUSPENDED	SAMPLE				98			(23)	0		
PERCENT REMOVAL	MEASUREMENT	*****	*****	*****	1	*****	*****			1/30	
31011 K 0 0	PERMIT			-	85		1			ONCE/	CALCTE
PERCENT REMOVAL	REQUIREMENT	- *****	*****	*****	MN % RMV	*****	*****	PERCENT		MONTH	
COPPER	SAMPLE			-	1	N/A	N/A	(28)	0		COMP 24
TOTAL RECOVERABLE	MEASUREMENT	*****	*****	*****	*****			ļ ļ		1/90	
1119 1 0 0	PERMIT		1		l	REPORT	REPORT	_		ONCE/	
EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	*****	*****	MO AVG	DAILY MAX	ug/L		QUARTER	
FOXICITY,	SAMPLE		ł	******	******	*****		(73)	0	4/00	
1.galloprovincialis	MEASUREMENT	*****	*****	*****	*****	*****				1/90	001100
KG3P 1 0 0	PERMIT]	ł	ļ	REPORT			ONCE/	COMP 24
EFFLUENT GROSS VALUE	REQUIREMENT	Start 1/02	2/2004 through 4/3	30/2005			MAXIMUM	TUc		QUARTER	
FOXICITY,	SAMPLE					*****	*	(73)	0	4/00	
D.excentricus	MEASUREMENT	*****	*****	*****	*****	*****		ļ ļ		1/90	001150
FKF3N 1 0 0	PERMIT				1		REPORT			ONCE/	COMP 2
FFFLUENT GROSS VALUE	REQUIREMENT	Start 1/02	2/2004 through 4/3	30/2005	l		MAXIMUM	TUc		QUARTER	
	SAMPLE		j					i			
	MEASUREMENT]							
	PERMIT		ĺ	Į	İ		Į.				
	REQUIREMENT			<u> </u>							
	SAMPLE				ŀ		1	1			
	MEASUREMENT			1				1			
	PERMIT							1			
	REQUIREMENT		<u> </u>				 	-			
	SAMPLE		i	ļ				1 1			
	MEASUREMENT			4				- I			
	PERMIT				Í						
	REQUIREMENT										
	SAMPLE					1					
	MEASUREMENT			1							
	PERMIT										
	REQUIREMENT		<u> </u>		L	l .		L L			
I CERTIFY UNDER PENALTY OF LAW THAT	I HAVE PERSONALLY EXAM	NED AND AM FAMILIAF	WITH THE INFORMATION	ON SUBMITTED HEREIN	: AND BASED ON MY IN	QUIRY OF THOSE INDIV	ADUALS IMMEDIATELY	RESPONSIBLE			
FOR OBTAINING THE INFORMATION. I B NCLUDING THE POSSIBILITY OF FINE AN	BELIEVE THE SUBMITTED IF DIMPRISONMENT SEE 18 U	US.C. 1001 AND-83 U.S.	.C. 8 1349.	PLEIE. IAWIAWARE II	(Penalties under these:	statutes may include fine	es up to \$10,000 and or r	maximum impirsonment of	petween o months an	a o years.	
NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER				(Penalties under these statutes may include fines up to \$10,000 and or maximum imprisor TELEPHONE				DATE		
cott Jeffers		-A	M > 1/1	11p		(907)	586	-0393	2004	05	10
Vastewater Utilities Superinte	ndent	- 	SIGNATURE OF	PRINCIPAL EXECU	TIVE	AREA					
TYPED OR PRINTED			OFFICER DR	AUTHORIZED	AGENT	CODE PHONE NUMBER			YEAR	MO	DAY
OMMENT AND EXPLANATION OF A	NY VIOLATIONS		(REFERENCE AL	L ATTACHMENTS H							
= Toxicity results pending	g - waiting for res	ults to come in	the mail.								
- TOXION TOOLING PORTION	g		/								
PA Form 3320-1 (03-99) Previous edition	e mr Denvious aditions may	he used	(REPLACES EPA FO	PM T-40 WHICH MAY	NOT BE LISED)		00434/981209 1904				PAGE 3 OF 3

MAJOR (SUB 01) F - FINAL

Form Approved.

OMB No. 2040-0004

UPSTREAM RECEIVING WATER
*** NO DISCHARGE
NOTE: Read instructions before completing

REC1
DISCHARGE NUMBER

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

NAME: ADDRESS:

FACILITY:

LOCATION:

JUNEAU, CITY AND BOROUGH OF

155 SOUTH SEWARD, JUNEAU, ALASKA 99801 JUNEAU-DOUGLAS TREATMENT PLANT

JUNEAU, ALASKA 99801

FROM

MONITORING PERIOD MO 04 МО DAY YEAR DAY то 2004 2004 30

LOCATION:	JUNEAU, ALASI	VA 99001		I LIKOW E	2004	<u> </u>	1 01	10	2004	U-7 1	
ATT:	Scott Jeffers WW	Utilities Superint	endent								
										T	
PARAMETER		ຸ ຊຸບ	ANTITY OR LOA	DING	QUAL	ITY OR CONCEN	TRATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	1		
OLIFORM, FECAL MF, I-FC BROTH, 44.5C	SAMPLE MEASUREMENT	*****	*****	*****	*****	2	*****	(13)	0	1/30	
1616 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	. *****	*****	*****	*****	REPORT MO AVG	REPORT DAILY MAX	#/100ML		ONCE/MONTH MAY-SEPT	GRAB
										1/180	
										2 TIMES OCT-APRIL	GRAB
				1							
				† F						 	
				<u> </u>						<u> </u>	
				†							
	_										
		<u></u>		†							
									-		
				 							
											· · · · · · · · · · · · · · · · · · ·
				-	×						
CERTIFY UNDER PENALTY OF LAW THAT I	ELIEVE THE SUBMITTED I	NFORMATION IS TRUE.	ACCURATE AND COM	IPLETE. I AM AWARE THAT	T THERE ARE SIGNII	FICANT PENALTIES FO	r submitting false i	INFORMATION,	L	1	
INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT, SEE 18 U.S.C. 1001 AND 33 U.S.C. & 1319.		C. 8 1319.	(F	enaities under these .	statutes may include fine	S Up to \$10,000 and or m TELEPHONE	eximum imprisonment o	f between 6 months and	between 6 months and 5 years. DATE		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Scott Jeffers		And	$h \rightarrow d / l$	010		(907)	586-0393		2004	05	10
Wastewater Utilities Superintendent		1	SIGNATUREOF	PRINCIPAL EXECUTIVE AUTHORIZED AC		AREA CODE	PHONE	NUMBER	YEAR	МО	DAY
TYPED OR PRINT OMMENT AND EXPLANATION OF A		L		LATTACHMENTS HER		, CODE	FHONE	HOMBER	i i Eryiy	1 100	D/ (1
	D	T-11-12-2	(DED) ACCC EDA EO	ON T 40 WUICE MAY NO	T DE HEED)		00434/081200 1004				AGE 1DE 1

(2-16) AK-002321-3

PERMIT NUMBER

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

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

PAGE 10F 1