

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

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

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, II INFALL, 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

FROM		MONITORING PERIOD			TO		
YR	MO	DAY	YEAR	MO	DAY		
2004	6	1	2004	6	30		

PARAMETER	SAMPLE MEASUREMENT	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	*****	*****	*****	*****	*****	*****	21.0	(04)	0	5/7	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	DEG. C		WEEK DAYS	
OXYGEN, DISSOLVED (DO) 00300 1 0 0	*****	*****	*****	*****	3.1	*****	5.5	(19)	0	1/7	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	2.0	*****	17.0	MG/L		ONCE/ WEEK	
BOD, 5-DAY (20 DEG. C) 00310 G 0 0	*****	*****	*****	*****	*****	468	*****	(19)	0	1/7	COMP 24
RAW SEW/INFLUENT	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MO AVG	*****	MG/L		ONCE/ MONTH	
BOD, 5-DAY (20 DEG. C) 00310 W 0 0	*****	46	*****	(26)	*****	4	*****	(19)	0	1/30	COMP 24
SEE COMMENTS BELOW	PERMIT REQUIREMENT	1035	*****	LBS/DAY	*****	45	*****	MG/L		ONCE/ MONTH	
BOD, 5-DAY (20 DEG. C) 00310 1 0 0	*****	46	46	(26)	*****	4	*****	(19)	0	1/30	COMP 24
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	690	1380	LBS/DAY	*****	30	60	MG/L		ONCE/ MONTH	
pH	*****	*****	*****	*****	6.2	*****	7.2	(12)	0	5/7	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	8.5	CU		WEEK DAYS	
SOLIDS, TOTAL SUSPENDED 00530 G 0 0	*****	*****	*****	*****	*****	373	*****	(19)	0	5/7	COMP 24
RAW SEW/INFLUENT	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MO AVG	*****	MG/L		ONCE/ MONTH	

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 33 U.S.C. & 1319. (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		TELEPHONE (907) 586-0393	DATE 2004 7 8
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE PHONE NUMBER	YEAR MO DAY

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

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LOCATION: JUNEAU, ALASKA 99801  
ATT: Scott Jeffers WW Utilities Superintendent

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PARAMETER	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	SAMPLE MEASUREMENT	110	*****	(26)	*****	13	*****	(19)	0	5/7	
	PERMIT REQUIREMENT	1035	*****	LBS/DAY	*****	45	*****	MG/L	0	ONCE/MONTH	COMP 24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0	SAMPLE MEASUREMENT	73	166	(26)	*****	9	19	(19)	0	5/7	
	PERMIT REQUIREMENT	690	1380	LBS/DAY	*****	30	60	MO AVG DAILY MAX	0	ONCE/MONTH	COMP 24
EFFLUENT GROSS VALUE NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0	SAMPLE MEASUREMENT	N/A	N/A	*****	*****	N/A	N/A	(19)	0	1/180	
	PERMIT REQUIREMENT	REPORT	REPORT	*****	*****	REPORT	REPORT	MO AVG DAILY MAX	0	SEMI-ANNUAL	COMP 24
EFFLUENT GROSS VALUE COLIFORM, FECAL MF, M-FC BROTH, 44.5C 31616 W 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****	130	*****	(13)	0	1/7	
	PERMIT REQUIREMENT	*****	*****	*****	*****	800	*****	WKLY GEO	0	ONE / WEEK	GRAB
COLIFORM, FECAL MF, M-FC BROTH, 44.5C 31616 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	30	1600	(13)	1	1/7	
	PERMIT REQUIREMENT	*****	*****	*****	*****	400	1200	MO GEO DAILY MAX	0	ONE / WEEK	GRAB
EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0	SAMPLE MEASUREMENT	0.9779	1.3530	(3)	*****	*****	*****	*****	0	7/7	
	PERMIT REQUIREMENT	2.76	6.0	MGD	*****	*****	*****	*****	0	CONTINUOUS	RECORDED
EFFLUENT GROSS VALUE BOD, 5-DAY PERCENT REMOVAL 81010 K 0 0	SAMPLE MEASUREMENT	*****	*****	*****	99	*****	*****	(23)	0	1/30	
	PERMIT REQUIREMENT	*****	*****	*****	85	*****	*****	PERCENT	0	ONCE/MONTH	CALCTD

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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Scott Jeffers, Wastewater Utilities Superintendent  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT: [Signature]  
TELEPHONE: (907) 586-0393  
DATE: 2004 7 8

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LOCATION: JUNEAU, ALASKA 99801  
ATT: Scott Jeffers WW Utilities Superintendent

(2-16)  
AK-002321-3  
PERMIT NUMBER

001 A  
DISCHARGE NUMBER

MONITORING PERIOD							
FROM	YR	MO	DAY	TO	YR	MO	DAY
	2004	6	1		2004	6	30

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			
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 K 0 0	SAMPLE MEASUREMENT	*****	*****	*****	98	*****	*****	(23)	0	1/30	CALCTD
PERCENT REMOVAL	PERMIT REQUIREMENT	*****	*****	*****	85 MN % RMV	*****	*****	PERCENT		ONCE/ MONTH	
COPPER TOTAL RECOVERABLE 01119 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	N/A	N/A	(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		TELEPHONE	DATE		
TYPED OR PRINTED		(907) AREA CODE	586-0393 PHONE NUMBER	2004 YEAR	7 MO

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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			
COLIFORM, FECAL MF, M-FC BROTH, 44.5C 31616 1 0 0 EFFLUENT GROSS VALUE				*****	*****	8	8	(13)	0	1/30	GRAB
				*****	*****	400 MO GEO	1200 DAILY MAX	#/100ML		ONCE/MONTH MAY-SEPT	GRAB
										1/180	GRAB
										2 TIMES OCT-APRIL	GRAB

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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: **Scott Jeffers** Wastewater Utilities Superintendent  
 SIGNATURE: *Scott Jeffers*  
 TELEPHONE: (907) 586-0393  
 DATE: 2004 7 8

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

**JUNEAU-DOUGLAS WASTEWATER TREATMENT FACILITY**

Juneau, Alaska

JUNE 2004

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		0.00	16.6	0.861	421	3023					6	43				
MON	31	55	0.00	17.8	1.178	308	3026			16.6	6.8	4.4	10	94			
TUE	1	54	0.09	15.2	1.062	270	2391			16.5	7.0	4.6	7	64			
WED	2	50	0.40	18.8	1.353	250	2821	296	3340	16.9	6.6	5.5	6	60	4	46	9
THU	3	56	0.00	19.4	1.137	206	1953			15.6	6.8	4.1	4	38			
FRI	4	58	0.00	19.5	1.175					16.2	6.4	4.5					
SAT	5		0.06	19.2	0.894												
SUN	6		0.00	18.3	0.934	300	2337					6	47				
MON	7	64	0.00	17.1	0.909	241	1827			16.1	6.2	4.5	3	21			
TUE	8	57	0.00	15.5	1.000	1060	9371			16.9	6.4	4.6	19	166			
WED	9	51	0.24	14.8	0.968	260	2099	730	5893	17.2	7.0	3.2	6	48		1600	
THU	10	51	0.11	14.9	1.008	274	2303			17.6	6.2	4.6	6	50			
FRI	11	55	0.00	15.2	0.846					17.0	7.0	3.7				8	
SAT	12		0.01	15.5	0.705												
SUN	13		0.11	15.8	1.044	293	2551					4	35				
MON	14	51	0.10	13.2	0.862	316	2324			17.0	6.8	5.0	5	34			
TUE	15	55	0.01	16.1	0.951	627	4973			17.2	6.5	5.1	12	92			
WED	16	57	0.00	16.3	0.953	350	2782	812	6454	17.4	7.0	4.4	7	57		130	
THU	17	66	0.00	16.4	1.080	297	2405			19.0	6.0	4.3	10	66			
FRI	18	68	0.00	16.4	0.912					18.0	6.7	3.6					
SAT	19		0.00	16.3	0.806												
SUN	20		0.00	16.0	0.791	542	3440					8	53				
MON	21	72	0.00	15.6	0.892	370	2753			17.4	7.1	3.8	8	62			
TUE	22	69	0.00	15.0	1.010	376	3167			18.8	6.5	4.2	8	71			
WED	23	71	0.00	14.3	0.926	307	2040	212	1641	21.0	6.8	3.7	9	68		23	
THU	24	70	0.00	14.0	0.936	214	1671			20.1	7.1	3.8	6	50			
FRI	25	69	0.00	14.4	0.845					20.5	6.6	3.1					
SAT	26		0.00	14.9	0.841												
SUN	27		0.01	15.7	0.845	660	4651					17	118				
MON	28	62	0.11	16.5	0.934	326	2539			18.6	6.8	3.1	11	87			
TUE	29	67	0.00	17.5	1.077	383	3530			19.7	7.0	3.1	17	154			
WED	30	63	0.00	14.3	1.105	178	1640	292	2891	18.8	7.2	3.4	9	85		2	
THU	1	59	0.00	18.4	1.065	444	3944			18.2	7.1	3.4	12	107			
FRI	2	59	0.01	19.0	1.155					18.9	6.6	3.7					
SAT	3		0.10	19.3	1.025												
TOTAL			1.36		34.227												
MAXIMUM		72	0.40	19.5	1.353	1060	9371	812	6464	21.0	7.2	5.5	19	166	4	46	1600
MINIMUM		50	0.00	13.2	0.705	178	1640	212	1641	15.6	6.2	3.1	3	21	4	46	2
AVERAGE		60	0.04	16.4	0.978	373	3055	468	4004	17.8	6.8	4.1	9	73	4	46	30

COMMENTS:

% REMOVAL	
B.O.D.	99
S.S.	98

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

Tox Tuc	N/A
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Weekly TSS, BOD	TSS		BOD		Weekly Coliform Geo. Mean
	mg/l	lbs	mg/l	lbs	
Aver					
WEEK1	7	65	4	46	9
WEEK2	8	67			113
WEEK3	7	61			130
WEEK4	8	61			23
WEEK5	13	110			2
Max	13	110	4	46	130