# (TIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) SCHARGE MONITORING REPORT (DMR)

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

DAY

Form Approved.

OMB No. 2040-0004

NOTE: Read instruct

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

JUNEAU, CITY AND BOROUGH OF AME: ODRESS: 155 SOUTH SEWARD, JUNEAU, ALASKA 99801
JUNEAU, ALASKA 99801
JUNEAU, ALASKA 99801 OCATION: Scott Jeffers WW Utilities Superintendent

AK-002321-3 PERMIT NUMBER

YR 2004

FROM

001 A DISCHARGE NUMBER MONITORING PERIOD

PARAMETER		QU	ANTITY OR LOADI	NG	QUAL	ITY OR CONCENT	RATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PAROMETER	$I \times I$			UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
		AVERAGE	MUMIXAM	UNIIS	MINIMOM	- AVEIVIOL	20.1	(04)	0	5/7	
MPF" "TURE, WATER	SAMPLE	****	*****	*****	*****	*****		}		WEEK	GRAB
G. ( ;IGRADE	MEASUREMENT						REPORT			DAYS	Q
010 0	PERMIT	*****	*****		*****	*****	DAILY MAX	DEG. C	0	DAIS	
FLUENT GROSS VALUE	REQUIREMENT				2.3		4.4	(19)	U	1/7	
YGEN, DISSOLVED	SAMPLE	*****	*****	*****		*****		ŀ		ONCE/	GRAB
(DO)	MEASUREMENT			i	2.0		17.0	MG/L		WEEK	
00 1 0 0	PERMIT	*****	*****	*****	DAILY MIN.	*****	DAILY MAX		0	VVIII	
LUENT GROSS VALUE	REQUIREMENT					412.3	*****	(19)	U	1/7	
D, 5-DAY	SAMPLE	****	*****	*****	*****		*****	ì		ONCE/	COMP 24
(20 DEG. C)	MEASUREMENT					REPORT	*****	MG/L		MONTH	
310 G 0 0	PERMIT	*****	*****	*****	*****	MO AVG		(19)	0		
W SEW/INFLUENT	REQUIREMENT	104.6		(26)		11.7	*****	(19)	ı	1/30	
D, 5-DAY	SAMPLE	104.0	*****	, ,	*****		*****			ONCE/	COMP 24
(20 DEG. C)	MEASUREMENT	1035				45	*****	MG/L		MONTH	
310 W 0 0	PERMIT	WKLY AVG	*****	LBS/DAY	****	WKLY AVG		(19)	0	11,512,11	
COMMENTS BELOW	REQUIREMENT	104.6	104.6	(26)		11.7	11.7	(19)		1/30	
D, 6-DAY	SAMPLE	104.0	10-110	` ′	*****					ONCE/	COMP 24
(20 DEG. C)	MEASUREMENT	690	1380			30	60	MG/L		MONTH	
310 1 0 0	PERMIT	MO AVG	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX		0		
FLUENT GROSS VALUE	REQUIREMENT	WOAVG	Druck No. o.		6.4		7.1	(12)	"	5/7	Į.
	SAMPLE	*****	*****	*****		*****				WEEK	GRAB
	MEASUREMENT			1	6.0		8.5	su	1	DAYS	1
400 1 0 0	PERMIT	*****	*****	****	MIN.	*****	MAXIMUM		0		
FLI T GROSS VALUE	REQUIREMENT					330	*****	(19)	"	5/7	
OTAL OTAL	SAMPLE	*****	*****	*****	*****			-		ONCE/	COMP 24
JSPENDED	MEASUREMENT	<del> </del>		1		REPORT	*****	MG/L	1	MONTH	
0530 G 0 0  AW SEW/INFLUENT  CERTIFY UNDER PENALTY OF LAW THAT  OR OBTAINING THE INFORMATION. I B  CLUDING THE POSSIBILITY OF FINE AN	PERMIT	*****	*****	*****	****	MO AVG	DADUALO MAREDIATELY	PERPONSIRI F			
AW SEW/INFLUENT	HAVE PERSONALLY EXAM	INED AND AM FAMILIAF	WITH THE INFORMATION	SUBMITTED HEREIN	: AND BASED ON MY II	IFICANT PENALTIES F	OR SUBMITTING FALSE	INFORMATION,	et auser e manthe a	and 5 years	
P ORTAINING THE INFORMATION. IB	ELIEVE THE SUBMITTED	INFORMATION IS TRUE	ACCURATE AND CON	LETE. TAM AVVARET	(Penalties under these	statutes may include fir	or submitting FALSE nes up to \$10,000 and or	maximum imprisonment o	or perween o monus a	DATE	
CLUDING THE POSSIBILITY OF FINE AN	D IMPRISONMENT, SEE 18	U.S.C. 1001 AND 33 0.3	10/10/1	610-			TELEPHONE	0000	2004	T 8	9
ME/TITLE PRINCIPAL EXECUTIVE OF	FICER	1 de		NO		(907)	588	3-0393	1 2001	-	
cott Jeffers	ndont	- AS	SIGNATUREDE	PRINCIPAL EXECUT	IVE	AREA		MDCD	YEAR	мо	DAY
astewater Utilities Superinte	nueni	4 ´		AUTHORIZED AGEN		CODE	PHONE NU	MBEK	16/45		
TYPED OR PRINT	ED			L ATTACHMENTS							
MMENT AND EXPLANATION OF A	ANY VIOLATIONS		, V								
							00424/091200 1904				PAGE 1 OF 3

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED). EPA Form 3320-1 (03-99) Previous editions ms Previous editions may be used.

00434/981209 1904

## (NPDES) ATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) SCHARGE MONITORING REPORT (DMR)

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

| OO1 A | DISCHARGE NUMBER

ERMITTEE 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

ATT:	GCOtt Jenera VVVV	Others Superinte	HICIGHIC .								
PARAMETER		G	UANTITY OR LOADIN	G	QUA	LITY OR CONCENTR	ATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLI" TOTAL	SAMPLE	373.3	*****	(26)	*****	18.2	*****	(19)	0	5/7	
SUS JED	MEASUREMENT		*****			45				ONCE/	COMP 24
00530 W 0 0	PERMIT	1035	*****	LBS/DAY	*****	WKLY AVG	*****	MG/L		MONTH	. 1
SEE COMMENTS BELOW	REQUIREMENT	WKLY AVG	1047.2	(26)		12.4	38.4	(19)	0		
SOLIDS, TOTAL	SAMPLE	150.3	1047.2	(20)	*****			, ,		5/7	
SUSPENDED	MEASUREMENT	690	1380			30	60	Γ		ONCE/	COMP 24
00530 1 0 0	PERMIT	MO AVG	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX	MG/L		MONTH	
EFFLUENT GROSS VALUE	REQUIREMENT	N/A	N/A	LDOIDIN		N/A	N/A	(19)	0		
NITROGEN, AMMONIA	SAMPLE MEASUREMENT	IN/A	1317	*****	*****					1/180	
TOTAL (AS N)	PERMIT	REPORT	REPORT			REPORT	REPORT			SEMI-	COMP 24
00610 1 0 0		MO AVG	DAILY MAX	*****	*****	MO AVG	DAILY MAX	MG/L		ANNUAL	
EFFLUENT GROSS VALUE	REQUIREMENT	INCAVG	DAILT WOO			92		(13)	0		
COLIFORM, FECAL MF,	SAMPLE MEASUREMENT	*****		*****	*****		*****	] [		1/7	ODAD
M-FC BROTH, 44.5C						800				ONE /	GRAB
31616 W 0 0	PERMIT REQUIREMENT	*****	*****	*****	****	WKLY GEO	*****	#/100ML		WEEK	
SEE COMMENTS BELOW	SAMPLE					19	92	(13)	0	1	
COLIFORM, FECAL MF,	MEASUREMENT	*****	*****	*****	*****			1		1/7	GRAB
M-FC BROTH, 44.5C						400	1200	1 1		ONE /	GRAD
31616 1 0 0	PERMIT	*****	****	*****	*****	MO GEO	DAILY MAX	#/100ML		WEEK	
EFFLUENT GROSS VALUE	REQUIREMENT	1.1420	3.2700	(3)					0		
FLOW, IN CONDUIT OR	MEASUREMENT	1.1720	•	, ,	*****	*****	*****	*****		7/7	RECORDED
THRU TREATMENT PLANT	PERMIT	2.76	6.0	1				*****		CONTINUOS	KECOKDED
50050 1 0 0 EFF: VT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MAX	MGD	*****	*****	*****	L			
	SAMPLE	W.C.A.G			97		T	(23)	0	1/30	
BOD, JAY PERCENT	MEASUREMENT	*****	*****	*****		*****	*****	4 }		ONCE/	CALCTD
REMOVAL	PERMIT			1	85		1			MONTH	CALCID
81010 K 0 0 PERCENT REMOVAL		*****	*****	*****	MN % RMV	*****	*****	PERCENT		MONTH	
PERCENT REMOVAL  I CERTIFY UNDER PENALTY OF LAW THAT I H	AVE PERSONALLY EXAM	NINED AND AM FAMILIAF	WITH THE INFORMATIO	ON SUBMITTED HEREIN	AND BASED ON MY IN	QUIRY OF THOSE INDIV	/IDUALSIMMEDIATELY OR SUBMITTING FALSE	INFORMATION,			
				PLATE. IAM AVVARE II	(Penalties under these	statutes may include fine	es up to \$10,000 and or	maximum imprisonment of	between 6 months and	5 years.	
INCLUDING THE POSSIBILITY OF FINE AND I	MPRISONWENT, SEE TO	0.5.C. 1001 AND 33 C.S	0. 4 1511	11-1-			TELEPHONE			DATE	1 9
NAME/TITLE PRINCIPAL EXECUTIVE OFFICE Scott Jeffers	ER		_711/5/12/			(907)	586	3-0393	2004	<del>                                     </del>	-
	lent		SIGNATURE OF	FRINCIPAL EXECU	ITIVE	AREA	i				DAY
Wastewater Utilities Superintend		-	OFFICER OF	AUTHORIZED AGE	NT	CODE	PHON	IE NUMBER	YEAR	MO	DAY
TYPED OR PRINTED COMMENT AND EXPLANATION OF ANY VI		1	(REFERENCE ALL	ATTACHMENTS HE	RE)						
											PAGE 2 OF 3
EPA Form 3320-1 (03-99) Previous editions	m Drovious aditions ma	ny he used	(REPLACES EPA FO	RM T-40 WHICH MAY	NOT BE USED).		00434/981209 1904				FAGE 2 OF 3
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FROM

## ATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) ISCHARGE MONITORING REPORT (DMR)

MAJOR Form Approved.

(SUB 01) OMB No. 2040-0004

F - FINAL

EFFLUENT

\*\*\* NO DISCHARGE

NOTE: Read instructions before completing this form.

| 001 A | DISCHARGE NUMBER

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

VAME:
ADDREGS:

155 SOUTH SEWARD,
JUNEAU, ALASKA 99801

FACILITY:
LOCATION:
Scott Jeffers WW Utilities Superintendent

NOTE: Read instructions before completing this form.

PERMIT NUMBER

AK-002321-3
PERMIT NUMBER

MONITORING PERIOD

YR MO DAY
YEAR MO DAY
TO 2004 7 31

FROM

FROM

FROM

FROM

FROM

TO 2004 7 SAMPLE

ATT:	Scott Jeners VVVV	Ountes Caponina					TO ATION	———Т	NO.	FREQUENCY	SAMPLE
PARAMETER		QU	ANTITY OR LOAD	DING	QUALI	TY OR CONCEN	TRATION		EX	OF ANALYSIS	TYPE
PARAMETER	$1 \times 1$			UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
		AVERAGE	MAXIMUM	UNITS	96	744210402		(23)	0	1/30	
USPENDED	SAMPLE	*****	*****	*****	1 "	*****	*****	]		ONCE/	CALCTD
RCENT REMOVAL	MEASUREMENT	*****		ł	85					MONTH	CALCID
011 K 0 0	PERMIT	*****	*****	*****	MN % RMV	*****	*****	PERCENT	0	NICITI	COMP 24
RCENT REMOVAL	REQUIREMENT					N/A	N/A	(28)	U	1/90	
PPER	SAMPLE	*****	*****	*****	*****		DEDODE	4 1		ONCE/	
OTAL RECOVERABLE	MEASUREMENT		<del> </del>	1		REPORT	REPORT			QUARTER	
119 1 0 0	PERMIT	*****	*****	*****	*****	MO AVG	DAILY MAX	ug/L	0		
FLUENT GROSS VALUE	REQUIREMENT		<del> </del>			NOEC	TU's	(73)	U	1/90	
OXICITY,	SAMPLE	****	*****	*****	*****	IC25	TU'S	1 1		ONCE/	COMP 24
galloprovincialis	MEASUREMENT			1			REPORT	711-		QUARTER	
G3P 1 0 0	PERMIT	Stort 1/0	2/2004 through 4/3	30/2005	1		DAILY MAX	TUc (73)	0	40/11/12/1	
TLUENT GROSS VALUE	REQUIREMENT	Start 1/0	2/2004 tillough 4/5	T		NOEC	TU's	(73)	U	1/90	
OXICITY,	SAMPLE	*****	****	*****	*****	IC25	TU's	4 1		ONCE/	COMP 24
excentricus	MEASUREMENT			1			REPORT			QUARTER	
(F3N 1 0 0	PERMIT	Stort 1/0	2/2004 through 4/	30/2005	i		DAILY MAX	TUc		QO/ II ( / mil (	
FFLUENT GROSS VALUE	REQUIREMENT	Otal C170	1								
	SAMPLE	1	1					-			
	MEASUREMENT			1			1				
	PERMIT			ļ				+			
	REQUIREMENT					}		, and the second		i	_
	SAMPLE							_			
	MEASUREMENT	ļ		1			1	<b> </b>	ŀ		
<u> </u>	PERMIT	1									
\	REQUIREMENT	· · · · · · · · · · · · · · · · · · ·				1				1	
	SAMPLE	1			l			-			
	MEASUREMENT			7			ł	1			
	PERMIT			1				+			
	REQUIREMENT	+				i					
	SAMPLE MEASUREMENT	1			L			-	<del></del>		
	memoral T				1	1					
	PECHIPEMENT					OF THE PARTY	DUADUM S IMMEDIATEL	Y RESPONSIBLE	L		
THE PARTY OF LAW THAT	RECOINEMENT	MINED AND AM FAMILIA	AR WITH THE INFORMA	19N SUBMITTED HERE	IN: AND BASED ON MY	INQUIRY OF IMOSE IN	FOR SUBMITTING FALS	E INFORMATION,			
CERTIFY UNDER PENALTY OF LAW ITHAT	BELIEVE THE SUBMITTED	INFORMATION IS TRU	E, ACCURATE AND 90	MALETE. I AM AWARE	(Penalties under thes	e statutes may include f	inos up to £10,000 and c	maximum imprisonment	of between 6 months a	DATE	
CERTIFY UNDER PENALTY OF LAW THAT OR OBTAINING THE INFORMATION. I VOLUDING THE POSSIBILITY OF FINE AV	ND IMPRISONMENT, SEE 1	8 U.S.C. 1001 AND	.s.u. a 1013	1010			TELEPHON	20.0000	2004	8	9
IAME/IIILE PRINCIPAL EXECUTIV	E OFFICER	\ \X	. XXXV//	WNO		(907)	51	36-0393	2007		
Scott Jeffers		L 65	SIGNATURE (	F PRINCIPAL EXE	CUTIVE	AREA			YEAR	МО	DAY
Vastewater Utilities Superinte	enaent		defider/di	R AUTHORIZE	D AGENT	CODE	PHC	NE NUMBER	1 12/15		
TYPED OR PRIN	TED		(PEEERENCE	ALL ATTACHMENT	S HERE)						
OMMENT AND EXPLANATION OF	ANY VIOLATIONS		(NEI ENEITOE)		•						
											PAGE 3 OF 3
							00434/981209 190	)4			PA

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

00434/981209 1904

PAGE 3 OF 3

# ATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) ISCHARGE MONITORING REPORT (DMR)

JUNEAU, CITY AND BOROUGH OF

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

NAME: ADDRESS: MAJOR Form Approved.

(SUB 01) OMB No. 2040-0004

F - FINAL

UPSTREAM RECEIVING WATER

\*\*\* NO DISCHARGE

NOTE: Read instructions before completing this form.

REC1

DISCHARGE NUMBER

ADDRESS:	155 SOUTH SEW	ARD,					MONITORING PERIOD				
	ILINEAU ALASKA	A 99801			VB	MO	DAY		YEAR	MO	DAY
ACILITY:	JUNEAU-DOUGL	AS TREATMEN	T PLANT	FROM	2004	7	1	TO	2004	7	31
LOCATION:	JUNEAU, ALASK	A 99801		FRUIVI	2004	<del></del>		'			
ATT:	Scott Jeffers WW	Utilities Superinte	endent	J						T EDECLIENCY T	SAMPLE
PARAMETER		QU	IANTITY OR LOA	DING	QUAL	ITY OR CONCEN			NO. EX	FREQUENCY OF ANALYSIS	TYPE
		AVEDAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		<del> </del>	
	SAMPLE	AVERAGE	MANIMOM	3		<2.0	*****	(13)	0	1/30	
OLIFORM, FECAL MF,	MEASUREMENT	****	*****	*****	*****					ONCE/MONTH	GRAB
LFC 1TH, 44.5C	PERMIT			]		REPORT	REPORT DAILY MAX	#/100ML	ļ	MAY-SEPT	
3161 0 0 EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	*****	*****	MO AVG	DAILT WAX	#/ TOOML		1/180	
			1							2 TIMES	GRAB
			<del> </del>	1						OCT-APRIL	
					-						
	1					-	<del> </del>		-	1	
			-	-	<b></b>	<del> </del>					
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		<b> </b>	1	7				1			
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		<del> </del>									
1				4		-	+				
1						LINE OF THE PARTY	DIADINA S IMMEDIATELY	RESPONSIBLE			L
I CERTIFY UNDER PENALTY OF LAW THE FOR OBTAINING THE INFORMATION. INCLUDING THE POSSIBILITY OF FIRE A	AT I HAVE PERSONALLY EXA	MINED AND AM FAMILL	AR WITH THE INFORMAT	TION SUBMITTED HERE	EIN: AND BASED ON MY E THAT THERE ARE SIG	INQUIRY OF THOSE INI INIFICANT PENALTIES I	FOR SUBMITTING FALS	E INFORMATION,	of hetween 6 months	and 5 years.	
FOR OBTAINING THE INFORMATION.	I BELIEVE THE SUBMITTED AND IMPRISONMENT, SEE 18	U.S.C. 1001 AND 33 U	S.C. & 1319	<b>/</b>	(Penalties under thes	se statutes may include f	TELEPHONE	meximum migricol filteri			
NAME/TITLE PRINCIPAL EXECUTIVE	VE OFFICER	1		levs-		(907)	58	6-0393	2004	8	9
Scott Jeffers				PRINCIPAL EXE	CUTIVE	AREA	1				DAY
Wastewater Utilities Superint	tendent	<b>↓</b> / ¯	SIGNATURE	R AUTHORIZE	D AGENT	CODE	PHO	NE NUMBER	YEAR	MO	DAY
TYPED OR PRI	NTED		OFFICER	ALL ATTACHMENT	S HERE)		-1		-		
COMMENT AND EXPLANATION OF	ANY VIOLATIONS		(REFERENCE	MARCH INCHWENT	·/						
											PAGE 10F 1
	inne my Province aditione m	av be used.	(REPLACES EPA	FORM T-40 WHICH M	AY NOT BE USED).		00434/981209 190	4			
EPA Form 3320-1 (03-99) Previous edit	ions in Previous editions in	a, so adda.									

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

### JUNEAU-DOUGLAS WASTEWATER TREATMENT FACILITY Juneau, Alaska

EPA REPORT

JULY 2004

EPAR	EPURI						Junea	au, Alas	Ka						JULY	2004	
0		W	EATHER	₹ .			NFLUEN	IT					EFI	FLUENT			
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	B.O.D. LBS	TEMP °C	Hq	D.O. mg/L	S.S. mg/L	S.S. LBS	B.O.D. mg/L	B.O.D. LBS	FECA Coliforn /100 m
SUN	4		0.00	19.1	1.088	186	1688						11.4	103			
MON	5	58	0.18	18.4	1.199	254	2540			18.9	6.4	3.6	9.2	92			
TUE	6	53	0.04	17.2	1.072	700	6258	695	6214	16.7	6.4	4.1	14.6	131	12	105	
WED	7	62	0.00	15.8	1.004	238	1993			16.9	6.7	3.1	15.2	127			9
THU	8	64	0.00	15.4	0.950	369	2924			17.2	6.8	2.7	10.4	82			
FRI	9	60	0.00	15.0	0.832					17.8	6.7	3.5					
SAT	10		0.00	14.6	0.732												
SUN	11		0.01	14.5	0.910	381	2892						12.6	96			
MON	12	62	0.00	14.7	0.960	344	2754			17.3	6.6	3.8	9.0	72			
TUE	13	67	0.00	15.0	1.072	484	4327	360	3219	17.9	6.7	3.5	12.6	113			
WED	14	65	0.00	12.8	1.076	330	2961			17.2	7.0	2.7	13.6	122			
IHU	15	66	0.00	15.4	0.766	381	2434			18.1	7.0	2.5	6.4	41			
FRI	16	69	0.00	15.9	0.755					18.0	7.0	2.6					
SAT	17		0.00	16.3	0.823												
SUN	18		0.07	16.5	0.861	410	2944						8.4	60			
MON	19	64	0.00	16.5	0.924	348	2682			17.8	7.1	2.3	10.4	80			
TUE	20	59	0.03	16.2	1.057	340	2997	283	2495	18.7	6.7	3.1	12.2	108			
WED	21	60	0.39	15.7	0.980	366	2991			19.8	6.9	3.1	7.2	59			1
THU	22	64	0.00	15.3	0.988	354	2917			19.8	7.0	2.7	9.4	77			
FRI	23	66	0.00	15.3	0.892					20.1	7.0	2.7					
SAT	24		0.95	15.3	2.247												
SUN	25		0.03	15.3	0.911	206	1565										
MON	26	60	0.00	15.5	0.9240	208	1603						7.2	55			
TUE	27	55	0.81	16.0	3.2700	350	9545	311	8482	18.4	6.7	3.4	38.4	1047			
WED	28	59	0.77	16.8	1.6750	148	2067			19.4	7.0	3,2	15.0	210			2
THU	29	58	0.11	16.8	1.8060	204	3073			17.6	6.8	4.4	12.0	181			
FRI	30	58	0.00	17.7	1.1960					18.0	7.0	3.5					
SAT	31		0.00	18.6	1.0050												
ТО	TAL		3.39		31.975												
MAX	IMUM	69	0.95	19.10	3,2700	700	9545	695	8482	20.1	7.1	4.4	38	1047	12	105	9:
MINI	MUM	53	0.00	12.80	0.7320	148	1565	283	2495	16.7	6.4	2.3	6	41	12	105	
AVE	RAGE	61	0.12	15.99	1.1420	330	3158	412	5102	18.2	6.8	3.2	12	150	12	105	19

COMMENTS:

% REM	IOVAL
B.O.D.	97
S.S.	96

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

Weekly					Weekly
TSS,BOD	TS	s	во	D	Coliform
Aver.	mg/l	lbs	mg/l	lbs	Geo. Mean
WEEK1	12	107	12	105	92
WEEK2	11	89			5
WEEK3	10	77			11
WEEK4	18	373			24
WEEK5					
Max	18	373	12	105	92

_	T