MAJOR (SUB 01) F - FINAL Form Approved.
OMB No. 2040-0004

(SUB 01)
F - FINAL
EFFLUENT
---- NO DISCHARGE
NOTE: Read instructions before comp

001 A DISCHARGE NUMBER

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

 NAME.
 JUNEAU, OITY AND BORDUCH OF

 ADDRESS:
 155 SOUTH SEWARD.

 JUNEAU, ALASKA 99801
 JUNEAU, ALASKA 99801

 LOCATION:
 JUNEAU, ALASKA 99801

 ATT:
 Scott Jeffers WW Utilities Superintendent

AK-002321-3 PERMIT NUMBER

> YR 2004

FROM

 MONITORING PERIOD

 MO
 DAY
 YEAR
 MO
 DAY

 9
 1
 TO
 2004
 9
 30

PARAMETER		Ql	JANTITY OR LOAD	ING	QUAL	ITY OR CONCENT	RATION	NO. FREQUENCY EX OF ANALYSIS		SAMPLE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER	SAMPLE	*****	*****	*****	*****	*****	18.3	(04)	0	5/7	
DEG, CENTIGRADE	MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	DEG. C		WEEK DAYS	GRAB
EFFLUENT GROSS VALUE EXYGEN, DISSOLVED	SAMPLE	*****	*****	****	3.3	*****	7.7	(19)	0	1/7	
(DO) 10300 1 0 0 EFFLUENT GROSS VALUE	MEASUREMENT PERMIT REQUIREMENT	****	*****	*****	2.0 DAILY MIN.	*****	17.0 DAILY MAX	MG/L		ONCE/ WEEK	GRAB
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	*****	****	*****	354.0	*****	(19)	0	1/7	
00310 G 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	*****	****	*****	*****	REPORT MO AVG	*****	MG/L		ONCE/ MONTH	COMP 24
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	40.6	****	(26)	*****	4.8	*****	(19)	0	1/30	
00310 W 0 0 SEE COMMENTS BELOW	PERMIT	1035 WKLY AVG	*****	LBS/DAY	*****	45 WKLY AVG	*****	MG/L		ONCE/ MONTH	COMP 24
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	40.6	40.6	(26)	*****	4.8	4.8	(19)	0	1/30	
00310 1 0 0 FFFLUENT GROSS VALUE	PERMIT REQUIREMENT	690 MO AVG	1380 DAILY MAX	LBS/DAY	****	30 MO AVG	60 DAILY MAX	MG/L		ONCE/ MONTH	COMP 24
pH	SAMPLE MEASUREMENT	****	*****	****	6.3	*****	7.3	(12)	0	5/7	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MIN.	*****	8.5 MAXIMUM	su		WEEK DAYS	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	****	*****	****	*****	279	*****	(19)	0	5/7	
00530 G 0 0	PERMIT	*****	*****	*****	****	REPORT MO AVG	*****	MG/L		ONCE/ MONTH	COMP 24
RAW SEW/INFLUEN I I CERTIFY UNDER PENALTY OF LAW THAT I HA FOR OBTAINING THE INFORMATION. I BELI INCLUDING THE POSSIBILITY OF FINE AND M	VE PERSONALLY EXAM			N SUBMITTED HEREIN: PLETE. I AM AWARE TI	AND BASED ON MY IN AT THERE ARE SIGNI (Penalties under these	RUIRY OF THOSE INDIVICANT PENALTIES FO tetutes may include fine	ADUALS IMMEDIATELY IN THE SUBMITTING FALSE TO SEE UP to \$10,000 and or n	RESPONSIBLE INFORMATION, <u>neximum imprisonment of</u>	between 6 months and	d 5 years.	
NAME/TITLE PRINCIPAL EXECUTIVE OFFIC		2	1	Mar		(907)	TELEPHONE	0393	2004	DATE 10	8
Scott Jeffers Wastewater Utilities Superintendent				PRINCIPAL EXECUTIVE AUTHORIZED AGENT		AREA CODE	PHONE NUM		YÉAR	МО	DAY
TYPED OR PRINTED COMMENT AND EXPLANATION OF ANY REPORTING PERIOD 08/29/2004 THRO				L ATTACHMENTS H			1				
	UGH (VIV2/2004										

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

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

00434/981209 1904

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Form Approved.
OMB No. 2040-0004

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

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

AK-002321-3 PERMIT NUMBER NAME: ADDRESS: JUNEAU, CITY AND BOROUGH OF 001 A DISCHARGE NUMBER 155 SOUTH SEWARD, JUNEAU, ALASKA 98801 JUNEAU-DOUGLAS TREATMENT PLANT JUNEAU, ALASKA 98801 Scott Jeffers WW Utilities Superintendent MONITORING PERIOD DAY FACILITY: LOCATION: ATT: YEAR 2004 то FROM

PARAMETER	QUANTITY OR LOADING			QUA	ALITY OR CONCENTR	ATION	NO. FREQUENCY EX OF ANALYSIS		SAMPLE TYPE		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	327.8	****	(26)	*****	13.7	*****	(19)	0	5/7	
00530 W 0 0	PERMIT	1035 WKLY AVG	*****	LDG/DAY	*****	45 WKLY AVG	*****	MG/L		ONCE/ MONTH	COMP 24
SEE COMMENTS BELOW SOLIDS, TOTAL	SAMPLE	188.4	739.6	(26)		11.2	33.2	(19)	0		
SUSPENDED	MEASUREMENT				*****			L		5/7	
00530 1 0 0	PERMIT	690	1380		****	30	60 DAILY MAX	MG/L		ONCE/ MONTH	COMP 24
EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MAX	LBS/DAY		MO AVG			0	INICIALIT	
NITROGEN, AMMONIA	SAMPLE	26.6	26.6	*****	*****	2.0	2.0	(19)	U	1/180	
TOTAL (AS N)	MEASUREMENT	REPORT	REPORT		ļ	REPORT	REPORT	-		SEMI-	COMP 24
00610 1 0 0 EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MAX	*****	*****	MO AVG	DAILY MAX	MG/L		ANNUAL	
COLIFORM, FECAL MF,	SAMPLE					8	*****	(13)	0	1/7	Į.
M-FC BROTH, 44.5C	MEASUREMENT	*****	*****	*****	*****					ONE /	GRAB
31616 W 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	800 WKLY GEO	*****	#/100ML		WEEK	GIVAD
COLIFORM, FECAL MF.	SAMPLE					3	8	(13)	0		
M-FC BROTH, 44.5C	MEASUREMENT	*****	*****	*****	*****					1/7	0010
31616 1 0 0	PERMIT			, i		400	1200			ONE /	GRAB
EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	*****	*****	MO GEO	DAILY MAX	#/100ML		WEEK	
FLOW, IN CONDUIT OR	SAMPLE	1.6190	4.7170	(3)	*****	*****	*****	****	0	7/7	
THRU TREATMENT PLANT	MEASUREMENT							l +		CONTINUOS	RECORDED
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT	2.76 MO AVG	6.0 DAILY MAX	MGD	*****	*****	*****	*****		CONTINUES	1
BOD, 5-DAY PERCENT	REQUIREMENT	WOAVG	DAIL! MAN	INIOD	99			(23)	0		
REMOVAL	MEASUREMENT	*****	*****	*****		*****	*****	į L		1/30	
81010 K 0 0	PERMIT			*****	85	*****	*****	PERCENT		ONCE/ MONTH	CALCTD
PERCENT REMOVAL	REQUIREMENT	*****	*****		MN % RMV					IVIONTA	
I CERTIFY UNDER PENALTY OF LAW THAT I H FOR OBTAINING THE INFORMATION. I BEL	I FVE THE SUBMITTED I	NFORMATION IS TRUE.	ACCURATE AND COM	PLETEL AM AWARE TI				INFORMATION, maximum imprisonment of I		d 6	
INCLUDING THE POSSIBILITY OF FINE AND	MPRISONMENT, SEE 18 (J.S.C. 1001 AND 33-U-S.	C. & 1319.		(Penaities under these .	statutes may include tine (O Up to o lotoge dita et i	naximum imprisorinierii or i	serween o montris an	DATE	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Scott Jeffers		X_{-}	Ate.	>1 fera-	-	TELEPHONE 596-0393		0393	2004	10	8
Wastewater Utilities Superintend	dent	1		PRINCIPAL EXECU	ITIVE	AREA					
TYPED OR PRINTED				AUTHORIZED AGE		CODE	PHON	E NUMBER	YEAR	MO	DAY
COMMENT AND EXPLANATION OF ANY VI	IOLATIONS		(REFERENCE ALL	ATTACHMENTS HER	RE)						
REPORTING PERIOD 08/29/2004 THROUGH	1 10/02/2004	,									

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

00434/981209 1904

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Form Approved.
OMB No. 2040-0004

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

NOTE: Read instructions before completing this form.

YEAR 2004

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

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

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

001 A DISCHARGE NUMBER

PARAMETER		QUANTITY OR LOADING			QUAL	TY OR CONCEN	TRATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, SUSPENDED	SAMPLE	7,42,0,42	17.1.0 3.1.7.2.1.1		96			(23)	0		
PERCENT REMOVAL	MEASUREMENT	*****	*****	*****	l	*****	*****	j i		1/30	
31011 K 0 0	PERMIT			1	85					ONCE/	CALCTD
PERCENT REMOVAL	REQUIREMENT	*****	*****	*****	MN % RMV	*****	*****	PERCENT		MONTH	
COPPER	SAMPLE					N/A	N/A	(28)	0		COMP 24
TOTAL RECOVERABLE	MEASUREMENT	*****	*****	*****	*****					1/90	
1119 1 0 0	PERMIT]		REPORT	REPORT			ONCE/	
EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	*****	*****	MO AVG	DAILY MAX	ug/L		QUARTER	. <u> </u>
FOXICITY,	SAMPLE		•				N/A	(73)	0		
1.galloprovincialis	MEASUREMENT	*****	*****	*****	*****	*****		1		1/90	
KG3P 1 0 0	PERMIT			1	İ		REPORT			ONCE/	COMP 24
EFFLUENT GROSS VALUE	REQUIREMENT	Start 1/02	/2004 through 4/3	30/2005			MAXIMUM	TUc		QUARTER	
TOXICITY,	SAMPLE				1		N/A	(73)	0		
).excentricus	MEASUREMENT	*****	*****	*****	*****	*****				1/90	
KF3N 1 0 0	PERMIT		İ		İ		REPORT			ONCE/	COMP 24
FFLUENT GROSS VALUE	REQUIREMENT	Start 1/02	/2004 through 4/3	30/2005			MAXIMUM	TUc		QUARTER	
	SAMPLE										
	MEASUREMENT]				į l			
	PERMIT					1				1 1	
	REQUIREMENT										
	SAMPLE							1		1	
	MEASUREMENT]							
	PERMIT			1	•			i i			
	REQUIREMENT										
	SAMPLE				1		ĺ	ļ i			
	MEASUREMENT	· · · · · · · · · · · · · · · · · · ·						l			
	PERMIT			ł				1			
	REQUIREMENT										
	SAMPLE							1			
	MEASUREMENT										
	PERMIT										
	REQUIREMENT		L		L THE BLOCK ON THE	NIEW OF THOSE INDIV	DUAL C MAJEDIATELY	DECDONICIDI E			
I CERTIFY UNDER PENALTY OF LAW THAT I	HAVE PERSONALLY EXAMI	NED AND AM FAMILIAR	WITH THE INFORMATION ACCURATE ATTEL COM	PLETE LAM AWARE T	HAT THERE ARE SIGNI	FICANT PENALTIES FOR	R SUBMITTING FALSE	INFORMATION,			
NCLUDING THE POSSIBILITY OF FINE AND	IMPRISONMENT, SEE 18 U	.S.C. 1001 AND 33 U.S	C)& 1319.	7/1	(Penalties under these :	tatutes may include fine	s up to \$10,000 and or i	maximum imprisonment of	between 6 months an	d 5 years.	
I GERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINEDRO STATEMENT THE INFORMATION. I BELIEVE THE SUBMITTED IN INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT, SEE 18 UNAMERITILE PRINCIPAL EXECUTIVE OFFICER SCO		CER	(JAK D)	Pro		(000	IELEPHONE	733082	2004	DATE	8
		(/ () () ()		-17 V		(907)		586-0393		10	
Vastewater Utilities Superinter				PRINCIPAL EXECU		AREA			YEAR	МО	DAY
TYPED OR PRINT				AUTHORIZED		CODE	I PHON	E NUMBER	ILAK	I IVIO	שתו
OMMENT AND EXPLANATION OF A			(REFERENCE AL	ATTACHMENTS	HERE)						
PORTING PERIOD 08/29/2004 THR											

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

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

PERMITTEE NAME/ADDRESS(I	nclude Facility name/Location if different)					NOTE: Read Instruc	tions before completi	ng this form.	=		
NAME: ADDRESS:	JUNEAU, CITY AND BOROUGH OF	1	AK-00	-16) 02321 -3 NUMBER]			DISCHARG	C 1 E NUMBER		
	155 SOUTH SEWARD, JUNEAU, ALASKA 99801		MONITORING PERIOD								
FACILITY:	JUNEAU-DOUGLAS TREATMENT PLANT		YR	MO	DAY		YEAR	MO	DAY		
LOCATION:	JUNEAU, ALASKA 99801	FROM	2004	9	1	то	2004	9	30		
ATT:	Scott Jeffers WW Utilities Superintendent					_					

PARAMETER		QU	ANTITY OR LOA	DING	QUAL	ITY OR CONCEN	TRATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
COLIFORM, FECAL MF, M-FC BROTH, 44.5C	SAMPLE MEASUREMENT			*****	*****	6 *	6*	(13)	1	1/30	
B1616 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			*****	*****	400 MO GEO	1200 DAILY MAX	#/100ML		ONCE/MONTH MAY-SEPT	GRAB
							:			1/180	
										2 TIMES OCT-APRIL	GRAB
]							
	 										
				<u> </u>							
		<u> </u>									
				-							
CERTIFY UNDER PENALTY OF LAW THAT I HOOR ORTAINING THE INFORMATION. I BEI	HAVE PERSONALLY EXAM LIEVE THE SUBMITTED I	IINED AND AM FAMILIAR	WITH THE INFORMATION ACCURATE AND COM	ON SUBMITTED HEREIN: PLETE. I AM AWARE TH	AND BASED ON MY IN IAT THERE ARE SIGNI	QUIRY OF THOSE INDIV	VIDUALS IMMEDIATELY OR SUBMITTING FALSE ORS UP to \$10,000 and or n	RESPONSIBLE INFORMATION, neximum imprisonment of	7 petween o months ar	nd 5 years.	
ICLUDING THE POSSIBILITY OF FINE AND AME/TITLE PRINCIPAL EXECUTIVE (U.S.C. 1001 AND 33 U.S.	J.S.C. 1001 AND 33 U.S.C. & 13(5) (Penalties			under these statutes may include fines up to \$10,000 and or maximum imprisonment of TELEPHONE				DATE	
cott Jeffers	JI I IOLIK	1	-XIX	1/2		(907)	586-	-0393	2004	10	8
	dent		- V 42 111	PRINCIPAL EXECUT	TIVE	AREA		., .,			
		1				CODE	PHON	E NUMBER	YEAR	MO	DAY
Wastewater Utilities Superintend TYPED OR PRINTE COMMENT AND EXPLANATION OF AN	D		OFFICER OR	AUTHORIZED A L ATTACHMENTS HI	AGENT	1	PHON	E NUMBER	YEAR	MO	

COMMENT AND EXPLANATION OF ANY VIOLATIONS REPORTING PERIOD 08/29/2004 THROUGH 10/02/2004

** Please note that the receiving water sample for September 2004 was tardily collected on October 6, 2004. See violation letter dated 08Oct04.

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(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED). 00434/981209 1904