

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: 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
	2004	9	1		2004	9	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			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	18.3	(04)	0	5/7	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	DEG. C	0	ONCE/ WEEK	GRAB
OXYGEN, DISSOLVED (DO) 00300 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	3.3	*****	7.7	(19)	0	1/7	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	2.0	*****	17.0	MG/L	0	ONCE/ WEEK	GRAB
BOD, 5-DAY (20 DEG. C) 00310 G 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	354.0	(19)	0	1/7	COMP 24
RAW SEW/INFLUENT	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT MO AVG	MG/L	0	ONCE/ MONTH	COMP 24
BOD, 5-DAY (20 DEG. C) 00310 W 0 0	PERMIT REQUIREMENT	40.6	*****	(26)	*****	4.8	*****	(19)	0	1/30	COMP 24
SEE COMMENTS BELOW	PERMIT REQUIREMENT	1035	*****	LBS/DAY	*****	45	*****	MG/L	0	ONCE/ MONTH	COMP 24
BOD, 5-DAY (20 DEG. C) 00310 1 0 0	PERMIT REQUIREMENT	40.6	40.6	(26)	*****	4.8	4.8	(19)	0	1/30	COMP 24
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	690	1380	LBS/DAY	*****	30	60	MG/L	0	ONCE/ MONTH	COMP 24
pH	PERMIT REQUIREMENT	*****	*****	*****	6.3	*****	7.3	(12)	0	5/7	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	8.5	SU	0	WEEK DAYS	GRAB
SOLIDS, TOTAL SUSPENDED 00530 G 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	279	*****	(19)	0	5/7	COMP 24
RAW SEW/INFLUENT	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MO AVG	*****	MG/L	0	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 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  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT: [Signature]  
TELEPHONE: (907) 586-0393  
DATE: 10/2/2004

COMMENT AND EXPLANATION OF ANY VIOLATIONS REPORTING PERIOD 08/29/2004 THROUGH 10/02/2004 (REFERENCE ALL ATTACHMENTS HERE)

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

MAJOR (SUB 01) Form Approved. OMB No. 2040-0004  
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NOTE: Read instructions before completing this form.

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

NAME: JUNEAU, CITY AND BOROUGH OF  
ADDRESS: JUNEAU, ALASKA 99801  
155 SOUTH SEWARD.  
JUNEAU-DOUGLAS TREATMENT PLANT  
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
	2004	9	1		2004	9	30

PARAMETER	X	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	327.8	*****	(26)	*****	13.7	*****	(19)	0	5/7	
	PERMIT REQUIREMENT	1035	*****	LBS/DAY	*****	45	*****	MG/L		ONCE/MONTH	COMP 24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0	SAMPLE MEASUREMENT	188.4	739.6	(26)	*****	11.2	33.2	(19)	0	5/7	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	690	1380	LBS/DAY	*****	30	60	MO AVG DAILY MAX	0	ONCE/MONTH	COMP 24
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0	SAMPLE MEASUREMENT	26.6	26.6	*****	*****	2.0	2.0	MG/L	0	1/180	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MAX	*****	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L		SEMI-ANNUAL	COMP 24
COLIFORM, FECAL MF, M-FC BROTH, 44.5C 31616 W 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****	8	*****	(13)	0	1/7	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	800	*****	#/100ML		ONE/WEEK	GRAB
COLIFORM, FECAL MF, M-FC BROTH, 44.5C 31616 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	3	8	(13)	0	1/7	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	400	1200	#/100ML		ONE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0	SAMPLE MEASUREMENT	1.6190	4.7170	(3)	*****	*****	*****	*****	0	7/7	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	2.76	6.0	MGD	*****	*****	*****	*****		CONTINUOUS	RECORDED
BOD, 5-DAY PERCENT REMOVAL 81010 K 0 0	SAMPLE MEASUREMENT	*****	*****	*****	90	*****	*****	(23)	0	1/30	
PERCENT REMOVAL	PERMIT REQUIREMENT	*****	*****	*****	85	*****	*****	PERCENT		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  
TELEPHONE (907) 586-0393  
AREA CODE  
PHONE NUMBER  
DATE 2004 10 8  
YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS REPORTING PERIOD 08/29/2004 THROUGH 10/02/2004 (REFERENCE ALL ATTACHMENTS HERE)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
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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

(2-18)  
AK 002321 3  
PERMIT NUMBER

001 A  
DISCHARGE NUMBER

FROM		MONITORING PERIOD						TO	
YR	MO	DAY	YR	MO	DAY	YR	MO	DAY	
2004	9	1	2004	9	30				

PARAMETER	MEASUREMENT	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 PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****	*****	96	*****	*****	(23)	0	1/30	
	PERMIT REQUIREMENT	*****	*****	*****	85 MN % RMV	*****	*****	PERCENT		ONCE/ MONTH	CALCTD
COPPER TOTAL RECOVERABLE 01119 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	N/A	N/A	(28)	0	1/90	COMP 24
	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MO AVG	REPORT DAILY MAX	ug/L		ONCE/ QUARTER	
TOXICITY, M.galloprouvialis TKG3P 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	N/A	(73)	0	1/90	
	PERMIT REQUIREMENT	Start 1/02/2004 through 4/30/2005					REPORT MAXIMUM	TUc		ONCF/ QUARTER	COMP 24
TOXICITY, D.excentricus TKF3N 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	N/A	(73)	0	1/90	
	PERMIT REQUIREMENT	Start 1/02/2004 through 4/30/2005					REPORT MAXIMUM	TUc		ONCF/ 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  
TYPED OR PRINTED

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: (907) 586-0393  
AREA CODE: 907  
PHONE NUMBER: 586-0393

DATE: 2004 10 8  
YEAR: 2004  
MO: 10  
DAY: 8

COMMENT AND EXPLANATION OF ANY VIOLATIONS:  
REPORTING PERIOD 08/29/2004 THROUGH 10/02/2004  
(REFERENCE ALL ATTACHMENTS HERE)

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

(2-18)  
AK-002821-3  
PERMIT NUMBER

REC 1  
DISCHARGE NUMBER

MONITORING PERIOD							
FROM	YR	MO	DAY	TO	YEAR	MO	DAY
	2004	9	1		2004	9	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			
COLIFORM, FECAL MF, M-FC BROTH, 44.5C 31616 1 0 0 EFFLUENT GROSS VALUE				*****	*****	6 *	6 *	(13)	1	1/30 ONCE/MONTH MAY-SEPT	GRAB
				*****	*****	400 MO GEO	1200 DAILY MAX	#/100ML		1/180 2 TIMES OCT-APRIL	GRAB

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. 8 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment or between 6 months and 5 years.)

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Scott Jeffers  
Wastewater Utilities Superintendent  
TYPED OR PRINTED: Scott Jeffers  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT: *Scott Jeffers*  
TELEPHONE: (907) 586-0393  
DATE: 2004 10 8  
AREA CODE: 907  
PHONE NUMBER: 586-0393  
YEAR: 2004  
MO: 10  
DAY: 8

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.