

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

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS/Location if different

JUNEAU, CITY AND BOROUGH OF
155 SOUTH SEWARD,
JUNEAU, ALASKA 99801

FACILITY:
LOCATION:
ATTN:

JUNEAU-DOUGLAS TREATMENT PLANT
JUNEAU, ALASKA 99801
Scott Jeffers WW Utilities Superintendent

AK-002321-3
PERMIT NUMBER


001 A
DISCHARGE NUMBER

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

MONITORING PERIOD			
YR	MO	DAY	TO
2005	11	1	2005
YEAR	MO	DAY	YEAR
2005	11	30	2005

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM		MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG, CENTIGRADE 00010 1 0 0	PERMIT MEASUREMENT	*****	*****	****	*****	*****	12.6	(04)	0	5/7	GRAB
EFFLUENT GROSS VALUE OXYGEN, DISSOLVED (DO) 00300 1 0 0	PERMIT MEASUREMENT	*****	*****	****	*****	*****	6.2	(19)	0	1/7	GRAB
EFFLUENT GROSS VALUE BOD, 5-DAY (20 DEG. C) 00310 G 0 0	PERMIT MEASUREMENT	*****	*****	****	*****	*****	116.0	(19)	0	1/30	COMP 24
RAW SEW/INFLUENT BOD, 5-DAY (20 DEG. C) 00310 W 0 0	SAMPLE MEASUREMENT	83.0	*****	(26)	*****	*****	6.9	(19)	0	1/30	COMP 24
SEE COMMENTS BELOW BOD, 5-DAY (20 DEG. C) 00310 1 0 0	PERMIT MEASUREMENT	1035 WKLY AVG	*****	LBS/DAY (26)	*****	*****	45 WKLY AVG	*****	0	1/30	COMP 24
EFFLUENT GROSS VALUE pH 00400 1 0 0	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	6.0	(12)	0	5/7	GRAB
EFFLUENT GROSS VALUE SUSPENDED 00530 G 0 0	PERMIT MEASUREMENT	*****	*****	****	*****	*****	159	(19)	0	1/30	GRAB
RAW SEW/INFLUENT NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	PERMIT REQUIREMENT	*****	*****	****	*****	*****	6.0 MIN.	*****	0	1/30	GRAB

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with the system designed to assure that the qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT


907 AREA CODE
586-0393 TELEPHONE
PHONE NUMBER
2005 YEAR
12 MO
9 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS
The reporting period was from 10/30/2005 through 12/03/2005.

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

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

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
ATTN: Scott Jeffers WW Utilities Superintendent

AK-002321-3
PERMIT NUMBER

MONITORING PERIOD
YR MO DAY TO YEAR MO DAY
2005 11 1 2005 11 1

DISCHARGE NUMBER 001 A

PARAMETER	X	QUANTITY OR LOADING			UNITS	QUALITY OR CONCENTRATION					NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	MINIMUM		AVERAGE	MAXIMUM	MINIMUM	UNITS					
SOLIDS, TOTAL	SAMPLE MEASUREMENT	536.9	*****		(26)	*****	16.3	*****		(19)	0	5/7	GRAB	
SUSPENDED	PERMIT	1035	*****			*****	45	*****						
00630 W 0 0	PERMIT	WPLY AVG	*****			*****	WPLY AVG	*****						
SEE COMMENTS BELOW	SAMPLE MEASUREMENT	184.4	780.8		(26)	*****	9.1	23.4		(19)	0	5/7	GRAB	
SOLIDS, TOTAL	PERMIT	690	1380			*****	30	60						
EFFLUENT GROSS VALUE	PERMIT	MO AVG	DAILY MAX			*****	MO AVG	DAILY MAX						
00630 1 0 0	SAMPLE	N/A	N/A		(26)	*****	N/A	N/A		(19)	0	1/180	GRAB	
NITROGEN, AMMONIA	PERMIT	REPORT MO AVG	REPORT DAILY MAX			*****	REPORT MO AVG	REPORT DAILY MAX						
TOTAL (AS N)	SAMPLE	*****	*****			*****	800	*****						
00610 1 0 0	PERMIT	*****	*****			*****	WPLY GEO	*****						
EFFLUENT GROSS VALUE	PERMIT	*****	*****			*****	47	1460		(13)	1	1/7	COMP 24	
COLIFORM, FECAL MF	SAMPLE	*****	*****			*****	400	1200		#/ML100				
MFC BROTH, 44.5 C	PERMIT	*****	*****			*****	MO GEO	DAILY MAX						
31616 1 0 0	PERMIT	*****	*****			*****	*****	*****						
EFFLUENT GROSS VALUE	SAMPLE	1.9068	5.0880		(03)	*****	*****	*****						
FLOW, IN CONDUIT, OR THRU TREATMENT PLANT	PERMIT	2.76	6.0			*****	*****	*****						
50060 1 0 0	PERMIT	MO AVG	DAILY MAX			*****	*****	*****						
EFFLUENT GROSS VALUE	SAMPLE	*****	*****			*****	*****	*****						
BOD, 5-DAY PERCENT	PERMIT	*****	*****			*****	*****	*****						
REMOVAL	PERMIT	*****	*****			*****	*****	*****						
81010 K 0 0	PERMIT	*****	*****			*****	*****	*****						
PERCENT REMOVAL	PERMIT	*****	*****			*****	*****	*****						
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with the information submitted to assure that the qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.													
Scott Jeffers Wastewater Utilities Superintendent	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT													
907	TELEPHONE	586-0393												
AREA CODE	PHONE NUMBER													
2005	DATE	12	9											
YEAR	MO	DAY	DAY											

COMMENT AND EXPLANATION OF ANY VIOLATIONS

The reporting period was from 10/30/2005 through 12/03/2005. (Reference all attachments here)

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

Form Approved
EPA Form 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
ATTY: Scott Jeffers WW Utilities Superintendent

FROM

MONITORING PERIOD			
YR	MO	DAY	TO
2005	11	1	2005

AK-002321-3
PERMIT NUMBER
001 A
DISCHARGE NUMBER

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

PARAMETER	SAMPLE MEASUREMENT PERMIT REQUIREMENT	QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM		AVERAGE	MAXIMUM	REPORT DAILY MAX				
SOLIDS, SUSPENDED PERCENT REMOVAL	*****	*****	*****	****	94.3	*****	*****	(23)	0	1/30	GRAB
81011 K 0 0 PERCENT REMOVAL	*****	*****	*****	****	85 MIN. % REMOVAL	*****	*****	PERCENT		ONCE/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	COMMENT AND EXPLANATION OF ANY VIOLATIONS	QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM		AVERAGE	MAXIMUM	REPORT DAILY MAX				
Scott Jeffers Utilities Superintendent	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with the system designed to assure that the qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.										

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Scott Jeffers
907 AREA CODE
586-0393 TELEPHONE
2005 YEAR
12 MO
9 DAY

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PERMITTEE NAME/ADDRESS/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
ATTN: Scott Jeffers WW Utilities Superintendent

AK-002321-3
PERMIT NUMBER

REC-1
DISCHARGE NUMBER

MONITORING PERIOD			
YR	MO	DAY	TO
2005	11	1	2005

PARAMETER	QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM		MINIMUM	AVERAGE	MAXIMUM	REPORT DAILY MAX			
COLIFORM, FECAL MF M-F-C BROTH, 44.5 C 31616 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	3.0	(13)	0	1/30	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****	ONCE/MO MAY-OCT AND 1/180	
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	2 TIMES NOV-APR	
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM		MINIMUM	AVERAGE	MAXIMUM	REPORT DAILY MAX			
Scott Jeffers Wastewater Utilities Superintendent	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	*****	
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****	*****	
TYPED OR PRINTED	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	*****	
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****	*****	

COMMENT AND EXPLANATION OF ANY VIOLATIONS

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with the system designed to assure that the qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

Scott Jeffers

907 AREA CODE
586-0393 TELEPHONE
2005 YEAR
12 MO
9 DAY

The reporting period was from 10/30/2005 through 12/03/2005.

EPA REPORT

JUNEAU-DOUGLAS WASTEWATER TREATMENT FACILITY

Juneau, Alaska

November 2005

DAY	DATE	WEATHER			INFLUENT				EFFLUENT				FECAL Coliform /100ml	Ammonia as N mg/l /1300 days	Ammonia as N lbs/day /1300 days	
		TEMP °F	RAIN INCHES	HIGH TIDE FEET	TD MLGD	SS MG/L	SS LBS	BOD MG/L	BOD LBS	TEMP °C	pH	DO MG/L				SS MG/L
SUN	30	40	0.26	16.6	1,2640	151	1392									
MON	31	38	0.00	17.5	1,0730	208	1861			12.6	6.4	5.6	6.0	53.7		
TUE	1	37	0.15	18.1	1,4980	198	2474			12.0	6.7	4.4	4.8	60.0		
WED	2	38	0.08	18.5	1,4500	214	2688	116	1403	11.2	6.6	4.8	10.2	123.3	6.9	83
THU	3	35	0.37	18.6	1,7080	183	2607			11.3	6.5	4.2	8.0	114.0		
FRI	4	35	0.14	18.4	1,3000					11.8	6.5	4.3				
SAT	5	30	0.09	17.9	1,1800											
SUN	6	26	0.00	16.9	1,0540	270	2373									
MON	7	31	0.20	15.8	1,4230	170	2018			11.3	6.8	4.6	4.0	47.5		
TUE	8	35	0.34	14.6	2,0610	136	2338			11.2	6.3	5.7	5.4	92.8		
WED	9	39	0.41	14.0	1,8420	115	1767			10.6	6.3	5.6	2.8	43.0		20
THU	10	41	0.20	14.7	1,2270	150	1535			11.4	6.4	4.1	4.4	45.0		
FRI	11	39	0.00	16.0	1,9600					11.4	6.6	5.0				
SAT	12	34	0.00	17.3	1,0490											
SUN	13	33	0.00	18.4	1,0540	176	1547									
MON	14	25	0.03	19.1	1,1520	296	2844			10.7	6.8	5.1	8.0	76.9		
TUE	15	36	0.15	19.4	1,9890	168	2759			10.8	7.1	4.7	4.4	72.3		
WED	16	43	0.57	19.2	3,2030	106	2832			11.2	6.5	4.5	13.4	388.0		66
THU	17	46	1.14	18.7	2,8490	90	2138			10.4	6.0	5.4	11.2	266.1		
FRI	18	45	2.19	17.9	4,7760					10.8	6.7	5.8				
SAT	19	44	0.65	16.9	2,4670											
SUN	20	40	0.50	15.7	3,8410	106	3396									
MON	21	46	3.57	14.5	5,0880	55	2334			10.2	6.8	6.2	18.4	780.8		480
TUE	22	49	1.50	13.4	4,7070	76	2983			9.7	6.5	5.2	17.0	667.4		1480
WED	23	49	0.70	12.8	2,5070	90	1882			10.6	6.9	5.5	13.2	276.0		70
THU	24	48	0.16	13.1	2,6350	80	1758			11.0	6.9	5.2	9.6	211.0		
FRI	25	40	0.48	13.7	1,7610					11.0	6.4	4.6				
SAT	26	31	0.00	14.6	1,2180											
SUN	27	30	0.00	15.5	1,1380	194	1841									
MON	28	24	0.00	16.5	1,0340	154	1328			10.8	6.9	5.0	6.0	51.7		
TUE	29	23	0.00	17.4	1,0920	177	1612			10.4	6.4	4.8	8.8	80.1		
WED	30	24	0.00	18.1	1,0640	210	1863			10.3	6.5	4.2	13.0	115.4		4
THU	1	16	0.00	18.7	1,0740	193	1729			9.9	6.5	4.2	12.8	114.7		
FRI	2	16	0.00	19.0	1,0500					9.7	6.4	3.3				
SAT	3	23	0.15	18.9	0,9690											
TOTAL			14.03		66,7370		53998		1403					4610		83
MAXIMUM			3.57		19.40		3396		1403	12.6	7.1	6.2	23.4	780.8		1480
MINIMUM			0.00		12.80		1328		1403	9.7	6.0	3.3	2.8	42.2		2
AVERAGE			0.40		16.75		1,9068		159	10.9	6.6	4.9	9.1	184.4		47

COMMENTS:

%REMOVAL	
B.O.D.	94.1
S.S.	94.3

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

Weekly	TSS	BOD	SS	BOD	SS	BOD	SS	Geo. Mean
Ave	mg/l	lbs	mg/l	lbs	mg/l	lbs		
WEEK1	6.6	78.6	6.9	83				2
WEEK2	4.6	56.6						20
WEEK3	8.4	163.8						66
WEEK4	16.3	536.9						366
WEEK5	9.6	86.0						4
MAX	16.3	536.9	6.9	83				366

Tox. Tlc	N/A
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