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

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

MAJOR (SUB 01) F - FINAL Form Approved.

OMB No. 2040-0004

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PERMIT NUMBER	AK-002321-3		
		*** NO DISCHARGE *** NOTE: Read instructions before completing this form.	F - FINAL EFFLUENT
 DISCHARGE NUMBER	001 A	ng this form.	

UAY	300	YEAR		KIZED AGENT	TICER OR AUTHO	or leave	ons.	Character of the	A of the and hibrisomic	Including the possibility of the and imprisonment for knowing violations	COMMENT AND EXPLANATION OF ANY
9	12	2005		PAL EXECUTIVE	SIGNATURE OF PRINCIPAL EXECUTIVE	SIGN	mation,	w submitting false infor	significant penalties fo	I am aware that there are significant penalties for submitting false information,	
	DATE			<u> </u>	1111	Je sur	information d complete.	ing the information, the elief true, accurate, and	y responsible for gathen of my knowledge and b	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.	reach to the
BER	PHONE NUMBER	AREA CODE		Ola -			information the system,	nather and evaluate the i	ied personnel properly a	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,	Scott Jeffers Wastewater Utilities Superintendent
	TELEPHONE	907		ر	)	}	rere tem designed	t and all attachments we accordance with the system	certify under penalty of law that this document and all attachments were brepared under my direction or supervision in accordance with the system	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	NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
	MONTH		MG/L	****	MOAVG	*** **	**	****	****	REQUIREMENT	RAW SEW/INFLUENT
COMP 24	ONCE/				REPORT					PERMIT	00530 G 0 0
	1/30			****		****	* * *	****	****	MEASUREMENT	SUSPENDED
		0	(19)		159					SAMPLE	SOLIDS, TOTAL
	DAYS		SU	MAXIMUM	*****	MIN.	***	*****	*****	REQUIREMENT	EFFLUENT GROSS VALUE
GRAB	WEEK			8.5		6.0				PERMIT	00400 1 0 0
	5/7				****		* * *	****	****	MEASUREMENT	
		0	(12)	7.1		6.0				SAMPLE	PH
	MONTH		MG/L	DAILY MAX	MO AVG	*****	LBS/DAY	DAILY MAX	MO AVG	REQUIREMENT	EFFLUENT GROSS VALUE
COMP 24	ONCE/			60	- 30			1380	690	PERMIT	00310 1 0 0
	1/30		,			*****			1	MEASUREMENT	(20 DEG. C)
		0	(19)	6.9	6,9		(26)	83.0	83.0	SAMPLE	BOD, 5-DAY
	HTNOM		MG/L	*****	WKLY AVG	****	LBS/DAY	*****	WKLY AVG	REQUIREMENT	SEE COMMENTS BELOW
COMP 24	ONCE/				45				1035	PERMIT	00310 W 0 0
	1/30			****		****	,	****		MEASUREMENT	(20 DEG. C)
		0	(19)		6.9		(26)		83.0	SAMPLE	BOD, 5-DAY
	MONTH		MG/L	*****	MO AVG	*****	***	*****	*****	REQUIREMENT	RAW SEW/INFLUENT
COMP 24	ONCE/				REPORT					PERMIT	00310 G 0 0
	1/30			****		****	**	****	****	MEASUREMENT	(20 DEG. C)
		0	(19)		116.0					SAMPLE	BOD, 5-DAY
	WEEK		MG/L	DAILY MAX	****	DAILY MIN.	**	*****	*****	REQUIREMENT	EFFLUENT GROSS VALUE
GRAB	ONCE/			17.0		2.0				PERMIT	00300 1 0 0
	1/7		o'an		****	,	* * *	****	****	MEASUREMENT	(DO)
		0	(19)	6.2		ည်း			â	SAMPLE	OXYGEN, DISSOLVED
	DAYS		DEG. C	×	*****	*****	***	*****	*****	REQUIREMENT	ENT GF
GRAB	WEEK		44-	REPORT						PERMIT	00010 1 0 0
	5/7				****	****	* * *	****	****	MEASUREMENT	DEG, CENTIGRADE
_		0	(04)	12.6						SAMPLE	TEMPERATURE, WATER
i	0.00	ļ	STINU	MAXIMUM	AVERAGE	MINIMUM	STING	MAXIMUM	AVERAGE		
SAMPLE	FREQUENCY	NO.		RATION	QUALITY OR CONCENTRATION	QUAL		LOADING	QUANTITY OR LOADING		PARAMETER
30	11	2005	TO	1	11	2005	FROM	nt	tilities Superintende	Scott Jeffers WW Utilities Superintendent	ATT:
DAY	МО	YEAR	.,	DAY	MO	ΥR			99801	JUNEAU, ALASKA 99801	LOCATION:
		ERIOD	RING P	MONITORING PERIOD				ANT	S TREATMENT PL	JUNEAU-DOUGLAS TREATMENT PLANT	FACILITY:
- 1	o Exercise Control			_	TO TOPIC			-	9801	TUNEAU ALASKA 99801	ADDITION.
NIMBER	DISCHARGE NI IMRER			1	K-UU2321-3	AK-UU2321-3			BURUUGH OF	JUNEAU, CLIY AND BURUUGH OF	NAME:
	2				3	** OO			7070101101	**************************************	

COMMENT AND EXPLANATION OF ANY VIOLATIONS

EPA Form 3320-1 (03-99) Previous editions may be used. The reporting period was from 10/30/2005 through 12/03/2005.

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

(Reference all attachments here)

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

ADDRESS:

155 SOUTH SEWARD,

PERMIT NUMBER

PERMITTEE NAME/ADDRESS(Include Facility name/Location if different) JUNEAU, CITY AND BOROUGH OF AK-002321-3

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MAJOR
(SUB 01)
F - FINAL
EFFLUENT
\*\*\*\* NO DISCHARGE
NOTE: Read instructions before completing this form. 001 A

DISCHARGE NUMBER

ADDRESS:	TOU DOG IT OF WAY	,			T CIVITAL	אסויזטבוג				מנטינו ואונטר	COL MONDEN
	JUNEAU, ALASKA 99801	9801					No.				
LOCATION:	JUNEAU, ALASKA 99801	99801			ΥR	MO	DAY	DAY YE	YEAR	MO	DAY
АПТ:	Scott Jeffers WW Utilities Superintendent	lities Superintende	nt .	FROM	2005	11	,	To	2005	11	30
PARAMETER		QUANTITY OR LOADING	LOADING		QUAL	QUALITY OR CONCENTRATION	RATION		NO.	FREQUENCY OF ANALYSIS	SAMPLE
		AVERAGE	MAXIMUM	STINU	MINIMUM	AVERAGE	MAXIMUM	STINU			
SOLIDS, TOTAL	SAMPLE	536.9		(26)		16.3		(19)	0		
SUSPENDED	MEASUREMENT		****		****		****		-	5/7	
00530 W 0 0	PERMIT	1035				45		5055551		ONCE/	GRAB
SEE COMMENTS BELOW	REQUIREMENT	WKLY AVG	*****	LBS/DAY	*****	WKLY AVG	*****	MG/L		MONTH	
SOLIDS, TOTAL	SAMPLE	184.4	780.8	(26)		9.1	23.4	(19)	0		
SUSPENDED	MEASUREMENT				****			1		5/7	
00530 1 0 0	PERMIT	690	1380			30	60	******		ONCE/	GRAB
EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX	MG/L		MONTH	
NITROGEN, AMMONIA	SAMPLE	N/N	N/A	(26)		N/A	N/A	(19)	0		
TOTAL (AS N)	MEASUREMENT				****					1/180	
00610 1 0 0	PERMIT	REPORT	REPORT	j		REPORT	REPORT			SEMI-	COMP 24
COLIEORM FECAL ME	SAMPLE			רמט/טאו		368	DATE HAY	(13)	O	AMONINA	
M-FC BROTH, 44.5 C	MEASUREMENT	****	****	* * *	*** ***	,	****	,		1/7	
31616 W 0 0	PERMIT					800		#/		ONCE/	COMP 24
SEE COMMENTS BELOW	REQUIREMENT	*****	*****	* * *	****	WKLY GEO	*****	ML100		WEEK	
COLIFORM, FECAL MF	SAMPLE					47	1460	(13)	<b>1</b>		
M-FC BROTH, 44.5 C	MEASUREMENT	****	****	* * *	****					1/7	
31616 1 0 0	PERMIT					400	1200	#/		ONCE/	COMP 24
EFFLUENT GROSS VALUE	REQUIREMENT	*****	**** *	**	****	MO GEO	DATLY MAX	ML100		WEEK	
FLOW, IN CONDUIT, OR	SAMPLE	1,9068	5,0880	(63)					0		
THRU TREATMENT PLANT	MEASUREMENT				****	****	****	* * *		7/7	
50050 1 0 0	PERMIT	2.76	6.0					******		CONTINUOS	GRAB
EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MAX	MGD	****	*****	*****	* * *			
BOD, 5-DAY PERCENT	SAMPLE				94.1			(23)	0		
REMOVAL	MEASUREMENT	** ** *	****	* * *		****	****			1/30	
81010 K 0 0	PERMIT				85 MIN, %			%		ONCE/	COMP 24
PERCENT REMOVAL	REQUIREMENT	*****	*****	***	REMOVAL	****	*****	PERCENT		HINOM	
NAME/ITILE 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 system	law that this document tion or supervision in a	ccordance with the syst	ere tem designed	9	ク =			907	586-0393	
Scott Jeffers Wastewater Utilities Superintendent	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,	d personnel properly a inquiry of the person or	ather and evaluate the i	nformation he system,		1 V 10	P		AREA CODE	PHONE NUMBER	BER .
	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.	responsible for gathering from knowledge and b	ng the information, the elief, true, accurate, and	information d complete.	(		N Committee		7000	DATE	o
TYPED OR PRINTED	including the possibility of fine and imprisonment for knowing violations.	of fine and imprisonme	nt for knowing violatic	ms.	OFFICER		OR AUTHORIZED AGENT		YEAR	MO	DAY
COMMENT AND EXPLANATION OF ANY VIOLATIONS	VIOLATIONS		(Reference all attachments here)	chments her	٣						

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

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

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

TYPED OR PRINTED Including the poss COMMENT AND EXPLANATION OF ANY VIOLATIONS	) at	NAME TITLE DEBINATION DESCRIPTION OF CHESTER			20000004	81011 K 0 0 PERCENT REMOVAL	PERCENT REMOVAL		PARAMETER		LOCATION:		ADDRESS:	
including the possibility of fine and imprisonment for knowing violations VIOLATIONS (Reference all	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 pathering 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,	Toestift under senaltruct law that this document and all attachments were				PERMII REQUIREMENT	SAMPLE MEASUREMENT			Scott Jeffers WW Utilities Superintendent	JUNEAU, ALASKA 99801	JUNEAU, ALASKA 99801	155 SOUTH SEWARD,	
fine and imprisonment for	prepared under my direction or supervision in accordance with the systo assure that the qualified personnel properly gather and evaluate the isotimited. Based on my inquiry of the person or persons who manage or those persons directly responsible for pathering the information, the submitted is, to the best of my knowledge and belief, true, accurate, and comp I am aware that there are significant penalties for submitting false information,	Tay that this document				*****	** ** **	AVERAGE	QUANTITY OR LOADING	ilities Superintender	99801	9801	D,	3) 3) 1) 1 ) 1 ) 1 ) 1 ) 1 ) 1 ) 1 ) 1 )
Reference all attachments here)	occordance with the system after and evaluate the in the regions who manage the resons who manage the information, the integrace accurate, and complemiting false information,	and all affachments we				*****	**** ****	MAXIMUM	OADING	11	7			
chments here	em designed iformation he system, information ste.	775				* * *	* * *	STINU		FROM				
	SIGNATURE					85 MIN. % REMOVAL	94.3	MINIMUM	QUAL	2005	ΥR	-	PERMIT NUMBER	
OFFICER OR AUTHOR	ATURE OF PRINCIP			·		*****	* * * * *	AVERAGE	QUALITY OR CONCENTRATION	11	MO		PERMIT NUMBER	נונו
AZZED AGENT	OF PRINCIPAL EXECUTIVE					REPORT DAILY MAX	* * * * *	MAXIMUM	RATION	1	DAY	MONITODING DEDION		
						% PERCENT	(23)	STINU		0		DING DE		
YEAR	907 AREA CODE 2005						0	, ,	NO.	2005	YEAR	COTO		
MO	586-0393 PHONE NUMBER DATE 12	TEI EPHONE				MONTH	1/30	i	FREQUENCY OF ANALYSIS	11	MO		DISCHARGE NUMBER	2
DAY	!					GRAB			SAMPLE	30	DAY		NUMBER	>

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

NAME: ADDRESS:

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

JUNEAU, CITY AND BOROUGH OF 155 SOUTH SEWARD,

AK-002321-3 PERMIT NUMBER MAJOR Form Approved.
(SUB 01) OMB No. 2040-0004
F - FINAL EFFLUENT
\*\*\* NO DISCHARGE \*\*\*
NOTE: Read instructions before completing this form. REC-1
DISCHARGE NUMBER

UAY	MO	YEAR	-	RIZED AGENT	FICER OR AUTHO	Q.	ns.	ent for knowing violatio	of fine and imprisonn	including the possibility of fine and imprisonment for knowing violations.	TYPED OR PRINTED
9	12	2005		PAL EXECUTIVE	SIGNATURE OF PRINCIPAL EXECUTIVE	SIGN	mation,	or submitting false infon	significant penalties f	I am aware that there are significant penalties for submitting false information,	
	DAIL		,	g	1	800	information i complete.	ing the information, the belief true, accurate, and	responsible for pather	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.	
IBER	PHONE NUMBER	CODE		\		†  0	nformation he system,	gather and evaluate the ii or persons who manage t	inquiry of the person of	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,	Scott Jeffers Wastewater Utilities Superintendent
	586-0393	907	<u>.</u>		) こ	<b></b>	ere em designed	at and all attachments we accordance with the syst	f law that this documer ction or supervision in	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with the system	NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
	THE PROPERTY.		* * *	*****	*****	*****	***	*****	*****	REQUIREMENT	
					-					PERMIT	
			* * *	* * * * *	* * * *	* * * * *	* * *	**** ****	****	SAMPLE MEASUREMENT	
			* * *	*****	*****	*****	***	*****	*****	REQUIREMENT	
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										SAMPLE	
			* * *	*****	*****	****	***	*****	*****	REQUIREMENT	
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			* * *	*****	*****	*****	* * *	*****	*****	PERMIT REQUIREMENT	
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										SAMPLE	
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			* * *	****	**** ***	** ** **	* * *	****	****	MEASUREMENT	
			:							SAMPLE	
	NOV- APR		* * *	****	*****	*****	* * *	*****	*****	PERMIT REQUIREMENT	
	1/180		* * *	****	**** **	****	* * *	* * * *	** ** *	MEASUREMENT	
	AND									SAMPLE	
	MAY-OCT			×	*****	*****	* * *	****	****	REQUIREMENT	FFFI UENT GROSS VALUE
GRAB	ONCE/MO		#	TGCGGG	) ) )	****	***	* * * *	** ** **	MEASUREMENT	
		0	(13)	3.0	++++	*				SAMPLE	COLIFORM, FECAL MF
			SLIND	MAXIMUM	AVERAGE	MINIMUM	STINU	MAXIMUM	AVERAGE		
SAMPLE TYPE	FREQUENCY OF ANALYSIS	EX.		RATION	QUALITY OR CONCENTRATION	QUAL		LOADING	QUANTITY OR LOADING		PARAMETER
30	11	2005		1	11	2005	FROM	P#	lities Superintende	Scott Jeffers WW Utilities Superintendent	ATT:
DAY	MO	YEAR		DAY	МО	ΥR			99801	JUNEAU, ALASKA 99801	LOCATION:
		ERIOD	MONITORING PERIOD	MONITO				T	S TREATMENT PI	JUNEAU, ALASKA 99801 TIINEAU-DOUGLAS TREATMENT PLANT	EACTI TTV:
									7	100 000 011 0111	ADDRESS.

(Reference all attachments here)

# JUNEAU-DOUGLAS WASTEWATER TREATMENT FACILITY Juneau, Alaska

November 2005

COMMENTS	λ	SAT	핑	WED	TUE:	MON ON	SAT	꿆	콛	WED	핕	MON	SUN	SAT	<u> </u>			MON	SUN	SAT	汨	뒫		MON	SUN	SAT	FRI	Ξ	WED	JUE	MON	NUS	DAY		TT A T
NTS:	MINIMUM: AVERAGE	OTAL:	2	30	29	28	26	25	24	23	22	21	20	10 10	120	17	15	14	13	12	=	10 0	0 0	7	6	5	4	3	2	_	31	30	DATE		TTA KITTOK
	16						3 2						40 :				36									30			38		38		TEMP	V	W.Zelistendorum
		0.15	0.00	0.00	0.00	0.00	0.00	0.48	0.16	0.70	1.50	3.57	0.50	0.65	2 19	1 14	0.15	0.03	0.00	0.00	0.00	0.20	0.34	0.20	0.00	0.09	0.14	0.37	0.08	0.15	0.00	. 0.26	FALL	WEATHER	
	12.80		19.0		17.4	16.5			13.1	12.8			15.7			18.7	19.4				16.0	14.7	14.0	15.8	16.9	17.9	18.4	18.6	18.5	18.1	17.5			- A	The second secon
B.O.D. S.S. Tox. Tue	1—1	0.9690	1.0500			1.0340		$\vdash$		一	_			_	寸	2 8490	$\top$	$\dagger$	$\vdash$	Н		1,2270	+		+	Т			1.4500			1.2640	TTL EFFL	57	Manager State Committee
S.S. 94.1 S.S. 94.3	55 159				177				80			55				90	1	296				150	+	T										0	Security of the second
	1328	53998	8771			1328	10/1		1758	1882	2983	2334	3396		1	2138	2759	2844	1547			1535	4727	2018	2373			2607	2588	2474	1861	1592	LBS	NECEN	Juneau,
Copper NH3	116																												116				mg/L		au, Alaska
N/A N/A		1403							,																				1403				LBS	BOD.	SKa
ug/L mg/L lbs	9.7		9.7	10.3	10.4	10.8		11.0	11.0	10.6	9.7	10.2			10 8	10.4	10.8	10.7			11.4	11.4	100	11.3			11.8			12.0	12.6		TEMP °C		The control of the co
	6.0	7.4	6.4	6.51 11.51	6.4	6.9		6.4	6.9	6.9	6.5	6.8			6.7	6.0	2.1	6.8			6.6	6.4	n 0.0	6.8			6.5	6.5	6.6	6.7	6.4		рH		A CONTRACTOR
Weeky Aver WEEK1 WEEK2 WEEK3 WEEK4 WEEK5	3.3	5	3.3	4 2	4.8	5.0		4.6	5.2	5.5	5.2	6.2	-		יונ	5. 4. 0	4.7	5.1			5.0	4.1	л U./	4.6			4.3	4.2	4.8	4.4	5.6			D	ONE STONE ST
mg/l 6.6 4.6 4.6 8.4 16.3 9.6 16.3	2.8 9.1	3	0.21	13.0	8.8	6.0	7 3		9.6	13.2	17.0	18.4	23.4		i	11.2	4.4	8.0	5.2			4.4	υ 4 α	4.0	6.2			8.0	10.2	4.8	6.0	4.0	mg/L	а 0	SPESSON
T8.6 56.6 163.8 536.9 86.0	42.2 184.4	4610	114./	115.4	80.1	51.7	ಗ್ಗ ಬ		211.0	276.0	667.4	780.8	749.6		1.001	266.1	72.3	76.9	45.7			45.0	0.76 0.76	47.5	54.5			114.0	123.3	60.0	53.7	42.2	IBS	oo H	4
(B)	6.9	6																											6.9				mg/L	EFFEUENT	November Zuus
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Weekly Coliform Geo. Mean 2 20 86 366 366	47			4		;				70	1460	480				00	ß					1	3						2				Collform /100 ml	EECA	
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																																	as N lbs/day 1/180 days	Ammonia	Control of the Contro