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OXYGEN, DISSOLVED 00010 1 0 0 DEG, CENTIGRADE À LOCATION FACILITY: ADDRESS: NAME: ERMITTEE NAME/ADDRESS(Include Facility name/Location if different) ATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) ISCHARGE MONITORING REPORT (DMR) **EFFLUENT GROSS VALUE** TEMPERATURE, WATER BOD, 5-DAY EFFLUENT GROSS VALUE 00300 1 0 BOD, 5-DAY 00310 G SEE COMMENTS BELOW RAW SEW/INFLUENT BOD, 5-DAY 00310 W 0 0 00310 1 0 모 EFFLUENT GROSS VALUE EFFLUENT GROSS VALUE 00400 1 0 0 SUSPENDED SOLIDS, TOTAL Scott Jeffers Wastewater Utilities Superintendent NAME/TITLE PRINCIPAL EXECUTIVE OFFICER RAW SEW/INFLUENT 00530 G 0 C PARAMETER (20 DEG. C) (20 DEG. C) . 0 JUNEAU, ALASKA 99801 155 SOUTH SEWARD, JUNEAU, CITY AND BOROUGH OF JUNEAU, ALASKA 99801 JUNEAU-DOUGLAS TREATMENT PLANT Scott Jeffers WW Utilities Superintendent MEASUREMENT prepared under my direction or supervision in accordance with the system designed prepared under my direction or supervision in accordance with the unformation 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, submitted. Based on my inquiry of the person or persons who manage the system. REQUIREMENT MEASUREMENT REQUIREMENT or those persons directly responsible for eathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. MEASUREMENT including the possibility of fine and imprisonment for knowing violations I certify under penalty of law that this document and all attachments were REQUIREMENT MEASUREMENT am aware that there are significant penalties for submitting false information, MEASUREMENT REQUIREMENT MEASUREMENT REQUIREMENT SAMPLE MEASUREMENT REQUIREMENT REQUIREMENT SAMPLE PERMIT SAMPLE SAMPLE PERMIT SAMPLE PERMIT SAMPLE PERMIT SAMPLE WKLY AVG AVERAGE QUANTITY OR LOADING ***** ***** ***** MO AVG ***** ***** 1035 ***** 31.1 31.1 ***** ***** 690 ***** ***** MAXIMUM DAILY MAX (Reference all attachments here) ***** ***** ***** ***** ***** ***** 31.1 ***** ***** ***** ***** ***** ***** 1380 FROM LBS/DAY LBS/DAY STINU *** *** *** *** **** *** (26)(26) *** *** *** *** DAILY MIN MINIMUM ***** ***** 2006 ***** ω ພ ***** ***** ***** ***** 2.0 ⋨ ***** AK-002321-3 ***** ***** MIN 6.0 6.0 PERMIT NUMBER QUALITY OR CONCENTRATION SIGNATURÉ GNATURE OF PRINCIPAL EXECUTIVE OFFICER OR WITHOUTZED AGENT WKLY AVG REPORT AVERAGE ***** MO AVG ***** ***** ***** MO AVG 183.0 ∞ાક MO AVG REPORT 3.1 ***** ***** ß Ω 193 30 MAJOR (SUB 01) F - FINAL #** NO DISCHARGE *** NO DISCHARGE *** NOTE: Read instructions before completing this form. DAILY MAX DAILY MAX DAILY MAX REPORT MAXIMUM 18.8 MAXIMUM 5 8 ***** 17.0 ***** DΑY ***** **** MONITORING PERIOD ***** ***** 6.6 3.1 60 8.5 DEG, C MG/L SIINO 딩 (04) (19) MG/L MG/L MG/L (19)(19)(19) MG/L (12) (19)ဍ Form Approved.

OMB No. 2040-0004 2006 YEAR ΜŞ 0 0 0 0 0 Q ₹ **907** 0 **認** 0 FREQUENCY OF ANALYSIS ONCE/ WEEK MONTH TELEPHONE 586-0393 ONCE/ DAYS HINOM WEEK ONCE/ DISCHARGE NUMBER HINOM ₹ ONCE/ 1/30 1/7 ထ 1/30 HINOM ONCE/ DAYS WEEK 1/30 1/30 5/7 PHONE NUMBER <u>₹</u>0 SAMPLE TYPE COMP 24 GRAB COMP 24 COMP 24 GRAB DAY Ω COMP 24 **GRAB** DAY

The reporting period was from 07/30/2006 through 09/02/2006.

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

(REPI COMMENT AND EXPLANATION OF ANY VIOLATIONS TYPED OR PRINTED

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

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

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

155 SOUTH SEWARD,

JUNEAU, CITY AND BOROUGH OF

AK-002321-3 PERMIT NUMBER

NAME:

ATT:

MAJOR (SUB 01) F - FINAL

Form Approved. **OMB No. 2040-0004**

EFFLUENT

*** NO DISCHARGE

NOTE: Read instructions before completing this form.

SEE COMMENTS BELOW FLOW, IN CONDUIT, OR M-FC BROTH, 44.5 C COLIFORM, FECAL MF SEE COMMENTS BELOW **EFFLUENT GROSS VALUE** M-FC BROTH, 44.5 C COLIFORM, FECAL MF **EFFLUENT GROSS VALUE EFFLUENT GROSS VALUE** SUSPENDED SOLIDS, TOTAL 00530 W 0 0 Scott Jeffers Wastewater Utilities Superintendent PERCENT REMOVAL REMOVAL **BOD, 5-DAY PERCENT** THRU TREATMENT PLANT 31616 1 0 0 31616 W 0 0 TOTAL (AS N) NITROGEN, AMMONIA SUSPENDED SOLIDS, TOTAL 00610 1 0 00530 1 0 NAME/TITLE PRINCIPAL EXECUTIVE OFFICER 81010 K 0 0 **EFFLUENT GROSS VALUE** FACILITY: ADDRESS: 50050 1 0 0 LOCATION: PARAMETER 0 0 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 inquity of the person or presons 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. JUNEAU, ALASKA 99801 **JUNEAU-DOUGLAS TREATMENT PLANT** JUNEAU, ALASKA 99801 Scott Jeffers WW Utilities Superintendent REQUIREMENT l am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. certify under penalty of law that this document and all attachments were MEASUREMENT MEASUREMENT MEASUREMENT REQUIREMENT MEASUREMENT REQUIREMENT MEASUREMENT REQUIREMENT **MEASUREMENT** REQUIREMENT MEASUREMENT REQUIREMENT REQUIREMENT SAMPLE SAMPLE PERMIT SAMPLE SAMPLE SAMPLE WKLY AVG MO AVG REPORT MO AVG MO AVG 167.9 283.5 AVERAGE ***** 1,7787 ***** ***** **** ***** **** N/N 1035 **QUANTITY OR LOADING** 2.76 690 DAILY MAX DAILY MAX DAILY MAX REPORT 1021.6 **** 4.7480 MAXIMUM ***** ***** ***** ***** ***** **** ***** 1380 N/A 6.0 LBS/DAY LBS/DAY _BS/DAY FROM *** MGD *** *** *** SLIND **** *** (26)(26)(26) 63 REMOVAL 85 MIN. % MINIMUM **** ***** ***** ***** ***** ***** ***** ***** ***** ***** ***** **** 98,3 2006 ⋨ SIGNATURE OF PAINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT QUALITY OR CONCENTRATION WKLY AVG WKLY GEO MO GEO MO AVG REPORT MO AVG **** ***** ***** AVERAGE **** 8 800 N/A 10.8 120 30 12.9 45 8 ထ DAILY MAX DAILY MAX DAILY MAX REPORT ***** 1200 MAXIMUM ***** ***** ***** ***** **** ***** **** N/A 25.8 120 60 DAY MONITORING PERIOD MG/L ML100 ML100 <u>동</u> PERCENT *** *** #/ SLIND MG/L (23) (13)(13) (91) (19)7 (19)% 2006 **2006** COPE **907** YEAR Ξě 0 0 0 0 0 CONTINUOS FREQUENCY OF ANALYSIS 586-0393 HINOM HINOM ONCE/ MONTH ONCE/ ANNUAL ONCE/ ONCE/ ONCE/ WEEK WEEK SEMI-1/180 1/30 5/7 PHONE NUMBER DATE 7/7 1/7 17 ∞∣₹ <u>გ</u> დ DISCHARGE NUMBER COMP 24 COMP 24 COMP 24 COMP 24 SAMPLE TYPE GRAB GRAB GRAB DAY M $\frac{3}{2}$

COMMENT AND EXPLANATION OF ANY VIOLATIONS

EPA Form 3320-1 (03-99) Previous editions may be used. The reporting period was from 07/30/2006 through 09/02/2006.

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

(Reference all attachments here)

00434/981209 1904

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

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

ADDRESS:

NAME:

PERCENT REMOVAL

PERCENT REMOVAL SOLIDS, SUSPENDED

MEASUREMENT

SAMPLE

AVERAGE

MAXIMUM

QUANTITY OR LOADING

REQUIREMENT

PERMIT

ATT:

PARAMETER

LOCATION: FACILITY:

JUNEAU, ALASKA 99801

JUNEAU-DOUGLAS TREATMENT PLANT

JUNEAU, ALASKA 99801 155 SOUTH SEWARD,

JUNEAU, CITY AND BOROUGH OF

Scott Jeffers WW Utilities Superintendent

prepared under my direction or supervision in accordance with the system designed to assure that the qualified personnel properly eather and evaluate the information submitted. Based on my inquiry of the person expensors 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 certify under penalty of law that this document and all attachments were am aware that there are significant penalties for submitting false information, FROM *** SLIN *** 85 MIN. % REMOVAL MINIMUM 94.4 2006 ⋨ AK-002321-3 PERMIT NUMBER SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT QUALITY OR CONCENTRATION ***** AVERAGE ***** ∞∣₹ MAJOR (SUB 01) F - FINAL DAILY MAX EFFLUENT

*** NO DISCHARGE

NOTE: Read instructions before completing this form. REPORT ***** MAXIMUM DΑΥ MONITORING PERIOD PERCENT SLINO 딩 % (23)Form Approved. **OMB No. 2040-0004** 2006 2006 YEAR POPE CODE YEAR 0 Ξõ FREQUENCY OF ANALYSIS 586-0393 ONCE/ HINOM ELEPHONE 1/30 PHONE NUMBER ∞∣₹ DISCHARGE NUMBER 001 A SAMPLE TYPE GRAB DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS

uding the possibility of fine and imprisonment for knowing violations

Scott Jeffers Wastewater Utilities Superintendent

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

EPA Form 3320-1 (03-99) Previous editions may be used. The reporting period was from 07/30/2006 through 09/02/2006.

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

(Reference all attachments here)

00434/981209 1904

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

JUNEAU, CITY AND BOROUGH OF

JUNEAU-DOUGLAS TREATMENT PLANT

JUNEAU, ALASKA 99801 JUNEAU, ALASKA 99801 155 SOUTH SEWARD,

Scott Jeffers WW Utilities Superintendent

AVERAGE

MAXIMUM

QUANTITY OR LOADING

M-FC BROTH, 44.5 C COLIFORM, FECAL MF

ATT: LOCATION FACILITY: **ADDRESS:** NAME:

PARAMETER

EFFLUENT GROSS VALUE

REQUIREMENT

MEASUREMENT SAMPLE

MAJOR (SUB 01) F - FINAL

DISCHARGE NUMBER REC-1

SAMPLE TYPE

ΡĄ 31

GRAB

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 presons 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, FROM *** **** *** ******** **** *** *** *** *** *** *** *** SLING *** *** ***** ***** MINIMUM ***** ***** ***** ***** ***** ***** ***** ***** ***** ***** ***** ***** ¥R 2006 AK-002321-3 PERMIT NUMBER SIGNATURE QUALITY OR CONCENTRATION OFFICER-OK AND AVERAGE ***** ***** ***** ***** ***** ***** ***** ***** ***** ***** ***** ***** ***** ***** ∞∣₹ ORIZED AGENT EFFLUENT

*** NO DISCHARGE

NOTE: Read instructions before completing this form. DAILY MAX REPORT MAXIMUM ***** ***** ***** ***** ***** ***** ***** ***** **** ***** ***** **** 4.0 DAY MONITORING PERIOD ML100 *** ** #/ SIINO *** *** ** *** *** *** *** *** *** *** **** **** (13)딩 Form Approved.

OMB No. 2040-0004 2006 907 CODE 2006 Æ E O 0 FREQUENCY OF ANALYSIS 586-0393 NOV- APR MAY-OCT ONCE/MO 2 TIMES ELEPHONE 1/180 AND PHONE NUMBER 1/30 30 ∞∣₹

MEASUREMENT

PERMIT

REQUIREMENT

MEASUREMENT

SAMPLE

REQUIREMENT

MEASUREMENT

REQUIREMENT

SAMPLE

MEASUREMENT

The reporting period was from 07/30/2006 through 09/02/2006. COMMENT AND EXPLANATION OF ANY VIOLATIONS

TYPED OR PRINTED

Scott Jeffers Wastewater Utilities Superintendent

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

certify under penalty of law that this document and all attachments were

REQUIREMENT

MEASUREMENT

REQUIREMENT

MEASUREMENT

SAMPLE

REQUIREMENT

PERMIT

(Reference all attachments here)

including the possibility of fine and imprisonment for knowing violations

00434/981209 1904

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	Weekly Colliom Geo Mean	G Colli	BOD Bs		ISS Ibs	mg/l	Weekly ISS BOD Aver	1 1,0000 18846	ug/L	A/N	Copper		BO.D. 98.3	%REN	06	3x on 8/18/0	ng. No Eff. s	COMMENTS: damage to sampler tubing. No Eff. sx on 8/18/06	COMMENTS:
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	10	31			Г	6.0	╁			1816	183	1493	111	1.0700	13.40	0.00	50	UMUM!	W. T.
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		ور	August 2006	Alini			,		,	Б 2	יי בפוע	מסחוו		1]]]]] J >