

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

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

Form Approved,
OMB 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
ATT: Scott Jeffers WW Utilities Superintendent

AK-002321-3
PERMIT NUMBER

001 A
DISCHARGE NUMBER

MONITORING PERIOD						
YR	MO	DAY	TO	YEAR	MO	DAY
2007	2	1		2007	2	28

PARAMETER	SAMPLE MEASUREMENT	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 EFFLUENT GROSS VALUE		*****	*****	****	*****	*****	11.7	(04)	0	5/7	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	REPORT DAILY MAX	DEG. C		WEEK DAYS	
OXYGEN, DISSOLVED (DO) 00300 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	4.0	*****	7.0	(19)	0	1/7	GRAB
	PERMIT REQUIREMENT	*****	*****	****	2.0 DAILY MIN.	*****	17.0 DAILY MAX	MG/L		ONCE/WEEK	
BOD, 5-DAY (20 DEG. C) 00310 G 0 0 RAW SEW/INFLUENT		*****	*****	****	*****	159.0	*****	(19)	0	1/30	COMP 24
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	*****	MG/L		ONCE/MONTH	
BOD, 5-DAY (20 DEG. C) 00310 W 0 0 SEE COMMENTS BELOW		63.3	*****	(26)	*****	7.0	*****	(19)	0	1/30	COMP 24
	PERMIT REQUIREMENT	1035 WKLY AVG	*****	LBS/DAY	*****	45 WKLY AVG	*****	MG/L		ONCE/MONTH	
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE		63.3	63.3	(26)	*****	7.0	7.0	(19)	0	1/30	COMP 24
	PERMIT REQUIREMENT	690 MO AVG	1380 DAILY MAX	LBS/DAY	*****	30 MO AVG	60 DAILY MAX	MG/L		ONCE/MONTH	
pH 00400 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	6.0	*****	7.1	(12)	0	5/7	GRAB
	PERMIT REQUIREMENT	*****	*****	****	6.0 MIN.	*****	8.5 MAXIMUM	SU		WEEK DAYS	
SOLIDS, TOTAL SUSPENDED 00530 G 0 0 RAW SEW/INFLUENT		*****	*****	****	*****	199	*****	(19)	0	1/30	COMP 24
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	*****	MG/L		ONCE/MONTH	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Scott Jeffers
Wastewater 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.

TELEPHONE
907 AREA CODE 586-0393
PHONE NUMBER
DATE
2007 YEAR 3 MO 9 DAY

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENT AND EXPLANATION OF ANY VIOLATIONS
(Reference all attachments here)
The reporting period was from 02/04/2007 through 03/3/2007.

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

MAJOR
(SUB 01)
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LOCATION: JUNEAU, ALASKA 99801
ATT: Scott Jeffers WW Utilities Superintendent

AK-002321-3
PERMIT NUMBER

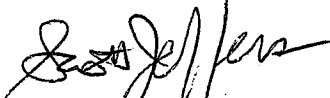
001 A
DISCHARGE NUMBER

MONITORING PERIOD						
YR	MO	DAY	TO	YEAR	MO	DAY
2007	2	1		2007	2	28

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	161.9	*****	(26)	*****	13.0	*****	(19)	0	5/7	
	PERMIT REQUIREMENT	1035 WKLY AVG	*****	LBS/DAY	*****	45 WKLY AVG	*****	MG/L		ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	108.6	312.7	(26)	*****	9.7	17.6	(19)	0	5/7	
	PERMIT REQUIREMENT	690 MO AVG	1380 DAILY MAX	LBS/DAY	*****	30 MO AVG	60 DAILY MAX	MG/L		ONCE/MONTH	GRAB
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	N/A	N/A	(26)	*****	N/A	N/A	(19)	0	1/180	
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MAX	LBS/DAY	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L		SEMI-ANNUAL	COMP 24
COPPER TOTAL RECOVERABLE 01119 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	N/A	N/A	(19)	0	1/90	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L		ONCE/QUARTER	GRAB
COLIFORM, FECAL MF M-FC BROTH, 44.5 C 31616 W 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	****	*****	14	*****	(13)	0	1/7	
	PERMIT REQUIREMENT	*****	*****	****	*****	800 WKLY GEO	*****	#/ML100		ONCE/WEEK	COMP 24
COLIFORM, FECAL MF M-FC BROTH, 44.5 C 31616 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	7	14	(13)	0	1/7	
	PERMIT REQUIREMENT	*****	*****	****	*****	400 MO GEO	1200 DAILY MAX	#/ML100		ONCE/WEEK	COMP 24
FLOW, IN CONDUIT, OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.1948	2.1800	(03)	*****	*****	*****	****	0	7/7	
	PERMIT REQUIREMENT	2.76 MO AVG	6.0 DAILY MAX	MGD	*****	*****	*****	****		CONTINUOUS	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Scott Jeffers
Wastewater Utilities Superintendent

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
907 **586-0393**
AREA CODE PHONE NUMBER
DATE
2007 3 9
YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

The reporting period was from 02/04/2007 through 03/3/2007.

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

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 (SUB 01)
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 OMB No. 2040-0004

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

AK-002321-3
 PERMIT NUMBER

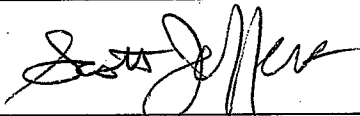
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MONITORING PERIOD						
YR	MO	DAY	TO	YEAR	MO	DAY
2007	2	1		2007	2	28

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY PERCENT REMOVAL	81010 K 0 0	*****	*****	****	95.6	*****	*****	(23)	0	1/30	
PERCENT REMOVAL	PERMIT REQUIREMENT	*****	*****	****	85 MIN. % REMOVAL	*****	*****	PERCENT		ONCE/MONTH	COMP 24
SOLIDS, SUSPENDED PERCENT REMOVAL	81011 K 0 0	*****	*****	****	95.1	*****	*****	(23)	0	1/30	
PERCENT REMOVAL	PERMIT REQUIREMENT	*****	*****	****	85 MIN. % REMOVAL	*****	REPORT DAILY MAX	PERCENT		ONCE/MONTH	GRAB

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Scott Jeffers
Wastewater Utilities Superintendent

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TELEPHONE
907 AREA CODE
586-0393 PHONE NUMBER
 DATE
 2007 YEAR
 3 MO
 9 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
The reporting period was from 02/04/2007 through 03/3/2007.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
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FACILITY: JUNEAU-DOUGLAS TREATMENT PLANT
LOCATION: JUNEAU, ALASKA 99801
ATT: Scott Jeffers WW Utilities Superintendent

AK-002321-3
PERMIT NUMBER

REC-1
DISCHARGE NUMBER

MONITORING PERIOD						
YR	MO	DAY	TO	YEAR	MO	DAY
2007	2	1		2007	2	28

PARAMETER	SAMPLE MEASUREMENT	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, 44.5 C 31616 1 0 0 EFFLUENT GROSS VALUE		*****	*****	(26)	*****	*****	<1.0	(13)	0	1/30	
	PERMIT REQUIREMENT	*****	*****	LBS/DAY	*****	*****	REPORT DAILY MAX	#/ML100		ONCE/MO MAY-OCT	GRAB
	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****	****		AND 1/180	
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	****		2 TIMES NOV- APR	
	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****	****			
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	****			
	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****	****			
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	****			
	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****	****			
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	****			
	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****	****			
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	****			
	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****	****			
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	****			

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Scott Jeffers
Wastewater Utilities Superintendent

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Scott Jeffers
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE	
907 AREA CODE	586-0393 PHONE NUMBER
2007 YEAR	3 MO
	9 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS
(Reference all attachments here)
The reporting period was from 02/04/2007 through 03/3/2007.

JUNEAU-DOUGLAS WASTEWATER TREATMENT FACILITY

EPA REPORT

Juneau, Alaska

FEBRUARY 2007

		WEATHER			INFLUENT						EFFLUENT								
DAY	DATE	TEMP °F	RAIN FALL INCHES	HIGH TIDE FEET	J-D TITL EFFL MGD	S.S. mg/L	S.S. LBS	B.O.D. mg/L	B.O.D. LBS	TEMP °C	pH	D.O. mg/L	S.S. mg/L	S.S. LBS	B.O.D. mg/L	B.O.D. LBS	FECAL Coliform /100 ml	Ammonia as N mg/l 1/180 days	Ammonia as N lbs/day 1/180 days
SUN	4	35	0.50	16.9	1.6630	126	1748						10.8	150					
MON	5	33	0.01	16.6	1.1460	156	1491			10.2	6.2	4.0	6.6	63					
TUE	6	32	0.00	16.3	1.0890	183	1662	159	1444	11.1	6.1	4.1	12.0	109	7.0	63	2.0		
WED	7	33	0.00	15.9	0.9960	242	2010			10.3	6.1	4.1	17.6	146					
THU	8	28	0.01	15.3	0.9560					11.7	6.1	4.6	16.8	134					
FRI	9	25	0.02	14.7	0.8910					10.4	6.4	5.4							
SAT	10	24	0.00	14.0	0.9040														
SUN	11	28	0.00	13.4	0.8860								11.0	81					
MON	12	28	0.03	13.3	0.8980					9.6	6.0	4.2	10.0	75					
TUE	13	32	0.14	13.9	1.1200	256	2391			10.6	6.2	5.0	14.4	135					
WED	14	34	0.29	15.1	2.0260	198	3346			10.8	6.6	4.8	12.2	206			14.0		
THU	15	35	0.91	16.5	2.1800	134	2436			10.1	6.7	4.6	17.2	313					
FRI	16	38	0.17	17.8	1.7330					9.1	6.6	4.5							
SAT	17	34	0.38	18.7	1.7960														
SUN	18	36	0.21	19.0	1.5860	145	1918						6.4	85					
MON	19	33	0.04	18.7	1.4600	110	1339			8.8	6.7	4.6	4.0	49					
TUE	20	23	0.00	19.1	1.3410	174	1946			9.1	6.9	4.8	9.0	101			10.0		
WED	21	16	0.04	19.0	1.1240	216	2025			9.3	7.0	4.8	8.4	79					
THU	22	16	0.00	18.3	1.0860	152	1377			9.1	6.9	4.7	7.4	67					
FRI	23	17	0.04	17.2	0.8860					9.6	6.9	5.4							
SAT	24	19	0.02	15.8	0.9060														
SUN	25	19	0.00	14.6	0.9070	190	1437						5.6	42					
MON	26	18	0.00	14.1	0.8990	290	2174			9.0	6.9	5.3	4.8						
TUE	27	14	0.00	14.5	0.8670	247	1827			8.4	7.0	7.0	5.6				8		
WED	28	10	0.00	15.3	1.2300	324	3324			9.3	7.1	5.8	7.0	72					
THU	1	12	0.16	16.1	0.9400	241	1889			8.6	7.1	6.5	6.4	50					
FRI	2	12	0.38	15.5	0.9790					10.1	7.1	6.6							
SAT	3	12	0.01	16.2	0.9400														
TOTAL			3.36		33.4550														
MAXIMUM		38	0.91	19.1	2.1800	324	3346	159	1444	11.7	7.1	7.0	17.6	313	7.0	63	14	N/A	N/A
MINIMUM		10	0.00	13.3	0.8860	110	1339	159	1444	8.4	6.0	4.0	4.0	42	7.0	63	2	N/A	N/A
AVERAGE		25	0.120	16.1	1.1948	199	2020	159	1444	9.8	6.6	5.0	9.7	109	7.0	63	7	N/A	N/A

Comments: Influent sampler broke (turned out to be a fuse) on Feb. 8th and was and was running on Feb. 12th.

% REMOVAL	
B.O.D.	96
S.S.	95

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

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Weekly TSS/BOD Aver	TSS		BOD		Weekly Coliform Geo Mean
	mg/l	lbs	mg/l	lbs	
WEEK1	13	120	7	63	2
WEEK2	13	162			14
WEEK3	7	76			10
WEEK4	6	55			8
MAX	13	162	7	63	14

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

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: JUNEAU, CITY AND BOROUGH OF
ADDRESS: 1540 THANE ROAD
JUNEAU, AK 99801
FACILITY: JUNEAU, CITY AND BOROUGH OF
LOCATION: 1540 THANE ROAD
JUNEAU, AK 99801
ATTN: CATHERINE CARLSON, SUPERVISOR

AK0023213	001B
PERMIT NUMBER	DISCHARGE NUMBER

DMR MAILING ZIP CODE: 99801
MAJOR \$
(SUBR01)
COMBINED SEWER OVERFLOW
External Outfall

MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
07	02	01	FROM	07	02	28
			TO			

No Data Indicator ~~X~~

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	*****			*****	*****	*****				
00056 P 0 See Comments	PERMIT REQUIREMENT	*****	Req. Mon. EVNT.TOT	Mgal/d	*****	*****	*****			When Discharging	CALCTD
Flow rate	SAMPLE MEASUREMENT	*****			*****	*****	*****				
00056 Q 0 See Comments	PERMIT REQUIREMENT	*****	Req. Mon. EVNT.TOT	Mgal/d	*****	*****	*****			When Discharging	CALCTD
Flow rate	SAMPLE MEASUREMENT				*****	*****	*****				
00056 R 0 See Comments	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	Mgal/d	*****	*****	*****			When Discharging	RCORDR
BOD, 5-day, 20 deg. C	SAMPLE MEASUREMENT				*****						
00310 P 0 See Comments	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		When Discharging	GRAB
BOD, 5-day, 20 deg. C	SAMPLE MEASUREMENT				*****						
00310 Q 0 See Comments	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		When Discharging	GRAB
BOD, 5-day, 20 deg. C	SAMPLE MEASUREMENT				*****						
00310 R 0 See Comments	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		When Discharging	GRAB
Solids, total suspended	SAMPLE MEASUREMENT				*****						
00530 P 0 See Comments	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		When Discharging	GRAB

Scott Jeffers, Wastewater Utility Superintendent

907-586-0393

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Tony Stojanich			907-790-7588	07	3	8	
TYPED OR PRINTED			AREA Code	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
P = N-11Q = N-11, 2R = N-15, 1RECORD REASONING FOR EACH OPENING

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
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FACILITY: JUNEAU, CITY AND BOROUGH OF
LOCATION: 1540 THANE ROAD
JUNEAU, AK 99801
ATTN: CATHERINE CARLSON, SUPERVISOR

AK0023213
PERMIT NUMBER

001B
DISCHARGE NUMBER

DMR MAILING ZIP CODE: 99801
MAJOR \$
(SUBR01)
COMBINED SEWER OVERFLOW
External Outfall

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
07	02	01	TO	07	02	28

No Data Indicator

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended 00530 Q 0 See Comments	SAMPLE MEASUREMENT				*****						
	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		When Discharging	GRAB
Solids, total suspended 00530 R 0 See Comments	SAMPLE MEASUREMENT				*****						
	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		When Discharging	GRAB
Coliform, fecal MF, MFC broth, 44.5 C 31616 P 0 See Comments	SAMPLE MEASUREMENT	*****	*****								
	PERMIT REQUIREMENT	*****	*****		Req. Mon. WKLY AVG	Req. Mon. MO AVG	Req. Mon. DAILY MX	#/100mL		When Discharging	GRAB
Coliform, fecal MF, MFC broth, 44.5 C 31616 Q 0 See Comments	SAMPLE MEASUREMENT	*****	*****								
	PERMIT REQUIREMENT	*****	*****		Req. Mon. WKLY AVG	Req. Mon. MO AVG	Req. Mon. DAILY MX	#/100mL		When Discharging	GRAB
Coliform, fecal MF, MFC broth, 44.5 C 31616 R 0 See Comments	SAMPLE MEASUREMENT	*****	*****								
	PERMIT REQUIREMENT	*****	*****		Req. Mon. WKLY AVG	Req. Mon. MO AVG	Req. Mon. DAILY MX	#/100mL		When Discharging	GRAB
Duration of discharge 81381 P 0 See Comments	SAMPLE MEASUREMENT	*****			*****	*****	*****			When Discharging	CALCTD
	PERMIT REQUIREMENT	*****	Req. Mon. EVNT TOT	min	*****	*****	*****				
Duration of discharge 81381 Q 0 See Comments	SAMPLE MEASUREMENT	*****			*****	*****	*****			When Discharging	CALCTD
	PERMIT REQUIREMENT	*****	Req. Mon. EVNT TOT	min	*****	*****	*****				

Scott Jeffers, Wastewater Utility Superintendent

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
TONY STONIER
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that 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
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

907-586-0393

TELEPHONE		DATE		
907	7902525	07	3	8
AREA Code	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
P = N-11Q = N-11, 2R = N-15, 1RECORD REASONING FOR EACH OPENING

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: JUNEAU, CITY AND BOROUGH OF
ADDRESS: 1540 THANE ROAD
JUNEAU, AK 99801
FACILITY: JUNEAU, CITY AND BOROUGH OF
LOCATION: 1540 THANE ROAD
JUNEAU, AK 99801
ATTN: CATHERINE CARLSON, SUPERVISOR

AK0023213	001B
PERMIT NUMBER	DISCHARGE NUMBER

DMR MAILING ZIP CODE: 99801
MAJOR \$
(SUBR01)
COMBINED SEWER OVERFLOW
External Outfall

MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
07	02	01	TO	07	02	28

No Data Indicator

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Duration of discharge	SAMPLE MEASUREMENT	*****			*****	*****	*****				
81381 R 0 See Comments	PERMIT REQUIREMENT	*****	Reg. Mon. EVNT:TOT	min	*****	*****	*****			When Discharging	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Scott Jeffers, Wastewater Utility Superintendent</i> TONY STOWICH TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that 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 <i>Scott Jeffers</i>	TELEPHONE	DATE		
			907-586-0393 907-790-7515	07	3	<input checked="" type="checkbox"/>
AREA Code	NUMBER	YEAR	MO	DAY		

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
P = N-11Q = N-11; 2R = N-15, 1RECORD REASONING FOR EACH OPENING