Scott Jeffers Wastewater Utilities Superintendent COMMENT AND EXPLANATION OF ANY VIOLATIONS RAW SEW/INFLUENT SOLIDS, TOTAL SEE COMMENTS BELOW NAME/TITLE PRINCIPAL EXECUTIVE OFFICER 00530 G 0 0 SUSPENDED **EFFLUENT GROSS VALUE** 면 00400 1 0 **EFFLUENT GROSS VALUE** BOD, 5-DAY 00310 1 00310 W 0 BOD, 5-DAY 00300 OXYGEN, DISSOLVED RAW SEW/INFLUENT 00310 G **EFFLUENT GROSS VALUE** BOD, 5-DAY **EFFLUENT GROSS VALUE** DEG, CENTIGRADE TEMPERATURE, WATER FACILITY: LOCATION: 00010 1 0 PERMITTEE NAME/ADDRESS(Include Facility name/Location if different) ATT: ADDRESS: NAME TYPED OR PRINTED 0 0 (20 DEG. C) (20 DEG. C) (20 DEG. C 0 PARAMETER 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 certify under penalty of law that this document and all attachments were am aware that there are significant penalties for submitting false information, JUNEAU-DOUGLAS TREATMENT PLANT cluding the possibility of fine and imprisonment for knowing violations Scott Jeffers WW Utilities Superintendent JUNEAU, ALASKA 99801 JUNEAU, ALASKA 99801 155 SOUTH SEWARD, REQUIREMENT JUNEAU, CITY AND BOROUGH OF MEASUREMENT REQUIREMENT MEASUREMENT REQUIREMENT REQUIREMENT MEASUREMENT MEASUREMENT REQUIREMENT MEASUREMENT REQUIREMENT MEASUREMENT REQUIREMENT MEASUREMENT SAMPLE PERMIT SAMPLE PERMIT SAMPLE PERMIT SAMPLE WKLY AVG ***** MO AVG **** ***** **** 33.8 690 1035 ***** 33.8 ***** ***** **** ***** ***** AVERAGE QUANTITY OR LOADING (Reference all attachments here) DAILY MAX ***** **** **** ***** 33.8 ***** ***** MAXIMUM 1380 **** ***** ***** **** ***** ***** LBS/DAY BS/DAY *** **** *** *** *** ** FROM (26)*** **** *** *** (26)**** SLIND DAILY MIN ***** ***** ***** ***** MINIMUM MIN ***** ***** ***** 6.0 8,0 ***** ***** **** 2.6 2007 ⋨ AK-002321-3 SIGNATURE-0 PERMIT NUMBER QUALITY OR CONCENTRATION <u>OFFICER OR AUTHORIZED AGENT</u> WKLY AVG MO AVG REPORT MO AVG MO AVG REPORT **** ***** 177.0 AVERAGE **** 203 **** ***** **** 3.4 3<u>.</u>4 Ġ Mo PRINCIPAL EXECUTIVE DAILY MAX MAJOR (SUB 01) F - FINAL MAXIMUM DAILY MAX DAILY MAX EFFLUENT
*** NO DISCHARGE NOTE: Read instructions before completing this form. REPORT **** ***** 7.0 3.**4** **** ***** **** ***** MAXIMUM Ω Ο 14.4 3.9 6 17.0 DΑY MONITORING PERIOD MG/L MG/L DEG. C MG/L MG/L SLINA (19)(12)MG/L (19)S (19)(19)(19)<u>2</u> oTo Form Approved.

OMB No. 2040-0004 2007 YEAR 907 COREA 2007 0 0 0 YEAR 0 0 ΞŎ 0 0 TELEPHONE 586-0393 FREQUENCY OF ANALYSIS MONTH ONCE/ HTNOM ONCE/ HINOM HINOM DAYS WEEK ONCE ONCE/ ONCE/ PHONE NUMBER DATE 1/30 WITH DAYS WEEK 1/30 1/30 1/30 3H 5/7 1/7 1 8 DISCHARGE NUMBER COMP. 24 COMP. 24 COMP 24 COMP:24 GRAB. SAMPLE TYPE GRAB GRAB <u>8</u>15 DAY 8

EPA Form 3320-1 (03-99) Previous editions may be used The reporting period was from 11/04/2007 through 12/01/2007.

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

00434/981209 1904

ADDRESS:

PERMITTEE NAME/ADDRESS(Include Facility name/Location if different) JUNEAU, ALASKA 99801 JUNEAU, CITY AND BOROUGH OF 155 SOUTH SEWARD, AK-002321-3
PERMIT NUMBER MAJOR (SUB 01) F - FINAL EFFLUENT
*** NO DISCHARGE NOTE: Read instructions before completing this form. Form Approved.

OMB No. 2040-0004 DISCHARGE NUMBER 001 A

Scott Jeffers Wastewater Utilities Superintendent THRU TREATMENT PLANT FLOW, IN CONDUIT, OR **EFFLUENT GROSS VALUE** M-FC BROTH, 44.5 C COLIFORM, FECAL MF EFFLUENT GROSS VALUE SEE COMMENTS BELOW 31616 W 0 0 M-FC BROTH, 44.5 C COLIFORM, FECAL MF 01119 1 0 NAME/TITLE PRINCIPAL EXECUTIVE OFFICER 31616 1 0 0 COPPER **EFFLUENT GROSS VALUE** 50050 1 0 0 **EFFLUENT GROSS VALUE** 00610 1 0 TOTAL (AS N) NITROGEN, AMMONIA EFFLUENT GROSS VALUE SEE COMMENTS BELOW SUSPENDED SUSPENDED 00530 1 0 SOLIDS, TOTAL 00530 W 0 SOLIDS, TOTAL ATT: LOCATION: FACILITY: TOTAL RECOVERABLE TYPED OR PRINTED PARAMETER I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. 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, 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, certify under penalty of law that this document and all attachments were JUNEAU-DOUGLAS TREATMENT PLANT JUNEAU, ALASKA 99801 Scott Jeffers WW Utilities Superintendent REQUIREMENT MEASUREMENT PERMIT PERMIT SAMPLE PERMIT SAMPLE SAMPLE PERMIT SAMPLE PERMIT SAMPLE PERMIT SAMPLE MO AVG WKLY AVG 1.0602 REPORT MO AVG ***** ***** MO AVG ***** ***** ***** ***** 69.2 AVERAGE 79.6 N/A **OUANTITY OR LOADING** 690 1035DAILY MAX DAILY MAX DAILY MAX 1.3420 REPORT ***** ***** ***** 119.5 ***** MAXIMUM ***** ***** ***** N/A **** 1380 LBS/DAY LBS/DAY MGD _BS/DAY *** *** *** *** *** FROM *** (03)(26)SLINO (26)(26)**** ***** ***** **** ***** **** ***** MINIMUM ***** ***** ***** ***** ***** **** ***** 2007 ⋨ SIGNATURE OF PRINCIPAL EXECUTIVE QUALITY OR CONCENTRATION OFFICER OR AUTHORIZED AGENT WKLY GEO WKLY AVG MO GEO REPORT MO AVG MO AVG REPORT MO AVG **** ***** 400 800 AVERAGE N/A N/A <u>ω</u> 7.8 14 ဗ Ş. 증 DAILY MAX DAILY MAX DAILY MAX DAILY MAX REPORT REPORT 1200 ****** ***** **** ***** MAXIMUM **** **** N/A 13.0 N/A 14 8 DΑY MONITORING PERIOD ML100 ML100 *** *** MG/L <u>M</u>G/L SLIND MG/L MG/L (13)(19)(19) (13) (19)(19)70 AREA CODE 2007 0 0 0 0 Ö 0 0 0 띳 CONTINUOS TELEPHONE **586-0393** OF ANALYSIS QUARTER FREQUENCY ANNUAL ONCE/ ONCE/ MONTH WITH WELK ONCE/ MONTH ONCE/ 1/180ONCE/ 1/90 PHONE NUMBER 7/7 -IMES 1/7 1/7 5/7 5/7 Ë ₹ **COMP. 24** COMP: 24 COMP 24 GRAB GRAB. GRAB GRAB SAMPLE TYPE <u>₩</u> 8 DAY

The reporting period was from 11/04/2007 through 12/01/2007 COMMENT AND EXPLANATION OF ANY VIOLATIONS

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

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

(Reference all attachments here)

00434/981209 1904

94GE 2 OF 3

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

MAJOR (SUB 01) F - FINAL EFFLUENT *** NO DISCHARGE

Form Approved.

OMB No. 2040-0004

NOTE: Read instructions before completing this form. * *

TYPED OR PRINTED Including the purchased of ANY VIOLATIONS	Scott Jeffers Wastewater Utilities Superintendent					PERCENT REMOVAL		PERCENT REMOVAL	AL DAY	PARAMETER	ATT:	LOCATION:	NAME: ADDRESS:
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DAY						GRAB		COMP 24		SAMPLE TYPE	30	DAY	001 A DISCHARGE NUMBER

00434/981209 1904

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

MAJOR (SUB 01) F - FINAL

Form Approved.

OMB No. 2040-0004

EFFLUENT NOTE: Read instructions before completing this form. *** NO DISCHARGE ***

EFFLUENT GROSS VALUE 31616 1 0 0 M-FC BROTH, 44.5 C COLIFORM, FECAL MF Scott Jeffers Wastewater Utilities Superintendent NAME/TITLE PRINCIPAL EXECUTIVE OFFICER ATT: FACILITY: ADDRESS: NAME: LOCATION YPED OR PRINTED PARAMETER JUNEAU-DOUGLAS TREATMENT PLANT JUNEAU, ALASKA 99801 155 SOUTH SEWARD, JUNEAU, CITY AND BOROUGH OF 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. Scott Jeffers WW Utilities Superintendent JUNEAU, ALASKA 99801 prepared under my direction or supervision in accordance with the system designed to assure that the qualified personnel properly gather and evaluate the information including the possibility of fine and imprisonment for knowing violations. certify under penalty of law that this document and all attachments were am aware that there are significant penalties for submitting false information, MEASUREMENT REQUIREMENT REQUIREMENT MEASUREMENT REQUIREMENT MEASUREMENT MEASUREMENT REQUIREMENT MEASUREMENT REQUIREMENT MEASUREMENT REQUIREMENT: MEASUREMENT REQUIREMENT SAMPLE PERMIT PERMIT SAMPLE PERMIT SAMPLE PERMIT PERMIT SAMPLE PERMIT SAMPLE SAMPLE AVERAGE ***** ***** QUANTITY OR LOADING **** ***** ***** ***** ***** ***** ***** ***** ***** ***** ***** MAXIMUM **** ***** **** ***** ***** ***** **** ***** ***** ***** ***** ***** ***** ***** LBS/DAY FROM SLING *** *** (26)**** *** *** **** *** *** *** *** *** *** MINIMUM ***** **** ***** 2007 ***** **** ***** **** ***** ***** ***** ***** ***** ***** **** ⋨ AK-002321-3
PERMIT NUMBER QUALITY OR CONCENTRATION SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT AVERAGE **** ***** **** **** ***** ***** ***** ***** ***** **** ***** ***** ***** **** <u>ب</u> MO DAILY MAX REPORT MAXIMUM **** ***** ***** **** ***** **** ***** **** ***** **** ***** **** 4.0 DAY MONITORING PERIOD SLIND ML100 # *** *** *** **** *** (3)70 *** *** **** *** *** **** *** 2007 YEAR ΠŞ 2007 YEAR 907 CORE 0 ONCE/MO FREQUENCY OF ANALYSIS NOV- APR MAY-OCT 2 TIMES 586-0393 1/180 AND ELEPHONE 1/30 1 MO DISCHARGE NUMBER PHONE NUMBER 焬 SAMPLE TYPE GRAB 30 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS

EPA Form 3320-1 (03-99) Previous editions may be used The reporting period was from 11/04/2007 through 12/01/2007. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED).

(Reference all attachments here)

JUNEAU-DOUGLAS WASTEWATER TREATMENT FACILITY

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

LOCATION: FACILITY: 1540 THANE ROAD JUNEAU, AK 99801 JUNEAU, CITY AND BOROUGH OF JUNEAU, AK 99801 NAME:

JUNEAU, CITY AND BOROUGH OF

ADDRESS:

1540 THANE ROAD

PARAMETER

00056 Q 0 See Comments

00056 R 0 See Comments

00310 P 0 See Comments

BOD, 5-day, 20 deg. C

SAMPLE MEASUREMENT

PERMIT

Req. Mon. MO AVG

Req. Mon. DAILY MX

p/d

Req. Mon. MO AVG

Req. Mon. DAILY MX

mg/Ľ

When Discharging

GRAB

REQUIREMENT

PERMIT

Req. Mon.

Req. Mon. DAILY MX

P/q

Req. Mon. MO AVG

Req. Mon. DAILY MX

mg/L

When Discharging

GRAB

See Comments BOD, 5-day, 20 deg. C

MEASUREMENT REQUIREMENT

Req. Mon. MO AVG

Heq. Mon. DAILY MX

b/d

SAMPLE

00310 Q O

00310 R 0

See Comments

Solids, total suspended

MEASUREMENT REQUIREMENT

SAMPLE PERMIT

REQUIREMENT

Req. Mon MO AVG

Req. Mon. DAILY MX

P/d!

Req. Mon. MO AVG

Req. Mon. DAILY MX

mg/L

When Discharging

GRAB

00530 P 0 See Comments

BOD, 5-day, 20 deg. C

MEASUREMENT

SAMPLE PERMIT

Flow rate

MEASUREMENT REQUIREMENT

SAMPLE PERMIT

REQUIREMENT

Req. Mon. MO AVG

Req. Mon. DAILY MX

Mgal/d

Req. Mon. MO AVG

Req. Mon. DAILY MX

mg/L

When Discharging

GRAB

00056 P 0 Flow rate

MEASUREMENT

SAMPLE

Req. Mon. EVNT TOT

Mgal/d

Discharging

When

CALCTD

VALUE

VALUE

STINU

VALUE

VALUE

VALUE

STINU

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FREQUENCY OF ANALYSIS

SAMPLE TYPE

QUALITY OR CONCENTRATION

When Discharging

CALCTD

QUANTITY OR LOADING

MEASUREMENT REQUIREMENT

SAMPLE PERMIT

Reg. Mon. EVNT TOT

Mgal/d

When Discharging

RCORDR

See Comments Flow rate

ATTN:CATHERINE CARLSON, SUPERVISOR

FROM YEAR 9 8 ⇉ DAY 으 70

9

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DAY ၶ

PERMIT NUMBER AK0023213 MONITORING PERIOD YEAR MO

001B

DISCHARGE NUMBER

MAJOR COMBINED SEWER OVERFLOW (SUBR01) DMR MAILING ZIP CODE: 9980

External Outfall

No Discharge

Page 12

OMB No. 2040-0004 Form Approved

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

XS

TYPED OR PRINTED EFFESS NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

I Learlify under penulty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure into qualified personnel properly gather midsupervision in incordance with a system designed to assure in qualified personnel properly gather midsubstant the information submitted. Based on my months of the personn or personnel who manage the
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SIGNATURE OF PHINGHAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

AREA Code

NUMBER

YEAR 07

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S DAY

907-586-033

TELEPHONE

DATE

Com

EPA Form 3320-1 (Rev.01/06) Previous editions may be used.

DISCHARGE NUMBER 001B

PERMIT NUMBER YEAR MO AK0023213 MONITORING PERIOD DAY YEAR S S DAY ၶ

NAME:

ADDRESS:

1540 THANE ROAD JUNEAU, AK 99801

JUNEAU, CITY AND BOROUGH OF

FACILITY:

LOCATION:

: 1540 THANE ROAD JUNEAU, AK 99801

ATTN:CATHERINE CARLSON, SUPERVISOR

QUANTITY OR LOADING

VALUE

STINU

VALUE

VALUE

VALUE

UNITS

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FREQUENCY OF ANALYSIS

SAMPLE

QUALITY OR CONCENTRATION

FROM

97

9

70

07

11

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

JUNEAU, CITY AND BOROUGH OF

MAJOR (SUBR01)

DMR MAILING ZIP CODE: 99801

External Outfall

No Discharge

COMBINED SEWER OVERFLOW

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> Form Approved OMB No. 2040-0004

Page 13

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

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

NAME: ADDRESS: JUNEAU, CITY AND BOROUGH OF

FACILITY: JUNEAU, CITY AND BOROUGH OF 1540 THANE ROAD JUNEAU, AK 99801

ATTN:CATHERINE CARLSON, SUPERVISOR 1540 THANE ROAD JUNEAU, AK 99801

> PERMIT NUMBER AK0023213

DISCHARGE NUMBER 001B

MAJOR DMR MAILING ZIP CODE: 99801

COMBINED SEWER OVERFLOW (SUBR01)

External Outfall

FROM YEAR 9 NO. MONITORING PERIOD DAY 9 ОТ YEAR MO 07 DAY 30

No Discharge

PARAMETER		QUANT	QUANTITY OR LOADING		QL	NUALITY OR CONCENTRATION	ENTRATION		E S	NO. FREQUENCY EX OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	STINU	VALUE	VALUE	VALUE	STINU			
Duration of discharge	SAMPLE MEASUREMENT	****			****	*****	****			<u>'</u>	
81381 R 0 See Comments	PERMIT REQUIREMENT		Req. Mon. EVNT TOT	min		******				When Discharging	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

907 586:031 TELEPHONE NUMBER YEAR DATE 80

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P = N-11Q = N-11, 2R = N-15, 1RECORD REASONING FOR EACH OPENING

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

TYPED OR PRINTED

JEFFERS W