

NOTE: Read instructions before completing this form.

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

NAME: JUNEAU, CITY AND BOROUGH OF
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 2008 MO 2 DAY 1

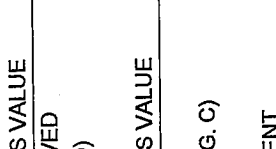
FROM

YEAR 2008 MO 2 DAY 29

PARAMETER	QUANTITY OR LOADING			UNITS	QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	MINIMUM		AVERAGE	MAXIMUM	MINIMUM			
TEMPERATURE, WATER DEG, CENTIGRADE	*****	*****	*****	****	*****	11.4	*****	0	5/7 WEEK DAYS	GRAB
00010 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	****	*****	REPORT DAILY MAX	*****	0	1/30 ONCE/ MONTH	COMP 24
OXYGEN, DISSOLVED (DO)	*****	*****	*****	****	*****	5.8	*****	0	5/7 WEEK DAYS	GRAB
00300 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	****	*****	17.0 DAILY MAX	*****	0	1/30 ONCE/ MONTH	COMP 24
BOD, 5-DAY (20 DEG. C)	*****	*****	*****	****	*****	179.0	*****	0	1/30 ONCE/ MONTH	COMP 24
00310 G 0 0 RAW SEW/INFLUENT	*****	*****	*****	****	*****	REPORT MO AVG	*****	0	1/30 ONCE/ MONTH	COMP 24
BOD, 5-DAY (20 DEG. C)	*****	*****	*****	****	*****	4.4	*****	0	1/30 ONCE/ MONTH	COMP 24
00310 W 0 0 SEE COMMENTS BELOW	*****	*****	*****	****	*****	45 WKLY AVG	*****	0	1/30 ONCE/ MONTH	COMP 24
BOD, 5-DAY (20 DEG. C)	*****	*****	*****	****	*****	40.1	*****	0	1/30 ONCE/ MONTH	COMP 24
00310 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	****	*****	1380 DAILY MAX	*****	0	1/30 ONCE/ MONTH	COMP 24
pH	*****	*****	*****	****	*****	6.6	*****	0	5/7 WEEK DAYS	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	****	*****	6.0 MIN.	*****	0	1/30 ONCE/ MONTH	COMP 24
SOLIDS, TOTAL SUSPENDED	*****	*****	*****	****	*****	168	*****	0	1/30 ONCE/ MONTH	COMP 24
00530 G 0 0 RAW SEW/INFLUENT	*****	*****	*****	****	*****	REPORT MO AVG	*****	0	1/30 ONCE/ MONTH	COMP 24

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.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Scott Jeffers
Wastewater Utilities Superintendent

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT


TELEPHONE
AREA CODE 907
PHONE NUMBER 586-0393

DATE
YEAR 2008 MO 3 DAY 10

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

The reporting period was from 02/03/2008 through 03/01/2008.

TYPED OR PRINTED

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

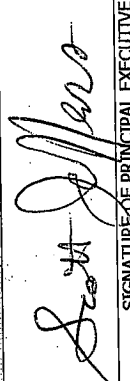
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155 SOUTH SEWARD,
JUNEAU, ALASKA 99801
FACILITY:
JUNEAU-DOUGLAS TREATMENT PLANT
LOCATION:
JUNEAU, ALASKA 99801
ATT:
Scott Jeffers WW Utilities Superintendent

MONITORING PERIOD
YR. MO DAY TO
2008 2 1 1

FROM
2008 2 1 1

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
SOLIDS, TOTAL SUSPENDED	299.8	*****	(26)	*****	17.4	*****	(19)	0	5/7	GRAB
00530 W 0 0	1035	*****	LBS/DAY	*****	45	*****	MG/L	0	ONCE/MONTH	GRAB
SEE COMMENTS BELOW	135.9	369.2	(26)	*****	9.7	22.6	(19)	0	5/7	GRAB
SOLIDS, TOTAL SUSPENDED	690	1380	LBS/DAY	*****	30	60	MG/L	0	ONCE/MONTH	GRAB
00530 1 0 0	N/A	N/A	(26)	*****	N/A	N/A	(19)	0	1/180	SEMI-ANNUAL
EFFLUENT GROSS VALUE	REPORT	REPORT	LBS/DAY	*****	REPORT	REPORT	MG/L	0	1/7	ONCE/WEEK
NITROGEN, AMMONIA	MO AVG	DAILY MAX	(03)	*****	MO AVG	DAILY MAX	(13)	0	1/7	ONCE/WEEK
TOTAL (AS N)	MO AVG	DAILY MAX	MGD	*****	MO AVG	DAILY MAX	PERCENT	0	1/30	ONCE/MONTH
00610 1 0 0	1.4418	2.2930	*****	*****	2	5	ML100	0	7/7	CONTINUOUS
EFFLUENT GROSS VALUE	2.76	6.0	*****	*****	400	1200	ML100	0	1/30	ONCE/MONTH
COLIFORM, FECAL MF	MO AVG	DAILY MAX	*****	*****	MO GEO	DAILY MAX	PERCENT	0	1/30	ONCE/MONTH
M-FC BROTH, 44.5 C	*****	*****	*****	*****	*****	*****	PERCENT	0	1/30	ONCE/MONTH
31616 W 0 0	*****	*****	*****	*****	*****	*****	PERCENT	0	1/30	ONCE/MONTH
SEE COMMENTS BELOW	*****	*****	*****	*****	*****	*****	PERCENT	0	1/30	ONCE/MONTH
COLIFORM, FECAL MF	*****	*****	*****	*****	*****	*****	PERCENT	0	1/30	ONCE/MONTH
M-FC BROTH, 44.5 C	*****	*****	*****	*****	*****	*****	PERCENT	0	1/30	ONCE/MONTH
31616 1 0 0	*****	*****	*****	*****	*****	*****	PERCENT	0	1/30	ONCE/MONTH
EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	PERCENT	0	1/30	ONCE/MONTH
FLOW, IN CONDUIT, OR THRU TREATMENT PLANT	*****	*****	*****	*****	*****	*****	PERCENT	0	1/30	ONCE/MONTH
50050 1 0 0	*****	*****	*****	*****	*****	*****	PERCENT	0	1/30	ONCE/MONTH
EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	PERCENT	0	1/30	ONCE/MONTH
BOD, 5-DAY PERCENT REMOVAL	*****	*****	*****	*****	*****	*****	PERCENT	0	1/30	ONCE/MONTH
81010 K 0 0	*****	*****	*****	*****	*****	*****	PERCENT	0	1/30	ONCE/MONTH
PERCENT REMOVAL	*****	*****	*****	*****	*****	*****	PERCENT	0	1/30	ONCE/MONTH
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 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.									
Scott Jeffers Wastewater Utilities Superintendent	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT									
TYPED OR PRINTED	907 AREA CODE 586-0393 TELEPHONE 2008 YEAR 3 MO 10 DAY									

COMMENT AND EXPLANATION OF ANY VIOLATIONS
 The reporting period was from 02/03/2008 through 03/01/2008.
 EPA Form 3320-1 (03-99) Previous editions may be used.

JUNEAU-DOUGLAS WASTEWATER TREATMENT FACILITY

February 2008

Juneau, Alaska

EPA REPORT

DAY	DATE	WEATHER				INFLUENT					EFFLUENT							
		TEMP °F	RAIN FALL INCHES	HIGH TIDE FEET	JFD TFL MGD	S.S. mg/L	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/1/180 days	Ammonia as N lbs/day 1/180 days
SUN	3	25	0.14	14.8	1.0230	181	1544											
MON	4	25	0.27	15.8	0.9880	202	1664		10.6	4.6	10.4	86						
TUE	5	17	0.01	16.8	1.0200	204	1735		10.3	6.9	6.8	58						
WED	6	12	0.01	17.5	1.1050	218	2009	179	9.1	7.0	7.8	72	4.4	40	1.0			
THU	7	9	0.00	18.0	1.1320	195	1841		7.2	7.0	4.3	53						
FRI	8	5	0.00	18.0	1.0670				5.0	7.0	5.8							
SAT	9	10	0.27	17.6	1.8240													
SUN	10	23	0.09	17.7	1.6710													
MON	11	35	0.27	17.8	1.6610	194	2887		8.1	6.7	3.4	112	155					
TUE	12	36	0.67	17.5	2.2930	118	2257		10.4	6.7	4.1	160	306					
WED	13	36	0.54	16.9	2.2560	97	1825		8.9	6.7	4.6	196	369			5.0		
THU	14	38	0.31	16.0	1.9590	132	2157		8.1	6.7	4.7	226	369					
FRI	15	36	0.20	15.3	1.3150				7.8	6.7	5.3							
SAT	16	34	0.06	15.2	1.2310													
SUN	17	35	0.34	15.9	1.5030	173	2169					12.8	160					
MON	18	36	0.34	16.9	1.5570	148	1922		10.1	6.6	3.5	6.8	88					
TUE	19	37	0.11	17.7	1.4820	137	1693		9.7	6.7	3.2	7.2	89					
WED	20	40	0.22	18.2	2.0400	120	2042		10.6	6.7	4.2	6.6	112			1.0		
THU	21	38	0.46	18.2	1.9050	140	2224		10.9	6.6	4.1	6.4	102					
FRI	22	33	0.01	17.8	1.3140				9.5	6.6	4.4							
SAT	23	30	0.00	17.7	1.0740													
SUN	24	32	0.07	17.5	1.1330	172	1625					6.8	64					
MON	25	34	0.17	17.0	1.1130	219	2033		10.8	6.7	4.0	6.4	59					
TUE	26	35	0.12	16.3	1.1690	172	1677		11.0	6.7	3.7	5.8	57					
WED	27	37	0.07	15.4	1.2220	191	1947		11.4	6.8	3.8	3.6	37			2		
THU	28	36	0.61	14.4	2.0000	182	3036		10.7	6.8	4.1	12.6	210					
FRI	29	34	0.17	13.4	0.9940				9.3	6.7	4.1							
SAT	1	32	0.05	12.8	1.3200													
TOTAL			5.58		40.3710													
MAXIMUM		40	0.67	18.2	2.2930	219	3036	179	11.4	7.0	5.8	22.6	369	4.4	40	5	N/A	N/A
MINIMUM		5	0.00	12.8	0.9880	97	1544	179	5.0	6.6	3.2	3.6	37	4.4	40	1	N/A	N/A
AVERAGE		30	0.199	16.6	1.4418	168	2005	179	9.5	6.8	4.2	9.7	136	4.4	40	2	N/A	N/A

Weekly	TSS			BOD			Coliform	
	mg/L	lbs	mg/L	mg/L	lbs	Geo. Mean	Coliform	
WEEK1	8	67	4		40		1	
WEEK2	17	300					5	
WEEK3	8	110					1	
WEEK4	7	85					2	
MAX	17	300	4		40		5	

Weekly	Copper		NH3	
	ug/L	mg/L	ug/L	mg/L
WEEK1	N/A		N/A	
WEEK2	N/A		N/A	
WEEK3	N/A		N/A	
WEEK4				
MAX				

% REMOVAL	
B.O.D.	98
S.S.	94

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