

EPA REPORT

JUNEAU-DOUGLAS WASTEWATER TREATMENT FACILITY
Juneau, Alaska

August 2011

DAY	DATE	TEMP °F	WEATHER		INFLUENT				EFFLUENT									
			RAIN INCHES	J-D TTL 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	31	54	0.10	1.0150														
MON	1	53	0.14	1.1900			19.3	6.7	6.6									3.0
TUE	2	56	0.05	1.0430			14.5	6.9	5.2									
WED	3	57	0.00	1.1310			14.9	6.7	5.8									
THU	4	54	0.76	1.6070	544	7291	743	6.7	5.6	10.0	134	4.76	64					
FRI	5	54	0.04	1.0780			14.4	6.7	5.8									
SAT	6	56	0.00	0.8990														
SUN	7	56	0.00	0.8990														
MON	8	58	0.01	0.8450														
TUE	9	58	0.00	0.9310			15.2	6.7	5.3									3.0
WED	10	53	0.29	1.1140			15.6	6.8	5.3									
THU	11	51	0.10	1.2780			16.0	6.9	4.7									
FRI	12	54	0.00	0.9650			15.3	6.8	4.7									
SAT	13	55	0.00	1.0110			14.6	6.7	5.0									
SUN	14	52	0.40	1.2710														
MON	15	50	1.22	3.4300			14.1	6.8	5.3									4.2
TUE	16	51	0.89	2.8780			12.2	6.8	7.0									
WED	17	52	0.15	1.4910			12.6	6.8	7.1									
THU	18	53	0.05	1.3460			13.4	6.8	6.6									
FRI	19	52	0.75	2.5550			13.6	6.8	7.0									
SAT	20	57	1.51	3.4740														
SUN	21	55	0.56	2.5240														
MON	22	52	0.58	2.4600			13.2	6.9	7.0									
TUE	23	52	0.46	2.0510			13.5	7.1	6.7									
WED	24	50	0.65	1.8040			13.1	6.9	6.9									
THU	25	58	0.11	1.4550	121	1820	170	6.7	7.1	9.0	135	3.50	42					2.3
FRI	26	50	0.53	1.6430			13.2	6.8	6.9									
SAT	27	50	0.29	1.5790														
TOTAL			9.64	44.9670														
MAXIMUM			58	1.51	544	7291	743	19.3	7.1	7.1	10.0	135	5	64	42			N/A
MINIMUM			50	0.00	121	1820	170	12.2	6.7	4.7	9.0	134	4	42	3			N/A
AVERAGE			54	0.344	333	4555	457	14.3	6.8	6.1	9.5	135	4	53	10			N/A

% REMOVAL	
B.O.D	99
S.S.	97

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

Weekly	TSS BOD		TSS		BOD		Weekly Coliform Geo. Mean
	Aver	mg/l	lbs	mg/l	lbs		
WEEK1	10	134	5	64	3		
WEEK2					3		
WEEK3					42		
WEEK4	9	135	4	42	23		

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

DMR Mailing ZIP CODE: 99801
MAJOR (SUB 01) \$

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

External Outfall
*** NO DISCHARGE

NAME: JUNEAU, CITY AND BOROUGH OF
ADDRESS: 155 SOUTH SEWARD,
JUNEAU, ALASKA 99801
FACILITY: JUNEAU-DOUGLAS TREATMENT PLANT
LOCATION: JUNEAU, ALASKA 99801
ATT: Tom Trego, WW Utilities Superintendent

AK-002321-3
PERMIT NUMBER

001 A
DISCHARGE NUMBER

MONITORING PERIOD			
YR	MO	DAY	TO
2011	7	31	2011
			2011
			2011

PARAMETER	QUANTITY OR LOADING				QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	VALUE	UNITS	UNITS	VALUE	VALUE	VALUE	UNITS			
Temperature, water deg C	MEASUREMENT	*****	*****	****	*****	*****	*****	19.3	0		
00010 1 0	PERMIT	*****	*****	*****	*****	*****	*****	*****	0		
Effluent Gross	MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	0		
Oxygen, dissolved (DO)	PERMIT	*****	*****	*****	*****	*****	*****	*****	0		
00300 10	MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	0		
Effluent Gross	PERMIT	*****	*****	*****	*****	*****	*****	*****	0		
BOD, 5-day, 20 deg C	MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	0		
00310 10	PERMIT	*****	*****	*****	*****	*****	*****	*****	0		
Effluent Gross	MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	0		
BOD, 5-day, 20 deg C	PERMIT	*****	*****	*****	*****	*****	*****	*****	0		
00310 G 0	MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	0		
Raw Sewage Influent	PERMIT	*****	*****	*****	*****	*****	*****	*****	0		
BOD, 5-day, 20 deg C	MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	0		
00310 W 0	PERMIT	*****	*****	*****	*****	*****	*****	*****	0		
See Comments	MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	0		
PH	PERMIT	*****	*****	*****	*****	*****	*****	*****	0		
00400 1 0	MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	0		
Effluent Gross	PERMIT	*****	*****	*****	*****	*****	*****	*****	0		
Solids, Total suspended	MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	0		
00530 1 0	PERMIT	*****	*****	*****	*****	*****	*****	*****	0		
Effluent Gross	MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	0		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	PERMIT	*****	*****	*****	*****	*****	*****	*****	0		
Tom Trego WW Utilities Superintendent	MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	0		

COMMENT AND EXPLANATION OF ANY VIOLATIONS

The reporting period was from 07/31/2011 through 8/27/2011.

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

Signature of Principal Executive Officer or Authorized Agent

2011 9 10

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

DMR Mailing ZIP CODE: 99801
MAJOR (SUB 01) \$

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

External Outfall
*** NO DISCHARGE

NAME: JUNEAU, CITY AND BOROUGH OF
ADDRESS: 155 SOUTH SEWARD,
JUNEAU, ALASKA 99801

AK-002321-3
PERMIT NUMBER

001 A
DISCHARGE NUMBER

FACILITY: JUNEAU-DOUGLAS TREATMENT PLANT
LOCATION: JUNEAU, ALASKA 99801

ATT: Tom Trego, WW Utilities Superintendent

FROM

MONITORING PERIOD			
YR	MO	DAY	TO
2011	7	31	2011
			2011
			2011

PARAMETER	QUANTITY OR LOADING			UNITS	QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	VALUE	VALUE		VALUE	VALUE	UNITS			
Solids, Total suspended	MEASUREMENT	*****	*****	*****	333	*****	0	0	Monthly	COMP24
00530 G 0	PERMIT	*****	*****	*****	Req. Mon MO AVG	*****	0	0	Monthly	COMP24
Raw Sewage Influent	REQUIREMENT	*****	*****	*****	10.0	*****	0	0	Monthly	COMP24
Solids, Total suspended	SAMPLE	135.0	*****	*****	45	*****	0	0	Monthly	COMP24
00530 W 0	MEASUREMENT	1035	*****	*****	Wkly AVG	*****	0	0	Monthly	COMP24
See Comments	PERMIT	Wkly AVG	*****	*****	N/A	N/A	0	0	Monthly	COMP24
Nitrogen, ammonia total (as N)	SAMPLE	N/A	*****	*****	Req. Mon, MO AVG	*****	0	0	Semi-annual	COMP24
00610 1 0	MEASUREMENT	Req. Mon, MO AVG	*****	*****	10	42	0	0	Monthly	COMP24
Effluent Gross	REQUIREMENT	*****	*****	*****	400	1200	0	0	Weekly	GRAB
Coliform, fecal MF, broth 44.5 C	SAMPLE	*****	*****	*****	42	*****	0	0	Weekly	GRAB
31616 1 0	MEASUREMENT	*****	*****	*****	800	*****	0	0	Weekly	GRAB
Effluent Gross	PERMIT	*****	*****	*****	Wkly GEO	*****	0	0	Continuous	RCORDR
Coliform, fecal MF, broth 44.5 C	REQUIREMENT	*****	*****	*****	99	*****	0	0	Continuous	RCORDR
31616 W 0	SAMPLE	1.61	*****	*****	*****	*****	0	0	Continuous	RCORDR
See Comments	MEASUREMENT	2.76	*****	*****	*****	*****	0	0	Continuous	RCORDR
Flow, in conduit or through treatment plant	PERMIT	MO AVG	*****	*****	*****	*****	0	0	Continuous	RCORDR
50050 1 0	REQUIREMENT	3.47	*****	*****	*****	*****	0	0	Continuous	RCORDR
Effluent Gross	SAMPLE	6.0	*****	*****	*****	*****	0	0	Continuous	RCORDR
BOD, 5-day, percent removal	MEASUREMENT	MO AVG	*****	*****	*****	*****	0	0	Continuous	RCORDR
81010 K 0	PERMIT	DAILY MAX	*****	*****	*****	*****	0	0	Continuous	RCORDR
Percent Removal	REQUIREMENT	*****	*****	*****	*****	*****	0	0	Continuous	RCORDR
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	PERMIT	*****	*****	*****	*****	*****	0	0	Continuous	RCORDR
Tom Trego	REQUIREMENT	*****	*****	*****	*****	*****	0	0	Continuous	RCORDR
W/W Utilities Superintendent	PERMIT	*****	*****	*****	*****	*****	0	0	Continuous	RCORDR

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.

Victoria Q. McLean
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

907 AREA CODE
586-0393 TELEPHONE NUMBER
9 MO DATE
2011 YEAR
10 DAY

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

The reporting period was from 07/31/2011 through 8/27/2011.

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

DMR Mailing ZIP CODE: 99801
MAJOR (SUB 01) \$

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: Tom Trego, WW Utilities Superintendent

AK-002321-3
PERMIT NUMBER

001 A
DISCHARGE NUMBER

External Outfall
*** NO DISCHARGE ***

MONITORING PERIOD		
YR	MO	DAY
2011	7	31
TO	YEAR	MO
2011	8	27

PARAMETER	SAMPLE MEASUREMENT PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	UNITS	VALUE	UNITS	VALUE	UNITS			
Solids, Total suspended, percent removal	81011 K 0 0	*****	*****	*****	*****	*****	0			
Percent removal		*****	*****	*****	*****	*****			MONTHLY	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Tom Trego
WW 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 including the possibility of false and imprisonment for knowing violations.

Tom Trego
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TYPED OR PRINTED

COMMENT AND EXPLANATION OF ANY VIOLATIONS

(Reference all attachments here)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

907	TELEPHONE AREA CODE	586-0393	PHONE NUMBER
2011	YEAR	9	DATE MO
			10 DAY

The reporting period was from 07/31/2011 through 8/27/2011.

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

DMR Mailing ZIP CODE: 99801
MAJOR (SUB 01)
UPSTREAM RECEIVING WATER External Outfall
*** NO DISCHARGE ***
REC-1
DISCHARGE NUMBER

PARAMETER	SAMPLE MEASUREMENT PERMIT REQUIREMENT	QUANTITY OR LOADING		UNITS	MONITORING PERIOD			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE		YR	MO	DAY			
Coliform, fecal MF, broth 44.5 C		*****	*****		2011	7	31	0	8	27
31616 1 0		*****	*****							
Effluent Gross		*****	*****						Monthly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Tom Trego
WW 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.

Tom Trego
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

907 AREA CODE
586-0393 TELEPHONE
9 MO
10 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS
TYPED OR PRINTED
The reporting period was from 07/31/2011 through 8/27/2011.
(Reference all attachments here)