

DMR REPORT

JUNEAU-DOUGLAS WASTEWATER TREATMENT FACILITY

Juneau, Alaska

September 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	28	51	0.64	2.0480														
MON	29	52	0.02	1.3850						12.8	6.7	6.8						
TUE	30	53	0.00	1.3200						13.7	7.0	6.3						
WED	31	51	0.28	1.6900						13.5	6.8	6.2						
THU	1	49	0.39	1.2610						12.7	7.0	7.0						2.0
FRI	2	50	0.34	1.3200						12.7	7.0	6.6						
SAT	3	52	0.72	2.0160														
SUN	4	50	0.48	1.9600														
MON	5	49	0.60	2.3870						12.4	6.9	6.7						
TUE	6	54	0.50	1.6670						13.0	6.7	6.4						
WED	7	55	0.00	1.2560	180	1679	182	1909		13.6	6.8	7.0	8.0	84	7			35
THU	8	48	0.89	2.0570						13.9	6.7	5.7						
FRI	9	54	0.04	1.1720						13.4	6.7	5.5						
SAT	10	50	0.00	1.0860														
SUN	11	48	0.00	0.9860														
MON	12	52	0.00	1.0300						13.2	6.5	6.0						
TUE	13	56	0.07	1.0360						17.4	6.8	5.2						
WED	14	53	0.80	1.8430	200	1613	292	2355		13.5	6.5	5.3	12.0	97	4			2
THU	15	48	0.00	0.9670						14.2	6.5	5.3						
FRI	16	50	0.02	0.8680						13.4	6.4	5.9						
SAT	17	49	0.05	0.8330														
SUN	18	49	0.08	0.8970														
MON	19	50	0.26	1.1550						13.6	6.6	5.5						
TUE	20	51	0.75	1.6930	272	3841	359	5069		13.4	6.8	5.4	9.0	127	7			99
WED	21	50	1.07	2.3600						13.3	6.7	6.4						50
THU	22	48	0.11	1.2540						12.4	6.9	7.5						
FRI	23	47	0.56	1.5110						12.7	6.7	6.7						
SAT	24	45	0.27	1.4770														
TOTAL			8.94	40.5370														
MAXIMUM	56		1.07	2.3870	272	3841	359	5069		17.4	7.0	7.5	12.0	127	7			99
MINIMUM	45		0.00	0.8330	180	1613	182	1909		12.4	6.4	5.2	8.0	84	4			34
AVERAGE	50		0.319	1.4478	211	2377	276	3111		13.4	6.7	6.2	9.7	103	6			67
Number of Analyses	28		28	28	3	3	3	3		20	20	20	3	3	3			3

% REMOVAL	
B.O.D.	98
S.S.	95

	Copper	NH3	NH3
	N/A	N/A	N/A
	NH3	N/A	N/A
	NH3	N/A	N/A

Receiving Water	Fecal	9/1/2011	< 2

Weekly	TSS, BOD		BOD		Weekly Coliform Geo. Mean
	Aver.	mg/l	lbs	mg/l	
WEEK1	8	84	7	69	2
WEEK2	12	97	4	67	35
WEEK3	9	127	7	99	2
WEEK4					50

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

001A  
DISCHARGE NUMBER

External Outfall  
\*\*\* NO DISCHARGE \*\*\*

MONITORING PERIOD			YEAR	MO	DAY
2011	8	28	2011	9	24

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION					NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE		VALUE	VALUE	VALUE	VALUE	UNITS			
Temperature, water deg. C	MEASUREMENT	*****	*****	****	*****	*****	17.4	0				
	PERMIT	*****	*****	*****	*****	*****	REPORT DAILY MAX					
Effluent Gross	MEASUREMENT	*****	*****	*****	*****	*****	7.5	0				
	PERMIT	*****	*****	*****	*****	*****	DAILY MAX					
Oxygen, dissolved (DO)	MEASUREMENT	*****	*****	****	*****	*****	2	0				
	PERMIT	*****	*****	*****	*****	*****	DAILY MIN.					
Effluent Gross	MEASUREMENT	*****	*****	*****	*****	*****	6	0				
	PERMIT	*****	*****	*****	*****	*****	30					
BOD, 5-day, 20 deg. C	MEASUREMENT	*****	*****	*****	*****	*****	278	0				
	PERMIT	*****	*****	*****	*****	*****	Req. Mon. MO AVG					
Raw Sewage Influent	MEASUREMENT	*****	*****	*****	*****	*****	7	0				
	PERMIT	*****	*****	*****	*****	*****	45					
BOD, 5-day, 20 deg. C	MEASUREMENT	*****	*****	*****	*****	*****	7.0	0				
	PERMIT	*****	*****	*****	*****	*****	WKL AVG					
pH	MEASUREMENT	*****	*****	****	*****	*****	6.4	0				
	PERMIT	*****	*****	*****	*****	*****	6.0					
Effluent Gross	MEASUREMENT	*****	*****	*****	*****	*****	8.5	0				
	PERMIT	*****	*****	*****	*****	*****	MINIMUM					
Solids, Total suspended	MEASUREMENT	*****	*****	*****	*****	*****	12	0				
	PERMIT	*****	*****	*****	*****	*****	MAXIMUM					
Effluent Gross	MEASUREMENT	*****	*****	*****	*****	*****	10	0				
	PERMIT	*****	*****	*****	*****	*****	30					
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	MEASUREMENT	*****	*****	*****	*****	*****	127	0				
	PERMIT	*****	*****	*****	*****	*****	MO AVG					
Tom Trego W/W Utilities Superintendent	MEASUREMENT	*****	*****	*****	*****	*****	1380	0				
	PERMIT	*****	*****	*****	*****	*****	DAILY MAX					
COMMENT AND EXPLANATION OF ANY VIOLATIONS	MEASUREMENT	*****	*****	*****	*****	*****	60	0				
	PERMIT	*****	*****	*****	*****	*****	mg/L					

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  
PHONE NUMBER  
2011 YEAR  
10 MO  
10 DAY

The reporting period was from 08/28/2011 through 9/24/2011. (Reference all attachments here)





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

**AK-002921-3**  
 PERMIT NUMBER

**REC-1**  
 DISCHARGE NUMBER

DMR Mailing ZIP CODE: 99801 \$  
 MAJOR (SUB 01)  
 UPSTREAM RECEIVING WATER  
 External Outfall  
 \*\*\* NO DISCHARGE \*\*\*

FROM

YR	MO	DAY
2011	8	28

MONITORING PERIOD		
TO	YEAR	MO DAY
2011	2011	9 24

PARAMETER	QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	VALUE		VALUE	VALUE	UNITS			
Coliform, fecal MF, broth 44.5 C	*****	*****		2.0		0			
31616 10 Effluent Gross	*****	*****		Req. Mon. DAILY MAX	#/ML100		Monthly	GRAB	

**NAME/TITLE PRINCIPAL EXECUTIVE OFFICER**  
 Tom Trego  
 W/W Utilities Superintendent

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

**COMMENT AND EXPLANATION OF ANY VIOLATIONS**  
 The reporting period was from 08/28/2011 through 9/24/2011.  
 (Reference all attachments here)