

JUNEAU-DOUGLAS WASTEWATER TREATMENT FACILITY

May 2012

Juneau, Alaska

DAY	WEATHER			FLOWS			INFLUENT				EFFLUENT							
	DATE	TEMP °F	RAIN FALL INCHES	J-D TTL EFFL MGD	S.S. mg/L	B.O.D. 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	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	29	48	0.66	1.201						10.1	7.3	5.0						
MON	30	41	0.55	0.948						11.4	7.4	4.9	6	42	2			
TUE	1	41	0.25	0.840	252	1765				13.4	6.7	6.4						
WED	2	42	0.13	0.894						11.3	7.3	4.9						
THU	3	43	0.11	0.943						10.6	7.5	5.8						
FRI	4	40	0.19	0.947														
SAT	5	41	0.32	1.202														
SUN	6	42	0.42	1.275														
MON	7	44	0.41	1.399						10.1	7.2	5.5						
TUE	8	40	0.44	1.184	248	2449	163	1610		11.5	7.2	5.5	5	49	39			
WED	9	39	0.21	1.071						9.3	7.3	6.2						
THU	10	40	0.32	1.286						10.0	7.0	5.7						
FRI	11	41	0.40	1.346						11.5	6.4	5.1						
SAT	12	42	0.66	1.551														
SUN	13	43	0.07	0.950														
MON	14	43	0.26	1.097						10.5	7.0	5.0			3			
TUE	15	39	0.06	0.842	436	3062	255	1791		11.0	7.2	4.8	14	98	56			
WED	16	41	0.10	0.811						10.4	7.1	4.8						
THU	17	46	0.00	0.804						10.6	7.3	4.5						
FRI	18	45	0.06	0.676						11.9	7.3	5.3						
SAT	19	47	0.01	0.729														
SUN	20	47	0.01	0.875														
MON	21	50	0.06	0.934						12.0	7.1	5.2						
TUE	22	51	0.07	0.788						13.3	7.2	5.6			4			
WED	23	46	0.21	0.930	456	3537	347	2691		13.3	7.2	5.6	7	54	39			
THU	24	50	0.00	0.751						12.6	7.1	5.1						
FRI	25	50	0.00	0.711						11.5	7.2	6.1						
SAT	26	47	0.22	0.831														
TOTAL			6.20	27.816														
MAXIMUM		51	0.66	1.551	456	3537	347	2691	13.4	7.5	6.4	14	98	8	56	37	NA	NA
MINIMUM		39	0.00	0.676	248	1765	163	1610	9.3	6.4	4.5	5	42	4	39	2	NA	NA
AVERAGE		44	0.221	0.993	348	2703	255	2031	11.3	7.1	5.4	8	61	6	45	12	NA	NA
Number Of Analyses		28	28	28	4	4	4	3	20	20	20	4	4	3	3	4	0	0

85%	
B.O.D.	98
S.S.	98

Weekly TSS, BOD	TSS		BOD	
	mg/l	lbs	mg/l	lbs
WEEK1	6	42		
WEEK2	5	49	4	39
WEEK3	14	98	8	56
WEEK4	7	54	5	39
WEEK5				
MAX	14	98	8	56
Weekly Coliform				37
Geo. Mean				2
				37
				3
				4

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

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

External Outfall
*** NO DISCHARGE

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

MONITORING PERIOD			
YR	MO	DAY	TO
2012	4	29	2012
DAY	MO	YEAR	DAY
		2012	26

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	VALUE	VALUE	VALUE	VALUE	UNITS				
Temperature, water deg. C	*****	*****	*****	*****	13.4		deg.C	0		
00010 10 Effluent Gross	*****	*****	*****	*****	REPORT DAILY MAX				WEEKDAYS	GRAB
Oxygen, dissolved (DO)	*****	*****	*****	*****	4.5			0		
00300 10 Effluent Gross	*****	*****	*****	*****	2		mg/L	0		
BOD, 5-day, 20 deg. C	*****	*****	*****	*****	DAILY MIN.				WEEKLY	GRAB
00310 10 Effluent Gross	*****	*****	*****	*****	45			0		
BOD, 5-day, 20 deg. C	*****	*****	*****	*****	6				MONTHLY	COMP24
00310 G 0 Raw Sewage Influent	*****	*****	*****	*****	30		mg/L	0		
BOD, 5-day, 20 deg. C	*****	*****	*****	*****	MO AVG DAILY MAX				MONTHLY	COMP24
00310 W 0	*****	*****	*****	*****	255			0		
See Comments	*****	*****	*****	*****	Req. Mon. MO AVG				MONTHLY	COMP24
pH	*****	*****	*****	*****	8			0		
00400 10 Effluent Gross	*****	*****	*****	*****	45		mg/L	0		
Solids, Total suspended	*****	*****	*****	*****	WKLY AVG				MONTHLY	COMP24
00530 10 Effluent Gross	*****	*****	*****	*****	6.4			0		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	*****	*****	*****	*****	6.0		SU		WEEKDAYS	GRAB
Tom Trego W/W Utilities Superintendent	*****	*****	*****	*****	MINIMUM				MONTHLY	COMP24
TYPED OR PRINTED	*****	*****	*****	*****	8			0		
COMMENT AND EXPLANATION OF ANY VIOLATIONS	*****	*****	*****	*****	30		mg/L		MONTHLY	COMP24
The reporting period was from 04/29/2012 through 05/26/2012.	*****	*****	*****	*****	MO AVG DAILY MAX				TELEPHONE	
	*****	*****	*****	*****	60				586-0393	
	*****	*****	*****	*****	14				PHONE NUMBER	
	*****	*****	*****	*****	8				DATE	
	*****	*****	*****	*****	8				2012	6
	*****	*****	*****	*****	30				YEAR	MO
	*****	*****	*****	*****	MO AVG DAILY MAX				10	DAY

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

(Reference all attachments here)

The reporting period was from 04/29/2012 through 05/26/2012.

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

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

External Outfall
*** NO DISCHARGE ***


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: Tom Trego, WW Utilities Superintendent

AK-002321-3
PERMIT NUMBER

001 A
DISCHARGE NUMBER

MONITORING PERIOD			
YR	MO	DAY	TO
2012	4	29	2012
YR	MO	DAY	TO
2012	5	5	26

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	UNITS	VALUE	UNITS			
Solids, Total suspended	MEASUREMENT	*****	*****	*****	*****	*****	0		
00530 G 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****			
Raw Sewage Influent	SAMPLE MEASUREMENT	98	*****	*****	*****	*****	0	Monthly	COMP24
Solids, Total suspended	PERMIT REQUIREMENT	*****	*****	*****	*****	*****			
00530 W 0	PERMIT REQUIREMENT	1035	*****	*****	*****	*****			
See Comments	SAMPLE MEASUREMENT	NA	*****	*****	*****	*****	0	Monthly	COMP24
Nitrogen, ammonia total (as N)	PERMIT REQUIREMENT	*****	*****	*****	*****	*****			
00610 1 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****			
Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0	Semi-annual	COMP24
Coliform, fecal MF, broth 44.5 C	PERMIT REQUIREMENT	*****	*****	*****	*****	*****			
31616 1 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****			
Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0	Weekly	GRAB
Coliform, fecal MF, broth 44.5 C	PERMIT REQUIREMENT	*****	*****	*****	*****	*****			
31616 W 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****			
See Comments	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0	Weekly	GRAB
Flow, in conduit or through treatment plant	PERMIT REQUIREMENT	*****	*****	*****	*****	*****			
50050 1 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0	Continuous	RCORDR
Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****			
BOD, 5-day, percent removal	PERMIT REQUIREMENT	*****	*****	*****	*****	*****			
81010 K 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****			
Percent Removal	PERMIT REQUIREMENT	*****	*****	*****	*****	*****			
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.								
Tom Trego W/W Utilities Superintendent	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT								
TYPED OR PRINTED	907 AREA CODE 2012 YEAR 6 MO 10 DAY TELEPHONE 586-0393 PHONE NUMBER DATE								

COMMENT AND EXPLANATION OF ANY VIOLATIONS
 (Reference all attachments here)
The reporting period was from 04/29/2012 through 05/26/2012.

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	YEAR	MO	DAY
2012	4	29	2012	5	26

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	UNITS	VALUE	UNITS	UNITS			
Solids, Total suspended, percent removal	*****	*****	*****	98	*****	*****	0		
81011 K 0 0	*****	*****	*****	85	*****	*****			
Percent removal	*****	*****	*****	MN % RMV	*****	*****		MONTHLY	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Tom Tread W/W 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 AREA CODE PHONE NUMBER
TYPED OR PRINTED		DATE
COMMENT AND EXPLANATION OF ANY VIOLATIONS The reporting period was from 04/29/2012 through 05/26/2012.	(Reference all attachments here)	907 586-0393
EPA Form 3320-1 (Rev. 01/06) Previous editions may be used.		2012 6 10 MO DAY

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

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

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

REC-1
DISCHARGE NUMBER

MONITORING PERIOD			
YR	MO	DAY	TO
2012	4	29	2012
YR	MO	DAY	TO
2012	5	26	2012

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

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Tom Trego W/W 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 AREA CODE: 907 PHONE NUMBER: 586-0393
TYPED OR PRINTED SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		SIGNATURE: <i>Tom Trego</i> OFFICER OR AUTHORIZED AGENT
COMMENT AND EXPLANATION OF ANY VIOLATIONS		
The reporting period was from 04/29/2012 through 05/26/2012 . (Reference all attachments here)		