

JUNEAU-DOUGLAS WASTEWATER TREATMENT FACILITY

December 2014

Juneau, Alaska

WEATHER		FLOWS			INFLUENT									EFFLUENT											
DAY	DATE	TEMP °F	RAIN FALL INCHES	J-D TTI, EFFL MGSD	TEMP °C	pH	DO mg/L	TSS mg/L	TSS LBS	BOD mg/L	BOD LBS	FOG mg/L	FOG LBS	NH3 mg/L	TEMP °C	pH	DO mg/L	TSS mg/L	TSS LBS	BOD mg/L	BOD LBS	FOG mg/L	Mixing Zone	FECAL Coliform /100 ml	Ammonia as N mg/l
SUN	30	27.50	0.00	0.58																					
MON	1	22.60	0.00	0.58											10.10	7.19	4.88								
TUE	2	34.70	0.00	1.17				232.00	2271.55	330.00	3231.08				12.30	7.07	4.38	8.00	78.33	9.00	88.12			13.00	
WED	3	35.10	0.96	0.87				240.00	1739.39	180.00	1304.54				9.90	6.87	4.76	8.00	57.98	10.00	72.47				
THU	4	27.60	0.07	0.65											11.20	6.88	6.41								
FRI	5	25.70	0.00	0.67											11.30	6.80	4.63								
SAT	6	32.60	0.00	0.69																					
SUN	7	36.40	0.08	0.95																					
MON	8	39.80	0.11	1.58											10.90	6.90	4.47					4.00	4.00		
TUE	9	39.10	0.65	1.27				180.00	1912.53	170.00	1806.28				9.90	6.80	4.86	4.40	46.75	4.10	43.56				
WED	10	37.70	0.58	0.95				94.00	746.33	110.00	873.36				9.80	6.72	5.20	9.20	73.05	5.60	44.46				
THU	11	37.00	0.12	0.81											10.70	6.82	5.54								
FRI	12	40.00	0.18	0.80											11.50	6.80	4.60								
SAT	13	41.00	0.11	0.73																					
SUN	14	41.00	0.06	0.67																					
MON	15	43.00	0.02	0.70											10.90	7.10	6.10								
TUE	16	39.00	0.11	0.67				264.00	1468.57	250.00	1390.70				10.90	7.10	4.20	4.40	24.48	4.10	22.81			26.00	
WED	17	36.00	0.52	1.15				184.00	1766.28	184.00	1766.28				10.70	6.90	4.50	6.00	57.60	7.00	67.20				
THU	18	38.00	0.00	0.65											10.90	6.90	5.40								
FRI	19	36.00	0.01	0.65											10.50	7.10	4.50								
SAT	20	42.00	0.03	0.69																					
SUN	21	38.00	0.17	0.84																					
MON	22	40.00	0.52	0.80				126.00	840.67	140.00	934.08				10.50	6.90	4.60	6.40	42.70	6.10	40.70			10.00	
TUE	23	37.00	0.11	0.75				134.00	837.05	150.00	937.00				10.20	6.90	6.40	4.40	27.49	5.10	31.86				
WED	24	32.00	0.00	0.84											10.40	6.70	4.50								
THU	25	37.00	0.31	0.75											10.70	6.60	5.10								
FRI	26	39.00	0.22	0.73											11.30	6.70	5.50								
SAT	27	33.00	0.22	0.62																					
TOTAL			5.16	22.79																					
MAXIMUM		43.00	0.96	1.58				264.00	2271.55	330.00	3231.08	0.00	0.00	0.00	12.30	7.19	6.41	9.20	78.33	10.00	88.12	0.00	4.00	26.00	0.00
MINIMUM		22.60	0.00	0.58				94.00	746.33	110.00	873.36	0.00	0.00	0.00	9.80	6.60	4.20	4.40	24.48	4.10	22.81	0.00	4.00	4.00	0.00
AVERAGE*		35.99	0.18	0.81				181.75	1447.80	189.25	1530.42	N/A	N/A	N/A	10.73	6.73	5.03	6.35	51.05	6.38	51.40	N/A	4.00	10.78	N/A
Number Of Analyses		28	28	28	0	0	0	8	8	8	8	0	0	0	20	20	28	8	8	8	8	8	0	4	0

85%	
BOD	97
TSS	97

Weekly	TSS, BOD				Weekly
Aver.	mg/l	lbs	mg/l	lbs	Coliform
WEEK1	8.00	68.15	9.50	80.30	Geo Mean
WEEK2	6.80	59.90	4.85	44.01	13.00
WEEK3	5.20	41.04	5.55	45.00	4.00
WEEK4	5.40	35.09	5.60	36.28	26.00
MAX	8.00	68.15	9.50	80.30	10.00

Comments:

**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:** Jim Westcott, WW Utilities Senior Operator

**AK-002321-3**  
PERMIT NUMBER

**001 A**  
DISCHARGE NUMBER

MONITORING PERIOD						
YR	MO	DAY	TO	YEAR	MO	DAY
2014	11	30		2014	12	27

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Temperature, water deg. C	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	12.30		0		
00010 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	deg.C		WEEKDAYS	GRAB
Oxygen, dissolved (DO)	SAMPLE MEASUREMENT	*****	*****	****	4.20	*****	6.41		0		
00300 10 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	2 DAILY MIN.	*****	17 DAILY MAX	mg/L		WEEKLY	GRAB
BOD, 5-day, 20 deg. C	SAMPLE MEASUREMENT	51.40	88.12		*****	6.38	10.00		0		
00310 10 Effluent Gross	PERMIT REQUIREMENT	690 MO AVG	1380 DAILY MAX	lbs/d	*****	30 MO AVG	60 DAILY MAX	mg/L		MONTHLY	COMP24
BOD, 5-day, 20 deg. C	SAMPLE MEASUREMENT	*****	*****	****	*****	189.25	*****		0		
00310 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. MO AVG	*****	mg/L		MONTHLY	COMP24
BOD, 5-day, 20 deg. C	SAMPLE MEASUREMENT	80.30	*****		*****	9.50	*****		0		
00310 W 0 See Comments	PERMIT REQUIREMENT	1035 WKLY AVG	*****	lbs/d	*****	45 WKLY AVG	*****	mg/L		MONTHLY	COMP24
pH	SAMPLE MEASUREMENT	*****	*****	****	6.60	*****	7.19		0		
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	8.5 MAXIMUM	SU		WEEKDAYS	GRAB
Solids, Total suspended	SAMPLE MEASUREMENT	51.05	78.33		*****	6.35	9.20		0		
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	690 MO AVG	1380 DAILY MAX	lbs/d	*****	30 MO AVG	60 DAILY MAX	mg/L		MONTHLY	COMP24

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
Jim Westcott  
W/W Utilities Senior Operator

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.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE  
907 AREA CODE 586-0393  
PHONE NUMBER  
DATE  
2015 YEAR 1 MO 7 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS  
*(Reference all attachments here)*  
**The reporting period was from 11/30/2014 through 12/27/2014.**

**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:** Jim Westcott, WW Utilities Senior Operator

**AK-002321-3**  
PERMIT NUMBER

**001 A**  
DISCHARGE NUMBER

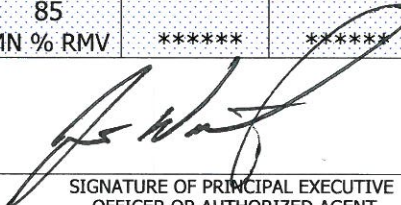
External Outfall  
\*\*\* NO DISCHARGE  \*\*\*

MONITORING PERIOD						
YR	MO	DAY	TO	YEAR	MO	DAY
2014	11	30		2014	12	27

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, Total suspended	MEASUREMENT	*****	*****	*****	*****	181.75	*****	*****	0		
00530 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon MO AVG	*****	mg/L		Monthly	COMP24
Solids, Total suspended	MEASUREMENT	68.15	*****	*****	*****	8.00	*****		0		
00530 W 0 See Comments	PERMIT REQUIREMENT	1035 WKLY AVG	*****	lb/d	*****	45 WKLY AVG	*****	mg/L		Monthly	COMP24
Nitrogen, ammonia total (as N)	MEASUREMENT	N/A	N/A	*****	*****	N/A	N/A		0		
00610 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MAX	lb/d	*****	Req. Mon, MO AVG	Req. Mon, DAILY MAX	mg/L		Semi-annual	COMP24
Coliform, fecal MF, broth 44.5 C	MEASUREMENT	*****	*****	*****	*****	10.78	26.00		0		
31616 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	400 MO GEO	1200 DAILY MAX	#100/ml		Weekly	GRAB
Coliform, fecal MF, broth 44.5 C	MEASUREMENT	*****	*****	*****	*****	26.00	*****		0		
31616 W 0 See Comments	PERMIT REQUIREMENT	*****	*****	*****	*****	800 WKLY GEO	*****	#100/ml		Weekly	GRAB
Flow, in conduit or through treatment plant	MEASUREMENT	0.81	1.58	*****	*****	*****	*****	****	0		
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	2.76 MO AVG	6.0 DAILY MAX	Mgal/d	*****	*****	*****			Continuous	RCORDR
BOD, 5-day,percent removal	MEASUREMENT	*****	*****	*****	*****	96.63	*****	****	0		
81010 K 0 Percent Removal	PERMIT REQUIREMENT	*****	*****	*****	*****	85 MN % RMV	*****	% Percent		Monthly	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
Jim Westcott  
W/W Utilities Senior Operator

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.

  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE  
907 AREA CODE 586-0393  
PHONE NUMBER  
DATE  
2015 YEAR 1 MO 7 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
**The reporting period was from 11/30/2014 through 12/27/2014.**

**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:** Jim Westcott, WW Utilities Senior Operator

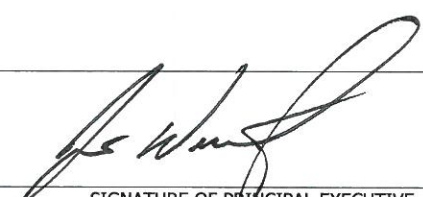
**AK-002321-3**  
PERMIT NUMBER

**001 A**  
DISCHARGE NUMBER

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

MONITORING PERIOD						
YR	MO	DAY	TO	YEAR	MO	DAY
2014	11	30		2014	12	27

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, Total suspended, percent removal 81011 K 0 0 Percent removal	SAMPLE MEASUREMENT	*****	*****	*****	96.51	*****	*****		0		
	PERMIT REQUIREMENT	*****	*****	*****	85 MN % RMV	*****	*****	% PERCENT		MONTHLY	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Jim Westcott W/W Utilities Senior Operator	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		
			907 AREA CODE	586-0393	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	PHONE NUMBER DATE		
			2015 YEAR	1 MO	7 DAY
COMMENT AND EXPLANATION OF ANY VIOLATIONS <b>The reporting period was from 11/30/2014 through 12/27/2014.</b> <i>(Reference all attachments here)</i>					

**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)


<b>NAME:</b>	JUNEAU, CITY AND BOROUGH OF
<b>ADDRESS:</b>	155 SOUTH SEWARD, JUNEAU, ALASKA 99801
<b>FACILITY:</b>	<b>JUNEAU-DOUGLAS TREATMENT PLANT</b>
<b>LOCATION:</b>	JUNEAU, ALASKA 99801
<b>ATT:</b>	Jim Westcott, WW Utilities Senior Operator

<b>AK-002321-3</b>
PERMIT NUMBER

<b>REC-1</b>
DISCHARGE NUMBER

MONITORING PERIOD						
YR	MO	DAY	TO	YEAR	MO	DAY
2014	11	30		2014	12	27

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Coliform, fecal MF, broth 44.5 C	SAMPLE MEASUREMENT	*****	*****		*****	*****	4.00		0	1	
31616 10 Effluent Gross	PERMIT REQUIREMENT	*****	*****		*****	*****	Req. Mon. #/ DAILY MAX ML100			Monthly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Jim Westcott W/W Utilities Senior Operator	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		
			907 AREA CODE	586-0393 PHONE NUMBER	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	2015 YEAR	1 MO	7 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*  
**The reporting period was from 11/30/2014 through 12/27/2014.**

Am Test Inc.  
 13600 NE 126TH PL  
 Suite C  
 Kirkland, WA 98034  
 (425) 885-1664  
 www.amtestlab.com



Professional  
 Analytical  
 Services

**ANALYSIS REPORT**

City and Borough of Juneau WWU  
 2009 Radcliffe Rd.  
 Juneau, AK 99801  
 Attention: Marissa Capito  
 Project Name: CBJ JDTP-4th Quarter  
 All results reported on an as received basis.

Date Received: 12/09/14  
 Date Reported: 12/30/14

AMTEST Identification Number      14-A019194  
 Client Identification                 Final Effluent  
 Sampling Date                         12/08/14, 08:16

**Conventionals**

PARAMETER	RESULT	UNITS	Q	D.L.	METHOD	ANALYST	DATE
Total Cyanide	0.022	mg/l		0.005	EPA 335.4	MR	12/12/14
Total Oil and Grease	2.0	mg/l		1	EPA 1664	ED	12/10/14
Total Phenol	< 0.01	mg/L		0.01	EPA 420.4	MR	12/18/14
Total Dissolved Solids	1600	mg/l		1	SM 2540C	BP	12/09/14

**Nutrients**

PARAMETER	RESULT	UNITS	Q	D.L.	METHOD	ANALYST	DATE
Ammonia Nitrogen	7.96	mg/l		0.005	EPA 350.1	MR	12/09/14
Total Nitrogen (TKN)	9.00	mg/l		0.1	EPA 351.2	BP	12/12/14
Nitrate + Nitrite	3.1	mg/l		0.02	EPA 353.2	MR	12/15/14

**ICP/MS Metals 200.8**

PARAMETER	RESULT	UNITS	Q	D.L.	METHOD	ANALYST	DATE
Aluminum	15.8	ug/L		0.5	EPA 200.8	SW	12/17/14
Antimony	0.21	ug/L		0.03	EPA 200.8	SW	12/17/14
Arsenic	3.17	ug/L		0.02	EPA 200.8	SW	12/17/14
Barium	43.4	ug/L		0.25	EPA 200.8	SW	12/17/14
Beryllium	0.04	ug/L		0.03	EPA 200.8	SW	12/17/14
Cadmium	< 0.025	ug/L		0.025	EPA 200.8	SW	12/17/14
Chromium	0.67	ug/L		0.05	EPA 200.8	SW	12/17/14
Cobalt	< 0.5	ug/L		0.5	EPA 200.8	SW	12/17/14
Copper	7.96	ug/L		0.1	EPA 200.8	SW	12/17/14
Lead	0.306	ug/L		0.05	EPA 200.8	SW	12/17/14
Manganese	46.8	ug/L		0.03	EPA 200.8	SW	12/17/14
Molybdenum	0.60	ug/L		0.05	EPA 200.8	SW	12/17/14
Nickel	2.12	ug/L		0.05	EPA 200.8	SW	12/17/14
Selenium	8.65	ug/L		0.25	EPA 200.8	SW	12/17/14

**ICP/MS Metals 200.8 continued...**

PARAMETER	RESULT	UNITS	Q	D.L.	METHOD	ANALYST	DATE
Silver	< 0.05	ug/L		0.05	EPA 200.8	SW	12/17/14
Thallium	< 0.005	ug/L		0.005	EPA 200.8	SW	12/17/14
Vanadium	< 0.015	ug/L		0.015	EPA 200.8	SW	12/17/14
Zinc	37.8	ug/L		0.5	EPA 200.8	SW	12/17/14

**Total Metals**

PARAMETER	RESULT	UNITS	Q	D.L.	METHOD	ANALYST	DATE
Mercury - Trace	0.00287	ug/L		0.0005	EPA 1631e	Sublet	12/11/14

**Volatile Organic Analysis (VOA's)**

PARAMETER	RESULT	UNITS	Q	D.L.	METHOD	ANALYST	DATE
1,1,1,2-Tetrachloroethane	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
1,1,1-Trichloroethane	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
1,1,2,2-Tetrachloroethane	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
1,1,2-Trichloroethane	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
1,1-Dichloroethane	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
1,1-Dichloroethylene	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
1,2,3-Trichloropropane	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
1,2-Dibromo3Chloropropane	< 5	ug/l		5.0	EPA 624	NLN	12/12/14
1,2-Dibromoethane (EDB)	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
1,2-Dichlorobenzene	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
1,2-Dichloroethane	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
1,2-Dichloropropane	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
1,3-Dichlorobenzene	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
1,4-Dichlorobenzene	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
2-Butanone (MEK)	< 5	ug/l		5.0	EPA 624	NLN	12/12/14
2-Hexanone	< 5	ug/l		5.0	EPA 624	NLN	12/12/14
4-Methyl-2-Pentanone MIBK	< 5	ug/l		5.0	EPA 624	NLN	12/12/14
Acetone	< 5	ug/l		5.0	EPA 624	NLN	12/12/14
Acrylonitrile	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Benzene	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Bromochloromethane	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Bromodichloromethane	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Bromoform	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Bromomethane	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Carbon Disulfide	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Carbon Tetrachloride	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Chlorobenzene	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Chlorodibromomethane	< 1	ug/l		1.0	EPA 624	NLN	12/12/14

**Volatile Organic Analysis (VOA's) continued...**

PARAMETER	RESULT	UNITS	Q	D.L.	METHOD	ANALYST	DATE
Chloroethane	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Chloroform	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Chloromethane	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Cis-1,2-Dichloroethene	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Cis-1,3-Dichloropropene	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Dibromomethane	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Ethyl Benzene	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
m,p Xylene	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Methyl Iodide	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Methylene Chloride	< 2	ug/l		2.0	EPA 624	NLN	12/12/14
o-Xylene	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Styrene	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Tetrachloroethylene	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Toluene	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Trans-1,2-Dichloroethene	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Trans-1,3-Dichloropropene	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
trans-1,4-Dichloro2butene	< 5	ug/l		5.0	EPA 624	NLN	12/12/14
Trichloroethylene	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Trichlorofluoromethane	< 1	ug/l		1.0	EPA 624	NLN	12/12/14
Vinyl Acetate	< 5	ug/l		5.0	EPA 624	NLN	12/12/14
Vinyl Chloride	< 1	ug/l		1.0	EPA 624	NLN	12/12/14

**VOA Surrogates**

ANALYTE	% RECOVERY	LIMITS
D4-1,2,-Dichloroethane	105. %	70.9 - 129.
D8-Toluene	108. %	60.7 - 140.
4-Bromofluorobenzene	101. %	68.0 - 120.



**Semi-Volatiles**

PARAMETER	RESULT	UNITS	Q	D.L.	METHOD	ANALYST	DATE
1,2,4-Trichlorobenzene	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
1,2-Dichlorobenzene	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
1,3-Dichlorobenzene	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
1,4-Dichlorobenzene	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
2,4,5-Trichlorophenol	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
2,4,6-Trichlorophenol	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
2,4-Dichlorophenol	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
2,4-Dimethylphenol	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
2,4-Dinitrophenol	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
2,4-Dinitrotoluene	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
2,6-Dinitrotoluene	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
2-Chloronaphthalene	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
2-Chlorophenol	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
2-Methylphenol	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
2-Nitroaniline	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
2-Nitrophenol	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
3,3-Dichlorobenzidine	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
3-Nitroaniline	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
4,6-Dinitro-2-methylpheno	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
4-Bromophenyl-phenyl ethe	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
4-Chloro-3-methylphenol	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
4-Chloroaniline	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
4-Chlorophenyl-phenyl eth	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
4-Methylphenol (P.Cresol)	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
4-Nitroaniline	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
4-Nitrophenol	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
Aniline	< 1.9	ug/l		1.9	EPA 625	NLN	12/12/14
Azobenzene	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
Benzidine	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
Benzoic Acid	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
Benzyl Alcohol	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
bis(2-Chloroethoxy)methan	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
bis(2-Chloroethyl)ether	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
bis(2-Chloroisopropyl)eth	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
bis(2-Ethylhexyl)phthalat	< 1	ug/l		0.97	EPA 625-SIM	NLN	12/10/14
Butylbenzylphthalate	< 1	ug/l		0.97	EPA 625-SIM	NLN	12/10/14
Carbazole	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
Chlorpyrifos	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
Diazinon	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14

**Semi-Volatiles continued...**

PARAMETER	RESULT	UNITS	Q	D.L.	METHOD	ANALYST	DATE
Dibenzofuran	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
Dichlobenil	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
Diethylphthalate	< 1	ug/l		0.97	EPA 625-SIM	NLN	12/10/14
Dimethylphthalate	< 1	ug/l		0.97	EPA 625-SIM	NLN	12/10/14
Di-n-butylphthalate	< 1	ug/l		0.97	EPA 625-SIM	NLN	12/10/14
Hexachlorobenzene	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
Hexachlorobutadiene	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
Hexachlorocyclopentadiene	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
Hexachloroethane	< 1	ug/l		0.97	EPA 625	NLN	12/12/14
Isophorone	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
Malathion	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
Nitrobenzene	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
N-Nitrosodimethylamine	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
N-Nitroso-di-n-propylamin	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
N-nitrosodiphenylamine	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
Pentachlorophenol	< 0.5	ug/l		0.48	EPA 625-SIM	NLN	12/10/14
Phenol	< 2	ug/l		1.9	EPA 625	NLN	12/12/14
Prometon	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14

**Polynuclear Aromatic Hydrocarbons (PAH)**

PARAMETER	RESULT	UNITS	Q	D.L.	METHOD	ANALYST	DATE
1-Methylnaphthalene	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
2-Methylnaphthalene	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
Acenaphthene	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
Acenaphthylene	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
Anthracene	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
Benzo(a)anthracene	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
Benzo(a)pyrene	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
Benzo(b)fluoranthene	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
Benzo(ghi)perylene	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
Benzo(k)fluoranthene	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
Chrysene	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
Dibenzo(ah)anthracene	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
Di-n-octylphthalate	< 1	ug/l		0.97	EPA 625-SIM	NLN	12/10/14
Fluoranthene	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
Fluorene	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
Indeno(123-cd)pyrene	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
Naphthalene	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14
Phenanthrene	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14

**Polynuclear Aromatic Hydrocarbons (PAH) continued...**

PARAMETER	RESULT	UNITS	Q	D.L.	METHOD	ANALYST	DATE
Pyrene	< 0.1	ug/l		0.10	EPA 625-SIM	NLN	12/10/14

**Semi-Volatile Surrogates**

ANALYTE	% RECOVERY	LIMITS
D5-Nitrobenzene	88.9 %	22.0 - 114.
2-Fluorobiphenyl	67.9 %	17.4 - 113.
D14-Terphenyl	71.5 %	29.6 - 142.

**Organo-chlorine Pesticides**

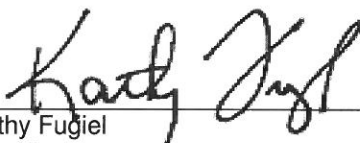
PARAMETER	RESULT	UNITS	Q	D.L.	METHOD	ANALYST	DATE
Alpha BHC	< 0.029	ug/l		0.029	EPA 608	NLN	12/16/14
Lindane (Gamma BHC)	< 0.029	ug/l		0.029	EPA 608	NLN	12/16/14
Heptachlor	< 0.029	ug/l		0.029	EPA 608	NLN	12/16/14
Aldrin	< 0.029	ug/l		0.029	EPA 608	NLN	12/16/14
Beta-BHC	< 0.029	ug/l		0.029	EPA 608	NLN	12/16/14
Delta-BHC	< 0.029	ug/l		0.029	EPA 608	NLN	12/16/14
Heptachlor Epoxide	< 0.029	ug/l		0.029	EPA 608	NLN	12/16/14
Endosulfan I	< 0.029	ug/l		0.029	EPA 608	NLN	12/16/14
pp-DDE	< 0.029	ug/l		0.029	EPA 608	NLN	12/16/14
Dieldrin	< 0.029	ug/l		0.029	EPA 608	NLN	12/16/14
Endrin	< 0.029	ug/l		0.029	EPA 608	NLN	12/16/14
pp-DDD	< 0.029	ug/l		0.029	EPA 608	NLN	12/16/14
Endosulfan II	< 0.029	ug/l		0.029	EPA 608	NLN	12/16/14
pp-DDT	< 0.029	ug/l		0.029	EPA 608	NLN	12/16/14
Endrin Aldehyde	< 0.029	ug/l		0.029	EPA 608	NLN	12/16/14
Endosulfan Sulfate	< 0.029	ug/l		0.029	EPA 608	NLN	12/16/14
Methoxychlor	< 0.029	ug/l		0.029	EPA 608	NLN	12/16/14
Toxaphene	< 0.238	ug/l		0.238	EPA 608	NLN	12/16/14
Chlordane	< 0.095	ug/l		0.095	EPA 608	NLN	12/16/14

**PCB's**

PARAMETER	RESULT	UNITS	Q	D.L.	METHOD	ANALYST	DATE
PCB-1016	< 0.48	ug/L		0.476	EPA 608	NLN	12/17/14
PCB-1221	< 0.48	ug/L		0.476	EPA 608	NLN	12/17/14
PCB-1232	< 0.48	ug/L		0.476	EPA 608	NLN	12/17/14
PCB-1242	< 0.48	ug/L		0.476	EPA 608	NLN	12/17/14
PCB-1248	< 0.48	ug/L		0.476	EPA 608	NLN	12/17/14
PCB-1254	< 0.48	ug/L		0.476	EPA 608	NLN	12/17/14
PCB-1260	< 0.48	ug/L		0.476	EPA 608	NLN	12/17/14

**Surrogates**

ANALYTE	% RECOVERY	LIMITS
Tetrachloro-m-xylene	87.0 % Rec	37.5 - 150.
Decachlorobiphenyl	91.3 % Rec	35.1 - 155.

  
Kathy Fugiel  
President

# Alaska Department of Environmental Conservation Monthly Discharge Monitoring Report (DMR)

CONTACT NAME: Mark Mow  
 MAILING ADDRESS: 155 S. Seward Street  
 Juneau, AK 99801  
 PERMIT NUMBER: AK0023213

FACILITY: JUNEAU DOUGLAS WW TREATMENT FACILITY  
 LOCATION: 1540 Thane Rd  
 Juneau, AK 99801

MONITORING PERIOD: 12/1/2014 TO 12/31/2014  
 MONITORING POINT: 004 (N-15.1) (R) Douglas NO DISCHARGE: X

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
Biochemical Oxygen Demand (BOD5) 1 - Final Effluent 00310 R	Sample meas.				*****						
	Permit reqmt.	Report monthly average	Report daily maximum	lbs/day	*****	Report monthly average	Report daily maximum	mg/l		When Discharging	Grab
Total Suspended Solids 1 - Final Effluent 00530 R	Sample meas.				*****						
	Permit reqmt.	Report monthly average	Report daily maximum	lbs/day	*****	Report monthly average	Report daily maximum	mg/l		When Discharging	Grab
Coliform, fecal MF, M-FC broth, 44.5 C 1 - Final Effluent 31616 R	Sample meas.	*****	*****		*****						
	Permit reqmt.	*****	*****		*****	Report monthly geometric mean	Report daily maximum	cts/100 ml		When Discharging	Grab
Flow 1 - Final Effluent 50050 R	Sample meas.				*****	*****	*****				
	Permit reqmt.	Report monthly average	Report daily maximum	MGD	*****	*****	*****			When Discharging	Recorded
Duration of Discharge 1 - Final Effluent 81381 R	Sample meas.	*****			*****	*****	*****				
	Permit reqmt.	*****	report daily maximum	min/day	*****	*****	*****			When Discharging	Instantaneous Reading

COMMENTS:

Mail this report when completed to ADEC, Division of Water, 555 Cordova Street, Anchorage, AK 99501-2617  
 Attach an explanation of any violations. Reference all attachments below.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  <div style="font-family: cursive; font-size: 1.2em; margin-bottom: 5px;">                     MARK J. MOW / SR. OPERATOR                 </div> TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that 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.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  <div style="font-family: cursive; font-size: 1.5em; margin-bottom: 5px;">                     Mark J. Mow                 </div>	TELEPHONE  (907) 790-2525	DATE  1/2/15
		OFFICER OR AUTHORIZED AGENT	AREA   NUMBER	Y   M   D

# Alaska Department of Environmental Conservation Monthly Discharge Monitoring Report (DMR)

CONTACT NAME: Mark Mow  
 MAILING ADDRESS: 155 S. Seward Street  
 Juneau, AK 99801  
 PERMIT NUMBER: AK0023213

FACILITY: JUNEAU DOUGLAS WW TREATMENT FACILITY  
 LOCATION: 1540 Thane Rd  
 Juneau, AK 99801

MONITORING PERIOD: 12/1/2014 TO 12/31/2014  
 MONITORING POINT: 003 (N11.2) (Q) Sta C NO DISCHARGE: X

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
Biochemical Oxygen Demand (BOD5) 1 - Final Effluent 00310 Q	Sample meas.				*****						
	Permit reqmt.	Report monthly average	Report daily maximum	lbs/day	*****	Report monthly average	Report daily maximum	mg/l		When Discharging	Grab
Total Suspended Solids 1 - Final Effluent 00530 Q	Sample meas.				*****						
	Permit reqmt.	Report monthly average	Report daily maximum	lbs/day	*****	Report monthly average	Report daily maximum	mg/l		When Discharging	Grab
Coliform, fecal MF, M-FC broth, 44.5 C 1 - Final Effluent 31616 Q	Sample meas.	*****	*****		*****						
	Permit reqmt.	*****	*****		*****	Report monthly geometric mean	Report daily maximum	cts/100 ml		When Discharging	Grab
Flow 1 - Final Effluent 50050 Q	Sample meas.	*****			*****	*****	*****				
	Permit reqmt.	*****	Report daily maximum	MGD	*****	*****	*****			When Discharging	Recorded
Duration of Discharge 1 - Final Effluent 81381 Q	Sample meas.	*****			*****	*****	*****				
	Permit reqmt.	*****	report daily maximum	min/day	*****	*****	*****			When Discharging	Recorded

COMMENTS:

Mail this report when completed to ADEC, Division of Water, 555 Cordova Street, Anchorage, AK 99501-2617  
 Attach an explanation of any violations. Reference all attachments below.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  <div style="font-family: cursive; font-size: 1.2em; margin-top: 10px;">                     MARK J. MOW / SR. OPERATOR                 </div> TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that 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 <div style="font-family: cursive; font-size: 1.2em; margin-top: 10px;">                     (907) 790-2525                 </div> AREA   NUMBER	DATE <div style="font-family: cursive; font-size: 1.2em; margin-top: 10px;">                     1/2/15                 </div> Y   M   D
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <div style="font-family: cursive; font-size: 1.5em; margin-top: 10px;">                     Mark J. Mow                 </div>			

# Alaska Department of Environmental Conservation Monthly Discharge Monitoring Report (DMR)

CONTACT NAME: Mark Mow  
 MAILING ADDRESS: 155 S. Seward Street  
 Juneau, AK 99801  
 PERMIT NUMBER: AK0023213

FACILITY: JUNEAU DOUGLAS WW TREATMENT FACILITY  
 LOCATION: 1540 Thane Rd  
 Juneau, AK 99801

MONITORING PERIOD: 12/1/2014 TO 12/31/2014  
 MONITORING POINT: 002 (N-11) (P) Sta AE NO DISCHARGE: X

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
Biochemical Oxygen Demand (BOD5)  1 - Final Effluent 00310 P	Sample meas.				*****						
	Permit reqmt.	report monthly average	report daily maximum	lbs/day	*****	report monthly average	report daily maximum	mg/l		When Discharging	Grab
Total Suspended Solids  1 - Final Effluent 00530 P	Sample meas.				*****						
	Permit reqmt.	report monthly average	report daily maximum	lbs/day	*****	report monthly average	report maximum monthly average	mg/l		When Discharging	Grab
Coliform, fecal MF, M-FC broth, 44.5 C  1 - Final Effluent 31616 P	Sample meas.	*****	*****		*****						
	Permit reqmt.	*****	*****		*****	report monthly geometric mean	report daily maximum	cts/100 ml		When Discharging	Grab
Flow  1 - Final Effluent 50050 P	Sample meas.	*****			*****	*****	*****				
	Permit reqmt.	*****	report daily maximum	MGD	*****	*****	*****			When Discharging	Recorded
Duration of Discharge  1 - Final Effluent 81381 P	Sample meas.	*****			*****	*****	*****				
	Permit reqmt.	*****	Report daily maximum	min/day	*****	*****	*****			When Discharging	Recorded

COMMENTS:

Mail this report when completed to ADEC, Division of Water, 555 Cordova Street, Anchorage, AK 99501-2617  
 Attach an explanation of any violations. Reference all attachments below.

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 a system designed to assure that 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	DATE
<i>MARK J. MOW / SR. OPERATOR</i>	<i>Mark J. Mow.</i>	(907) 790-2525	1/2/15
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA   NUMBER	Y   M   D