

JUNEAU-DOUGLAS WASTEWATER TREATMENT FACILITY

Juneau, Alaska

September 2015

Influent															Effluent								
DAY	DATE	TEMP °F	RAIN FALL INCHES	J-D TTL EFFL MGD	TEMP °C	pH	D.O. mg/L	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	Enterro Fecal	Composite NH3	Channel Fecal	FECAL Coliform /100 ml	
SUN	30	49	0.35	2.392																			
MON	31	48	1.05	2.073	13.4	7.4	6.0					13.3	6.9	7.0									
TUE	1	50	0.60	1.191	13.5	7.3	5.8	280.0	2781.2	350.0	3476.5	13.7	6.9	5.3	5.6	55.6	3.60	38.8				1.0	
WED	2	51	0.00	1.152	13.9	7.5	4.8	184.0	1767.8	250.0	2786.2	14.2	6.9	4.6	1.0	9.0	3.5	33.6					
THU	3	53	0.00	0.964	14.1	7.5	4.4					15.3	7.2	4.2									
FRI	4	53	0.00	0.804	13.6	7.3	0.6					15.8	7.2	3.8									
SAT	5	54	0.03	0.828																			
SUN	6	53	0.02	0.902																			
MON	7	52	0.50	1.052	14.5	7.4	4.1					15.9	7.0	4.5									
TUE	8	51	0.15	0.871	15.1	7.4	3.0	360.0	2615.1	490.0	3559.4	16.0	7.1	3.8	1.0	7.3	4.1	29.8				3.0	
WED	9	53	T	1.941	14.8	7.5	2.7	780.0	12626.6	1200.0	19425.5	16.2	7.2	4.0	6.0	97.1	6.0	97.1					
THU	10	54	1.90	4.806	14.6	7.7	5.6					16.0	7.6	5.1									
FRI	11	55	1.98	1.610	14.0	7.4	8.5					15.0	6.9	5.2									
SAT	12	51	0.10	1.223																			
SUN	13	50	0.41	1.021																			
MON	14	48	0.01	1.086	14.0	7.5	4.1					14.8	7.1	4.4									
TUE	15	49	0.22	1.134	13.8	7.5	5.3	186.0	1759.1	420.0	3972.2	15.0	7.1	4.4	27.0	255.4	4.3	40.7				3.0	
WED	16	48	0.41	1.405	14.1	7.4	5.4	71.0	832.0	140.0	1640.5	14.6	6.9	4.9	1.0	11.7	4.6	53.9					
THU	17	50	0.65	3.325	13.1	7.7	5.2					14.8	7.0	4.4									
FRI	18	49	2.05	2.433	12.2	7.1	7.6					13.4	6.6	5.6									
SAT	19	47	0.29	1.629																			
SUN	20	47	0.54	1.435																			
MON	21	45	0.38	1.205	13.1	7.4	5.7					13.1	6.9	5.6									
TUE	22	45	0.24	0.918	12.7	7.5	4.8	312.0	2388.7	340.0	2603.1	13.0	6.8	5.4	1.0	7.7	2.0	15.3					
WED	23	47	0.04	0.902	13.2	7.5	4.6	51.0	383.7	76.0	571.7	13.7	6.6	5.5	1.0	7.5	0.5	3.8	1.0	0.11	1.0	1.0	
THU	24	45	0.00	0.762	13.1	7.5	4.4					13.6	6.6	5.5									
FRI	25	46	0.11	0.853	13.6	7.6	3.6					15.2	6.6	5.2									
SAT	26	46	0.44	1.489																			
SUN	27	50	0.75	1.760																			
MON	28	53	1.20	4.271	12.9	7.4	6.8					13.2	6.8	6.5									
TUE	29	54	2.50	3.196	13.0	7.3	8.7	178.0	4744.5	140.0	3731.6	12.4	7.0	7.4	4.1	109	16.0	426				31.0	
WED	30	47	0.81	1.476	11.8	7.4	7.8	67.0	824.8	79.0	972.5	11.9	7.1	8.5	1.0	12.3	2.1	25.9					
THU	1	46	0.12	0.934	12.8	7.4	6.4					12.3	6.8	6.3									
FRI	2	40	0.03	0.871	11.7	7.5	2.7					13.0	6.9	5.4									
SAT	3	49	T	0.741																			
TOTAL			17.88	54.65																			
MAXIMUM		55	2.50	4.81	15.10	7.74	8.67	780	12627	1200	19426	16.2	7.6	8.5	27.0	255.4	16.0	426.5	1.0	0.11	1.0	31.0	
MINIMUM		40	0.00	0.74	11.70	7.13	0.60	51.0	383.7	76.0	571.7	11.9	6.6	3.8	1.0	7.3	0.5	3.8	1.0	0.11	1.0	1.0	
AVERAGE		49.3	0.5	1.6	13.5	7.4	5.1	246.9	3072.3	352.5	4273.9	14		5.3	4.9	57.3	4.7	76.2	1	0.11	1.0	3	
Number Of Analyses		35	33	35	25	25	25	10	10	10	10	25	25	25	10	10	10	10	1	1	1	5	

BOD % Removed	TSS % Removed
98.7	98.0

Channel Grab 8/26/2015					
pH	7.31	Temp	16.70	DO	3.61
Enterro	1.00	FC	1.00	Salinity	16.10

Weekly TSS, BOD	TSS				BOD		Weekly Coliform Geo. Mean
Aver.	mg/l	lbs.	mg/l	lbs.			
WEEK1	3.3	32.6	3.6	34.7			1.0
WEEK2	3.5	62.2	5.1	63.5			3.0
WEEK3	14.0	133.5	4.5	47.3			3.0
WEEK4	1.0	7.6	1.3	9.5			1.0
WEEK5	2.6	60.8	9.1	226.2			31.0
MAX	14.0	133.5	9.1	226.2			31.0

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

CONTACT NAME: Samantha Stoughtenger  
 MAILING ADDRESS: 2009 Radcliffe Road  
 Juneau, AK 99801

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

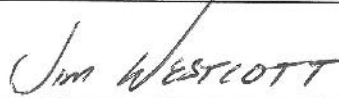
PERMIT NUMBER: AK0023213  
 OUTFALL / MONITORING POINT: 001

MONITORING PERIOD: 9/1/2015

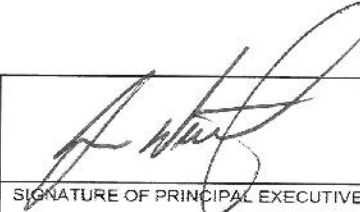
TO 9/30/2015

NO DISCHARGE:

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
Temperature (C) 1 - Final Effluent 00010	Sample meas.	*****	*****		*****	*****	16.2		0		
	Permit reqmt.	*****	*****		*****	*****	Report daily maximum	DEG.C		5X Weekly	Grab
Dissolved Oxygen 1 - Final Effluent 00300	Sample meas.	*****	*****		3.8	*****	8.5		0		
	Permit reqmt.	*****	*****		2.0 daily minimum	*****	17 daily maximum	mg/l		5X Weekly	Grab
Biochemical Oxygen Demand (BOD5) 1 - Final Effluent 00310	Sample meas.	76.2	426.5		*****	4.7	16.0		0		
	Permit reqmt.	690 monthly average	1,380 daily maximum	lbs/day	*****	30 monthly average	60 daily maximum	mg/l		Monthly	24-Hr Composite
Biochemical Oxygen Demand (BOD5) G - Influent 00310	Sample meas.	4273.9	*****		*****	352.5	*****		0		
	Permit reqmt.	report monthly average	*****	lbs/day	*****	report monthly average	*****	mg/l		Monthly	24-Hr Composite
Biochemical Oxygen Demand (BOD5) W - See Comments 00310	Sample meas.	*****	226.2		*****	9.1	*****		0		
	Permit reqmt.	*****	1,035 weekly average	lbs/day	*****	45 weekly average	*****	mg/l		Monthly	24-Hr Composite

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
  
 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

TELEPHONE	DATE
907.586.0398	2015/10/15
AREA   NUMBER	Y   M   D

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

CONTACT NAME: Samantha Stoughtenger  
 MAILING ADDRESS: 2009 Radcliffe Road  
 Juneau, AK 99801

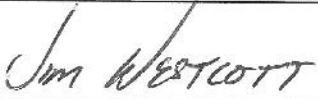
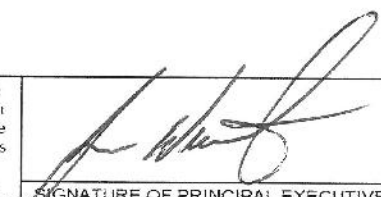
FACILITY: JUNEAU DOUGLAS WW TREATMENT FACILITY  
 LOCATION: 1540 Thane Rd  
 Juneau, AK 99801

PERMIT NUMBER: AK0023213  
 OUTFALL / MONITORING POINT: 001

MONITORING PERIOD: 9/1/2015

TO 9/30/2015  
 NO DISCHARGE:

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
pH  1 - Final Effluent 00400	Sample meas.	*****	*****		6.6	*****	7.6		0		
	Permit reqmt.	*****	*****		6.5 minimum	*****	8.5 maximum	S.U.		5X Weekly	Grab
Total Suspended Solids  1 - Final Effluent 00530	Sample meas.	57.3	255.4		*****	4.9	27.0		0		
	Permit reqmt.	690 monthly average	1,380 daily maximum	lbs/day	*****	30 monthly average	60 daily maximum	mg/l		Monthly	24-Hr Composite
Total Suspended Solids  G - Influent 00530	Sample meas.	3072.3	*****		*****	246.9	*****		0		
	Permit reqmt.	report monthly average	*****	lbs/day	*****	report monthly average	*****	mg/l		Monthly	24-Hr Composite
Total Suspended Solids  W - See Comments 00530	Sample meas.	*****	133.5		*****	14.0	*****		0		
	Permit reqmt.	*****	1,035 weekly average	lbs/day	*****	45 weekly average	*****	mg/l		Monthly	24-Hr Composite
Ammonia Nitrogen (as N)  1 - Final Effluent 00610	Sample meas.	*****	*****		*****	0.11	0.11		0		
	Permit reqmt.	*****	*****		*****	14 monthly average	30 daily maximum	mg/l		Monthly	24-Hr Composite

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER    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 907. 586.0393	DATE 2015/10/15
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	AREA   NUMBER Y   M   D

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

CONTACT NAME: Samantha Stoughtenger  
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 Juneau, AK 99801

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 Juneau, AK 99801

PERMIT NUMBER: AK0023213  
 OUTFALL / MONITORING POINT: 001

MONITORING PERIOD: 9/1/2015 TO 9/30/2015  
 NO DISCHARGE:  

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
Ammonia Nitrogen (as N)  W - See Comments 00610	Sample meas.	*****	*****		*****	0.11	*****		0		
	Permit reqmt.	*****	*****		*****	21 weekly average	*****	mg/l		Monthly	24-Hr Composite
Copper Total Recoverable  1 - Final Effluent 01119	Sample meas.	*****	*****		*****	*****			NA		
	Permit reqmt.	*****	*****		*****	*****	Report daily maximum	ug/l		Quarterly	24-Hr Composite
Flow  1 - Final Effluent 50050	Sample meas.	1.56	4.81		*****	*****	*****		0		
	Permit reqmt.	2.76 monthly average	6.0 daily maximum	MGD	*****	*****	*****			Continuous	Recorded
Enterococci  1 - Final Effluent 61211	Sample meas.	*****	*****		*****	*****	1.0		0		
	Permit reqmt.	*****	*****		*****	*****	Report daily maximum	cts/100 ml		See Permit Requirements	Grab
Fecal Coliform  1 - Final Effluent 74055	Sample meas.	*****	*****		*****	3.1	31.0		0		
	Permit reqmt.	*****	*****		*****	200 monthly geometric mean	800 daily maximum	cts/100 ml		Weekly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  <div style="font-family: cursive; font-size: 1.2em; text-align: center;">Jim Westcott</div>	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-size: 1.2em;">907. 586.0395</div>	DATE  <div style="font-size: 1.2em;">2015/10/15</div>
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  	AREA   NUMBER	Y   M   D

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

CONTACT NAME: Samantha Stoughtenger  
 MAILING ADDRESS: 2009 Radcliffe Road  
 Juneau, AK 99801

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

PERMIT NUMBER: AK0023213

MONITORING PERIOD: 9/1/2015

TO 9/30/2015

OUTFALL / MONITORING POINT: 001


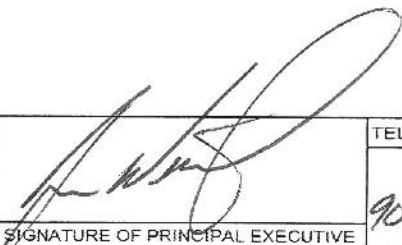
NO DISCHARGE:

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
Fecal Coliform  W - See Comments 74055	Sample meas.	*****	*****		*****	31.0	*****		0		
	Permit reqmt.	*****	*****		*****	400 weekly average	*****	cts/100 ml		Weekly	Grab
BOD5 Minimum % Removal  K - Percent Removal 81010	Sample meas.	*****	*****		98.7	*****	*****		0		
	Permit reqmt.	*****	*****		85 minimum percent removal	*****	*****	%		Monthly	Calculation
Total Suspended Solids Minimum % Removal  K - Percent Removal 81011	Sample meas.	*****	*****		98.0	*****	*****		0		
	Permit reqmt.	*****	*****		85 minimum percent removal	*****	*****	%		Monthly	Calculation

COMMENTS:  
 W = weekly average;

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    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   SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	DATE  907.586.0593 2015/10/15 AREA   NUMBER Y   M   D
		TELEPHONE  907.586.0593 AREA   NUMBER	DATE  2015/10/15 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: 9/1/2015 TO 9/30/2015  
 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  <i>MARK J. MOW / SR. OPERATOR</i>  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 <i>907-790-2525</i>  AREA   NUMBER	DATE <i>10/1/15</i>  Y   M   D
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 			

# 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

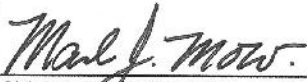
FACILITY: JUNEAU DOUGLAS WW TREATMENT FACILITY  
 LOCATION: 1540 Thane Rd  
 Juneau, AK 99801

MONITORING PERIOD: 9/1/2015 TO 9/30/2015  
 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.			lbs/day	*****			mg/l		When Discharging	Grab
	Permit reqmt.	Report monthly average	Report daily maximum		*****	Report monthly average	Report daily maximum				
Total Suspended Solids  1 - Final Effluent 00530 Q	Sample meas.			lbs/day	*****			mg/l		When Discharging	Grab
	Permit reqmt.	Report monthly average	Report daily maximum		*****	Report monthly average	Report daily maximum				
Coliform, fecal MF, M-FC broth, 44.5 C  1 - Final Effluent 31616 Q	Sample meas.	*****	*****		*****			cts/100 ml		When Discharging	Grab
	Permit reqmt.	*****	*****		*****	Report monthly geometric mean	Report daily maximum				
Flow  1 - Final Effluent 50050 Q	Sample meas.	*****		MGD	*****	*****	*****			When Discharging	Recorded
	Permit reqmt.	*****	Report daily maximum		*****	*****	*****				
Duration of Discharge  1 - Final Effluent 81381 Q	Sample meas.	*****		min/day	*****	*****	*****			When Discharging	Recorded
	Permit reqmt.	*****	report daily maximum		*****	*****	*****				

COMMENTS:

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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  <i>MARK J. MOW / SR. OPERATOR</i>  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  <i>907-790-2525</i>  AREA   NUMBER	DATE  <i>10/1/15</i>  Y   M   D
	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  		

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 LOCATION: 1540 Thane Rd  
 Juneau, AK 99801

MONITORING PERIOD: 9/1/2015 TO 9/30/2015  
 MONITORING POINT: 002 (N-11) (P) Sta AE NO DISCHARGE: X

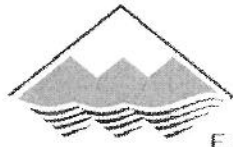
Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
Biochemical Oxygen Demand (BOD5)  1 - Final Effluent 00310 P	Sample meas.				*****						
	Permit reqmt.	report monthly average	report daily maximum	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>	907-290-2525	10/1/15
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA   NUMBER	Y   M   D





**CBJ Wastewater: Juneau-Douglas TP**

Permit AK-002321-3

**Analytical Report**

August 26, 2015

Admiralty Environmental EPA ID AK 00976

Juneau, AK

AE 13503

Sample Location	Effluent Composite	Influent Composite	Effluent Grab
Date & Time Sampled	08/26/15; 07:15	08/26/15; 07:15	08/26/15; 07:15
Fecal Coliform (FC/100 mL)	---	---	2.0
BOD (mg/L)	5.6	360	---
TSS (mg/L)	4.0	126	---
Enterococci (100 mL)	---	---	<10

Quality Control:

Analysis	MB	LCS	LCS Duplicate	RPD	Date/Time Commenced	Holding Time Met
BOD	< 2	104.3%	101.5%	2.7%	08/27/2015; 13:45	yes
TSS	< 4	100.0%	94.0%	6.2%	08/27/2015; 12:10	yes
FC	< 2	---	---	---	08/26/2015; 10:57	yes
Entero	<10	---	---	---	08/26/2015; 12:28	yes

Analysis Description:

Analysis	Method	MDL	PQL	Unit
FC	SM 9222D	1.0	2.0	FC/100ml
BOD	EPA 405.1	0.5	2.0	mg/L
TSS	EPA 180.2	1.0	4.0	mg/L
Entero	ASTM D6503-99	1.0	10.0	MPN/100ml

Case Narrative:

All sample analysis QA/QC parameters were met for this event.

Key:

BOD	Biochemical Oxygen Demand
Cl	Chlorine
FC	Fecal Coliform
LCS	Laboratory Control Standard
MB	Method Blank
MDL	Method Detection Limit
mg/L	Milligrams Per Liter
ND	Not Detected
PQL	Practical Quantitation Limit
RPD	Relative Percent Difference
TSS	Total Suspended Solids

David Wetzel  
President, Admiralty Environmental  
[dwetzel@admiraltyenv.com](mailto:dwetzel@admiraltyenv.com)



September 9, 2015

Admiralty Environmental, LLC  
641 W. Willoughby Ave, Suite 301  
Juneau, AK 99801-

Work Order No.: 1510077

Re: CBJ Wastewater AE 13503

Dear David Wetzel:

Microbac Laboratories, Inc. - Chicagoland Division received 1 sample(s) on 9/1/2015 10:22:00AM for the analyses presented in the following report as Work Order 1510077.

The enclosed results were obtained from and are applicable to the sample(s) as received at the laboratory. All sample results are reported on an "as received" basis unless otherwise noted.

All data included in this report have been reviewed and meet the applicable project specific and certification specific requirements, unless otherwise noted. A qualifications page is included in this report and lists the programs under which Microbac maintains certification.

This report has been paginated in its entirety and shall not be reproduced except in full, without the written approval of Microbac Laboratories.

We appreciate the opportunity to service your analytical needs. If you have any questions, please contact your project manager. For any feedback, please contact Robert Crookston, Managing Director, at [robert.crookston@microbac.com](mailto:robert.crookston@microbac.com).

Sincerely,  
Microbac Laboratories, Inc.

A handwritten signature in black ink that reads "Carey Gadzala".

Carey Gadzala  
Project Manager

Microbac Laboratories, Inc.

250 West 84<sup>th</sup> Drive | Merrillville, IN 46410 | 800.536.8379 p | 219.769.8378 p | 219.769.1664 f | [www.microbac.com](http://www.microbac.com)



**WORK ORDER SAMPLE SUMMARY**

**Date:** *Wednesday, September 9, 2015*

**Client:** Admiralty Environmental, LLC  
**Project:** CBJ Wastewater AE 13503  
**Lab Order:** 15I0077

---

<b>Lab Sample ID</b>	<b>Client Sample ID</b>	<b>Tag Number</b>	<b>Collection Date</b>	<b>Date Received</b>
15I0077-01	J-D WTP Effluent 24hr Composi	AE 13503	08/26/2015 07:15	9/1/2015 10:22:00AM

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## Analytical Results

Date: *Wednesday, September 9, 2015*

<b>Client:</b>	Admiralty Environmental, LLC	<b>Work Order/ID:</b>	1510077-01
<b>Client Project:</b>	CBJ Wastewater AE 13503	<b>Sampled:</b>	08/26/2015 7:15
<b>Client Sample ID:</b>	J-D WTP Effluent 24hr Composite	<b>Received:</b>	09/01/2015 10:22
<b>Sample Description:</b>	AE 13503		
<b>Matrix:</b>	Aqueous		

Analyses	Certs	AT	Result	RL	Qual	Units	DF	Analyzed
			Method: EPA 200.8 Rev 5.4			Analyst: SA		
<b>Total Recoverable Metals by ICP/MS</b>								
Prep Date/Time: 09/02/2015 08:20								
Copper	chjm	A	6.2	1.0	ppb	1	09/02/2015	16:43
			Method: EPA 350.1 Rev 2.0			Analyst: GRIEF		
<b>Nitrogen, Ammonia as N</b>								
Prep Method: Aqueous Ammonia Distillation								
Prep Date/Time: 09/09/2015 09:55								
Nitrogen, Ammonia (As N)	ch	A	5.2	0.10	mg/L	1	09/09/2015	12:52

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**FLAGS, FOOTNOTES AND ABBREVIATIONS (as needed)**

B = Detected in the associated method Blank at a concentration above the routine RL  
 b- = Detected in the associated method Blank at a concentration greater than 2.2 times the MDL  
 b\* = Detected in the associated method Blank at a concentration greater than half the RL  
 CFU = Colony forming units  
 D = Dilution performed on sample  
 DF = Dilution Factor  
 g = Gram  
 E = Value above quantitation range  
 H = Analyte was prepared and/or analyzed outside of the analytical method holding time  
 I = Matrix Interference  
 J = Analyte concentration detected between RL and MDL (Metals / Organics)  
 LOD = Limit of Detection  
 LOQ = Limit of Quantitation  
 m<sup>3</sup> = Meters cubed  
 MDL = Method Detection Limit  
 mg/Kg = Milligrams per Kilogram (ppm)  
 mg/L = Milligrams per Liter (ppm)  
 NA = Not Analyzed  
 ND = Not Detected at the Reporting Limit (or the Method Detection Limit, if used)  
 NR = Not Recovered  
 R = RPD outside accepted recovery limits  
 RL = Reporting Limit  
 S = Spike recovery outside recovery limits  
 Surr = Surrogate  
 U = Undetected  
 > = Greater than  
 < = Less than  
 % = Percent  
 \* = Result exceeds project specific limits

**ANALYTE TYPES: (AT)**

A,B = Target Analyte  
 I = Internal Standard  
 M = Summation Analyte  
 S = Surrogate  
 T = Tentatively identified Compound (TIC, concentration estimated)

**QC SAMPLE IDENTIFICATIONS**

BLK = Method Blank	ICSA = Interference Check Standard "A"
DUP = Method Duplicate	ICSAB = Interference Check Standard "AB"
BS = Method Blank Spike	BSD = Method Blank Spike Duplicate
MS = Matrix Spike	MSD = Matrix Spike Duplicate
ICB = Initial Calibration Blank	ICV = Initial Calibration Verification
CCB = Continuing Calibration Blank	CCV = Continuing Calibration Verification
CRL = Client Required Reporting Limit	QPR = Ongoing Precision and Recovery Standard
PDS = Post Digestion Spike	SD = Serial Dilution
QCS = Quality Control Standard	

**CERTIFICATIONS (Certs)**

Below is a list of certifications maintained by the Microbac Merrillville Laboratory. All data included in this report has been reviewed for and meets all project specific and quality control requirements of the applicable accreditation, unless otherwise noted. Complete lists of individual analytes pursuant to each certification below are available upon request.

- <sup>a</sup> The American Association for Laboratory Accreditation [A2LA] for Biological Testing, ISO/IEC 17025 (Certificate# 3045.01)
- <sup>b</sup> The American Association for Laboratory Accreditation [A2LA] for Environmental Department of Defense Testing, ISO/IEC 17025 (Certificate# 3045.02)
- <sup>c</sup> Illinois EPA for the analysis wastewater and solid waste in accordance with the requirements of the National Environmental Laboratory Accreditation Program [NELAP] (accreditation #200064)
- <sup>d</sup> Illinois DOPH for the microbiological analysis of drinking water (registry #1755266)
- <sup>e</sup> Indiana DEM approved support laboratory for solid waste and wastewater analyses
- <sup>f</sup> Indiana State Board of Animal Health for microbiological analysis of dairy containers (18137)
- <sup>g</sup> Indiana SDH for the chemical analysis of drinking water (lab #C-45-03)
- <sup>h</sup> Indiana SDH for the microbiological analysis of drinking water (lab #M-45-8)
- <sup>i</sup> Kansas DPHE for the analysis of drinking water, wastewater, and solid hazardous waste in accordance with the requirements of the National Environmental Laboratory Accreditation Program [NELAP] (Certificate No. E-10397)
- <sup>j</sup> Kentucky DEP for the analysis of samples applicable to the Underground Storage Tank program (lab #75)
- <sup>k</sup> Kentucky EEC Wastewater Laboratory Certification Program for the analysis of wastewater (lab #90147)
- <sup>l</sup> New York SDOH in accordance with the requirements of the National Environmental Laboratory Accreditation Program [NELAP] (Lab#12006)
- <sup>m</sup> North Carolina DENR for the environmental analysis for NPDES effluent, surface water, groundwater, and pretreatment regulations (certificate #597)
- <sup>n</sup> Pennsylvania Department of Environmental Protection [NELAP] (Lab# 68-04863)
- <sup>o</sup> United States Department of Agriculture Animal and Plant Health Inspection Service Permit To Receive Soil (Permit #P330-12-00174))
- <sup>p</sup> Washington State Department of Ecology in accordance to Ch. 173-50 WAC (lab #C992)
- <sup>q</sup> Wisconsin Department of Natural Resources for the chemical analysis of wastewater and solid waste (lab #998036710)
- <sup>r</sup> Center for Disease Control [CDC] ELITE Proficiency Program member

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## Analytical QC Summary

Client: Admiralty Environmental, LLC  
 Work Order: 1510077  
 Project: CBJ Wastewater AE 13503  
 Batch: B074510

Metals - Quality Control

### Total Recoverable Metals by ICP/MS

Sample ID:	Source:	Analyte	Result	Limit	Units	Level	Result	%REC	Limits	RPD	Limit	Qual
Blank (B074510-BLK1)		Copper	ND	1.0	ppb							
LCS (B074510-BS1)		Copper	20.6	1.0	ppb	20.00		103	85-115			
LCS (B074510-BS2)		Copper	20.6	1.0	ppb	20.00		103	85-115			
Matrix Spike (B074510-MS1)	1510062-01	Copper	21.6	5.0	ppb	20.00	0.750	104	70-130			
Matrix Spike (B074510-MS2)	1510075-01	Copper	114	1.0	ppb	20.00	94.2	101	70-130			
Matrix Spike Dup (B074510-MSD1)	1510062-01	Copper	21.1	5.0	ppb	20.00	0.750	102	70-130	2.38	20	
Matrix Spike Dup (B074510-MSD2)	1510075-01	Copper	114	1.0	ppb	20.00	94.2	97.2	70-130	0.585	20	

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## Analytical QC Summary

**Client:** Admiralty Environmental, LLC **Wet Chemistry - Quality Control**  
**Work Order:** 15I0077  
**Project:** CBJ Wastewater AE 13503  
**Batch:** B074774 **Prep:** Aqueous Ammonia Distillation

### Nitrogen, Ammonia as N

<b>Sample ID:</b> Blank (B074774-BLK1)	<b>Method:</b> EPA 350.1 Rev 2.0	<b>Prepped:</b> 09/09/2015 09:55
<b>Source:</b>		<b>Analyzed:</b> 09/09/2015 12:43
Analyte	Result	Limit
Nitrogen, Ammonia (As N)	ND	0.10
		Units
		mg/L
	Level	Result
		%REC
		Limits
		RPD
		Limit
		Qual

<b>Sample ID:</b> LCS (B074774-BS1)	<b>Method:</b> EPA 350.1 Rev 2.0	<b>Prepped:</b> 09/09/2015 09:55
<b>Source:</b>		<b>Analyzed:</b> 09/09/2015 12:43
Analyte	Result	Limit
Nitrogen, Ammonia (As N)	4.09	0.10
		Units
		mg/L
	Level	Result
	4.000	%REC
		Limits
		RPD
		Limit
		Qual

<b>Sample ID:</b> Matrix Spike (B074774-MS1)	<b>Method:</b> EPA 350.1 Rev 2.0	<b>Prepped:</b> 09/09/2015 09:55
<b>Source:</b> 15I0078-01		<b>Analyzed:</b> 09/09/2015 12:56
Analyte	Result	Limit
Nitrogen, Ammonia (As N)	3.84	0.10
		Units
		mg/L
	Level	Result
	4.000	%REC
	0.202	Limits
		RPD
		Limit
		Qual

<b>Sample ID:</b> Matrix Spike (B074774-MS2)	<b>Method:</b> EPA 350.1 Rev 2.0	<b>Prepped:</b> 09/09/2015 09:55
<b>Source:</b> 15I0229-17		<b>Analyzed:</b> 09/09/2015 13:15
Analyte	Result	Limit
Nitrogen, Ammonia (As N)	4.27	0.10
		Units
		mg/L
	Level	Result
	4.000	%REC
	0.674	Limits
		RPD
		Limit
		Qual

<b>Sample ID:</b> Matrix Spike Dup (B074774-MSD1)	<b>Method:</b> EPA 350.1 Rev 2.0	<b>Prepped:</b> 09/09/2015 09:55
<b>Source:</b> 15I0078-01		<b>Analyzed:</b> 09/09/2015 12:58
Analyte	Result	Limit
Nitrogen, Ammonia (As N)	4.05	0.10
		Units
		mg/L
	Level	Result
	4.000	%REC
	0.202	Limits
		RPD
		Limit
		Qual

<b>Sample ID:</b> Matrix Spike Dup (B074774-MSD2)	<b>Method:</b> EPA 350.1 Rev 2.0	<b>Prepped:</b> 09/09/2015 09:55
<b>Source:</b> 15I0229-17		<b>Analyzed:</b> 09/09/2015 13:17
Analyte	Result	Limit
Nitrogen, Ammonia (As N)	4.50	0.10
		Units
		mg/L
	Level	Result
	4.000	%REC
	0.674	Limits
		RPD
		Limit
		Qual

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PREPARATION BENCH SHEET

B074510

Microbac Laboratories, Inc. - Chicagoland

Printed: 9/9/2015 4:30:40PM

Matrix: Aqueous

Lab Number	Analysis	Prepared	Initial mL	Final mL	Sur 1 uL	Sur 2 uL	Spike 1 ID	Spike 2 ID	Spike 1 uL	Spike 2 uL	Source ID
1510077-01	200.8_LL	9/2/2015 8:20:00AM	50.00	50.00							
B074510-BLK1	200.8_LL	9/2/2015 8:20:00AM	50.00	50.00							
B074510-BS1	200.8_LL	9/2/2015 8:20:00AM	50.00	50.00			0057274		100		
B074510-BS2	200.8_LL	9/2/2015 8:20:00AM	50.00	50.00			0057274		100		
B074510-MS1	200.8_LL	9/2/2015 8:20:00AM	50.00	50.00			0057274		100		1510062-01
B074510-MS2	200.8_LL	9/2/2015 8:20:00AM	50.00	50.00			0057274		100		1510075-01
B074510-MSD1	200.8_LL	9/2/2015 8:20:00AM	50.00	50.00			0057274		100		1510062-01
B074510-MSD2	200.8_LL	9/2/2015 8:20:00AM	50.00	50.00			0057274		100		1510075-01





PREPARATION BENCH SHEET

B074774

Microbac Laboratories, Inc. - Chicagoland

Printed: 9/9/2015 4:30:40PM

Matrix: Aqueous

Prepared Using: Aqueous Ammonia Distillation

Lab Number	Analysis	Prepared	Initial mL	Final mL	Sur 1 uL	Sur 2 uL	Spike 1 ID	Spike 2 ID	Spike 1 uL	Spike 2 uL	Source ID
15I0077-01	NH4 350.1	9/9/2015 9:55:00AM	50.00	50.00							
B074774-BLK1	NH4 350.1	9/9/2015 9:55:00AM	50.00	50.00							
B074774-BS1	NH4 350.1	9/9/2015 9:55:00AM	50.00	50.00			0046760		200		
B074774-MS1	NH4 350.1	9/9/2015 9:55:00AM	50.00	50.00			0046760		200		15I0078-01
B074774-MS2	NH4 350.1	9/9/2015 9:55:00AM	50.00	50.00			0046760		200		15I0229-17
B074774-MSD1	NH4 350.1	9/9/2015 9:55:00AM	50.00	50.00			0046760		200		15I0078-01
B074774-MSD2	NH4 350.1	9/9/2015 9:55:00AM	50.00	50.00			0046760		200		15I0229-17



**Admiralty Environmental**  
 641 W. Willoughby Ave., Ste 301  
 Juneau, AK 99801 (907)  
 463-4415 fax (480) 247-4476

<b>PROJECT NAME:</b> <b>CBJ Wastewater</b> <b>Juneau Douglas Treatment Plant Permit # AK-002321-3</b>				<b>ADEC Compliance</b>						AE 13503							
<b>REPORT TO:</b> City and Borough of Juneau E-mail: karen_sewell@ci.juneau.ak.us jim_westcott@ci.juneau.ak.us		<b>PHONE:</b> (907) 586-0393		# of Bottles	BOD and TSS	Fecal Coliform	Enterro-fecat	Copper	NH3					Field Results			
<b>ADDRESS:</b> 2009 Radcliffe Road Juneau, AK 99801		<b>SAMPLED BY:</b> <i>J Westcott / K VanW</i>												pH	Temp	D.O.	
DATE	TIME	SITE DESCRIPTION / IDENTIFIER	MATRIX														
08/26/15	0715	J-D WTP Effluent 24hr Composite	H <sub>2</sub> O	3	X			X	X	7.31	16.7	361					
08/26/15	0715	J-D WTP Influent 24hr Composite	H <sub>2</sub> O	1	X					7.59	14.8	367					
08/26/15	0715	J-D WTP Effluent Grab	H <sub>2</sub> O	2		X	X										
<b>Comments:</b> Collected in conjunction with toxicity sampling				Section to be completed by receiving laboratory													
Relinquished by: (signature)		Relinquished by: (print)		Date:		Time:		<b>Sample Receipt:</b>									
<i>[Signature]</i>		Larry Kayler		8-26-15		0828		Temp (°C): <u>5.33</u>									
Received by: (signature)		Received by: (print)		Date:		Time:		Thermo ID#: <u>SR1</u>									
<i>[Signature]</i>		Home O'Neill		8/26/15		0828		Condition of Custody seal: <input checked="" type="checkbox"/>									
Relinquished by: (signature)		Relinquished by: (print)		Date:		Time:		Labels Agree with COC: <u>Y</u>									
								Initialed By: <u>HO</u>									
Received by: (signature)		Received by: (print)		Date:		Time:		Holding Time Met: <u>Y</u>									
								Shipped Via: <u>---</u>									
								Problems: <u>N</u>									

1510077  
 Administrative - Juneau, AK  
 CBJ Wastewater AE 13503  
 09/01/2015  
 Carey Gadzala

**lty**  
 NTAL

**Administrative Environmental**  
 641 W. Willoughby Ave., Ste 301  
 Juneau, AK 99801 (907)  
 463-4415 fax (480) 247-4476

CHAIN OF CUSTODY/TRANSMITTAL RECORD  
 PAGE 1 OF 1

1510077

**CBJ Wastewater**  
 Juneau Douglas Treatment Plant Permit # AK-002321-3

**ADEC Compliance**

AE 13503

City and Borough of Juneau  
 E-mail: karen\_sewall@ci.juneau.ak.us  
 jim\_westcott@ci.juneau.ak.us  
 2009 Radcliffe Road  
 Juneau, AK 99801

PHONE: (907) 586-0393

SAMPLED BY:  
*Deborah K. Vayn*

# of Bottles

BOD 5/5  
 Fecal Coliform  
 Copper  
 NH3

Field Results

pH	Temp	D.O.
7.59	14.8	3.67

DATE	TIME	SITE DESCRIPTION / IDENTIFIER	MATRIX
08/26/15	0715	J-D WTP Effluent 24hr Composite	H <sub>2</sub> O
08/28/15	0715	J-D WTP Influent 24hr Composite	H <sub>2</sub> O
08/26/15	0715	J-D WTP Effluent Grab	H <sub>2</sub> O

Comments:  
 Collected in conjunction with toxicity sampling

Relinquished by: (signature)	Relinquished by: (print)	Date:	Time:
<i>[Signature]</i>	Kevin Kayhan	8/26/15	0828
<i>[Signature]</i>	Wendy O'Neill	8/26/15	0828
<i>[Signature]</i>	I FELSTEAD	8/31/15	0722
<i>[Signature]</i>	Nicole Rainwater	9/1/15	1022

Temp (C): 5.33 -0.6  
 Thermo ID#: 827 IR  
 Condition of Custody seal:    
 Initialed By: HO NR  
 Shipped Via: — FedEx

Yes/No  
 Bottles Intact: y  
 Sufficient Sample Volume: y  
 Labels Agree with COC: y  
 Holding Time Met: y  
 Problems: N

-0.7  
 -0.6 e  
 01

0-10  
 10



**COOLER INSPECTION**

Client Name: Admiralty Environmental, LLC

Work Order Number: 1510077

Checklist completed by: 9/1/2015 4:41:00PM | Nicole Rainwater

Date: Wednesday, September 9, 2015

Date/Time Received: 09/01/2015 10:22

Received by: Nicole Rainwater

Reviewed by: 9/2/2015 | CAG

Carrier Name: FedEx

Cooler ID: Default Cooler

Container/Temp Blank Temperature: -0.6° C

After-Hour Arrival?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
Shipping container/cooler in good condition?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	Not Present <input type="checkbox"/>
Custody seals intact on shipping container/cooler?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	Not Present <input type="checkbox"/>
Custody seals intact on sample containers?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Not Present <input checked="" type="checkbox"/>
COC present?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
COC included sufficient client identification?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
COC included sufficient sample collector information?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
COC included a sample description?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
COC agrees with sample labels?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
COC identified the appropriate matrix?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
COC included date of collection?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
COC included time of collection?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
COC identified the appropriate number of containers?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
Samples in proper container/bottle?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
Sample containers intact?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
Sufficient sample volume for indicated test?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
All samples received within holding time?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
If the samples are preserved, are the preservatives identified?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	

If No, adjusted by? \_\_\_\_\_

COC included the requested analyses?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
COC signed when relinquished and received?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
Samples received on ice?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
Samples properly preserved?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
VoA vials for aqueous samples have zero headspace?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	No VOA vials submitted <input checked="" type="checkbox"/>

Cooler Comments:

**ANY "NO" EVALUATION (excluding After-Hour Receipt) REQUIRES CLIENT NOTIFICATION.**

Sample ID	Client Sample ID	Comments
1510077-01	J-D WTP Effluent 24hr Composite	

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641 W. Willoughby Ave., Suite 301 Juneau, AK 99801  
 (907) 463 - 4415 Fax (480) 247 - 4476

www.admiraltyenvironmental.com

## CBJ Wastewater: Juneau-Douglas TP

Permit AK-002321-3

### Analytical Report

August 26, 2015

Admiralty Environmental EPA ID AK 00976

Juneau, AK

AE 13506

Sample Location	Channel Grab
Date & Time Sampled	08/26/2015; 06:15
Fecal Coliform (FC/100 mL)	<2.0
Enterococci (MPN/100 mL)	<10
Salinity (ppt)	16.1

Quality Control:

Analysis	MB	LCS	LCS Duplicate	RPD	Date/Time Commenced	Holding Time Met
FC	< 2	---	---	---	08/26/2015, 10:57	yes
Enter.	<10	---	---	---	08/26/2015, 12:28	yes
Salinity	---	---	---	---	09/02/2015, 11:35	yes

Analysis Description:

Analysis	Method	MDL	PQL	Unit
FC	SM 9222D	1.0	2.0	FC/100ml
Enter.	ASTM D6503-99	1.0	10.0	MPN/ 100ml
Salinity	SM 2510 A	0.17	1.0	ppt

Case Narrative:

All sample analysis QA/QC parameters were met for this event.

Key:

FC	Fecal Coliform
ENT	Enterococci
LCS	Laboratory Control Standard
MB	Method Blank
MDL	Method Detection Limit
mg/L	Milligrams Per Liter
ND	Not Detected
PQL	Practical Quantitation Limit
RPD	Relative Percent Difference

David Wetzel  
 President, Admiralty Environmental  
 dwetzel@admiraltyenv.com



September 9, 2015

Admiralty Environmental, LLC  
641 W. Willoughby Ave, Suite 301  
Juneau, AK 99801-

Work Order No.: 1510078

Re: CBJ Wastewater AE 13506

Dear David Wetzel:

Microbac Laboratories, Inc. - Chicagoland Division received 1 sample(s) on 9/1/2015 10:22:00AM for the analyses presented in the following report as Work Order 1510078.

The enclosed results were obtained from and are applicable to the sample(s) as received at the laboratory. All sample results are reported on an "as received" basis unless otherwise noted.

All data included in this report have been reviewed and meet the applicable project specific and certification specific requirements, unless otherwise noted. A qualifications page is included in this report and lists the programs under which Microbac maintains certification.

This report has been paginated in its entirety and shall not be reproduced except in full, without the written approval of Microbac Laboratories.

We appreciate the opportunity to service your analytical needs. If you have any questions, please contact your project manager. For any feedback, please contact Robert Crookston, Managing Director, at [robert.crookston@microbac.com](mailto:robert.crookston@microbac.com).

Sincerely,  
Microbac Laboratories, Inc.

A handwritten signature in black ink that reads "Carey Gadzala".

Carey Gadzala  
Project Manager

Microbac Laboratories, Inc.

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**WORK ORDER SAMPLE SUMMARY**

Date: *Wednesday, September 9, 2015*

**Client:** Admiralty Environmental, LLC  
**Project:** CBJ Wastewater AE 13506  
**Lab Order:** 15I0078

---

Lab Sample ID	Client Sample ID	Tag Number	Collection Date	Date Received
15I0078-01	J-D WTP channel Grab	AE 13506	08/26/2015 06:15	9/1/2015 10:22:00AM

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## Analytical Results

Date: Wednesday, September 9, 2015

Client:	Admiralty Environmental, LLC	Work Order/ID:	1510078-01
Client Project:	CBJ Wastewater AE 13506	Sampled:	08/26/2015 6:15
Client Sample ID:	J-D WTP channel Grab	Received:	09/01/2015 10:22
Sample Description:	AE 13506		
Matrix:	Aqueous		

Analyses	Certs	AT	Result	RL	Qual	Units	DF	Analyzed
			Method: EPA 350.1 Rev 2.0		Analyst: GRIEF			
Nitrogen, Ammonia as N			Prep Method: Aqueous Ammonia Distillation		Prep Date/Time: 09/09/2015 09:55			
Nitrogen, Ammonia (As N)	ch	A	0.20	0.10		mg/L	1	09/09/2015 12:54

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**FLAGS, FOOTNOTES AND ABBREVIATIONS (as needed)**

B = Detected in the associated method Blank at a concentration above the routine RL  
 b = Detected in the associated method Blank at a concentration greater than 2.2 times the MDL  
 b\* = Detected in the associated method Blank at a concentration greater than half the RL  
 CFU = Colony forming units  
 D = Dilution performed on sample  
 DF = Dilution Factor  
 g = Gram  
 E = Value above quantitation range  
 H = Analyte was prepared and/or analyzed outside of the analytical method holding time  
 I = Matrix Interference  
 J = Analyte concentration detected between RL and MDL (Metals / Organics)  
 LOD = Limit of Detection  
 LOQ = Limit of Quantitation  
 m3 = Meters cubed  
 MDL = Method Detection Limit  
 mg/Kg = Milligrams per Kilogram (ppm)  
 mg/L = Milligrams per Liter (ppm)  
 NA = Not Analyzed  
 ND = Not Detected at the Reporting Limit (or the Method Detection Limit, if used)  
 NR = Not Recovered  
 R = RPD outside accepted recovery limits  
 RL = Reporting Limit  
 S = Spike recovery outside recovery limits  
 Sur = Surrogate  
 U = Undetected  
 > = Greater than  
 < = Less than  
 % = Percent  
 \* = Result exceeds project specific limits

**ANALYTE TYPES: (AT)**

A,B = Target Analyte  
 I = Internal Standard  
 M = Summation Analyte  
 S = Surrogate  
 T = Tentatively Identified Compound (TIC, concentration estimated)

**QC SAMPLE IDENTIFICATIONS**

BLK = Method Blank	ICSA = Interference Check Standard "A"
DUP = Method Duplicate	ICSAB = Interference Check Standard "AB"
BS = Method Blank Spike	BSD = Method Blank Spike Duplicate
MS = Matrix Spike	MSD = Matrix Spike Duplicate
ICB = Initial Calibration Blank	ICV = Initial Calibration Verification
CCB = Continuing Calibration Blank	CCV = Continuing Calibration Verification
CRL = Client Required Reporting Limit	OPR = Ongoing Precision and Recovery Standard
PDS = Post Digestion Spike	SD = Serial Dilution
QCS = Quality Control Standard	

**CERTIFICATIONS (Certs)**

Below is a list of certifications maintained by the Microbac Merrillville Laboratory. All data included in this report has been reviewed for and meets all project specific and quality control requirements of the applicable accreditation, unless otherwise noted. Complete lists of individual analytes pursuant to each certification below are available upon request.

- <sup>a</sup> The American Association for Laboratory Accreditation [A2LA] for Biological Testing, ISO/IEC 17025 (Certificate# 3045.01)
- <sup>b</sup> The American Association for Laboratory Accreditation [A2LA] for Environmental Department of Defense Testing, ISO/IEC 17025 (Certificate# 3045.02)
- <sup>c</sup> Illinois EPA for the analysis of wastewater and solid waste in accordance with the requirements of the National Environmental Laboratory Accreditation Program [NELAP] (accreditation #200064)
- <sup>d</sup> Illinois DOPH for the microbiological analysis of drinking water (registry #1755266)
- Indiana DEM approved support laboratory for solid waste and wastewater analyses
- <sup>e</sup> Indiana State Board of Animal Health for microbiological analysis of dairy containers (18137)
- <sup>f</sup> Indiana SDH for the chemical analysis of drinking water (lab #C-45-03)
- <sup>g</sup> Indiana SDH for the microbiological analysis of drinking water (lab #M-45-8)
- <sup>h</sup> Kansas DPHE for the analysis of drinking water, wastewater, and solid hazardous waste in accordance with the requirements of the National Environmental Laboratory Accreditation Program [NELAP] (Certificate No. E-10397)
- <sup>i</sup> Kentucky DEP for the analysis of samples applicable to the Underground Storage Tank program (lab #75)
- <sup>j</sup> Kentucky EEC Wastewater Laboratory Certification Program for the analysis of wastewater (lab #90147)
- <sup>k</sup> New York SDOH in accordance with the requirements of the National Environmental Laboratory Accreditation Program [NELAP] (Lab#12006)
- <sup>m</sup> North Carolina DENR for the environmental analysis for NPDES effluent, surface water, groundwater, and pretreatment regulations (certificate #597)
- <sup>n</sup> Pennsylvania Department of Environmental Protection [NELAP] (Lab# 68-04863)
- United States Department of Agriculture Animal and Plant Health Inspection Service Permit To Receive Soil (Permit #P330-12-00174))
- <sup>o</sup> Washington State Department of Ecology in accordance to Ch. 173-50 WAC (lab #C992)
- <sup>s</sup> Wisconsin Department of Natural Resources for the chemical analysis of wastewater and solid waste (lab #998036710)
- <sup>q</sup> Center for Disease Control [CDC] ELITE Proficiency Program member

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## Analytical QC Summary

Client: Admiralty Environmental, LLC  
 Work Order: 15I0078  
 Project: CBJ Wastewater AE 13506

Wet Chemistry - Quality Control

Batch: B074774 Prep: Aqueous Ammonia Distillation

### Nitrogen, Ammonia as N

**Sample ID:** Blank (B074774-BLK1) **Method:** EPA 350.1 Rev 2.0 **Prepped:** 09/09/2015 09:55  
**Source:** **Analyzed:** 09/09/2015 12:43

Analyte	Result	Limit	Units	Level	Result	%REC	Limits	RPD	Limit	Qual
Nitrogen, Ammonia (As N)	ND	0.10	mg/L							

**Sample ID:** LCS (B074774-BS1) **Method:** EPA 350.1 Rev 2.0 **Prepped:** 09/09/2015 09:55  
**Source:** **Analyzed:** 09/09/2015 12:45

Analyte	Result	Limit	Units	Level	Result	%REC	Limits	RPD	Limit	Qual
Nitrogen, Ammonia (As N)	4.09	0.10	mg/L	4.000		102	90-110			

**Sample ID:** Matrix Spike (B074774-MS1) **Method:** EPA 350.1 Rev 2.0 **Prepped:** 09/09/2015 09:55  
**Source:** 15I0078-01 **Analyzed:** 09/09/2015 12:56

Analyte	Result	Limit	Units	Level	Result	%REC	Limits	RPD	Limit	Qual
Nitrogen, Ammonia (As N)	3.84	0.10	mg/L	4.000	0.202	90.9	90-110			

**Sample ID:** Matrix Spike (B074774-MS2) **Method:** EPA 350.1 Rev 2.0 **Prepped:** 09/09/2015 09:55  
**Source:** 15I0229-17 **Analyzed:** 09/09/2015 13:15

Analyte	Result	Limit	Units	Level	Result	%REC	Limits	RPD	Limit	Qual
Nitrogen, Ammonia (As N)	4.27	0.10	mg/L	4.000	0.674	89.8	90-110			S

**Sample ID:** Matrix Spike Dup (B074774-MSD1) **Method:** EPA 350.1 Rev 2.0 **Prepped:** 09/09/2015 09:55  
**Source:** 15I0078-01 **Analyzed:** 09/09/2015 12:58

Analyte	Result	Limit	Units	Level	Result	%REC	Limits	RPD	Limit	Qual
Nitrogen, Ammonia (As N)	4.05	0.10	mg/L	4.000	0.202	96.1	90-110	5.26	20	

**Sample ID:** Matrix Spike Dup (B074774-MSD2) **Method:** EPA 350.1 Rev 2.0 **Prepped:** 09/09/2015 09:55  
**Source:** 15I0229-17 **Analyzed:** 09/09/2015 13:17

Analyte	Result	Limit	Units	Level	Result	%REC	Limits	RPD	Limit	Qual
Nitrogen, Ammonia (As N)	4.50	0.10	mg/L	4.000	0.674	95.6	90-110	5.25	20	

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PREPARATION BENCH SHEET

B074774

Microbac Laboratories, Inc. - Chicagoland

Printed: 9/9/2015 4:34:19PM

Matrix: Aqueous

Prepared Using: Aqueous Ammonia Distillation

Lab Number	Analysis	Prepared	Initial mL	Final mL	Sur 1 uL	Sur 2 uL	Spike 1 ID	Spike 2 ID	Spike 1 uL	Spike 2 uL	Source ID
1510078-01	NH4 350.1	9/9/2015 9:55:00AM	50.00	50.00							
B074774-BLK1	NH4 350.1	9/9/2015 9:55:00AM	50.00	50.00							
B074774-BS1	NH4 350.1	9/9/2015 9:55:00AM	50.00	50.00			0046760		200		
B074774-MS1	NH4 350.1	9/9/2015 9:55:00AM	50.00	50.00			0046760		200		1510078-01
B074774-MS2	NH4 350.1	9/9/2015 9:55:00AM	50.00	50.00			0046760		200		1510229-17
B074774-MSD1	NH4 350.1	9/9/2015 9:55:00AM	50.00	50.00			0046760		200		1510078-01
B074774-MSD2	NH4 350.1	9/9/2015 9:55:00AM	50.00	50.00			0046760		200		1510229-17

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Admiralty Environmental  
 641 W. Willoughby Ave., Ste 301  
 Juneau, AK 99801 (907)  
 463-4415 fax (480) 247-4476

CHAIN OF CUSTODY/TRANSMITTAL RECORD  
 PAGE 1 OF 1

<b>PROJECT NAME:</b> <b>CBJ Wastewater</b> Juneau Douglas Treatment Plant Permit # AK-002321-3				<b>ADEC Compliance</b>						<b>AE</b> 13506								
REPORT TO:		City and Borough of Juneau E-mail: karen_sewell@ci.juneau.ak.us jim_westcott@ci.juneau.ak.us		PHONE#: (907) 586-0393		# of Bottles												
ADDRESS:		2009 Radcliffe Road Juneau, AK 99801		SAMPLED BY: <i>J. WESTCOTT / L. VANAN</i>														
DATE	TIME	SITE DESCRIPTION / IDENTIFIER	MATRIX	Fecal Coliform	Enterro. fecal							Total Ammonia	Salinity	MHS	Field Results			
08/26/15	0615	J-D WTP Channel Grab	H <sub>2</sub> O	X					pH	Temp	D.O.							
08/26/15	0615	J-D WTP Channel Grab	H <sub>2</sub> O		X				8.01	11.1	10.91							
08/26/15	0615	J-D WTP Channel Grab	H <sub>2</sub> O			X		X										
08/26/15	0615	J-D WTP Channel Grab	H <sub>2</sub> O				X											
Comments: Taken in conjunction with composite sampling				Section to be completed by receiving laboratory														
Relinquished by: (signature)		Relinquished by: (print)		Date:	Time:	Temp (°C) <u>5.33</u>			Sample Receipt: Yes / No									
Received by: (signature)		Received by: (print)		Date:	Time:								Bottles Intact <u>Y</u>					
Relinquished by: (signature)		Relinquished by: (print)		Date:	Time:											Thermo ID# <u>SK-1</u>		
Received by: (signature)		Received by: (print)		Date:	Time:													
Relinquished by: (signature)		Relinquished by: (print)		Date:	Time:	Condition of Custody seal <u>✓</u>												
Received by: (signature)		Received by: (print)		Date:	Time:				Labels Agree with COC <u>Y</u>									
Relinquished by: (signature)		Relinquished by: (print)		Date:	Time:							Initialed By: <u>JTO</u>						
Received by: (signature)		Received by: (print)		Date:	Time:										Holding Time Met <u>Y</u>			
Relinquished by: (signature)		Relinquished by: (print)		Date:	Time:	Shipped Via: <u>—</u>												
Received by: (signature)		Received by: (print)		Date:	Time:				Problems: <u>N</u>									

Admiralty Environmental  
 641 W. Willoughby Ave., Ste 301  
 Juneau, AK 99801 (907)  
 463-4415 fax (480) 247-4476

CHAIN OF CUSTODY/TRANSMITTAL RECORD

PAGE 1 OF 1

*W Sewell*  
*⊗ Saltwater matrix*

1510078  
 Admiralty - Juneau, AK  
 CBJ Wastewater AE 13506  
 09/01/2015



Carey Gazdara

**CBJ Wastewater**  
 Juneau Douglas Treatment Plant Permit # AK-002321-3

**ADEC Compliance**

1510078

AE 13506

City and Borough of Juneau  
 E-mail: karen\_sewell@ci.juneau.ak.us  
 jim\_westcott@ci.juneau.ak.us  
 2009 Radcliffe Road  
 Juneau, AK 99801

PHONE: (907) 586-0393

SAMPLED BY:  
*J. Westcott / L. Vaughn*

# of Bottles

*Handwritten notes and markings in the ADEC Compliance section, including a large bracket and 'X' marks.*

Field Results

pH	Temp	D.O.	
8.0	11.1	10.9	
			-0.1

TIME	SITE DESCRIPTION / IDENTIFIER	MATRIX					
08/26/15	0615 J-D WTP Channel Grab	H <sub>2</sub> O	1				
08/26/15	0615 J-D WTP Channel Grab	H <sub>2</sub> O	1				
08/26/15	0615 J-D WTP Channel Grab	H <sub>2</sub> O	1	X		X	
08/26/15	0615 J-D WTP Channel Grab	H <sub>2</sub> O	1		X		

Comments: Taken in conjunction with composite sampling

Relinquished by: (signature)	Relinquished by: (print)	Date:	Time:
<i>[Signature]</i>	Harry Vaughn	8-26-15	0828
<i>[Signature]</i>	Horne O'Neill	8/26/15	0828
<i>[Signature]</i>	I. FULSTEAD	8/31/15	0722
<i>[Signature]</i>	Wade Rinnat	9-1-15	1022

Temperature		Thermo ID#		Condition of Custody seal		Initialed By:		Shipped Via:		Bottles Insect		Sufficient Sample Volume:		Labels Agree with COC:		Holding Time Met:		Problems:	
Temp (°C):	5.33	-0.6	821	12	✓	✓	HB	MR	Fedex	Y	Y	Y	Y	Y	Y	Y	Y	N	N

*Handwritten calculation:*  
 -0.7  
 +0.1  
 -----  
 -0.6 °C OI



**COOLER INSPECTION**

Client Name: Admiralty Environmental, LLC

Work Order Number: 1510078

Checklist completed by: 9/1/2015 4:46:00PM | Nicole Rainwater

Carrier Name: FedEx

Date: Wednesday, September 9, 2015

Date/Time Received: 09/01/2015 10:22

Received by: Nicole Rainwater

Reviewed by: 9/2/2015 | CAG

Cooler ID: Default Cooler

Container/Temp Blank Temperature: -0.6° C

After-Hour Arrival?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
Shipping container/cooler in good condition?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	Not Present <input type="checkbox"/>
Custody seals intact on shipping container/cooler?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	Not Present <input type="checkbox"/>
Custody seals intact on sample containers?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Not Present <input checked="" type="checkbox"/>
COC present?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
COC included sufficient client identification?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
COC included sufficient sample collector information?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
COC included a sample description?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
COC agrees with sample labels?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
COC identified the appropriate matrix?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
COC included date of collection?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
COC included time of collection?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
COC identified the appropriate number of containers?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
Samples in proper container/bottle?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
Sample containers intact?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
Sufficient sample volume for indicated test?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
All samples received within holding time?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
If the samples are preserved, are the preservatives identified?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	

If No, adjusted by? \_\_\_\_\_

COC included the requested analyses?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
COC signed when relinquished and received?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
Samples received on ice?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
Samples properly preserved?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	
Voa vials for aqueous samples have zero headspace?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	No VOA vials submitted <input checked="" type="checkbox"/>

Cooler Comments:

ANY "NO" EVALUATION (excluding After-Hour Receipt) REQUIRES CLIENT NOTIFICATION.

Sample ID	Client Sample ID	Comments
1510078-01	J-D WTP channel Grab	

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