

JUNEAU-DOUGLAS WASTEWATER TREATMENT FACILITY

October 2015

Juneau, Alaska

WEATHER		FLOWS		INFLUENT								Effluent										
DAY	DATE	TEMP °F	RAIN FALL INCHES	J-D TTL EFFL MGD	TEMP °C	pH	D.O. mg/L	T.S.S. mg/L	T.S.S. LBS	BOD mg/L	BOD LBS	TEMP °C	pH	D.O. mg/L	T.S.S. mg/L	T.S.S. LBS	BOD mg/L	BOD LBS	Effluent Fecal /100 ml	Effluent Entero /100 ml	Channel Fecal /100 ml	
SUN	4	44.5	0.00	0.74																		
MON	5	43.8	0.00	0.83	13.2	7.4	4.4					13.3	7.0	4.6								
TUE	6	42.4	0.00	0.85	13.1	7.5	3.9	312.0	2198.8	220.0	1550.4	13.3	6.9	5.8	1.0	7.0	2.5	17.6	2.0			
WED	7	47.1	T	0.68	13.4	7.5	3.8	377.0	2134.9	390.0	2208.5	13.3	7.0	4.3	1.0	5.7	2.7	15.3			1.0	
THU	8	49.1	0.17	1.09	13.4	7.4	4.0					13.8	7.0	4.8								
FRI	9	53.9	0.68	1.98	12.3	7.5	3.1					13.8	7.0	3.4								
SAT	10	51.0	1.21	0.92																		
SUN	11	49.2	0.06	1.61																		
MON	12	47.9	0.91	1.87	12.0	7.5	5.9					12.2	7.0	4.8								
TUE	13	45.7	0.86	1.93	10.9	7.4	6.2	61.0	981.9	110.0	1770.6	11.8	7.0	5.3	1.0	16.1	3.1	49.9	1.0			
WED	14	45.5	0.76	0.95	11.4	7.4	6.3	136.0	1074.1	180.0	1421.6	12.2	7.0	5.4	6.4	50.5	4.3	34.0				
THU	15	43.0	0.02	0.95	12.6	7.7	3.7					13.1	6.9	4.9								
FRI	16	46.0	0.30	0.98	12.1	7.4	3.6					14.1	6.9	4.9								
SAT	17	52.00	0.40	1.63																		
SUN	18	49.20	M	1.64																		
MON	19	47.50	0.60	1.08	13.3	7.4	6.1					13.3	6.8	5.5								
TUE	20	45.50	0.26	1.90	13.0	7.3	5.3	49.0	774.8	86.0	1359.9	13.4	6.8	5.6	1.0	15.8	3.8	60.1	1.0			
WED	21	45.60	0.26	1.84	12.9	7.3	6.2	150.0	2298.1	150.0	2298.1	13.2	6.8	5.4	4.0	61.3	2.4	36.8				
THU	22	47.40	0.58	1.55	12.8	7.4	6.3					13.4	6.8	5.5								
FRI	23	46.20	0.82	1.19	13.3	7.7	3.1					12.2	6.8	6.1								
SAT	24	43.40	0.13	0.89																		
SUN	25	39.70	0.01	0.87																		
MON	26	38.30	0.00	0.81	12.2	7.8	4.3					12.3	7.1	4.5								
TUE	27	38.10	0.00	0.86	11.9	7.4	5.2	330.0	2353.1	360.0	2567.1	12.3	7.0	4.6	1.0	7.1	4.0	28.5	1.0			
WED	28	44.20	0.05	1.09	11.4	7.2	5.0	280.0	2552.4	250.0	2278.9	12.8	7.0	4.3	1.0	9.1	3.5	31.9				
THU	29	44.80	0.41	1.07	10.0	7.3	5.3					12.4	6.8	4.7								
FRI	30	43.40	0.45	0.98	11.7	7.6	3.9					13.3	6.7	6.0								
SAT	31	41.50	0.32	0.77																		
TOTAL			9.26	33.52																		
MAXIMUM		53.90	1.21	1.98	13.4	7.8	6.3	377.0	2552.4	390.0	2567.1	14.1	7.1	6.1	6.4	61.3	4.3	60.1	2.0			
MINIMUM		38.10	0.00	0.68	10.0	7.2	3.1	49.0	774.8	86.0	1359.9	11.8	6.7	3.4	1.0	5.7	2.4	15.3	1.0			
AVERAGE*		45.57	0.356	1.20	12.3	7.5	4.8	211.9	1796.0	218.3	1931.9	13.0		5.0	2.1	21.6	3.3	34.3	0.3			
Number Of Analyses		28	26	28	20	20	20	8	8	8	8	20	20	20	8	8	8	8	4	0	1	1

Copper	ug/L	Ammonia	mg/L	85%	
10/7/2015	8.4	10/7/2015	2.2	B.O.D.	98.5
				S.S.	99.0

Weekly TSS BOD	Weekly				Weekly Coliform Geo Mean
	TSS		BOD		
Aver	mg/l	lbs	mg/l	lbs	
WEEK1	1.0	6.4	2.6	16.5	2.0
WEEK2	3.7	33.3	3.7	41.9	1.0
WEEK3	2.5	38.5	3.1	48.4	1.0
WEEK4	1.0	8.1	3.8	30.2	1.0
MAX	3.7	38.5	3.8	48.4	2.0

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

MONITORING PERIOD: 10/1/2015

TO 10/31/2015

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				
Temperature (C) 1 - Final Effluent 00010	Sample meas.	*****	*****		*****	*****	14.1		0		
	Permit reqmt.	*****	*****		*****	*****	Report daily maximum	DEG.C		5X Weekly	Grab
Dissolved Oxygen 1 - Final Effluent 00300	Sample meas.	*****	*****		3.4	*****	6.1		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.	34.3	60.1		*****	3.3	4.3		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.	218.3	*****		*****	218.3	*****		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.	*****	48.4		*****	3.8	*****		0		
	Permit reqmt.	*****	1,035 weekly average	lbs/day	*****	45 weekly average	*****	mg/l		Monthly	24-Hr Composite

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <div style="text-align: center; font-family: cursive; font-size: 1.2em;">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 907.586.0893	DATE 10/11/13
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <div style="text-align: center; font-family: cursive; font-size: 1.2em;">[Signature]</div>	AREA NUMBER	Y M D

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TO 10/31/2015

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				
pH 1 - Final Effluent 00400	Sample meas.	*****	*****		6.7	*****	7.1		0		
	Permit reqmt.	*****	*****		6.5 minimum	*****	8.5 maximum	S.U.		5X Weekly	Grab
Total Suspended Solids 1 - Final Effluent 00530	Sample meas.	21.6	61.3		*****	2.1	6.4		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.	1796.0	*****		*****	211.9	*****		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.	*****	38.5		*****	3.7	*****		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.	*****	*****		*****	2.2	2.2		0		
	Permit reqmt.	*****	*****		*****		30 daily maximum	mg/l		Monthly	24-Hr Composite

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TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <div style="text-align: center; font-family: cursive; font-size: 1.5em;">A. Westcott</div>	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
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 Juneau, AK 99801

PERMIT NUMBER: AK0023213

MONITORING PERIOD: 10/1/2015

TO 10/31/2015

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				
Ammonia Nitrogen (as N) W - See Comments 00610	Sample meas.	*****	*****		*****	2.2	*****		0		
	Permit reqmt.	*****	*****		*****	21 weekly average	*****	mg/l		Monthly	24-Hr Composite
Copper Total Recoverable 1 - Final Effluent 01119	Sample meas.	*****	*****		*****	*****	8.4		0		
	Permit reqmt.	*****	*****		*****	*****	Report daily maximum	ug/l		Quarterly	24-Hr Composite
Flow 1 - Final Effluent 50050	Sample meas.	1.20	1.98		*****	*****	*****		0		
	Permit reqmt.	2.76 monthly average	6.0 daily maximum	MGD	*****	*****	*****			Continuous	Recorded
Enterococci 1 - Final Effluent 61211	Sample meas.	*****	*****		*****	*****			NA		
	Permit reqmt.	*****	*****		*****	*****	Report daily maximum	cts/100 ml		See Permit Requirements	Grab
Fecal Coliform 1 - Final Effluent 74055	Sample meas.	*****	*****		*****	0.3	2.0		0		
	Permit reqmt.	*****	*****		*****	200 monthly geometric mean	800 daily maximum	cts/100 ml		Weekly	Grab

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <div style="font-family: cursive; font-size: 1.5em; margin-bottom: 10px;">[Signature]</div>			

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 Juneau, AK 99801

PERMIT NUMBER: AK0023213

MONITORING PERIOD: 10/1/2015

TO 10/31/2015

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.	*****	*****		*****	2.0	*****		0		
	Permit reqmt.	*****	*****		*****	400 weekly average	*****	cts/100 ml		Weekly	Grab
BOD5 Minimum % Removal K - Percent Removal 81010	Sample meas.	*****	*****		98.5	*****	*****		0		
	Permit reqmt.	*****	*****		85 minimum percent removal	*****	*****	%		Monthly	Calculation
Total Suspended Solids Minimum % Removal K - Percent Removal 81011	Sample meas.	*****	*****		99.0	*****	*****		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 <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. 586.0393</div>	DATE <div style="font-size: 1.2em;">15/11/13</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: 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: 10/1/2015 TO 10/31/2015
 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:

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 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>907 790-2825</i> AREA NUMBER	DATE <i>11/2/15</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

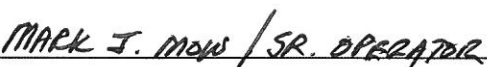

FACILITY: JUNEAU DOUGLAS WW TREATMENT FACILITY
 LOCATION: 1540 Thane Rd
 Juneau, AK 99801

MONITORING PERIOD: 10/1/2015 TO 10/31/2015
 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.				*****						
	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:

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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
<div style="text-align: center;">  TYPED OR PRINTED </div>	<div style="text-align: center;">  SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT </div>	(907) 790-2525	11/2/15
		AREA NUMBER	Y M D

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 LOCATION: 1540 Thane Rd
 Juneau, AK 99801

MONITORING PERIOD: 10/1/2015 TO 10/31/2015
 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:											

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<i>MARK J. MOW / SR. OPERATOR</i>	<i>Mark J. Mow</i>	(907) 790-2525	11/2/15
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA NUMBER	Y M D