

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

MAJOR (SUB 01) OMB No. 2040-0004  
F - FINAL Approval Expires 05-31-98  
EFFLUENT

\*\*\* NO DISCHARGE  
NOTE: Read instructions before completing this form.

PERMITTEE NAME/ADDRESS (Include Facility name/Location if different)

NAME: JUNEAL, CITY AND BOROUGH OF  
ADDRESS: MENDENHALL TREATMENT PLANT  
155 SOUTH SEWARD,  
JUNEAL, ALASKA 99801  
FACILITY: MENDENHALL VALLEY SERVICE AREA  
LOCATION: JUNEAL, ALASKA 99801  
ATT: ANDREW BRONSON, WWTP Supt.

(2-16)

AK0022951  
PERMIT NUMBER

(17-19)

001 A  
DISCHARGE NUMBER

MONITORING PERIOD			
YR	MO	DAY	TO
2000	04	01	
YR	MO	DAY	TO
2000	04	01	

(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

PARAMETER (32-37)	(3 Card Only) (46-53)		QUANTITY OF LOADING (64-61)		QUALITY OR CONCENTRATION (64-61)		NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
	AVERAGE	MAXIMUM	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1.0 0 EFFLUENT GROSS VALUE	MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	11.6	12.7		5/7	GRAB
BOD 5-DAY (20 DEG. C) 00310 G 0 0 RAW SEW/INFLUENT	MEASUREMENT PERMIT REQUIREMENT	5897	(26)	290	REPORT MO AVG	REPORT WKLY AVG	0	WEEK - GRAB DAYS	COMP
BOD 5-DAY (20 DEG. C) 00310 1.0 0 EFFLUENT GROSS VALUE	MEASUREMENT PERMIT REQUIREMENT	150	227	7.3	REPORT MO AVG	*****	0	2/7	COMP
pH	MEASUREMENT PERMIT REQUIREMENT	*****	*****	6.5	30 MO AVG	45 WKLY AVG		2/7	COMP
SOLIDS, TOTAL SUSPENDED 00530 G 0 0 RAW SEW/INFLUENT	MEASUREMENT PERMIT REQUIREMENT	4188	(26)	203	30 DAY AVG	220	0	1/7	COMP
SOLIDS, TOTAL SUSPENDED 00530 1.0 0 EFFLUENT GROSS VALUE	MEASUREMENT PERMIT REQUIREMENT	137	(26)	6.6	REPORT 30 DAY AVG	8.5	0	1/7	COMP
NITROGEN, AMMONIA TOTAL (AS N) 00610 1.00 EFFLUENT GROSS VALUE	MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	30 DAY AVG	45 WKLY AVG		WEEKLY COMP 24	GRAB

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. 1001 AND 33 U.S.C. & 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Andrew W. Bronson

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER ANDREW BRONSON	TELEPHONE 789-9919	DATE 05 08
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT (REFERENCE ALL ATTACHMENTS HERE)	AREA CODE 907	YEAR 2000
Wastewater Utility Superintendent TYPED OR PRINTED	PHONE NUMBER 789-9919	MO MO
COMMENT AND EXPLANATION OF ANY VIOLATIONS *CONCERNING VIOLATION- PLEASE SEE ATTACHED.		DAY DAY

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DISCHARGE MONITORING REPORT (DMR)**

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ADDRESS: MENDENHALL TREATMENT PLANT  
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JUNEAU ALASKA 99801  
FACILITY: MENDENHALL VALLEY SERVICE AREA  
LOCATION: JUNEAU, ALASKA 99801  
ATT: ANDREW BRONSON, WWTP SUPT.

(2-19) **AK0022951**  
PERMIT NUMBER

(17-19) **001 A**  
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MONITORING PERIOD			
YR	MO	DAY	TO
2000	04	01	
YEAR	MO	DAY	
2000	04	30	

PARAMETER (32-37)	(3 Card Only) (46-53)	QUANTITY OF LOADING (54-61)		QUALITY OR CONCENTRATION (64-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	AVERAGE (46-53)	MAXIMUM (24-25)			
SAMPLE MEASUREMENT PERMIT REQUIREMENT	31616 1.00			11	20	(13) #/ 100 ML	0	2/7	TWICE/GRAB WEEK
SAMPLE MEASUREMENT PERMIT REQUIREMENT	2.4796	(3)		200 MO GEO	WKLY GEO	ML	0	7/7	CONT
CHLORINE TOTAL RESIDUAL	50050 1.00	REPORT MO AVG	MGD					CONTINUOUSLY RECORDED	
EFFLUENT GROSS VALUE	50060 100			0.0000		(19)	0	5/7	CONT
PERCENT REMOVAL	81010 K 0.0			0.002 MO AVG.		MG/L		WEEK-GRAB DAYS	COMP
PERCENT REMOVAL	81011 K 0.0				98	(23)	0	1/ month ONCE/CACTD MONTH	GRAB
PERCENT REMOVAL					85 MO AVG.		0	1/ month ONCE/CACTD MONTH	

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NAME/TITLE: *Andrew W. Bronson* PRINCIPAL EXECUTIVE OFFICER  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  
 (REFERENCE ALL ATTACHMENTS HERE)

TELEPHONE: (907) 789-9919  
 AREA CODE: 907  
 PHONE NUMBER: 789-9919  
 YEAR: 2000  
 MO: 05  
 DAY: 08

Wastewater Utility Superintendent  
 TYPED OR PRINTED  
 COMMENT AND EXPLANATION OF ANY VIOLATIONS  
 \*THE EFFLUENTS CL<sub>2</sub> RESIDUAL WAS BELOW OUR EFFLUENT ANALYZERS DETECTABLE LEVEL.  
 \* THE RECORDED AVERAGE CL<sub>2</sub> RESIDUAL WAS CALCULATED FROM GRAB SAMPLES COLLECTED 2/DAY 5 DAYS/WEEK. A 0.0400 mg/L CALIBRATION STANDARD WAS USED.  
 EPA Form 3320-1 (08-95) Pre Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)