## NATIONAL POLITITANT DISCHARGE FLIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

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

NAME ADDRESS:

FACILITY. LOCATION: ATT:

JUNEAU, CITY AND BÖRÖUGH OF MENDENHALL TREATMENT PLANT 155 SOUTH SEWARD, JUNEAU, ALASKA 99801 MENDENHALL VALLEY SERVICE AREA JUNEAU, ALASKA 99801 SCOTT JEFFERS, WW UTILITIES SUPT

MAJOR (SUB 01) F - FINAL Form Approved.

OMB No. 2040-0004 Approval Expires 05-31-98 ### NO DISCHARGE
NOTE: Read instructions before completing this form. 001 A DISCHARGE NUMBER MONITORING PERIOD

	$\sim$	QUANTITY OR LOADING			QUAL	ITY OR CONCEN	IRATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
i l		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	1		
EMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	*****	*****	13.3	15.0	(04)	0	5/7	
0010 1 0 0 FFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****		*****		REPORT MO AVG	REPORT DAILY MAX	DEG. ^C		WEEK DAYS	GRAB
BOD, 5-DAY 20 DEG. C)	SAMPLE MEASUREMENT	4189	5235	(26)	*****	251	317	(19)	0	1/7	
0310 G 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MAX	LBS/DAY	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L		WEEKLY	COMP 24
SOD, 5-DAY 20 DEG. C)	SAMPLE MEASUREMENT	535.0	*****	(26)	*****	32.4	*****	(19)	0	1/7	
0310 W 0 0 EE COMMENTS BELOW	PERMIT REQUIREMENT	1009 WKLY AVG		LBS/DAY	*****	45 WKLY AVG	*****	MG/L		MEEKLY	COMP 24
3OD, 5-DAY 20 DEG. C)	SAMPLE MEASUREMENT	250.4	535.0	(26)	*****	15.0	32.4	(19)	0	1/7	
0310 1 0 0 FFLUENT GROSS VALUE	PERMIT REQUIREMENT	1226 MO AVG	2452 DAILY MAX	LBS/DAY	*****	30 MO AVG	60 DAILY MAX	MG/L		WEEKLY	COMP 24
H	SAMPLE MEASUREMENT	*****	*****	*****	6.5	*****	6.9	(12)	0	5/7	
0400 1 0 0 FFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.5 MIN.	*****	8.5 MAXIMUM	SU		WEEK DAYS	GRAB
LKALINITY S CaCO3	SAMPLE MEASUREMENT	*****	*****	*****	*****	136.0	136.0	(19)	0	1/ month	
0425 1 0 0 FFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	COMP 24
OLIDS. TOTAL USPENDED	SAMPLE MEASUREMENT	2745.0	3038.4	(26)	*****	164.0	184.0	(19)	0	1/7	
0530 G 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MAX	LBS/DAY	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L		WEEKLY	COMP 24
CERTIFY UNDER PENALTY OF LAW TI OR OBTAINING THE INFORMATION.	I BELIEVE THE SUBMIT	TED INFORMATION IS	TRUE, ACCURATE AN	COMPLETE. I AM A	AWARE THAT THERE	ARE SIGNIFICANT PE	NALTIES FOR SUBMITT	NG FALSE INFORM	IATION,		
ICLUDING THE POSSIBILITY OF FINE		E 18 U.S.C. 1001 AND	9 U.S.C. &[1319.]	1.	(Penalties under these	statutes may include fine	s up to \$10,000 and or ma	xımum imprisonment	or between 6 months	DATE	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER SCOTT JEFFERS		<del>- 1</del>	Alla	les/s		907	1ELEPHONE 586-0	393	2003	12	10
WW UTILITY SUPERINTENDENT				PRINCIPAL EXECUTIVE RAUTHORIZED AGENT		AREA CODE	PHONE NUMBER		YEAR	МО	DAY
TYPED OR PRIN OMMENT AND EXPLANATION CONCERNING VIOLATION-P	OF ANY VIOLATIC		(REFERENCE A			CODE	FAONE NO	WIDER	TEAN	1 100	DA1

AK0022951 PERMIT NUMBER

FROM

## NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MQNITORING REPORT (DMR)

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

MAJOR Form Approved.

(SUB 01) OMB No. 2040-0004

F - FINAL Approval Expires 05-31-98

E++LUEN1

\*\*\* NO DISCHARGE

NOTE: Read instructions before completing this form.

NAME: ADDRESS:	JUNEAU, CITY AND BOROUGH OF MENDENHALL TREATMENT PLANT			022951 NUMBER	}		[	001 DISCHARGE	
	155 SOUTH SEWARD, JUNEAU, ALASKA 99801				М	ONITORING PE	RIOD		
FACILITY: LOCATION:	MENDENHALL VALLEY SERVICE AREA JUNEAU, ALASKA 99801	FROM	YR 2003	MO 11	DAY 01	то	YEAR 2003	MO 11	DAY 30
ATT:	SCOTT JEFFERS, WW UTILITIES SUPT	]				_			

PARAMETER		QUANTITY OR LOADING				ITY OR CONCEN	TRATION	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		l	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	429.3	*****	(26)	*****	16.3	*****	(19)	0	1/7	
00530 W 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	1839 WKLY AVG	*****	LBS/DAY	******	45 WKLY AVG		MG/L		WEEKLY	COMP 24
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	271.9	429.3	(26)	*****	16.3	26.0	(19)	0	1/7	
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	1226 MO AVG	2452 DAILY MAX	LBS/DAY	*****	30 MO AVG	60 DAILY MAX	MG/L		WEEKLY	COMP 24
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	316.9	316.9	(26)	. *****	19.0	19.0	(19)	0	1/ month	
00610 1 00 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	1079 MO AVG	1622 DAILY MAX	LBS/DAY	*****	26.4 MO AVG	39.7 DAILY MAX	MG/L		ONCE/ MONTH	COMP 24
SILVER TOTAL RECOVERABLE	SAMPLE MEASUREMENT	0.012	0.012	(26)	*****	0.73	0.73	(28)	0	1/ month	
บาบ79 1 บ บ EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.036 MO AVG	0.072 DAILY MAX	LBS/DAY	*****	0.87 MO AVG.	1./5 DAILY MAX	ug/L		ONCE/ MONTH	COMP 24
ZINC TOTAL RECOVERABLE	SAMPLE MEASUREMENT	2.27	2.27	(26)	*****	136.0	136.0	(28)	1	1/ month	
01094 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	2.92 MO AVG	6.09 DAILY MAX	LBS/DAY	*****	71.4 MO AVG.	149.0 DAILY MAX	ug/L		ONCE/ MONTH	COMP 24
LEAD TOTAL RECOVERABLE	SAMPLE MEASUREMENT	0.085	0.085	(26)	*****	5.1	5.1	(28)	0	1/ month	
01114 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.225 MO AVG	0.450 DAILY MAX	LBS/DAY	*****	5.5 MO AVG	11.0 DAILY MAX	ug/L		ONCE/ MONTH	COMP 24
COPPER TOTAL RECOVERABLE	SAMPLE MEASUREMENT	0.184	0.184	(26)	****	11.00	11.00	(28)	1	1/ month	
01119 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.342 MO AVG	0.858 DAILY MAX	LBS/DAY	******	8.36 MO AVG.	20.1 DAILY MAX	ug/L		ONCE/ MONTH	COMP 24
I CERTIFY UNDER PENALTY OF LAW TO FOR OBTAINING THE INFORMATION. INCLUDING THE POSSIBILITY OF FINE	I BELIEVE THE SUBMITT	TED INFORMATION IS	TRUE, ACCUPATE AN		AWARE THAT THERE	ARE SIGNIFICANT PE		ING FALSE INFORM	ATION,	and 5 years.	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER				4			TELEPHONE			DATE	
SCOTT JEFFERS	Ĺ	- Cd				(907)	580-0	393	2003	12	10
WW UTILITY SUPERINTENDENT TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICIER OR AUTHORIZED AGENT			AREA CODE	DUO	NE NUMBER	YEAR	мо	DAY

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(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED).

00434/981209 1904

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

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

MAJOR Form Approved.

(SUB 01) OMB No. 2040-0004
F - FINAL Approval Expires 05-31-98
EFFLUENT
\*\*\* NO DISCHARGE
NOTE: Read instructions before completing this form.

NAME: ADDRESS:	JUNEAU, CITY AND BOROUGH OF MENDENHALL TREATMENT PLANT 155 SOUTH SEWARD,		AK00 PERMIT	22951 NUMBER	]			001 DISCHARGE	
FACILITY:	JUNEAU, ALASKA 00801 MENDENHALL VALLEY SERVICE AREA		VD	MO	DAY	NITORING PER		1 10	
LOCATION:	JUNEAU, ALASKA 99801	FROM	2003	11	01	то	2003	MO 11	DAY 30
ATT:	SCOTT JEFFERS, WW UTILITIES SUPT								
PARAMETER			QUALI	TY OR CONCEN	TRATION		NO.	FREQUENCY	SAMPLE

(32-37)					QUAL	III OR CONCEN	IRATION	NO. EX	OF ANALYSIS	SAMPLE TYPE	
` '		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		OI THURSTON	
COLIFORM, FECAL MF,	SAMPLE					2.7		(13)	. 0	3/7	
M-FC BROTH, 44.5C	MEASUREMENT	*****	*****	*****	*****	ļ	*****	, ,		-	
31616 W 0 0	PERMIT	1. 1.		]		400		1		THREE TIMES/	GRAB
SEE COMMENTS BELOW	REQUIREMENT	*****	*****	*****	*****	WKLY GEO	*****	#/100ML		WEEK	
COLIFORM, FECAL MF,	SAMPLE					2.5	5.0	(13)	0	3/7	
M-FC BROTH, 44.5C	MEASUREMENT	*****	*****	*****	*****			' ' '			
31616 1 0 0	PERMIT					200	400	1		THREE TIMES/	GRAB
EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	*****	*****	MO GEO	DAILY MAX	#/100ML		WEEK	
FLOW, IN CONDUIT OR	SAMPLE	2.07	2.59	(03)					0	7/7	
THRU TREATMENT PLANT	MEASUREMENT				*****	*****	*****	*****	-		
50050 P 0 0	PERMIT	REPORT	REPORT				7.7			CONTINUOSLY	RECORDED
EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MAX	MGD	*****	*****	*****	*****			
EFFLUENT DILUTION	SAMPLE				34.4			(23)	0		
RATIO	MEASUREMENT	*****	*****	*****		*****	*****	()		7/7	
78480 1 0 0	PERMIT				10		Fig. 1			DAILY	CACTD
EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	*****	MINIMUM	*****	*****	PERCENT			
BOD, 5-DAY PERCENT	SAMPLE				94.0			(23)	0		
REMOVAL.	MEASUREMENT	*****	*****	*****		*****	*****	\—- <i>/</i>	-	1/ month	
81010 K 0 0	PERMIT	44.73			85					ONCE/	CACTD
PERCENT REMOVAL	REQUIREMENT	*****	*****	*****	MN % RMV	*****	*****	PERCENT		MONTH	
SOLIDS, SUSPENDED	SAMPLE				90.1			(23)	0		
PERCENT REMOVAL	MEA3UREMENT	*****	******	*****		*****	*****	(,		1/ month	
81011 K 0 0	PERMIT				85		100	1		ONCE/	CACTD
PERCENT REMOVAL	REQUIREMENT	*****	*****	*****	MN % RMV	*****	*****	PERCENT		MONTH	
I CERTIFY UNDER PENALTY OF LAW TH	HAT I HAVE PERSONALLY E	EXAMINED AND AM FA	MILIAR WITH THE INFO	RMATION SUBMITTI	ED HEREIN: AND BASED	ON MY INQUIRY OF T	HOSE INDIVIDUALS IN	MEDIATELY RESPONS	IBLE		
FOR OBTAINING THE INFORMATION.	I BELIEVE THE SUBMIT	TED INFORMATION IS	TRUE, ACCURATE A	ND COMPLETE. I AN	AWARE THAT THERE	ARE SIGNIFICANT PE	NALTIES FOR SUBMIT	TTING FALSE INFORMA	TION.		
INCLUDING THE POSSIBILITY OF FINE	AND IMPRISONMENT. SEE	E 18 U.S.C. 1001 AND 3	33 U.S.C. & 1319.		(Penalties under these s	tatutes may include fine.	s up to \$10,000 and or r	maximum imprisonment o	f between 6 months	and 5 years.	
NAME/TITLE PRINCIPAL EXECUTIV	/E OFFICER	$\overline{x}$		Λ			TELEPHONE	,		DATE	
SCOTT JEFFERS			ett >E/IR	No.		(007)	586-	-0393	2003	12	10
WW UTILITY SUPERINTENDER	NT [		SIGNATURE OF	PRINCIPAL EXE	CUTIVE	AREA					
TYPED OR PRIN	ITED		OFFICER OR	AUTHORIZED A	GENT	CODE	PHO	ONE NUMBER	YEAR	МО	DAY
COMMENT AND EXPLANATION	OF ANY VIOLATIO	NS	(REFERENCE A	LL ATTACHME	NTS HERE)					1	
*CONCERNING VIOLATION- PI	LEASE SEE ATTAC	HED.	,		,						j
L											

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

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

MAJOR FORM Approved.

(SUB 01) OMB No. 2040-0004
F - FINAL Approval Expires 05-31-98
EFFLUENT \*\*\* NO DISCHARGE \*\*\*\*

NOTE: Read instructions before completing this form.

NAME: JUNEAU, CITY AND BOROUGH OF AK0022951 ADDRESS: MENDENHALL TREATMENT PLANT PERMIT NUMBER	001 A
155 SOUTH SEWARD,	DISCHARGE NUMBER
SCOTT JEFFERS, WW UTILITIES SUPT   SCOTT JEFFERS SUPE SUPE SUPE SUPE SUPE SUPE SUPE SUP	MONITORING PERIOD     YEAR   MO   DAY

PARAMETER (32-37)			QUALITY OR CONCENTRATION							NO. FREQUENCY EX OF ANALYSIS	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	-	OF ANALYSIS	TYPE
TURBIDITY, LAB NTU	SAMPLE MEASUREMENT	*****	*****	*****	*****	9.7	16.8	(43)	0	7/7	
82079 1 0 0 FFFI LIENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	******	*****	REPORT MO AVG	REPORT DAILY MAX	NTU		CONTINUOSLY	RECORDED
HARDNESS, AS CaCO3	SAMPLE MEASUREMENT	*****	*****	*****	*****	73.40	73.40	(19)	0	41	
82394 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L		1/ month ONCE/ MONTH	COMP 24
DISSOLVED OXYGEN	SAMPLE MEASUREMENT	*****	*****	*****	1.4	5.1	8.6	(19)	0	1/quarter	
00300 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	REPORT MINIMUM	REPORT MO AVG	REPORT DAILY MAX	MG/L		ONGE/ QUARTER	
TOXICITY, CERIODAPHNIA CHRONIC	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3.3	(73)	0	GONTEN	
61406 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	10.0 MAXIMUM	TUC		TWICE/ YEAR	
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	****	100	*****	******	*****
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		*****	*****	*****
	SAMPLE MEASUREMENT	****	*****	*****	*****		*****	-	*****	******	*****
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		*****	******	*****
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****		*****	*****	*****
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		*****	*****	*****
I CERTIFY UNDER PENALTY OF LAW TH FOR OBTAINING THE INFORMATION. INCLUDING THE POSSIBILITY OF FINE	AND IMPRISONMENT. SEE	ED INFORMATION IS	TRUE, ACCURATE AL	ORMATION SUBMITTE	AWARE THAT THERE A	RE SIGNIFICANT PE	HOSE INDIVIDUALS IMM NALTIES FOR SUBMITT IS up to \$10,000 and or ma	ING FALSE INFORMA	ATION,		
NAME/TITLE PRINCIPAL EXECUTIV	'E OFFICER	1	41	lera			TELEPHONE		- authorities	DATE	
SCOTT JEFFERS			<b>3</b> \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			(907)	586-0	393	2003	12	10
WW UTILITY SUPERINTENDEN TYPED OR PRIN	TED		<u>deeker(or)</u>	RE OF PRINCIPAL EXECUTIVE ER OR AUTHORIZED AGENT		AREA CODE	PHONE NUMBER		YEAR	MO	DAY
COMMENT AND EXPLANATION CONCERNING VIOLATION PL			(REFERENCE A	ALL ATTACHMEN	ITS HERE)						ser, 11

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