

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

MAJOR (SUB 01)
F - FINAL EFFLUENT
*** NO DISCHARGE
NOTE: Read instructions before completing this form.

Form Approved.
OMB No. 2040-0004
Approval Expires 05-31-98

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

NAME: JUNEAU, CITY AND BOROUGH OF
ADDRESS: MENDENHALL TREATMENT PLANT
155 SOUTH SEWARD
JUNEAU, ALASKA 99801
FACILITY: MENDENHALL VALLEY SERVICE AREA
LOCATION: JUNEAU, ALASKA 99801
ATT: SCOTT JEFFERS, WW UTILITIES SUPT

AK0022951
PERMIT NUMBER

001 A
DISCHARGE NUMBER

MONITORING PERIOD							
FROM	YR	MO	DAY	TO	YEAR	MO	DAY
	2004	5	01		2004	5	31

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DECONTIGRADE	PERMIT REQUIREMENT	*****	*****	*****	*****	14.0	15.2	DFG °C	0	5/7	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MO AVG	REPORT DAILY MAX	DFG °C	0	WEEKLY	COMP 24
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	4257	5485	(26)	*****	249	324	(19)	0	1/7	
RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MAX	LBS/DAY	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L	0	WEEKLY	COMP 24
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	399.2	*****	(26)	*****	22.9	*****	(19)	0	1/7	
SEE COMMENTS BELOW	PERMIT REQUIREMENT	1839 WKLY AVG	*****	LBS/DAY	*****	45 WKLY AVG	*****	MG/L	0	WEEKLY	COMP 24
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	322.6	399.2	(26)	*****	18.8	22.9	(19)	0	1/7	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	1226 MO AVG	2452 DAILY MAX	LBS/DAY	*****	30 MO AVG	60 DAILY MAX	MG/L	0	WEEKLY	COMP 24
pH	SAMPLE MEASUREMENT	*****	*****	*****	6.5	*****	7.1	(12)	0	5/7	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.5 MIN	*****	8.5 MAXIMUM	SU	0	WEEK DAILY	GRAB
ALKALINITY AS CaCO3	SAMPLE MEASUREMENT	*****	*****	*****	*****	156.0	156.0	(19)	0	1/ month	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L	0	ONCE/ MONTH	COMP 24
SOLUBLE SUSPENDED SOLIDS	SAMPLE MEASUREMENT	4237	5229	(20)	*****	248	300	(19)	0	1/7	
RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MAX	LBS/DAY	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L	0	WEEKLY	COMP 24

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.)

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: SCOTT JEFFERS, WW UTILITY SUPERINTENDENT
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT: [Signature]
 TELEPHONE: 907 586-0393
 DATE: 2004 6 9

COMMENT AND EXPLANATION OF ANY VIOLATIONS CONCERNING VIOLATION- PLEASE SEE ATTACHED. (REFERENCE ALL ATTACHMENTS HERE)

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PARAMETER	MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	416.5	*****	(26)	*****	24.6	*****	(19)	0	1/7	
00F 700	PERMIT REQUIREMENT	1839	*****		*****	45	*****			WEEKLY	COMP 24
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	362.1	416.5	(26)	*****	21.1	24.6	(19)	0	1/7	
00530 100	PERMIT REQUIREMENT	1226	2452		*****	30	60			WEEKLY	COMP 24
EFFLUENT GROSS VALUE	MO AVG	348.6	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX	MG/L			
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	1079	1622	(26)	*****	20.0	20.0	(19)	0	1/ month	
00610 100	PERMIT REQUIREMENT	1079	1622		*****	26.4	30.7			ONCE/ MONTH	COMP 24
EFFLUENT GROSS VALUE	MO AVG	0.054	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX	MG/L			
SILVER TOTAL RECOVERABLE	SAMPLE MEASUREMENT	0.090	0.072	(26)	*****	3.11	3.11	(28)	3	1/ month	
01079 100	PERMIT REQUIREMENT	0.090	0.072		*****	0.87	1.75			ONCE/ MONTH	COMP 24
EFFLUENT GROSS VALUE	MO AVG	2.60	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX	ug/L			
ZINC TOTAL RECOVERABLE	SAMPLE MEASUREMENT	2.92	6.09	(26)	*****	149.0	149.0	(28)	1	1/ month	
01084 100	PERMIT REQUIREMENT	2.92	6.09		*****	71.4	149.0			ONCE/ MONTH	COMP 24
EFFLUENT GROSS VALUE	MO AVG	0.126	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX	ug/L			
LEAD TOTAL RECOVERABLE	SAMPLE MEASUREMENT	0.225	0.450	(26)	*****	7.2	7.2	(28)	1	1/ month	
01114 100	PERMIT REQUIREMENT	0.225	0.450		*****	5.5	11.0			ONCE/ MONTH	COMP 24
EFFLUENT GROSS VALUE	MO AVG	1.256	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX	ug/L			
COPPER TOTAL RECOVERABLE	SAMPLE MEASUREMENT	0.342	0.858	(26)	*****	72.00	72.00	(28)	4	1/ month	
01110	PERMIT REQUIREMENT	0.342	0.858		*****	8.36	20.1			ONCE/ MONTH	COMP 24
EFFLUENT GROSS VALUE	MO AVG	0.342	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX	ug/L			

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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
SCOTT JEFFERS
WW UTILITY SUPERINTENDENT

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
(REFERENCE ALL ATTACHMENTS HERE)

TELEPHONE (907) 586-0393
DATE 2004 6 9

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PARAMETER (32-37)	MEASUREMENT	QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS			
COLIFORM, FECAL MF, M-FC BROTH, 44.5C 318 700 SPL. COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	0	3/7	
	PERMIT REQUIREMENT	*****	*****	*****		THREE TIMES/WEEK	GRAB
COLIFORM, FECAL MF, M-FC BROTH, 44.5C 31816 100	SAMPLE MEASUREMENT	*****	*****	*****	0	3/7	
	PERMIT REQUIREMENT	*****	*****	*****		THREE TIMES/WEEK	GRAB
EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 P 00	SAMPLE MEASUREMENT	2.09	2.40	(03)	0	7/7	
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MAX	MGD		CONTINUOUSLY	RECORDED
EFFLUENT DILUTION RATIO 78480 100	SAMPLE MEASUREMENT	*****	*****	*****	0	7/7	
	PERMIT REQUIREMENT	*****	*****	*****		DAILY	CACTD
EFFLUENT GROSS VALUE BOD, 5-DAY PERCENT REMOVAL 81010 K 00	SAMPLE MEASUREMENT	*****	*****	*****	0	1/ month	
	PERMIT REQUIREMENT	*****	*****	*****		ONCE/MONTH	CACTD
PERCENT REMOVAL SOLIDS, SUSPENDED PERCENT REMOVAL 81011 K 00	SAMPLE MEASUREMENT	*****	*****	*****	0	1/ month	
	PERMIT REQUIREMENT	*****	*****	*****		ONCE/MONTH	CACTD

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INCL. 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.)

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
SCOTT JEFFERS
WW UTILITY SUPERINTENDENT

Scott Jeffers
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
(REFERENCE ALL ATTACHMENTS HERE)

TELEPHONE (907) 588-0303
DATE 2004 6 0

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TURBIDITY, LAB NTU		SAMPLE MEASUREMENT *****	*****	*****	*****	18.4	30.2	(43)	0	7/7	
820' JO		PERMIT REQUIREMENT *****	*****	*****	*****	REPORT MO AVG	REPORT DAILY MAX	NTU		CONTINUOUSLY	RECORDED
EFFLUENT GROSS VALUE		SAMPLE MEASUREMENT *****	*****	*****	*****	65.0	65.0	(19)	0	1/ month	
HARDNESS, AS CaCO3		PERMIT REQUIREMENT *****	*****	*****	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	COMP 24
82394 1 0 0		SAMPLE MEASUREMENT *****	*****	*****	1.8	7.7	11.2	(19)	0	1/quarter	
EFFLUENT GROSS VALUE		PERMIT REQUIREMENT *****	*****	*****	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L		ONCE/ QUARTER	
DISSOLVED OXYGEN		SAMPLE MEASUREMENT *****	*****	*****	*****	*****	n/a	(73)	0		
00300		PERMIT REQUIREMENT *****	*****	*****	*****	*****	10.0			TWICE/ YEAR	
EFFLUENT GROSS VALUE		SAMPLE MEASUREMENT *****	*****	*****	*****	*****	*****		*****	*****	*****
TOXICITY, CERIODAPHNIA CHRONIC		PERMIT REQUIREMENT *****	*****	*****	*****	*****	*****		*****	*****	*****
61400		SAMPLE MEASUREMENT *****	*****	*****	*****	*****	*****		*****	*****	*****
EFFLUENT GROSS VALUE		PERMIT REQUIREMENT *****	*****	*****	*****	*****	*****		*****	*****	*****

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 WW UTILITY SUPERINTENDENT
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT: *[Signature]*
 (907) TELEPHONE: 586-0393
 AREA CODE: 2004
 PHONE NUMBER: 6
 YEAR: 9
 MO: 6
 DAY: 9

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