

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

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 Superintendent

MAJOR
(SUB 01)
F - FINAL
EFFLUENT

Form Approved.
OMB No. 2040-0004
Approval Expires 05-31-90

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

AK-002295-1
PERMIT NUMBER

001 A
DISCHARGE NUMBER

MONITORING PERIOD						
YR	MO	DAY	TO	YEAR	MO	DAY
2005	1	1		2005	1	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 DEG, CENTIGRADE 00010 1 0 0	MEASUREMENT	*****	*****	****	*****	10.8	11.5	(04)	0	5/7	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT DAILY MAX	DEG. C		WEEK DAYS	GRAB
BOD, 5-DAY (20 DEG. C) 00310 G 0 0	SAMPLE MEASUREMENT	4464	5375	(26)	*****	236.0	297.0	(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		WEEKLY	COMP 24
BOD, 5-DAY (20 DEG. C) 00310 W 0 0	SAMPLE MEASUREMENT	435	*****	(26)	*****	22.7	*****	(19)	0	1/7	
SEE COMMENTS BELOW	PERMIT REQUIREMENT	1839 WKLY AVG	*****	LBS/DAY	*****	45 WKLY AVG	*****	MG/L		WEEKLY	COMP 24
BOD, 5-DAY (20 DEG. C) 00310 1 0 0	SAMPLE MEASUREMENT	351	435	(26)	*****	18.5	22.7	(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		WEEKLY	COMP 24
pH	SAMPLE MEASUREMENT	*****	*****	****	6.5	*****	6.8	(12)	0	5/7	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.5 MIN.	*****	8.5 MAXIMUM	SU		WEEK DAYS	GRAB
ALKALINITY, BICARBONATE as CaCO3 00425 1 0 0	SAMPLE MEASUREMENT	*****	*****	****	*****	140.0	140.0	(19)	0	1/30	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L		ONCE/MONTH	COMP 24
SOLIDS, TOTAL SUSPENDED 00530 G 0 0	SAMPLE MEASUREMENT	3590	4335	(26)	*****	189	226	(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		WEEKLY	COMP 24

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Scott Jeffers
Wastewater Utilities Superintendent

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with the system designed to assure that the 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
907 AREA CODE 586-0393
PHONE NUMBER
DATE
2005 YEAR 2 MO 10 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS

(Reference all attachments here)

* Concerning violations-please see attached. The reporting period was from 01/01/2005 through 01/31/2005.

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

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

MAJOR (SUB 01)
F - FTNAL
EFFLUENT

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

*** NO DISCHARGE ***

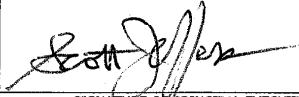
NOTE: Read instructions before completing this form.

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 Superintendent

AK-002295-1
PERMIT NUMBER

001 A
DISCHARGE NUMBER

MONITORING PERIOD						
YR	MO	DAY	TO	YEAR	MO	DAY
2005	1	1		2005	1	31

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 00530 G 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	627	*****	(26)	*****	32.4	*****	(19)	0	1/7	
	PERMIT REQUIREMENT	1839 WKLY AVG	*****	LBS/DAY	*****	45 WKLY AVG	*****	MG/L		WEEKLY	COMP 24
SOLIDS, TOTAL SUSPENDED 00530 G 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	486.5	626.9	(26)	*****	25.7	32.4	(19)	0	1/7	
	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) 00610 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	348.3	348.3	(26)	*****	18.0	18.0	(19)	0	1/30	
	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 01079 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.025	0.025	(26)	*****	1.27	1.27	(28)	1	1/30	
	PERMIT REQUIREMENT	0.036 MO AVG	0.072 DAILY MAX	LBS/DAY	*****	.87 MO AVG	1.75 DAILY MAX	ug/L		ONCE/MONTH	COMP 24
ZINC TOTAL RECOVERABLE 01094 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.54	0.54	(26)	*****	27.7	27.7	(28)	0	1/30	
	PERMIT REQUIREMENT	2.97 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 01114 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.007	0.007	(26)	*****	0.36	0.36	(28)	0	1/30	
	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 01119 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.304	0.304	(26)	*****	15.7	15.7	(28)	1	1/30	
	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
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 the system designed to assure that the 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.										
Scott Jeffers Wastewater Utilities Superintendent	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT										
TYPED OR PRINTED											TELEPHONE
	907		586-0303		2005		2		10		
	YEAR		MO		DAY						
COMMENT AND EXPLANATION OF ANY VIOLATIONS											
* Concerning violations-please see attached. The reporting period was from 01/01/2005 through 01/31/2005.											

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

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 Superintendent

MAJOR (SUB 01)
F - FINAL
EFFLUENT
*** NO DISCHARGE ***

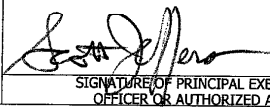
Form Approved.
OMB No. 2040-0004
Approval Expires 05-31-98

NOTE: Read instructions before completing this form.

AK-002295-1
PERMIT NUMBER

001 A
DISCHARGE NUMBER

MONITORING PERIOD						
YR	MO	DAY	TO	YEAR	MO	DAY
2005	1	1		2005	1	31

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS					
FECAL COLIFORM MF, M-FC BROTH 44.5C 31616 W 0 0 SEE COMMENTS BELOW	MEASUREMENT	*****	*****	****	*****	126.3	*****	(13)	0	3/7			
	PERMIT REQUIREMENT	*****	*****	****	*****	400 WKLY GEO	*****	#/100ML		THREE TIMES/ WEEK	GRAB		
FECAL COLIFORM MF, M-FC BROTH 44.5C 31616 1 0 0 EFFLUENT GROSS VALUE	MEASUREMENT	*****	*****	****	*****	62.2	480.0	(13)	1	3/7			
	PERMIT REQUIREMENT	*****	*****	****	*****	200 MO GEO	400 DAILY GEO	#/100ML		THREE TIMES/ WEEK	GRAB		
FLOW IN CONDUIT OR THROUGH TREATMENT PLANT 50050 P 0 0 SEE COMMENTS BELOW	MEASUREMENT	2.29	2.63	(03)	*****	*****	*****	****	0	7/7			
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MAX	MGD	*****	*****	*****	****		CONTINUOUSLY	RECORDED		
EFFLUENT DILUTION RATIO 78480 1 0 0 EFFLUENT GROSS VALUE	MEASUREMENT	*****	*****	****	398.7	*****	*****	(23)	0	7/7			
	PERMIT REQUIREMENT	*****	*****	****	10 MINIMUM	*****	*****	PERCENT		DAILY	CALCULATED		
BOD, 5-DAY PERCENT REMOVAL 81010 K 0 0 PERCENT REMOVAL	MEASUREMENT	*****	*****	****	92.2	*****	*****	(23)	0	1/30			
	PERMIT REQUIREMENT	*****	*****	****	85 MIN % REMOVAL	*****	*****	PERCENT		ONCE/ MONTH	CALCULATED		
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 K 0 0 PERCENT REMOVAL	MEASUREMENT	*****	*****	****	86.4	*****	*****	(23)	0	1/30			
	PERMIT REQUIREMENT	*****	*****	****	85 MIN % REMOVAL	*****	*****	PERCENT		ONCE/ MONTH	CALCULATED		
TURBIDITY, LAB NTU 82079 1 0 0 EFFLUENT GROSS VALUE	MEASUREMENT	*****	*****	****	*****	19.5	24.9	(43)	0	5/7			
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT DAILY MAX	NTU		WEEK DAYS	GRAB		
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 the system designed to assure that the 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				
Scott Jeffers Wastewater Utilities Superintendent									907				
									AREA CODE		586-0393		PHONE NUMBER
TYPED OR PRINTED									DATE				
COMMENT AND EXPLANATION OF ANY VIOLATIONS	(Reference all attachments here)								2005		2	10	
								YEAR		MO		DAY	

* Concerning violations please see attached. The reporting period was from 01/01/2005 through 01/31/2005.

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

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

MAJOR
 (SUB 01)
 F - FINAL
 EFFLUENT
 *** NO DISCHARGE ***

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

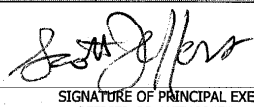
NOTE: Read instructions before completing this form.

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 Superintendent

AK-002295-1
 PERMIT NUMBER

001 A
 DISCHARGE NUMBER

MONITORING PERIOD						
YR	MO	DAY	TO	YEAR	MO	DAY
2005	1	1		2005	1	31

PARAMETER	MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
HARDNESS as CaCO3 82394 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	76.8	76.8	(19)	0	1/30	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L		ONCE/MONTH	GRAB
DISSOLVED OXYGEN 00300 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	0.6	2.5	7.5	(19)	0	1/90	
	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	REPORT MO AVG	REPORT DAILY MAX	MG/L		ONCE/QUARTER	
TOXICITY, CERIODAPHNIA CHRONIC 61406 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	n/a	(73)	0	1/182	
	PERMIT REQUIREMENT	1035 WKLY-AVG	*****	****	*****	*****	10.0 MAXIMUM	TUC		TWICE/YEAR	
	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****				
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****				
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****				
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****				
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****				
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 the system designed to assure that the 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			
Scott Jeffers Wastewater Utilities Superintendent								907	586-0393		
TYPED OR PRINTED								AREA CODE	PHONE NUMBER		
	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT							2005	2	10	
								YEAR	MO	DAY	

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 * Concerning violations-please see attached. The reporting period was from 01/01/2005 through 01/31/2005.

MENDENHALL WASTEWATER TREATMENT FACILITY
Juneau, Alaska

EPA REPORT

January 2005

DAY	DATE	WEATHER		FLOWS				INFLUENT					EFFLUENT					MISC								
		TEMP °F	RAIN FALL INCHES	SBR INFLUENT MGD	Mend. River CFS	TTL EFFL MGD	Receiving Water Dilution	SBR WASTE MGD	TEMP °C	pH	D.O. mg/L	SS mg/L	B.O.D. LBS	TSS mg/L	TSS LBS	TEMP °C	pH		D.O. mg/L	TURBID MAX NTU	Cl. mg/L	B.O.D. LBS	TSS mg/L	B.O.D. LBS	REGAL COLIFORM /100 ml	POWER METER READING
SUN	2	17	0.00	2.50	2617	2.50	677.2 /1	0.0628																		96
MON	3	26	0.00	2.33	2408	2.33	668.6 /1	0.0663																		96
TUE	4	31	0.03	2.32	2216	2.32	618.6 /1	0.0598	151	2922	192	3715	10.9	6.8	7.4	14.6	17.0	328.9	14.5	280.6			16	103	103	
WED	5	33	0.10	2.39	2136	2.38	585.7 /1	0.0681																		98
THU	6	22	0.13	2.36	2096	2.36	563.8 /1	0.0563																		98
FRI	7	22	0.00	2.33	1898	2.33	527.2 /1	0.0696																		98
SAT	8	29	0.00	2.40	1854	2.40	500.0 /1	0.0752																		103
SUN	9	23	0.00	2.41	1643	2.41	495.0 /1	0.0719																		101
MON	10	24	0.12	2.22	1833	2.22	534.4 /1	0.0709																		100
TUE	11	7	0.00	2.32	1767	2.32	493.0 /1	0.0687																		87
WED	12	3	0.00	2.60	1789	2.60	445.5 /1	0.0711	195	3773	220	4257	10.5	6.6	1.5	21.5	32.4	626.9	17.1	330.9			74	107		
THU	13	10	0.00	2.63	1789	2.63	440.4 /1	0.0859																		106
FRI	14	17	0.04	2.43	1486	2.43	388.7 /1	0.0801																		107
SAT	15	17	0.00	2.42	1600	2.42	481.5 /1	0.0871																		104
SUN	16	19	1.01	2.28	1767	2.28	501.7 /1	0.0754																		106
MON	17	24	0.58	2.31	1749	2.31	490.1 /1	0.0841																		104
TUE	18	20	0.62	2.00	1737	2.30	456.9 /1	0.0803	228	4335	235	4508	10.2	6.5	3.5	17.1									106	
WED	19	21	0.59	2.12	1732	2.12	528.8 /1	0.0925																		106
THU	20	26	0.25	2.15	1724	2.15	519.0 /1	0.0456																		106
FRI	21	32	0.06	2.08	1771	2.08	551.0 /1	0.0412																		99
SAT	22	37	0.15	2.31	1762	2.31	493.7 /1	0.0485																		07
SUN	23	34	0.00	2.22	1756	2.22	512.0 /1	0.0528																		100
MON	24	36	0.11	2.10	1749	2.10	539.0 /1	0.0549																		93
TUE	25	33	0.00	2.17	1843	2.17	570.4 /1	0.0369	194	3300	287	3373	11.3	6.5	2.9	17.1									99	
WED	26	33	0.52	2.06	1769	2.06	562.0 /1	0.0342																		101
THU	27	33	0.33	2.13	1865	2.13	508.6 /1	0.0496																		101
FRI	28	32	0.47	2.00	1805	2.00	584.0 /1	0.0982																		98
SAT	29	34	0.07	2.22	1833	2.22	534.4 /1	0.0954																		103
TOTAL			5.38	64.08	52486	64.08		1.8714																		2837
MAXIMUM		37	1.01	2.63	2617	2.63	677.2 /1	0.0982	12.0	7.7	5.8	226	4335	297	5375	11.5	6.8	7.5	24.9	32.4	626.9	22.7	435.4	480	107	
MINIMUM		3	0.00	2.00	1496	2.00	398.7 /1	0.0342	9.4	6.5	4.8	151	2922	192	3715	6.8	6.5	0.6	14.6	17.0	329.0	14.6	280.6	16	99	
AVERAGE		24.8	0.19	2.29	1874.5	2.29	531.4 /1	0.0668	10.9	6.9	5.3	189	3590	236	4464	10.8	6.6	2.5	19.5	25.7	496.5	18.5	350.8	62.2	101.3	

COMMENTS:

- * GEOMETRIC MEAN WAS USED TO CALCULATE THE AVERAGE REGAL COLIFORM COLONIES
- * INFLUENT FLOW WAS USED TO CALCULATE EFFLUENT LOADING. EFFLUENT METER IS O.O.S.

January 2005	
Infl. mgd	70.0
Alk. mgd	140.0
D.O. mgd	2.5
Turb. NTU	24.9
Tox. TUc	n/a

January 2005		
	ug/L	LBS
Copper	15.70	0.304
Lead	0.38	0.007
Silver	1.27	0.025
Zinc	27.70	0.536
NH3 mg/L	18.00	348.28

WEEK	WEEKLY AVERAGE				WEEKLY COLIFORM
	BOD mg/L	TSS lbs	TSS mg/L	lbs	
1	14.5	280.6	17.0	328.9	91.6
2	17.1	330.9	32.4	626.9	128.3
3	22.7	435.4	25.2	483.4	25.5
4	19.7	356.5	28.0	506.7	50.7
AVG	18.5	350.8	25.7	486.5	73.5
MAX	22.7	435.4	32.4	626.9	128.3

% REMOVAL	
B.O.D.	92.2
S.S.	86.4

POWER USAGE IN KILOWATT-HOURS	
TOTAL	453920