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

NAME: JUNEAU, CITY AND BOROUGH OF MENDENHALL TREATMENT PLANT
155 SOUTH SEWARD,
JUNEAU, ALASKA 99801
MENDENHALL VALLEY SERVICE AREA
JUNEAU, ALASKA 99801
Scott Jeffers WW Utilities Superintendent ADDRESS: FACILITY: LOCATION:

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. AK-002295-1 PERMIT NUMBER **001 A**DISCHARGE NUMBER

COCATION: JUNEAU, ALSKA 99801 FROM ZODS 2 1 1 10 2005 2 2 2 3	FACILITY:	MENDENHALL V	ALLEY SERVICE	AREA		MONITORING PERIOD							
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DEG, CENTIGRADE DEG, CENTIGRADE SF/T SEPORT SEP	TFMPERATURE, WATER	SAMPLE					10.7	13.1	(04)	0			
DODG 1	DEG, CENTIGRADE	MEASUREMENT	*****	*****	****	*****		i	` ′		5/7		
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CODEG. C)	BOD, 5-DAY	SAMPLE	4656.3	5179.9	(26)		205.5	242.0	(19)	0	2		
OSATIO G	(20 DEG, C)	MEASUREMENT				*****			()		1/7		
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(20 DEG. C) O310 W 0 0 SEE COMMENTS BELOW REQUIREMENT WKLY AVG SAMPLE SOLO DEG. C) O310 1 0 0 REPRINT REQUIREMENT MO AVG DAILY MAX LBS/DAY SAMPLE SAM	BOD, 5-DAY	SAMPLE	417.4	, you have a second	(26)	personal grade on the professor		II II II II AMARAM I SIMBANI MARA		0		60 m. maia 61 m. (19. 19. 19. 19. 19. 19. 19. 19. 19. 19.	
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SEE COMMENTS BELOW REQUIREMENT WKLY AVG ******* LBS/DAY ******* WKLY AVG ******* MG/L	00310 W 0 0	PERMIT	1839		2		45					COMP 14	
SAPILE S	SEE COMMENTS BELOW	REQUIREMENT	WKLY AVG	*****	LBS/DAY	*****		*****	MG/I		YVERKEI	COINT 24	
1/7	BOD, 5-DAY	SAMPLE	360.2	417.4	(26)	minst the total section of the secti	CONTRACTOR OF STREET	175		0	C Bir Latines		
OBJIO 1 0 0 PERMIT 1226 2452 EFFLUENT GROSS VALUE REQUIREMENT MO AVG DAILY MAX LBS/DAY ****** MO AVG DAILY MAX MG/L PH SAMPLE MEASUREMENT ****** **** **** **** **** **** ****	(20 DEG. C)	MEASUREMENT			` ′	*****		2,10	(12)		1/7		
EFFLUENT GROSS VALUE PH SAMPLE MEASUREMENT ****** MO AVG AVG BALLY MAX BS/DAY ******* MO AVG BALLY MAX BS/DAY ******* MO AVG BALLY MAX BS/DAY ****** MO AVG BALLY MAX BS/DAY ****** MO AVG BALLY MAX BS/DAY MG/L BALKALINTY, BICARBONATE BALKALINTY, BALKALINTY, BICARBONATE BALKALINTY, BALKALINTY, BALKALINTY, BALKALINTY, BA	00310 1 0 0	PERMIT	1226	2452			30	60			and the second s	COMD 34	
O400 1 0 0 PERMIT ****** ***** **** **** **** **** ***	EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MAX	LBS/DAY	*****	MO AVG	10.000	MG/I		II MALKE	- COIII 23	
MEASUREMENT ****** ***** ***** ***** ***** ***** ****	pΗ	SAMPLE		New Manager Control of the Control o		6.5		A STATE OF THE PROPERTY OF THE	<u> </u>	0	4.1995		
00400 1 0 0 EFFLUENT GROSS VALUE REQUIREMENT ****** ***** ***** ***** ***** ***** ****		MEASUREMENT	*****	*****	****		*****	0.5	(==)		5/7		
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ALKALINITY, BICARBONATE as CaCO3 MEASUREMENT MEASUREME	EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	****	MIN.	*****	A STATE OF THE STA	SII			VIII.AU	
ASCACO3 MEASUREMENT ****** MEASUREMENT ****** ***** **** ***** ***** ****	ALKALINITY, BICARBONATE	SAMPLE				The state of the s	108.0	norAngeannic pyacate account		0	DATE:		
00425 1 0 0 PERMIT REPORT REPORT REPORT REPORT MONTH SOLIDS, TOTAL SAMPLE 4019.4 5051.0 (26) SUSPENDED MEASUREMENT REPORT REPOR	as CaCO3	MEASUREMENT	*****	*****	****	*****	200.0	100.0	(13)	Ů	1/30		
EFFLUENT GROSS VALUE REQUIREMENT ****** ***** ***** ***** ***** ****	00425 1 0 0	PERMIT					REPORT	REPORT			All Palman pages and the second second	COMP 24	
SOLIDS, TOTAL SUSPENDED MEASUREMENT MEASUREMENT REPORT MAKE/ITLE PRINCIPAL EXECUTIVE OFFICER Scott Jeffers Wastewater Utilities Superintendent TypeD OR PRINTED TYPED OR PRINTED TYPED OR PRINTED TYPED OR PRINTED TO AMB SUMMERT So submitting false information. including the possibility of fine and imprisonment for knowing violations (Reference all attachments here)	EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	****	*****			MG/I			COMB 2m	
SUSPENDED MEASUREMENT PERMIT REPORT REPORT REQUIREMENT MO AVG DAILY MAX LBS/DAY ***********************************	SOLIDS, TOTAL	SAMPLE	4019.4	5051.0	(26)	ەسىلىك چىلىلىلىسىدىكىك <u>لارىلالالىلىلى</u>	A Late Committee	COLUMN TO SERVICE STATE OF THE		<u>n</u>	E INCAVITO		
00530 G 0 0 RAW SEW/INFLUENT REQUIREMENT MO AVG DAILY MAX LBS/DAY REPORT REPORT REPORT REPORT REQUIREMENT MO AVG DAILY MAX MG/L 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 undiffed personnel to upperly pather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system. TYPED OR PRINTED TREPORT REPORT	SUSPENDED	MEASUREMENT			. ,	*****		250.0	(1)	J	1/7		
RAW SEW/INFLUENT REQUIREMENT MO AVG DAILY MAX LBS/DAY ****** MO AVG DAILY MAX MG/L 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 unalidated personated unouperly peature and evaluate the information or those persons directive responsible for gathering the information, submitted is, to the best of my knowledge and belief, true, accurate, and complete. TYPED OR PRINTED TYPED OR PRINTED TYPED OR PRINTED TYPED OR PRINTED TO BE PRINCED AGENT TYPED OR PRINTED T	00530 G 0 0	PERMIT	REPORT	REPORT			REPORT	DEDODT			the state of the s	COMP 24	
NAME/ITILE PRINCIPAL EXECUTIVE OFFICER Scott Jeffers Wastewater Utilities Superintendent Typed or Printed Typed or Pr	RAW SEW/INFLUENT			DAILY MAX	LBS/DAY	*****			MG/I		WILLEL!	COMP 24	
prepared under my direction or supervision in accordance with the system designed to assure that the usualified beasurate unouncept pather advaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for eathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. TYPED OR PRINTED TYPED OR PRI	NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of	flaw that this documen	t and all attachments y	vara		//1		110/1	Egit (Mistingrape	TELEPHONE	**************************************	
Sidentification of those persons directly responsible for gathering 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. TYPED OR PRINTED TYPED OR PRINTED Including the possibility of fine and imprisonment for knowing violations. OFFICER OR AUTHORIZED AGENT YEAR MO DAY COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)	Scott Jeffers	prepared under my direct	ction or supervision in a	accordance with the sys	stem designed	Q	. Vallena		907				
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. TYPED OR PRINTED TYPED OR PRINTED TYPED OR PRINTED SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT YEAR MO DAY COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)	Wastewater Utilities Superintendent	submitted. Based on my	inquiry of the person of	r persons who manage	the system		\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			CODE		BER	
YPED OR PRINTED including the possibility of fine and imprisonment for knowing violations. OFFICER OR AUTHORIZED AGENT YEAR MO DAY COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)		submitted is, to the best of	of my knowledge and b	elief, true, accurate, an	d complete.	2011					DATE		
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)	TYPED OR PRINTED	I am aware that there are including the possibility	significant penalties for	or submitting false info	rmation.								
(a w) or			e und miprisonnie				LICER OR AUTHOR	KIZED AGENT		YEAR	MO	DAY	
* Concerning violations-please see attached. The reporting period was from 01/30/2005 through 02/26/2005.			-										

EPA Form 3320-1 (03-99) Previous editions may be used.

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

00434/981209 1904

PAGE 1 OF 4

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

NAME:

ADDRESS:

FACILITY:

JUNEAU, CITY AND BOROUGH OF JUNEAU, CLITT AND BOROUGH OF MENDENHALL TREATMENT PLANT 155 SOUTH SEWARD, JUNEAU, ALASKA 99801 MENDENHALL VALLEY SERVICE AREA JUNEAU, ALASKA 99801

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. 001 A DISCHARGE NUMBER AK-002295-1 PERMIT NUMBER

MUNITORING PERIOD

LOCATION:	JUNEAU, ALASKA	99801			YR	MO	DAY]	YEAR	MO	DAY
ATT:	Scott Jeffers WW U	tilities Superintend	dent	FROM	2005	2	1	то	2005	2	28
PARAMETER		QUANTITY O	R LOADING		QUA	LITY OR CONCEN	TRATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	1		
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	477.0	*****	(26)	*****	20.0	*****	(19)	0	1/7	
00530 G 0 0	PERMIT	1839				45				WEEKLY	COMP 24
SEE COMMENTS BELOW	REQUIREMENT	WKLY AVG	*****	LBS/DAY	*****	WKLY AVG	*****	MG/L		WEEKE	COME 24
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	391.2	477.0	(26)	*****	16.9	20.0	(19)	0	1/7	
00530 G 0 0	PERMIT	1226	2452			30	60			WEEKLY	COMP 24
EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX	MG/L		The Line	COPH ZT
NITROGEN AMMONIA	SAMPLE	357.8	357.8	(26)	Hadin - Florid Con R. L. A.	15.0	15.0	(19)	0	Cher	
TOTAL (as N)	MEASUREMENT			(,)	*****	-515		()		1/30	
00610 1 0 0	PERMIT	1079	1622			26.4	39.7			ONCE/	COMP 24
EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX	MG/L		MONTH	
SILVER	SAMPLE	0.017	0.017	(26)	POLYTERIOR - USE I Invit 1812/18	0.72	0.72	(28)	0	L. CHILDRAN	. 10 10000 22 22 21 22 2
TOTAL RECOVERABLE	MEASUREMENT				*****			, ,		1/30	
01079 1 0 0	PERMIT	0.036	0.072	N.		0.87	1.75			ONCE/	COMP 24
EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX	ug/L		MONTH	
ZINC	SAMPLE	1.35	1.35	(26)		56.4	56.4	(28)	0		n - 1 . p . middife
TOTAL RECOVERABLE	MEASUREMENT				*****					1/30	
01094 1 0 0	PERMIT	2.92	6.09			71,4	149.0			ONCE/	COMP 24
EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MAX	LBS/DAY	*****	MÖ AVG	DAILY MAX	ug/L		MONTH	
LEAD	SAMPLE	0.002	0.002	(26)	,	0.1	0.1	(28)	0		
TOTAL RECOVERABLE	MEASUREMENT] [*****					1/30	
01114 1 0 0	PERMIT	0.225	0.450			5.5	11.0			ONCE/	COMP 24
EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX	ug/L		MONTH	
COPPER	SAMPLE	0.489	0.489	(26)		20.50	20.5	(28)	3		
TOTAL RECOVERABLE	MEASUREMENT] [*****					1/30	
01119 1 0 0	PERMIT	0.342	0.858			8.36	20.1			ONCE/	COMP 24
EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX	ug/L	14-4	MONTH	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of prepared under my direc					- 4			907	TELEPHONE 586-0393	
Scott Jeffers Wastewater Utilities Superintendent	to assure that the qualifie submitted. Based on my i	d personnel properly g	gather and evaluate the	information	8 Jalla				AREA CODE	PHONE NUM	BER
	or those persons directly	responsible for gathen	ing the information, th	e information		W/C//CV	15			DATE	
	submitted is, to the best of I am aware that there are				SIGNA	TUKE OF PRINCI	PAL EXECUTIVE		2005	3	8
TYPED OR PRINTED	including the possibility of					FICER OR AUTHOR			YEAR	3 MO	DAY

EPA Form 3320-1 (03-99) Previous editions may be used.

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

00434/981209 1904

PAGE 2 OF 4

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
MENDENHALL VALLEY SERVICE AREA
JUNEAU, ALASKA 99801 FACILITY: LOCATION:

MAJOR (SUB 01) F - FINAL EFFLUENT *** NO DISCHARGE NOTE: Read instruc

Form Approved.

OMB No. 2040-0004

Approval Expires 05-31-98

	MOTE. Read mad actions before con	ipieding dis rotti.
AK-002295-1]	001 A
PERMIT NUMBER		DISCHARGE NUMBER

FACILITY:	JUNEAU, ALASKA 9 MENDENHALL VA		AREA	ł	MONITORING PERIOD							
LOCATION:	JUNEAU, ALASKA	, ALASKA 99801			YR	MO	DAY		YEAR	MO	DAY	
ATT:	Scott Jeffers WW Ut	ilities Superintend	lent	FROM	2005	2	1	то	2005	2	28	
PARAMETER		QUANTITY O	R LOADING		QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
FECAL COLIFORM MF,	SAMPLE					98.5		(13)	0			
M-FC BROTH 44.5C	MEASUREMENT	*****	*****	****	*****		*****			3/7		
31616 W 0 0	PERMIT					400				THREE TIMES/	GRAB	
SEE COMMENTS BELOW	REQUIREMENT	*****	*****	****	*****	WKLY GEO	******	#/100ML	er Rado	WEEK		
FECAL COLIFORM MF.	SAMPLE					51.1	470.0	(13)	1			
M-FC BROTH 44.5C	MEASUREMENT	*****	*****	****	*****		17.5	` '		3/7		
31616 1 0 0	PERMIT	919				200	400			THREE TIMES/	GRAB	
EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	****	*****	MO GEO	DAILY GEO	#/100ML		WEEK		
FLOW IN CONDUIT OR	SAMPLE	2.68	3.21	(03)	Designation of the control of the co		Total Control of the		0	- Completellant store		
THROUGH TREATMENT PLANT	MEASUREMENT				*****	*****	*****	****		7/7		
50050 P 0 0	PERMIT	REPORT	REPORT							CONTINUOSLY	RECORDED	
SEE COMMENTS BELOW	REQUIREMENT	MO AVG	DAILY MAX	MGD	*****	*****	*****	****				
EFFLUENT DILUTION	SAMPLE		BEAT STREET, S		329.0	perconduction and	Action Advanced Co.	(23)	0	A CONTRACTOR OF THE CONTRACTOR	Correct City office, a succession	
RATIO	MEASUREMENT	*****	*****	****	023.0	*****	*****	(23)	Ŭ	7/7		
78480 1 0 0	PERMIT				10	2 to				DAILY	CALCULATED	
EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	****	MINUMUM	*****	*****	PERCENT				
BOD, 5-DAY PERCENT	SAMPLE	Addy Ampelo Caff Afficiani Sessio	elkstonije czerości otkianicien		92.4	tics to approximation is		(23)	U		USB Bio. Catellin. Aug 6. Edu	
REMOVAL.	MEASUREMENT	*****	*****	****		*****	*****	(-/		1/30		
81010 K 0 0	PERMIT				85					ONCE/	CALCULATED	
PERCENT REMOVAL	REQUIREMENT	*****	*****	****	MIN % REMOVAL	*****	*****	PERCENT		MONTH	CACCECATE	
SOLIDS, SUSPENDED	SAMPLE		and the second s		90.3	THE RESERVE OF THE PROPERTY OF	I BARIUSISE SEAS EASTERIANIAN	(23)	0			
PERCENT REMOVAL	MEASUREMENT	*****	*****	****	30.5	*****	*****	(23)	v	1/30		
81011 K 0 0	PERMIT				85					ONCE/	CALCULATED	
PERCENT REMOVAL	REQUIREMENT	*****	*****	****	MIN % REMOVAL	*****	*****	PERCENT		MONTH		
TURBIDITY, LAB	SAMPLE	aranin ayar Maye . Nasa	Andreas and S. St. 25 Marine			13.9	17.8	(43)	0	i i i i i i i i i i i i i i i i i i i	kryj Bije problemi di	
NTU	MEASUREMENT	*****	*****	****	*****	20.0	1 27.00	(.5)	· ·	5/7		
82079 1 0 0	PERMIT	Printed the control of the control o				REPORT	REPORT		Berlin or allocation	WEEK	GRAB	
EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	****	*****	MO AVG	DAILY MAX	NTU		DAYS	210.12	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of	law that this documer	nt and all attachments v	vere	Engage Change Council	~ ^·	i samanan ka	10		TELEPHONE	Lasan (Stella Lasan)	
Scott Jeffers	prepared under my direct to assure that the qualified	ion or supervision in	accordance with the sys	stem designed	0	\\)	1	907 AREA	586-0393		
Wastewater Utilities Superintendent	submitted. Based on my i	nquiry of the person of	or persons who manage	the system,		1/4 THE	evs		CODE	PHONE NUM	IBER	
	or those persons directly i submitted is, to the best o	esponsible for gather f my knowledge and	ing the information, the	information d complete						DATE		
	I am aware that there are	significant penalties f	or submitting false info	rmation,		TURE OF PRINCI			2005	3	8	
TYPED OR PRINTED	including the possibility of	t fine and imprisonm				ICER OR AUTHO	RIZED AGENT	1	YEAR	MO	DAY	
COMMENT AND EXPLANATION OF ANY			(Reference all atta		•							
* Concerning violations please se	e attached. The re	porting period	was from 01/30	0/2005 thr	ough 02/26/200	05.						

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

EPA Form 3320-1 (03-99) Previous editions may be used.

00434/981209 1904

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JUNEAU, CITY AND BOROUGH OF MENDENHALL TREATMENT PLANT 155 SOUTH SEWARD,

JUNEAU, ALASKA 99801

MENDENHALL VALLEY SERVICE AREA

JUNEAU, ALASKA 99801

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

NAME:

ADDRESS:

FACILITY: LOCATION:

МО

MO

DAY

YEAR

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. 001 A DISCHARGE NUMBER AK-002295-1 PERMIT NUMBER MONITORING PERIOD

DAY

ATT:	Scott Jeffers WW Ut	ilities Superintende	ent	FROM	2005	2	1	то	2005	2	28
PARAMETER		QUANTITY OR	LOADING		QUA	LITY OR CONCEN	TRATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		OF ANALYSIS	TIPE
HARDNESS	SAMPLE					50.0	50.0	(19)	0		
as CaCO3	MEASUREMENT	*****	*****	****	*****		ĺ			1/30	
82394 1 0 0	PERMIT					REPORT	REPORT			ONCE/	GRAB
EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	****	*****	MO AVG	DAILY MAX	MG/L		MONTH	
DISSOLVED OXYGEN	SAMPLE				1.3	3.1	5.6	(19)	0		
	MEASUREMENT	*****	*****	***						1/90	
00300	PERMIT				REPORT	REPORT	REPORT			ONCE/	
EFFLUENT GROSS VALUE	REQUIREMENT	*****	*****	****	MINIMUM	MO AVG	DAILY MAX	MG/L		QUARTER	
TOXICITY,	SAMPLE						N/A	(73)	0		
CERIODAPHNIA CHRONIC	MEASUREMENT	*****	*****	****	*****	*****				1/182	
61406	PERMIT	1035			ticis il dis discrete		10:0			TWICE	
EFFLUENT GROSS VALUE	REQUIREMENT	WKLY AVG	*****	****	*****	*****	MUMIXAM	TUC		YEAR	
	SAMPLE										
	MEASUREMENT	*****	*****	***	મુંદમુંદ મુંદ મુંદ મુંદ મુંદ	of colored colored	open per				
_	PERMIT				244 (344)						
	REQUIREMENT	*****	*****	****	*****	*****	*****				
	SAMPLE										
	MEASUREMENT	*****	*****	****	*****	*****	*****				
·	PERMIT								C STATE OF	(535 B) 15	
	REQUIREMENT	*****	*****	****	*****	*****	*****				
	SAMPLE										
	MEASUREMENT	*****	*****	***	****	****	****				
	PERMIT					Total					
	REQUIREMENT	*****	*****	****	*****	*****	*****		the William		
	SAMPLE										
	MEASUREMENT	*****	*****	****	*****	*****	*****				
	. PERMIT	Company of the Compan	**********								
	REQUIREMENT	*****	*****	****	*****	*****	*****				
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of					\sim 1				TELEPHONE 586-0393	
Scott Jeffers	prepared under my direct to assure that the qualified	l personnel properly ga	ther and evaluate the	information	2 7	8 AN DILLONG			907 AREA CODE		
Wastewater Utilities Superintendent	submitted. Based on my is or those persons directly i	aquiry of the person or responsible for gatherin	persons who manage	the system,	Ped	Car for				PHONE NUM DATE	IBER
	submitted is, to the best of	f my knowledge and be	elief, true, accurate, a	nd complete.	/ _	TURE OF PRINCI	DAL EVECTOR		2005		
TYPED OR PRINTED	including the possibility o					FICER OR AUTHO			2005 YEAR	3 MO	8 DAY
COMMENT AND EXPLANATION OF AN	IN VIOLATIONS		(Reference all att	chwante have							

COMMENT AND EXPLANATION OF ANY VIOLATIONS

(Reference all attachments here)

* Concerning violations-please see attached. The reporting period was from 01/30/2005 through 02/26/2005.

EPA Form 3320-1 (03-99) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED).

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