

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: Joe Myers 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
2010	1	1	2010
			YEAR
			MO
			DAY
			31

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE		VALUE	VALUE	VALUE	UNITS			
Turbidity	MEASUREMENT	*****	*****	****	*****	9.0	14.3	(43)	0		
00070 1 0	PERMIT	*****	*****	****	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	NTU		Continuous	RCORDR
Effluent Gross	REQUIREMENT	*****	*****	****	*****	MO AVG	DAILY MX	(19)	0		
Oxygen, dissolved (DO)	SAMPLE MEASUREMENT	*****	*****	****	3.1	5.0	*****	(19)			
00300 1 0	PERMIT	*****	*****	****	Req. Mon. DAILY MN	Req. Mon. MO AVG	*****	19		Once Per Month	GRAB
Effluent Gross	REQUIREMENT	*****	*****	****	*****	MO AVG	*****	(19)	0		
BOD, 5-Day, 20 deg. C	SAMPLE MEASUREMENT	*****	*****	****	*****	26.5	33	(19)			
00310 1 0	PERMIT	1226	2452	lb/d	*****	30	60	19		Twice Per Month	COMP24
Effluent Gross	REQUIREMENT	MO AVG	DAILY MX	(26)	*****	MO AVG	DAILY MX	(19)	0		
BOD, 5-Day, 20 deg. C	SAMPLE MEASUREMENT	514.7	*****	****	*****	33	*****	(19)			
00310 W 0	PERMIT	1829	*****	lb/d	*****	45	*****	19		Twice Per Month	COMP24
See Comments	REQUIREMENT	WKLY AVG	*****	****	*****	WKLY AVG	*****	mg/L			
PH	SAMPLE MEASUREMENT	*****	*****	****	6.7	*****	7.2	(12)	0		
00400 1 0	PERMIT	*****	*****	****	6.5	*****	9.0	12		Weekdays	GRAB
Effluent Gross	REQUIREMENT	*****	*****	****	MIN	*****	MAX	SI			
Alkalinity, total (asCaCo3)	SAMPLE MEASUREMENT	*****	*****	****	*****	34.0	34.0	(19)	0		
00410 1 7	PERMIT	*****	*****	****	*****	34.0	34.0	19		Quarterly	COMP24
Effluent Gross	REQUIREMENT	*****	*****	****	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L			
Solids, total suspended	SAMPLE MEASUREMENT	290.5	312.0	(26)	*****	17.5	20.0	(19)	0		
00530 1 0	PERMIT	1226	2452	lb/d	*****	30	60	19		Twice Per Month	COMP24
Effluent Gross	REQUIREMENT	MO AVG	DAILY MX	lb/d	*****	MO AVG	DAILY MX	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 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.

Joe Myers
Wastewater Utilities Superintendent

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
DATE: 2010
MO: 2
DAY: 1

TELEPHONE: 907 586-0393
PHONE NUMBER: 586-0393
DATE: 2010
MO: 2
DAY: 1

COMMENT AND EXPLANATION OF ANY VIOLATIONS
* The reporting period was from 1-1-2010 through 01/31/10. O=<15:1,P=>15:1 and <30:1,R=>30:1(O,P,R and R used Nov 1-May 31 & T Jun 1-Oct 31, Q and S are never used *no chlorine*)
FPA 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 5

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PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	UNITS	REQ. MON. MO AVG	VALUE	UNITS	REQ. MON. MO AVG			
Solids, total suspended	PERMIT	312.0	(26)	*****	20.0	(19)	*****	0		
	REQUIREMENT	1829		*****	45		*****		Twice Per Month	COMP24
00530 W 0 See Comments	PERMIT	0.4	(26)	*****	17.0	(19)	*****	0		
	REQUIREMENT	0.4		*****	17.0		*****		Once Per Month	COMP24
00610 1 0 Effluent Gross	PERMIT	1164	lb/d	*****	28.5	mg/L	48	0		
	REQUIREMENT	MO AVG		*****	82		82		Once Per Month	COMP24
Hardness, total (as CaCO3)	PERMIT	*****	****	*****	82	(19)	*****	0		
	REQUIREMENT	*****		*****	1.000		1.000		Once Per Month	GRAB
00900 1 6 Effluent Gross	PERMIT	0.018	(26)	*****	1.000	(28)	*****	0		
	REQUIREMENT	0.018		*****	1.000		1.000		Three Per Year	COMP24
01079 1 0 Effluent Gross	PERMIT	0.525	(26)	*****	30.4	(28)	*****	0		
	REQUIREMENT	0.525		*****	30.4		30.4		Three Per Year	COMP24
Zinc, total recoverable	PERMIT	0.016	(26)	*****	1.000	(28)	*****	0		
	REQUIREMENT	0.016		*****	1.000		1.000		Three Per Year	COMP24
01094 1 0 Effluent Gross	PERMIT	0.129	(26)	*****	8.3	(28)	*****	0		
	REQUIREMENT	0.129		*****	8.3		8.3		Three Per Year	COMP24
Lead, total recoverable	PERMIT	3.54	lb/d	*****	86.7	ug/L	187		Once Per Month	COMP24
	REQUIREMENT	MO AVG		*****	8.3		8.3		Once Per Month	COMP24
01114 1 0 Effluent Gross	PERMIT	0.129	(26)	*****	8.3	(28)	*****	0		
	REQUIREMENT	0.129		*****	8.3		8.3		Three Per Year	COMP24
Copper, total recoverable	PERMIT	7.63	lb/d	*****	86.7	ug/L	187		Once Per Month	COMP24
	REQUIREMENT	MO AVG		*****	8.3		8.3		Once Per Month	COMP24

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Joe Myers
Wastewater Utilities Superintendent

Signature of Principal Executive Officer or Authorized Agent

907
AREA CODE
586-0393
PHONE NUMBER

2010
YEAR
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MO
9
DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS

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	VALUE	VALUE	UNITS	VALUE	VALUE	VALUE				UNITS
Chlorine, total residual	N/A	N/A	(26)	*****	N/A	N/A	(28)	0	QUARTERLY	COMP24
50060 S 0	4.09	4.09	lb/d	*****	100	100	ug/l	0		
See Comments	PERMIT	MO AVG		*****	MO AVG	DAILY MX				
Dilution factor	SAMPLE	DAILY MX		1.0	69.3	*****	ug/L	0		
80093 1 0	PERMIT	*****	****	Req. Mon. DAILY MN	Req. Mon. MO AVG	*****	1U	0	DAILY	MEASRD
Effluent Gross	REQUIREMENT	*****	****	93.0	*****	*****	(23)	0		
BOD,5-day, percent removal	SAMPLE	*****	****	85	*****	*****	23 %	0	Once Per Month	CALCTD
81010 K 0	PERMIT	*****	****	MN % RMV	*****	*****	(23)	0	Once Per Month	CALCTD
Percent Removal	REQUIREMENT	*****	****	95.9	*****	*****	23 %	0	Once Per Month	CALCTD
81011 K 0 0	SAMPLE	*****	****	85	*****	*****	23 %	0	Once Per Month	CALCTD
Percent Removal	REQUIREMENT	*****	****	MN % RMV	*****	*****	23 %	0	Once Per Month	CALCTD
Chlorine usage	SAMPLE	N/A	(26)	*****	*****	*****	0	0	DAILY	MEASRD
81400 X 0	PERMIT	*****	****	*****	*****	*****	(93)	0		
End of Chlorine Contact Chamber	REQUIREMENT	*****	****	*****	*****	*****	0	0		
Oil and grease visual	SAMPLE	*****	****	*****	*****	*****	0	0	Once Per Month	VISUAL
84066 1 0	PERMIT	*****	****	*****	*****	*****	0	0	Semiannual	COMP24
Effluent Gross	REQUIREMENT	*****	****	*****	*****	*****	0	0	Semiannual	COMP24
Toxicity, Chronic	SAMPLE	*****	****	*****	*****	*****	0	0	Semiannual	COMP24
TT000 1 8	PERMIT	*****	****	*****	*****	*****	0	0	Semiannual	COMP24
Effluent Gross	REQUIREMENT	*****	****	*****	*****	*****	0	0	Semiannual	COMP24

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Signature of Principal Executive Officer or Authorized Agent

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EPA REPORT

MENDENHALL WASTEWATER TREATMENT FACILITY
Juneau, Alaska

January 2010

DAY	DATE	FLOWS				INFLUENT				EFFLUENT													
		SBR INFLUENT MGD	Mend. River CFS	SBR Ttl Effl MGD	Receiving Water Dilution	SBR WASTE MGD	TEMP °C	pH	D.O. mg/L	S.S. mg/L	S.S. LBS	BOD. mg/L	BOD. LBS	TEMP °C	pH	D.O. mg/L	TURBID. MAX NTU	S.S. mg/L	S.S. LBS	BOD. mg/L	BOD. LBS	FECAL COLIFORM /100 ml	
SUN	27	2.27	397	2.10	123.1 /1	0.1921	10.5	7.4															
MON	28	2.43	340	1.98	111.9 /1	0.1072	10.9	6.9	8.8														
TUE	29	2.43	327	2.01	106.1 /1	0.1089	10.3	6.9	9.1														
WED	30	2.24	315	2.05	100.3 /1	0.1415	10.7	6.8	9.2														
THU	31	2.16	307	2.01	99.7 /1	0.1027			8.9														
FRI	1	2.16	273	2.01	88.7 /1	0.0717	10.5	6.9	9.4														
SAT	2	2.16	237	2.04	76.1 /1	0.0829																	
SUN	3	2.27	221	2.05	70.6 /1	0.0681																	
MON	4	2.14	215	1.99	70.8 /1	0.0921	10.0	7.1	8.2														
TUE	5	2.10	146	2.89	33.6 /1	0.0865	12.2	7.1	8.4														
WED	6	2.00	176	1.95	59.3 /1	0.0919	11.3	7.0	9.7														
THU	7	2.12	196	2.04	63.1 /1	0.0571	11.3	6.9	10.4														
FRI	8	2.20	375	2.16	113.2 /1	0.0665	11.5	6.9	11.2														
SAT	9	2.09	296	2.04	94.7 /1	0.0652																	
SUN	10	2.36	311	2.19	92.7 /1	0.1559																	
MON	11	2.37	311	2.19	92.7 /1	0.1368	10.1	6.9	5.7														
TUE	12	2.22	234	1.87	81.8 /1	0.1184	11.5	7.0	5.9														
WED	13	1.81		1.89	1.0 /1	0.1110	11.1	7.1	6.3														
THU	14	2.02		2.12	1.0 /1	0.1076	11.6	7.0	5.3														
FRI	15	1.99	273	2.07	86.2 /1	0.0827	11.6	7.1	4.9														
SAT	16	2.81	273	2.75	65.1 /1	0.1219	10.7	7.1	5.1														
SUN	17	2.53	311	2.48	82.0 /1	0.0949	11.4	7.2	5.2														
MON	18	2.23	292	2.15	88.7 /1	0.1092	10.3	6.8	4.8														
TUE	19	2.11	255	2.02	82.5 /1		11.4	7.2	5.1														
WED	20	2.03		2.04	1.0 /1	0.1047	10.8	6.8	3.5														
THU	21	2.05		1.94	1.0 /1	0.0903	11.6	6.7	3.1														
FRI	22	1.95	227	1.78	83.4 /1	0.0712	11.1	6.8	4.5														
SAT	23	2.09	190	1.86	67.0 /1	0.1073	11.0	6.7	4.4														
SUN	24	2.05	170	2.00	55.9 /1	0.1195	11.3	6.9	7.1														
MON	25	1.98	162	1.89	56.4 /1	0.0998	11.4	6.8	5.2														
TUE	26	1.93	167	1.76	62.3 /1	0.0817	9.8	6.9	4.5														
WED	27	1.93	165	1.95	55.7 /1	0.0918	11.1	6.9	5.3														
THU	28	1.97	170	1.92	58.2 /1	0.1050	11.3	6.9	5.6														
FRI	29	1.86	136	1.81	49.5 /1	0.0796	11.5	6.8	4.0														
SAT	30	2.02	136	1.85	48.5 /1	0.1430	11.6	6.8	3.2														
TOTAL		75.08		71.85		3.4867																	
MAXIMUM		2.81	397	2.89	123.1 /1	0.1921	11.4	7.9	6.40	9981	440	6862	12.2	7.2	7.1	14.3	20.0	312.0	33.0	514.7	14.3		
MINIMUM		1.81	136	1.76	1.0 /1	0.0571	8.4	6.9	2.24	3643	318	5172	9.8	6.7	3.1	6.4	15.0	269.0	20.0	325.3	1.4		
AVERAGE		2.15	245	2.05	69.3 /1	0.1026	9.9	7.4	432.0	0.0	379.0	6076.9	11.1	6.9	5.0	9.0	17.5	290.5	26.5	420.0	4.1		

COMMENTS:

- GEOMETRIC MEAN WAS USED TO CALCULATE THE AVERAGE FECAL COLIFORM COLONIES
- AVERAGE RECEIVING WATER DILUTION IS ONLY VALID IF ENTIRE RECEIVING WATER DILUTION COLUMN VALUES ARE REAL INTEGERS

		January 2010		
Hrd. mg/l	82			
Alk. mg/l	34.0	Copper	8.3	0.129
D.O. mg/l	5.0	Lead	1.000	0.016
Turb. NTU	14.3	Silver	1.000	0.018
Zinc	30.4		0.525	
Tox. TU	N/A	NH3 mg/L	17.0	0.390

WEEK	WEEKLY AVERAGE			TSS			WEEKLY COLIFORM	
	mg/l	lbs	lbs	mg/l	lbs	lbs	Geo. Mean	
1							7.1	
2	33.0	514.7		20.0	312.0		14.3	
3	20.0	325.3		15.0	269.0		1.4	
4							2.9	
5							4.3	
AVG	26.5	420.0	0.0	17.50	269.0		5.4	
MAX	33.0	514.7	0.0	20.0	312.0		14.3	

% REMOVAL	
BOD	93.0
S.S.	95.9