

MENDENHALL WASTEWATER TREATMENT FACILITY

Juneau, Alaska

January 2012

EPA REPORT

DAY	DATE	FLOWS										INFLUENT										EFFLUENT									
		SBR Mend	River	PRECIP	TEMP °C	SBR TLEFFL MGD	Receiving MGD	SBR WASTE MGD	TEMP °C	pH	DO	SS	BOD	mg/L	LBS	SS	BOD	mg/L	LBS	TEMP °C	pH	DO	TURBID MAX NTU	SS	BOD	mg/L	LBS	BOD	FECAL COLIFORM /100 ml		
SUN	1	2.04	33	0.25	37	1.77	14.50	1.0496	10.3	7.8	5.7								11.6	6.8	4.2	6.1						50			
MON	2	2.45	33	0.13	37	2.12	12.27	1.1140	10.7	7.7	5.2								12.3	6.7	4.0	5.5						25			
TUE	3	2.22	31	0.11	37	1.97	13.13	1.2170	11.6	7.4	7.2	92	1757	316	6035				12.1	7.0	4.0	6.2	26	408	17	267					
WED	4	2.29	35	0.34	44	1.88	16.12	1.2250	10.7	7.4	7.1								12.3	7.2	5.0	14.0									
THU	5	2.39	33	0.11	44	2.00	15.21	1.1350	13.3	7.4	7.1	236	4409	253	4726				11.2	7.3	4.2	20.9	24	406	17	288					
FRI	6	2.24	35	0.04	44	2.03	15.00	1.0090																							
SAT	7	2.75	39	1.08	114	2.52	30.22	1.0098														30.5									
SUN	8	2.94	36	0.26	118	2.76	28.62	1.0097														100.0									
MON	9	2.63	39	0.27	105	2.18	32.11	1.2755	10.2	7.7	6.9								12.0	7.2	3.7	100.0						55			
TUE	10	2.60	39	0.45	114	2.24	33.88	1.1111	11.1	7.7	7.4								12.8	7.2	5.9	36.9						5			
WED	11	2.58	36	0.57	132	2.16	40.48	1.0691	14.7	7.7	7.5	137	2948	243	5229				11.4	7.3	4.2	21.7	24	432	17	306					
THU	12	3.06	36	0.38	159	2.68	39.33	1.1110	13.7	7.4	5.6								10.9	7.3	4.8	11.8									
FRI	13	2.63	29	0.02	129	2.38	36.01	1.0736	14.3	7.6	7.1	217	4760	242	5308				13.0	7.4	6.3	11.8	24	476	18	357		5			
SAT	14	2.62	18	0.00	84	2.20	25.67	1.0730														37.2									
SUN	15	2.58	12	0.00	84	2.22	25.44	1.0855														32.4									
MON	16	2.89	6	0.00	57	2.28	17.15	1.1942	9.7	7.3	8.9								12.0	6.9	5.2	30.4						25			
TUE	17	2.92	5	0.00	31	2.44	9.23	1.1355	10.1	7.7	6.9								10.9	7.2	5.1	13.1						5			
WED	18	3.28	15	0.00	11	2.40	4.07	1.0615	9.1	7.5	7.1								10.0	7.1	6.1	16.9									
THU	19	3.05	20	0.00	20	2.36	6.42	1.1660	9.3	7.5	7.2								10.7	6.9	4.0	17.7									
FRI	20	2.95	24	0.00	63	2.26	19.01	1.1409	10.1	7.5	7.4								10.5	7.1	4.6	14.8									
SAT	21	2.69	31	0.10	60	2.14	19.11	1.0054																							
SUN	22	2.47	33	0.22	51	1.94	17.98	1.0720														13.3									
MON	23	2.52	32	0.30	37	1.91	13.51	1.1249	11.3	7.2	7.7								10.5	6.8	3.8	22.2						5			
TUE	24	2.37	32	0.39	46	1.81	17.42	1.1253	9.9	7.3	6.2								13.1	6.9	4.6	18.5						145			
WED	25	2.39	34	0.44	11	1.77	5.09	1.1385	10.0	7.4	7.1								10.5	6.9	4.0	20.6									
THU	26	2.41	29	0.29	67	1.86	24.27	1.1134	11.2	7.4	6.8								13.4	7.0	4.0	21.6									
FRI	27	2.36	28	0.08	34	1.79	13.27	1.0603	12.5	7.3	7.1								13.6	7.2	6.6	22.6									
SAT	28	2.40	30	0.05	66	1.84	24.17	1.0358														22.4									
TOTAL		72.72		5.88		59.91		2.9416																							
MAXIMUM		3.28	39.00	1.08	159	2.76	40.5	1.2755	14.7	7.8	8.9	236	4760	316	6035				13.6	7.4	6.6	100.0	26	476	18	357		145.0			
MINIMUM		2.04	5.00	0.00	11	1.77	4.1	1.0054	9.1	7.2	5.2	92	1757	242	4726				10.0	6.7	3.7	5.5	24	406	17	267		5.0			
AVERAGE		2.60	28.79	0.21	66	2.14	20.3	1.1051	11.2	7.5	7.0	171	3468	264	5325				11.7	7.1	4.7	25.3	25	431	17	304		36			
Number of Analyses		28	28	28	28	28	28	28	28	28	28	4	4	4	4	4	4	4	20	20	20	27	4	4	4	4	4	9			

WEEK	WEEKLY AVERAGE			WEEKLY			% REMOVAL
	BOD mg/l	TSS mg/l	BOD lbs	COLIFORM mg/l	COLIFORM lbs	COLIFORM Geo Mean	
1	17	277	25	407	35		93
2	18	332	24	454	11		86
3							
4							
5							
AVG	17	304	25	431	19		
MAX	18	332	25	454	35		

COMMENTS:  
 \* GEOMETRIC MEAN WAS USED TO CALCULATE THE AVERAGE FECAL COLIFORM COLONIES

2011		2011	
1/13	1/10	1/10	1/25
DO mg/l	N/A	110	
Alk mg/l	N/A	20.0	
DO mg/l	4.7	ND	#####
Turb. NTU	100.0	ND	#####
Tot. TSS	N/A	41.0	0.69
		Zinc	
		NH3 mg/l	18.0
			296

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

MAJOR (SUB 01)  
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:** Tom Trego WW Utilities Superintendent

AK-002295-1  
PERMIT NUMBER

001 A  
DISCHARGE NUMBER

\*\*\* NO DISCHARGE \*\*\*  
NOTE: Read instructions before completing this form.

MONITORING PERIOD

YR	MO	DAY	YEAR	MO	DAY
2012	1	1	2012	1	28

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	VALUE	UNITS	VALUE			
Turbidity	*****	*****	*****	*****	*****	*****	0		
00070 1 0 Effluent Gross	*****	*****	*****	*****	*****	*****	0	Continuous	RCORDR
Oxygen, dissolved (DO)	*****	*****	*****	*****	*****	*****	0		
00300 1 0 Effluent Gross	*****	*****	*****	*****	*****	*****	0	Once Per Month	GRAB
BOD, 5-Day, 20 deg C	304	(26)	357	*****	*****	*****	0		
00310 1 0 Effluent Gross	1226	lb/d	2452	*****	*****	*****	0	Twice Per Month	COMP24
BOD, 5-Day, 20 deg C	304	(26)	*****	*****	*****	*****	0		
00310 W 0 See Comments	1829	lb/d	*****	*****	*****	*****	0	Twice Per Month	COMP24
pH	*****	*****	*****	*****	*****	*****	0		
00400 1 0 Effluent Gross	*****	*****	*****	*****	*****	*****	0	Weekdays	GRAB
Alkalinity, total (asCaCo3)	*****	*****	*****	*****	*****	*****	0		
00410 1 7 Effluent Gross	*****	*****	*****	*****	*****	*****	0	Quarterly	COMP24
Solids, total suspended	431	(26)	476	*****	*****	*****	0		
00530 1 0 Effluent Gross	1226	lb/d	2452	*****	*****	*****	0	Twice Per Month	COMP24

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Tom Trego  
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.

*Tom Trego*  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

907 AREA CODE  
586-0393 TELEPHONE  
2012 YEAR  
2 MO  
10 DAY

TYPED OR PRINTED

COMMENT AND EXPLANATION OF ANY VIOLATIONS

\* The reporting period was from 01/01/2012 through 01/28/2012.

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

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

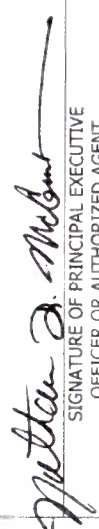
Form Approved  
 Form No. 3320-1 (03-99)  
 Previous editions may be used.

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: Tom Trego WW Utilities Superintendent

AK-002295-1  
 PERMIT NUMBER

001 A  
 DISCHARGE NUMBER

MONITORING PERIOD  
 YR 2012 MO 1 DAY 1  
 YEAR 2012 MO 1 DAY 28

PARAMETER	QUANTITY OR LOADING		QUALITY OR CONCENTRATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	UNITS			
Solids, total suspended	476	(26)	*****	(19)	0		
00530 W 0	1829	lb/d	*****	19		Twice Per Month	COMP24
See Comments	WKLY AVG		*****	mg/L			
Nitrogen, ammonia total (as N)	296	(26)	*****	(19)	0		
00610 1 0	1164	lb/d	*****	19		Once Per Month	COMP24
Effluent Gross	MO AVG		*****	mg/L			
Hardness, total (as CaCO3)	*****	****	*****	(19)	0		
00900 1 6	*****	****	*****	19		Once Per Month	GRAB
Effluent Gross	*****	****	*****	mg/L			
Silver, total recoverable	ND	(26)	*****	(28)	0		
01079 1 0	Req. Mon. DAILY MX		*****	28		Three Per Year	COMP24
Effluent Gross	MO AVG		*****	ug/L			
Zinc, total recoverable	0.695	(26)	*****	(28)	0		
01094 1 0	Req. Mon. DAILY MX		*****	28		Three Per Year	COMP24
Effluent Gross	MO AVG		*****	ug/L			
Lead, total recoverable	ND	(26)	*****	(28)	0		
01114 1 0	Req. Mon. DAILY MX		*****	28		Three Per Year	COMP24
Effluent Gross	MO AVG		*****	ug/L			
Copper, total recoverable	0.329	(26)	*****	(28)	0		
01119 1 0	Req. Mon. DAILY MX		*****	28		Once Per Month	COMP24
Effluent Gross	MO AVG		*****	ug/L			
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.						
Tom Trego Wastewater Utilities Superintendent	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT						
TYPED OR PRINTED	907 AREA CODE						
COMMENT AND EXPLANATION OF ANY VIOLATIONS	TELEPHONE 586-0393 PHONE NUMBER DATE						
* The reporting period was from 01/01/2012 through 01/28/2012.	2012 YEAR						
	2 MO						
	10 DAY						

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

MAJOR (SUB 01)  
OMB No. 2040-0004  
Approval Expires 05-31-98

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

\*\*\* NO DISCHARGE \*\*\*

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**ATT:** Tom Trego WW Utilities Superintendent

**AK-002295-1**  
PERMIT NUMBER

**001 A**  
DISCHARGE NUMBER

MONITORING PERIOD			
YR	MO	DAY	TO
2012	1	1	
YR	MO	DAY	TO
2012	1	1	28

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	VALUE	UNITS	VALUE			
Coliform, fecal - % sample exceeds limit	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
30500 O 0	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
See Comments	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
Fecal coliform, MPN, EC med, 44.5 C	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
31615 O 0	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
See Comments	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
Fecal coliform, MPN, EC med, 44.5 C	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
31615 P 0	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
See Comments	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
Fecal coliform, MPN, EC med, 44.5 C	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
31615 Q 0	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
See Comments	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
Fecal coliform, MPN, EC med, 44.5 C	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
31615 R 0	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
See Comments	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
Floating solids or visible foam-visual	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
45613 1 0	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
Effluent Gross	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
Flow, in conduit thru treatment plant	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
50050 1 0	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	
Effluent Gross	*****	*****	*****	*****	*****	0	Twice Every Week	GRAB	

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**Tom Trego**  
Wastewater Utilities Superintendent

*Tom Trego*  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

907 AREA CODE  
586-0393 TELEPHONE  
2012 YEAR  
2 MO  
10 DAY

**COMMENT AND EXPLANATION OF ANY VIOLATIONS**

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00434/981209 1904

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**LOCATION:** JUNEAU, ALASKA 99801  
**ATT:** Tom Treago WW Utilities Superintendent

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

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AK-002295-1  
PERMIT NUMBER

001 A  
DISCHARGE NUMBER

MONITORING PERIOD

YR	MO	DAY	TO	YEAR	MO	DAY
2012	1	1		2012	1	28

PARAMETER	QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION		UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	VALUE		VALUE	VALUE				
Chlorine, total residual	N/A	N/A	(26)	*****	N/A	(28)	0		
50060 S 0	4.09	4.09	lb/d	*****	100	ug/l	0	QUARTERLY	COMP24
See Comments	MO AVG	DAILY MX		*****	DAILY MX				
Dilution factor	*****	*****	****	*****	*****	ug/L	0		
80093 1 0	*****	*****	****	*****	*****			DAILY	MEASRD
Effluent Gross	*****	*****	****	*****	*****	1U	0		
BOD.5-day, percent removal	*****	*****	****	*****	*****	(23)	0		
81010 K 0	*****	*****	****	*****	*****			Once Per Month	CALCTD
Percent Removal	*****	*****	****	*****	*****	23 %	0		
Solids, suspended percent removal	*****	*****	****	*****	*****	(23)	0		
81011 K 0 0	*****	*****	****	*****	*****			Once Per Month	CALCTD
Percent Removal	*****	*****	****	*****	*****	23 %	0		
Chlorine usage	N/A	*****	(26)	*****	*****		0		
81400 X 0	Req. Mon.	*****	lb/d	*****	*****			DAILY	MEASRD
End of Chlorine Contact Chamber	MO AVG	*****		*****	*****		0		
Oil and grease visual	*****	*****	****	*****	*****	(93)	0		
84066 1 0	*****	*****	****	*****	*****	occur/mo	0	Once Per Month	VISUAL
Effluent Gross	*****	*****	****	*****	*****				
Toxicity, Chronic	*****	*****	****	*****	*****	(2G)	0		
TT000 1 8	*****	*****	****	*****	*****	3x chronic		Semiannual	COMP24
Effluent Gross	*****	*****	****	*****	*****				

NAME: TITLE PRINCIPAL EXECUTIVE OFFICER  
**Tom Treago**  
**Wastewater Utilities Superintendent**

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TYPED OR PRINTED  
*Tom Treago*  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE  
907 AREA CODE  
586-0393

PHONE NUMBER  
DATE  
2012 YEAR  
2 MO  
10 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS  
\* The reporting period was from 01/01/2012 through 01/28/2012.