CONTACT NAME: Samantha Stoughtenger

MAILING ADDRESS: 2009 Radcliffe Rd.

Juneau, AK 99801

FACILITY: MENDENHALL WW TREATMENT FACILITY

LOCATION: 2009 RADCLIFFE RD

Juneau, AK 99801

PERMIT NUMBER: AK0022951

1 - Final Effluent

Biochemical Oxygen Demand

(BOD5)

00310

MONITORING PERIOD: 1-Sep-14

60

daily maximum

TEL EDITORIE

mg/l

0

TO

30-Sep-14 NO DISCHARGE:

2X Monthly

OUTFALL / MONITORING POINT: 001A MENDENHALL RIVER DIFFUSER

Parameter **Quantity or Loading** Units **Quality or Concentration** Units Frequency of Sample Type No. Ex. **Analysis** Minimum **Average** Maximum **Average** Maximum Temperature (C) Sample ***** ***** ***** 15.8 16.7 0 meas. ***** ***** ***** DEG.C Report Report 5X Weekly Grab 1 - Final Effluent **Permit** monthly average daily maximum 00010 reqmt. Dissolved Oxygen Sample ***** ***** ***** 5.1 2.8 0 meas. **** ***** ***** 1 - Final Effluent Report Report mg/l Monthly Grab **Permit** daily minimum daily maximum 00300 regmt. Biochemical Oxygen Demand Sample ***** 334.9 456.6 18.0 26.0 0 (BOD5) meas.

(BOD5) meas. ***** ***** ***** 24-Hr Composite G - Influent Report mg/l 2X Monthly **Permit** monthly average 00310 regmt. Biochemical Oxygen Demand Sample

lbs/day

***** ***** ***** 389.6 23.6 0 meas. ***** ***** ***** 1839 2X Monthly lbs/day mg/l 24-Hr Composite W - See Comments **Permit** weekly average weekly average 00310 regmt.

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 a system GRIEKO TEMPEL designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons SR. OPERATOR who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my

Permit

regmt.

Sample

knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the TYPED OR PRINTED possibility of fine and imprisonment for knowing violations

1226

monthly average

2452

daily maximum

SIGNATURE OF PRINCIPAL EXECUTIV OFFICER OR AUTHORIZED AGENT

30

monthly average

296.5

	TELEPHONE	DATE	
	907.506.09]	2014/10/	١
VE			

YIMID

AREA I NUMBER

24-Hr Composite

CONTACT NAME: Samantha Stoughtenger

MAILING ADDRESS: 2009 Radcliffe Rd.

Juneau, AK 99801

FACILITY: MENDENHALL WW TREATMENT FACILITY

LOCATION: 2009 RADCLIFFE RD

Juneau, AK 99801

PERMIT NUMBER: AK0022951

MONITORING PERIOD: 1-Sep-14

TO

30-Sep-14 NO DISCHARGE:

OUTFALL / MONITORING POINT: 001A MENDENHALL RIVER DIFFUSER

Parameter		Quantity o	or Loading	Units	Qua	lity or Concentra	ation	Units	No.	Frequency of	Sample Type
		Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	
рН	Sample meas.	*****	*****		6.9	*****	7.1		0		
1 - Final Effluent 00400	I CI IIII	*****	****		6.3 instantaneous minimum	*****	8.5 instantaneous maximum	S.U.		5X Weekly	Grab
Alkalinity, Total (as CaCO3)	Sample meas.	*****	*****		*****	NA	NA		0		
1 - Final Effluent 00410	Permit reqmt.	*****	****		*****	Report monthly average	Report daily maximum	mg/l		Quarterly	24-Hr Composite
Total Suspended Solids	Sample meas.	231.4	315.3		*****	12.3	19.0		0		
1 - Final Effluent 00530	Permit reqmt.	1226 monthly average	2452 daily maximum	lbs/day	*****	30 monthly average	60 daily maximum	mg/l		2X Monthly	24-Hr Composite
Total Suspended Solids	Sample meas.	*****	*****		*****	197.7	*****		0		
G - Influent 00530	I CI IIII	*****	*****		*****	Report monthly average	*****	mg/l		2X Monthly	24-Hr Composite
Total Suspended Solids	Sample meas.	251.1	*****		*****	15.2	*****		0		
W - See Comments 00530	Permit reqmt.	1839 weekly average	*****	lbs/day	*****	45 weekly average	****	mg/l		2X Monthly	24-Hr Composite

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were		TELEPHONE	DATE
	prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons		207 00/ 0207	/ . / . /
SC. OPENATOR	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	SIGNATURE OF PRINCIPAL EXECUTIVE	907.506,0391	2014/10/18
TYPED OF PRINTED	are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	OFFICER OR AUTHORIZED AGENT	AREA NUMBER	YIMID

CONTACT NAME: Samantha Stoughtenger

MAILING ADDRESS: 2009 Radcliffe Rd.

Juneau, AK 99801

FACILITY: MENDENHALL WW TREATMENT FACILITY

LOCATION: 2009 RADCLIFFE RD

Juneau, AK 99801

PERMIT NUMBER: AK0022951

MONITORING PERIOD: 1-Sep-14

TO

30-Sep-14 NO DISCHARGE:

OUTFALL / MONITORING POINT: 001A MENDENHALL RIVER DIFFUSER

Parameter		Quantity of	or Loading	Units	Qua	lity or Concentra	ation	Units	No.	Frequency of	Sample Type
		Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	
Ammonia Nitrogen (as N)	Sample meas.	*****	*****		*****	12.0	12.0		0		
1 - Final Effluent 00610	remit	****	*****		*****	Report monthly average	Report daily maximum	mg/l		Monthly	24-Hr Composite
Hardness, Total (as CaCO3)	Sample meas.	*****	*****		*****		74.7		0		
1 - Final Effluent 00900	I CITILLE	*****	*****		*****	Report monthly average	Report daily maximum	mg/l		Monthly	24-Hr Composite
Silver Total Recoverable	Sample meas.	*****	*****		*****	NA	NA		0		
1 - Final Effluent 01079	remit	*****	*****		*****	Report monthly average	Report daily maximum	ug/l		See Permit Requirements	24-Hr Composite
Zinc Total Recoverable	Sample meas.	*****	*****		*****	NA	NA		0		
1 - Final Effluent 01094	Permit reqmt.	*****	*****		*****	Report monthly average	Report daily maximum	ug/l		See Permit Requirements	24-Hr Composite
Lead Total Recoverable	Sample meas.	*****	*****		*****	NA	NA		0		
1 - Final Effluent 01114	I CITILLE	****	****		****	Report monthly average	Report daily maximum	ug/l		See Permit Requirements	24-Hr Composite

	I certify under penalty of law that this document and all attachments were		TELEPHONE	DATE
GRIEGO TEMPEL	prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons	<i>M</i> ,	907. 586,0393	2014/10/14
SR. OPERATOR	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	SIGNATURE OF PRINCIPAL EXECUTIVE	1/	221111717
TYPED OR PRINTED	are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	OFFICER OR AUTHORIZED AGENT	AREA NUMBER	YIMID

Page 3

CONTACT NAME: Samantha Stoughtenger

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Juneau, AK 99801

FACILITY: MENDENHALL WW TREATMENT FACILITY

LOCATION: 2009 RADCLIFFE RD

Juneau, AK 99801

PERMIT NUMBER: AK0022951

OUTFALL / MONITORING POINT: 001A MENDENHALL RIVER DIFFUSER

MONITORING PERIOD: 1-Sep-14

TO

30-Sep-14

NO DISCHARGE:

Parameter		Quantity o	or Loading	Units	Qua	lity or Concentra	ation	Units	No.	Frequency of	Sample Type
		Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	
Copper Total Recoverable	Sample meas.	0.61	0.36		*****	20.5	22.0		0		
1 - Final Effluent 01119	Permit reqmt.	1.82 monthly average	3.92 daily maximum	lbs/day	*****	****** 44.5 95.8 monthly average daily maximum		ug/l		Monthly	24-Hr Composite
Chronic Toxicity	Sample meas.	*****	*****		*****	NA	NA		0		
1 - Final Effluent TTOOO	1 CI IIIIC	*****	****		*****	Report monthly average	Report daily maximum	TUC		See Permit Requirements	24-Hr Composite
Floating solids, waste or visible foam-visual	Sample meas.	*****	*****		*****	*****	Р		0		
1 - Final Effluent 45613	reimit	****	****		*****	*****	Report value	pass/fail		Monthly	Visual
Flow	Sample meas.	2.3	2.7		*****	*****	*****		0		
1 - Final Effluent 50050	Permit reqmt.	Report monthly average	4.9 daily maximum	MGD	*****	*****	*****			Continuous	Recorded
Fecal Coliform	Sample meas.	*****	*****		*****	29.6	106.0		0		
1 - Final Effluent 74055	I CHIMIC	*****	****		****	200 monthly geometric mean	800 daily maximum	cts/100 ml		Weekly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	certify under penalty of law that this document and all attachments were		TELEPHONE	DATE
	prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons		0-2 -0/ 1-303	201//
GRIEKO TEMPEL	who manage the system, or those persons directly responsible for	,	907,506,6393	2014/16/1
SR. OPERATOR	gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there	SIGNATURE OF PRINCIPAL EXECUTIVE		
TYPED OR PRINTED	are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	OFFICER OR AUTHORIZED AGENT	AREA NUMBER	YIMID

Page 4

CONTACT NAME: Samantha Stoughtenger

MAILING ADDRESS: 2009 Radcliffe Rd.

Juneau, AK 99801

FACILITY: MENDENHALL WW TREATMENT FACILITY

LOCATION: 2009 RADCLIFFE RD

Juneau, AK 99801

PERMIT NUMBER: AK0022951

MONITORING PERIOD: 1-Sep-14

30-Sep-14

TO

NO DISCHARGE:

OUTFALL / MONITORING POINT: 001A MENDENHALL RIVER DIFFUSER

Parameter		Quantity	or Loading	Units	Oual	lity or Concentra	ition	Units	No.	Frequency of	Sample Type
1 di diffetti		Average	Maximum	Omts	Minimum	Average	Maximum	Omto	Ex.	Analysis	bumpie Type
Fecal Coliform	Sample meas.	*****	*****		*****	74.2	*****		0		
W - See Comments 74055	I cimit	****	*****		*****	400 weekly geometric mean	****	cts/100 ml		Weekly	Grab
BOD5 Minimum % Removal	Sample meas.	*****	*****		93.9	*****	*****		0		
K - Percent Removal 81010	L CI IIII L	****	****		85 minimum	*****	****	%		Monthly	Calculation
Total Suspended Solids Minimum % Removal	Sample meas.	*****	*****		93.9	*****	*****		0		
K - Percent Removal 81011	I CI IIIIC	****	****		85 minimum	*****	*****	%		Monthly	Calculation

CC	M	MEI	VΤ	S:

W = Weekly Limits;

Mail this report when completed to ADEC, Division of Water, 555 Cordova Street, Anchorage, AK 99501-2617 Attach an explanation of any violations. Reference all attachments below.

	I certify under penalty of law that this document and all attachments were		TELEPHONE	DATE	
GRIEKO TEMPEL	prepared under my direction or supervision in accordance with a system designed to assure that 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		907,506.0393	2014/10/	14
	knowledge and belief, true, accurate, and complete. I am aware that there	SIGNATURE OF PRINCIPAL EXECUTIVE			1
	are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	OFFICER OR AUTHORIZED AGENT	AREA NUMBER	YIMID	

Page 5

MENDENHALL WASTEWATER TREATMENT FACILITY

Juneau, Alaska

September 2014

		FLOWS								NFLUEN			ССР	CITIDEI							Efflu	ent			
		SBR		SBR	SBR			D:0:	TSS	TSS	B.O.D.	B:0.D.	IPS	IPS	IPS	IPS			D.O:	TSS	TSS	B.O.D.	B.O.D.	FÉCAL	1
AY	DATE	INFLUENT	precip	ToT EFF	WASTE	TEMP	рH						TSS	TSS	BOD	BOD	TEMP	рН						COUFORM	
	04	MGD	0.00	MGD	MGD	°C		mg/L	mg/L	LBS	mg/L:	LBS	mg/L	LBS	mg/L	LBS	°.c.		mg/L	mg/L	LBS	mg/L:	LBS	/100 ml	1000
N	31	2.29	0.36	1.98	0.0820	440	7.0	0.0	100.0	0000.4	400.0	4000.5	000.0	7000.0	000.0	7000.4	45.0	0.0	0.4	0.0	004.0	110	0111	10.0	4
N	1	2.91	0.77	2.69	0.0896	14.0	7.2	3.0	160.0	3883.1	180.0	4368.5	300.0	7280.8	290.0	7038.1	15.9	6.9	3.1	9.0	201.9	14.0	314.1	40.0	+
E	2	2.60	0.05	2.38	0.0620	15.1	7.3	3.1	110.0	2385.2	170.0	3686.3	280.0	6071.5	250.0	5421.0	15.8	7.0	4.0	9.0	178.6	10.0	198.5	27.0	+
D U	3 4	2.66 2.56	0.23	2.42	0.0693 0.0717	15.0 14.8	7.4	2.3	140.0 190.0	3105.8 4056.6	380.0 260.0	8430.1 5551.1	300.0	6655.3 7045.6	350.0 360.0	7764.5 7686.1	15.7 16.1	7.0 7.0	3.2 2.8	11.0 13.0	222.0	12.0	242.2		+-
	5	2.79	0.15	2.59	0.0717	14.8	7.4	3.0	190.0	4036.6	260.0	3331.1	330.0	7045.6	300.0	7000.1	16.1	7.0	3.4	13.0	250.5	14.0	269.7		+
T	6	2.79	0.13	2.49	0.0610	14.0	7.1	3.0									10.2	7.0	3.4		-				+
N	7	2.09	0.44	2.49	0.0790																				
N	8	2.79	0.00	2.59	0.0612	14.7	7.3	2.4	130.0	3024.9	190.0	4421.0	240.0	5584.5	340.0	7911.3	15.1	7.0	3.0	12.0	259.2	12.0	259.2	6.0	+
E	9	2.53	0.00	2.28	0.0654	14.9	7.1	2.4	176.0	3713.6	250.0	5275.1	250.0	5275.1	340.0	7174.1	16.0	6.9	3.9	12.0	228.2	16.0	304.2	10.0	+
D	10	2.35	0.12	2.18	0.0457	7.2	14.7	2.7	192.0	3763.0	280.0	5487.7	290.0	5683.7	380.0	7447.6	15.8	6.9	3.8	12.0	218.2	14.0	254.5	10.0	+
U	11	2.49	0.40	2.27	0.0873	15.1	7.0	2.5	368.0	7642.1	500.0	10383.3	856.0	17776.2	600.0	12460.0	15.1	7.0	3.0	14.0	265.0	17.0	321.8		+
RI	12	2.23	0.04	2.09	0.1082	15.2	7.3	2.4	268.0	4984.3	390.0	7253.3	856.0	15920.1	530.0	9857.0	15.8	6.9	3.2	14.0	244.0	22.0	383.5		+
T	13	2.26	0.01	2.06	0.0797	10.2	1.10		200.0	100 110	000.0	1200.0	00010	1002011	000.0	000110	10.0	0.0	0.2	1 1.0	211.0		000.0		+
N	14	2.18	0.00	1.90	0.0919							-													
N	15	2.16	0.02	1.99	0.0771	15.4	7.2	2.1					328.0	5908.7	570.0	10268.2	16.5	7.0	5.1	19.0	315.3	25.0	414.9	52.0	+
E	16	2.18	0.09	1.93	0.0458	14.8	7.3	2.7	192.0	3490.8	310.0	5636.2	336.0	6108.9	480.0	8727.0	16.6	7.1	3.3	17.0	273.6	25.0	402.4	106.0	
D	17	2.13	0.01	1.96	0.0455	14.7	7.4	2.8	212.0	3766.0	360.0	6395.1	380.0	6750.4	660.0	11724.4	16.7	7.1	3.1	15.0	245.2	26.0	425.0		
J	18	2.14	0.29	1.88	0.0748	14.8	7.4	2.5	232.0	4140.6	340.0	6068.2	1210.0	21595.6	440.0	7852.9	16.0	7.1	3.0	12.0	188.2	21.0	329.3		
1	19	2.34	0.62	2.15	0.0447	14.9	7.3	2.7	212.0	4137.3	350.0	6830.5	580.0	11319.0	410.0	8001.4	16.6	7.0	3.0	13.0	233.1	21.0	376.6		
T	20	2.45	0.68	2.23	0.0600																				
N	21	2.80	0.99	2.62	0.0754																				
N	22	2.86	0.42	2.64	0.1221	14.2	7.3	2.4	172.0	4102.6	190.0	4532.0	1560.0	37209.7	330.0	7871.3	15.1	7.0	3.4	13.0	286.2	17.0	374.3	2.0	
E	23	2.78	0.01	2.56	0.0685	14.1	7.1	3.1	188.0	4358.8	290.0	6723.7	380.0	8810.4	330.0	7651.1	15.1	7.0	3.0	8.0	170.8	16.0	341.6	20.0	
D	24	2.48	0.00	2.28	0.0514	14.0	7.1	2.8	236.0	4881.2	360.0	7446.0	460.0	9514.3	440.0	9100.6	15.1	7.0	2.9	13.0	247.2	18.0	342.3		
U	25	2.22	0.18	2.01	0.0636	14.4	7.3	2.5	220.0	4073.3	330.0	6109.9	330.0	6109.9	420.0	7776.2	15.8	7.0	3.0	8.0	134.1	21.0	352.0		_
II .	26	2.27	0.10	2.19	0.0179	14.9	7.1	2.2	232.0	4392.2	440.0	8330.0	320.0	6058.2	570.0	10791.1	16.0	7.1	3.0	11.0	200.9	25.0	456.6		
Т	27	2.32	0.85	2.10	0.0115																				
N	28	2.80	0.83	2.70	0.0578												1.5								4
N	29	2.84	0.13	2.55	0.0625	13.7	7.3	3.1	116.0	2747.5	130.0	3079.1	224.0	5305.6	210.0	4974.0	15.0	7.0	4.1	12.0	255.2	16.0	340.3	13.0	+
E	30	2.84	0.72	2.64	0.0508	7.3	14.0	2.7	208.0	4926.6	230.0	5447.7	244.0	5779.3	280.0	6632.0	15.2	7.0	3.4	11.0	242.2	15.0	330.3	20.0	-
AL		75.59	9.35	69.39	1.97	15.10				7010		1000000	15000		5000000	10100000				Section 2					100
MUN		2.94	0.99	2.71	0.12	15.40	14.7	3.1	368.0	7642.1	500.0	10383.3	1560.0	37209.7	660.0	12460.0	16.7	7.1	5.1	19.0	315.3	26.0	456.6	106.0	-
MUN		2.13	0.00	1.88	0.01	7.17	7.0	2.1	110.0	2385.2	130.0	3079.1	224.0	5275.1	210.0	4974.0	15.0	6.9	2.8	8.0	134.1	10.0	198.5	2.0	
AGE *		2.52	0.31	2.31	0.07	14.00		2.6	197.7	4078.8	296.5	6072.7	478.8	9893.5	408.6	8291.9	15.8		3.3	12.3	231.4	18.0	334.9	29.6	
umber o	of Analyses	31	31	31	31	22	22	22	20	20	20	20	21	21	21	21	22	22	22	21	21	21	21	10	
						1	the state of the state of	014			2014	**********				FF WEEKL					(LY AVER		WEEKLY	% REN	
		SXs collected on					Hrd. mg/l	74.7	9/9/2014		ug/L	LBS		WEEK		BOD	TS		1 1 1 1 1 1 1 1	OD		rss	COLIFORM	B.O.D.	9
cyc		omp. 9/15/14 In	T comp. plu	igged. 1/2 wa	y through		Hrd. mg/l	-	1	Copper	19.0	0.362	9/9/2014		mg/l	lbs	mg/l	lbs	mg/l	lbs	mg/l	lbs	Geo. Mean	TSS	9
cyc	10.					J	Alk. mg/l	-	1	Copper	22.0	0.485	9/30/2014	1	12.5	256.1	10.5	213.3	312.5	6977.5	302.5	6763.3	32.9	Floatin	_
							D.O.mg/l		1	Lead		0.000		2	16.2	304.7	12.8	242.9	438.0	8970.0	498.4	10047.9	7.7	Waste,	or Fo
							Tox. Tuc		_	Silver		0.000		3	23.6	389.6	15.2	251.1	512.0	9314.8	566.8	10336.5	74.2	Pass/Fail	
										Zinc		0.000		4	19.4	373.4	10.6	207.8	418.0	8638.1	610.0	13540.5	6.3		
										***NI-13	12	228.3	0/0/2014	MAX	23.6	389.6	15.2	251.1	512.0	9314.8	610.0	13540.5	74.2		

---NH3 mg/L 12 228.3 9/9/2014