

MENDENHALL WASTEWATER TREATMENT FACILITY
Juneau, Alaska

Jun-2015

DAY	DATE	FLOWS				Influent											Effluent								
		SBR INFLUENT MGD	precip	SBR TTL EFFL MGD	SBR WASTE MGD	TEMP °C	pH	D.O. mg/L	S.S. mg/L	S.S. LBS	B.O.D. mg/L	B.O.D. LBS	IPS TSS mg/L	IPS TSS LBS	IPS BOD mg/L	IPS BOD LBS	TEMP °C	pH	D.O. mg/L	S.S. mg/L	S.S. LBS	B.O.D. mg/L	B.O.D. LBS	FECAL COLIFORM /100 ml	
SUN	31	1.63	0.00	1.50	0.0302																				
MON	1	1.77	0.00	1.67	0.1058	14.0	7.3	2.7	220.0	3247.6	250.0	3690.5	1940.0	28637.9	430.0	6347.6	16.6	6.9	2.6	22.0	306.4	33.0	459.6	55	
TUE	2	1.76	0.02	1.58	0.1193	15.0	7.4	1.7	256.0	3757.7	390.0	5724.6	1120.0	16439.8	510.0	7486.0	17.0	6.9	3.1	23.0	303.1	30.0	395.3	52	
WED	3	1.76	0.33	1.60	0.1246	14.4	7.2	2.7	260.0	3816.4	490.0	7192.4	1870.0	27448.6	720.0	10568.4	16.9	6.8	2.6	26.0	346.9	31.0	413.7		
THU	4	1.78	0.60	1.62	0.1052	15.0	7.1	4.1	290.0	4305.1	490.0	7274.1	630.0	9352.5	720.0	10688.5	17.3	6.9	2.9	16.0	216.2	31.0	418.8		
FRI	5	1.78	0.11	1.64	0.1077	14.9	7.3	2.9	370.0	5492.7	620.0	9204.0	660.0	9797.8	910.0	13509.1	17.2	6.9	2.8	15.0	205.2	34.0	465.0		
SAT	6	1.83	0.42	1.67	0.0956																				
SUN	7	1.65	0.30	1.62	0.0593																				
MON	8	1.81	0.07	1.70	0.0674	14.3	7.4	2.1	210.0	3170.0	270.0	4075.8	500.0	7547.7	750.0	11321.6	16.6	6.9	2.4	17.0	241.0	26.0	368.6	48	
TUE	9	1.78	T	1.60	0.0824	14.7	7.2	2.6	260.0	3859.8	490.0	7274.1	800.0	11876.2	820.0	12173.1	16.8	6.9	2.4	14.0	188.8	28.0	373.6	68	
WED	10	1.80	0.53	1.70	0.1200	14.7	7.3	2.5	360.0	5404.3	550.0	8256.6	630.0	9457.6	740.0	11108.9	17.1	7.0	3.2	16.0	226.8	29.0	411.2		
THU	11	2.03	0.45	1.91	0.0952	13.9	7.6	2.0	272.0	4605.0	460.0	7787.9	650.0	11004.6	960.0	16253.0	16.9	6.9	3.2	16.0	254.9	29.0	462.0		
FRI	12	1.79	T	1.69	0.0958	14.5	8.0	2.6	204.0	3045.4	400.0	5971.4	875.0	13062.5	550.0	8210.7	17.1	6.8	3.2	12.0	169.1	27.0	380.6		
SAT	13	1.69	T	1.63	0.0679																				
SUN	14	1.66	0.00	1.56	0.0564																				
MON	15	1.81	0.00	1.65	0.0850	15.6	7.5	3.5	244.0	3683.3	240.0	3622.9	1680.0	25360.3	490.0	7396.7	17.4	6.9	2.8	17.0	233.9	26.0	357.8	16	
TUE	16	1.76	0.00	1.63	0.0972	16.1	7.1	3.8	224.0	3288.0	370.0	5431.0	725.0	10641.8	740.0	10862.0	18.3	6.9	3.6	14.0	190.3	24.0	326.3	3	
WED	17	1.78	0.01	1.71	0.0805	16.2	6.8	4.3	288.0	4275.4	500.0	7422.6	500.0	7422.6	650.0	9649.4	17.4	6.7	4.1	8.4	119.8	26.0	370.8		
THU	18	1.79	0.08	1.64	0.1344	15.6	7.0	4.9	267.0	3985.9	540.0	8061.4	550.0	8210.7	850.0	12689.3	18.0	6.8	3.3	15.0	205.2	25.0	341.9	71	
FRI	19	1.79	T	1.66	0.0892	15.3	7.3	2.5	247.0	3687.4	400.0	5971.4	460.0	6867.2	620.0	9255.7	19.1	6.9	4.1	13.0	180.0	31.0	429.2		
SAT	20	1.72	0.00	1.52	0.0973																				
SUN	21	1.69	0.00	1.52	0.0705																				
MON	22	1.74	0.00	1.65	0.0699	16.6	8.0	1.4	184.0	2670.1	330.0	4788.8	520.0	7546.0	950.0	13786.0	17.5	6.9	3.0	13.0	178.9	23.0	316.5	3	
TUE	23	1.88	0.00	1.71	0.1072	15.6	7.1	2.5	236.0	3700.3	340.0	5330.9	480.0	7526.0	790.0	12386.6	18.1	6.8	2.8	11.0	156.9	21.0	299.5	2	
WED	24	1.78	T	1.64	0.0772	16.1	7.1	2.5	235.0	3488.6	460.0	6828.8	520.0	7719.5	850.0	12618.4	17.6	6.9	3.6	11.0	150.5	22.0	300.9		
THU	25	1.69	0.26	1.60	0.0803	16.3	7.6	2.1	290.0	4087.4	460.0	6483.5	500.0	7047.3	620.0	8738.7	18.4	6.8	3.5	11.0	146.8	19.0	253.5		
FRI	26	1.85	0.52	1.79	0.0820	15.7	7.3	2.3	260.0	4011.5	440.0	6788.8	530.0	8177.4	900.0	13886.1	17.6	6.8	3.0	13.0	194.1	18.0	268.7		
SAT	27	1.73	0.04	1.64	0.0734																				
TOTAL		49.53	3.74	44.55	2.4770																				
MAXIMUM		2.03	0.60	1.91	0.1344	16.6	8.0	4.9	370.0	5492.7	620.0	9204.0	1940.0	28637.9	960.0	16253.0	19.1	7.0	4.1	26.0	346.9	34.0	465.0	71.0	
MINIMUM		1.63	0.00	1.50	0.0302	13.9	6.8	1.4	184.0	2670.1	240.0	3622.9	460.0	6867.2	430.0	6347.6	16.6	6.7	2.4	8.4	119.8	18.0	253.5	2.0	
AVERAGE *		1.77	0.16	1.64	0.0885	15.2		2.8	258.9	3879.1	424.5	6359.1	807.0	12057.2	728.5	10946.8	17.4		3.1	15.2	210.6	26.7	370.7	17.9	
Number of Analyses		28	23	28	28	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	9	

Comments: NONE to report.

2015	
Hrd. mg/l	75
Hrd. mg/l	
Alk. mg/l	160
D.O.mg/l	3.1

Tox. TUc: _____

2015 Metals	
	LBS
Copper	19.0
Copper	0.26
Lead	
Silver	
Zinc	
***NH3 mg/L	18.0
	246

% REMOVAL	
B.O.D.	93.7
S.S.	94.1
Floating Solids	
Waste, or Foam	
Pass/Fail	P

WEEK	WEEKLY AVERAGE				WEEKLY COLIFORM Geo. Mean
	BOD		TSS		
	mg/l	lbs	mg/l	lbs	
1	31.8	430.5	20.4	275.6	53.5
2	27.8	399.2	15.0	215.7	57.1
3	26.4	365.2	13.5	185.8	15.0
4	20.6	287.8	12	165	2.4
MAX	31.8	430.5	20.4	275.6	57.1

Alaska Department of Environmental Conservation Monthly Discharge Monitoring Report (DMR)

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

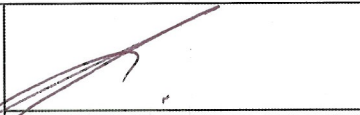
MONITORING PERIOD: 06/01/2015

TO 06/30/2015

OUTFALL / MONITORING POINT: 001A MENDENHALL RIVER DIFFUSER

NO DISCHARGE:

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
Temperature (C) 1 - Final Effluent 00010	Sample meas.	*****	*****		*****	17.4	19.1		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	Report daily maximum	DEG.C		5X Weekly	Grab
Dissolved Oxygen 1 - Final Effluent 00300	Sample meas.	*****	*****		2.4	*****	4.1		0		
	Permit reqmt.	*****	*****		Report daily minimum	*****	Report daily maximum	mg/l		Monthly	Grab
Biochemical Oxygen Demand (BOD5) 1 - Final Effluent 00310	Sample meas.	371	465		*****	26.7	34.0		0		
	Permit reqmt.	1226 monthly average	2452 daily maximum	lbs/day	*****	30 monthly average	60 daily maximum	mg/l		2X Monthly	24-Hr Composite
Biochemical Oxygen Demand (BOD5) G - Influent 00310	Sample meas.	*****	*****		*****	425	*****		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	*****	mg/l		2X Monthly	24-Hr Composite
Biochemical Oxygen Demand (BOD5) W - See Comments 00310	Sample meas.	430	*****		*****	31.8	*****		0		
	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 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 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	DATE
GRIEKO TEMPEL SR. OPERATOR TYPED OR PRINTED		 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	907.586.0393 AREA NUMBER

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TO 06/30/2015

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Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
pH 1 - Final Effluent 00400	Sample meas.	*****	*****		6.7	*****	7.0		0		
	Permit reqmt.	*****	*****		6.5 instantaneous minimum	*****	8.5 instantaneous maximum	S.U.		5X Weekly	Grab
Alkalinity, Total (as CaCO3) 1 - Final Effluent 00410	Sample meas.	*****	*****		*****	160	160		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	Report daily maximum	mg/l		Quarterly	24-Hr Composite
Total Suspended Solids 1 - Final Effluent 00530	Sample meas.	211	347		*****	15.2	26.0		0		
	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 G - Influent 00530	Sample meas.	*****	*****		*****	259	*****		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	*****	mg/l		2X Monthly	24-Hr Composite
Total Suspended Solids W - See Comments 00530	Sample meas.	276	*****		*****	20.4	*****		0		
	Permit reqmt.	1839 weekly average	*****	lbs/day	*****	45 weekly average	*****	mg/l		2X Monthly	24-Hr Composite

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GRIEKO TEMPEL SR. OPERATOR	
TYPED OR PRINTED	

	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
--	--

TELEPHONE	DATE
907.586.0398	15/07/07
AREA NUMBER	Y M D

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 Juneau, AK 99801

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MONITORING PERIOD: 06/01/2015

TO 06/30/2015

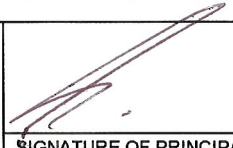
OUTFALL / MONITORING POINT: 001A MENDENHALL RIVER DIFFUSER

NO DISCHARGE:

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
Ammonia Nitrogen (as N) 1 - Final Effluent 00610	Sample meas.	*****	*****		*****	18.0	18.0		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	Report daily maximum	mg/l		Monthly	24-Hr Composite
Hardness, Total (as CaCO3) 1 - Final Effluent 00900	Sample meas.	*****	*****		*****	75.0	75.0		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	Report daily maximum	mg/l		Monthly	24-Hr Composite
Silver Total Recoverable 1 - Final Effluent 01079	Sample meas.	*****	*****		*****	N/A	N/A		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	Report daily maximum	ug/l		See Permit Requirements	24-Hr Composite
Zinc Total Recoverable 1 - Final Effluent 01094	Sample meas.	*****	*****		*****	N/A	N/A		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	Report daily maximum	ug/l		See Permit Requirements	24-Hr Composite
Lead Total Recoverable 1 - Final Effluent 01114	Sample meas.	*****	*****		*****	N/A	N/A		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	Report daily maximum	ug/l		See Permit Requirements	24-Hr Composite

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
GRIEKO TEMPEL
Sr. OPERATOR
 TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were 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 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	DATE
907.586.0393	15/07/07
AREA NUMBER	Y M D

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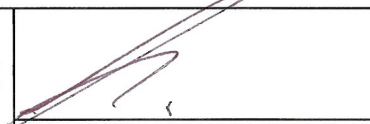
MONITORING PERIOD: 06/01/2015

TO 06/30/2015

OUTFALL / MONITORING POINT: 001A MENDENHALL RIVER DIFFUSER

NO DISCHARGE:

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
Copper Total Recoverable 1 - Final Effluent 01119	Sample meas.	0.26	0.26		*****	19.0	19.0		0		
	Permit reqmt.	1.82 monthly average	3.92 daily maximum	lbs/day	*****	44.5 monthly average	95.8 daily maximum	ug/l		Monthly	24-Hr Composite
Chronic Toxicity 1 - Final Effluent TTOOO	Sample meas.	*****	*****		*****	N/A	0		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	Report daily maximum	TUC		See Permit Requirements	24-Hr Composite
Floating solids, waste or visible foam-visual 1 - Final Effluent 45613	Sample meas.	*****	*****		*****	*****	P		0		
	Permit reqmt.	*****	*****		*****	*****	Report value	pass/fail		Monthly	Visual
Flow 1 - Final Effluent 50050	Sample meas.	1.64	1.91		*****	*****	*****		0		
	Permit reqmt.	Report monthly average	4.9 daily maximum	MGD	*****	*****	*****			Continuous	Recorded
Fecal Coliform 1 - Final Effluent 74055	Sample meas.	*****	*****		*****	17.9	71.0		0		
	Permit reqmt.	*****	*****		*****	200 monthly geometric mean	800 daily maximum	cts/100 ml		Weekly	Grab

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			907.586.0393	6/15/07
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA NUMBER	Y M D

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OUTFALL / MONITORING POINT: 001A MENDENHALL RIVER DIFFUSER

NO DISCHARGE:

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
Fecal Coliform W - See Comments 74055	Sample meas.	*****	*****		*****	57.1	*****		0		
	Permit reqmt.	*****	*****		*****	400 weekly geometric mean	*****	cts/100 ml		Weekly	Grab
BOD5 Minimum % Removal K - Percent Removal 81010	Sample meas.	*****	*****		93.7	*****	*****		0		
	Permit reqmt.	*****	*****		85 minimum	*****	*****	%		Monthly	Calculation
Total Suspended Solids Minimum % Removal K - Percent Removal 81011	Sample meas.	*****	*****		94.1	*****	*****		0		
	Permit reqmt.	*****	*****		85 minimum	*****	*****	%		Monthly	Calculation

COMMENTS:
 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.

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 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 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	DATE
GRIEKO TEMPEL SIC. OPERATOR		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	907.586.0393
TYPED OR PRINTED		AREA NUMBER	Y M D