

JUNEAU-DOUGLAS WASTEWATER TREATMENT FACILITY

October 2016

Juneau, Alaska

WEATHER		FLOWS		INFLUENT							Effluent										
DAY	DATE	TEMP °F	RAIN FALL INCHES	J-D TTTL EFFL MGD	TEMP °C	pH	D.O. mg/L	T.S.S. mg/L	T.S.S. LBS	BOD mg/L	BOD LBS	TEMP °C	pH	D.O. mg/L	T.S.S. mg/L	T.S.S. LBS	BOD mg/L	BOD LBS	FECAL Coliform /100 ml	Channel Fecal /100 ml	Enteric Fecal /100 ml
Sat	1	44.8	0.00	0.58																	
Sun	2	43.6	0.00	0.55																	
Mon	3	45.4	0.00	0.81	13.5	7.2	3.5					15.2	7.0	3.9							
Tue	4	48.1	0.00	0.77	13.5	7.3	4.0	72	465	95	613	15.1	7.2	4.3	4	26	7	43			
Wed	5	49.1	0.01	0.51	14.2	7.3	3.6	290	1243	250	1072	14.8	7.0	4.3	1	4	5	22	1	7	
Thu	6	49.4	0.00	0.68	14.9	7.2	4.8					15.8	7.0	5.7							
Fri	7	51.2	M	0.36	15.6	8.1	0.8					16.0	7.0	4.3							
Sat	8	48.3	0.00	0.48																	
Sun	9	39.6	0.00	0.51																	
Mon	10	36.8	0.00	0.46	14.6	6.5	0.8					14.9	7.1	3.8							
Tue	11	37.5	0.00	0.47	14.5	7.3	2.4	44	173	120	472	15.2	7.1	4.8	1	4	5	20	1		
Wed	12	37.8	0.00	0.48	13.5	7.3	2.2	480	1918	380	1518	14.5	7.0	4.1	1	4	4	18			
Thu	13	45.6	0.00	0.49	12.9	7.4	2.5					15.0	7.0	4.0							
Fri	14	45.4	0.00	0.51	11.8	7.3	1.0					14.9	6.9	4.2							
Sat	15	37.6	T	0.61																	
Sun	16	34.8	0.69	1.04																	
Mon	17	43.5	0.80	0.81	11.4	7.0	6.5					12.0	6.8	4.8							
Tue	18	46.6	0.36	0.93	11.3	7.2	6.8	124	965	110	856	12.3	6.7	5.1	1	8	4	30	5		
Wed	19	45.2	0.28	0.82	12.1	6.4	4.7	87	585	110	752	12.8	5.9	4.6	1	7	4	25			
Thu	20	44.2	0.27	0.64	11.9	7.4	3.2					12.8	6.8	4.6							
Fri	21	44.1	0.19	0.69	12.5	7.5	1.9					13.7	6.8	5.2							
Sat	22	44.2	0.21	0.81																	
Sun	23	41.0	0.39	0.63																	
Mon	24	40.7	0.08	0.57	12.7	7.3	3.9					12.5	7.0	4.6							
Tue	25	46.1	0.00	0.57	11.9	7.4	1.9	253	1201	230	1091	13.0	6.9	4.3	4	19	0.5	2	3		
Wed	26	38.7	0.00	0.57	12.0	7.4	1.1	59	278	130	613	13.1	6.9	4.3	1	5	4	20			
Thu	27	40.4	T	0.55	11.8	7.5	1.5					12.9	6.9	4.2							
Fri	28	40.5	0.01	0.51	11.9	7.6	1.0					13.2	6.8	5.1							
Sat	29	39.7	0.00	0.52																	
Sun	30	38.3	0.00	0.53																	
Mon	31	38.0	0.00	0.51	11.8	7.3	2.3					13.0	7.0	4.4							
TOTAL			3.29	18.94																	
MAXIMUM		51.2	0.80	1.04	15.8	8.1	6.8	480	1918	380	1518	16.0	7.2	5.7	4	26	7	43	5	7	
MINIMUM		34.8	0.00	0.36	11.3	6.4	0.8	44	173	95	472	12.0	5.9	3.8	1	4	0.5	2	1	7	
AVERAGE*		42.7	0.1	0.61	12.9	7.4	2.9	176	855	178	873	13.9	7.1	4.5	2	10	4	22	2	7	
Water Quality Analysis		31	28	31	21	21	21	8	8	8	8	21	21	21	8	8	8	8	4	1	8

Ammonia	mg/L	Copper	ug/L	Toxicity
10/12/2016	4.3	10/5/2016	9.7	

85%	
B.O.D.	98
S.S.	99

Weekly TSS,BOD	Weekly Coliform			
Aver.	mg/l	lbs	mg/l	lbs
WEEK1	3	15	6	33
WEEK2	1	4	5	18
WEEK3	1	7	4	27
WEEK4	3	12	2	11
MAX	3	15	6	33

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

CONTACT NAME: Samantha Stoughtenger  
 MAILING ADDRESS: 2009 Radcliffe Road  
 Juneau, AK 99801

FACILITY: JUNEAU DOUGLAS WW TREATMENT FACILITY  
 LOCATION: 1540 Thane Rd  
 Juneau, AK 99801

PERMIT NUMBER: AK0023213

MONITORING PERIOD: 10/1/2016

TO 10/31/2016

OUTFALL / MONITORING POINT: 001

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.	*****	*****		*****	*****	16.0		0		
	Permit reqmt.	*****	*****		*****	*****	Report daily maximum	DEG.C		5X Weekly	Grab
Dissolved Oxygen  1 - Final Effluent 00300	Sample meas.	*****	*****		3.8	*****	5.7		0		
	Permit reqmt.	*****	*****		2.0 daily minimum	*****	17 daily maximum	mg/l		5X Weekly	Grab
Biochemical Oxygen Demand (BOD5)  1 - Final Effluent 00310	Sample meas.	22	43		*****	4	7		0		
	Permit reqmt.	690 monthly average	1,380 daily maximum	lbs/day	*****	30 monthly average	60 daily maximum	mg/l		Monthly	24-Hr Composite
Biochemical Oxygen Demand (BOD5)  G - Influent 00310	Sample meas.	873	*****		*****	178	*****		0		
	Permit reqmt.	report monthly average	*****	lbs/day	*****	report monthly average	*****	mg/l		Monthly	24-Hr Composite
Biochemical Oxygen Demand (BOD5)  W - See Comments 00310	Sample meas.	*****	33		*****	6	*****		0		
	Permit reqmt.	*****	1,035 weekly average	lbs/day	*****	45 weekly average	*****	mg/l		Monthly	24-Hr Composite

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  <b>GRIKO TEMPEL</b>  <b>SK. OPERATOR</b>  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  <b>907.586.0393</b>  AREA   NUMBER	DATE  <b>10/11/10</b>  Y   M   D
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# Alaska Department of Environmental Conservation Monthly Discharge Monitoring Report (DMR)

CONTACT NAME: Samantha Stoughtenger  
 MAILING ADDRESS: 2009 Radcliffe Road  
 Juneau, AK 99801

FACILITY: JUNEAU DOUGLAS WW TREATMENT FACILITY  
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 Juneau, AK 99801

PERMIT NUMBER: AK0023213

MONITORING PERIOD: 10/1/2016

TO 10/31/2016


OUTFALL / MONITORING POINT: 001

NO DISCHARGE:  

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
pH	Sample meas.	*****	*****		5.9	*****	7.2		1		
	1 - Final Effluent 00400 Permit reqmt.	*****	*****		6.5 minimum	*****	8.5 maximum	S.U.		5X Weekly	Grab
Total Suspended Solids	Sample meas.	10	26		*****	2	4		0		
	1 - Final Effluent 00530 Permit reqmt.	690 monthly average	1,380 daily maximum	lbs/day	*****	30 monthly average	60 daily maximum	mg/l		Monthly	24-Hr Composite
Total Suspended Solids	Sample meas.	855	*****		*****	176	*****		0		
	G - Influent 00530 Permit reqmt.	report monthly average	*****	lbs/day	*****	report monthly average	*****	mg/l		Monthly	24-Hr Composite
Total Suspended Solids	Sample meas.	*****	15		*****	3	*****		0		
	W - See Comments 00530 Permit reqmt.	*****	1,035 weekly average	lbs/day	*****	45 weekly average	*****	mg/l		Monthly	24-Hr Composite
Ammonia Nitrogen (as N)	Sample meas.	*****	*****		*****	4.3	4.3		0		
	1 - Final Effluent 00610 Permit reqmt.	*****	*****		*****	14 monthly average	30 daily maximum	mg/l		Monthly	24-Hr Composite

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
**GRIEGO TEMPEL**  
**SK. 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 ensure 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	16/11/10
AREA   NUMBER	Y   M   D

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 LOCATION: 1540 Thane Rd  
 Juneau, AK 99801

PERMIT NUMBER: AK0023213  
 OUTFALL / MONITORING POINT: 001

MONITORING PERIOD: 10/1/2016 TO 10/31/2016  
 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)  W - See Comments 00610	Sample meas.	*****	*****		*****	4.3	*****		0		
	Permit reqmt.	*****	*****		*****	21 weekly average	*****	mg/l		Monthly	24-Hr Composite
Copper Total Recoverable  1 - Final Effluent 01119	Sample meas.	*****	*****		*****	*****	9.7		0		
	Permit reqmt.	*****	*****		*****	*****	Report daily maximum	ug/l		Quarterly	24-Hr Composite
Flow  1 - Final Effluent 50050	Sample meas.	0.61	1.04		*****	*****	*****		0		
	Permit reqmt.	2.76 monthly average	6.0 daily maximum	MGD	*****	*****	*****			Continuous	Recorded
Enterococci  1 - Final Effluent 61211	Sample meas.	*****	*****		*****	*****	NA		NA		
	Permit reqmt.	*****	*****		*****	*****	Report daily maximum	cts/100 ml		See Permit Requirements	Grab
Fecal Coliform  1 - Final Effluent 74055	Sample meas.	*****	*****		*****	2	5		0		
	Permit reqmt.	*****	*****		*****	200 monthly geometric mean	800 daily maximum	cts/100 ml		Weekly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  GRIEKO TEMPEL  SK. 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 ensure 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  907. 586. 0393  AREA   NUMBER	DATE  16 / 11 / 10  Y   M   D
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 Juneau, AK 99801

PERMIT NUMBER: AK0023213  
 OUTFALL / MONITORING POINT: 001

MONITORING PERIOD: 10/1/2016 TO 10/31/2016  
 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.	*****	*****		*****	5	*****		0		
	Permit reqmt.	*****	*****		*****	400 weekly average	*****	cts/100 ml		Weekly	Grab
BOD5 Minimum % Removal  K - Percent Removal 81010	Sample meas.	*****	*****		98	*****	*****		0		
	Permit reqmt.	*****	*****		85 minimum percent removal	*****	*****	%		Monthly	Calculation
Total Suspended Solids Minimum % Removal  K - Percent Removal 81011	Sample meas.	*****	*****		99	*****	*****		0		
	Permit reqmt.	*****	*****		85 minimum percent removal	*****	*****	%		Monthly	Calculation

COMMENTS:  
 W = weekly average;

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  <b>GRIEKO TEMPEL</b> <b>SIC. OPERATOR</b>  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  <b>907.586.0393</b>  AREA   NUMBER	DATE  <b>16/11/10</b>  Y   M   D
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# Alaska Department of Environmental Conservation Monthly Discharge Monitoring Report (DMR)

CONTACT NAME: Mark Mow  
 MAILING ADDRESS: 155 S. Seward Street  
 Juneau, AK 99801  
 PERMIT NUMBER: AK0023213

FACILITY: JUNEAU DOUGLAS WW TREATMENT FACILITY  
 LOCATION: 1540 Thane Rd  
 Juneau, AK 99801  
 MONITORING PERIOD: 10/1/2016 TO 10/31/2016  
 MONITORING POINT: 004 (N-15.1) (R) Douglas NO DISCHARGE:  

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
Biochemical Oxygen Demand (BOD5)	Sample meas. 1 - Final Effluent 00310 R Permit reqmt.	Report monthly average	Report daily maximum	lbs/day	***** *****	Report monthly average	Report daily maximum	mg/l		When Discharging	Grab
Total Suspended Solids	Sample meas. 1 - Final Effluent 00530 R Permit reqmt.	Report monthly average	Report daily maximum	lbs/day	***** *****	Report monthly average	Report daily maximum	mg/l		When Discharging	Grab
Coliform, fecal MF, M-FC broth, 44.5 C	Sample meas. 1 - Final Effluent 31616 R Permit reqmt.	***** *****	***** *****		***** *****	Report monthly geometric mean	Report daily maximum	cts/100 ml		When Discharging	Grab
Flow	Sample meas. 1 - Final Effluent 50050 R Permit reqmt.	Report monthly average	Report daily maximum	MGD	***** *****	***** *****	***** *****			When Discharging	Recorded
Duration of Discharge	Sample meas. 1 - Final Effluent 81381 R Permit reqmt.	***** *****	report daily maximum	min/day	***** *****	***** *****	***** *****			When Discharging	Instantaneous Reading

COMMENTS:

Mail this report when completed to ADEC, Division of Water, 555 Cordova Street, Anchorage, AK 99501-2617  
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TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA   NUMBER	Y   M   D

Mark J. Mow  
907-990-2525    11/1/16



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

CONTACT NAME: Mark Mow  
 MAILING ADDRESS: 155 S. Seward Street  
 Juneau, AK 99801  
 PERMIT NUMBER: AK0023213


FACILITY: JUNEAU DOUGLAS WW TREATMENT FACILITY  
 LOCATION: 1540 Thane Rd  
 Juneau, AK 99801

MONITORING PERIOD: 10/1/2016 TO 10/31/2016  
 MONITORING POINT: 003 (N11.2) (Q) Sta C NO DISCHARGE:

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
Biochemical Oxygen Demand (BOD5)	Sample meas. 1 - Final Effluent 00310 Q Permit reqmt.	Report monthly average	Report daily maximum	lbs/day	***** *****	Report monthly average	Report daily maximum	mg/l		When Discharging	Grab
Total Suspended Solids	Sample meas. 1 - Final Effluent 00530 Q Permit reqmt.	Report monthly average	Report daily maximum	lbs/day	***** *****	Report monthly average	Report daily maximum	mg/l		When Discharging	Grab
Coliform, fecal MF, M-FC broth, 44.5 C	Sample meas. 1 - Final Effluent 31616 Q Permit reqmt.	***** *****	***** *****		***** *****	Report monthly geometric mean	Report daily maximum	cts/100 ml		When Discharging	Grab
Flow	Sample meas. 1 - Final Effluent 50050 Q Permit reqmt.	***** *****	Report daily maximum	MGD	***** *****	***** *****	***** *****			When Discharging	Recorded
Duration of Discharge	Sample meas. 1 - Final Effluent 81381 Q Permit reqmt.	***** *****	report daily maximum	min/day	***** *****	***** *****	***** *****			When Discharging	Recorded

COMMENTS:

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MARK J. MOW / SR. OPERATOR TYPED OR PRINTED	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	907-990-2525	10/1/16
		AREA   NUMBER	Y   M   D

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

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FACILITY: JUNEAU DOUGLAS WW TREATMENT FACILITY  
 LOCATION: 1540 Thane Rd  
 Juneau, AK 99801

MONITORING PERIOD: 10/1/2016 TO 10/31/2016  
 MONITORING POINT: 002 (N-11) (P) Sta AE NO DISCHARGE:

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
Biochemical Oxygen Demand (BOD5)	Sample meas. 1 - Final Effluent 00310 P Permit reqmt.	report monthly average	report daily maximum	lbs/day	***** *****	report monthly average	report daily maximum	mg/l		When Discharging	Grab
Total Suspended Solids	Sample meas. 1 - Final Effluent 00530 P Permit reqmt.	report monthly average	report daily maximum	lbs/day	***** *****	report monthly average	report maximum monthly average	mg/l		When Discharging	Grab
Coliform, fecal MF, M-FC broth, 44.5 C	Sample meas. 1 - Final Effluent 31616 P Permit reqmt.	***** *****	***** *****		***** *****	report monthly geometric mean	report daily maximum	cts/100 ml		When Discharging	Grab
Flow	Sample meas. 1 - Final Effluent 50050 P Permit reqmt.	***** *****	report daily maximum	MGD	***** *****	***** *****	***** *****			When Discharging	Recorded
Duration of Discharge	Sample meas. 1 - Final Effluent 81381 P Permit reqmt.	***** *****	Report daily maximum	min/day	***** *****	***** *****	***** *****			When Discharging	Recorded

COMMENTS:

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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  <i>MARK J. MOW / SR. OPERATOR</i>	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  <i>907-790-2525</i>	DATE  <i>11/1/16</i>
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  	AREA   NUMBER	Y   M   D





# Alaska Department of Environmental Conservation

Division of Water, Compliance and Enforcement Program

555 Cordova Street

Anchorage, Alaska 99501

Nationwide Toll Free: 1(877) 569-4114 Anchorage/International: (907) 269-4114

Fax: (907) 269-4604 E-mail address: [dec-wqreporting@alaska.gov](mailto:dec-wqreporting@alaska.gov)

## NONCOMPLIANCE NOTIFICATION

<b>GENERAL INFORMATION</b>		PERMIT# (if any): AK-0023213	
<b>Owner or Operator:</b> City and Borough of Juneau		<b>Facility Name:</b> Juneau Douglas WWTP	<b>Facility Location:</b> 1540 Thane Road, Juneau AK 99801
<b>Person Reporting:</b> Grieko Tempel		<b>Phone Numbers of Person Reporting:</b> 907-586-0393/907-723-7806	<b>Reported How? (e.g. by phone):</b> Called Noncompliance hot-line 907-269-4114
<b>Date/Time Event was Noticed:</b> October 19, 2016 at 0700 AM		<b>Date/Time Reported:</b> October 19, 2016 at 0825 AM	<b>Name of DEC Staff Contacted:</b> Called Noncompliance hot-line 907-269-4114
<b>VERBAL NOTIFICATION MUST BE MADE TO ADEC WITHIN 24 HOURS OF DISCOVERY OF NONCOMPLIANCE</b>			
<b>INCIDENT DETAILS (attach additional sheets, lab reports, and photos as necessary)</b>			
<b>Period of Noncompliance</b>	<b>Start Date/Time (exact):</b> October 19, 2016 at 0700 AM	<b>End Date/Time (exact):</b> October 19, 2016 at 0700 AM	
<b>If noncompliance has not been corrected, provide a statement regarding the anticipated time the noncompliance is expected to continue:</b> N/A.			
<b>Estimated Quantity involved (volume or weight):</b> 500 ml (sample volume).			
<b>Description of the noncompliance and its cause (be specific):</b> Suspect an influent shock load with a low pH entering the plant. Typical influent pH is 7.0 or higher.			
<b>Actions taken to reduce, eliminate, and prevent reoccurrence of noncompliance and Actual/Potential Impact on Environmental Health (describe in detail) (e.g. Supplied drinking water to nearby well owners and informed well owners not to drink from wells until further notice).</b> No action taken. MLSS is in the normal range, daily average effluent turbidity is approximately 3 NTU.			
<b>Permit Condition Deviation (Identify each permit condition exceeded during the event.)</b>			
<b>Parameter (e.g. BOD pH)</b>	<b>Permit Limit</b>	<b>Exceedance (sample result)</b>	<b>Sample Date</b>
pH	6.5-8.5	5.9	October 19, 2016
<b>Corrective Actions (Attach a description of corrective actions taken to restore the system to normal operation and to minimize or eliminate chances of recurrence.)</b> None.			
<b>Environmental Damage: (if yes, provide details below)</b>		<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown
<b>Actual /Potential Impact on Environment/Public Health (describe in detail)</b> Unknown.			
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.			
<b>Name:</b> Grieko Tempel	<b>Title:</b> Senior Operator	<b>Signature:</b>	<b>Date:</b> 10-19-16
<b>FORMS MUST BE SENT TO ADEC WITHIN FIVE DAYS OF BECOMING AWARE OF THE EVENT.</b>			