CONTACT NAME: Samantha Stoughtenger FACILITY: Salmon Creek Water Plant Backwash

MAILING ADDRESS: 2009 Radcliffe Rd

Juneau, AK 99801

MONITORING PERIOD: 3/1/2017 LOCATION: 3 mile Egan Drive Juneau, AK 99801

OI

3/31/2017

OUTFALL / MONITORING POINT: 001A Reverse Flow/Air Scrub PERMIT NUMBER: AKG380005

Iron, Total Recoverable Arsenic, Total Recoverable Magnesium, total recoverable Turbidity Temperature (C) Parameter 1 - Final Effluent 00010 00980 00978 00921 00070 Permit reqmt. Permit Sample Sample Permit Sample Sample Permit Sample reqmt. Permit reqmt. reqmt. reqmt meas. meas. meas. meas. ***** **** ***** ***** **** Average ***** ***** ***** ***** Quantity or Loading Maximum ***** ***** ***** ***** ***** ***** ***** ***** **** Units Minimum ***** ***** ***** ***** ***** ***** **** ***** ***** **Quality or Concentration** instantaneous instantaneous instantaneous instantaneous instantaneous Average Report Report Report Report Report ND 0.5 \vdash daily maximum daily maximum daily maximum daily maximum daily maximum Maximum Report Report Report Report 0.5 ND 10 \vdash Units DEG.C l/gu l/gu l/gu O.F.N Ex. 0 0 0 0 0 NO DISCHARGE: Frequency of 2X Annually 2X Annually Monthly **Analysis** Monthly Monthly 0 \vdash 0 \vdash -Sample Type Grab Grab Grab Grab Grab

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are significant penaltic possibility of fine and i	prepared under my directions of the information submit who manage the syste gathering the information and halief knowledge and halief	certify under penalty of

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 es for submitting false information, including the tion, the information submitted is, to the best of my em, or those persons directly responsible for tted. Based on my inquiry of the person or persons imprisonment for knowing violations true, accurate, and complete. I am aware that ther

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT TELEPHONE AREA | NUMBER

DATE

CONTACT NAME: Samantha Stoughtenger Alaska Department of Environmental Conservation Monthly Discharge Monitoring Report (DMR)

FACILITY: Salmon Creek Water Plant Backwash

MAILING ADDRESS: 2009 Radcliffe Rd Juneau, AK 99801

LOCATION: 3 mile Egan Drive Juneau, AK 99801

PERMIT NUMBER: AKG380005

OUTFALL / MONITORING POINT: 001A Reverse Flow/Air Scrub

MONITORING PERIOD: 3/1/2017 TO NO DISCHARGE: 3/31/2017

Parameter		Quantity of	Quantity or Loading	Units	Quality o	ity or Concentration	ition	Units	No.	Frequency of	Sample Type
		Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	
Zinc Total Recoverable	Sample	****	* * * * *		* * * *				2	>	
	meas.								_	c	
1 - Final Effluent 01094	Permit reqmt.	**	**************************************		*****	Report instantaneous	Report daily maximum	ug/l		2X Annually	Grab
Lead Total Recoverable	Sample meas.	* * * * *	* * * * *		* * * * *				0	0	
1 - Final Effluent 01114	Permit reqmt	* * * *	* * * *		** ** *	Report instantaneous	Report daily maximum	ug/l		2X Annually	Grab
Copper Total Recoverable	Sample meas.	* * * * *	* * *		* * * * *				0	0	
1 - Final Effluent 01119	Permit reqmt.	****	****		**	Report instantaneous	Report daily maximum	ug/i		2X Annually	Grab
Manganese, Total Recoverable	Sample meas.	* * * * *	* * * *		* * * * *				0	0	
1 - Final Effluent 11123	Permit reqmt.	****	* * * *		***	Report instantaneous	Report daily maximum	ug/l		2X Annually	Grab
Chloride	Sample meas.	* * * * *	* * * * *		* * * * *				0	0	
1 - Final Effluent 46225	Permit reqmt	** ** ** **	*****		*****	Report instantaneous	Report daily maximum	mg/l		2X Annually	Grab
					5						

TYPED OR PRINTED are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there	the information submitted. Based on my inquiry of the persons or persons who manage the system, or those persons directly responsible for	prepared under my direction or supervision in accordance with a system designed to assure that qualified on accordance with a system.	NAME/TITLE PRINCIPAL EXECUTIVE OFFICER I certify under penalty of law that this document and all attachments were
OFFICER OR AU	Jis, to the best of my SIGNATURE OF PRINCIPAL EXECUTION	the person or persons responsible for	rdance with a system	all attachments were
THORIZED AGENT	-		-	
ED AGENT AREA NUMBER	VE	586-0877		TELEPHONE

CONTACT NAME: Samantha Stoughtenger

MAILING ADDRESS: 2009 Radcliffe Rd

Juneau, AK 99801

FACILITY: Salmon Creek Water Plant Backwash

LOCATION: 3 mile Egan Drive Juneau, AK 99801

PERMIT NUMBER: AKG380005

OUTFALL / MONITORING POINT: 001A Reverse Flow/Air Scrub

MONITORING PERIOD: 3/1/2017

TO NO DISCHARGE: 3/31/2017

Type

COLLEGE / AND COLLEGE COLLEGE COLLEGE COMPANY COLLEGE	OO EXT	/C13C1104V/ / / / / / / / / /	5							To broatmings.	
Parameter		Quantity or Loading	r Loading	Units	Quality	ity or Concentration	ition	Units	No.	No. Frequency of Sample Type	Sample Type
		Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	
Flow	Sample meas.	0.031	0.043		* * * * *	* * * * *	* * * * *		0	Continuous	
1 - Final Effluent 50050	Effluent Permit 50050 reqmt.	Report Report monthly average daily maximum	Report daily maximum	MGD	* * * * *	* * * * *	**			Continuous	Recorded
Sulfate	Sample meas.	* * * * *	* * * *		* * * *				0	0	
1 - Final Effluent 81020	Effluent Permit 81020 reqmt.	* * * *	**		**	Report instantaneous	Report daily maximum	mg/l		2X Annually	Grab

COMMENTS:

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.

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certify under penalty of law that this document and all attachments were he information submitted. Based on my inquiry of the person or persons nowledge and belief, true, accurate, and complete. I am aware that there no manage the system, or those persons directly responsible for repared under my direction or supervision in accordance with a system esigned to assure that qualified personnel properly gather and evaluate thering the information, the information submitted is, to the best of my

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT TELEPHONE AREA | NUMBER YIMID DATE

CONTACT NAME: Samantha Stoughtenger FACILITY: Salmon Creek Water Plant Backwash

MAILING ADDRESS: 2009 Radcliffe Rd

Juneau, AK 99801

Juneau, AK 99801

LOCATION: 3 mile Egan Drive

)		1					
Grab	2X Annually		ug/l	10 daily maximum	Report instantaneous	* * * * *		***	i	Permit reqmt	1 - Final Effluent 00978
	0	0				* * * *		* * * * *	* * * * *	Sample meas.	Arsenic, Total Recoverable
Grab	2X Annually		ug/l	Report daily maximum	Report instantaneous	* * * * *		* * * * *	** ** **	Permit reqmt	1 - Final Effluent 00921
	0	0				* * * * *		* * * * *	***	Sample meas.	Magnesium, total recoverable
Grab	Monthly		mg/l	Report daily maximum	Report instantaneous	* * * *		*****	****	Permit reqmt	1 - Final Effluent 00610
	1	0		0.2	0.2	* * * * *		* * * * * *	* * * *	Sample meas.	Ammonia Nitrogen (as N)
Grab	2X Annually		ppt	Report daily maximum	Report instantaneous	**		****	* * * * *	Permit reqmt.	1 - Final Effluent 00480
	0	0				* * * *		* * * * *	* * * *	Sample meas.	Salinity
Grab	Monthly		S.U.	8.5 instantaneous maximum	Report instantaneous	6.5 instantaneous minimum		** ** ** *	* * * *	Permit reqmt.	1 - Final Effluent 00400
	1	0		6.80	6.80	6.80		* * * * *	* * * *	Sample meas.	РН
Sample Type	Frequency of Analysis	No. Ex.	Units	ation Maximum	lity or Concentration Average M	Quality Minimum	Units	Quantity or Loading verage Maximum	Quantity of Average		Parameter
	3/31/2017 NO DISCHARGE:	T0:		3/1/2017	MONITORING PERIOD: 3/1/2017	MONIT		ning	าanced Flux Clea	AKG3800 001B Enh	PERMIT NUMBER: AKG380005 OUTFALL / MONITORING POINT: 001B Enhanced Flux Cleaning
			-								

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knowledge and belief, true, accurate, and complete. I am aware that then gathering the information, the information submitted is, to the best of my who manage the system, or those persons directly responsible for the information submitted. Based on my inquiry of the person or persons prepared under my direction or supervision in accordance with a system certify under penalty of law that this document and all attachments were designed to assure that qualified personnel properly gather and evaluate

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AREA | NUMBER

YIMID

TELEPHONE

DATE

CONTACT NAME: Samantha Stoughtenger FACILITY: Salmon Creek Water Plant Backwash

MAILING ADDRESS: 2009 Radcliffe Rd

Juneau, AK 99801

LOCATION: 3 mile Egan Drive Juneau, AK 99801

PERMIT NUMBER: AKG380005

OUTFALL / MONITORING POINT: 001B Enhanced Flux Cleaning

TO: 3/31/2017

MONITORING PERIOD: 3/1/2017

OUTFALL / MONITORING FOINT: OUTB Enhanced Flux Cleaning	OOIB END	anced Flux Clea	ning						7	NO DISCHARGE:	
Parameter		Quantity or Loading	or Loading	Units	Quality	ity or Concentration	ition	Units	No.	Frequency of	Sample Type
		Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	1
Iron, Total Recoverable	Sample meas.	* * * * *	* * *		* * * *				0	0	
1 - Final Effluent 00980	Permit reqmt.	* * * * *	* * * *		* * * *	Report instantaneous	Report daily maximum	ug/l		2X Annually	Grab
Zinc Total Recoverable	Sample meas.	* * * *	* * * * *		* * * *				0	0	
1 - Final Effluent 01094	Permit reqmt.	***	* * * *		******	Report instantaneous	Report daily maximum	ug/l		2X Annually	Grab
Lead Total Recoverable	Sample meas.	* * * *	* * * * *		* * * * *				0	0	
1 - Final Effluent 01114	Permit reqmt.	*	**		* * * * *	Report instantaneous	Report daily maximum	ug/l		2X Annually	Grab
Copper Total Recoverable	Sample meas.	* * * * *	* * * *		* * * * *				0	0	
1 - Final Effluent 01119	Permit reqmt.	**	** ** **		****	Report instantaneous	Report daily maximum	ug/l		2X Annually	Grab
Manganese, Total Recoverable	Sample meas.	* * * *	* * * *		* * * *				0	0	
1 - Final Effluent 11123	Permit reqmt.	** ** ** **	* * * * *		* * * * *	Report instantaneous	Report daily maximum	ug/l		2X Annually	Grab

YIMID	AREA NUMBER	OFFICER OR AUTHORIZED AGENT	are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TYPED OR PRINTED
11/14/11	526 877	SIGNATURE OF PRINCIPAL EXECUTIVE	ate ate	Love Mildy
DATE	TELEPHONE	1	prepared under my direction or supervision in accordance with a system	AME/IIILE PRINCIPAL EXECUTIVE OFFICER

CONTACT NAME: Samantha Stoughtenger

MAILING ADDRESS: 2009 Radcliffe Rd

Juneau, AK 99801

MONITORING PERIOD: 3/1/2017

LOCATION: 3 mile Egan Drive

Juneau, AK 99801

FACILITY: Salmon Creek Water Plant Backwash

TO:

3/31/2017

OUTFALL / MONITORING POINT: 001B Enhanced Flux Cleaning PERMIT NUMBER: AKG380005

NO DISCHARGE:

Parameter		Quantity or Loading	r Loading	Units	Quali	Quality or Concentration	tion	Units	No.	Frequency of Sample Type	Sample Type
		Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	
Chloride	Sample meas.	* * * * *	* * * * *		* * * * *				0	0	
1 - Final Effluent 46225	ffluent Permit 46225 reqmt.	** ** ** **	** ** ** *		**	Report instantaneous	Report daily maximum	mg/l		2X Annually	Grab
Total Residual Chlorine	Sample meas.	* * * *	* * * * *		* * * * *	0.02	0.02		0	1	
1 - Final Effluent Permit 50060 reqmt.	:ffluent Permit 50060 reqmt	* * * * *	** ** ** ** **		*	0.0075 Report instantaneous	Report daily maximum	mg/l		Monthly	Grab
Sulfate	Sample meas.	* * * *	* * * * *		* * * * *		ı		0	0	
1 - Final Effluent Permit 81020 reqmt.	ffluent Permit 81020 reqmt.	* * * * *	* * * *		* * * * *	Report instantaneous	Report daily maximum	mg/l		2X Annually	Grab

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT TELEPHONE AREA | NUMBER

YIMID DATE

CONTACT NAME: Samantha Stoughtenger FACILITY: Salmon Creek Water Plant Backwash

MAILING ADDRESS: 2009 Radcliffe Rd Juneau, AK 99801 LOCATION: 3 mile Egan Drive

PERMIT NUMBER: AKG380005

MONITORING PERIOD: 3/1/2017

Juneau, AK 99801

3/31/2017

TO:

		i					0/ =/ =0=;			1107/10/1	
OUTFALL / MONITORING POINT: 001C Chemical Clean in Place	001C Che	mical Clean in P	lace						71	NO DISCHARGE:	
Parameter		Quantity or Loading	T Loading	Units	Quali	Quality or Concentration	ition	Units	No.	Frequency of	Sample Type
		Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	
рН	Sample	* * * * * * * * * * * * * * * * * * *	* * * * *						0	0	
	meas.										
1 - Final Effluent 00400	Permit	****	**		6.5 instantaneous	Report instantaneous	8.5 instantaneous	S.U.		Annually	Grab
00100	Turha.				minimum		maximum				
Salinity	Sample meas.	* * * * *	* * * * *		* * * * *				0	0	
1 - Final Effluent 00480	Permit reqmt.	** ** ** *	**		* * * *	Report instantaneous	Report daily maximum	ppt		Annually	Grab
Ammonia Nitrogen (as N)	Sample meas.	* * * *	* * * * *		* * * *				0	0	
1 - Final Effluent 00610	Permit reqmt.	* * * * * * *	**		***	Report instantaneous	Report daily maximum	mg/l		Annually	Grab
Magnesium, total recoverable	Sample meas.	* * * *	* * * *		* * * * *				0	0	
1 - Final Effluent 00921	Permit reqmt.	* * * * *	**		* * * * *	Report instantaneous	Report daily maximum	ug/I		Annually	Grab
Arsenic, Total Recoverable	Sample meas.	* * * *	* * * * *		* * * * *				0	0	
1 - Final Effluent 00978	Permit reqmt.	* * * * *	*		**	Report instantaneous	10 daily maximum	ug/l		Annually	Grab
					7						

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ossibility of fine and imprisonment for knowing violations

mowledge and belief, true, accurate, and complete. I am aware that there gathering the information, the information submitted is, to the best of my who manage the system, or those persons directly responsible for the information submitted. Based on my inquiry of the person or persons designed to assure that qualified personnel properly gather and evaluate prepared under my direction or supervision in accordance with a system certify under penalty of law that this document and all attachments were

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AREA | NUMBER

Y M I D

TELEPHONE

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CONTACT NAME: Samantha Stoughtenger FACILITY: Salmon Creek Water Plant Backwash

MAILING ADDRESS: 2009 Radcliffe Rd Juneau, AK 99801

LOCATION: 3 mile Egan Drive Juneau, AK 99801

PERMIT NUMBER: AKG380005

MONITORING PERIOD: 3/1/2017

3/31/2017

Manganese, Total Recoverable Copper Total Recoverable Lead Total Recoverable Zinc Total Recoverable Iron, Total Recoverable Parameter OUTFALL / MONITORING POINT: 001C Chemical Clean in Place 1 - Final Effluent 1 - Final Effluent 1 - Final Effluent Final Effluent 1 - Final Effluent 01094 11123 01119 00980 01114 reqmt. Permit Sample Sample Permit Permit Permit Permit reqmt. Sample reqmt. Sample reqmt. Sample reqmt. meas. meas. meas. meas. ***** ***** ***** ***** ***** Average ***** ***** **** **Quantity or Loading** Maximum ***** ***** ***** ***** ***** ***** **** ***** Units Minimum ***** ***** ***** ***** ***** **** ***** ***** **Quality or Concentration** instantaneous instantaneous instantaneous instantaneous instantaneous Average Report Report Report Report Report daily maximum daily maximum daily maximum daily maximum daily maximum Maximum Report Report Report Report Report Units l/gu l/gu l/gu l/gu l/gu TO: Ex. 0 0 0 0 0 NO DISCHARGE: Frequency of Analysis Annually Annually Annually Annually Annually 0 0 0 0 0 Sample Type Grab Grab Grab Grab Grab

	m
AREA NUMBER	586-0877
AIWID	17/4/11

TELEPHONE

DATE

SIGNATURE OF PRINCIPAL EXECUTIV

OFFICER OR AUTHORIZED AGENT

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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MAILING ADDRESS: 2009 Radcliffe Rd Juneau, AK 99801

LOCATION: 3 mile Egan Drive Juneau, AK 99801

OHTEALL / MONITORING DOINT: PERMIT NUMBER: AKG380005

MONITORING PERIOD: 3/1/2017

T0: 3/31/2017

OUTFALL / MONITURING POINT: 001C Chemical Clean in Place	001C Che	mical Clean in P	lace						71	NO DISCHARGE:	
Parameter		Quantity or Loading	r Loading	Units	Quality	ity or Concentration	ation	Units	No.	Frequency of	Sample Type
		Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	
Chloride	Sample meas.	* * * *	* * * * *		* * * * *				0	0	
1 - Final Effluent Permit 46225 reqmt.	Permit reqmt	**	**		**	Report instantaneous	Report daily maximum	mg/l		Annually	Grab
Total Residual Chlorine	Sample meas.	* * * * *	* * * * *		* * * * *				0	0	
1 - Final Effluent Permit 50060 reqmt.	Permit reqmt.	**	**		* ** * *	0.0075 Report instantaneous	Report daily maximum	mg/l		Annually	Grab
Sulfate	Sample meas.	* * * * *	* * * *		* * * *				0	0	
1 - Final Effluent Permit 81020 reqmt.	Permit reqmt.	* * * * *	* * * *		* ** * *	Report instantaneous	Report daily maximum	mg/l		Annually	Grab

COMMENTS:

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OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE	
AREA NUMBER	480 382	TELEPHONE
YIMID	1/4/21	DATE