

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
 OUTFALL / MONITORING POINT: 001

MONITORING PERIOD: 5/1/2017

TO 5/31/2017
 NO DISCHARGE:

Parameter	Quantity or Loading	Maximum	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
				Minimum	Average				
Temperature (C)	Sample meas.	*****	*****	*****	*****	*****	0	5X Weekly	Grab
	1 - Final Effluent 00010	*****	*****	*****	*****	Report daily maximum	16.4		
Dissolved Oxygen	Sample meas.	*****	*****	3.3	*****	6.6	0	5X Weekly	Grab
	1 - Final Effluent 00300	*****	*****	2.0 daily minimum	*****	17 daily maximum	mg/l		
Biochemical Oxygen Demand (BOD5)	Sample meas.	90	287	*****	12	37	0	Monthly	24-Hr Composite
	1 - Final Effluent 00310	690 monthly average	1,380 daily maximum	*****	30 monthly average	60 daily maximum	mg/l		
Biochemical Oxygen Demand (BOD5)	Sample meas.	2583	*****	*****	360	*****	0	Monthly	24-Hr Composite
	G - Influent 00310	report monthly average	*****	*****	report monthly average	*****	mg/l		
Biochemical Oxygen Demand (BOD5)	Sample meas.	*****	170	*****	22	*****	0	Monthly	24-Hr Composite
	W - See Comments 00310	*****	1,035 weekly average	*****	45 weekly average	*****	mg/l		

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Jim Westcott
Sara Plummer
 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]
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

907 586 0395
 AREA | NUMBER

DATE

17/6/13
 Y | M | D

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MONITORING PERIOD: 5/1/2017

TO 5/31/2017

NO DISCHARGE:

Parameter	Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
	Average	Maximum		Minimum	Average				
pH	Sample meas.	*****	*****	7.1	7.6	S.U.	0	5X Weekly	Grab
	Permit reqmt.	*****	*****	6.5 minimum	8.5 maximum				
Total Suspended Solids	Sample meas.	67	145	*****	9	14	0		
	Permit reqmt.	690 monthly average	1,380 daily maximum	*****	30 monthly average	60 daily maximum		Monthly	24-Hr Composite
Total Suspended Solids	Sample meas.	1931	*****	*****	269	*****	0		
	Permit reqmt.	report monthly average	*****	*****	report monthly average	*****		Monthly	24-Hr Composite
Total Suspended Solids	Sample meas.	*****	109	*****	12	*****	0		
	Permit reqmt.	*****	1,035 weekly average	*****	45 weekly average	*****		Monthly	24-Hr Composite
Ammonia Nitrogen (as N)	Sample meas.	*****	*****	*****	11	11	0		
	Permit reqmt.	*****	*****	*****	14 monthly average	30 daily maximum		Monthly	24-Hr Composite

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Jim Westcott
 Senior Operator

TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

[Signature]

TELEPHONE

907. 586. 0555

DATE

17/6/15

AREA | NUMBER

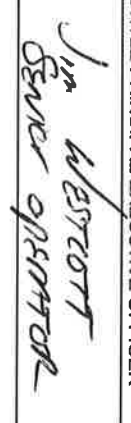

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 MONITORING POINT: 001
 MONITORING PERIOD: 5/1/2017 TO 5/31/2017
 NO DISCHARGE:

Parameter	Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
			Average	Maximum				
Ammonia Nitrogen (as N)	Sample meas.	*****	*****	*****	*****	0	Monthly	24-Hr Composite
	Permit reqmt.	*****	*****	*****	*****	0		
Copper Total Recoverable	Sample meas.	*****	*****	*****	*****	0	Quarterly	24-Hr Composite
	Permit reqmt.	*****	*****	*****	*****	0		
Flow	Sample meas.	0.83	1.6	*****	*****	0	Continuous	Recorded
	Permit reqmt.	2.76 monthly average	6.0 daily maximum	*****	*****	0		
Enterococci	Sample meas.	*****	*****	*****	*****	0	See Permit Requirements	Grab
	Permit reqmt.	*****	*****	*****	*****	0		
Fecal Coliform	Sample meas.	*****	*****	*****	*****	0	Weekly	Grab
	Permit reqmt.	*****	*****	*****	*****	0		

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <div style="text-align: center;">  Jim Westcott <i>Senior Operator</i> </div>	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.
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <div style="text-align: center;">  Jim Westcott </div>
TELEPHONE 907.586.6995	DATE 17/6/15
AREA NUMBER	Y M D

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 Juneau, AK 99801

PERMIT NUMBER: AK0023213 MONITORING PERIOD: 5/1/2017 TO 5/31/2017
 OUTFALL / MONITORING POINT: 001 NO DISCHARGE:

Parameter	Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
			Minimum	Maximum				
Fecal Coliform	Sample meas.	*****	*****	*****	74	0	Weekly	Grab
	Permit reqmt.	*****	*****	400	*****	0		
BOD5 Minimum % Removal	Sample meas.	*****	97	*****	*****	0	Monthly	Calculation
	Permit reqmt.	*****	85	*****	*****	0		
Total Suspended Solids Minimum % Removal	Sample meas.	*****	97	*****	*****	0	Monthly	Calculation
	Permit reqmt.	*****	85	*****	*****	0		

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	TELEPHONE	DATE
<i>Jim Westcott</i>	907.586.0595	17/6/15
TYPED OR PRINTED	AREA NUMBER	Y M D
<i>SEAN GLENN</i>		

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

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: 5/1/2017 TO 5/31/2017
 MONITORING POINT: 003 (M11.2) (Q) Sta C

NO DISCHARGE:

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

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Mark Mow/Wastewater Collections SR. Operator			907 586-0393	5/31/17
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA/NUMBER

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 LOCATION: 1540 Thane Rd
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MONITORING PERIOD: 5/1/2017 TO 5/31/2017
 MONITORING POINT: 004 (M15.1) R DOUGLAS NO DISCHARGE:

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

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Mark Mow/Wastewater Collections SR. Operator								907 586-0393	5/31/17
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 MONITORING POINT: 002 (N-11) (P) STA AE NO DISCHARGE:

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

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TYPED OR PRINTED	907 586-0393	5/31/17	