FACILITY: Salmon Creek Water Plant Backwash

LOCATION: 3 mile Egan Drive

Juneau, AK 99801

PERMIT NUMBER: AKG380005

MAILING ADDRESS: 155 S. Seward St

Juneau, AK 99801

CONTACT NAME: Stephen A. Locks

NO DISCHARGE: 6/30/2017

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

MONITORING PERIOD: 6/1/2017 TO

Parameter Arsenic, Total Recoverable Iron, Total Recoverable Magnesium, total recoverable Temperature (C) 1 - Final Effluent 00070 00980 00921 00978 00010 Permit Permit Permit reqmt. Sample Permit reqmt. Sample Permit Sample reqmt. Sample reqmt. Sample meas. meas. meas. meas. meas. Average \*\*\*\*\* \*\*\*\*\* \*\*\*\*\* \*\*\*\*\* \*\*\*\* \*\*\*\* **Quantity or Loading** Maximum \*\*\*\*\* \*\*\*\*\* \*\*\*\*\* \*\*\*\* \*\*\*\*\* \*\*\*\* \*\*\*\* \*\*\*\* \*\*\*\* Units Minimum \*\*\*\* \*\*\*\*\* \*\*\*\*\* \*\*\*\* \*\*\*\* \*\*\*\*\* **Quality or Concentration** instantaneous instantaneous instantaneous instantaneous instantaneous Average 5800 Report 2200 Report Report 25.3 7.3 Report Report 10 daily maximum daily maximum daily maximum daily maximum daily maximum Maximum 5800 Report 2200 Report Report Report 25.3 7.3 10 10 Units DEG.C l/gu l/gu l/gu OLN Ex. 0 0 0 0 0 Frequency of 2X Annually 2X Annually Analysis Monthly Monthly Monthly  $\vdash$  $\vdash$  $\vdash$ Sample Type Grab Grab Grab Grab Grab

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
_	SIGNATURE OF PRINCIPAL EXECUTIVE	gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there	Jan Land
907-321-263	N	prepared under my direction of 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	and lank
TELEPHONE	•	I certify under penalty of law that this document and all attachments were	NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

1	TIVE		ī
AREA   NUMBER		907-321-763	TELEPHONE
AIWID		7-10-17	DATE

MAILING ADDRESS: 155 S. Seward St CONTACT NAME: Stephen A. Locks FACILITY: Salmon Creek Water Plant Backwash

LOCATION: 3 mile Egan Drive Juneau, AK 99801

PERMIT NUMBER: AKG380005

Juneau, AK 99801

OTITEATT / MONITORING POINT: OOLA Reverse Elow/Air Scrub

> MONITORING PERIOD: 6/1/2017 To 6/30/2017

OUTFALL / MONITORING POINT: 001A Reverse Flow/Air Scrub	001A Rev	erse Flow/Air Sc	duri						7	NO DISCHARGE:	
Parameter		Quantity or Loading	r Loading	Units	Quality	ity or Concentration	tion	Units	No.	Frequency of	Sample Type
		Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	
Zinc Total Recoverable	Sample meas.	* * * * *	* * * * *		* * * *	36	36		0	ь	
1 - Final Effluent 01094	Permit reqmt.	* * * * *	**** ** **		* * * * * * * * *	Report instantaneous	Report daily maximum	ug/l		2X Annually	Grab
Lead Total Recoverable	Sample meas.	* * * *	* * * * *		****	1.8	1.8		0	1	
1 - Final Effluent Permit 01114 reqmt.	Permit reqmt.	**	****		****	Report instantaneous	Report daily maximum	ug/l		2X Annually	Grab
Copper Total Recoverable	Sample meas.	* * * * *	* * * * *		* * * *	13	13		0	ב	
1 - Final Effluent 01119	Permit reqmt.	* * * *	* * * * * * * * * * * * * * * * * * *		* * * * * * *	Report instantaneous	Report daily maximum	ug/l		2X Annually	Grab
Manganese, Total Recoverable	Sample meas.	* * * *	* * * *		****	180	180		0	1	
1 - Final Effluent Permit 11123 reqmt.	Permit reqmt.	*****	**		******	Report instantaneous	Report daily maximum	ug/l		2X Annually	Grab
Chloride	Sample meas.	* * * *	* * * * *		* * * * *	11	11		0	ь	
1 - Final Effluent 46225	Permit reqmt.	** ** ** *	* * * *		* * * * *	Report instantaneous	Report daily maximum	mg/l		2X Annually	Grab

TYPED OR PRINTED are si	ster feeled the interior	NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
are significa possibility o	prepared undesigned to the informat who manage gathering the knowledge is	I certify unde

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 property gather and evaluate the information, the information submitted is, to the best of my and belief, true, accurate, and complete. I am aware that there cant penalties for submitting false information, including the ge the system, or those persons directly responsible for ition submitted. Based on my inquiry of the person or persons of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIV	

OFFICER OR AUTHORIZED AGENT	IGNATURE OF PRINCIPAL EXECUTIVE	
AREA   NUMBER	907-521-7562 7-10-17	TELEPHONE
Y   M   D	7-10-17	DATE

MAILING ADDRESS: 155 S. Seward St CONTACT NAME: Stephen A. Locks Juneau, AK 99801 LOCATION: 3 mile Egan Drive FACILITY: Salmon Creek Water Plant Backwash Juneau, AK 99801

PERMIT NUMBER: AKG380005

MONITORING PERIOD: 6/1/2017

To NO DISCHARGE: 6/30/2017

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

			1							To programmer L	
Parameter		Quantity or Loading	r Loading	Units	Quality o	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	0.044		* * * *	* * * * *	* * * *		0	Continuous	
1 - Final Effluent Permit 50050 reqmt.	ffluent Permit 50050 reqmt.	Report monthly average	Report daily maximum	MGD	* * * * *	* * * *	***			Continuous	Recorded
Sulfate	Sample meas.	* * * * *	* * * * *		* * * *	26	26		0	1	
1 - Final Effluent Permit 81020 reqmt.	ffluent Permit 81020 regmt	*****	****		*	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.

	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
	201-821.284 7-	SIGNATURE OF PRINCIPAL EXECUTIVE	prepared under my direction of 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, thue, accurate, and complete. I am aware that there	Shoc heeks
_	TELEPHONE	<b>S</b>	I certify under penalty of law that this document and all attachments were	NAME/TITLE PRINCIPAL EXECUTIVE OFFICER



CONTACT NAME: Stephen A. Locks MAILING ADDRESS: 155 S. Seward St Juneau, AK 99801 LOCATION: 3 mile Egan Drive FACILITY: Salmon Creek Water Plant Backwash Juneau, AK 99801

PERMIT NUMBER: AKG380005

MONITORING PERIOD: 6/1/2017

T0: 6/30/2017 NO DISCHARGE:

OUTFALL / MONITORING POINT: 001B Enhanced Flux Cleaning

Parameter		Quantity o	Quantity or Loading	Units	Qual	Quality or Concentration	ition	Units	No.	Frequency of	Sample Type
		Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	
рН	Sample	***	****		6 97	6 07	6 97		^	1	
	meas.				0.07	0.07	0.07		(	F	
1 - Final Effluent	Permit	****	***		6.5	Report	. 8.5	S.U.		Monthly	Grab
00400					instantaneous minimum	instantaneous	instantaneous maximum				
Salinity	Sample meas.	****	* * * *		* * * *	37.8	37.8		0	1	
1 7:50 750	т	***	***		***	Popol	Papar	200		2V Applially	624
1 - Final Ettiuent 00480	Permit reqmt.					instantaneous	daily maximum	יטטר		2A Ailliudily	GIAD
Ammonia Nitrogen (as N)	Sample meas.	* * * *	* * * *		* * * * *	0.29	0.29		0	Ľ	
1 - Final Effluent 00610	Permit reqmt.	****	* * * *		****	Report instantaneous	Report daily maximum	mg/l		Monthly	Grab
Magnesium, total recoverable	Sample meas.	* * * *	* * * *		* * * * *	980	086		0	1	
1 - Final Effluent 00921	Permit reqmt.	** **	*****		***	Report instantaneous	Report daily maximum	ug/I		2X Annually	Grab
Arsenic, Total Recoverable	Sample meas.	* * * *	* * *		* * * * *	13	13		0	1	
1 - Final Effluent 00978	Permit reqmt.	******	**		****	Report instantaneous	10 daily maximum	ug/I		2X Annually	Grab

YIMID	AREA   NUMBER	OFFICER OR AUTHORIZED AGENT	are significant penalties for submitting laise information, including the possibility of fine and imprisonment for knowing violations.	TYPED OR PRINTED
		SIGNATURE OF PRINCIPAL EXECUTIVE	gathering the information, the information submitted is, to the best of my	7.0
7-10-0	907-321-266- 7-10-0	1	who manage the system, or those persons directly responsible for	Charles Contra
		1	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	
DATE	TELEPHONE	2000	I certify under penalty of law that this document and all attachments were	NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

MAILING ADDRESS: 155 S. Seward St CONTACT NAME: Stephen A. Locks Juneau, AK 99801 LOCATION: 3 mile Egan Drive FACILITY: Salmon Creek Water Plant Backwash

Juneau, AK 99801

PERMIT NUMBER: AKG380005

OUTFALL / MONITORING POINT: 001B Enhanced Flux Cleaning

MONITORING PERIOD: 6/1/2017

T0: NO DISCHARGE: 6/30/2017

Manganese, Total Recoverable Parameter Copper Total Recoverable Lead Total Recoverable Zinc Total Recoverable Iron, Total Recoverable 1 - Final Effluent 1 - Final Effluent Permit 1 - Final Effluent 1 - Final Effluent 1 - Final Effluent 01119 01114 01094 11123 00980 Permit reqmt. Permit Permit Sample Permit Sample reqmt. reqmt. reqmt. reqmt. Sample Sample Sample meas. meas. meas. meas. meas. Average \*\*\*\*\* \*\*\*\* \*\*\*\*\* \*\*\*\*\* \*\*\*\*\* \*\*\*\* : \*\*\*\*\* \*\*\*\* Quantity or Loading Maximum \*\*\*\* \*\*\*\*\* \*\*\*\*\* \*\*\*\*\* \*\*\*\*\* \*\*\*\*\* :::: \*\*\*\* \*\*\*\* Units Minimum \*\*\*\* \*\*\*\*\* \*\*\*\*\* \*\*\*\*\* \*\*\*\*\* \*\*\*\*\* \*\*\*\*\* \*\*\*\*\* **Quality or Concentration** instantaneous instantaneous instantaneous instantaneous instantaneous Average 3800 Report Report Report Report 1.2 Report 95 30 23 daily maximum daily maximum daily maximum daily maximum daily maximum Maximum 3800 Report Report Report Report Report 1.2 95 30 23 Units /gu l/gu /gu l/gu ug/l No. 0 0 0 0 0 Frequency of 2X Annually 2X Annually 2X Annually 2X Annually 2X Annually Analysis ш  $\vdash$  $\mapsto$  $\vdash$ Sample Type Grab Grab Grab Grab Grab

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
	SIGNATURE OF PRINCIPAL EXECUTIVE	gamering the information, the information submitted is, to the best of my	
901-221-2567	dZ-	prepared under my direction of 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	Slave Locks
TELEPHONE		I certify under penalty of law that this document and all attachments were	NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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SIGNATURE OF PRINCIPAL EXEC	A M

	m	
AREA   NUMBER	901-321-2967	TELEPHONE
YIMID	7-10-17	DATE

MAILING ADDRESS: 155 S. Seward St CONTACT NAME: Stephen A. Locks Juneau, AK 99801 LOCATION: 3 mile Egan Drive FACILITY: Salmon Creek Water Plant Backwash Juneau, AK 99801

PERMIT NUMBER: AKG380005

OUTFALL / MONITORING POINT: 001B Enhanced Flux Cleaning

MONITORING PERIOD: 6/1/2017

T0: NO DISCHARGE: 6/30/2017

Parameter		Quantity or Loading	r Loading	Units	Quality	ity or Concentration	ltion	Units	No.	Frequency of	Sample Type
		Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	
Chloride	Sample meas.	* * * *	****		* * * * *	390	390		0	1	
1 - Final Effluent Permit 46225 reqmt.	ffluent Permit 46225 regmt.	******	****		**	Report instantaneous	Report daily maximum	mg/l		2X Annually	Grab
Total Residual Chlorine	Sample meas.	* * * * *	****		* * * * *	0.01	0.01		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.	* * * *	****		* * * *	700	700		0	1	
1 - Final Effluent Permit 81020 regmt.	ffluent Permit 81020 regmt.	* * * * * * * * * * * * * * * * * * *	* * * *		**	Report instantaneous	Report daily maximum	mg/l		2X Annually	Grab

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

SIGNATURE OF PRINCIPA OFFICER OR AUTHORI

AL EXECUTIVE	507-321-24 64	7-10-17
ZED AGENT	AREA   NUMBER	YIMID

MAILING ADDRESS: 155 S. Seward St CONTACT NAME: Stephen A. Locks FACILITY: Salmon Creek Water Plant Backwash

Juneau, AK 99801

LOCATION: 3 mile Egan Drive Juneau, AK 99801

PERMIT NUMBER: AKG380005

6/30/2017 NO DISCHARGE:

OUTFALL / MONITORING POINT: 001C Chemical Clean in Place MONITORING PERIOD: 6/1/2017 T0:

	Quantity o	r Loading	Units	Qual	ity or Concentra	ltion	Units	No.	Frequency of	Sample Type
	Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	
Sample meas.	* * * * *	****						0	0	
Permit reqmt.	*****	* * * *		6.5 instantaneous minimum	Report instantaneous	8.5 instantaneous maximum	S.U.		Annually	Grab
Sample meas.	* * * *	* * *		* * * * *				0	0	
Permit reqmt.	* * * * *	* * * * *		******	Report instantaneous	Report daily maximum	ppt		Annually	Grab
Sample meas.	* * * * *	* * *		* * * * *				0	0	
Permit reqmt.	李本水安全	* * * * *		* * * * *	Report instantaneous	Report daily maximum	mg/l		Annually	Grab
Sample meas.	* * * *	***		* * * *				0	0	
Permit reqmt.	***	****		**	Report instantaneous	Report daily maximum	ug/l		Annually	Grab
Sample meas.	* * *	**		* * * *				0	0	
Permit reqmt.	******	******		**	Report instantaneous	10 daily maximum	ug/I		Annually	Grab
	Sample meas. Permit reqmt.	* * * * *	Average  *****  *****  ******  ******  *******	Quantity or Loading  Average Maximum  ******  ******  ******  ******  ******	Quantity or Loading         Units         Minimu           *******         *******         6.5           *******         *******         instantane minimun           *******         *******         *******           *******         *******         *******           *******         *******         *******           *******         *******         *******           *******         *******         *******           *******         *******         *******	Quantity or Loading         Units         Minimum           *******         *******         6.5           *******         *******         *******           *******         *******         *******           *******         *******         *******           *******         *******         *******           *******         *******         *******           *******         *******         *******           *******         *******         *******	Quantity or Loading     Units     Quality or Concentrat       Average     Maximum     Minimum     Average       *******     *******     6.5     Report       instantaneous     instantaneous     instantaneous       minimum     minimum     Report       *******     *******     *******     Report       *******     *******     *******     Report       *******     *******     *******	Quantity or Loading     Units     Quality or Concentration       Average     Maximum     Average     Maximum       *******     *******     *******     Report     instantaneous minimum       *******     *******     *******     Report     instantaneous minimum       *******     *******     Report     Report       *******     *******     *******     Report     Report       *******     *******     *******     Report     daily maximum       *******     *******     *******     Report     daily maximum       *******     *******     *******     Report     Report       *******     *******     *******     Report     daily maximum	Quantity or Loading     Units     Quality or Concentration     Units       Average     Maximum     Average     Maximum     Average     Maximum       *******     *******     6.5     Report     8.5     S.U.       instantaneous     instantaneous     instantaneous     instantaneous     maximum       *******     *******     ********     Report     Report     Ppt       *******     *******     *******     Report     Report     maximum       *******     *******     *******     Report     Report     mg/l       *******     *******     *******     Report     daily maximum       *******     *******     *******     Report     ug/l       *******     *******     *******     Report     ug/l	Quantity or Loading     Units     Quality or Concentration     Units     No. Fr       4 *******     *******     *******     Minimum     Average     Maximum     0       *******     *******     6.5     Report     8.5     S.U.       *******     *******     *******     Report     instantaneous     instantaneous       *******     *******     *******     Report     Ppt       *******     *******     *******     Report     Ppt       *******     *******     Report     mg/l       *******     *******     Report     o       ********     *******     Report     mg/l       *******     *******     Report     o       *******     *******     Report     o       *******     *******     Report     o       *******     *******     Report     o       *******     *******     o     o

OFFICER OR AUTHORIZED AGENT AREA   NUMBER		듒	are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TYPED OR PRINTED
SIGNATURE OF PRINCIPAL EXECUTIVE	SIGNATURE OF PRINCIPAL EXECUTIVE	* p*	gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there	
7/ 107-321-2967 7	7/	_	the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for	Chu Laki
	1		designed to assure that qualified personnel properly gather and evaluate	
TELEPHONE			I certify under penalty of law that this document and all attachments were	NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

MAILING ADDRESS: 155 S. Seward St CONTACT NAME: Stephen A. Locks Juneau, AK 99801 LOCATION: 3 mile Egan Drive FACILITY: Salmon Creek Water Plant Backwash

Juneau, AK 99801

PERMIT NUMBER: AKG380005

MONITORING PERIOD: 6/1/2017

T0: NO DISCHARGE: 6/30/2017

Parameter Manganese, Total Recoverable Copper Total Recoverable Lead Total Recoverable Zinc Total Recoverable Iron, Total Recoverable OUTFALL / MONITORING POINT: 001C Chemical Clean in Place 1 - Final Effluent 01114 11123 01119 00980 01094 Permit reqmt. Permit Sample Permit reqmt. Sample Permit Sample Sample Permit reqmt. Sample reqmt. reqmt. meas. 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 No. 0 0 0 0 0 Frequency of **Analysis** Annually Annually Annually Annually Annually 0 0 0 0 0 Sample Type Grab Grab Grab Grab Grab

EK OK AO HOKIZED AG	possibility of fine and imprisonment for knowing violations.	
	are significant penalties for submitting false information, including the	TYPED OR PRINTED
	knowledge and belief, true, accurate, and complete. I am aware that there	
SIGNATURE OF PRINCIPAL EXECUTIVE	gathering the information, the information submitted is, to the best of my	
	who manage the system, or those persons directly responsible for	120 12K
1	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	
	I certify under penalty of law that this document and all attachments were	NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

OFFICER OR AUTHORIZED AGENT	IGNATURE OF PRINCIPAL EXECUTIVE	2
AREA   NUMBER	907-321-246	TELEPHONE

IPAL EXECUTIVE	23-52-128-106	7-10-17
RIZED AGENT	AREA   NUMBER	AIWID

DATE

CONTACT NAME: Stephen A. Locks FACILITY: Salmon Creek Water Plant Backwash

LOCATION: 3 mile Egan Drive Juneau, AK 99801

PERMIT NUMBER: AKG380005

MAILING ADDRESS: 155 S. Seward St

Juneau, AK 99801

MONITORING PERIOD: 6/1/2017

Ö 6/30/2017

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

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Steve

Kocks

TYPED OR PRINTED

knowledge and belief, true, accurate, and complete. I am aware that there gathering the information, the information submitted is, to the best of my the information submitted. Based on my inquiry of the person or persons certify under penalty of law that this document and all attachments were 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 personnel properly gather and evaluate

possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 207-321-2969 AREA | NUMBER 7-10-17 YIMID DATE