

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

CONTACT NAME: Stephen A. Locks  
 MAILING ADDRESS: 155 S. Seward St  
 Juneau, AK 99801

FACILITY: Salmon Creek Water Plant Backwash  
 LOCATION: 3 mile Egan Drive  
 Juneau, AK 99801

PERMIT NUMBER: AKG380005  
 MONITORING POINT: 001A Reverse Flow/Air Scrub  
 MONITORING PERIOD: 6/1/2017 TO 6/30/2017  
 NO DISCHARGE:

Parameter	Sample meas.	Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average				
Temperature (C)	1 - Final Effluent 00010	*****	*****		*****	*****	DEG.C	0	1	Grab
Turbidity	1 - Final Effluent 00070	*****	*****		*****	*****	NTU	0	1	Grab
Magnesium, total recoverable	1 - Final Effluent 00921	*****	*****		*****	*****	ug/l	0	2X Annually	Grab
Arsenic, Total Recoverable	1 - Final Effluent 00978	*****	*****		*****	*****	ug/l	0	Monthly	Grab
Iron, Total Recoverable	1 - Final Effluent 00980	*****	*****		*****	*****	ug/l	0	2X Annually	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE	
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		907-321-2663 7-10-17	
		TYPED OR PRINTED		AREA   NUMBER	

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PERMIT NUMBER: AKG380005


MONITORING PERIOD: 6/1/2017

TO 6/30/2017

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

NO DISCHARGE:

Parameter	Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
			Minimum	Maximum				
Zinc Total Recoverable	Sample meas. ***** Permit reqmt. *****	*****	*****	*****	ug/l	0	1	Grab
1 - Final Effluent 01094								
Lead Total Recoverable	Sample meas. ***** Permit reqmt. *****	*****	*****	*****	ug/l	0	1	Grab
1 - Final Effluent 01114								
Copper Total Recoverable	Sample meas. ***** Permit reqmt. *****	*****	*****	*****	ug/l	0	1	Grab
1 - Final Effluent 01119								
Manganese, Total Recoverable	Sample meas. ***** Permit reqmt. *****	*****	*****	*****	ug/l	0	1	Grab
1 - Final Effluent 11123								
Chloride	Sample meas. ***** Permit reqmt. *****	*****	*****	*****	mg/l	0	1	Grab
1 - Final Effluent 46225								

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				7-10-17	
TYPED OR PRINTED		AREA   NUMBER		Y   M   D	

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FACILITY: Salmon Creek Water Plant Backwash  
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PERMIT NUMBER: AKG380005

MONITORING PERIOD: 6/1/2017

TO 6/30/2017


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

NO DISCHARGE:

Parameter	Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
			Average	Maximum				
Flow	0.031	Report monthly average	0.044	Report daily maximum	MGD	0	Continuous	Recorded
1 - Final Effluent 50050	Permit reqmt.	Report monthly average	Report daily maximum	MGD	*****	*****	*****	*****
Sulfate	Sample meas.	*****	*****	Report instantaneous	mg/l	0	2X Annually	Grab
1 - Final Effluent 81020	Permit reqmt.	*****	*****	Report instantaneous	mg/l	0	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.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	TELEPHONE	DATE
<i>Sk-a Locks</i>	<i>907-581-2661</i>	<i>7-10-17</i>
TYPED OR PRINTED	AREA   NUMBER	Y   M   D
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		
		

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PERMIT NUMBER: AKG380005


MONITORING PERIOD: 6/1/2017

TO: 6/30/2017

OUTFALL / MONITORING POINT: 001B Enhanced Flux Cleaning

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.	*****	*****		6.87	6.87	6.87	0	1	Monthly	Grab
	1 - Final Effluent 00400	Permit reqmt.	*****	*****	6.5 instantaneous minimum	Report instantaneous	8.5 instantaneous maximum	S.U.			
Salinity	Sample meas.	*****	*****		*****	37.8	37.8	0	1	2X Annually	Grab
	1 - Final Effluent 00480	Permit reqmt.	*****	*****	*****	Report instantaneous	Report daily maximum	ppt			
Ammonia Nitrogen (as N)	Sample meas.	*****	*****		*****	0.29	0.29	0	1	Monthly	Grab
	1 - Final Effluent 00610	Permit reqmt.	*****	*****	*****	Report instantaneous	Report daily maximum	mg/l			
Magnesium, total recoverable	Sample meas.	*****	*****		*****	980	980	0	1	2X Annually	Grab
	1 - Final Effluent 00921	Permit reqmt.	*****	*****	*****	Report instantaneous	Report daily maximum	ug/l			
Arsenic, Total Recoverable	Sample meas.	*****	*****		*****	13	13	0	1	2X Annually	Grab
	1 - Final Effluent 00978	Permit reqmt.	*****	*****	*****	Report instantaneous	Report daily maximum	ug/l			

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Shaw Locks						907-521-2464		7-10-17	
TYPED OR PRINTED				OFFICER OR AUTHORIZED AGENT		AREA   NUMBER		Y   M   D	

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 Juneau, AK 99801

PERMIT NUMBER: AKG380005


OUTFALL / MONITORING POINT: 001B Enhanced Flux Cleaning

MONITORING PERIOD: 6/1/2017

TO: 6/30/2017

NO DISCHARGE:

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

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<i>Steve Locks</i>		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	907-221-2967	7-10-17
TYPED OR PRINTED			AREA   NUMBER	Y   M   D

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

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 Juneau, AK 99801

FACILITY: Salmon Creek Water Plant Backwash  
 LOCATION: 3 mile Egan Drive  
 Juneau, AK 99801

PERMIT NUMBER: AKG380005

MONITORING PERIOD: 6/1/2017


TO: 6/30/2017

OUTFALL / MONITORING POINT: 001B Enhanced Flux Cleaning

NO DISCHARGE:

Parameter	Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
			Average	Maximum				
Chloride	Sample meas.	*****	*****	*****	*****	0	1	Grab
	Permit reqmt.	*****	*****	*****	*****	0	2X Annually	
Total Residual Chlorine	Sample meas.	*****	*****	*****	*****	0	1	Grab
	Permit reqmt.	*****	*****	*****	*****	0	Monthly	
Sulfate	Sample meas.	*****	*****	*****	*****	0	1	Grab
	Permit reqmt.	*****	*****	*****	*****	0	2X Annually	

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<i>Steve Locks</i>	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE 907-221-2469
TYPED OR PRINTED	AREA   NUMBER	DATE 7-10-17

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PERMIT NUMBER: AKG380005


MONITORING PERIOD: 6/1/2017

TO: 6/30/2017

OUTFALL / MONITORING POINT: 001C Chemical Clean in Place

NO DISCHARGE:

Parameter	Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
			Minimum	Maximum				
pH	Sample meas.	*****	*****	*****	S.U.	0	0	Grab
	1 - Final Effluent Permit reqmt. 00400	*****	*****	6.5 instantaneous minimum	Report instantaneous	8.5 instantaneous maximum	Annually	
Salinity	Sample meas.	*****	*****	*****	ppt	0	0	Grab
	1 - Final Effluent Permit reqmt. 00480	*****	*****	*****	Report instantaneous	Report daily maximum	Annually	
Ammonia Nitrogen (as N)	Sample meas.	*****	*****	*****	mg/l	0	0	Grab
	1 - Final Effluent Permit reqmt. 00610	*****	*****	*****	Report instantaneous	Report daily maximum	Annually	
Magnesium, total recoverable	Sample meas.	*****	*****	*****	ug/l	0	0	Grab
	1 - Final Effluent Permit reqmt. 00921	*****	*****	*****	Report instantaneous	Report daily maximum	Annually	
Arsenic, Total Recoverable	Sample meas.	*****	*****	*****	ug/l	0	0	Grab
	1 - Final Effluent Permit reqmt. 00978	*****	*****	*****	Report instantaneous	10 daily maximum	Annually	

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<i>Steve Locks</i>		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	907-321-2969	7-10-17
TYPED OR PRINTED		OFFICER OR AUTHORIZED AGENT	AREA   NUMBER	Y   M   D

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 MONITORING POINT: 001C Chemical Clean in Place  
 MONITORING PERIOD: 6/1/2017 TO: 6/30/2017  
 NO DISCHARGE:

Parameter	Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
			Minimum	Maximum				
Iron, Total Recoverable	Sample meas.	*****	*****	*****	ug/l	0	0	Grab
	Permit reqmt.	*****	*****	*****	ug/l	0	0	
Zinc Total Recoverable	Sample meas.	*****	*****	*****	ug/l	0	0	Grab
	Permit reqmt.	*****	*****	*****	ug/l	0	0	
Lead Total Recoverable	Sample meas.	*****	*****	*****	ug/l	0	0	Grab
	Permit reqmt.	*****	*****	*****	ug/l	0	0	
Copper Total Recoverable	Sample meas.	*****	*****	*****	ug/l	0	0	Grab
	Permit reqmt.	*****	*****	*****	ug/l	0	0	
Manganese, Total Recoverable	Sample meas.	*****	*****	*****	ug/l	0	0	Grab
	Permit reqmt.	*****	*****	*****	ug/l	0	0	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  <div style="text-align: center; font-size: 2em; font-family: cursive;">Steve Locks</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 
TELEPHONE 907-581-2555	DATE 7-10-17
AREA   NUMBER	Y   M   D



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OUTFALL / MONITORING POINT: 001C Chemical Clean in Place

MONITORING PERIOD: 6/1/2017


TO: 6/30/2017

NO DISCHARGE:

Parameter	Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
			Average	Maximum				
Chloride	Sample meas.	*****	*****	*****	*****	0	0	Grab
	1 - Final Effluent Permit reqmt.	*****	*****	Report instantaneous	Report daily maximum	mg/l	Annually	
Total Residual Chlorine	Sample meas.	*****	*****	*****	*****	0	0	Grab
	1 - Final Effluent Permit reqmt.	*****	*****	0.0075 Report instantaneous	Report daily maximum	mg/l	Annually	
Sulfate	Sample meas.	*****	*****	*****	*****	0	0	Grab
	1 - Final Effluent Permit reqmt.	*****	*****	Report instantaneous	Report daily maximum	mg/l	Annually	

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<i>Steve Locks</i>	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE
TYPED OR PRINTED	907-321-2969	DATE
	AREA   NUMBER	Y   M   D
		7-10-17