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DMR Copy of Submission

Permit

Permit ID: AK0022951

Major: ✓

Permittee: JUNEAU, CITY & BOROUGH OF

Permittee Address:

2009 RADCLIFFE ROAD
JUNEAU, AK99801

Facility: JUNEAU, CITY AND BOROUGH OF - MENDENHALL WWTF

Facility Location:

2009 RADCLIFFE ROAD
MENDENHALL WWTF
JUNEAU, AK99801

Permitted Feature: 001 - External Outfall

Discharge:

001-A - MENDENHALL RIVER DIFFUSER

Report Dates & Status

Monitoring Period: From 08/01/17 to 08/31/17

DMR Due Date: 09/15/17

Status: NetDMR Validated

Considerations for Form Completion

FC/Nov-April=1 Effluent & W-Wkly Ave FC/May-Oct=S Effluent & T- Wkly Avg Ammonia/May-Oct=S Effluent

Principal Executive Officer

First Name: Randall

Last Name: Brown

Title: Wastewater Treatment Plant Supervisor

Telephone: 907-586-0393

No Data Indicator (NODI)

Form NODI: -

Code	Parameter Name	NODI	Quantity or Loading			Quality or Concentration			# of Ex.	Freq. of Analysis	Smpl. Type			
			Value 1	Value 2	Units	Value 1	Value 2	Value 3				Units		
00010	Temperature, water deg. centigrade	Smpl.				=17.3			=19.8		04 - deg C	0	05/WK - Five Per Week	GR - GRAB
1 - Effluent Gross														
Season: 0														
Req. Req. Mon MO AVG														
NODI: -														
NODI Req Mon DAILY MX														
00300	Oxygen, dissolved [DO]	Smpl.				=2.1			=5.2		19 - mg/L	0	01/30 - Monthly	GR - GRAB

Code	Name	Value 1	Value 2	Units	Value 1	Value 2	Value 3	Units	of Ex.	Analysis	Type
Season: 0											
Req.					Req Mon MO AVG			19 - mg/L	02/30 - Twice Per Month	24 - COMP24	
NODI: -											
00530	Solids, total suspended	=313		26 - lb/d	=20			19 - mg/L	02/30 - Twice Per Month	24 - COMP24	
W - See Comments											
Season: 0											
Req.		<=1839 WKLY AVG		26 - lb/d	<=45 WKLY AVG			19 - mg/L	02/30 - Twice Per Month	24 - COMP24	
NODI: -											
00610	Nitrogen, ammonia total [as N]				=5.1			19 - mg/L	01/30 - Monthly	24 - COMP24	
1 - Effluent Gross											
Season: 2											
Req.					Req Mon MO AVG	Req Mon DAILY MX		19 - mg/L	01/30 - Monthly	24 - COMP24	
NODI: -											
00900	Hardness, total [as CaCO3]				=64			19 - mg/L	01/30 - Monthly	24 - COMP24	
1 - Effluent Gross											
Season: 0											
Req.					Req Mon MO AVG	Req Mon DAILY MX		19 - mg/L	01/30 - Monthly	24 - COMP24	
NODI: -											
01079	Silver total recoverable										
1 - Effluent Gross											
Season: 0											
Req.					Req Mon MO AVG	Req Mon DAILY MX		28 - ug/L	03/YR - Three Per Year	24 - COMP24	
NODI: -											
01094	Zinc, total recoverable										
1 - Effluent Gross											
Season: 0											
Req.					Req Mon MO AVG	Req Mon DAILY MX		28 - ug/L	03/YR - Three Per Year	24 - COMP24	
NODI: -											
NODI: -											
NODI					9 - Conditional Monitoring - Not Required This Period	9 - Conditional Monitoring - Not Required This Period					

Code	Name	Value 1	Value 2	Units	Value 1	Value 2	Value 3	Units	of Ex.	Analysis	Type
81010	BOD, 5-day, percent removal				=95			23 - %	0	01/30 - Monthly	CA - CALCTD
	K - Percent Removal										
Season:	0				>=85 MN % RMV			23 - %		01/30 - Monthly	CA - CALCTD
	NODI: -										
81011	Solids, suspended percent removal				=97			23 - %	0	01/30 - Monthly	CA - CALCTD
	K - Percent Removal										
Season:	0				>=85 MN % RMV			23 - %		01/30 - Monthly	CA - CALCTD
	NODI: -										
TT000	Toxicity, Chronic										
1 - Effluent Gross											
Season:	6							73 - toxic		09/99 - See Permit	24 - COMP24
	NODI: -										

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

No errors.

Comments

Attachments

No attachments.

Report Last Saved By

JUNEAU, CITY & BOROUGH OF

User: CBJWASTEWATER1
Name: James Westcott
E-Mail: jim.westcott@juneau.org
Date/Time: 2017-09-12 12:58 (Time Zone: -08:00)

MENDENHALL WASTEWATER TREATMENT FACILITY
Juneau, Alaska
August 2017

FLOWS										INFLUENT										EFFLUENT									
DAY	DATE	SBR INFLUENT MGD	precip	SBR TIT EFFLU MGD	SBR WASTE MGD	TEMP °C	pH	D.O. mg/L	SS mg/L	SS LBS	B.O.D. mg/L	B.O.D. LBS	TEMP °C	pH	D.O. mg/L	SS mg/L	SS LBS	B.O.D. mg/L	B.O.D. LBS	Turbidity On FC Grab	FECAL COLIFORM /100 ml								
SUN	30	1.88	T	1.20	0.0716	16.6	7.3	1.7	565	1381	880	8987	17.4	6.8	3.8	19	288	18	282	8.4	3								
MON	31	1.86	0.00	1.88	0.1242	15.7	6.8	1.4	520	7589	460	6714	17.6	6.8	2.3	19	268	18	254	8.6	5								
TUE	1	1.75	0.00	1.69	0.1355	16.3	6.8	1.9	1460	18727	1000	12827	17.4	6.8	2.3	23	339	28	412										
WED	2	1.54	T	1.77	0.1488	16.4	7.1	1.3					17.8	6.9	2.8														
THU	3	1.73		1.77	0.145	16.6	7.0	1.1	480	7046	580	8220	17.4	6.8	3.0	19	277	27	394										
FRI	4	1.76	0.00	1.75	0.1145																								
SAT	5	1.53	0.00	1.51	0.1012																								
SUN	6	1.56	0.00	1.54	0.0830																								
MON	7	1.74	T	1.78	0.1022	16.2	7.0	2.1	360	5224	410	5950	17.6	6.9	5.2	18	287	20	297	9.4	2								
TUE	8	1.73	0.00	1.61	0.1300	16.9	7.1	1.9	380	5483	570	8224	18.5	6.9	2.5	16	215	23	309	10.3	20								
WED	9	1.73	0.00	1.81	0.1300	17.4	6.7	1.0	450	6493	640	9234	19.8	6.9	4.5	17	228	29	389										
THU	10	1.67	0.00	1.67	0.1286	16.9	7.0	1.5	795	11073	550	7660	18.3	6.8	2.1	18	251	27	376	12.4	160								
FRI	11	1.60	0.01	1.60	0.1155	17.0	6.9	1.4	472	6298	630	8407	18.4	6.8	2.2	16	214	26	347										
SAT	12	1.46	0.03	1.46	0.0759																								
SUN	13	1.54	0.30	1.54	0.0959																								
MON	14	1.74	0.49	1.74	0.1198	17.4	7.3	2.6	408	5921	410	5950	17.7	6.8	2.8	18	261	24	348	8.6	390								
TUE	15	1.77	0.36	1.77	0.1203	18.4	7.3	1.7	856	12636	680	10038	17.6	6.8	2.5	18	266	33	487	10.1	84								
WED	16	1.65	0.73	1.65	0.1464	17.0	7.0	2.7	427	5876	560	7706	17.5	6.9	2.2	23	317	37	509										
THU	17	2.35	1.20	2.35	0.1461	15.2	9.2	1.0	400	7840	480	9016	17.6	6.9	2.5	21	412	33	647										
FRI	18	2.49	0.63	2.49	0.0851	16.0	7.2	2.2	213	4423	270	5607	16.5	6.9	2.5	15	311	28	581										
SAT	19	2.31	0.09	2.31	0.0779																								
SUN	20	2.21	0.43	2.21	0.0851	15.3	7.3	2.6	368	7673	280	5938	16.0	6.9	4.8	11	229	15	313	6.7	5								
MON	21	2.50	0.30	2.50	0.1351	17.2	7.3	1.7	305	7326	360	8407	16.7	6.9	2.9	10	240	15	360	0.0 S	1								
TUE	22	2.88	0.97	2.88	0.1282	16.4	7.1	2.7	303	6848	310	7006	17.0	6.8	2.7	14	316	20	452										
WED	23	2.71	T	2.71	0.1138	15.9	7.3	1.0	377	7357	340	6635	16.7	6.8	2.3	11	215	14	273										
THU	24	2.34	0.16	2.34	0.1230	15.1	7.4	2.2	366	7959	360	7236	16.4	6.8	2.7	12	241	14	281										
FRI	25	2.41	0.62	2.41	0.1185																								
SAT	26	2.45	0.38	2.45	0.0987																								
SUN	27	2.43	0.10	2.43	0.1185																								
MON	28	2.47	0.16	2.47	0.0987	15.7	7.0	2.2	524	10794	350	7210	15.9	6.9	3.0	10	188	12	247	3.4	2								
TUE	29	2.28	0.00	2.28	0.1273	16.1	7.1	1.9	789	14623	340	6465	16.3	6.9	2.7	10	183	12	228	3.9	3								
WED	30	2.24	0.31	2.24	0.1462	15.5	7.1	1.2	365	6819	440	8220	16.8	6.9	2.9	11	205	17	318										
THU	31	2.54	1.19	2.54	0.1606	14.5	7.1	1.4	400	8473	530	11227	16.9	7.0	5.1	10	212	19	402										
FRI	1	3.96	0.81	3.96	0.1523	14.7	7.1	3.2					15.8	6.8	2.8														
SAT	2	3.00	0.01	3.00	0.1195																								
TOTAL		63.10	8.46	63.06	3.6035																								
MAXIMUM		3.36	1.20	3.36	0.1606	18.4	9.2	3.2	1460	18727	1000	12827	19.8	7.0	5.2	23	412	37	647	12	390								
MINIMUM		1.46	0.00	1.46	0.0716	14.5	6.7	1.0	213	1381	270	5607	15.8	6.8	2.1	10	183	12	228	3	1								
AVERAGE *		2.04	0.31	2.03	0.12	16.27		1.8	501	7995	477	7948	17.3		3.0	15	259	22	370	8.2	11								
Per of Analyses		35	30	35	35	25	25	25	23	23	23	23	25	25	25	23	23	23	23	23	11	10							

2017		2017 Metals	
Hrd. mg/L	64.0	mg/L	LBS
Alk. mg/L		Copper	24.0
Tox. TUC	5.1	Lead	NA
		Silver	NA
		Zinc	NA

2017		2017 Metals	
Hrd. mg/L	64.0	mg/L	LBS
Alk. mg/L		Copper	24.0
Tox. TUC	5.1	Lead	NA
		Silver	NA
		Zinc	NA

WEEK	BOD mg/L	WEEKLY AVERAGE	TSS mg/L	WEEKLY AVERAGE	Geo. Mean	% REMOVAL
1	23	336	20	295	4	
2	25	344	17	235	19	
3	31	515	19	313	181	
4	16	336	12	248	2	
5	15	299	10	199	2	
MAX	31	515	20	313	181	

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

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

FACILITY: MENDENHALL WW TREATMENT FACILITY
 LOCATION: 2009 RADCLIFFE RD
 Juneau, AK 99801

PERMIT NUMBER: AK0022951
 OUTFALL / MONITORING POINT: 001A MENDENHALL RIVER DIFFUSER

MONITORING PERIOD: 3/1/17

TO 3/31/17
 NO DISCHARGE:

Parameter	Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
			Minimum	Maximum				
Temperature (C)	Sample meas.	*****	*****	*****	DEG.C	0	5X Weekly	Grab
	1 - Final Effluent 00010	Permit reqmt.	*****	*****	Report monthly average	Report daily maximum	17.3	19.8
Dissolved Oxygen	Sample meas.	*****	*****	*****		0		
	1 - Final Effluent 00300	Permit reqmt.	*****	*****	Report daily minimum	Report daily maximum	2.1	5.2
Biochemical Oxygen Demand (BOD5)	Sample meas.	1226	2452	*****	mg/l	0	2X Monthly	24-Hr Composite
	1 - Final Effluent 00310	Permit reqmt.	monthly average	daily maximum	lbs/day	Report monthly average	30	37
Biochemical Oxygen Demand (BOD5)	Sample meas.	*****	*****	*****	mg/l	0	2X Monthly	24-Hr Composite
	G - Influent 00310	Permit reqmt.	*****	*****	Report monthly average	Report monthly average	477	
Biochemical Oxygen Demand (BOD5)	Sample meas.	515	*****	*****	mg/l	0	2X Monthly	24-Hr Composite
	W - See Comments 00310	Permit reqmt.	1839	*****	Report weekly average	Report weekly average	45	31

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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	DATE
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA NUMBER	Y M D	

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 OUTFALL / MONITORING POINT: 001A MENDENHALL RIVER DIFFUSER

MONITORING PERIOD: 3/1/17

TO 3/31/17
 NO DISCHARGE:

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average				
pH	1 - Final Effluent 00400	Sample meas.	*****	*****	6.8	*****	7.0	0	5X Weekly	Grab
		Permit reqmt.	*****	*****	instantaneous minimum	*****	8.5 instantaneous maximum	S.U.		
Alkalinity, Total (as CaCO3)	1 - Final Effluent 00410	Sample meas.	*****	*****	*****	NA	NA		Quarterly	24-Hr Composite
		Permit reqmt.	*****	*****	*****	Report monthly average	Report daily maximum	mg/l		
Total Suspended Solids	1 - Final Effluent 00530	Sample meas.	259	412	*****	15	23	0	2X Monthly	24-Hr Composite
		Permit reqmt.	1226 monthly average	2452 daily maximum	*****	30 monthly average	60 daily maximum	mg/l		
Total Suspended Solids	G - Influent 00530	Sample meas.	*****	*****	*****	501	*****	0	2X Monthly	24-Hr Composite
		Permit reqmt.	*****	*****	*****	Report monthly average	*****	mg/l		
Total Suspended Solids	W - See Comments 00530	Sample meas.	313	*****	*****	20	*****	0	2X Monthly	24-Hr Composite
		Permit reqmt.	1839 weekly average	*****	*****	45 weekly average	*****	mg/l		

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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		AREA NUMBER	
TYPED OR PRINTED				Y M D	

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 Juneau, AK 99801

PERMIT NUMBER: AK0022951

OUTFALL / MONITORING POINT: 001A MENDENHALL RIVER DIFFUSER

MONITORING PERIOD: 3/1/17

TO 3/31/17
 NO DISCHARGE:

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average				
Ammonia Nitrogen (as N)	Sample meas.	*****	*****		*****	5.1	mg/l	0	Monthly	24-Hr Composite
	1 - Final Effluent Permit reqmt. 00610	*****	*****		*****	Report monthly average	mg/l			
Hardness, Total (as CaCO3)	Sample meas.	*****	*****		*****	64	mg/l	0	Monthly	24-Hr Composite
	1 - Final Effluent Permit reqmt. 00900	*****	*****		*****	Report monthly average	mg/l			
Silver Total Recoverable	Sample meas.	*****	*****		*****	NA	ug/l	0	See Permit Requirements	24-Hr Composite
	1 - Final Effluent Permit reqmt. 01079	*****	*****		*****	Report monthly average	ug/l			
Zinc Total Recoverable	Sample meas.	*****	*****		*****	NA	ug/l	0	See Permit Requirements	24-Hr Composite
	1 - Final Effluent Permit reqmt. 01094	*****	*****		*****	Report monthly average	ug/l			
Lead Total Recoverable	Sample meas.	*****	*****		*****	NA	ug/l	0	See Permit Requirements	24-Hr Composite
	1 - Final Effluent Permit reqmt. 01114	*****	*****		*****	Report monthly average	ug/l			

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TYPED OR PRINTED	OFFICER OR AUTHORIZED AGENT AREA NUMBER Y M D

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MONITORING PERIOD: 3/1/17 TO 3/31/17
 NO DISCHARGE:

Parameter		Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average				
Copper Total Recoverable	1 - Final Effluent 01119	Sample meas. 0.33	3.92	lbs/day	*****	24	ug/l	0	Monthly	24-Hr Composite
		Permit reqmt. 1.82	daily maximum		*****	44.5				
Chronic Toxicity	1 - Final Effluent T000	Sample meas. *****	*****		*****	NA		0		
		Permit reqmt. T000	*****		*****	Report monthly average				
Floating solids, waste or visible foam-visual	1 - Final Effluent 45613	Sample meas. *****	*****		*****	*****	pass/fail	0	Monthly	Visual
		Permit reqmt. 45613	*****		*****	*****				
Flow	1 - Final Effluent 50050	Sample meas. 2.03	3.4	MGD	*****	*****		0	Continuous	Recorded
		Permit reqmt. 50050	4.9		*****	*****				
Fecal Coliform	1 - Final Effluent 74055	Sample meas. *****	*****		*****	11	cts/100 ml	0	Weekly	Grab
		Permit reqmt. 74055	*****		*****	200				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE	
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				Y M D	
TYPED OR PRINTED					

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PERMIT NUMBER: AK0022951
 MONTORING POINT: 001A MENDENHALL RIVER DIFFUSER
 MONITORING PERIOD: 3/1/17 TO 3/31/17
 NO DISCHARGE:

Parameter	Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
			Minimum	Average	Maximum				
Fecal Coliform	Sample meas.	*****	*****	181	*****	cts/100 ml	0	Weekly	Grab
	Permit reqmt.	*****	*****	400 weekly geometric mean	*****				
BOD5 Minimum % Removal	Sample meas.	*****	95	*****	*****	%	0	Monthly	Calculation
	Permit reqmt.	*****	85 minimum	*****	*****				
Total Suspended Solids Minimum % Removal	Sample meas.	*****	97	*****	*****	%	0	Monthly	Calculation
	Permit reqmt.	*****	85 minimum	*****	*****				

COMMENTS:
 W = Weekly Limits;

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 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	
TYPED OR PRINTED	AREA NUMBER	Y M D