

**Permit**

**Permit ID:** AK0022951  
**Permittee:** JUNEAU, CITY & BOROUGH OF  
**Facility:** JUNEAU, CITY AND BOROUGH OF - MENDENHALL WWTF

**Major:**   
**Permittee Address:** 2009 RADCLIFFE ROAD  
 JUNEAU , AK99801  
**Facility Location:** 2009 RADCLIFFE ROAD  
 MENDENHALL WWTF  
 JUNEAU , AK99801  
**Discharge:** 001-A - MENDENHALL RIVER DIFFUSER

**Permitted Feature:** 001 - External Outfall

**Report Dates & Status**

**Monitoring Period:** From 01/01/18 to 01/31/18  
**Status:** NetDMR Validated  
**DMR Due Date:** 02/15/18

**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:** Jim  
**Title:** Senior treatment operator  
**Last Name:** Westcott  
**Telephone:** 907-586-0393

**No Data Indicator (NODI)**

**Form NODI:** -

Parameter		NODI	Quantity or Loading			Quality or Concentration			# of Ex.	Freq. of Analysis	Smpl. Type
Code	Name		Value 1	Value 2	Units	Value 1	Value 2	Value 3			

Parameter		NODI	Quantity or Loading			Quality or Concentration			# of Ex.	Freq. of Analysis	Smpl. Type
Code	Name		Value 1	Value 2	Units	Value 1	Value 2	Value 3			
00010	Temperature, water deg. centigrade	Smpl.				=11.1	=12.6	04 - deg C	0	05/WK - Five Per Week	GR - GRAB
1 - Effluent Gross											
Season: 0		Req.				Req Mon MO AVG	Req Mon DAILY MX	04 - deg C		05/WK - Five Per Week	GR - GRAB
NODI: -		NODI									
00300	Oxygen, dissolved [DO]	Smpl.			=2		=4.8	19 - mg/L	0	01/30 - Monthly	GR - GRAB
1 - Effluent Gross											
Season: 0		Req.			Req Mon DAILY MN		Req Mon DAILY MX	19 - mg/L		01/30 - Monthly	GR - GRAB
NODI: -		NODI									
X 00310	BOD, 5-day, 20 deg. C	Smpl.	=470	=650	26 - lb/d	=31	=43	19 - mg/L	1	02/30 - Twice Per Month	24 - COMP24
1 - Effluent Gross											
Season: 0		Req.	<=1226 MO AVG	<=2452 DAILY MX	26 - lb/d	<=30 MO AVG	<=60 DAILY MX	19 - mg/L		02/30 - Twice Per Month	24 - COMP24
NODI: -		NODI									
00310	BOD, 5-day, 20 deg. C	Smpl.						19 - mg/L	0	02/30 - Twice Per Month	24 - COMP24
G - Raw Sewage Influent											
Season: 0		Req.				Req Mon MO AVG		19 - mg/L		02/30 - Twice Per Month	24 - COMP24
NODI: -		NODI									
00310	BOD, 5-day, 20 deg. C	Smpl.	=614		26 - lb/d	=34		19 - mg/L	0	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: -		NODI									
00400	pH	Smpl.				=6.7	=7	12 - SU	0	05/07 - Weekdays	GR - GRAB
1 - Effluent Gross											
Season: 0		Req.			>=6.5 INST MIN		<=8.5 INST MAX	12 - SU		05/07 - Weekdays	GR - GRAB
NODI: -		NODI									
00530	Solids, total suspended	Smpl.	=382	=637	26 - lb/d	=25	=37	19 - mg/L	0	02/30 - Twice Per Month	24 - COMP24
1 - Effluent Gross											
Season: 0		Req.	<=1226 MO AVG	<=2452 DAILY MX	26 - lb/d	<=30 MO AVG	<=60 DAILY MX	19 - mg/L		02/30 - Twice Per Month	24 - COMP24
NODI: -		NODI									
00530	Solids, total suspended	Smpl.						19 - mg/L	0	02/30 - Twice Per Month	24 - COMP24
G - Raw Sewage Influent											
Season: 0		Req.				Req Mon MO AVG		19 - mg/L		02/30 - Twice Per Month	24 - COMP24
NODI: -		NODI									
00530	Solids, total suspended	Smpl.	=559		26 - lb/d	=29		19 - mg/L	0	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			24 - COMP24

Parameter Code	Name	NODI	Quantity or Loading			Quality or Concentration			Units	# of Ex.	Freq. of Analysis	Smpl. Type
			Value 1	Value 2	Units	Value 1	Value 2	Value 3				
NODI: -		<b>NODI</b>								02/30 - Twice Per Month		
00610	Nitrogen, ammonia total [as N]											
	1 - Effluent Gross	<b>Smpl.</b>	=315	=315	26 - lb/d	=16	=16	19 - mg/L	0	01/30 - Monthly	24 - COMP24	
Season: 0		<b>Req.</b>	<=1165 MO AVG	<=1655 DAILY MX	26 - lb/d	<=28.5 MO AVG	<=40.5 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24	
NODI: -		<b>NODI</b>										
00900	Hardness, total [as CaCO3]											
	1 - Effluent Gross	<b>Smpl.</b>				=61	=61	19 - mg/L	0	01/30 - Monthly	24 - COMP24	
Season: 0		<b>Req.</b>				Req Mon MO AVG	Req Mon DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24	
NODI: -		<b>NODI</b>										
01119	Copper, total recoverable											
	1 - Effluent Gross	<b>Smpl.</b>	=0.43	=0.43	26 - lb/d	=22	=22	28 - ug/L	0	01/30 - Monthly	24 - COMP24	
Season: 0		<b>Req.</b>	<=3.54 MO AVG	<=7.63 DAILY MX	26 - lb/d	<=86.7 MO AVG	<=187 DAILY MX	28 - ug/L		01/30 - Monthly	24 - COMP24	
NODI: -		<b>NODI</b>										
45613	Floating solids, waste or visible foam-visual											
	1 - Effluent Gross	<b>Smpl.</b>					=0	9P - N=0;Y=1	0	01/30 - Monthly	VI - VISUAL	
Season: 0		<b>Req.</b>					<=Req Mon DAILY MX	9P - N=0;Y=1		01/30 - Monthly	VI - VISUAL	
NODI: -		<b>NODI</b>										
50050	Flow, in conduit or thru treatment plant											
	1 - Effluent Gross	<b>Smpl.</b>	=1.81	=2.43	03 - MGD				0	99/99 - Continuous	RC - Recorder (auto)	
Season: 0		<b>Req.</b>	Req Mon MO AVG	<=4.9 DAILY MX	03 - MGD					99/99 - Continuous	RC - Recorder (auto)	
NODI: -		<b>NODI</b>										
74055	Coliform, fecal general											
	1 - Effluent Gross	<b>Smpl.</b>				=8	=44	13 - #/100mL	0	02/07 - Twice Every Week	GR - GRAB	
Season: 0		<b>Req.</b>				<=112 MO GEOMN	<=224 DAILY MX	13 - #/100mL		02/07 - Twice Every Week	GR - GRAB	
NODI: -		<b>NODI</b>										
74055	Coliform, fecal general											
	W - See Comments	<b>Smpl.</b>				=22		13 - #/100mL	0	02/07 - Twice Every Week	GR - GRAB	
Season: 0		<b>Req.</b>				<=168 WK GEOMN		13 - #/100mL		02/07 - Twice Every Week	GR - GRAB	
NODI: -		<b>NODI</b>										
81010	BOD, 5-day percent removal											
	K - Percent Removal	<b>Smpl.</b>				=93		23 - %	0	01/30 - Monthly	CA - CALCTD	
Season: 0		<b>Req.</b>				>=85 MN % RMV		23 - %		01/30 - Monthly	CA - CALCTD	

Parameter		NODI	Quantity or Loading			Quality or Concentration			# of Ex.	Freq. of Analysis	Smpl. Type	
Code	Name		Value 1	Value 2	Units	Value 1	Value 2	Value 3				Units
NODI: -		NODI										
81011	Solids, suspended percent removal	Smpl.			=94				23 - %	0	01/30 - Monthly	CA - CALCTD
K - Percent Removal												
Season: 0		Req.			>=85 MN % RMV				23 - %		01/30 - Monthly	CA - CALCTD
NODI: -		NODI										
TT000	Toxicity, Chronic	Smpl.										
1 - Effluent Gross												
Season: 0		Req.				<=5.1 MO AVG	Req Mon DAILY MX		73 - toxic		09/99 - See Permit	24 - COMP24
NODI: -		NODI				9 - Conditional Monitoring - Not Required This Period	9 - Conditional Monitoring - Not Required This Period					

**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**

Parameter		Monitoring Location	Field	Type	Description	Acknowledge
Code	Name					
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	Quality or Concentration Sample Value 2	Soft	The provided sample value is outside the permit limit. (Error Code: 1 )	<input checked="" type="checkbox"/>

**Comments**

**Attachments**

Name	Type	Size
2764_001.pdf	pdf	111431

**Report Last Saved By**

**JUNEAU, CITY & BOROUGH OF**

User: CBJWASTEWATER1  
 Name: James Westcott  
 E-Mail: jim.westcott@juneau.org  
 Date/Time: 2018-02-14 11:25 (Time Zone:-09:00)

**Report Last Signed By**

User: CBJWASTEWATER1  
 Name: James Westcott  
 E-Mail: jim.westcott@juneau.org  
 Date/Time: 2018-02-14 11:26 (Time Zone:-09:00)



# Alaska Department of Environmental Conservation

Division of Water, Compliance and Enforcement Program

555 Cordova Street

Anchorage, Alaska 99501

Nationwide Toll Free: 1(877) 569-4114 Anchorage/International: (907) 269-4114

Fax: (907) 269-4604 E-mail address: [dec-wqreporting@alaska.gov](mailto:dec-wqreporting@alaska.gov)

## NONCOMPLIANCE NOTIFICATION

<b>GENERAL INFORMATION</b>		<b>PERMIT# (if any): AK002295-1</b>	
<b>Owner or Operator:</b> City and Borough of Juneau		<b>Facility Name:</b> Mendenhall Wastewater Treatment Facility	<b>Facility Location:</b> Juneau, AK
<b>Person Reporting:</b> Jim Westcott		<b>Phone Numbers of Person Reporting:</b> 907-586-0393	<b>Reported How? (e.g. by phone):</b> Hotline
<b>Date/Time Event was Noticed:</b> 2/14/2018 @ 1030 am		<b>Date/Time Reported:</b> 2/14/2018 @ 1030 am	<b>Name of DEC Staff Contacted:</b> Hotline
<b>VERBAL NOTIFICATION MUST BE MADE TO ADEC WITHIN 24 HOURS OF DISCOVERY OF NONCOMPLIANCE</b>			
<b>INCIDENT DETAILS (attach additional sheets, lab reports, and photos as necessary)</b>			
<b>Period of Noncompliance</b>	<b>Start Date/Time (exact):</b> 1/1/2018		<b>End Date/Time (exact):</b> 1/31/2018
<b>If noncompliance has not been corrected, provide a statement regarding the anticipated time the noncompliance is expected to continue:</b> N/A			
<b>Estimated Quantity involved (volume or weight):</b> N/A			
<b>Description of the noncompliance and its cause (be specific):</b> Unknown			
<b>Actions taken to reduce, eliminate, and prevent reoccurrence of noncompliance and Actual/Potential Impact on Environmental Health (describe in detail) (e.g. Supplied drinking water to nearby well owners and informed well owners not to drink from wells until further notice)</b> Increased waste removal from system.			
<b>Permit Condition Deviation (Identify each permit condition exceeded during the event.)</b>			
<b>Parameter (e.g. BOD pH)</b>	<b>Permit Limit</b>	<b>Exceedance (sample result)</b>	<b>Sample Date</b>
BOD mg/l	30 mg/l monthly average	31 mg/l monthly average	1/1 – 1/31/2018
<b>Corrective Actions (Attach a description of corrective actions taken to restore the system to normal operation and to minimize or eliminate chances of recurrence.)</b> Increased waste removal from system.			
<b>Environmental Damage: (if yes, provide details below)</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown			
<b>Actual /Potential Impact on Environment/Public Health (describe in detail)</b> Unknown			
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.			
<b>Name:</b> Jim Westcott	<b>Title:</b> Senior Operator	<b>Signature:</b>	<b>Date:</b> 2/14/2018
<b>FORMS MUST BE SENT TO ADEC WITHIN FIVE DAYS OF BECOMING AWARE OF THE EVENT.</b>			

