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DMR Copy of Submission

Permit

Permit ID: AK0023213

Major:

Permittee: JUNEAU, CITY AND BOROUGH OF

Permittee Address:

Facility: JUNEAU, CITY AND BOROUGH OF

Facility Location:

Permitted Feature: 001 - External Outfall

Discharge:

5433 SHAUNE DRIVE
 JUNEAU , AK99801
 1540 THANE ROAD
 JUNEAU , AK99801
 001-A - (no description)

Report Dates & Status

Monitoring Period: From 04/01/19 to 04/30/19

DMR Due Date:

05/15/19

Status: NetDMR Validated

Considerations for Form Completion

W=WEEKLY AVERAGE

Principal Executive Officer

First Name: Randall
 Title: supervisor

Last Name: Brown
 Telephone: 907-586-0393

No Data Indicator (NODI)

Form NODI: -

Code	Parameter Name	NODI	Quantity or Loading		Units	Quality or Concentration			# of Ex.	Freq. of Analysis	Smpl. Type	
			Value 1	Value 2		Value 1	Value 2	Value 3				
00010	Temperature, water deg. centigrade	Smpl.				=12.9			04 - deg C	0	05/WK - Five Per Week	GR - GRAB
1 - Effluent Gross												
Season: 0												
Req. Mon DAILY MX C												
NODI: -												
Req. Mon DAILY MX C												
00300	Oxygen, dissolved [DO]	Smpl.				=3.9			19 - mg/L	0	05/WK - Five Per Week	GR - GRAB

Code	Name	Value 1	Value 2	Units	Value 1	Value 2	Value 3	Units	of Ex.	Analysis	Type
Season: 0	Req.				>=2 DAILY MN		<=17 DAILY MX	19 - mg/L		05/WK - Five Per Week	GR - GRAB
NODI: -	NODI										
00310	BOD, 5-day, 20 deg. C	Req.	Smpl.	26 - lb/d	=58	=35	=9	19 - mg/L	0	01/30 - Monthly	24 - COMP24
1 - Effluent Gross											
Season: 0	Req.	<=690 MO AVG	<=1380 DAILY MX	26 - lb/d			<=60 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
NODI: -	NODI										
00310	BOD, 5-day, 20 deg. C	Req.	Smpl.	26 - lb/d		=2349		19 - mg/L	0	01/30 - Monthly	24 - COMP24
G - Raw Sewage Influent											
Season: 0	Req.	Req Mon MO AVG		26 - lb/d			Req Mon MO AVG	19 - mg/L		01/30 - Monthly	24 - COMP24
NODI: -	NODI										
00310	BOD, 5-day, 20 deg. C	Req.	Smpl.	26 - lb/d		=51		19 - mg/L	0	01/30 - Monthly	24 - COMP24
W - See Comments											
Season: 0	Req.	<=1035 WKLY AVG		26 - lb/d			<=45 WKLY AVG	19 - mg/L		01/30 - Monthly	24 - COMP24
NODI: -	NODI										
00400	pH	Req.	Smpl.				=7.2	12 - SU	0	05/WK - Five Per Week	GR - GRAB
1 - Effluent Gross											
Season: 0	Req.	>=6.5 MINIMUM					<=8.5 MAXIMUM	12 - SU		05/WK - Five Per Week	GR - GRAB
NODI: -	NODI										
00530	Solids, total suspended	Req.	Smpl.	26 - lb/d		=26	=8	19 - mg/L	0	01/30 - Monthly	24 - COMP24
1 - Effluent Gross											
Season: 0	Req.	<=690 MO AVG	<=1380 DAILY MX	26 - lb/d			<=60 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
NODI: -	NODI										
00530	Solids, total suspended	Req.	Smpl.	26 - lb/d		=1905		19 - mg/L	0	01/30 - Monthly	24 - COMP24
G - Raw Sewage Influent											
Season: 0	Req.	Req Mon MO AVG		26 - lb/d			Req Mon MO AVG	19 - mg/L		01/30 - Monthly	24 - COMP24

Code	Name	Value 1	Value 2	Units	Value 1	Value 2	Value 3	Units	of Ex.	Analysis	Type
Season: 0	Req.					<=400 WKLY AVG		13 - #/100mL		01/07 - Weekly	GR - GRAB
NODI: -	NODI										
81010	BOD, 5-day, percent removal			=99				23 - %	0	01/30 - Monthly	CA - CALCTD
K - Percent Removal	Smpl.										
Season: 0	Req.				>=85 MN % RMV			23 - %		01/30 - Monthly	CA - CALCTD
NODI: -	NODI										
81011	Solids, suspended percent removal			=99				23 - %	0	01/30 - Monthly	CA - CALCTD
K - Percent Removal	Smpl.										
Season: 0	Req.				>=85 MN % RMV			23 - %		01/30 - Monthly	CA - CALCTD
NODI: -	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

Name	Type	Size
4588_001.pdf	pdf	278260

Report Last Saved By

JUNEAU, CITY AND BOROUGH OF

User: CBJWASTEWATER1
Name: James Westcott
E-Mail: jim.westcott@juneau.org
Date/Time: 2019-05-10 07:56 (Time Zone: -08:00)

Report Last Signed By

User: CBJWASTEWATER1
Name: James Westcott
E-Mail: jim.westcott@juneau.org
Date/Time: 2019-05-10 07:57 (Time Zone: -08:00)

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

CONTACT NAME: Mark Mow
 MAILING ADDRESS: 155 S. Seward Street
 Juneau, AK 99801

FACILITY: JUNEAU DOUGLAS WW TREATMENT FACILITY
 LOCATION: 1540 Thane Rd
 Juneau, AK 99801

PERMIT NUMBER: AK0023213
 MONITORING PERIOD: 4/1/2019 TO 4/30/2019
 MONITORING POINT: 002 (N-11) (P) Sta. AE NO DISCHARGE: X

Parameter	Sample meas. reqmnt.	Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type	
		Average	Maximum		Minimum	Maximum					
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	ctd/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	*****	Report daily maximum	min/day	*****	*****	*****	*****		When Discharging	Instantaneous Reading
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 PRINCIPLE EXECUTIVE OFFICE	Mark Mow/Wastewater Collections SR. Operator	TELEPHONE	907 586-0393	DATE	5/1/19
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA/NUMBER	YY/MM/DD

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: 4/1/2019 TO 4/30/2019
 MONITORING POINT: 003 (N-11.2) (Q) Sta. C NO DISCHARGE: X

Parameter	Sample meas. Permit reqmt.	Quantity or Loading		Units	Quantity or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type	
		Average	Maximum		Minimum	Average					Maximum
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	*****	Report daily maximum	mln/day	*****	*****	*****	*****		When Discharging	Instantaneous Reading
COMMENTS:											

Mail this report when completed to ADDEC, Division of Water, 555 Cordova Street, Anchorage, AK 99501-2617
 Attach an explanation of any violations. Reference all attachments below.

NAME/TITLE PRINCIPLE EXECUTIVE OFFICE	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 evaluated 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	TELEPHONE	DATE
Mark Mow/Wastewater Collections SR. Operator				907 586-0393	5/1/19
TYPED OR PRINTED				AREA/NUMBER	YY/MM/DD

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: 4/1/2019 TO 4/30/2019
 MONITORING POINT: 004 (N-15.1) (R) Douglas
 NO DISCHARGE:

Parameter	Sample meas. Permit reqmt.	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	*****	*****	mg/l		When Discharging	Grab
Total Suspended Solids	1 - Final Effluent 00530 R	Report monthly average	Report daily maximum	lbs/day	*****	*****	mg/l		When Discharging	Grab
Coliform, fecal MF, M-FC broth, 44.5 C	1 - Final Effluent 31616 R	Sample meas. Permit reqmt.	*****		*****	*****	ctc/100 ml		When Discharging	Grab
Flow	1 - Final Effluent 50050 R	Sample meas. Permit reqmt.	Report monthly average	MGD	*****	*****			When Discharging	Recorded
Duration of Discharge	1 - Final Effluent 81381 R	Sample meas. Permit reqmt.	*****		*****	*****			When Discharging	Instantaneous Reading
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 PRINCIPLE EXECUTIVE OFFICE	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 evaluated 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	TELEPHONE	DATE
Mark Mow/Wastewater Collections SR. Operator				907 586-0393	5/1/19
TYPED OR PRINTED				AREA/NUMBER	YY/MM/DD

