

MENDENHALL WASTEWATER TREATMENT FACILITY
Juneau, Alaska

February 2016

DAY	DATE	FLOWS				Influent											Effluent									
		SBR		SBR	SBR	TEMP	pH	D.O.	S.S.	S.S.	B.O.D.	B.O.D.	IPS	IPS	IPS	IPS	TEMP	pH	D.O.	S.S.	S.S.	B.O.D.	B.O.D.	Turbidity on FC Grab	FECAL COLIFORM /100 ml	
		INFLUENT	precip	TTL EFFL	WASTE																					MGD
SUN	31	2.26	0.00	2.18	0.0668																					
MON	1	2.24	0.00	1.94	0.0859	11.9	7.6	8.0	145	2709	190	3550	800	14945	720	13451	11.0	7.0	4.0	17	275	22	356	8.9	10	
TUE	2	2.20	0.06	2.09	0.1159	10.4	7.4	7.7	190	3486	290	5321	1380	25320	530	9724	11.9	6.9	3.8	13	227	20	349	18.9	18	
WED	3	2.21	0.02	1.99	0.1110	12.4	7.3	8.2	205	3778	390	7188	935	17233	500	9216	12.1	7.0	4.5	16	266	22	365			
THU	4	2.05	0.31	1.96	0.1280	11.5	7.3	8.0	210	3590	460	7865	335	5727	610	10429	12.4	7.0	3.5	75	1226	27	441			
FRI	5	2.22	0.15	1.99	0.1073	10.4	7.3	4.5	225	4166	490	9072	367	6795	560	10368	12.3	6.9	2.3	19	315	28	465			
SAT	6	2.29	0.07	2.12	0.0926																					
SUN	7	2.16	0.06	2.00	0.0842																					
MON	8	2.04	0.15	1.83	0.0957	11.0	7.6	8.0	50	851	120	2042	555	9443	400	6805	12.2	7.0	3.7	16	244	23	351	12.6	20	
TUE	9	2.18	0.01	1.96	0.0849	11.1	7.3	8.1	260	4727	270	4909	695	12636	370	6727	12.1	7.0	3.8	17	278	24	392	12.1	5	
WED	10	2.18	0.27	1.88	0.1038	10.5	7.3	4.1	250	4545	430	7818	240	4363	410	7454	12.5	6.8	2.3	19	298	24	376			
THU	11	2.23	0.12	1.89	0.1143	11.4	7.5	8.1	236	4389	390	7253					12.9	6.9	3.6	16	252	25	394			
FRI	12	2.30	0.12	1.96	0.0889	11.2	7.3	3.3	250	4796	530	10166	400	7673	610	11701	12.5	6.9	2.6	17	278	26	425			
SAT	13	2.13	0.02	1.91	0.0983																					
SUN	14	2.12	0.16	1.86	0.0981																					
MON	15	1.88	0.11	1.69	0.1071	11.2	7.5	7.3	170	2665	190	2979	1740	27282	380	5958	12.9	6.9	3.3	14	197	23	324	8.8	26	
TUE	16	2.31	0.00	1.98	0.0993	11.4	7.2	4.8	420	8091	390	7514					12.8	6.9	3.3	12	198	23	380	12.7	83	
WED	17	2.22	0.00	1.83	0.1080	11.6	7.1	7.2	240	4444	460	8517	400	7406	590	10924	12.9	6.9	3.5	16	244	26	397			
THU	18	1.99	0.00	1.76	0.1105	12.9	7.3	8.1	250	4149	480	7966	680	11286	600	9958	14.3	6.9	3.8	16	235	26	382			
FRI	19	2.01	0.00	1.77	0.1035	11.6	7.3	3.2	285	4778	560	9388	533	8935	790	13243	12.4	6.9	2.3	19	280	29	428			
SAT	20	1.98	0.17	1.77	0.0976																					
SUN	21	2.05	0.07	1.72	0.0898																					
MON	22	1.98	0.02	1.61	0.1059	11.8	7.4	5.2	200	3303	250	4128	284	4690	320	5284	13.1	6.9	4.1	18	242	30	403	10.8	31	
TUE	23	2.20	0.00	1.85	0.1061	11.4	7.2	8.2	265	4862	460	8440	340	6238	480	8807	12.7	6.8	3.9	14	216	23	355	9.2	26	
WED	24	2.07	0.24	1.70	0.1136	12.3	7.4	6.2	270	4661	440	7596	405	6992	680	11739	12.1	6.8	3.4	16	227	23	326			
THU	25	2.07	0.38	1.71	0.1282	12.6	7.7	8.0	260	4489	430	7423					13.4	6.8	3.4	17	242	23	328			
FRI	26	2.15	0.24	1.78	0.1031	11.6	7.4	4.1	230	4124	410	7352	480	8607	690	12372	11.8	6.8	2.8	17	252	24	356			
SAT	27	2.12	0.01	1.82	0.1000																					
TOTAL		59.84	2.76	52.55	2.8482																					
MAXIMUM		2.31	0.38	2.18	0.1282	12.9	7.7	8.2	420	8091	560	10166	1740	27282	790	13451	14.3	7.0	4.5	75	1226	30	465	18.9	83	
MINIMUM		1.88	0.00	1.61	0.0668	10.4	7.1	3.2	50	851	120	2042	240	4363	320	5284	11.0	6.8	2.3	12	197	20	324	8.8	5	
AVERAGE*		2.14	0.10	1.88	0.102	11.51		6.5	231	4130	382	6824	622	10916	544	9657	12.5		3.4	19	300	25	380	11.7	21	
Number of Analyses		28	28	28	28	20	20	20	20	20	20	20	17	17	17	17	20	20	20	20	20	20	20	6	8	

2016	
Hrd. mg/l	90
Alk. mg/l	
Tox. TUC	N/A

2015 Metals		
	ug/L (ppm)	LBS
Copper	21.0	0.34
Copper		0.00
Lead		0.00
Silver		0.00
Zinc		0.00
***NH3 mg/L	16.0	262

% REMOVAL	
B.O.D.	94
S.S.	92
Floating Solids	
Waste, or Foam	
Pass/Fail	P

WEEK	WEEKLY AVERAGE				WEEKLY
	BOD		TSS		COLIFORM
	mg/l	lbs	mg/l	lbs	Geo. Mean
1	24	395	28	462	13
2	24	388	17	270	10
3	25	382	15	231	46
4	25	354	16	236	28
MAX	25	395	28	462	46

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

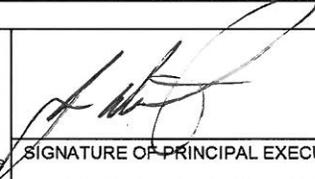
MONITORING PERIOD: 2/1/2016

TO 2/29/2016

OUTFALL / MONITORING POINT: 001A MENDENHALL RIVER DIFFUSER

NO DISCHARGE:

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
Temperature (C) 1 - Final Effluent 00010	Sample meas.	*****	*****		*****	12.5	14.3		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	Report daily maximum	DEG.C		5X Weekly	Grab
Dissolved Oxygen 1 - Final Effluent 00300	Sample meas.	*****	*****		2.3	*****	4.5		0		
	Permit reqmt.	*****	*****		Report daily minimum	*****	Report daily maximum	mg/l		Monthly	Grab
Biochemical Oxygen Demand (BOD5) 1 - Final Effluent 00310	Sample meas.	380	465		*****	25	30		0		
	Permit reqmt.	1226 monthly average	2452 daily maximum	lbs/day	*****	30 monthly average	60 daily maximum	mg/l		2X Monthly	24-Hr Composite
Biochemical Oxygen Demand (BOD5) G - Influent 00310	Sample meas.	*****	*****		*****	382	*****		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	*****	mg/l		2X Monthly	24-Hr Composite
Biochemical Oxygen Demand (BOD5) W - See Comments 00310	Sample meas.	395	*****		*****	25	*****		0		
	Permit reqmt.	1839 weekly average	*****	lbs/day	*****	45 weekly average	*****	mg/l		2X Monthly	24-Hr Composite

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
		907.586.0393	16/3/14
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA NUMBER	Y M D

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TO 2/29/2016

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NO DISCHARGE:

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
pH 1 - Final Effluent 00400	Sample meas.	*****	*****		6.8	*****	7.0		0		
	Permit reqmt.	*****	*****		6.5 instantaneous minimum	*****	8.5 instantaneous maximum	S.U.		5X Weekly	Grab
Total Suspended Solids 1 - Final Effluent 00530	Sample meas.	300	1226		*****	19	75		1		
	Permit reqmt.	1226 monthly average	2452 daily maximum	lbs/day	*****	30 monthly average	60 daily maximum	mg/l		2X Monthly	24-Hr Composite
Total Suspended Solids G - Influent 00530	Sample meas.	*****	*****		*****	231	*****		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	*****	mg/l		2X Monthly	24-Hr Composite
Total Suspended Solids W - See Comments 00530	Sample meas.	462	*****		*****	28	*****		0		
	Permit reqmt.	1839 weekly average	*****	lbs/day	*****	45 weekly average	*****	mg/l		2X Monthly	24-Hr Composite
Ammonia Nitrogen (as N) 1 - Final Effluent 00610	Sample meas.	262	262		*****	16	16		0		
	Permit reqmt.	1165 monthly average	1655 daily maximum	lbs/day	*****	28.5 monthly average	40.5 daily maximum	mg/l		Monthly	24-Hr Composite

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TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA NUMBER	Y M D

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NO DISCHARGE:

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
Hardness, Total (as CaCO3) 1 - Final Effluent 00900	Sample meas.	*****	*****		*****	90	90		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	Report daily maximum	mg/l		Monthly	24-Hr Composite
Silver Total Recoverable 1 - Final Effluent 01079	Sample meas.	*****	*****		*****	N/A	N/A		N/A		
	Permit reqmt.	*****	*****		*****	Report monthly average	Report daily maximum	ug/l		See Permit Requirements	24-Hr Composite
Zinc Total Recoverable 1 - Final Effluent 01094	Sample meas.	*****	*****		*****	N/A	N/A		N/A		
	Permit reqmt.	*****	*****		*****	Report monthly average	Report daily maximum	ug/l		See Permit Requirements	24-Hr Composite
Lead Total Recoverable 1 - Final Effluent 01114	Sample meas.	*****	*****		*****	N/A	N/A		N/A		
	Permit reqmt.	*****	*****		*****	Report monthly average	Report daily maximum	ug/l		See Permit Requirements	24-Hr Composite
Copper Total Recoverable 1 - Final Effluent 01119	Sample meas.	0.34	0.34		*****	21	21		0		
	Permit reqmt.	3.54 monthly average	7.63 daily maximum	lbs/day	*****	86.7 monthly average	187.0 daily maximum	ug/l		Monthly	24-Hr Composite

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TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <div style="font-family: cursive; font-size: 1.5em; text-align: center;">[Signature]</div>	AREA NUMBER	Y M D

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Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
Chronic Toxicity 1 - Final Effluent TTOOO	Sample meas.	*****	*****		*****	N/A	N/A		N/A		
	Permit reqmt.	*****	*****		*****	5.1 monthly average	Report daily maximum	TUC		See Permit Requirements	24-Hr Composite
Floating solids, waste or visible foam-visual 1 - Final Effluent 45613	Sample meas.	*****	*****		*****	*****	P		0		
	Permit reqmt.	*****	*****		*****	*****	Report value	pass/fail		Monthly	Visual
Flow 1 - Final Effluent 50050	Sample meas.	2.1	2.3		*****	*****	*****		0		
	Permit reqmt.	Report monthly average	4.9 daily maximum	MGD	*****	*****	*****			Continuous	Recorded
Fecal Coliform 1 - Final Effluent 74055	Sample meas.	*****	*****		*****	21	83		0		
	Permit reqmt.	*****	*****		*****	112 monthly geometric mean	224 daily maximum	cts/100 ml		2X Weekly	Grab
Fecal Coliform W - See Comments 74055	Sample meas.	*****	*****		*****	46	*****		0		
	Permit reqmt.	*****	*****		*****	168 weekly geometric mean	*****	cts/100 ml		2X Weekly	Grab

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TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <div style="font-family: cursive; font-size: 1.5em; margin-top: 10px;">[Signature]</div>	AREA NUMBER	Y M D

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NO DISCHARGE:

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
BOD5 Minimum % Removal K - Percent Removal 81010	Sample meas.	*****	*****		94	*****	*****		0		
	Permit reqmt.	*****	*****		85 minimum	*****	*****	%		Monthly	Calculation
Total Suspended Solids Minimum % Removal K - Percent Removal 81011	Sample meas.	*****	*****		92	*****	*****		0		
	Permit reqmt.	*****	*****		85 minimum	*****	*****	%		Monthly	Calculation

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.

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