

MENDENHALL WASTEWATER TREATMENT FACILITY

Juneau, Alaska

July 2016

		FLOWS				Influent											Effluent								
DAY	DATE	SBR	precip	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	FECAL
		MGD	MGD	MGD	MGD																				
FRI	1	1.73	0.22	1.60	0.1048	15.9	7.5	5.0	280	4040	480	6926	500	7214	540	7791	17.7	6.9	2.2	18	240	18.0	240		
SAT	2	1.88	0.48	1.71	0.0990																				
SUN	3	1.67	0.00	1.54	0.0760																				
MON	4	1.66	0.00	1.44	0.0923	15.6	7.5	4.7									17.4	6.8	2.9						
TUE	5	1.83	0.01	1.63	0.1050	16.8	7.7	5.6	263	4014	340	5189	673	10271	780	11905	17.6	6.9	3.0	14	190	15	204	6.0	3
WED	6	1.86	T	1.62	0.1254	17.4	7.5	0.2	553	8578	340	5274	605	9385	420	6515	16.9	6.9	2.9	14	189	10	135	6.8	2
THU	7	1.86	T	1.69	0.1055	17.6	7.1	5.4	257	3987	490	7601	790	12255	640	9928	17.4	6.9	2.5	18	254	13	183		
FRI	8	1.76	T	1.63	0.0837	16.9	7.4	5.7	243	3567	410	6018	780	11449	490	7192	18.0	6.8	2.4	16	218	15	204		
SAT	9	1.79	T	1.55	0.0863																				
SUN	10	1.83	T	1.54	0.0792																				
MON	11	1.95	T	1.70	0.0897	15.7	7.3	5.6	230	3740	270	4391	1820	29599	660	10734	17.6	6.9	2.7	16	227	17	241	6.0	7
TUE	12	1.88	0.03	1.55	0.1105	16.7	7.0	5.7	313	4908	610	9564	815	12779	760	11916	18.3	6.8	3.0	17	220	17	220	7.5	34
WED	13	1.89	0.03	1.58	0.1279	17.6	7.2	5.4	450	7093	650	10246	925	14580	670	10561	17.8	6.8	3.1	26	343	27	356		
THU	14	2.04	0.02	1.60	0.1327	16.8	7.5	5.2	470	7996	630	10719	460	7826	500	8507	17.4	6.7	2.1	31	414	47	627		
FRI	15	1.80	T	1.59	0.1196	17.4	7.2	4.0	360	5404	450	6755	370	5554	600	9007	18.0	6.7	2.5	24	318	29	385		
SAT	16	1.81	0.00	1.51	0.0883																				
SUN	17	1.69	0.00	1.42	0.0886																				
MON	18	1.82	0.00	1.61	0.0807	16.7	7.5	4.5									18.6	6.9	3.7					7.1	3
TUE	19	1.84	0.00	1.65	0.1012	16.5	7.2	5.2	270	4143	410	6292	480	7366	610	9361	18.6	6.8	2.9	15	206	19	261	7.3	3
WED	20	1.72	0.12	1.50	0.1020	18.9	7.4	0.1	395	5666	530	7603	500	7172	620	8894	17.9	7.0	2.1	15	188	19	238		
THU	21	1.78	0.24	1.65	0.1041	17.3	7.1	3.7	360	5344	800	11876	350	5196	720	10689	18.1	6.8	2.5	23	317	27	372		
FRI	22	1.67	0.16	1.64	0.0820	17.8	7.2	3.9	230	3203	390	5432	630	8775	420	5850	18.0	6.8	2.5	17	233	21	287		
SAT	23	1.93	1.00	1.76	0.0706																				
SUN	24	1.94	0.08	1.65	0.0683																				
MON	25	1.98	0.14	1.81	0.0752	16.0	7.5	5.4	185	3055	310	5119	387	6391	590	9743	18.1	6.9	3.5	17	257	25	377	8.5	5
TUE	26	1.78	0.41	1.76	0.1285	16.1	7.7	4.6	215	3192	260	3860	340	5047	400	5938	17.9	6.9	2.5	12	176	15	220	7.6	10
WED	27	2.31	0.76	2.04	0.0987	16.2	7.2	4.8	235	4527	310	5972	330	6358	350	6743	17.4	6.8	3.2	19	323	13	221		
THU	28	2.48	0.15	2.13	0.1237	16.9	7.2	0.1	300	6205	410	8480	550	11376	510	10548	17.7	6.7	2.9	18	320	18	320		
FRI	29	2.16	0.17	1.86	0.1021	16.2	7.2	5.5	293	5278	340	6125	460	8287	450	8106	17.7	6.7	2.4	15	233	17	264		
SAT	30	2.09	T	1.83	0.0942																				
SUN	31	1.93	T	1.67	0.0701																				
TOTAL		58.36	4.02	51.46	3.016																				
MAXIMUM		2.48	1.00	2.13	0.133	18.9	7.7	5.7	553	8578	800	11876	1820	29599	780	11916	18.6	7.0	3.7	31	414	47	627	8.5	34
MINIMUM		1.66	0.00	1.42	0.068	15.6	7.0	0.1	185	3055	260	3860	330	5047	350	5850	16.9	6.7	2.1	12	176	10	135	6.0	2
AVERAGE *		1.88	0.18	1.66	0.097	16.8		4.3	311	4944	444	7023	619	9836	565	8944	17.8		2.7	18	256	20	282	7.1	5
Number of Analyses		31	22	31	31	21	21	21	19	19	19	19	19	19	19	19	21	20	20	18	18	18	18	8	8

July 1st, 2nd and 31st are not calculated in the weekly averages.

6/16/2016 Effluent Composite Priority Pollutants						
NO3/NO2	NH3	FOG	Alk	T. PHOS	TDS	TKN
mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L
<1.0	19	ND	160	1	220	19

2015	
Hrd mg/l	71
Toxicity	NA
Alk mg/l	

7/5/16

2015 Metals		
	ug/L (ppm)	LBS
Copper	15.0	0.20
Copper		
Lead	NA	
Silver	NA	
Zinc	NA	
***NH3 mg/L	23.0	313

7/5/16

% REMOVAL	
B.O.D	95
S.S	94
Floating Solids	
Waste, or Foam	
Pass/Fail	P

7/5/16

WEEK	WEEKLY AVERAGE				WEEKLY
	B.O.D		TSS		COUFORM
	mg/l	lbs	mg/l	lbs	Geo. Mean
1	13	182	16	213	2
2	27	366	23	304	15
3	22	289	18	236	3
4	18	280	16	262	7
MAX	27	366	23	304	15

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: 7/1/2016

TO 7/31/2016

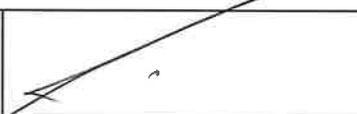
OUTFALL / MONITORING POINT: 001A MENDENHALL RIVER DIFFUSER

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.	*****	*****		*****	17.8	18.6		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	Report daily maximum	DEG.C		5X Weekly	Grab
Dissolved Oxygen 1 - Final Effluent 00300	Sample meas.	*****	*****		2.1	*****	3.7		0		
	Permit reqmt.	*****	*****		Report daily minimum	*****	Report daily maximum	mg/l		Monthly	Grab
Biochemical Oxygen Demand (BOD5) 1 - Final Effluent 00310	Sample meas.	282	627		*****	20	47		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.	*****	*****		*****	444	*****		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	*****	mg/l		2X Monthly	24-Hr Composite
Biochemical Oxygen Demand (BOD5) W - See Comments 00310	Sample meas.	366	*****		*****	27	*****		0		
	Permit reqmt.	1839 weekly average	*****	lbs/day	*****	45 weekly average	*****	mg/l		2X Monthly	24-Hr Composite

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
GRIEKO TEMPEL
SR. OPERATOR
 TYPED OR PRINTED

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

TELEPHONE	DATE
<i>907-586-0393</i>	<i>16/08/10</i>
AREA NUMBER	Y M D

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

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

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 LOCATION: 2009 RADCLIFFE RD
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PERMIT NUMBER: AK0022951

MONITORING PERIOD: 7/1/2016

TO 7/31/2016

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				
pH 1 - Final Effluent 00400	Sample meas.	*****	*****		6.7	*****	7.0		0		
	Permit reqmt.	*****	*****		6.3 instantaneous minimum	*****	8.5 instantaneous maximum	S.U.		5X Weekly	Grab
Total Suspended Solids 1 - Final Effluent 00530	Sample meas.	256	414		*****	18	31		0		
	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.	*****	*****		*****	311	*****		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	*****	mg/l		2X Monthly	24-Hr Composite
Total Suspended Solids W - See Comments 00530	Sample meas.	304	*****		*****	23	*****		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.	*****	*****		*****	23	23		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	Report 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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PERMIT NUMBER: AK0022951

MONITORING PERIOD: 7/1/2016

TO 7/31/2016

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				
Hardness, Total (as CaCO3) 1 - Final Effluent 00900	Sample meas.	*****	*****		*****	71	71		0		
	Permit reqmt.	*****	*****		*****	Report monthly average	Report daily maximum	mg/l		Monthly	24-Hr Composite
Silver Total Recoverable 1 - Final Effluent 01079	Sample meas.	*****	*****		*****	NA	NA		0		
	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.	*****	*****		*****	NA	NA		0		
	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.	*****	*****		*****	NA	NA		0		
	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.	0.20	0.20		*****	15	15		0		
	Permit reqmt.	1.82 monthly average	3.92 daily maximum	lbs/day	*****	44.5 monthly average	95.8 daily maximum	ug/l		Monthly	24-Hr Composite

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
GRIEKO KEMPEL
SK. OPERATOR
 TYPED OR PRINTED

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

TELEPHONE	DATE
907.586.0393	16/08/10
AREA NUMBER	Y M D

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 Juneau, AK 99801

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

PERMIT NUMBER: AK0022951

MONITORING PERIOD: 7/1/2016

TO 7/31/2016

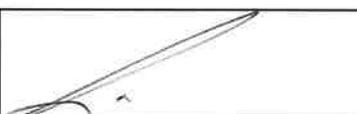
OUTFALL / MONITORING POINT: 001A MENDENHALL RIVER DIFFUSER

NO DISCHARGE:

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Average	Maximum		Minimum	Average	Maximum				
Chronic Toxicity 1 - Final Effluent TTOO	Sample meas.	*****	*****		*****	NA	NA		0		
	Permit reqmt.	*****	*****		*****	Report 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.	1.66	2.13		*****	*****	*****		0		
	Permit reqmt.	Report monthly average	4.9 daily maximum	MGD	*****	*****	*****			Continuous	Recorded
Fecal Coliform 1 - Final Effluent 74055	Sample meas.	*****	*****		*****	5	34		0		
	Permit reqmt.	*****	*****		*****	200 monthly geometric mean	800 daily maximum	cts/100 ml		Weekly	Grab
Fecal Coliform W - See Comments 74055	Sample meas.	*****	*****		*****	15	*****		0		
	Permit reqmt.	*****	*****		*****	400 weekly geometric mean	*****	cts/100 ml		Weekly	Grab

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GRIEKO TEMPEL
SR. OPERATOR
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TELEPHONE	DATE
907.586.0393	7/28/16
AREA NUMBER	Y M D

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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: 7/1/2016

TO 7/31/2016

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				
BOD5 Minimum % Removal	Sample meas.	*****	*****		95	*****	*****		0		
K - Percent Removal 81010	Permit reqmt.	*****	*****		85 minimum	*****	*****	%		Monthly	Calculation
Total Suspended Solids Minimum % Removal	Sample meas.	*****	*****		94	*****	*****		0		
K - Percent Removal 81011	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.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>GRIEKO TEMPEL</i> Sr. OPERATOR	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 <i>907.586.0393</i>	DATE <i>16/08/10</i>
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA NUMBER	Y M D