

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

MINOR
(SUBR 01)
F - FINAL

PERMITTEE NAME/ADDRESS		AK0021407		001 A							
NAME: JUNEAU, CITY AND BOROUGH OF		PERMIT NUMBER		DISCHARGE NUMBER							
ADDRESS: 155 SOUTH SEWARD		MONITORING PERIOD		YEAR MO DAY							
JUNEAU, ALASKA 99801		YR	MO	DAY	2003	09	30				
FACILITY: AJUKE BAY TREATMENT FACILITY		FROM		TO							
LOCATION: JUNEAU, ALASKA		2003		09 01							
				MAJOR (SUBR 01)							
PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG, CENTIGRADE	SAMPLE MEASUREMENT	*****	*****		*****	14.7	15.6	(04)	0	5/7	
00010 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT DAILY AVG	REPORT DAILY MAX	DEG. C	0	DAILY	GRAB
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	4	4	(26)	*****	6	6	(19)	0	1/MO	
00310 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	25 DAILY AVG	50 DAILY MAX	LBS/DAY	*****	30 DAILY AVG	60 DAILY MAX	MG/L	0	ONCE/MONTH	COMP 24
pH	SAMPLE MEASUREMENT	*****	*****		6.1	*****	6.7	(12)	0	5/7	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MIN.	*****	9.0 MAXIMUM	SU	0	DAILY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	2	2	(26)	*****	4	4	(19)	0	1/MO	
00630 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	25 DAILY AVG	50 DAILY MAX	LBS/DAY	*****	30 DAILY AVG	60 DAILY MAX	MG/L	0	ONCE/MONTH	COMP 24
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****		*****	0.00	0.00	(25)	0	1/MO	
00545 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT DAILY AVG	REPORT DAILY MAX	ML/L	0	DAILY	GRAB
COI FORM, FFCAL MF, M-FC BROTH, 44.5C	SAMPLE MEASUREMENT	*****	*****		*****	2	2	(13)	0	1/MO	
31616 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	200 30.DAY GEO	400 7.DAY GEO	# / 100 ML	0	ONCE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.104	*****	(03)	*****	*****	*****		0	1/1	CONT.
50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	0	DAILY	
<p>I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SE 18 USC 1001 AND 22 USC 1319 (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$ 10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 5 MONTHS AND SIX YEARS.)</p>											
NAME/TITLE PRINCIPAL EXEC. OFFICER		TELEPHONE		YEAR	MONTH	DAY					
SCOTT JEFFERS, WW UTILITY SUPERINTENDENT		907	586	0393	2003	10 08					
COMMENT AND EXPLANATION OF ANY VIOLATIONS (REFERENCE ALL ATTACHMENTS HERE)											PG 1 OF 2

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PERMITTEE NAME/ADDRESS		AK0021407		001 A	
NAME: JUNEAU, CITY AND BOROUGH OF		PERMIT NUMBER		DISCHARGE NUMBER	
ADDRESS: 155 SOUTH SEWARD		MONITORING PERIOD			
JUNEAU, ALASKA 99801		YEAR	MONTH	DAY	
FACILITY: AUKA BAY TREATMENT FACILITY		2003	09	01	
LOCATION: JUNEAU, ALASKA		FROM		TO	
		MAJOR (SUBR 01)			

PARAMETER		QUANTITY OF LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MIN.	AVERAGE	MAXIMUM	UNITS			
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	1.1	3.00	(19)	0	777	
60060 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT DAILY AVG	REPORT DAILY MAX	MGL		DAILY	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										

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NAME/TITLE PRINCIPAL EXEC. OFFICER		TELEPHONE		YEAR	MONTH	DAY
SCOTT JEFFERS, WW UTILITY SUPERINTENDENT		907	586	0393	2003	10
COMMENT AND EXPLANATION OF ANY VIOLATIONS (REFERENCE ALL ATTACHMENTS HERE)						
CONCERNING VIOLATIONS PLEASE SEE ATTACHED.						

AUKE BAY WASTEWATER TREATMENT FACILITY
Juneau, Alaska

September 2003

EPA REPORT

DAY	DATE	WEATHER		FLOWS		INFLUENT				EFFLUENT						MISCELLANEOUS								
		TEMP °F	RAIN FALL INCHES	INFLUENT MGD	WASTE SLUDGE MGD	TEMP °C	pH	D.O. mg/L	S.S. mg/L	S.S. LBS	B.O.D. mg/L	B.O.D. LBS	TEMP °C	pH	D.O. mg/L	S.S. mg/L	S.S. LBS	B.O.D. mg/L	B.O.D. LBS	FECAL COLIFORM /100 ml	Cl ₂ RESIDUAL mg/L	Cl ₂ USED LBS	EFFLUENT SETTLEABLE SOLIDS	
SUN	31	51	0.15	0.09841	0.00150							15.5	6.2	3.2							0.52	2.68		
MON	1	53	1.22	0.11060	0.00150	16.1	6.7	7.4				15.4	6.2	3.2	4.1	2.4	6.3	3.7			1.20	2.68	0.00	
TUE	2	55	0.26	0.11440	0.00150	16.1	6.3	7.4				15.4	6.2	2.7						2	0.40	2.01	0.00	
WED	3	53	0.20	0.09000	0.00150	16.9	6.7	6.7	144.0	124.3	123.0	106.2	15.5	6.3	2.0						0.96	3.35	0.00	
THU	4	52	0.00	0.09507	0.00000	15.7	6.8	6.3				15.5	6.3	2.0							1.03	4.02	0.00	
FRI	5	48	0.19	0.08318	0.00150	16.1	7.2	6.1				15.6	6.6	2.3							1.28	4.69	0.00	
SAT	6	51	0.16	0.08167	0.00000																3.00	4.02		
SUN	7	55	0.47	0.14600	0.00000																3.00	4.02		
MON	8	51	1.04	0.14348	0.00300	13.9	6.5	8.2				14.1	6.2	6.8							1.50	4.69	0.00	
TUE	9	53	0.02	0.09070	0.00150	13.8	6.4	7.7				13.8	6.1	4.1							1.31	4.69	0.00	
WED	10	50	0.49	0.12615	0.00150	15.8	6.6	8.5				14.8	6.2	2.4							2.20	4.02	0.00	
THU	11	52	0.11	0.12066	0.00150	14.1	6.4	7.8				14.1	6.2	3.0							0.59	3.35	0.00	
FRI	12	55	0.37	0.11967	0.00150	14.6	6.9	9.0				14.5	6.5	3.7							1.93	4.02	0.00	
SAT	13	50	1.36	0.13987	0.00150																0.87	3.35		
SUN	14	48	0.22	0.11610	0.00150																0.96	4.02		
MON	15	44	0.00	0.07078	0.00150	13.9	7.0	9.4				14.2	6.5	4.2							0.70	3.35	0.00	
TUE	16	42	0.00	0.07840	0.00150	11.8	6.5	6.6				13.7	6.3	2.1							0.37	2.01	0.00	
WED	17	45	0.00	0.08570	0.00150	15.4	6.6	6.2				14.5	6.3	1.8							0.65	2.68	0.00	
THU	18	44	0.25	0.07389	0.00400	17.0	7.0	6.4				14.5	6.7	2.6							0.82	2.68	0.00	
FRI	19	46	0.20	0.09641	0.00450	16.6	7.0	6.1				15.3	6.3	2.0							2.20	3.30	0.00	
SAT	20	49	0.57	0.08199	0.00200																1.18	5.36		
SUN	21	44	0.31	0.09336	0.00150																0.30	3.35		
MON	22	53	0.00	0.07389	0.00150	13.6	6.9	8.8				14.8	6.4	3.3							0.05	4.69	0.00	
TUE	23	44	0.27	0.12430	0.00200	14.0	6.9	4.8				14.9	6.2	2.1							1.63	3.35	0.00	
WED	24	50	0.95	0.09271	0.00300	13.3	7.0	7.1				14.0	6.3	3.3							0.57	2.01	0.00	
THU	25	54	0.28	0.10429	0.00300	14.6	6.7	6.4				14.5	6.4	2.7							0.07	0.67	0.00	
FRI	26	53	0.25	0.11360	0.00300	13.6	7.1	8.5				14.7	6.0	2.4							0.34	2.01	0.00	
SAT	27	47	1.20	0.13380	0.00100																0.90	3.35	0.00	
TOTAL			10.01	2.09007	0.04050																	96.48		
MAXIMUM		55	1.36	0.14600	0.00450	18.6	7.2	9.4	144.0	124.3	123.0	106.2	15.6	6.7	6.8	4.1	2.4	6.3	3.7	2.0	0.05	0.67	0.00	
MINIMUM		42	0.00	0.07078	0.00000	11.8	6.3	4.8	144.0	124.3	123.0	106.2	13.7	6.1	1.8	4.1	2.4	6.3	3.7	2.0	0.05	0.67	0.00	
AVERAGE		49.6	0.38	0.10350	0.00177	14.9	6.8	7.3	144.0	124.3	123.0	106.2	14.7	6.3	3.0	4.1	2.4	6.3	3.7	2	1.12	3.45	0.00	

COMMENTS:
*GEOMETRIC MEAN WAS USED TO CALCULATE THE AVERAGE FECAL COLIFORM COLONIES

WEEK	WEEKLY AVERAGE				WEEKLY	
	BOD		TSS		CHLORINE COLIFORM	
	mg/l	lbs	mg/l	lbs	mg/l	Geo. Mean
00-09	6.3	3.7	4.1	2.4	1.3129	3.4
10-16					1.6286	4.0
17-23					0.9829	3.6
24-30					0.5514	2.8
MAX	6.3	3.7	4.1	2.4	1.6286	4.0

% REMOVAL	
B.O.D.	95
S.S.	98