

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

Form Approved.
OMB No. 2040-0004

MAJOR (SUB 01)
F - FINAL
EFFLUENT
*** NO DISCHARGE
NOTE: Read instructions before completing this form.

PERMITTEE NAME/ADDRESS (Include Facility name/Location if different)

NAME: JUNEAU, CITY AND BOROUGH OF
ADDRESS: 155 SOUTH SEWARD,
JUNEAU, ALASKA 99801
FACILITY: JUNEAU-DOUGLAS TREATMENT PLANT
LOCATION: JUNEAU, ALASKA 99801
ATT: Scott Jeffers WW Utilities Superintendent

AK-002321-3
PERMIT NUMBER

001 A
DISCHARGE NUMBER

MONITORING PERIOD		YEAR		MO		DAY	
YR	MO	DAY	YR	MO	DAY	YR	MO
2003	3	1	2003	3	31		

FROM

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TEMPERATURE, WATER DEG, CENTIGRADE 00010 1 0 0	*****	*****	*****	*****	*****	12.0	0	1/7	GRAB
EFFLUENT GROSS VALUE OXYGEN, DISSOLVED (DO) 00300 1 0 0	*****	*****	*****	4	*****	REPORT DAILY MAX 5	0	1/7	GRAB
EFFLUENT GROSS VALUE BOD, 5-DAY (20 DEG. C) 00310 G 0 0	*****	*****	*****	2.0 Daily Min.	*****	17.0 DAILY MAX	0	ONCE/ WEEK	GRAB
RAW SEW/INFLUENT BOD, 5-DAY (20 DEG. C) 00310 W 0 0	*****	*****	*****	*****	116.9	*****	0	1/7	COMP 24
SEE COMMENTS BELOW BOD, 5-DAY (20 DEG. C) 00310 W 0 0	*****	*****	*****	*****	REPORT MO AVG	*****	0	ONCE/ MONTH	COMP 24
EFFLUENT GROSS VALUE pH 00400 1 0 0	*****	*****	*****	*****	11.3	*****	0	1/30	COMP 24
EFFLUENT GROSS VALUE SOLIDS, TOTAL SUSPENDED 00530 G 0 0	*****	*****	*****	*****	45 WKLY AVG	*****	0	ONCE/ MONTH	COMP 24
RAW SEW/INFLUENT REQUIREMENT 00530 G 0 0	*****	*****	*****	*****	11.3	11.3	0	ONCE/ MONTH	COMP 24
	*****	*****	*****	*****	30 MO AVG	60 DAILY MAX	0	ONCE/ MONTH	COMP 24
	*****	*****	*****	7.1	*****	7.6	0	ONCE/ MONTH	COMP 24
	*****	*****	*****	6.0 MIN.	*****	8.5 MAXIMUM	0	5/7	GRAB
	*****	*****	*****	*****	255	*****	0	WEEK DAYS	GRAB
	*****	*****	*****	*****	REPORT MO AVG	*****	0	ONCE/ MONTH	COMP 24

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. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

NAME/TITLE: Scott Jeffers
PRINCIPAL EXECUTIVE OFFICER
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
OFFICER OR AUTHORIZED AGENT
TELEPHONE: 789-9919
DATE: 2003
AREA CODE: 907
PHONE NUMBER: 789-9919
YEAR: 2003
MO: 4
DAY: 9

COMMENT AND EXPLANATION OF ANY VIOLATIONS
TYPED OR PRINTED
Letter dated April 9, 2003
REFERENCE ALL ATTACHMENTS HEREIN

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ATT: Scott Jeffers WW Utilities Superintendent

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MONITORING PERIOD			
YR	MO	DAY	TO
2003	3	1	
YEAR	MO	DAY	
2003	3	31	

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
SOLIDS, TOTAL SUSPENDED	162.0	*****	(26)	*****	19.5	*****	(19)	0		
00530 W 0 0	1035	*****	LBS/DAY	*****	45	*****	MG/L	0	5/7	COMP 24
SEE COMMENTS BELOW	193.2	388.6	(26)	*****	18.3	27.2	(19)	0	ONCE/MONTH	COMP 24
SOLIDS, TOTAL SUSPENDED	690	1380	LBS/DAY	*****	30	60	MG/L	0	5/7	COMP 24
00530 1 0 0	MO AVG	DAILY MAX		*****	MO AVG	DAILY MAX		0	ONCE/MONTH	COMP 24
EFFLUENT GROSS VALUE	N/A	N/A	*****	*****	N/A	N/A	(19)	0	1/180	COMP 24
NITROGEN, AMMONIA	REPORT MO AVG	REPORT DAILY MAX	*****	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L	0	SEMI-ANNUAL	COMP 24
00610 1 0 0	*****	*****	*****	*****	30	*****	(13)	0	1/7	GRAB
EFFLUENT GROSS VALUE	*****	*****	*****	*****	800	*****	#100ML	0	ONE/WEEK	GRAB
COLIFORM, FECAL MF.	*****	*****	*****	*****	WKLY GEO	*****	(13)	0	1/7	GRAB
31616 W 0 0	*****	*****	*****	*****	18	30		0	ONE/WEEK	GRAB
EFFLUENT GROSS VALUE	*****	*****	*****	*****	400	1200	#100ML	0	7/7	RECORDED
COLIFORM, FECAL MF.	1.2260	1.7650	(3)	*****	MO GEO	DAILY MAX	*****	0	CONTINUOUS	RECORDED
31616 1 0 0	*****	*****	*****	*****	*****	*****	*****	0	1/30	CALCTD
EFFLUENT GROSS VALUE	2.76	6.0	MGD	90	*****	*****	(23)	0	ONCE/MONTH	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	*****	*****	*****	*****	*****	*****	PERCENT	0		
50050 1 0 0	*****	*****	*****	*****	*****	*****	*****	0		
EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	*****	0		
BOD, 5-DAY PERCENT REMOVAL	*****	*****	*****	*****	*****	*****	*****	0		
81010 K 0 0	*****	*****	*****	*****	*****	*****	*****	0		
PERCENT REMOVAL	*****	*****	*****	*****	*****	*****	*****	0		
PERCENT REMOVAL	*****	*****	*****	*****	*****	*****	*****	0		

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED 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. SEE 18 U.S.C. 1001 AND 33 U.S.C. & 1319.
(Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

NAME/TITLE: PRINCIPAL EXECUTIVE OFFICER
Scott Jeffers
Wastewater Utilities Superintendent

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
Scott Jeffers

TELEPHONE: (907) 788-9919
PHONE NUMBER: 788-9919
DATE: 2003 4 9
YEAR: 2003
MO: 4
DAY: 9

COMMENT AND EXPLANATION OF ANY VIOLATIONS
TYPED OR PRINTED
REFERENCE ALL ATTACHMENTS HERE
see page 1

EPA Form 3320-1 (03-09) Previous editions are Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.) 00434/981209 1804
PAGE 2 OF 3

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ATT: Scott Jeffers WW Utilities Superintendent

(2-16)
AK-002321-3
PERMIT NUMBER

001 A
DISCHARGE NUMBER

MONITORING PERIOD			
YR	MO	DAY	TO
2003	3	1	
			31

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 K 0 0	*****	*****	*****	93	*****	*****	(23)	0	1/30 ONCE/MONTH	CALCTD
PERCENT REMOVAL	*****	*****	*****	85 MIN.% RMV	*****	*****	PERCENT	0	1/90 ONCE/QUARTER	COMP 24
COPPER	*****	*****	*****	*****	N/A	N/A	(28)	0	1/90 ONCE/QUARTER	COMP 24
TOTAL RECOVERABLE 01119 1 0 0	*****	*****	*****	*****	REPORT MO AVG	REPORT DAILY MAX	ug/L	0	1/90 ONCE/QUARTER	COMP 24
EFFLUENT GROSS VALUE TOXICITY, M.galloprouvicialis TKG3P 1 0 0	*****	*****	*****	*****	*****	N/A	(73)	0	1/90 ONCE/QUARTER	COMP 24
EFFLUENT GROSS VALUE TOXICITY, D.excentricus TKF3N 1 0 0	*****	*****	*****	*****	*****	N/A	TUC	0	1/90 ONCE/QUARTER	COMP 24
EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	N/A	(73)	0	1/90 ONCE/QUARTER	COMP 24
MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	TUC	0	1/90 ONCE/QUARTER	COMP 24
MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	TUC	0	1/90 ONCE/QUARTER	COMP 24
MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	TUC	0	1/90 ONCE/QUARTER	COMP 24
MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	TUC	0	1/90 ONCE/QUARTER	COMP 24
MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	TUC	0	1/90 ONCE/QUARTER	COMP 24
MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	TUC	0	1/90 ONCE/QUARTER	COMP 24
MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	TUC	0	1/90 ONCE/QUARTER	COMP 24
MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	TUC	0	1/90 ONCE/QUARTER	COMP 24

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NAME/TITLE: PRINCIPAL EXECUTIVE OFFICER
Scott Jeffers
Wastewater Utilities Superintendent
TYPED OR PRINTED

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
Scott Jeffers

REFERENCE ALL ATTACHMENTS HERE
see page 1

TELEPHONE: (907) 789-9919
AREA CODE: 907
PHONE NUMBER: 789-9919

DATE: 2003 4 9
YEAR: 2003
MO: 4
DAY: 9

COMMENT AND EXPLANATION OF ANY VIOLATIONS

Juneau Douglas Wastewater Treatment Plant
1540 Thane Road
Juneau Alaska, 99801
(907) 586-5329

4 April 9, 2003

Jim Corpuz
USEPA, Region 10
NPDES Compliance Unit, OW-133
1200 Sixth Avenue
Seattle, WA 98101

Reference: NPDES Permit No. AK-002321-3
CERTIFIED MAIL: 70000520002020225270

Dear Mr. Corpuz,

This letter is to notify you we did not conduct an effluent BOD test in the reporting month of March as required by our permit. We did however, conduct a test on 31 March 2003 two days after the reporting month deadline. The results of this were 1 mg/L so you can see the results are well within standards of our permit.

That being said, I hope you can see how this mistake occurred and accept our plan to change our standard operation procedure to testing the first week of each month so this does not reoccur.

If you have any questions or concerns, please contact me at (907) 586-5329.

"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."

Sincerely,



Scott Larson, Interim Supervisor
Juneau-Douglas Treatment Plant

Copy: Chris Mead, EPA-Juneau
Clynda Case, ADEC-Juneau
CBJ-Wastewater Utility Superintendent
Joe Buck, CBJ-Director of Public Works
DMR, EPA copy
DMR, plant copy

JUNEAU-DOUGLAS WASTEWATER TREATMENT FACILITY

Juneau, Alaska

MARCH, 2003

EPA REPORT

DAY	DATE	WEATHER				INFLUENT				EFFLUENT							
		TEMP °F	RAIN FALL INCHES	HIGH TIDE FEET	J-D TIDE MGD	S.S. mg/L	BOD mg/L	BOD LBS	D.O. mg/L	pH	TEMP °C	S.S. mg/L	S.S. LBS	BOD mg/L	BOD LBS	FECAL Coliform /100 ml	
SUN	2		0.08	16.9	1.3930	156	1812				17.2	199.8					
MON	3	39	0.20	17.3	1.5940	210	2792			10.0	7.4						
TUE	4	40	0.47	17.3	1.7650	278	4092			9.8	7.3						
WED	5	33	0.00	16.9	1.3950	202	2350	126	1465	10.1	7.3	4.9	17.0	197.8	5.0		
THU	6	31	0.00	16.6	1.0840	210	1899			10.2	7.2		20.0	180.8			
FRI	7	20	0.00	16.1	1.0220					10.0	7.2						
SAT	8		0.00	15.5	0.9770												
SUN	9		0.00	14.7	0.9850	234	1922					16.8	138.0				
MON	10	19	0.00	13.9	0.9770	262	2135			9.6	7.6		18.0	146.7			
TUE	11	19	0.00	13.1	1.0120	252	2127			8.7	7.5		16.4	138.4			
WED	12	16	0.00	12.6	0.9830		82	668		9.7	7.6	5.0	20.8	170.5	8.0		
THU	13	12	0.58	12.9	0.9940	394	3266			9.7	7.4		21.4	177.4			
FRI	14	24	0.04	14.0	1.0540					8.5	7.3						
SAT	15		0.08	15.5	1.4560												
SUN	16		0.00	16.9	1.3960	302	3516					15.2	177.0				
MON	17	39	0.12	18.0	1.6470	217	2981			12.0	7.2		15.6	214.3			
TUE	18	38	0.18	18.6	1.5410	414	5321			11.0	7.3		20.4	262.2			
WED	19	43	0.01	18.9	1.3620	347	3942	56	636	9.4	7.3	4.1	16.4	186.3	30		
THU	20	40	0.18	19.4	1.5630	154	2007			9.0	7.4		27.2	354.6			
FRI	21	41	0.07	19.4	1.2580					9.9	7.4						
SAT	22		0.26	18.7	1.2310												
SUN	23		0.01	17.5	1.1340	192	1816					12.2	115.4				
MON	24	38	0.01	16.1	1.0790	214	1926			10.0	7.4		13.6	122.4			
TUE	25	39	0.00	14.6	0.9680	302	2438			9.6	7.4		17.0	137.2			
WED	26	42	0.00	13.6	0.9800	290	2370	204	1667	10.4	7.1	5.2	17.2	140.6	92.4		
THU	27	41	0.05	13.7	1.1630	220	2134			9.9	7.3		19.6	190.1			
FRI	28	43	0.03	14.4	1.1240					11.0	7.4						
SAT	29		0.16	15.3	1.1910												
TOTAL			2.53		34.3280												
MAXIMUM		43	0.58	19.40	1.7650	414	5321	204	1667	12.0	7.6	5.2	27.2	388.6	11.3	92.4	30
MINIMUM		12	0.00	12.60	0.9680	154	1812	56	636	8.5	7.1	4.1	12.2	115.4	11.3	92.4	5
AVERAGE		33	0.09	16.014	1.2260	255.3	2676	116.9	1109.1	9.9	7.3	4.82	18.27	193.2	11.3	92.4	18.25

COMMENTS:

3/12/03 * Influent Sampler Failure

The effluent sample information reported on the 26th of March was from the March 31st composite sample.

% REMOVAL	
B.O.D.	90.3
S.S.	92.8

Weekly TSS/BOD Aver.	
Copper	0.0 ug/L
NH3	0.0 mg/L
NH3	0.0 lbs

Weekly TSS/BOD Aver.		Weekly TSS/BOD		Weekly Coliform Geo. Mean	
mg/l	lbs	mg/l	lbs	mg/l	lbs
WEEK1	19.5	154.2			5.0
WEEK2	18.7	154.2			8.0
WEEK3	19.0	162.0			30.0
WEEK4	15.9	141.1	11.3	92.4	30.0
Max	18.3	152.9	11.3	92.4	13.8
	19.5	162.0	11.3	92.4	30.0