

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

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

Form Approved.
OMB No. 2040-0004
Approval Expires 05-31-98

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

NAME: JUNEAU, CITY AND BOROUGH OF
ADDRESS: MENDENHALL TREATMENT PLANT
155 SOUTH SEWARD,
JUNEAU, ALASKA 99801
FACILITY: MENDENHALL VALLEY SERVICE AREA
LOCATION: JUNEAU, ALASKA 99801
ATT: SCOTT JEFFERS, WW UTILITIES SUPT

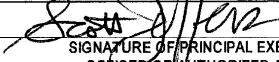
AK0022951
PERMIT NUMBER

001 A
DISCHARGE NUMBER

MONITORING PERIOD						
YR	MO	DAY	TO	YR	MO	DAY
2003	8	01		2003	8	31

PARAMETER	MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG, CENTIGRADE 00010 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	17.4	18.2	(04)	0	5/7	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MO AVG	REPORT DAILY MAX	DEG. °C		WEEK DAYS	GRAB
BOD, 5-DAY (20 DEG. C) 00310 G 0 0	SAMPLE MEASUREMENT	3802	4772	(26)	*****	253	311	(19)	0	1/7	
RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MAX	LBS/DAY	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L		WEEKLY	COMP 24
BOD, 5-DAY (20 DEG. C) 00310 W 0 0	SAMPLE MEASUREMENT	1839	*****	(26)	*****	45	*****	(19)	0	1/7	
SEE COMMENTS BELOW	PERMIT REQUIREMENT	WKLY AVG	*****	LBS/DAY	*****	WKLY AVG	*****	MG/L		WEEKLY	COMP 24
BOD, 5-DAY (20 DEG. C) 00310 1 0 0	SAMPLE MEASUREMENT	1226	2452	(26)	*****	30	60	(19)	0	1/7	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	MO AVG	DAILY MAX	LBS/DAY	*****	MO AVG	DAILY MAX	MG/L		WEEKLY	COMP 24
pH	SAMPLE MEASUREMENT	*****	*****	*****	6.5	*****	7.0	(12)	0	5/7	
00400 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	6.5 MIN.	*****	8.5 MAXIMUM	SU		WEEK DAYS	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	144.0	144.0	(19)	0	1/ month	
ALKALINITY AS CaCO3 00425 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	COMP 24
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L		WEEKLY	COMP 24
SOLIDS, TOTAL SUSPENDED 00530 G 0 0	SAMPLE MEASUREMENT	3581.6	4256.9	(26)	*****	238.3	282.0	(19)	0	1/7	
RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MAX	LBS/DAY	*****	REPORT MO AVG	REPORT DAILY MAX	MG/L		WEEKLY	COMP 24

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. § 319. (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 WW UTILITY SUPERINTENDENT		TELEPHONE 907 586-0393	DATE 2003 9 9
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE PHONE NUMBER	YEAR MO DAY
COMMENT AND EXPLANATION OF ANY VIOLATIONS *CONCERNING VIOLATION- PLEASE SEE ATTACHED. (REFERENCE ALL ATTACHMENTS HERE)			

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PARAMETER	MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 W 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	166.0	*****	(26)	*****	71.0	*****	(19)	0	1/7	
	PERMIT REQUIREMENT	1839	*****	LBS/DAY	*****	45	*****	MG/L		WEEKLY	COMP 24
	PERMIT REQUIREMENT	WKLY AVG				WKLY AVG					
SOLIDS, TOTAL SUSPENDED 00530 1 0 0	SAMPLE MEASUREMENT	139.8	166.0	(26)	*****	9.30	11.0	(19)	0	1/7	
	PERMIT REQUIREMENT	1226	2452	LBS/DAY	*****	30	60	MG/L		WEEKLY	COMP 24
	PERMIT REQUIREMENT	MO AVG	DAILY MAX		*****	MO AVG	DAILY MAX				
NITROGEN, AMMONIA TOTAL (AS N) 00810 1 0 0	SAMPLE MEASUREMENT	483.5	483.5	(26)	*****	31.0	31.0	(19)	1	1/ month	
	PERMIT REQUIREMENT	1079	1622	LBS/DAY	*****	26.4	39.7	MG/L		ONCE/ MONTH	COMP 24
	PERMIT REQUIREMENT	MO AVG	DAILY MAX		*****	MO AVG	DAILY MAX				
EFFLUENT GROSS VALUE SILVER	SAMPLE MEASUREMENT	0.017	0.017	(26)	*****	1.08	1.08	(28)	1	1/ month	
	PERMIT REQUIREMENT	0.036	0.072	LBS/DAY	*****	0.87	1.75	ug/L		ONCE/ MONTH	COMP 24
	PERMIT REQUIREMENT	MO AVG	DAILY MAX		*****	MO AVG	DAILY MAX				
TOTAL RECOVERABLE 01079 1 0 0	SAMPLE MEASUREMENT	0.56	0.56	(26)	*****	36.0	36.0	(28)	0	1/ month	
	PERMIT REQUIREMENT	2.92	6.09	LBS/DAY	*****	71.4	149.0	ug/L		ONCE/ MONTH	COMP 24
	PERMIT REQUIREMENT	MO AVG	DAILY MAX		*****	MO AVG	DAILY MAX				
EFFLUENT GROSS VALUE LEAD	SAMPLE MEASUREMENT	0.014	0.014	(26)	*****	0.9	0.9	(28)	0	1/ month	
	PERMIT REQUIREMENT	0.225	0.450	LBS/DAY	*****	5.5	11.0	ug/L		ONCE/ MONTH	COMP 24
	PERMIT REQUIREMENT	MO AVG	DAILY MAX		*****	MO AVG	DAILY MAX				
EFFLUENT GROSS VALUE COPPER	SAMPLE MEASUREMENT	0.187	0.187	(26)	*****	12.00	12.00	(28)	1	1/ month	
	PERMIT REQUIREMENT	0.342	0.858	LBS/DAY	*****	8.36	20.1	ug/L		ONCE/ MONTH	COMP 24
	PERMIT REQUIREMENT	MO AVG	DAILY MAX		*****	MO AVG	DAILY MAX				

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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER SCOTT JEFFERS WW UTILITY SUPERINTENDENT TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT (REFERENCE ALL ATTACHMENTS HERE)	TELEPHONE (907) 586-0393	DATE 2003 9 9
			AREA CODE PHONE NUMBER	YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS
*CONCERNING VIOLATION- PLEASE SEE ATTACHED.

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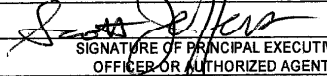
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PARAMETER (32-37)	MEASUREMENT	QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS			
COLIFORM, FECAL MF, M-FC BROTH, 44.3C 31616 W 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	0	3/7	
	PERMIT REQUIREMENT	*****	*****	*****		THREE TIMES/WEEK	GRAB
COLIFORM, FECAL MF, M-FC BROTH, 44.5C 31616 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	0	3/7	
	PERMIT REQUIREMENT	*****	*****	*****		THREE TIMES/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 P 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.8879	2.0500	(03)	0	7/7	
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MAX	MGD		CONTINUOUSLY	RECORDED
CHLORINE TOTAL RESIDUAL 50080 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	0.3419	(26)	0	5/7	CONT
	PERMIT REQUIREMENT	*****	1.635 DAILY MAX	LBS/DAY		WEEK DAYS	GRAB
EFFLUENT DILUTION RATIO 78480 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	0	7/7	
	PERMIT REQUIREMENT	*****	*****	*****		DAILY	CACTD
BOD, 5-DAY PERCENT REMOVAL 81010 K 0 0 PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****	*****	0	1/ month	
	PERMIT REQUIREMENT	*****	*****	*****		ONCE/MONTH	CACTD
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 K 0 0 PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****	*****	0	1/ month	
	PERMIT REQUIREMENT	*****	*****	*****		ONCE/MONTH	CACTD

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PARAMETER (32-37)	SAMPLE MEASUREMENT	QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE		
		AVERAGE	MAXIMUM	UNITS	MINIMUM					
TURBIDITY, LAB NTU 82079 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	10.66380952	21.37	(43)	0	7/7	RECORDED
HARDNESS, AS CaCO3 82394 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	55.00	55.00	(19)	0	1/ month	ONCE/ MONTH
DISSOLVED OXYGEN 00300 EFFLUENT GROSS VALUE	*****	*****	*****	*****	6.8	8.0	10.0	0	1/quarter	ONCE/ QUARTER
TOXICITY, CERIODAPHNIA CHRONIC 61406 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	3.3	(73)	0	10.0	TWICE/ YEAR
	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****
	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****
	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****
	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****

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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: SCOTT JEFFERS, WW UTILITY SUPERINTENDENT
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT: *Scott Jeffers*
TELEPHONE: (907) 586-0393
DATE: 2003 9 9

COMMENT AND EXPLANATION OF ANY VIOLATIONS CONCERNING VIOLATION- PLEASE SEE ATTACHED. (REFERENCE ALL ATTACHMENTS HERE)