

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

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 Superintendent

AK-002295-1
PERMIT NUMBER

MONITORING PERIOD			
YR	MO	DAY	TO
2006	2	1	

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

MAJOR (SUB 01)
F - FINAL
EFFLUENT
*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

001 A
DISCHARGE NUMBER

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM		MINIMUM	AVERAGE	MAXIMUM				UNITS
TEMPERATURE, WATER DEG, CENTIGRADE 00010 1 0 0	PERMIT MEASUREMENT	*****	*****	****	*****	11.4	12.1	(04)	0	5/7	GRAB
EFFLUENT GROSS VALUE BOD, 5-DAY (20 DEG. C) 00310 G 0 0	PERMIT MEASUREMENT	*****	*****	****	*****	279.5	323.0	DEG. C	0	1/7	COMP 24
RAW SEW/INFLUENT BOD, 5-DAY (20 DEG. C) 00310 G 0 0	PERMIT MEASUREMENT	*****	*****	(26)	*****	23.1	*****	(19)	0	1/7	COMP 24
SEE COMMENTS BELOW BOD, 5-DAY (20 DEG. C) 00310 W 0 0	PERMIT MEASUREMENT	*****	*****	(26)	*****	20.1	23.1	(19)	0	1/7	COMP 24
EFFLUENT GROSS VALUE pH 00400 1 0 0	PERMIT MEASUREMENT	*****	*****	****	6.5	6.5	6.9	(12)	0	5/7	GRAB
ALKALINITY, BICARBONATE as CaCO3 00425 1 0 0	PERMIT MEASUREMENT	*****	*****	****	*****	143.0	143.0	(19)	0	1/30	COMP 24
EFFLUENT GROSS VALUE SOLIDS, TOTAL SUSPENDED 00530 G 0 0	PERMIT MEASUREMENT	*****	*****	****	*****	214.0	240.0	(19)	0	1/7	COMP 24
RAW SEW/INFLUENT NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	PERMIT MEASUREMENT	*****	*****	LBS/DAY	*****	*****	*****	MG/L			

COMMENT AND EXPLANATION OF ANY VIOLATIONS
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with the system designed to assure that the 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.

(Reference all attachments here)

* Concerning violations-please see attached. The reporting period was from 01/29/2006 through 02/25/2006.
(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED).

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT


907 AREA CODE
586-0393 TELEPHONE
DATE MO DAY
2006 3 3

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DISCHARGE MONITORING REPORT (DMR)

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NAME: JUNEAU, CITY AND BOROUGH OF
ADDRESS: MENDENHALL TREATMENT PLANT
155 SOUTH SEWARD,
JUNEAU, ALASKA 99801
MENDENHALL VALLEY SERVICE AREA
JUNEAU, ALASKA 99801
ATTN: Scott Jeffers WW Utilities Superintendent

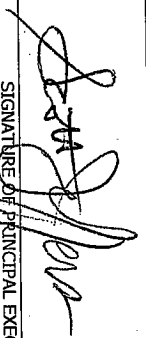
MAJOR (SUB 01)
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MONITORING PERIOD			
YR	MO	DAY	TO
2006	2	1	
YEAR	MO	DAY	NO. EX
2006	2		28
YEAR	MO	DAY	FREQUENCY OF ANALYSIS
2006	3		3

PARAMETER	X	QUANTITY OR LOADING			UNITS	QUALITY OR CONCENTRATION			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	MINIMUM		AVERAGE	MAXIMUM	MINIMUM				
SOLIDS, TOTAL SUSPENDED	MEASUREMENT	279.3	*****	*****	(26)	17.0	*****	*****	(19)	0	1/7	COMP 24
00530 G 0 0	PERMIT REQUIREMENT	1839	*****	*****		45	*****	*****				
SEE COMMENTS BELOW	PERMIT REQUIREMENT	WKL Y AVG	*****	*****	LBS/DAY (26)	WKL Y AVG	*****	*****	MG/L (19)	0	WEEKLY 1/7	COMP 24
SOLIDS, TOTAL SUSPENDED	MEASUREMENT	251.0	*****	*****	(26)	14.8	*****	*****	(19)	0	1/7	COMP 24
00530 G 0 0	PERMIT REQUIREMENT	1226	*****	*****		30	*****	*****				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	MO AVG	*****	*****	LBS/DAY (26)	MO AVG	*****	*****	MG/L (19)	0	1/30	COMP 24
NITROGEN AMMONIA	MEASUREMENT	213.6	*****	*****	(26)	13.0	*****	*****	(19)	0	1/30	COMP 24
TOTAL (as N)	PERMIT REQUIREMENT	1079	*****	*****		26.4	*****	*****				
00610 1 0 0	PERMIT REQUIREMENT	MO AVG	*****	*****	LBS/DAY (26)	MO AVG	*****	*****	MG/L (28)	0	1/30	COMP 24
SILVER	MEASUREMENT	0.014	*****	*****	(26)	0.87	*****	*****	(28)	0	1/30	COMP 24
TOTAL RECOVERABLE	PERMIT REQUIREMENT	0.036	*****	*****		0.87	*****	*****				
01079 1 0 0	PERMIT REQUIREMENT	MO AVG	*****	*****	LBS/DAY (26)	MO AVG	*****	*****	ug/L (28)	0	1/30	COMP 24
EFFLUENT GROSS VALUE	MEASUREMENT	0.85	*****	*****	(26)	51.8	*****	*****	(28)	0	1/30	COMP 24
ZINC	PERMIT REQUIREMENT	2.92	*****	*****		71.4	*****	*****				
TOTAL RECOVERABLE	PERMIT REQUIREMENT	MO AVG	*****	*****	LBS/DAY (26)	MO AVG	*****	*****	ug/L (28)	0	1/30	COMP 24
01094 1 0 0	PERMIT REQUIREMENT	0.22	*****	*****		1.3	*****	*****				
EFFLUENT GROSS VALUE	MEASUREMENT	0.022	*****	*****	(26)	1.3	*****	*****	(28)	0	1/30	COMP 24
LEAD	PERMIT REQUIREMENT	0.225	*****	*****		5.5	*****	*****				
TOTAL RECOVERABLE	PERMIT REQUIREMENT	MO AVG	*****	*****	LBS/DAY (26)	MO AVG	*****	*****	ug/L (28)	3	1/30	COMP 24
01114 1 0 0	PERMIT REQUIREMENT	0.554	*****	*****		33.7	*****	*****				
EFFLUENT GROSS VALUE	MEASUREMENT	0.554	*****	*****	(26)	33.7	*****	*****	(28)	3	1/30	COMP 24
COPPER	PERMIT REQUIREMENT	0.342	*****	*****		8.36	*****	*****				
TOTAL RECOVERABLE	PERMIT REQUIREMENT	MO AVG	*****	*****	LBS/DAY (26)	MO AVG	*****	*****	ug/L (28)	3	1/30	COMP 24
01119 1 0 0	PERMIT REQUIREMENT	0.858	*****	*****		20.1	*****	*****				
EFFLUENT GROSS VALUE	MEASUREMENT	0.858	*****	*****	(26)	33.7	*****	*****	(28)	3	1/30	COMP 24
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 the system designed to assure that the 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, and complete, I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.											
Scott Jeffers Wastewater Utilities Superintendent	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT											
AREA CODE	907	TELEPHONE	586-0393									
PHONE NUMBER		DATE										
YEAR	2006	MO	3									
DAY												

COMMENT AND EXPLANATION OF ANY VIOLATIONS

* Concerning violations- please see attached. The reporting period was from 01/29/2006 through 02/25/2006. (Reference all attachments here)

EPA Form 3320-1 (03-99) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED).

00434/981209 1904

PAGE 2 OF 4

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MONITORING PERIOD
YR MO DAY TO YEAR MO DAY
2006 2 1 2006 2 28

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		AVERAGE	MAXIMUM		MINIMUM	AVERAGE	MAXIMUM	UNITS			
FECAL COLIFORM MF, M-FC BROTH 44.5C	PERMIT REQUIREMENT	*****	*****	****	4.3	*****	400 WKLY GEO	*****	0	3/7	GRAB
31616 W 0 0	PERMIT REQUIREMENT	*****	*****	****	2.8	*****	200 MO GEO	400 DAILY GEO	0	3/7	GRAB
SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****	*****	0	7/7	RECORDED
50050 P 0 0	PERMIT REQUIREMENT	*****	*****	****	420.3	*****	*****	*****	0	7/7	RECORDED
EFFLUENT DILUTION RATIO	SAMPLE MEASUREMENT	*****	*****	****	10	*****	*****	*****	0	1/30	CALCULATED
78480 1 0 0	PERMIT REQUIREMENT	*****	*****	****	92.8	*****	*****	*****	0	1/30	CALCULATED
BOD, 5-DAY PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****	****	85	*****	*****	*****	0	1/30	CALCULATED
81010 K 0 0	PERMIT REQUIREMENT	*****	*****	****	93.1	*****	*****	*****	0	1/30	CALCULATED
SOLIDS, SUSPENDED PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****	****	85	*****	*****	*****	0	5/7	GRAB
81011 K 0 0	PERMIT REQUIREMENT	*****	*****	****	9.2	*****	*****	*****	0	5/7	GRAB
PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****	****	10.4	*****	*****	*****	0	5/7	GRAB
TURBIDITY, LAB NTU	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	*****	0	5/7	GRAB
82079 1 0 0	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****	*****	0	5/7	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	*****	0	5/7	GRAB
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Scott Jeffers Wastewater Utilities Superintendent	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT										
TYPED OR PRINTED											
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		AVERAGE	MAXIMUM	MINIMUM		AVERAGE	MINIMUM	REPORT MO AVG	REPORT DAILY MAX				
HARDNESS as CaCO3	MEASUREMENT	*****	*****	*****	****	*****	94.0	94.0	*****	(19)	0	1/30	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	****	*****	REPORT MO AVG	4.2	*****	MGL	0	ONCE/MONTH	GRAB
DISSOLVED OXYGEN	SAMPLE MEASUREMENT	*****	*****	*****	****	*****	2.2	*****	*****	MGL	0	1/90	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	****	*****	REPORT MINIMUM	*****	*****	MGL	0	ONCE/QUARTER	
TOXICITY, CERIODAPHNIA CHRONIC	SAMPLE MEASUREMENT	*****	*****	*****	****	*****	*****	*****	*****	MGL	0	1/182	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	****	*****	*****	*****	*****	TUC		TWICE/YEAR	
	SAMPLE MEASUREMENT	*****	*****	*****	****	*****	*****	*****	*****				
	PERMIT REQUIREMENT	*****	*****	*****	****	*****	*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	*****	****	*****	*****	*****	*****				
	PERMIT REQUIREMENT	*****	*****	*****	****	*****	*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	*****	****	*****	*****	*****	*****				
	PERMIT REQUIREMENT	*****	*****	*****	****	*****	*****	*****	*****				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Scott Jeffers
Wastewater Utilities Superintendent

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907 AREA CODE
586-0393 TELEPHONE
2006 YEAR
3 MO
3 DAY

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