

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: MENDEHALL TREATMENT PLANT
155 SOUTH SEWARD,
JUNEAU, ALASKA 99801
MENDENHALL VALLEY SERVICE AREA
JUNEAU, ALASKA 99801
ATTN: Scott Jeffers WW Utilities Superintendent

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

001 A
DISCHARGE NUMBER

MONITORING PERIOD			
YR	MO	DAY	TO
2006	6	1	
YEAR	MO	NO	DAY
2006	6	6	30

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			UNITS	QUALITY OR CONCENTRATION					NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE		
		AVERAGE	MAXIMUM	PERMIT REQUIREMENT		MINIMUM	AVERAGE	MAXIMUM	PERMIT REQUIREMENT	PERMIT REQUIREMENT					
TEMPERATURE, WATER DEG, CENTIGRADE	00010 1 0 0	*****	*****	*****	****	*****	*****	*****	*****	14.7	16.0	(04)	0	517	GRAB
EFFLUENT GROSS VALUE	BOD, 5-DAY (20 DEG. C)	4556.9	5074.4	*****	(26)	*****	*****	*****	*****	237.0	287.0	(19)	0		
00310 G 0 0	RAW SEW/INFLUENT	403.9	*****	*****	(26)	*****	*****	*****	*****	21.0	*****	(19)	0		
00310 W 0 0	BOD, 5-DAY (20 DEG. C)	1829	*****	*****	(26)	*****	*****	*****	*****	45	*****	(19)	0		
00310 1 0 0	SEE COMMENTS BELOW	403.9	438.5	*****	(26)	*****	*****	*****	*****	21.0	24.8	(19)	0		
00400 1 0 0	EFFLUENT GROSS VALUE	1226	2452	*****	(26)	*****	*****	*****	*****	30	60	(12)	0	517	GRAB
00425 1 0 0	ALKALINITY, BICARBONATE	*****	*****	*****	****	6.4	*****	*****	*****	*****	*****	(19)	0		
00530 G 0 0	SUSPENDED SOLIDS, TOTAL	*****	*****	*****	****	6.4	*****	*****	*****	*****	*****	(19)	0		
00530 G 0 0	RAW SEW/INFLUENT	2796.9	2828.9	*****	(26)	*****	*****	*****	*****	144.0	160.0	(19)	0		

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Scott Jeffers
WW Utilities Superintendent

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.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

907
AREA CODE
586-0393
TELEPHONE

2006
YEAR
7
MO
7
DAY

the reporting period was from 06/04/2006 through 07/01/2006.
COMMENT AND EXPLANATION OF ANY VIOLATIONS
(Reference all attachments here)

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

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 ADDRESS: MENDELHALL TREATMENT PLANT
 155 SOUTH SEWARD,
 JUNEAU, ALASKA 99801
 FACILITY: MENDELHALL VALLEY SERVICE AREA
 LOCATION: JUNEAU, ALASKA 99801
 ATT: Scott Jeffers WW Utilities Superintendent

AK-002295-1
 PERMIT NUMBER
 MONITORING PERIOD
 YR MO DAY TO YEAR MO DAY
 2006 6 1 2006 6 30
 DISCHARGE NUMBER
 001 A

PARAMETER	MEASUREMENT	QUANTITY OR LOADING			UNITS	QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE				
		AVERAGE	MAXIMUM	PERMIT		MINIMUM	AVERAGE	MAXIMUM				PERMIT			
SOLIDS, TOTAL SUSPENDED 00530 G 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT SAMPLE	1829 WKLY AVG	*****	*****	(26)	*****	45 WKLY AVG	*****	14.0	14.0	*****	19	0	2/MO	COMP 24
SOLIDS, TOTAL SUSPENDED 00530 G 0 0	PERMIT REQUIREMENT SAMPLE	1226 MO AVG	2452 DAILY MAX	0.52	(26)	*****	30 MO AVG	60 DAILY MAX	24.0	24.0	*****	19	0	2/MO	COMP 24
NITROGEN AMMONIA TOTAL (as N) 00610 1 0 0	PERMIT REQUIREMENT SAMPLE	0.036 MO AVG	0.1072 DAILY MAX	NO TEST	(26)	*****	0.87 MO AVG	1.75 DAILY MAX	NO TEST	NO TEST	*****	28	0	3/YEAR	COMP 24
SILVER TOTAL RECOVERABLE 01079 1 0 0	PERMIT REQUIREMENT SAMPLE	2.92 MO AVG	6.09 DAILY MAX	NO TEST	(26)	*****	71.4 MO AVG	149.0 DAILY MAX	NO TEST	NO TEST	*****	28	0	3/YEAR	COMP 24
ZINC TOTAL RECOVERABLE 01094 1 0 0	PERMIT REQUIREMENT SAMPLE	0.225 MO AVG	0.450 DAILY MAX	NO TEST	(26)	*****	5.5 MO AVG	11.0 DAILY MAX	19.7	19.7	*****	28	0	3/YEAR	COMP 24
COPPER TOTAL RECOVERABLE 01114 1 0 0	PERMIT REQUIREMENT SAMPLE	0.426 MO AVG	0.426 DAILY MAX	NO TEST	(26)	*****	19.7 MO AVG	19.7 DAILY MAX	19.7	19.7	*****	28	0	3/YEAR	COMP 24
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	MO AVG	DAILY MAX	NO TEST	(28)	*****	MO AVG	DAILY MAX	MO AVG	DAILY MAX	*****	ug/L	0	ONCE/MONTH	COMP 24
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	MO AVG	DAILY MAX	NO TEST	(28)	*****	MO AVG	DAILY MAX	MO AVG	DAILY MAX	*****	ug/L	0	ONCE/MONTH	COMP 24

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REPORTING PERIOD WAS FROM 06/04/2006 THROUGH 07/01/2006.
 (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED).
 EPA Form 3320-1 (03-99) Previous editions may be used.
 00434/981209 1904
 PAGE 2 OF 4

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NAME: JUNEAU, CITY AND BOROUGH OF
ADDRESS: MENDENHALL TREATMENT PLANT
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LOCATION: JUNEAU, ALASKA 99801
ATTN: Scott Jeffers WW Utilities Superintendent

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

AK-002295-1
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001 A
DISCHARGE NUMBER

MONITORING PERIOD			
YR	MO	DAY	TO
2006	6	1	2006

PARAMETER	X	QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM		MINIMUM	AVERAGE	MAXIMUM	UNITS			
FECAL COLIFORM MF, M-F-C BROTH 44.5C	SAMPLE MEASUREMENT	*****	*****	****	*****	200.0	*****	(13)	0	ONCE/WEEK	GRAB
31616 W 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	800	*****	#/100ML	0	ONCE/WEEK	GRAB
SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	****	*****	22.8	*****	(13)	0	ONCE/WEEK	GRAB
FECAL COLIFORM MF, M-F-C BROTH 44.5C	PERMIT REQUIREMENT	*****	*****	****	*****	400	*****	#/100ML	0	ONCE/WEEK	GRAB
31616 1 0 0	SAMPLE MEASUREMENT	*****	*****	****	*****	1200	*****	(13)	0	ONCE/WEEK	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	MO GEO	*****	DAILY GEO	0	CONTINUOUSLY	RECORDED
FLOW IN CONDUIT OR THROUGH TREATMENT PLANT	SAMPLE MEASUREMENT	2.26	2.59	(03)	*****	*****	*****	****	0	7/7	RECORDED
50050 P 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	****	0	7/7	RECORDED
SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****	****	0	7/7	RECORDED
EFFLUENT DILUTION RATIO	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	****	0	7/7	RECORDED
78480 1 0 0	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****	****	0	7/7	RECORDED
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	****	0	7/7	RECORDED
BOD, 5-DAY PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****	****	0	7/7	RECORDED
81010 K 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	****	0	7/7	RECORDED
PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****	****	0	7/7	RECORDED
SOLIDS, SUSPENDED	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	****	0	7/7	RECORDED
PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****	****	0	7/7	RECORDED
81011 K 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	****	0	7/7	RECORDED
PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****	****	0	7/7	RECORDED
URBIDITY, LAB NTU	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	****	0	7/7	RECORDED
82079 1 0 0	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****	****	0	7/7	RECORDED
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	****	0	7/7	RECORDED

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PHONE NUMBER
2006 YEAR
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7 DAY

Scott Jeffers
Wastewater Utilities Superintendent

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
HARDNESS as CaCO3		MEASUREMENT	*****	*****	****	*****	81.4	81.4	(19)	0		
EFFLUENT GROSS VALUE		PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT DAILY MAX			ONCE/MONTH	GRAB
DISSOLVED OXYGEN		SAMPLE MEASUREMENT	*****	*****	****	3.2	4.0	4.8	(19)	0		
00300 EFFLUENT GROSS VALUE		PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT DAILY MAX			ONCE/MONTH	
TOXICITY, CERIODAPHNIA CHRONIC		SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****	10:10 MAXIMUM		TWICE/YEAR	
61406 EFFLUENT GROSS VALUE		PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****				
		SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****				
		PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****				
		SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****				
		PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****				
		SAMPLE MEASUREMENT	*****	*****	****	*****	*****	*****				
		PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
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