CONTACT NAME: Stephen Locks MAILING ADDRESS: 5433 Shaune Drive

Juneau, AK 99801

FACILITY: Salmon Creek Water Plant Backwash

LOCATION: 3 mile Egan Drive

Juneau, AK 99801

PERMIT NUMBER: AKG380005

OUTFALL / MONITORING POINT: 001C Chemical Clean in Place

MONITORING PERIOD: 10/1/2017

10/31/2017

TO:

Parameter		Quantity o	or Loading	Units	Qua	lity or Concentr	ation	Units	No.	Frequency of	Sample Type
		Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	
pH	Sample meas.	*****	*****						0		
1 - Final Effluent 00400	Permit reqmt.	*****	*****		6.5 instantaneous minimum	Report instantaneous	8.5 instantaneous maximum	S.U.		Annually	Grab
Salinity	Sample meas.	*****	*****		*****	6			0		
1 - Final Effluent 00480	I CI IIIIC	*****	*****		*****	Report instantaneous	Report daily maximum	ppt		Annually	Grab
Ammonia Nitrogen (as N)	Sample meas.	*****	*****		*****				0		
1 - Final Effluent 00610		****	****		*****	Report instantaneous	Report daily maximum	mg/l		Annually	Grab
Magnesium, total recoverable	Sample meas.	*****	*****		*****				0		
1 - Final Effluent 00921	I CI MILE	*****	*****		*****	Report instantaneous	Report daily maximum	ug/l		Annually	Grab
Arsenic, Total Recoverable	Sample meas.	*****	*****		*****				0		
1 - Final Effluent 00978	Permit reqmt.	*****	****		****	Report instantaneous	10 daily maximum	ug/l		Annually	Grab

	I certify under penalty of law that this document and all attachments were		TELEPHONE	DATE
Steel backs	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.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	907-321-2469 AREA NUMBER	17-11-15 YIMID

CONTACT NAME: Stephen Locks
MAILING ADDRESS: 5433 Shaune Drive

Juneau, AK 99801

FACILITY: Salmon Creek Water Plant Backwash

LOCATION: 3 mile Egan Drive

Juneau, AK 99801

PERMIT NUMBER: AKG380005

OUTFALL / MONITORING POINT: 001C Chemical Clean in Place

MONITORING PERIOD: 10/1/2017

2017

10/31/2017

TO:

Parameter		Quantity	or Loading	Units	Qua	lity or Concentr	ation	Units	No.	Frequency of	Sample Type
		Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	
Iron, Total Recoverable	Sample meas.	*****	*****		*****				0		
1 - Final Effluent 00980	1 61 11116	****	*****		*****	Report instantaneous	Report daily maximum	ug/l		Annually	Grab
Zinc Total Recoverable	Sample meas.	*****	*****		*****				0		
1 - Final Effluent 01094	1 CI IIII	*****	*****		*****	Report instantaneous	Report daily maximum	ug/l		Annually	Grab
Lead Total Recoverable	Sample meas.	*****	*****		*****				0		
1 - Final Effluent 01114	I CTIMILE	****	*****		*****	Report instantaneous	Report daily maximum	ug/I	D	Annually	Grab
Copper Total Recoverable	Sample meas.	*****	*****		*****				0		
1 - Final Effluent 01119	1 01 11111	*****	*****		*****	Report instantaneous	Report daily maximum	ug/l		Annually	Grab
Manganese, Total Recoverable	Sample meas.	*****	*****		*****				0		
1 - Final Effluent 11123	I CI IIIIC	*****	*****		*****	Report instantaneous	Report daily maximum	ug/l		Annually	Grab

	certify under penalty of law that this document and all attachments were		TELEPHONE	DATE
Star Locks	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 penatties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	907-321-2565 AREA NUMBER	17-11-15 YIMID

CONTACT NAME: Stephen Locks

MAILING ADDRESS: 5433 Shaune Drive Juneau, AK 99801

FACILITY: Salmon Creek Water Plant Backwash

LOCATION: 3 mile Egan Drive

Juneau, AK 99801

PERMIT NUMBER: AKG380005

OUTFALL / MONITORING POINT: 001C Chemical Clean in Place

MONITORING PERIOD: 10/1/2017

TO:

10/31/2017 NO DISCHARGE:

Parameter Quantity or Loading Units **Quality or Concentration** Units No. Frequency of Sample Type Ex. **Analysis** Minimum **Average** Maximum Maximum Average Chloride Sample ***** ***** ***** 0 meas. ***** ***** ***** 1 - Final Effluent Report Report mg/l Annually Grab Permit instantaneous daily maximum 46225 reqmt. Total Residual Chlorine Sample ***** ***** ***** 0 meas. ***** 1 - Final Effluent ***** ***** 0.0075 Report mg/l Annually Grab Permit Report daily maximum 50060 reqmt. instantaneous Sulfate Sample ***** ***** ***** 0 meas. ***** ***** ***** 1 - Final Effluent Report Report mg/l Annually Grab Permit instantaneous daily maximum 81020 regmt.

COMMENTS:			

Mail this report when completed to ADEC, Division of Water, 555 Cordova Street, Anchorage, AK 99501-2617 Attach an explanation of any violations. Reference all attachments below.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were		TELEPHONE	DATE
Steer Las 12	orepared 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	SIGNATURE OF PRINCIPAL EXECUTIVE	907-321-295	17-11-15
TYPED OR PRINTED	are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	OFFICER OR AUTHORIZED AGENT	AREA NUMBER	YIMID

CONTACT NAME: Stephen Locks

MAILING ADDRESS: 5433 Shaune Drive Juneau, AK 99801

FACILITY: Salmon Creek Water Plant Backwash

LOCATION: 3 mile Egan Drive

Juneau, AK 99801

PERMIT NUMBER: AKG380005

OUTFALL / MONITORING POINT: 001B Enhanced Flux Cleaning

MONITORING PERIOD: 10/1/2017

10/31/2017

Parameter		Quantity o	or Loading	Units	Qua	lity or Concentr	ation	Units	No.	Frequency of	Sample Type
		Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	
рН	Sample meas.	*****	*****		7.35	7.35	7.35		0	1	
1 - Final Effluent 00400	I CI IIIIC	****	*****		6.5 instantaneous minimum	Report instantaneous	8.5 instantaneous maximum	S.U.		Monthly	Grab
Salinity	Sample meas.	*****	*****		*****				0	0	
1 - Final Effluent 00480	1 61 11116	****	*****		*****	Report instantaneous	Report daily maximum	ppt		2X Annually	Grab
Ammonia Nitrogen (as N)	Sample meas.	*****	*****		*****	0.74	0.74		0	1	
1 - Final Effluent 00610		****	****		*****	Report instantaneous	Report daily maximum	mg/l		Monthly	Grab
Magnesium, total recoverable	Sample meas.	*****	*****		*****				0	0	
1 - Final Effluent 00921	Permit reqmt.	*****	*****		*****	Report instantaneous	Report daily maximum	ug/l		2X Annually	Grab
Arsenic, Total Recoverable	Sample meas.	*****	*****		*****				0	0	
1 - Final Effluent 00978	Permit reqmt.	*****	****		*****	Report instantaneous	10 daily maximum	ug/l		2X Annually	Grab

	Icertify under penalty of law that this document and all attachments were		TELEPHONE	DATE
Steve Louis	preparedunder my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate theirformation 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	907-321-2469 AREA NUMBER	17-11-15 YIMID

CONTACT NAME: Stephen Locks

MAILING ADDRESS: 5433 Shaune Drive Juneau, AK 99801

FACILITY: Salmon Creek Water Plant Backwash

LOCATION: 3 mile Egan Drive

Juneau, AK 99801

PERMIT NUMBER: AKG380005

MONITORING PERIOD: 10/1/2017

10/31/2017

OUTFALL / MONITORING POINT: 001B Enhanced Flux Cleaning

Parameter		Quantity	or Loading	Units	Qua	lity or Concentr	ation	Units	No.	Frequency of	Sample Type
		Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	
Iron, Total Recoverable	Sample meas.	*****	*****		*****				0	0	×
1 - Final Effluent 00980	I CIMIL	*****	*****		*****	Report instantaneous	Report daily maximum	ug/l		2X Annually	Grab
Zinc Total Recoverable	Sample meas.	*****	*****		*****				0	0	TV.
1 - Final Effluent 01094	I CI IIII	*****	*****		*****	Report instantaneous	Report daily maximum	ug/l		2X Annually	Grab
Lead Total Recoverable	Sample meas.	*****	*****		*****				0	0	
1 - Final Effluent 01114	I CI IIIIC	*****	*****		*****	Report instantaneous	Report daily maximum	ug/l		2X Annually	Grab
Copper Total Recoverable	Sample meas.	*****	*****		*****				0	0	
1 - Final Effluent 01119	I CI IIIIC	*****	****		*****	Report instantaneous	Report daily maximum	ug/l		2X Annually	Grab
Manganese, Total Recoverable	Sample meas.	*****	*****		*****				0	0	
1 - Final Effluent 11123	1 Clinic	*****	*****		*****	Report instantaneous	Report daily maximum	ug/l		2X Annually	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	certify under penalty of law that this document and all attachments were		TELEPHONE	DATE
5.00	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.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	907-321-2469 AREA NUMBER	17-11-15 YIMID

CONTACT NAME: Stephen Locks MAILING ADDRESS: 5433 Shaune Drive

Juneau, AK 99801

FACILITY: Salmon Creek Water Plant Backwash

LOCATION: 3 mile Egan Drive

Juneau, AK 99801

PERMIT NUMBER: AKG380005

OUTFALL / MONITORING POINT: 001B Enhanced Flux Cleaning

MONITORING PERIOD: 10/1/2017

10/31/2017

NO DISCHARGE:

Parameter		Quantity	or Loading	Units	Qual	lity or Concentr	ation	Units	No.	Frequency of	Sample Type
		Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	
Chloride	Sample meas.	*****	*****		*****		_		0	0	
1 - Final Effluent 46225	I CI MILL	*****	****		*****	Report instantaneous	Report daily maximum	mg/l		2X Annually	Grab
Total Residual Chlorine	Sample meas.	*****	*****		*****	ND	ND		0	1	
1 - Final Effluent 50060	I CI IIII	*****	*****		*****	0.0075 Report instantaneous	Report daily maximum	mg/l		Monthly	Grab
Sulfate	Sample meas.	*****	*****		*****				0	0	
1 - Final Effluent 81020	I CIMIL	*****	*****		*****	Report instantaneous	Report daily maximum	mg/l		2X Annually	Grab

Mail this report when completed to ADEC, Division of Water, 555 Cordova Street, Anchorage, AK 99501-2617 Attach an explanation of any violations. Reference all attachments below.

	I certify under penalty of law that this document and all attachments were		TELEPHONE	DATE
(ton Leader	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	SIGNATURE OF PRINCIPAL EXECUTIVE	907-321-2969	17-11-15
	are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	OFFICER OR AUTHORIZED AGENT	AREA NUMBER	YIMID

CONTACT NAME: Stephen Locks MAILING ADDRESS: 5433 Shaune Drive

Juneau, AK 99801

FACILITY: Salmon Creek Water Plant Backwash

LOCATION: 3 mile Egan Drive

Juneau, AK 99801

PERMIT NUMBER: AKG380005

MONITORING PERIOD: 10/1/2017

10/31/2017 TO

NO DISCHARGE: OUTFALL / MONITORING POINT: 001A Reverse Flow/Air Scrub Quantity or Loading Units **Quality or Concentration** Units No. Frequency of Sample Type Parameter Ex. **Analysis** Minimum Maximum Maximum **Average** Average Temperature (C) Sample ***** ***** 8 8 0 1 meas. ***** ***** ***** Report DEG.C Report Monthly Grab 1 - Final Effluent Permit daily maximum instantaneous 00010 regmt. Turbidity Sample ***** ***** ***** 29.2 29.2 0 1 meas. ***** ***** ***** Report NTU Grab 1 - Final Effluent Report Monthly **Permit** daily maximum instantaneous 00070 reqmt. Magnesium, total recoverable Sample ***** ***** ***** 0 0 meas. ***** ***** ***** Report ug/l 2X Annually Grab Report 1 - Final Effluent **Permit** daily maximum instantaneous 00921 reamt. Arsenic, Total Recoverable Sample ***** ***** ***** 1.8 1.8 1 meas. ***** ***** ***** ug/l Report Monthly Grab 1 - Final Effluent Permit 10 instantaneous 00978 daily maximum reqmt Iron, Total Recoverable Sample ***** ***** ***** 0 0 meas. ***** ***** ***** 2X Annually ug/l Grab Report Report 1 - Final Effluent **Permit** daily maximum instantaneous 00980 regmt.

	certify under penalty of law that this document and all attachments were	1-	TELEPHONE	DATE
Stre Locks	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	SIGNATURE OF PRINCIPAL EXECUTIVE	907-321-2869	17-11-15
TYPED OR DRINTED	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.	OFFICER OR AUTHORIZED AGENT	AREA NUMBER	YIMID

CONTACT NAME: Stephen Locks

MAILING ADDRESS: 5433 Shaune Drive Juneau, AK 99801

FACILITY: Salmon Creek Water Plant Backwash

LOCATION: 3 mile Egan Drive

Juneau, AK 99801

PERMIT NUMBER: AKG380005

OUTFALL / MONITORING POINT: 001A Reverse Flow/Air Scrub

MONITORING PERIOD: 10/1/2017

TO 10/31/2017

NO DISCHARGE:

Parameter Quantity or Loading Units **Quality or Concentration** Units No. Frequency of Sample Type Ex. **Analysis** Maximum Minimum Average Maximum Average Zinc Total Recoverable Sample ***** ***** 0 0 meas. ***** ***** ***** 1 - Final Effluent Report Report ug/1 2X Annually Grab **Permit** instantaneous daily maximum 01094 regmt. Lead Total Recoverable Sample ***** ***** ***** 0 0 meas. ***** ***** ***** Report Report ug/l 2X Annually Grab 1 - Final Effluent **Permit** instantaneous daily maximum 01114 reqmt. Copper Total Recoverable Sample ***** ***** ***** 0 0 meas. ***** ***** ***** 1 - Final Effluent Report Report ug/l 2X Annually Grab Permit instantaneous daily maximum 01119 reamt. Manganese, Total Recoverable Sample ***** ***** ***** 0 0 meas. ***** ***** ***** Report 2X Annually 1 - Final Effluent Report ug/l Grab Permit daily maximum instantaneous 11123 regmt. Chloride Sample ***** ***** ***** 0 0 meas. ***** ***** ***** mg/l 2X Annually Grab Report Report 1 - Final Effluent **Permit** instantaneous daily maximum 46225 reqmt.

	Icertify under penalty of law that this document and all attachments were		TELEPHONE	DATE
11 ,	preparedunder 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	12		
	gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there	SIGNATURE OF PRINCIPAL EXECUTIVE	907-321-2945	17-11-15
TYPED OR PRINTED	are significant penalties for submitting false information, including the possibility of line and imprisonment for knowing violations.	OFFICER OR AUTHORIZED AGENT	AREA NUMBER	YIMID

CONTACT NAME: Stephen Locks

MAILING ADDRESS: 5433 Shaune Drive Juneau, AK 99801

FACILITY: Salmon Creek Water Plant Backwash

LOCATION: 3 mile Egan Drive

Juneau, AK 99801

PERMIT NUMBER: AKG380005

OUTFALL / MONITORING POINT: 001A Reverse Flow/Air Scrub

MONITORING PERIOD: 10/1/2017

10/31/2017

NO DISCHARGE:

Parameter			Quantity or Loading		Units	Quality or Concentration		Units	No.	Frequency of	Sample Type	
			Average	Maximum		Minimum	Average	Maximum		Ex.	Analysis	
Flow		Sample meas.	0.023	0.029		*****	*****	*****		0	Continuous	
1 - Fir	1 - Final Effluent 50050		Report monthly average	Report daily maximum	MGD	*****	*****	*****			Continuous	Recorded
Sulfate		Sample meas.	*****	*****		*****				0	0	
	1 - Final Effluent 81020		*****	*****		*****	Report instantaneous	Report daily maximum	mg/l		2X Annually	Grab

COMMENTS:		

Mail this report when completed to ADEC, Division of Water, 555 Cordova Street, Anchorage, AK 99501-2617 Attach an explanation of any violations. Reference all attachments below.

	certify under penalty of law that this document and all attachments were	121	TELEPHONE	DATE
(1. 1 100	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	R	907-321-2969	1- 11 10
	gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there	SIGNATURE OF PRINCIPAL EXECUTIVE	101 901 -101	17-11-12
	are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	OFFICER OR AUTHORIZED AGENT	AREA NUMBER	YJMID