## NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

### DISCHARGE MONITORING REPORT (DMR)

**PERMITTEE NAME/ADDRESS**

**NAME:** JUNEAU, CITY AND BOROUGH OF  
**ADDRESS:** 155 SOUTH SEWARD  
**JUNEAU, ALASKA 99801**  
**FACILITY:** AUK BAY TREATMENT FACILITY  
**LOCATION:** JUNEAU, ALASKA

<table>
<thead>
<tr>
<th>PARAMETER</th>
<th>QUANTITY OR LOADING</th>
<th>QUALITY OR CONCENTRATION</th>
<th>NO. EX</th>
<th>FREQUENCY OF ANALYSIS</th>
<th>SAMPLE TYPE</th>
</tr>
</thead>
<tbody>
<tr>
<td>TEMPERATURE, WATER DEG, CENTIGRADE</td>
<td>SAMPLE MEASUREMENT</td>
<td>14.5  15.8</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>00010 1 00 EFFLUENT GROSS VALUE</td>
<td>PERMIT REQUIREMENT</td>
<td>REPORT DEG. C</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BOD, 5-DAY (20 DEG. C) 00310 1 00</td>
<td>SAMPLE MEASUREMENT</td>
<td>5.9  7.1</td>
<td>0</td>
<td>5/7</td>
<td>GRAB</td>
</tr>
<tr>
<td>pH 00400 1 00 EFFLUENT GROSS VALUE</td>
<td>PERMIT REQUIREMENT</td>
<td>6.0  9.0</td>
<td>0</td>
<td>5/7</td>
<td>GRAB</td>
</tr>
<tr>
<td>SOLIDS, TOTAL SUSPENDED 00530 1 00</td>
<td>SAMPLE MEASUREMENT</td>
<td>6.3  8.4</td>
<td>0</td>
<td>1/MO</td>
<td>COMP</td>
</tr>
<tr>
<td>SOLIDS, SETTLEABLE 00545 1 00 EFFLUENT GROSS VALUE</td>
<td>SAMPLE MEASUREMENT</td>
<td>0.00  0.00</td>
<td>0</td>
<td>1/MO</td>
<td>GRAB</td>
</tr>
<tr>
<td>COLIFORM, FECAL MF, M-FC BROTH, 44.5C 31616 1 00 EFFLUENT GROSS VALUE</td>
<td>SAMPLE MEASUREMENT</td>
<td>42  160000</td>
<td>0</td>
<td>1/MO</td>
<td>GRAB</td>
</tr>
<tr>
<td>FLOW, IN CONDUCT OR THRU TREATMENT PLANT 50050 1 00 EFFLUENT GROSS VALUE</td>
<td>SAMPLE MEASUREMENT</td>
<td>0.078</td>
<td>0</td>
<td>7/7</td>
<td>CONT.</td>
</tr>
</tbody>
</table>

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION 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 PENALITIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SE 18 USC 1001 AND 22 USC 1319 (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO $10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 5 MONTHS AND SIX YEARS.)

**NAME/TITLE PRINCIPAL EXEC. OFFICER** ANDREW BRONSON- WASTEWATER UTILITIES SUPERINTENDENT  
**TELEPHONE** 907 789 9919 99 11 08  
**DATE**

COMMENT AND EXPLANATION OF ANY VIOLATIONS (REFERENCE ALL ATTACHMENTS HERE)
**DISCHARGE MONITORING REPORT (DMR)**

**PERMITTEE NAME/ADDRESS**
- **NAME:** JUNEAU, CITY AND BOROUGH OF
- **ADDRESS:** 155 SOUTH SEWARD JUNEAU, ALASKA 99801
- **FACILITY:** AUKE BAY TREATMENT FACILITY
- **LOCATION:** JUNEAU, ALASKA

**PERMIT NUMBER**
- **PERMIT NUMBER:** AK0021407

**MONITORING PERIOD**
- **YEAR:** 99, **MONTH:** 10, **DAY:** 01 to **YEAR:** 99, **MONTH:** 10, **DAY:** 31

**DISCHARGE NUMBER**
- **MAJOR (SUBR 01)**

<table>
<thead>
<tr>
<th>PARAMETER</th>
<th>QUANTITY OF LOADING</th>
<th>QUALITY OR CONCENTRATION</th>
<th>NO. EX</th>
<th>FREQUENCY</th>
<th>SAMPLE TYPE</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHLORINE, TOTAL RESIDUAL</td>
<td>SAMPLE MEASUREMENT</td>
<td>MIN. 1.5 AVERAGE 3.00 MAXIMUM</td>
<td>0</td>
<td>REPORT</td>
<td>GRAB</td>
</tr>
<tr>
<td>60060 1 00</td>
<td>PERMIT REQUIREMENT</td>
<td>AVERAGE</td>
<td>3.00</td>
<td>MAXIMUM</td>
<td>DAILY AVG</td>
</tr>
</tbody>
</table>

**I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION 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 IMPRISIONMENT. SE 18 USC 1001 AND 22 USC 1319 (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO $10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 5 MONTHS AND SIX YEARS.)**

**NAME/TITLE PRINCIPAL EXEC. OFFICER**
- **NAME:** ANDREW BRONSON
- **TITLE:** WASTEWATER UTILITIES SUPERINTENDENT

**TELEPHONE**
- **TELEPHONE:** 907 789 9919

**DATE**
- **DATE:** 99 11 08

**COMMENT AND EXPLANATION OF ANY VIOLATIONS (REFERENCE ALL ATTACHMENTS HERE)**

**CONCERNING VIOLATIONS PLEASE SEE ATTACHED.**

PG 2 OF 2