

DEER ISLAND TREATMENT PLANT

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME / ADDRESS

NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD

100 FIRST AVE
 BOSTON MA 02129

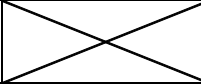
FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO


MA0103284			T01 A		
PERMIT NUMBER			DISCHARGE NUMBER		
MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
00	09	01	00	09	30

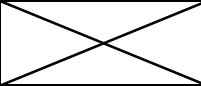
MAJOR
 (SUBR E)
 F - FINAL
 TREATED SANITARY
 WASTEWATER

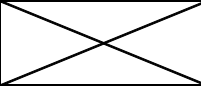
*** NO DISCHARGE ***


PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR LOADING (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (54-61)	MAXIMUM (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS			
PH EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	6.3	*****	7.0	(12)	0	01 / 01	GR
	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY	GRAB
SOLIDS, TOTAL SUSPENDED INFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	166	201	259	(19)	0	01 / 01	24
	PERMIT REQUIREMENT	*****	*****	*****	REPORT MO AVG	REPORT WKLY AVG	REPORT DAILY MX	mg/L		DAILY	COMP24
SOLIDS, TOTAL SUSPENDED EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	15.8	15.5	27.5	(19)	0	01 / 01	24
	PERMIT REQUIREMENT	*****	*****	*****	30 MO AVG	45 WKLY AVG	REPORT DAILY MX	mg/L		DAILY	COMP24
SOLIDS, SETTLEABLE EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.11	0.2	(25)	0	01 / 01	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT WKLY AVG	REPORT DAILY MX	ml/L		DAILY	GRAB
NITROGEN, AMMONIA TOTAL (AS N) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	16.100	*****	*****	(19)	0	03/30	24
	PERMIT REQUIREMENT	*****	*****	*****	REPORT MO AVG	*****	*****	mg/L		ONCE / MONTH	COMP24
NITROGEN, NITRITE TOTAL (AS N) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0.050	*****	*****	(19)	0	01/30	24
	PERMIT REQUIREMENT	*****	*****	*****	REPORT MO AVG	*****	*****	mg/L		ONCE / MONTH	COMP24
NITROGEN, NITRATE TOTAL (AS N) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0.105	*****	*****	(19)	0	02/30	24
	PERMIT REQUIREMENT	*****	*****	*****	REPORT MO AVG	*****	*****	mg/L		ONCE / MONTH	COMP24

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR LOADING (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NITROGEN, KJELDAHL TOTAL (AS N) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	27.6	*****	*****	(19)	0	03/30	24
	PERMIT REQUIREMENT	*****	*****		REPORT MO AVG	*****	*****	mg/L		ONCE / MONTH	COMP24
CHLORIDE (AS CL) INFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	611	(19)	0	01 / 01	GR
	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MX	mg/L		DAILY	GRAB
ARSENIC, TOTAL (AS AS) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0.116	*****	0.347	(28)	0	03/30	24
	PERMIT REQUIREMENT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L		ONCE / MONTH	COMP24
COPPER TOTAL RECOVERABLE EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	15.100	*****	16.400	(28)	0	03/30	24
	PERMIT REQUIREMENT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L		ONCE / MONTH	COMP24
COLIFORM, FECAL - % SAMPLE EXCEEDS LIMIT EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	*****	(23)	0	90/30	CA
	PERMIT REQUIREMENT	*****	*****		10 MAXIMUM	*****	*****	PERCENT		THREE / DAY	GRAB
PCB-1016 (AROCHLOR 1016) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0		0	02/30	24
	PERMIT REQUIREMENT	*****	*****		0.000045 MO AVG	*****	REPORT DAILY MX	ng/L		ONCE / MONTH	COMP24
4, 4'-DDT (P, P'-DDT) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0		0	02/30	24
	PERMIT REQUIREMENT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ng/L		ONCE / MONTH	COMP24

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING			(4 Card Only) QUANTITY OR LOADING				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		(46-53)		(54-61)	(38-45)		(46-53)					(54-61)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
ALDRIN EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0	ng/L	0	02/30	24	
	PERMIT REQUIREMENT	*****	*****	*****	REPORT MO AVG	*****	REPORT DAILY MX			ONCE / MONTH	COMP24	
CHLORDANE, ALPHA, WHOLE WATER EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0	ng/L	0	02/30	24	
	PERMIT REQUIREMENT	*****	*****	*****	REPORT MO AVG	*****	REPORT DAILY MX			ONCE / MONTH	COMP24	
CHLORDANE (TECH MIX. AND METABOLITES) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0	ng/L	0	02/30	24	
	PERMIT REQUIREMENT	*****	*****	*****	REPORT MO AVG	*****	REPORT DAILY MX			ONCE / MONTH	COMP24	
DIELDRIN EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0	ng/L	0	02/30	24	
	PERMIT REQUIREMENT	*****	*****	*****	REPORT MO AVG	*****	REPORT DAILY MX			ONCE / MONTH	COMP24	
HEPTACHLOR EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0	ng/L	0	02/30	24	
	PERMIT REQUIREMENT	*****	*****	*****	REPORT MO AVG	*****	REPORT DAILY MX			ONCE / MONTH	COMP24	
HEPTACHLOR EPOXIDE EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0	ng/L	0	02/30	24	
	PERMIT REQUIREMENT	*****	*****	*****	REPORT MO AVG	*****	REPORT DAILY MX			ONCE / MONTH	COMP24	
PCB-1221 (AROCHLOR 1221) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0	ng/L	0	02/30	24	
	PERMIT REQUIREMENT	*****	*****	*****	0.000045 MO AVG	*****	REPORT DAILY MX			ONCE / MONTH	COMP24	

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING			(4 Card Only) QUANTITY OR LOADING				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		(46-53)	(54-61)	UNITS	(38-45)	(46-53)	(54-61)	UNITS			
		AVERAGE	MAXIMUM		MINIMUM	AVERAGE	MAXIMUM				
PCB-1232 (AROCHLOR 1232) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0	ng/L	0	02/30	24
	PERMIT REQUIREMENT	*****	*****		0.000045 MO AVG	*****	REPORT DAILY MX			ONCE / MONTH	COMP24
PCB-1242 (AROCHLOR 1242) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0	ng/L	0	02/30	24
	PERMIT REQUIREMENT	*****	*****		0.000045 MO AVG	*****	REPORT DAILY MX			ONCE / MONTH	COMP24
PCB-1248 (AROCHLOR 1248) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0	ng/L	0	02/30	24
	PERMIT REQUIREMENT	*****	*****		0.000045 MO AVG	*****	REPORT DAILY MX			ONCE / MONTH	COMP24
PCB-1254 (AROCHLOR 1254) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0	ng/L	0	02/30	24
	PERMIT REQUIREMENT	*****	*****		0.000045 MO AVG	*****	REPORT DAILY MX			ONCE / MONTH	COMP24
PCB-1260 (AROCHLOR 1260) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0	ng/L	0	02/30	24
	PERMIT REQUIREMENT	*****	*****		0.000045 MO AVG	*****	REPORT DAILY MX			ONCE / MONTH	COMP24
POLYCHLORINATED BIPHENYLS (PCBS) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0.64	*****	1.59	ng/L	0	02/30	24
	PERMIT REQUIREMENT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX			ONCE / MONTH	COMP24
HEXACHLOROBENZENE EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0	ng/L	0	02/30	24
	PERMIT REQUIREMENT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX			ONCE / MONTH	COMP24

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING			(4 Card Only) QUANTITY OR LOADING				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		(46-53)	(54-61)	UNITS	(38-45)	(46-53)	(54-61)	UNITS			
		AVERAGE	MAXIMUM		MINIMUM	AVERAGE	MAXIMUM				
CHLORDANE, GAMMA, WHOLE WATER EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0	ng/L	0	02/30	24
	PERMIT REQUIREMENT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX				ONCE / MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT EFFLUENT	SAMPLE MEASUREMENT	290.5	446.0	(03)	*****	*****	*****	*****	0	99 / 99	RC
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	mgd	*****	*****	*****				CONTIN- UOUS
CHLORINE, TOTAL RESIDUAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	36	*****	67	(28)	0	03 / 01	GR
	PERMIT REQUIREMENT	*****	*****		456 MO AVG	*****	631 DAILY MX	ug/L		THREE / DAY	GRAB
MERCURY, TOTAL (AS HG) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0.0229	*****	0.0272	(28)	0	03/30	24
	PERMIT REQUIREMENT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L		ONCE / MONTH	COMP24
COLIFORM, FECAL GENERAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	N/A			(13)			
	PERMIT REQUIREMENT	*****	*****		Monthly GeoMean	200 WKLY MN	400 DAILY MX	#/100ML		THREE / DAY	GRAB
COLIFORM, FECAL GENERAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	*****	135	863	(13)	0	03/01	GR
	PERMIT REQUIREMENT	*****	*****		*****	14000 WKLY MN	14000 DAILY MX	#/100ML		THREE / DAY	GRAB
CYANIDE, TOTAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0	(19)	0	02/30	GR
	PERMIT REQUIREMENT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	mg/L		ONCE / MONTH	GRAB

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING			(4 Card Only) QUANTITY OR LOADING				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		(46-53)		(54-61)	(38-45)	(46-53)		(54-61)			
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
VOLATILE FRACTION ORGANICS (EPA 624) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	46	*****	56	(28)	0	02/30	GR
	PERMIT REQUIREMENT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L		ONCE / MONTH	GRAB
CBOD5 / NH3-N INFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	129	157	190	(19)	0	01 / 01	24
	PERMIT REQUIREMENT	*****	*****		REPORT MO AVG	REPORT WKLY AVG	REPORT DAILY MX	mg/L		DAILY	COMP24
CBOD5 / NH3-N EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	13	17	25	(19)	0	01 / 01	24
	PERMIT REQUIREMENT	*****	*****		25 MO AVG	40 WKLY AVG	REPORT DAILY MX	mg/L		DAILY	COMP24
FLOW, TOTAL EFFLUENT	SAMPLE MEASUREMENT	331.9	273.7	(03)	*****	*****	*****	*****	0	99 / 99	RC
	PERMIT REQUIREMENT	436 MO AVG	REPORT DAILY MX		mgd	*****	*****	*****	*****		CONTIN- UOUS
NAME / TITLE PRINCIPAL EXECUTIVE OFFICER		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 original form for signature		TELEPHONE	DATE
Richard Trubiano, Director Field Operations										(617)788-4704	09/15/2000

DEER ISLAND TREATMENT PLANT

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD
 100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

MA0103284	T01 T
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
FROM TO	
YEAR MO DAY	YEAR MO DAY
00 09 01	00 09 30

MAJOR (SUBR E)
 F - FINAL
 TUNNEL WET DATA

*** NO DISCHARGE ***

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR LOADING (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NOEL STAT 7DAY CHR Menidia EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	25	*****	*****	(23)	0	01/30	24
	PERMIT REQUIREMENT	*****	*****	****	1.5 DAILY MN	*****	*****	PERCENT			
NOEL STAT 1 HR FERT. CHR Arbacia EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	25	*****	*****	(23)	0	01/30	24
	PERMIT REQUIREMENT	*****	*****	****	1.5 DAILY MN	*****	*****	PERCENT			
STATRE LC50 48HR ACU Menidia EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	55	*****	*****	(23)	0	01/30	24
	PERMIT REQUIREMENT	*****	*****	****	50 DAILY MN	*****	*****	PERCENT			
P/F STAT 48HR ACU MYSIDOPSIS BAHIA EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	100	*****	*****	(23)	0	01/30	24
	PERMIT REQUIREMENT	*****	*****	****	50 DAILY MN	*****	*****	PERCENT			
NAME / TITLE PRINCIPAL EXECUTIVE OFFICER	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 original form for signature	TELEPHONE	DATE	
Richard Trubiano, Director Field Operations									(617)788-4704	09/15/2000	

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD

100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

COTTAGE FARM CSO
 NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C01 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
 (SUBR E)
 F - FINAL
 CSO 201- MONTHLY & QUARTERLY

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

*** NO DISCHARGE ***

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR LOADING (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW RATE EFFLUENT	SAMPLE MEASUREMENT	8	8	GALLON /HOUR	*****	*****	*****	*****			CONTINUOU S
	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX		*****	*****	*****				ALL EVENTS
DISCHARGE DURATION EFFLUENT	SAMPLE MEASUREMENT	240	240	MINUTE S	*****	*****	*****	*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM		*****	*****	*****			ALL EVENTS	CONTINUOU S
BOD, 5 - DAY (20 DEG. C) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	*****	9		(19)			COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	REPORT MAXIMUM	mg/L			FOUR/ YEAR
PH EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(12)			GRAB
	PERMIT REQUIREMENT	*****	*****	****	6.5 DAILY MN	*****	8.3 DAILY MX	SU			FOUR/ YEAR
SOLIDS, TOTAL SUSPENDED EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	*****	9		(19)			COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	REPORT MAXIMUM	mg/L			FOUR/ YEAR
RAINFALL EFFLUENT	SAMPLE MEASUREMENT	0.1	0.94	INCHES /DAY	*****	*****	*****	*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM		*****	*****	*****			ALL EVENTS	CONTINUOU S
FLOW, IN CONDUIT OR THRU TREATMENT PLANT EFFLUENT	SAMPLE MEASUREMENT	27.6	27.6	(03)	*****	*****	*****	*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX	mgd	*****	*****	*****			CONTINUOU S	CONTINUOU S

8-UNDERGOING FACILITY UPGRADE
 9-NO SAMPLING CONDUCTED THIS MONTH

COTTAGE FARM CSO

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD

100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C01 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
 (SUBR E)
 F - FINAL
 CSO 201 - MONTHLY & QUARTERLY

*** NO DISCHARGE ***

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING			(4 Card Only) QUANTITY OR LOADING				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS			
CHLORINE, TOTAL RESIDUAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(19)			GRAB
	PERMIT REQUIREMENT	*****	*****	****	0.1 MO AVG	*****	.25 (mx.hourly)	mg/L		ONCE/ DSCHRG	GRAB
COLIFORM, FECAL GENERAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(13)			GRAB
	PERMIT REQUIREMENT	*****	*****	****	REPORT MO AVG	*****	REPORT DAILY MX	#/100ML		FOUR/ YEAR	GRAB
PRECIPITATION, VOLUME EFFLUENT	SAMPLE MEASUREMENT		Q	(03)	*****	*****	*****	*****			CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	mgd	*****	*****	*****	*****		ALL EVENTS	CONTINUOU S

9-NO SAMPLING CONDUCTED THIS MONTH
 Q-CANNOT QUANTIFY RAINFALL VOLUME

COTTAGE FARM CSO

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD
 100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
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 ATTN: RICHARD TRUBIANO

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SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

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 CSO 201 - MONTHLY & QUARTERLY

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2000	9	1	2000	9	30

*** NO DISCHARGE ***

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR LOADING (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
LC50/PF STAT 24HR AC MYSID. BAHIA EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****	*****	(23)			24
	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC MENIDIA EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****	*****	(23)			24
	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINCIPAL EXECUTIVE OFFICER	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 original form for signature	TELEPHONE	DATE	
Richard Trubiano, Director Field Operations									(617)788-4704	09/15/2000	

9-NO SAMPLING CONDUCTED THIS MONTH

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD

100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

PRISON POINT CSO
 NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C03 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
 (SUBR E)
 F - FINAL
 CSO 203 - MONTHLY & QUARTERLY

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

*** NO DISCHARGE ***

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR LOADING (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW RATE EFFLUENT	SAMPLE MEASUREMENT	8		GALLON	*****	*****	*****	*****			CONTINUOU S
	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX	/HOUR	*****	*****	*****				ALL EVENTS
DISCHARGE DURATION EFFLUENT	SAMPLE MEASUREMENT	169	540	MINUTE	*****	*****	*****	*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	S	*****	*****	*****			ALL EVENTS	CONTINUOU S
BOD, 5 - DAY (20 DEG. C) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	*****	9		(19) mg/L		FOUR/ YEAR	COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	REPORT MAXIMUM				COMPOS
PH EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(12) SU		FOUR/ YEAR	GRAB
	PERMIT REQUIREMENT	*****	*****	****	6.5 DAILY MN	*****	8.3 DAILY MX				GRAB
SOLIDS, TOTAL SUSPENDED EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	*****	9		(19) mg/L		FOUR/ YEAR	COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	REPORT MAXIMUM				COMPOS
RAINFALL EFFLUENT	SAMPLE MEASUREMENT	0.1	0.94	INCHES	*****	*****	*****	*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	/DAY	*****	*****	*****			ALL EVENTS	CONTINUOU S
FLOW, IN CONDUIT OR THRU TREATMENT PLANT EFFLUENT	SAMPLE MEASUREMENT	8.67	18	(03)	*****	*****	*****	*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX	mgd	*****	*****	*****			CONTINUOU S	CONTINUOU S

8-UNDERGOING FACILITY UPGRADE
 9-NO SAMPLING CONDUCTED THIS MONTH

PRISON POINT CSO

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD
 100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C03 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
 (SUBR E)
 F - FINAL
 CSO 203 - MONTHLY & QUARTERLY

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

*** NO DISCHARGE ***

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR LOADING (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
CHLORINE, TOTAL RESIDUAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	0.5	*****	3	(19)			GRAB
	PERMIT REQUIREMENT	*****	*****	****	0.1 MO AVG	*****	.25 (mx.hourly)	mg/L		ONCE/ DSCHRG	GRAB
COLIFORM, FECAL GENERAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(13)			GRAB
	PERMIT REQUIREMENT	*****	*****	****	REPORT MO AVG	*****	REPORT DAILY MX	#/100ML		FOUR/ YEAR	GRAB
PRECIPITATION, VOLUME EFFLUENT	SAMPLE MEASUREMENT	Q		(03)	*****	*****	*****	*****			CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	mgd	*****	*****	*****	*****		ALL EVENTS	CONTINUOU S

9-NO SAMPLING CONDUCTED THIS MONTH
 Q-CANNOT QUANTIFY RAINFALL VOLUME

PRISON POINT CSO

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD
 100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C03 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
 (SUBR E)
 F - FINAL
 CSO 203- MONTHLY & QUARTERLY

*** NO DISCHARGE ***

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR LOADING (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
LC50/PF STAT 24HR AC PIMPEPHALES EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****	*****	(23)			24
	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC DAPHNIA EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****	*****	(23)			24
	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINCIPAL EXECUTIVE OFFICER	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 original form for signature	TELEPHONE	DATE	
Richard Trubiano, Director Field Operations									(617)788-4704	09/15/2000	

9-NO SAMPLING CONDUCTED THIS MONTH

SOMERVILLE MARGINAL CSO

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C05
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
 (SUBR E)
 F - FINAL
 CSO 205 - MONTHLY & QUARTERLY

100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

*** NO DISCHARGE ***

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR LOADING (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW RATE EFFLUENT	SAMPLE MEASUREMENT	8		GALLON	*****	*****	*****	*****			CONTINUOU S
	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX	/HOUR	*****	*****	*****			ALL EVENTS	CONTINUOU S
DISCHARGE DURATION EFFLUENT	SAMPLE MEASUREMENT	59	59	MINUTE	*****	*****	*****	*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	S	*****	*****	*****			ALL EVENTS	CONTINUOU S
BOD, 5 - DAY (20 DEG. C) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	*****	9		(19) mg/L			COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	REPORT MAXIMUM			FOUR/ YEAR	COMPOS
PH EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(12) SU			GR
	PERMIT REQUIREMENT	*****	*****	****	6.5 DAILY MN	*****	8.3 DAILY MX			FOUR/ YEAR	GRAB
SOLIDS, TOTAL SUSPENDED EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	*****	9		(19) mg/L			COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	REPORT MAXIMUM			FOUR/ YEAR	COMPOS
RAINFALL EFFLUENT	SAMPLE MEASUREMENT	0.1	0.94	INCHES		*****		*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	/DAY	*****	*****	*****			ALL EVENTS	CONTINUOU S
FLOW, IN CONDUIT OR THRU TREATMENT PLANT EFFLUENT	SAMPLE MEASUREMENT	0.78	0.78	(03)		*****		*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX	mgd	*****	*****	*****			CONTINUOU S	CONTINUOU S

8-UNDERGOING FACILITY UPGRADE
 9-NO SAMPLING CONDUCTED THIS MONTH

SOMERVILLE MARGINAL CSO

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD

100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C05
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
 (SUBR E)
 F - FINAL
 CSO 205 - MONTHLY & QUARTERLY

*** NO DISCHARGE ***

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING			(4 Card Only) QUANTITY OR LOADING				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS			
CHLORINE, TOTAL RESIDUAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(19)			GR
	PERMIT REQUIREMENT	*****	*****	****	0.1 MO AVG	*****	.25 (mx.hourly)	mg/L		ONCE/ DSCHRG	GRAB
COLIFORM, FECAL GENERAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(13)			GR
	PERMIT REQUIREMENT	*****	*****	****	REPORT MO AVG	*****	REPORT DAILY MX	#/100ML		FOUR/ YEAR	GRAB
PRECIPITATION, VOLUME EFFLUENT	SAMPLE MEASUREMENT			(03)	*****	Q	*****	*****			CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	mgd	*****	*****	*****	*****		ALL EVENTS	CONTINUOU S

9-NO SAMPLING CONDUCTED THIS MONTH
 Q-CANNOT QUANTIFY RAINFALL VOLUME

SOMERVILLE MARGINAL CSO

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD
 100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C05
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
 (SUBR E)
 F - FINAL
 CSO 205 - MONTHLY & QUARTERLY

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

*** NO DISCHARGE ***

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR LOADING (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
LC50/PF STAT 24HR AC PIMPEPHALES EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9			(23)			
	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC DAPHNIA EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****	*****	(23)			
	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINCIPAL EXECUTIVE OFFICER	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 original form for signature	TELEPHONE	DATE	
Richard Trubiano, Director Field Operations									(617)788-4704	09/15/2000	

9-NO SAMPLING CONDUCTED THIS MONTH

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD
 100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

**SOMERVILLE MARGINAL RELIEF OUTFALL
 NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)**

MA0103284	C25
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
 (SUBR E)
 F - FINAL
 CSO 205 - MONTHLY & QUARTERLY

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

*** NO DISCHARGE ***

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR LOADING (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW RATE EFFLUENT	SAMPLE MEASUREMENT			GALLON /HOUR	*****	*****	*****	*****			CONTINUOU S
	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX		*****	*****	*****			ALL EVENTS	CONTINUOU S
DISCHARGE DURATION EFFLUENT	SAMPLE MEASUREMENT			MINUTE S	*****	*****	*****	*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM		*****	*****	*****			ALL EVENTS	CONTINUOU S
BOD, 5 - DAY (20 DEG. C) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	*****			(19)			COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	REPORT MAXIMUM	mg/L		FOUR/ YEAR	COMPOS
PH EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****		*****		(12)			GR
	PERMIT REQUIREMENT	*****	*****	****	6.5 DAILY MN	*****	8.3 DAILY MX	SU		FOUR/ YEAR	GRAB
SOLIDS, TOTAL SUSPENDED EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	*****			(19)			COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	REPORT MAXIMUM	mg/L		FOUR/ YEAR	COMPOS
RAINFALL EFFLUENT	SAMPLE MEASUREMENT			INCHES /DAY		*****		*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM		*****	*****	*****			ALL EVENTS	CONTINUOU S
FLOW, IN CONDUIT OR THRU TREATMENT PLANT EFFLUENT	SAMPLE MEASUREMENT			(03) mgd		*****		*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX		*****	*****	*****			CONTINUOU S	CONTINUOU S

8-UNDERGOING FACILITY UPGRADE
 9-NO SAMPLING CONDUCTED THIS MONTH

SOMERVILLE MARGINAL RELIEF OUTFALL

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD

100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C25
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
 (SUBR E)
 F - FINAL
 CSO 205 - MONTHLY & QUARTERLY

*** NO DISCHARGE ***

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING			(4 Card Only) QUANTITY OR LOADING				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS			
CHLORINE, TOTAL RESIDUAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****		*****		(19)			GR
	PERMIT REQUIREMENT	*****	*****	****	0.1 MO AVG	*****	.25 (mx.hourly)	mg/L		ONCE/ DSCHRG	GRAB
COLIFORM, FECAL GENERAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****		*****		(13)			GR
	PERMIT REQUIREMENT	*****	*****	****	REPORT MO AVG	*****	REPORT DAILY MX	#/100ML		FOUR/ YEAR	GRAB
PRECIPITATION, VOLUME EFFLUENT	SAMPLE MEASUREMENT			(03)	*****		*****				CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	mgd	*****	*****	*****	*****		ALL EVENTS	CONTINUOU S

8-UNDERGOING FACILITY UPGRADE
 9-NO SAMPLING CONDUCTED THIS MONTH

SOMERVILLE MARGINAL RELIEF OUTFALL

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD
 100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)**

MA0103284	C25
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
 (SUBR E)
 F - FINAL
 CSO 205 - MONTHLY & QUARTERLY

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

*** NO DISCHARGE ***

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR LOADING (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
LC50/PF STAT 24HR AC PIMPEPHALES EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****				(23)		
	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT	SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC DAPHNIA EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****		*****	*****	(23)		
	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT	SEMI / ANNUAL	COMP24
NAME / TITLE PRINCIPAL EXECUTIVE OFFICER	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 original form for signature	TELEPHONE	DATE
Richard Trubiano, Director Field Operations									(617)788-4704	09/15/2000

9-NO SAMPLING CONDUCTED THIS MONTH

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD

100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

CONSTITUTION BEACH CSO
 NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C07 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
 (SUBR E)
 F - FINAL
 CSO 207 - MONTHLY & QUARTERLY

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

*** NO DISCHARGE ***

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR LOADING (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW RATE EFFLUENT	SAMPLE MEASUREMENT	N/V		GALLON	*****	*****	*****	*****			CONTINUOU S
	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX	/HOUR	*****	*****	*****				ALL EVENTS
DISCHARGE DURATION EFFLUENT	SAMPLE MEASUREMENT	45	45	MINUTE	*****	*****	*****	*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	S	*****	*****	*****			ALL EVENTS	CONTINUOU S
BOD, 5 - DAY (20 DEG. C) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	*****	9		(19) mg/L		FOUR/ YEAR	COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	REPORT MAXIMUM				COMPOS
PH EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(12) SU		FOUR/ YEAR	GRAB
	PERMIT REQUIREMENT	*****	*****	****	6.5 DAILY MN	*****	8.3 DAILY MX				GRAB
SOLIDS, TOTAL SUSPENDED EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	*****	9		(19) mg/L		FOUR/ YEAR	COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	REPORT MAXIMUM				COMPOS
RAINFALL EFFLUENT	SAMPLE MEASUREMENT	0.1	0.94	INCHES	*****	*****	*****	*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	/DAY	*****	*****	*****			ALL EVENTS	CONTINUOU S
FLOW, IN CONDUIT OR THRU TREATMENT PLANT EFFLUENT	SAMPLE MEASUREMENT	N/V		(03)	*****	*****	*****	*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX	mgd	*****	*****	*****			CONTINUOU S	CONTINUOU S

N/V-METER MALFUNCTION
 9-NO SAMPLING CONDUCTED THIS MONTH

CONSTITUTION BEACH CSO

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD

100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C07 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
 (SUBR E)
 F - FINAL
 CSO 207 - MONTHLY & QUARTERLY

*** NO DISCHARGE ***

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING			(4 Card Only) QUANTITY OR LOADING				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS			
CHLORINE, TOTAL RESIDUAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(19)			GRAB
	PERMIT REQUIREMENT	*****	*****	****	0.1 MO AVG	*****	.25 (mx.hourly)	mg/L		ONCE/ DSCHRG	GRAB
COLIFORM, FECAL GENERAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(13)			GRAB
	PERMIT REQUIREMENT	*****	*****	****	REPORT MO AVG	*****	REPORT DAILY MX	#/100ML		FOUR/ YEAR	GRAB
PRECIPITATION, VOLUME EFFLUENT	SAMPLE MEASUREMENT	Q		(03)	*****	*****	*****	*****			CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	mgd	*****	*****	*****	*****		ALL EVENTS	CONTINUOU S

9-NO SAMPLING CONDUCTED THIS MONTH
 Q-CANNOT QUANTIFY RAINFALL VOLUME

CONSTITUTION BEACH CSO

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD
 100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C07 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
 (SUBR E)
 F - FINAL
 CSO 207 - MONTHLY & QUARTERLY

*** NO DISCHARGE ***

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR LOADING (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
LC50/PF STAT 24HR AC PIMPEPHALES EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****	*****	(23)			24
	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT	1	SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC DAPHNIA EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****	*****	(23)			24
	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT	1	SEMI / ANNUAL	COMP24
NAME / TITLE PRINCIPAL EXECUTIVE OFFICER	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 original form for signature	TELEPHONE	DATE	
Richard Trubiano, Director Field Operations									(617)788-4704	09/15/2000	

9-NO SAMPLING CONDUCTED THIS MONTH

FOX POINT CSO

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C09 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
 (SUBR E)
 F - FINAL
 CSO 209 - MONTHLY & QUARTERLY

100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

*** NO DISCHARGE ***

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR LOADING (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW RATE EFFLUENT	SAMPLE MEASUREMENT	8		GALLO N /HOUR	*****	*****	*****	*****			CONTINUOU S
	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX		*****	*****	*****			ALL EVENTS	CONTINUOU S
DISCHARGE DURATION EFFLUENT	SAMPLE MEASUREMENT	23	30	MINUTE S	*****	*****	*****	*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM		*****	*****	*****			ALL EVENTS	CONTINUOU S
BOD, 5 - DAY (20 DEG. C) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	*****	9		(19) mg/L			COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	REPORT MAXIMUM			FOUR/ YEAR	COMPOS
PH EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(12) SU			GR
	PERMIT REQUIREMENT	*****	*****	****	6.5 DAILY MN	*****	8.3 DAILY MX			FOUR/ YEAR	GRAB
SOLIDS, TOTAL SUSPENDED EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	*****	9		(19) mg/L			COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	REPORT MAXIMUM			FOUR/ YEAR	COMPOS
RAINFALL EFFLUENT	SAMPLE MEASUREMENT	0.1	0.94	INCH ES/DAY	*****	*****	*****	*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM		*****	*****	*****			ALL EVENTS	CONTINUOU S
FLOW, IN CONDUIT OR THRU TREATMENT PLANT EFFLUENT	SAMPLE MEASUREMENT	2.66	4.54	(03) mgd	*****	*****	*****	*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX		*****	*****	*****			CONTINUOU S	CONTINUOU S

8-UNDERGOING FACILITY UPGRADE
 9-NO SAMPLING CONDUCTED THIS MONTH

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD

100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

FOX POINT CSO
 NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C09 A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

MINOR
 (SUBR E)
 F - FINAL
 CSO 209 - MONTHLY & QUARTERLY

*** NO DISCHARGE ***

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING			(4 Card Only) QUANTITY OR LOADING				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS			
CHLORINE, TOTAL RESIDUAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(19)			GR
	PERMIT REQUIREMENT	*****	*****	****	0.1 MO AVG	*****	.25 (mx.hourly)	mg/L		ONCE/ DSCHRG	GRAB
COLIFORM, FECAL GENERAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(13)			GR
	PERMIT REQUIREMENT	*****	*****	****	REPORT MO AVG	*****	REPORT DAILY MX	#/100ML		FOUR/ YEAR	GRAB
PRECIPITATION, VOLUME EFFLUENT	SAMPLE MEASUREMENT	Q		(03)	*****	*****	*****	*****			CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	mgd	*****	*****	*****	*****		ALL EVENTS	CONTINUOU S

9-NO SAMPLING CONDUCTED THIS MONTH
 Q-CANNOT QUANTIFY RAINFALL VOLUME

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD
 100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

FOX POINT CSO
 NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C09 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
 (SUBR E)
 F - FINAL
 CSO 209 - MONTHLY & QUARTERLY

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

*** NO DISCHARGE ***

PARAMETER <i>(32-37)</i>		(3 Card Only) QUANTITY OR LOADING <i>(46-53)</i> <i>(54-61)</i>			(4 Card Only) QUANTITY OR LOADING <i>(38-45)</i> <i>(46-53)</i> <i>(54-61)</i>				NO. EX <i>(62-63)</i>	FREQUENCY OF ANALYSIS <i>(64-68)</i>	SAMPLE TYPE <i>(69-70)</i>
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
LC50/PF STAT 24HR AC PIMPEPHALES EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****	*****	(23)			24
	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC DAPHNIA EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****	*****	(23)			24
	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINCIPAL EXECUTIVE OFFICER	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 original form for signature	TELEPHONE	DATE	
Richard Trubiano, Director Field Operations									(617)788-4704	09/15/2000	

9-NO SAMPLING CONDUCTED THIS MONTH

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD
 100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

COMMERCIAL POINT CSO
 NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C11 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
 (SUBR E)
 F - FINAL
 CSO 211- MONTHLY & QUARTERLY

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

*** NO DISCHARGE ***

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR LOADING (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW RATE EFFLUENT	SAMPLE MEASUREMENT	8		GALLON /HOUR	*****	*****	*****	*****			CONTINUOU S
	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX		*****	*****	*****			ALL EVENTS	CONTINUOU S
DISCHARGE DURATION EFFLUENT	SAMPLE MEASUREMENT	52	95	MINUTE S	*****	*****	*****	*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM		*****	*****	*****			ALL EVENTS	CONTINUOU S
BOD, 5 - DAY (20 DEG. C) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	*****	9		(19)			COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	REPORT MAXIMUM	mg/L		FOUR/ YEAR	COMPOS
PH EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(12)			GRAB
	PERMIT REQUIREMENT	*****	*****	****	6.5 DAILY MN	*****	8.3 DAILY MX	SU		FOUR/ YEAR	GRAB
SOLIDS, TOTAL SUSPENDED EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	*****	9		(19)			COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	REPORT MAXIMUM	mg/L		FOUR/ YEAR	COMPOS
RAINFALL EFFLUENT	SAMPLE MEASUREMENT	0.1	0.94	INCH ES/DAY	*****	*****	*****	*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM		*****	*****	*****			ALL EVENTS	CONTINUOU S
FLOW, IN CONDUIT OR THRU TREATMENT PLANT EFFLUENT	SAMPLE MEASUREMENT	1.41	1.59	(03) mgd	(9)	*****	(9)	*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX		*****	*****	*****			CONTINUOU S	CONTINUOU S

8-UNDERGOING FACILITY UPGRADE
 9-NO SAMPLING CONDUCTED THIS MONTH

COMMERCIAL POINT CSO

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD

100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284
 PERMIT NUMBER

C11 A
 DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

MINOR
 (SUBR E)
 F - FINAL
 CSO 211 - MONTHLY & QUARTERLY

*** NO DISCHARGE ***

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR LOADING (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
CHLORINE, TOTAL RESIDUAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(19)			GRAB
	PERMIT REQUIREMENT	*****	*****	****	0.1 MO AVG	*****	.25 (mx.hourly)	mg/L		ONCE/ DSCHRG	GRAB
COLIFORM, FECAL GENERAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(13)			GRAB
	PERMIT REQUIREMENT	*****	*****	****	REPORT MO AVG	*****	REPORT DAILY MX	#/100ML		FOUR/ YEAR	GRAB
PRECIPITATION, VOLUME EFFLUENT	SAMPLE MEASUREMENT	Q		(03)	*****	*****	*****	*****			CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	mgd	*****	*****	*****	*****		ALL EVENTS	CONTINUOU S

9-NO SAMPLING CONDUCTED THIS MONTH
 Q-CANNOT QUANTIFY RAINFALL VOLUME

COMMERCIAL POINT CSO

PERMITTEE NAME / ADDRESS
 NAME MWRA
 ADDRESS CHARLESTOWN NAVY
 YARD
 100 FIRST AVE
 BOSTON MA 02129
 FACILITY MWRA
 LOCATION BOSTON MA 02129
 ATTN: RICHARD TRUBIANO

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C11 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
 (SUBR E)
 F - FINAL
 CSO 211 - MONTHLY & QUARTERLY

*** NO DISCHARGE ***

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2000	9	1	2000	9	30

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR LOADING (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
LC50/PF STAT 24HR AC U CERICDAPHNIA EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****	*****	(23)			24
	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC U D. PULEX EFFLUENT	SAMPLE MEASUREMENT	*****	*****	****	9	*****	*****	(23)			24
	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINCIPAL EXECUTIVE OFFICER	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 original form for signature	TELEPHONE	DATE	
Richard Trubiano, Director Field Operations									(617)788-4704	09/15/2000	

9-NO SAMPLING CONDUCTED THIS MONTH