## DEER ISLAND TREATMENT PLANT

## NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

PERMITTEE NAME / ADDRESS SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR) **MAJOR** NAME **MWRA** MA0103284 T01 A (SUBR E) ADDRESS CHARLESTOWN NAVY PERMIT NUMBER DISCHARGE NUMBER F - FINAL YARD TREATED SANITARY MONITORING PERIOD 100 FIRST AVE WASTEWATER FROM TO BOSTON MA 02129 YEAR YEAR МО DAY МО DAY FACILITY MWRA 00 09 01 00 30 09 LOCATION BOSTON MA 02129

ATTN: RICHARD TRUBIANO

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

Page 1 of 6

PARAMETER		(3 Card Only) <b>Ql</b> (46-53)	JANTITY OR I (54-61)	LOADING	(4 Card Only) (38-45)	) <b>QUANTITY</b> (46-53)	OR LOADING (54-61)		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(32-37)	/	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
NITROGEN, KJELDAHL	SAMPLE MEASUREMENT	*****	*****	*****	27.6	*****	*****	(19)	0	03/30	24
TOTAL (AS N) EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO AVG	*****	*****	mg/L		ONCE / MONTH	COMP24
CHLORIDE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	611	(19)	0	01 / 01	GR
(AS CL) INFLUENT	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MX	mg/L		DAILY	GRAB
ARSENIC, TOTAL	SAMPLE MEASUREMENT	*****	*****	*****	0.116	*****	0.347	(28)	0	03/30	24
(AS AS) EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L		ONCE / MONTH	COMP24
COPPER	SAMPLE MEASUREMENT	*****	*****	*****	15.100	*****	16.400	(28)	0	03/30	24
TOTAL RECOVERABLE EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L		ONCE / MONTH	COMP24
COLIFORM, FECAL - % SAMPLE EXCEEDS	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	*****	(23)	0	90/30	CA
LIMIT EFFLUENT	PERMIT REQUIREMENT	*****	*****		10 MAXIMUM	*****	*****	PERCENT		THREE / DAY	GRAB
PCB-1016	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0		0	02/30	24
(AROCHLOR 1016) EFFLUENT	PERMIT REQUIREMENT	*****	*****		0.000045 MO AVG	*****	REPORT DAILY MX	ng/L		ONCE / MONTH	COMP24
4, 4'-DDT (P, P'-DDT)	SAMPLE MEASUREMENT	*****	*****	*****	0	*****	0		0	02/30	24
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ng/L		ONCE / MONTH	COMP24

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

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

		(3 Card Only) Ql	JANTITY OR I	OADING	(4 Card Only	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER		(46-53)	(54-61)		(38-45)	(46-53)	(54-61)		1	ANALYSIS	
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
CHLORDANE, GAMMA,	SAMPLE MEASUREMENT	*****	*****	******	0	*****	0		0	02/30	24
WHOLE WATER EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ng/L		ONCE / MONTH	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT	SAMPLE MEASUREMENT	290.5	446.0	(03)	*****	*****	*****	******	0	99 / 99	RC
PLANT EFFLUENT	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	mgd	*****	*****	****			CONTIN- UOUS	RCORDR
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	****	*****	******	36	*****	67	(28)	0	03 / 01	GR
EFFLUENT	PERMIT REQUIREMENT	****	*****		456 MO AVG	*****	631 DAILY MX	ug/L		THREE / DAY	GRAB
MERCURY, TOTAL	SAMPLE MEASUREMENT	*****	*****	******	0.0229	*****	0.0272	(28)	0	03/30	24
(AS HG) EFFLUENT	PERMIT REQUIREMENT	****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L		ONCE / MONTH	COMP24
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	****	*****	******	N/A			(13)			
EFFLUENT	PERMIT REQUIREMENT	****	****		Monthly GeoMean	200 WKLY MN	400 DAILY MX	#/100ML		THREE / DAY	GRAB
COLIFORM, FECAL	SAMPLE MEASUREMENT	****	*****	******	*****	135	863	(13)	0	03/01	GR
GENERAL EFFLUENT	PERMIT REQUIREMENT	*****	*****		*****	14000 WKLY MN	14000 DAILY MX	#/100ML		THREE / DAY	GRAB
CYANIDE, TOTAL	SAMPLE MEASUREMENT	****	*****	*****	0	*****	0	(19)	0	02/30	GR
EFFLUENT	PERMIT REQUIREMENT	****	*****		REPORT MO AVG	*****	REPORT DAILY MX	mg/L		ONCE / MONTH	GRAB

PARAMETER		(3 Card Only) <b>Ql</b>	JANTITY OR L	OADING	(4 Card Only)	QUANTITY (46-53)	OR LOADING (54-61)		NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	ANALYSIS (64-68)	(69-70)
VOLATILE FRACTION	SAMPLE MEASUREMENT	*****	*****	*****	46	*****	56	(28)	0	02/30	GR
ORGANICS (EPA 624) EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L		ONCE / MONTH	GRAB
CBOD5 / NH3-N	SAMPLE MEASUREMENT	*****	*****	*****	129	157	190	(19)	0	01 / 01	24
INFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO AVG	REPORT WKLY AVG	REPORT DAILY MX	mg/L		DAILY	COMP24
CBOD5 / NH3-N	SAMPLE MEASUREMENT	*****	*****	*****	13	17	25	(19)	0	01 / 01	24
EFFLUENT	PERMIT REQUIREMENT	*****	*****		25 MO AVG	40 WKLY AVG	REPORT DAILY MX	mg/L		DAILY	COMP24
FLOW,TOTAL	SAMPLE MEASUREMENT	331.9	273.7	(03)	*****	*****	*****	******	0	99 / 99	RC
EFFLUENT	PERMIT REQUIREMENT	436 MO AVG	REPORT DAILY MX	mgd	*****	*****	*****			CONTIN- UOUS	RCORDR
NAME / TITLE PRINCI OFFICI		WITH THE INFORMATION SUBMITTED HERE			HAVE PERSONALLY EXAMINED AND AM FAMILIAR REIN; AND BASED ON MY INQUIRY OF THOSE			Con origin -	l form for	TELEPHONE	DATE
Richard Trubia Field Oper	•	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.				(617)788-4704	09/15/2000				

## DEER ISLAND TREATMENT PLANT

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 T01 T
PERMIT NUMBER DISCHARGE NUMBER

MONITORING PERIOD									
	FROM		ТО						
YEAR	MO	DAY	YEAR	MO	DAY				
00	09	01	00	09	30				

MAJOR (SUBR E) F - FINAL TUNNEL WET DATA

\*\*\* NO DISCHARGE \*\*\*

PARAMETER		(3 Card Only) Ql		OADING	`	,			NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)		(46-53)	(54-61)	LINUTO	(38-45)	(46-53)	(54-61)	LINITO	(00 00)	ANALYSIS	(
	SAMPLE	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
NOEL STAT 7DAY CHR Menidia	MEASUREMENT	*****	*****	****	25	*****	*****	(23)	0	01/30	24
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	1.5 DAILY MN	*****	*****	PERCENT		ONCE / MONTH	COMP24
NOEL STAT 1 HR FERT. CHR	SAMPLE MEASUREMENT	*****	*****	***	25	*****	*****	(23)	0	01/30	24
Arbacia EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	1.5 DAILY MN	*****	*****	PERCENT		ONCE / MONTH	COMP24
STATRE LC50 48HR ACU Menidia	SAMPLE MEASUREMENT	*****	*****	***	55	*****	*****	(23)	0	01/30	24
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	50 DAILY MN	*****	*****	PERCENT		ONCE / MONTH	COMP24
P/F STAT 48HR ACU MYSIDOPSIS	SAMPLE MEASUREMENT	*****	*****	****	100	*****	*****	(23)	0	01/30	24
BAHIA EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	50 DAILY MN	*****	*****	PERCENT		ONCE / MONTH	COMP24
NAME / TITLE PRINC OFFIC		WITH THE IN	FORMATION SUE	MITTED HER	HAVE PERSONALLY EXAMINED AND AM FAMILIAR EREIN; AND BASED ON MY INQUIRY OF THOSE					TELEPHONE	DATE
Richard Trubia Field Ope		INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATI SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AW ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, II POSSIBILITY OF FINE AND IMPRISONMENT.				ETE. I AM AWAF FORMATION, INC	RE THAT THERE	signati		(617)788-4704	09/15/2000
		l .	1 SOSIDETT OF THE AND INITROGRAMENT.								Page 1 of 1

Page 1 of 1

## **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

IATIONAL POLLUTANT DISCHARGE ELIMINA	ATION :

MA0103284 PERMIT NUMBER

SYSTEM (NPDES) MINOR SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR) (SUBR E) C01 A F - FINAL DISCHARGE NUMBER

CSO 201- MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE

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

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

FACILITY MWRA LOCATION BOSTON MA 02129 ATTN: RICHARD TRUBIANO

NATIONAL POLLUTANT DISCHARGE ELIMINATIO	N SYSTEM (NPDES)
SEPTEMBER 2000 - DISCHARGE MONITORING	G REPORT (DMR)

1

FROM

MO

9

YEAR

2000

MA0103284 C01 A
PERMIT NUMBER DISCHARGE NUMBER

2000

MONITORING PERIOD

TO
DAY YEAR MO DAY

9

30

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

\*\*\* NO DISCHARGE

			OADING			OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
$\sim$	_ ' /			, ,					ANALYSIS	1
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
SAMPLE MEASUREMENT	*****	*****	****	9	*****		(19)			GRAB
PERMIT REQUIREMENT	*****	*****	****	0.1 MO AVG	*****	.25 (mx.hourly)	mg/L		ONCE/ DSCHRG	GRAB
SAMPLE MEASUREMENT	*****	*****	***	9	*****	, , ,	(13)			GRAB
PERMIT REQUIREMENT	*****	*****	****	REPORT MO AVG	*****	REPORT DAILY MX	#/100ML		FOUR/ YEAR	GRAB
SAMPLE MEASUREMENT		Q	(03)	*****	*****	****	******			CONTINUOU S
PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	mgd	****	*****	****			ALL EVENTS	CONTINUOU S
	PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT	MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REPORT	SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REPORT REPORT	AVERAGE MAXIMUM UNITS  SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT PERMIT REQUIREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REPORT REPORT	AVERAGE   MAXIMUM   UNITS   MINIMUM	AVERAGE   MAXIMUM   UNITS   MINIMUM   AVERAGE	AVERAGE   MAXIMUM   UNITS   MINIMUM   AVERAGE   MAXIMUM	AVERAGE   MAXIMUM   UNITS   MINIMUM   AVERAGE   MAXIMUM   UNITS	AVERAGE   MAXIMUM   UNITS   MINIMUM   AVERAGE   MAXIMUM   UNITS   (62-63)	AVERAGE   MAXIMUM   UNITS   MINIMUM   AVERAGE   MAXIMUM   UNITS   (62-63)   (64-68)

## 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

NATIONA	L POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
SEPTE	EMBER 2000 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 PERMIT NUMBER C01 A DISCHARGE NUMBER MINOR (SUBR E) F - FINAL CSO 201 - MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE

MONITORING PERIOD								
	FROM		ТО					
YEAR	MO	DAY	YEAR	MO	DAY			
2000 9 1 2000 9								

PARAMETER		(3 Card Only) QL		OADING	` ,				NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)		(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63)	ANALYSIS (64-68)	(69-70)
LC50/PF STAT 24HR AC MYSID. BAHIA	SAMPLE MEASUREMENT	*****	*****	***	9	*****	*****	(23)	(02 00)	(0.1.00)	24
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC MENIDIA	SAMPLE MEASUREMENT	*****	*****	****	9	*****	*****	(23)			24
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINCI OFFICE		WITH THE IN	FORMATION SUE	BMITTED HER	REIN; AND BASE	ERSONALLY EXAMINED AND AM FAMILIAR ND BASED ON MY INQUIRY OF THOSE				TELEPHONE	DATE
Richard Trubiar Field Oper		SUBMITTED INF	INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMI ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE POSSIBILITY OF FINE AND IMPRIS				RE THAT THERE	See original signatu		(617)788-4704	09/15/2000

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)

MONITORING PERIOD

DAY

1

FROM

MO

9

YEAR

2000

MO AVE

MA0103284 C03 A
PERMIT NUMBER DISCHARGE NUMBER

YEAR

2000

TO

DAY

30

МО

9

MINOR (SUBR E) F - FINAL

\*\*\* NO DISCHARGE

CSO 203 - MONTHLY & QUARTERLY

PARAMETER		(3 Card Only) QI	JANTITY OR	LOADING	(4 Card Only	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)	$\sim$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)		1	ANALYSIS	
(32-37)	/	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
FLOW RATE	SAMPLE MEASUREMENT	8		GALLON	*****	*****	*****	*****			CONTINUOU S
EFFLUENT	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX	/HOUR	*****	*****	*****			ALL EVENTS	CONTINUOU S
DISCHARGE DURATION	SAMPLE MEASUREMENT	169	540	MINUTE	*****	*****	****	******		01/DS	CONTINUOU S
EFFLUENT	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	S 1	*****	*****	*****			ALL EVENTS	CONTINUOU S
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	*****	***	*****	9		(19)			COMPOS
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	*****	REPORT AVERAGE	REPORT MAXIMUM	mg/L		FOUR/ YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	***	9	*****		(12)			GRAB
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	6.5 DAILY MN	*****	8.3 DAILY MX	SU		FOUR/ YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	***	*****	9		(19)			COMPOS
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	REPORT MAXIMUM	mg/L		FOUR/ YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	0.1	0.94	INCHES	*****	*****	*****	******		01/DS	CONTINUOU S
EFFLUENT	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	/DAY	*****	*****	*****			ALL EVENTS	CONTINUOU S
FLOW, IN CONDUIT OR THRU TREATMENT	SAMPLE MEASUREMENT	8.67	18	(03)	*****	*****	****	******		01/DS	CONTINUOU S
PLANT	PERMIT	REPORT	REPORT	mad	*****	*****	*****	******		CONTINUOU	CONTINUOU

mgd

DAILY MX

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

EFFLUENT

REQUIREMENT

## 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 ELIMINAT	TION SYSTEM (NPDES)
SEPTEMBER 2000 - I	DISCHARGE MONITOR	ING REPORT (DMR)
MA0103284		C03 A

MA0103284 PERMIT NUMBER

MINOR (SUBR E) F - FINAL

DISCHARGE NUMBER

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)		(46-53)	(54-61)		(38-45)	(46-53)	OR LOADING (54-61)		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(02 07)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	****	0.5	*****	3	(19)			GRAB
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	0.1 MO AVG	*****	.25 (mx.hourly)	mg/L		ONCE/ DSCHRG	GRAB
COLIFORM, FECAL	SAMPLE MEASUREMENT	*****	*****	***	9	*****		(13)			GRAB
GENERAL EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT MO AVG	*****	REPORT DAILY MX	#/100ML		FOUR/ YEAR	GRAB
PRECIPITATION,	SAMPLE MEASUREMENT	Q		(03)	*****	*****	****	******			CONTINUOU S
VOLUME EFFLUENT	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	mgd	*****	*****	*****			ALL EVENTS	CONTINUOU S
9-NO SAMPLING CONDUCTED	THIS MONTH	I	l	l	l	l					Page 2 of 3

## 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 PERMIT NUMBER C03 A DISCHARGE NUMBER MINOR (SUBR E) F - FINAL CSO 203- MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE

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

DADAMETED		(3 Card Only) Ql	JANTITY OR L	OADING	(4 Card Only)	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER (32-37)	$\rightarrow$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
LC50/PF STAT 24HR AC PIMPEPHALES	SAMPLE MEASUREMENT	*****	*****	***	9	*****	*****	(23)			24
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC DAPHNIA	SAMPLE MEASUREMENT	*****	*****	***	9	*****	*****	(23)			24
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINCI OFFICE		WITH THE IN	ER PENALTY OF L	BMITTED HER	REIN; AND BASEI	ON MY INQUIR	Y OF THOSE	Can ariai	form for	TELEPHONE	DATE
Richard Trubiar Field Oper		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.						(617)788-4704	09/15/2000		

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)

OLI ILMBLIK 2000	DIGGLIANCE MICHALON	into itel oiti (Diint)
MA0103284		C05
PERMIT NUMBER		DISCHARGE NUMBER

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

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

\*\*\* NO DISCHARGE

MINOR

DADAMETED		(3 Card Only) Ql	JANTITY OR	LOADING	(4 Card Only	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER (32-37)	$\sim$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
FLOW RATE	SAMPLE MEASUREMENT	8		GALLON	*****	*****	*****	****			CONTINUOU S
EFFLUENT	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX	/HOUR	*****	*****	****			ALL EVENTS	CONTINUOU S
DISCHARGE DURATION EFFLUENT	SAMPLE MEASUREMENT	59	59	MINUTE S	*****	*****	****	*****		01/DS	CONTINUOU S
	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM		*****	*****	*****			ALL EVENTS	CONTINUOU S
BOD, 5 - DAY	SAMPLE MEASUREMENT	*****	*****	***	*****	9		(19)			COMPOS
(20 DEG. C) EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	REPORT MAXIMUM	mg/L		FOUR/ YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(12)			GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	6.5 DAILY MN	*****	8.3 DAILY MX	SU		FOUR/ YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	****	*****	***	*****	9		(19)			COMPOS
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	REPORT MAXIMUM	mg/L		FOUR/ YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	0.1	0.94	INCHES		*****		******		01/DS	CONTINUOU S
EFFLUENT	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	/DAY	*****	*****	*****			ALL EVENTS	CONTINUOU S
FLOW, IN CONDUIT OR THRU TREATMENT	SAMPLE MEASUREMENT	0.78	0.78	(03)		*****		*****		01/DS	CONTINUOU S
PLANT EFFLUENT 8-UNDERGOING FACILITY UPGF	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX	mgd	*****	*****	*****	***************************************		CONTINUOU S	CONTINUOU S Page 1 of 3

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 ELIMINAT	TION SYSTEM (NPDES
SEPTEMBER 2000 - I	DISCHARGE MONITOR	ING REPORT (DMR)

MA0103284 C05
PERMIT NUMBER DISCHARGE NUMBER

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

*** NO DISCHARGE	***

CSO 205 - MONTHLY & QUARTERLY

MINOR (SUBR E)

F - FINAL

PARAMETER				OADING			OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)		(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63)	ANALYSIS (64-68)	(69-70)
CHLORINE, TOTAL	SAMPLE MEASUREMENT	*****	*****	***	9	*****		(19)	(02 00)	(0.00)	GR
RESIDUAL EFFLUENT	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,	SAMPLE MEASUREMENT			(03)	*****	Q	*****	******			CONTINUOU S
VOLUME EFFLUENT	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	mgd	*****	*****	*****			ALL EVENTS	CONTINUOU S
ONO SAMPLING CONDUCTED	THIC MONTH		•			•					Page 2 of 3

## 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

MA0103284 PERMIT NUMBER

FROM

МО

9

YEAR

2000

MINOR (SUBR E) F - FINAL DISCHARGE NUMBER

CSO 205 - MONTHLY & QUARTERLY

١	MONITOR	ING PERIOD			*** NO DISCHARGE
			TO		
	DAY	YEAR	MO	DAY	
	1	2000	q	30	

C05

DADAMETED		(3 Card Only) Ql	JANTITY OR L	OADING	(4 Card Only)	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER (32-37)	$\sim$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
(32-37)	/	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
LC50/PF STAT 24HR AC	SAMPLE MEASUREMENT	*****	*****	***	9			(23)			
PIMPEPHALES EFFLUENT	PERMIT REQUIREMENT	*****	****	****	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC	SAMPLE MEASUREMENT	*****	****	***	9	*****	*****	(23)			
DAPHNIA EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
OFFICER WITH THE INFORMATION SUBMITTED HER				HAVE PERSONALLY EXAMINED AND AM FAMILIAR REIN; AND BASED ON MY INQUIRY OF THOSE OR OBTAINING THE INFORMATION, I BELIEVE THE			O		TELEPHONE	DATE	
Richard Trubiar Field Oper	SUBMITTED INF	ORMATION IS TR	UE, ACCURA FOR SUBMI	ATE AND COMPL	ETE. I AM AWAI FORMATION, INC	RE THAT THERE	See original signati		(617)788-4704	09/15/2000	

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

C25

DISCHARGE NUMBER

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

BOSTON MA 02129 MWRA

FACILITY LOCATION BOSTON MA 02129 ATTN: RICHARD TRUBIANO

100 FIRST AVE

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

MA0103284

PERMIT NUMBER

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

\*\*\* NO DISCHARGE X \*\*\*

DADAMETED		(3 Card Only) Ql	JANTITY OR	LOADING	(4 Card Only	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER (32-37)	$\sim$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
(32-37)	/	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
	SAMPLE				*****	*****	*****				CONTINUOU
FLOW RATE	MEASUREMENT			GALLON				*****			S
EFFLUENT	PERMIT	REPORT	REPORT	/HOUR	*****	*****	*****			ALL EVENTS	CONTINUOU
	REQUIREMENT	MO AVE	DAILY MX							ALLEVENTO	S
	SAMPLE				*****	*****	*****			01/DS	CONTINUOU
DISCHARGE DURATION	MEASUREMENT			MINUTE				******		01/00	S
EFFLUENT	PERMIT	REPORT	REPORT	S	*****	*****	*****			ALL EVENTS	CONTINUOU
	REQUIREMENT	AVERAGE	MAXIMUM							ALLEVENTO	S
BOD, 5 - DAY	SAMPLE	*****	*****		*****			(19)			COMPOS
(20 DEG. C)	MEASUREMENT			****							COMI OS
EFFLUENT	PERMIT	*****	*****	****	*****	REPORT	REPORT			FOUR/	COMPOS
LITEOLINI	REQUIREMENT					AVERAGE	MAXIMUM	mg/L		YEAR	COMI OS
	SAMPLE	*****	*****			*****		(12)			GR
PH	MEASUREMENT			****							OIX
EFFLUENT	PERMIT	*****			6.5	*****	8.3			FOUR/	GRAB
	REQUIREMENT				DAILY MN		DAILY MX	SU		YEAR	GINAD
SOLIDS, TOTAL	SAMPLE	*****	*****		*****			(19)			COMPOS
SUSPENDED	MEASUREMENT			****							OOMI OO
EFFLUENT	PERMIT	*****	*****	****	*****	REPORT	REPORT			FOUR/	COMPOS
211202111	REQUIREMENT					AVERAGE	MAXIMUM	mg/L		YEAR	
	SAMPLE					*****				01/DS	CONTINUOU
RAINFALL	MEASUREMENT			INCHES				*****			S
EFFLUENT	PERMIT	REPORT	REPORT	/DAY	*****	*****	*****			ALL	CONTINUOU
	REQUIREMENT	AVERAGE	MAXIMUM							EVENTS	S
FLOW, IN CONDUIT OR	SAMPLE			(03)		*****				01/DS	CONTINUOU
THRU TREATMENT	MEASUREMENT			1				******			S
PLANT	PERMIT	REPORT	REPORT		*****	*****	*****			CONTINUOU	CONTINUOU
EFFLUENT	REQUIREMENT	MO AVE	DAILY MX	mgd						S	S Dags 4 of 2

8-UNDERGOING FACILITY UPGRADE

Page 1 of 3

## 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 PERMIT NUMBER

CSO 205 - MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE X \*\*\*

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

DADAMETED		(3 Card Only) QI	JANTITY OR I	OADING	(4 Card Only)	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER (32-37)	$\rightarrow$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	****		*****		(19)			GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	0.1 MO AVG	*****	.25 (mx.hourly)	mg/L		ONCE/ DSCHRG	GRAB
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	****		*****		(13)			GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT MO AVG	*****	REPORT DAILY MX	#/100ML		FOUR/ YEAR	GRAB
PRECIPITATION,	SAMPLE MEASUREMENT			(03)	*****		****	******			CONTINUOU S
VOLUME EFFLUENT	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	mgd	*****	*****	*****			ALL EVENTS	CONTINUOU S
				1							
9 LINDEDCOING FACILITY LIDG	1	l .	ļ			ļ	ļ			l	Dogo 2 of 2

## 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)

MA0103284 PERMIT NUMBER

MINOR SEPTEMBER 2000 - DISCHARGE MONITORING REPORT (DMR) (SUBR E) C25 F - FINAL DISCHARGE NUMBER

CSO 205 - MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE X \*\*\*

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

DADAMETED		(3 Card Only) Ql	JANTITY OR I	LOADING	(4 Card Only)	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER	$\sim$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
(32-37)	/	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
LC50/PF STAT 24HR AC	SAMPLE MEASUREMENT	****	*****	***				(23)			
PIMPEPHALES EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC DAPHNIA	SAMPLE MEASUREMENT	*****	*****	***		*****	*****	(23)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
				•				•			
								-			
				-				-			
NAME / TITLE PRINCI OFFICE		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 See						See original	form for	TELEPHONE	DATE
Richard Trubiar Field Oper		SUBMITTED INF	· ·						ure	(617)788-4704	09/15/2000

## 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		

DADAMETED		(3 Card Only) Ql	JANTITY OR	LOADING	(4 Card Only)	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER (32-37)	$\sim$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
(32-37)	/	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
	SAMPLE	N/V			*****	*****	*****				CONTINUOU
FLOW RATE	MEASUREMENT	IN/ V		GALLON				******			S
EFFLUENT	PERMIT	REPORT	REPORT	/HOUR	*****	*****	*****			ALL EVENTS	CONTINUOU
	REQUIREMENT	MO AVE	DAILY MX							ALL EVENTS	S
	SAMPLE	45	45		*****	*****	*****			01/DS	CONTINUOU
DISCHARGE DURATION	MEASUREMENT	40	40	MINUTE				******		01/03	S
EFFLUENT	PERMIT	REPORT	REPORT	S	*****	*****	*****			ALL EVENTS	CONTINUOU
	REQUIREMENT	AVERAGE	MAXIMUM							ALLEVENTO	S
BOD. 5 - DAY	SAMPLE	*****	*****		*****	9		(19)			COMPOS
(20 DEG. C)	MEASUREMENT			****		9					COIVII OS
EFFLUENT	PERMIT	*****	*****	****	*****	REPORT	REPORT			FOUR/	COMPOS
211202111	REQUIREMENT					AVERAGE	MAXIMUM	mg/L		YEAR	OOMI OO
	SAMPLE	*****	*****		9	*****		(12)			GRAB
PH	MEASUREMENT			****	·						OTORD
EFFLUENT	PERMIT	*****	*****	****	6.5	*****	8.3			FOUR/	GRAB
	REQUIREMENT				DAILY MN		DAILY MX	SU		YEAR	OTOLD
SOLIDS. TOTAL	SAMPLE	*****	*****		*****	9		(19)			COMPOS
SUSPENDED	MEASUREMENT			****		,					0011111
EFFLUENT	PERMIT	*****	*****	****	*****	REPORT	REPORT			FOUR/	COMPOS
	REQUIREMENT					AVERAGE	MAXIMUM	mg/L		YEAR	
	SAMPLE	0.1	0.94		*****	*****	*****			01/DS	CONTINUOU
RAINFALL	MEASUREMENT	_		INCHES				*****			S
EFFLUENT	PERMIT	REPORT	REPORT	/DAY	*****	*****	*****			ALL	CONTINUOU
	REQUIREMENT	AVERAGE	MAXIMUM							EVENTS	S
FLOW, IN CONDUIT OR	SAMPLE	N/V		(03)	*****	*****	*****			01/DS	CONTINUOU
THRU TREATMENT	MEASUREMENT							*****			S
PLANT	PERMIT	REPORT	REPORT		*****	*****	*****			CONTINUOU	CONTINUOU
EFFLUENT	REQUIREMENT	MO AVE	DAILY MX	mgd						S	S

N/V-METER MALFUNCTION

## CONSTITUTION BEACH CSO

PERMITTEE NAME / ADDRESS

NAME MWRA

FACILITY

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE

BOSTON MA 02129 MWRA

LOCATION BOSTON MA 02129 ATTN: RICHARD TRUBIANO

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

MA0103284 C07 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 207 - MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE \*\*\*

PARAMETER		(3 Card Only) QI		OADING	,	QUANTITY			NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)	$\sim$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)		1	ANALYSIS	
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(19)			GRAB
EFFLUENT	PERMIT REQUIREMENT	****	****	****	0.1 MO AVG	*****	.25 (mx.hourly)	mg/L		ONCE/ DSCHRG	GRAB
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	****	****	***	9	*****		(13)			GRAB
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT MO AVG	*****	REPORT DAILY MX	#/100ML		FOUR/ YEAR	GRAB
PRECIPITATION,	SAMPLE MEASUREMENT	Q		(03)	*****	*****	*****	******			CONTINUOU S
VOLUME EFFLUENT	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	mgd	*****	*****	*****			ALL EVENTS	CONTINUOU S

## CONSTITUTION BEACH CSO

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

ARD

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)

MONITORING PERIOD

YEAR

2000

DAY

MA0103284 PERMIT NUMBER

YEAR

2000

FROM

МО

9

C07 A
DISCHARGE NUMBER

DAY

30

TO

MO

9

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

\*\*\* NO DISCHARGE \*\*\*

PARAMETER		(3 Card Only) Ql		OADING	,	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)	$\sim$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)		Ţ	ANALYSIS	
(32-37)	/	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
LC50/PF STAT 24HR AC PIMPEPHALES	SAMPLE MEASUREMENT	*****	*****	****	9	*****	*****	(23)			24
FFLUENT PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT	1	SEMI / ANNUAL	COMP24	
LC50/PF STAT 24HR AC DAPHNIA	SAMPLE MEASUREMENT	*****	*****	****	9	*****	*****	(23)			24
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT	1	SEMI / ANNUAL	COMP24
NAME / TITLE PRINCIPAL EXECUTIVE OFFICER I CERTIFY UNDER PENALTY OF LAW THE WITH THE INFORMATION SUBMITTED OF INDIVIDUAL OF MATERIAL PROPORTION OF INDIVIDUAL OF IMPROVED IN PROPORTION OF INDIVIDUAL OF IMPROVED IN PROPORTION OF INDIVIDUAL OF IMPROVED IN PROPORTION OF IMPROPORTION OF IMPROVED IN PROPORTION OF IMPROVED IN PROPORTIO					REIN; AND BASE	ON MY INQUIR	Y OF THOSE	See original	form for	TELEPHONE	DATE
Richard Trubiar Field Oper	SUBMITTED INF	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.						ıre	(617)788-4704	09/15/2000	

## FOX 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 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	12										

\*\*\* NO DISCHARGE \*\*\*

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

8-UNDERGOING FACILITY UPGRADE

Page 1 of 3

## FOX 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 C09 A
PERMIT NUMBER DISCHARGE NUMBER

	MONITORING PERIOD										
FROM TO											
YEAR	MO	DAY	YEAR	MO	DAY						
2000											

CSO 209 - MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE \*\*\*

MINOR (SUBR E)

F - FINAL

DADAMETED		(3 Card Only) QI	JANTITY OR I	OADING	(4 Card Only	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER (32-37)	$\sim$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)		1	ANALYSIS	
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(19)			GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	0.1 MO AVG	*****	.25 (mx.hourly)	mg/L		ONCE/ DSCHRG	GRAB
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	****	9	*****		(13)			GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT MO AVG	*****	REPORT DAILY MX	#/100ML		FOUR/ YEAR	GRAB
PRECIPITATION,	SAMPLE MEASUREMENT	Q		(03)	*****	*****	*****	******			CONTINUOU S
VOLUME EFFLUENT	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	mgd	*****	*****	*****			ALL EVENTS	CONTINUOU S
O NO CAMPLING CONDUCTED					l	Į		l	•	1	Dogg 2 of 2

#### FOX POINT CSO

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY

YARD

100 FIRST AVE

BOSTON MA 02129

SAMPLE

**MEASUREMENT** 

PERMIT

REQUIREMENT

SAMPLE

**MEASUREMENT** 

PERMIT

REQUIREMENT

**FACILITY** MWRA

PARAMETER

(32-37)

LC50/PF STAT 24HR AC

LC50/PF STAT 24HR AC

**PIMPEPHALES** 

EFFLUENT

DAPHNIA

**EFFLUENT** 

LOCATION BOSTON MA 02129 ATTN: RICHARD TRUBIANO

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

MA0103284 PERMIT NUMBER

C09 A DISCHARGE NUMBER **MINOR** (SUBR E) F - FINAL CSO 209 - MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE

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

	2000	9	1	2000	9	30				
_	(3 Card Only) Q	UANTITY OR L	OADING	(4 Card Only)	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
	(46-53)	(54-61)		(38-45)	(46-53)		ļ	ANALYSIS		
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
	*****	*****	***	9	****	*****	(23)			24
	*****	*****	****	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
	*****	*****	***	9	****	****	(23)			24
	*****	*****	****	REPORT DAILY MN	****	*****	PERCENT		SEMI / ANNUAL	COMP24

NAME / TITLE PRINCIPAL EXECUTIVE **OFFICER** 

> Richard Trubiano, Director Field Operations

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.

**TELEPHONE** DATE See original form for signature (617)788-4704 09/15/2000

## COMMERCIAL POINT CSO

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE

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

	BOSTON N	MA 02129			MONITOR	ING PERIOD			*** NO [	DISCHA	RGE
FACILITY	MWRA			FROM			TO				
LOCATION	BOSTON N	ΛΑ 02129	YEAR	MO	DAY	YEAR	MO	DAY			
	IARD TRUBIA		2000	9	1	2000	9	30			
		-							-'		
DADAA	4ETED		(3 Card Only) QI	UANTITY OR	LOADING	(4 Card Only	QUANTITY	OR LOADING		NO. EX	FREQUE
PARAN (32-		$\sim$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANAL
(32-	-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-
=: 0:		SAMPLE	8			*****	*****	*****			
		SAMPLE	8	MAXIMUM	UNITS	*****			UNITS	(62-	63)

DADAMETED		(3 Card Only) QI	JANTITY OR	LOADING	(4 Card Only)	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER (32-37)	$\times$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)		1	ANALYSIS	
(32-37)	/	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
FLOW RATE	SAMPLE MEASUREMENT	8		GALLON	*****	*****	*****	******			CONTINUOU S
EFFLUENT	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX	/HOUR	*****	*****	*****			ALL EVENTS	CONTINUOU S
DISCHARGE DURATION	SAMPLE MEASUREMENT	52	95	MINUTE	*****	*****	*****	******		01/DS	CONTINUOU S
EFFLUENT	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	S	*****	*****	*****			ALL EVENTS	CONTINUOU S
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	*****	***	*****	9		(19)			COMPOS
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	*****	REPORT AVERAGE	REPORT MAXIMUM	mg/L		FOUR/ YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	***	9	*****		(12)			GRAB
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	6.5 DAILY MN	*****	8.3 DAILY MX	SU		FOUR/ YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	****	*****	9		(19)			COMPOS
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	REPORT MAXIMUM	mg/L		FOUR/ YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	0.1	0.94	INCH	*****	*****	****	******		01/DS	CONTINUOU S
EFFLUENT	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	ES/DAY	*****	*****	****			ALL EVENTS	CONTINUOU S
FLOW, IN CONDUIT OR THRU TREATMENT	SAMPLE MEASUREMENT	1.41	1.59	(03)	(9)	*****	(9)	*****		01/DS	CONTINUOU S
PLANT EFFLUENT	PERMIT REQUIREMENT	REPORT MO AVE	REPORT DAILY MX	mgd	*****	*****	****			CONTINUOU S	CONTINUOU S

## 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

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

CSO 211 - MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE \*\*\*

MINOR (SUBR E)

F - FINAL

DADAMETED		(3 Card Only) QI	JANTITY OR I	OADING	(4 Card Only	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER (32-37)	$\perp$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)		1	ANALYSIS	
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	***	9	*****		(19)			GRAB
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	0.1 MO AVG	*****	.25 (mx.hourly)	mg/L		ONCE/ DSCHRG	GRAB
COLIFORM, FECAL	SAMPLE MEASUREMENT	*****	*****	***	9	*****		(13)			GRAB
GENERAL EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT MO AVG	*****	REPORT DAILY MX	#/100ML		FOUR/ YEAR	GRAB
PRECIPITATION,	SAMPLE MEASUREMENT	Q		(03)	*****	*****	****	*****			CONTINUOU S
VOLUME EFFLUENT	PERMIT REQUIREMENT	REPORT AVERAGE	REPORT MAXIMUM	mgd	*****	*****	*****			ALL EVENTS	CONTINUOU S
				•							
O NO SAMPLING CONDUCTED	THO MONTH	1	ļ	ļ		ļ		ļ	1	1	Dogo 2 of 2

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

 MONITORING PERIOD
 \*\*\* NO DISCHARGE

 FROM
 TO

 YEAR
 MO
 DAY

 2000
 9
 1
 2000
 9
 30

PARAMETER (32-37)		(3 Card Only) Ql	JANTITY OR I	OADING	(4 Card Only)	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
		(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
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 INDIVIDUAL OF A DESCRIPTION OF THE INFORMATION OF TH						See original form for signature		TELEPHONE	DATE
Richard Trubiano, Director Field Operations		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.								(617)788-4704	09/15/2000

9-NO SAMPLING CONDUCTED THIS MONTH