DEER ISLAND TREATMENT PLANT

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

PERMITTEE NAME / ADDRESS NAME MWRA ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE

BOSTON MA 02129

FACILITY MWRA LOCATION BOSTON MA 02129

$\Lambda TTNI$	Michael Hornbrook	-

JANUARY 2001 - I	DISCHARGE MONITORING	G REPORT (DMR)
MA0103284		T01 A
PERMIT NUMBER		DISCHARGE NUMBER

MAJOR (SUBR E) DISCHARGE NUMBER F - FINAL TREATED SANITARY WASTEWATER

*** NO DISCHARGE	_

MONITORING PERIOD										
	FROM		TO							
YEAR	MO	DAY	YEAR	MO	DAY					
01	01	1	01	31						
					_					
QUANTIT	Y OR LOADIN	G	QUANTI	TY OR LOAD	ING					

PARAMETER		QUANTIT	Y OR LOADIN	G	QUANT	TY OR LOAD	ING		NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM (MO AVE)	AVERAGE (WKLY)	MAXIMUM (DAILY)	UNITS	(62-63)	ANALYSIS (64-68)	(69-70)
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.3	*****	6.9	SU	0	01 / 01	GR
EFFLUENT	PERMIT LIMIT	*****	*****		6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	209	241	283	(19) mg/L	0	01 / 01	24
INFLUENT	PERMIT LIMIT	*****	*****		REPORT MO AVG	REPORT WKLY AVG	REPORT DAILY MX	MG/L		DAILY	COMP24
SOLIDS, TOTAL	SAMPLE MEASUREMENT	*****	*****	*****	20.3	23.6	46.9	(19)	0	01 / 01	24
SUSPENDED EFFLUENT	PERMIT LIMIT	*****	*****		30 MO AVG	45 WKLY AVG	REPORT DAILY MX	mg/L MG/L		DAILY	COMP24
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.23	1.0	(25) mL/L	0	01 / 01	GR
EFFLUENT	PERMIT LIMIT	*****	*****		*****	REPORT WKLY AVG	REPORT DAILY MX	ML/L		DAILY	GRAB
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	*****	*****	*****	18.96	*****	*****	(19)	0	07/31	24
EFFLUENT	PERMIT LIMIT	****	****		REPORT MO AVG	*****	****	mg/L MG/L		ONCE / MONTH	COMP24
NITROGEN, NITRITE	SAMPLE MEASUREMENT	****	****	*****	0.022	*****	****	(19)	0	05/31	24
ГОТAL (AS N) EFFLUENT	PERMIT LIMIT	****	****		REPORT MO AVG	*****	****	mg/L MG/L		ONCE / MONTH	COMP24
NITROGEN, NITRATE TOTAL (AS N)	SAMPLE MEASUREMENT	****	*****	*****	0.064	*****	****	(19)	0	05/31	24
EFFLUENT	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	*****	mg/L MG/L		ONCE / MONTH	COMP24

PARAMETER		(3 Card Only) Ql (46-53)	JANTITY OR L (54-61)	OADING	(4 Card Only) C (38-45)	QUANTITY OR (46-53)	(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 TOTAL (AS N)	SAMPLE MEASUREMENT	*****	*****	*****	25.21	*****	*****	(19)	0	07/31	24
EFFLUENT	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	*****	mg/L MG/L		ONCE / MONTH	COMP24
CHLORIDE (AS CL)	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	974	(19)	0	01 / 01	GR
INFLUENT	PERMIT LIMIT	*****	*****		*****	*****	REPORT DAILY MX	mg/L MG/L		DAILY	GRAB
ARSENIC, TOTAL	SAMPLE MEASUREMENT	*****	*****	*****	0.3	*****	0.9	(28)	0	03/31	24
(AS AS) EFFLUENT	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
COPPER TOTAL RECOVERABLE	SAMPLE MEASUREMENT	*****	*****	******	9.37	*****	13.00	(28)	0	05/31	24
EFFLUENT EFFLUENT	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
COLIFORM, FECAL - % of total number of samples	SAMPLE MEASUREMENT	*****	*****	******	0.0	*****	*****	%	0	03/01	CA
exceeding 14000 #/100mL EFFLUENT	PERMIT LIMIT	*****	*****		10 MAXIMUM	*****	*****	% PERCENT		THREE / DAY	GRAB
PCB-1016	SAMPLE MEASUREMENT	*****	*****	*****	0.0	*****	0.0	(28)	0	02/31	24
AROCHLOR 1016) EFFLUENT	PERMIT LIMIT	*****	*****		0.000045 MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
4, 4'-DDT (P, P'-DDT)	SAMPLE MEASUREMENT	*****	*****	*****	0.0	*****	0.0	(28)	0	02/31	24
EFFLUENT	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24

PARAMETER		(3 Card Only) Ql (46-53)	JANTITY OR L (54-61)	OADING	(4 Card Only) G	QUANTITY OR (46-53)	(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 EFFLUENT GROSS	SAMPLE MEASUREMENT	*****	*****	*****	0.0	*****	0.0	(28)	0	02/31	24
VALUE	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
CHLORDANE, ALPHA, WHOLE WATER	SAMPLE MEASUREMENT	*****	*****	*****	0.0	*****	0.0	(28)	0	02/31	24
EFFLUENT GROSS VALUE	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
CHLORDANE (TECH MIX. AND METABOLITES)	SAMPLE MEASUREMENT	*****	*****	*****	0.0	*****	0.0	(28)	0	02/31	24
EFFLUENT GROSS VALUE	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
DIELDRIN EFFLUENT GROSS	SAMPLE MEASUREMENT	*****	*****	*****	0.0	*****	0.0	(28)	0	02/31	24
VALUE	PERMIT LIMIT	****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
HEPTACHLOR EFFLUENT GROSS	SAMPLE MEASUREMENT	*****	*****	******	0.0	*****	0.0	(28)	0	02/31	24
VALUE	PERMIT LIMIT	****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
HEPTACHLOR EPOXIDE	SAMPLE MEASUREMENT	****	*****	*****	0.0	*****	0.0	(28)	0	02/31	24
EFFLUENT GROSS VALUE	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
PCB-1221 (AROCHLOR 1221)	SAMPLE MEASUREMENT	*****	*****	*****	0.0	*****	0.0	(28)	0	02/31	24
FFLUENT GROSS ALUE	PERMIT LIMIT	****	****		0.000045 MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24

PARAMETER		(3 Card Only) Ql (46-53)	JANTITY OR L (54-61)	OADING	(4 Card Only) C (38-45)	QUANTITY OR (46-53)	(54-61)		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
PCB-1232 (AROCHLOR 1232)	SAMPLE MEASUREMENT	*****	*****	*****	0.0	*****	0.0	(28)	0	02/31	24
EFFLUENT GROSS VALUE	PERMIT LIMIT	*****	*****		0.000045 MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
PCB-1242 (AROCHLOR 1242)	SAMPLE MEASUREMENT	*****	*****	*****	0.0	*****	0.0	(28)	0	02/31	24
EFFLUENT GROSS VALUE	PERMIT LIMIT	*****	*****		0.000045 MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
PCB-1248 (AROCHLOR 1248)	SAMPLE MEASUREMENT	*****	*****	*****	0.0	*****	0.0	(28)	0	02/31	24
EFFLUENT GROSS VALUE	PERMIT LIMIT	*****	*****		0.000045 MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
PCB-1254 (AROCHLOR 1254)	SAMPLE MEASUREMENT	*****	*****	******	0.0	*****	0.0	(28)	0	02/31	24
EFFLUENT GROSS VALUE	PERMIT LIMIT	*****	*****		0.000045 MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
PCB-1260 (AROCHLOR 1260)	SAMPLE MEASUREMENT	*****	*****	*****	0.0	*****	0.0	(28)	0	02/31	24
EFFLUENT GROSS VALUE	PERMIT LIMIT	*****	*****		0.000045 MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
POLYCHLORINATED BIPHENYLS (PCBS)	SAMPLE MEASUREMENT	*****	*****	*****	2.72	*****	2.72	(28)	0	01/31	24
EFFLUENT GROSS VALUE	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ng/L nG/L		ONCE / MONTH	COMP24
HEXACHLOROBENZENE EFFLUENT GROSS	SAMPLE MEASUREMENT	*****	*****	*****	0.0	*****	0.0	(28)	0	02/31	24
VALUE	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24

PARAMETER		(3 Card Only) Ql (46-53)	JANTITY OR L (54-61)	OADING	(4 Card Only) Q (38-45)	UANTITY OR (46-53)	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)
CHLORDANE, GAMMA, WHOLE WATER	SAMPLE MEASUREMENT	*****	*****	*****	0.0	*****	0.0	(28)	0	02/31	24
EFFLUENT GROSS VALUE	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT	SAMPLE MEASUREMENT	333.3	412.6	(03)	*****	*****	*****	*****	0	99 / 99	RC
PLANT	PERMIT LIMIT	REPORT MO AVG	REPORT DAILY MX	mgd MGD	*****	*****	*****			CONTIN- UOUS	RCORDR
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	75	****	533	(19)	0	03 / 01	GR
EFFLUENT GROSS VALUE	PERMIT LIMIT	*****	*****	•	456 MO AVG	****	631 DAILY MX	ug/L ug/L		THREE / DAY	GRAB
MERCURY, TOTAL (AS HG)	SAMPLE MEASUREMENT	*****	*****	*****	0.047	****	0.200	(28)	0	06/31	24
EFFLUENT GROSS VALUE	PERMIT LIMIT	*****	****		REPORT MO AVG	****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	****	*****	N/A			(13)		03/01	
EFFLUENT GROSS VALUE	PERMIT LIMIT	*****	*****		200 MoGeoMean	200 WKLY MN	400 DAILY MX	#/100mL #/100ML		THREE / DAY	GRAB
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	****	******	*****	18	78	(13)	0	03/01	GR
FFLUENT GROSS 'ALUE	PERMIT LIMIT	*****	*****		*****	14000 WKLY MN	14000 DAILY MX	#/100mL #/100ML		THREE / DAY	GRAB
CYANIDE, TOTAL EFFLUENT GROSS	SAMPLE MEASUREMENT	*****	*****	*****	0.0	****	0.0	(28)	0	02/31	GR
VALUE	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	mg/L MG/L		ONCE / MONTH	GRAB

Page 5 of 6

PARAMETER		(3 Card Only) QI	UANTITY OR L	OADING	(4 Card Only) G	UANTITY OR	(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 ORGANICS (EPA 624)	SAMPLE MEASUREMENT	*****	*****	*****	37.90	*****	46.77	(28)	0	02/30	GR
EFFLUENT GROSS VALUE	PERMIT LIMIT	*****	*****	•	REPORT MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	GRAB
CBOD5 / NH3-N	SAMPLE MEASUREMENT	*****	*****	*****	124.2	136.5	174.2	(19) mg/L	0	01 / 01	24
RAW SEW/INFLUENT	PERMIT LIMIT	*****	*****	2000000	REPORT MO AVG	REPORT WKLY AVG	REPORT DAILY MX	MG/L		DAILY	COMP24
CBOD5 / NH3-N EFFLUENT GROSS	SAMPLE MEASUREMENT	*****	*****	*****	16.1	18.0	30.7	(19) mg/L	0	01 / 01	24
VALUE VALUE	PERMIT LIMIT	*****	*****	~~~~	25 MO AVG	40 WKLY AVG	REPORT DAILY MX	MG/L		DAILY	COMP24
FLOW,TOTAL EFFLUENT GROSS	SAMPLE MEASUREMENT	331.5	321.9	(03)	*****	*****	*****	*****	0	99 / 99	CA
VALUE VALUE	PERMIT LIMIT	436 ANNL AVG	REPORT MO AVG	mgd MGD	*****	*****	*****			CONTINUOUS	CALCULATE
								1			
								_			
		I CERTIEV LINDS	D DENALTY OF LA	\M/ TUAT UA\/E	- DEDSONALI V EV	ZAMINED AND AN	EAMILIAD WITH	See origin			
NAME / TITLE PRINCIPAL EXECUTIVE Michael J. Hornbrook		THE INFORM	TCERTIFY 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							TELEPHONE (617)788-4359	02/15/01

EPA Form 3320-1 (08-95) Previous editions may not be used.

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

Page 6 of 6

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: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDE JANUARY 2001 - DISCHARGE MONITORING REPORT (DMR)	:0)
JANUAR 1 2001 - DISCHARGE MONITORING REPORT (DMR)	

MONITORING PERIOD

YEAR

01

DAY

MA0103284 PERMIT NUMBER

YEAR

01

FROM

MO

01

T01 T
DISCHARGE NUMBER

DAY

31

TO

MO

01

MAJOR (SUBR E) F - FINAL

TUNNEL WET DATA

*** NO DISCHARGE	

		(3 Card Only) Ql	JANTITY OR L	OADING	(4 Card Only)	UANTITY OR	LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER		(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 STAT 48HR ACU M YSID. BAHIA	SAMPLE MEASUREMENT	*****	*****	***	100	*****	*****	(23) %	0	01/30	24
TAA3E 1 0 2 EFFLUENT GROSS	PERMIT LIMIT	*****	*****	****	50 DAILY MN	*****	*****	PERCEN T		ONCE / MONTH	COMP24
LC50 STAT 48HR ACU M ENDIA	SAMPLE MEASUREMENT	*****	*****	***	100	*****	*****	(23) %	0	01/30	24
TBD6B 1 0 2 EFFLUENT GROSS	PERMIT LIMIT	****	*****	****	50 DAILY MN	*****	*****	PERCEN T		ONCE / MONTH	COMP24
NOEL STAT 1HR FERT CHR ARBACIA	SAMPLE MEASUREMENT	*****	*****	***	< 1.5	*****	*****	(23) %	0	01/30	24
TBH3A 1 0 2 EFFLUENT GROSS	PERMIT LIMIT	*****	*****	***	1.5 DAILY MN	*****	*****	PERCEN T		ONCE / MONTH	COMP24
NOAEL STATRE 7DAY CH R MENIDIA	SAMPLE MEASUREMENT	*****	*****	***	50	*****	*****	(9A)	0	01/30	24
TDP6B 1 0 2 EFFLUENT GROSS	PERMIT LIMIT	*****	*****	***	1.5 DAILY MN	*****	*****	PASS=0 FAIL=1		ONCE / MONTH	COMP24
								-			
NAME / TITLE PRINCI	PAL EXECUTIVE		R PENALTY OF LA					See origin	al form	TELEPHONE	DATE
Michael J. Ho		IMMEDIATEL'	ATION SUBMITTED Y RESPONSIBLE F	OR OBTAINING	THE INFORMATION	N, I BELIEVE TH		for signa		(617)788-4359	02/15/01 Page 1 of 1

EPA Form 3320-1 (08-95) Previous editions may not be used.

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

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: Michael Hornbrook

MONITORING PERIOD

YEAR

2001

DAY

MA0103284 PERMIT NUMBER

YEAR

2001

FROM

MO

MINOR (SUBR E)

F - FINAL

C01 A

DISCHARGE NUMBER

DAY

31

TO

MO

CSO 201- MONTHLY & QUARTERLY

X ***

*** NO DISCHARGE

PARAMETER		(3 Card Only) Q (JANTITY OR L	OADING	(4 Card Only)	QUALITY O	R CONCENTRA	ATION	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
BOD, 5 - DAY	SAMPLE MEASUREMENT	*****	*****	***	9	*****	9	(19)			
(20 DEG. C) EFFLUENT	PERMIT REQUIREMENT	*****	****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	***	9	*****	9	(12) SU			
EFFLUENT	PERMIT REQUIREMENT	*****	****	****	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	****	***	9	*****	9	(19)			
EFFLUENT	PERMIT REQUIREMENT	*****	****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	1.67	0.42	(61) inches	*****	*****	*****	******		AL/EV	RC
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches	*****	*****	*****			ALL EVENTS	RCORDR
FLOW, WASTEWATER	SAMPLE MEASUREMENT	0	0	(3R)	*****	*****	*****	*****		99/99	CN
BYPASSING TREATMENT PLANT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgal mgal	*****	*****	*****			CONTINUOUS	CONTINUOUS
FLOW, IN CONDUIT OR THRU TREATMENT	SAMPLE MEASUREMENT	0.00	0.00	(03)	*****	*****	*****	*****		99/99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	*****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL	SAMPLE MEASUREMENT	*****	*****	***	9	*****	9	(19)			
RESIDUAL EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L mg/L		FOUR/YEAR	GRAB

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: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
IANIJARY 2001 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 PERMIT NUMBER

2001

C01 A
DISCHARGE NUMBER

31

MINOR (SUBR E) F - FINAL

CSO 201 - MONTHLY & QUARTERLY

*** NO DISCHARGE X ***

MONITORING PERIOD							
	FROM			TO			
YEAR	MO	DAY	YEAR	MO	DAY		

2001

		(3 Card Only) QI	JANTITY OR L	OADING	(4 Card Only)	QUALITY O	R CONCENTR	ATION	NO. EX	FREQUENCY OF	SAMPLE TYPE
1	\sim	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	******	9	*****	9	(13)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100ML		FOUR/YEAR	GRAB
BYPASS OF TREATMENT	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	*****	******			
BIPASS OF TREATMENT	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
DURATION OF	SAMPLE MEASUREMENT	*****	С	(79)	*****	*****	*****	*****			
DISCHARGE	PERMIT REQUIREMENT	*****	CNTESTED	hours/day	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE DURATION	SAMPLE MEASUREMENT	*****	0	(8A) hours	*****	*****	*****	*****			
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	0	(93) occur/mon	*****	*****	*****	*****	0	AL/EV	OC
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
O NO CAMPI INC CONDUCTED TO	LIIO MONITU	1	I.		L	<u>l</u>	<u> </u>	<u> </u>			

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: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) JANUARY 2001 - DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

DAY

YEAR

2001

MA0103284 PERMIT NUMBER

YEAR

2001

FROM

MO

C01 A DISCHARGE NUMBER

DAY

31

TO

MO

MINOR (SUBR E) F - FINAL

CSO 201 - MONTHLY & QUARTERLY

PARAMETER		(3 Card Only) Ql (46-53)	JANTITY OR L	OADING	(4 Card Only)	(46-53)	OR LOADING		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
LC50/PF STAT 24HR AC	SAMPLE MEASUREMENT	*****	*****	*****	9	*****	*****	(23)	(* 23)	(1.2.2)	(1111)
MYSID. BAHIA EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMPOSITE
LC50/PF STAT 24HR AC MENIDIA	SAMPLE MEASUREMENT	*****	*****	*****	9	*****	*****	(23)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMPOSITE
								†			
								†			
NAME / TITLE PRINCI OFFICE		THE INFORMA	R PENALTY OF LA	HEREIN; AND	BASED ON MY INC	QUIRY OF THOSE	INDIVIDUALS	Can admir of	f f	TELEPHONE	DATE
Michael J. H Chief Operati	INFORMATION I	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		(617)788-4359	02/15/2001		
9-NO SAMPLING CONDUCTED T	HIS MONTH										Page 3 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: Michael Hornbrook

NATIONAL POLLUTAN	T DISCHARGE ELIMINATION	ON SYSTEM <i>(NPDES)</i>
JANUARY 2001 - I	DISCHARGE MONITORING	G REPORT (DMR)
MA0103284		C03 A

MONITORING PERIOD

YEAR

2001

TO

DAY

31

МО

MA0103284 C03 A
PERMIT NUMBER DISCHARGE NUMBER

DAY

FROM

MO

YEAR

2001

MINOR (SUBR E) F - FINAL

CSO 203 - MONTHLY & QUARTERLY

*** NO DISCHARGE	

PARAMETER		(3 Card Only) Q (JANTITY OR L	OADING	(4 Card Only)	QUALITY O (46-53)	R CONCENTRA	ATION	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	*****	***	9	*****	9	(19)	(02 00)	(0.00)	(66.76)
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	****	9	*****	9	(12)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	***	9	*****	9	(19)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	1.67	0.42	(61) inches	*****	*****	*****	******	0	AL/EV	RC
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches	*****	*****	*****			ALL EVENTS	RCORDR
FLOW, WASTEWATER	SAMPLE MEASUREMENT	0	0	(3R)	*****	*****	****	*****	0	99/99	CN
BYPASSING TREATMENT PLANT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgal mgal	*****	*****	****			CONTINUOUS	CONTINUOUS
FLOW, IN CONDUIT OR THRU TREATMENT	SAMPLE MEASUREMENT	1.50	1.50	(03)	*****	*****	*****	*****	0	99/99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	*****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL	SAMPLE MEASUREMENT	*****	*****	***	0.0	*****	0.0	(19)	0*	01/31	GR
RESIDUAL EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L mg/L		FOUR/YEAR	GRAB

*-UNDERGOING FACILITY UPGRADE Page 1 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: Michael Hornbrook

NATIO	ONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
	IANITARY 2001 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 PERMIT NUMBER C03 A
DISCHARGE NUMBER

MINOR (SUBR E) F - FINAL

CSO 203 - MONTHLY & QUARTERLY

MONITORING PERIOD											
FROM TO											
YEAR	MO	DAY	YEAR MO DAY								
2001	1	1	2001	1	31						

		(3 Card Only) Ql	JANTITY OR L	OADING	(4 Card Only) QUALITY OR CONCENTRATION					FREQUENCY OF	SAMPLE TYPE
1	\sim	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
	/	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
COLIFORM, FECAL	SAMPLE MEASUREMENT	*****	*****	******	9	*****	9	(13)			
GENERAL EFFLUENT	PERMIT REQUIREMENT	*****	*****	******	REPORT MO GEO	*****	REPORT MAXIMUM	#/100ML		FOUR/YEAR	GRAB
BYPASS OF TREATMENT	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	****	****			
BTFASS OF TREATMENT	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
DURATION OF	SAMPLE MEASUREMENT	*****	С	(79)	*****	*****	*****	*****			
DISCHARGE	PERMIT REQUIREMENT	*****	CNTESTED	hours/day	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE DURATION	SAMPLE MEASUREMENT	*****	0.50	(8A) hours	*****	*****	*****	*****	0	AL/EV	OC
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	1	(93) occur/mon	*****	*****	*****	*****	0	AL/EV	OC
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS

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: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
JANUARY 2001 - DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

DAY

YEAR

2000

MA0103284 PERMIT NUMBER

YEAR

2001

FROM

MO

C03 A DISCHARGE NUMBER MINOR (SUBR E) F - FINAL

CSO 203- MONTHLY & QUARTERLY

		*** NO DISCHARGE ***
TO		
MO	DAY	

31

SAMPLE EASUREMENT PERMIT EQUIREMENT SAMPLE	(46-53) AVERAGE ******	(54-61) MAXIMUM *****	UNITS	(38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63)	ANALYSIS	(00.70)
ASUREMENT PERMIT EQUIREMENT	*****		UNITS	_	AVERAGE	MAXIMUM	UNITS	(62-63)	(64.69)	(00.70)
ASUREMENT PERMIT EQUIREMENT		*****		_					(64-68)	(69-70)
QUIREMENT	*****		******	9	*****	*****	(23)			
SAMPLE.		*****		REPORT DAILY MN	*****	****	% PERCENT		SEMI / ANNUAL	COMP24
ASUREMENT	*****	*****	******	9	*****	****	(23)			
PERMIT EQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
							,			
							ì			
			•							
EXECUTIVE	THE INFORMA	ATION SUBMITTED	HEREIN; AND	BASED ON MY INC	UIRY OF THOSE	INDIVIDUALS	See original	form for	TELEPHONE	DATE
ook fficer	INFORMATION IS	S TRUE, ACCURAT	E AND COMPLIALSE INFORMA	ETE. I AM AWARE TION, INCLUDING	THAT THERE AF	E SIGNIFICANT			(617)788-4359	02/15/2001
EXX	PERMIT QUIREMENT GECUTIVE ok	CECUTIVE I CERTIFY UNDE THE INFORMATION IS PENALTIES FOR	CECUTIVE I CERTIFY UNDER PENALTY OF LA THE INFORMATION SUBMITTED IMMEDIATELY RESPONSIBLE F INFORMATION IS TRUE, ACCURAT PENALTIES FOR SUBMITTING F/	CECUTIVE I CERTIFY UNDER PENALTY OF LAW THAT I HAVE THE INFORMATION SUBMITTED HEREIN; AND IMMEDIATELY RESPONSIBLE FOR OBTAINING INFORMATION IS TRUE, ACCURATE AND COMPL PENALTIES FOR SUBMITTING FALSE INFORMATION IS TRUE, ACCURATE AND COMPL PENALTIES FOR SUBMITTING FALSE INFORMATION IS TRUE, ACCURATE AND COMPL PENALTIES FOR SUBMITTING FALSE INFORMATION IS TRUE.	REPORT DAILY MN SUIREMENT ****** ****** REPORT DAILY MN ***** CECUTIVE I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EX THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INC IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING IMPRISONMENT.	REPORT DAILY MN SUIREMENT ****** ****** ****** ****** ***** ****	SUREMENT ****** REPORT DAILY MN ****** ****** ****** ****** ******	REPORT NAILY MN PERCENT SUIREMENT ****** ****** ****** ***** ******	REPORT ******* PERCENT REPORT ******* PERCENT REPORT ************************************	REPORT NAME AND A SEMI / ANNUAL SECUTIVE I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH IMPRISONMENT. OK COF 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.

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: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) JANUARY 2001 - DISCHARGE MONITORING REPORT (DMR)
JANOAK 1 2001 - DISCHARGE MONITORING REPORT (DMK)

MA0103284 C05
PERMIT NUMBER DISCHARGE NUMBER

YEAR

2001

МО

MONITORING PERIOD

DAY

FROM

MO

YEAR

2001

ISCHARGE NUMBER	
_	
то	

DAY

31

MINOR (SUBR E) F - FINAL

*** NO DISCHARGE ***

CSO 205 - MONTHLY & QUARTERLY

PARAMETER		(3 Card Only) Ql (46-53)	JANTITY OR L (54-61)	OADING	(4 Card Only) (38-45)	QUALITY O (46-53)	R CONCENTRA (54-61)	ATION	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(32-37)	$/\!\!/$	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
BOD, 5 - DAY (20 DEG, C)	SAMPLE MEASUREMENT	*****	*****	***	78.2	*****	78.2	(19)	0	01/31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	***	7.0	*****	7.1	(12)	0	01/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	6.5 MINIMUM	*****	8.3 MAXIMUM	SU SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	****	****	326.0	*****	440.0	(19) - mg/L	0	01/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	1.67	0.42	(61) inches	*****	*****	****	******	0	AL/EV	RC
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches	*****	*****	*****			ALL EVENTS	RCORDR
FLOW, WASTEWATER	SAMPLE MEASUREMENT	0	0	(3R)	*****	*****	*****	******	0	99/99	CN
BYPASSING TREATMENT PLANT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgal mgal	*****	*****	****			CONTINUOUS	CONTINUOUS
FLOW, IN CONDUIT OR THRU TREATMENT	SAMPLE MEASUREMENT	0.43	0.43	(03)	*****	*****	*****	******	0	99/99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	*****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL	SAMPLE MEASUREMENT	*****	*****	***	2.70	*****	3.00	(19)	0*	01/31	GR
RESIDUAL —	PERMIT REQUIREMENT	*****	*****	***	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L mg/L		FOUR/YEAR	GRAB

*-UNDERGOING FACILITY UPGRADE Page 1 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: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
JANUARY 2001 - DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

YEAR

2001

DAY

MA0103284 PERMIT NUMBER

YEAR

2001

FROM

MO

MINOR (SUBR E) F - FINAL

C05

DISCHARGE NUMBER

DAY

31

TO

MO

CSO 205 - MONTHLY & QUARTERLY

	` ,								FREQUENCY OF	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)		(69-70)
SAMPLE MEASUREMENT	*****	*****		1442	*****	1442	(13)	0	01/31	GR
PERMIT REQUIREMENT	****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100ML #/100ML		FOUR/YEAR	GRAB
SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	*****	*****			
REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
MEASUREMENT	*****	C (79)	(79)	*****	*****	*****	*****			
REQUIREMENT	*****	CNTESTED	hours/day	*****	*****	*****			ALL EVENTS	OCCURS
MEASUREMENT	*****	3.25	(8A)	*****	*****	*****	*****	0	AL/EV	ОС
REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
MEASUREMENT	*****	1	(93)	*****	*****	*****	*****	0	AL/EV	ОС
PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
	MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT PERMIT PERMIT PERMIT	SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT PERMIT REQUIREMENT PERMIT PERMIT REQUIREMENT PERMIT PERMIT ******	(46-53) (54-61) AVERAGE MAXIMUM	(46-53) (54-61) AVERAGE MAXIMUM UNITS	(46-53)	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	AVERAGE MAXIMUM UNITS MINIMUM AVERAGE MAXIMUM UNITS (62-63) (64-68)

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: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
JANUARY 2001 - DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

DAY

YEAR

2001

MA0103284 PERMIT NUMBER

YEAR

2001

FROM

MO

C05 DISCHARGE NUMBER

DAY

31

TO

MO

MINOR (SUBR E) F - FINAL

CSO 205 - MONTHLY & QUARTERLY

*** NO DISCHARGE ***

PARAMETER		` ,	JANTITY OR L	OADING			OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
(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)			
EFFLUENT	PERMIT REQUIREMENT	****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
								Ī			
								†			
NAME / TITLE PRINCI OFFICE		THE INFORMA	ER PENALTY OF LA	HEREIN; AND	BASED ON MY INC	QUIRY OF THOSE	INDIVIDUALS	Can addition	f f	TELEPHONE	DATE
Michael J. Ho Chief Operation		INFORMATION I	Y RESPONSIBLE F S TRUE, ACCURA' DR SUBMITTING F.	TE AND COMPL ALSE INFORMA	ETE. I AM AWARI	See original form for signature		(617)788-4359	02/15/2001		
9-NO SAMPLING CONDUCTED TI	HIS MONTH	<u> </u>						1			Page 3 of 3

Page 3 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: Michael Hornbrook

NATIONAL POLLUTAN	T DISCHARGE ELIMINATI	ON SYSTEM (NPDES)
JANUARY 2001 - [DISCHARGE MONITORING	G REPORT (DMR)

MA0103284 C25
PERMIT NUMBER DISCHARGE N

 REPORT (DMR)
 (SUBR E)

 C25
 F - FINAL

 DISCHARGE NUMBER
 CSO 205

MINOR

CSO 205 - MONTHLY & QUARTERLY

*** NO DISCHARGE X ***

MONITORING PERIOD									
	FROM		TO						
YEAR	MO	DAY	YEAR MO DAY						
2001	1	1	2001	1	31				

PARAMETER		(3 Card Only) Ql		OADING	(4 Card Only)		R CONCENTRA	ATION	NO. EX	FREQUENCY OF	SAMPLE TYPE
(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)
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	****	***		*****		(19)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	***		*****		(12)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	***		*****		(19)			
EFFLUENT	PERMIT REQUIREMENT	*****	****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT			(61)	*****	*****	*****	*****			
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches	*****	*****	*****			ALL EVENTS	RCORDR
FLOW, WASTEWATER	SAMPLE MEASUREMENT			(3R)	*****	*****	*****	*****			
BYPASSING TREATMENT PLANT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgal	*****	*****	*****			CONTINUOUS	CONTINUOUS
FLOW, IN CONDUIT OR THRU TREATMENT	SAMPLE MEASUREMENT			(03)	*****	*****	*****	*****			
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd	*****	*****	*****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	***				(19)			
EFFLUENT	PERMIT REQUIREMENT	*****	****	***	0.1 AVERAGE	REPORT MAX BDL	0.25 MAX HR RT	mg/L		FOUR/YEAR	GRAB

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: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)	

MONITORING PERIOD

YEAR

2001

JANUARY 2001 - DISCHARGE MONITORING REPORT (DMR) MA0103284 PERMIT NUMBER

DAY

FROM

MO

YEAR

2001

C25 DISCHARGE NUMBER

DAY

31

TO

MO

MINOR (SUBR E) F - FINAL

CSO 205 - MONTHLY & QUARTERLY

	` ,,		OADING.	` ,			ATION	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)		(69-70)
SAMPLE MEASUREMENT	*****	*****	******		*****		(13)	(* * * * * * * * * * * * * * * * * * *	(1)	(100
PERMIT REQUIREMENT	*****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100ML		FOUR/YEAR	GRAB
MEASUREMENT	*****		(93)	*****	*****	*****	*****			
REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
SAMPLE MEASUREMENT	*****		(79)	*****	*****	*****	*****			
PERMIT REQUIREMENT	*****	CNTESTED	hours/day	*****	*****	*****			ALL EVENTS	OCCURS
SAMPLE MEASUREMENT	*****		(8A)	*****	*****	*****	*****			
PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
SAMPLE MEASUREMENT	*****		(93)	*****	*****	*****	*****			
PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
	MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT PERMIT PERMIT	SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT PERMIT REQUIREMENT PERMIT PERMIT REQUIREMENT PERMIT PERMIT ******	(46-53) (54-61) AVERAGE MAXIMUM	(46-53) (54-61) AVERAGE MAXIMUM UNITS	(46-53) (54-61) (38-45) AVERAGE MAXIMUM UNITS MINIMUM SAMPLE	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	AVERAGE MAXIMUM UNITS MINIMUM AVERAGE MAXIMUM UNITS MINIMUM AVERAGE MAXIMUM UNITS (62-63) (64-68)

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: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES	S)
JANUARY 2001 - DISCHARGE MONITORING REPORT (DMR)	

MONITORING PERIOD

YEAR

2001

DAY

MA0103284 PERMIT NUMBER

YEAR

2001

FROM

MO

MINOR DISCHARGE NUMBER

DAY

31

TO

MO

(SUBR E) F - FINAL

CSO 205 - MONTHLY & QUARTERLY

PARAMETER			JANTITY OR L	OADING	` ,		OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)	\sim	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
(62 67)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
LC50/PF STAT 24HR AC PIMPEPHALES	SAMPLE MEASUREMENT	*****	*****	*****				(23)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC	SAMPLE MEASUREMENT	*****	*****	*****		*****	*****	(23)			
DAPHNIA EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMP24
								<u> </u>			
				•				<u> </u>			
								<u> </u>			
								<u> </u> 			
NAME / TITLE PRINCI OFFICE		THE INFORM	ER PENALTY OF LA ATION SUBMITTED	HEREIN; AND	BASED ON MY INC	QUIRY OF THOSE	INDIVIDUALS			TELEPHONE	DATE
Michael J. H Chief Operati		INFORMATION I	IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BE INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE PO IMPRISONMENT.					See original form for signature		(617)788-4359	02/15/2001

CONSTITUTION BEACH CSO

PERMITTEE NAME / ADDRESS

MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE

BOSTON MA 02129

FACILITY MWRA

NAME

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATI	ONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
	IANIJARY 2001 - DISCHARGE MONITORING REPORT (DMP)

DISCHARGE MONITORING REPORT (DMR) MA0103284 C07 A

MONITORING PERIOD

DAY

FROM

МО

YEAR

2001

PERMIT NUMBER DISCHARGE NUMBER

YEAR

2001

TO

DAY

31

МО

(SUBR E) F - FINAL

MINOR

CSO 207 - MONTHLY & QUARTERLY

*** NO DISCHARGE X ***

PARAMETER		(3 Card Only) Ql		OADING	` ,		R CONCENTRA	ATION	NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)		(46-53)	(54-61)		(38-45)	(46-53)	(54-61)		-	ANALYSIS	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	*****	***		*****		(19)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	***		*****		(12)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	***		*****		(19)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT			(61)	*****	*****	*****	******			
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches	*****	*****	*****			ALL EVENTS	RCORDR
FLOW, WASTEWATER	SAMPLE MEASUREMENT			(3R)	*****	*****	*****	******			
BYPASSING TREATMENT PLANT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgal	*****	*****	*****			CONTINUOUS	CONTINUOUS
FLOW, IN CONDUIT OR THRU TREATMENT	SAMPLE MEASUREMENT			(03)	*****	*****	*****	*****			
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd	*****	*****	*****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	***				(19)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	0.1 AVERAGE	REPORT MAX BDL	0.25 MAX HR RT	mg/L		FOUR/YEAR	GRAB

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: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)	
JANUARY 2001 - DISCHARGE MONITORING REPORT (DMR)	

MONITORING PERIOD

DAY

YEAR

2001

MA0103284 PERMIT NUMBER

YEAR

2001

FROM

MO

MINOR (SUBR E) F - FINAL

C07 A

DISCHARGE NUMBER

DAY

31

TO

MO

CSO 207 - MONTHLY & QUARTERLY

,		` ,,	JANTITY OR L	OADING	` ,		R CONCENTRA	ATION	NO. EX	FREQUENCY OF	SAMPLE TYPE
1		(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63)	ANALYSIS (64-68)	(69-70)
COLIFORM, FECAL	SAMPLE MEASUREMENT	****	****	*****		*****		(13)	(02 00)	(04 00)	(00 70)
GENERAL EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100ML		FOUR/YEAR	GRAB
BYPASS OF TREATMENT	SAMPLE MEASUREMENT	*****		(93)	*****	*****	****	*****			
BIFASS OF TREATMENT	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
DURATION OF	SAMPLE MEASUREMENT	*****		(79)	*****	*****	*****	****			
DISCHARGE	PERMIT REQUIREMENT	*****	CNTESTED	hours/day	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE DURATION	SAMPLE MEASUREMENT	*****		(8A)	*****	*****	*****	*****			
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****		(93)	*****	*****	*****	*****			
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS

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: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
JANUARY 2001 - DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

DAY

YEAR

2001

MA0103284
PERMIT NUMBER

YEAR

2001

FROM

MO

C07 A
DISCHARGE NUMBER

DAY

31

TO

MO

MINOR (SUBR E) F - FINAL

CSO 207 - MONTHLY & QUARTERLY

BARAMETER		(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	*****	*****	*****		*****	*****	(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		
								1					
								1					
NAME / TITLE PRINCIPAL EXECUTIVE OFFICER Michael J. Hornbrook Chief Operating Officer		THE INFORM	ER PENALTY OF LA	HEREIN; AND	BASED ON MY INC	QUIRY OF THOSE	INDIVIDUALS	See original	form for	TELEPHONE	DATE		
		INFORMATION I	Y RESPONSIBLE F S TRUE, ACCURA' DR SUBMITTING F.	TE AND COMPL ALSE INFORMA	ETE. I AM AWARI	E THAT THERE A	RE SIGNIFICANT	signati		(617)788-4359	02/15/2001		
		I						1		<u> </u>	Page 3 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: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
JANUARY 2001 - DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

YEAR

2001

DAY

MA0103284 PERMIT NUMBER

FROM

MO

YEAR

2001

MINOR (SUBR E) F - FINAL

C09 A

TO

МО

DISCHARGE NUMBER

DAY

31

CSO 209 - MONTHLY & QUARTERLY

*** NO DISCHARGE X ***

PARAMETER		(3 Card Only) Ql (46-53)	JANTITY OR L (54-61)	OADING	(4 Card Only) (38-45)	QUALITY O (46-53)	R CONCENTRA (54-61)	ATION	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(32-37)	$/\!\!/$	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
BOD, 5 - DAY	SAMPLE MEASUREMENT	*****	*****	***	9	*****	9	(19)			
(20 DEG. C) EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
PH EFFLUENT	SAMPLE MEASUREMENT	*****	*****	***	9	*****	9	(12)			
	PERMIT REQUIREMENT	*****	*****	***	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL	SAMPLE MEASUREMENT	*****	*****	***	9	*****	9	(19)			
SUSPENDED EFFLUENT	PERMIT REQUIREMENT	*****	****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	1.67	0.42	(61) inches inches	*****	*****	*****	*****	0	AL/EV	RC
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM		*****	*****	*****			ALL EVENTS	RCORDR
FLOW, WASTEWATER	SAMPLE MEASUREMENT	0	0	(3R)	*****	*****	*****	*****	0	99/99	CN
BYPASSING TREATMENT PLANT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgal mgal	*****	*****	*****			CONTINUOUS	CONTINUOUS
FLOW, IN CONDUIT OR THRU TREATMENT	SAMPLE MEASUREMENT	0.00	0.00	(03)	*****	*****	*****	******	0	99/99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	*****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL	SAMPLE MEASUREMENT	*****	*****	***	9	*****	9	(19)			
RESIDUAL EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L		FOUR/YEAR	GRAB

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: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
IANIJARY 2001 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 PERMIT NUMBER MINOR (SUBR E) F - FINAL

C09 A

DISCHARGE NUMBER

CSO 209 - MONTHLY & QUARTERLY

MONITORING PERIOD										
	FROM		ТО							
YEAR	MO	MO DAY		MO	DAY					
2001	1	1	2001	1	31					

1		OADING	(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)					FREQUENCY OF ANALYSIS	SAMPLE TYPE		
'		(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	****	*****	******	9	*****	9	(13)	(== ==)	(0.00)	(55.15)
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100ML		FOUR/YEAR	GRAB
BYPASS OF TREATMENT	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
DURATION OF DISCHARGE	SAMPLE MEASUREMENT	*****	С	(79)	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	CNTESTED	hours/day	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE DURATION	SAMPLE MEASUREMENT	*****	0	(8A)	*****	*****	*****	***	0	AL/EV	ОС
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	jpurs hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	0	(93)	*****	*****	*****	*****	0	AL/EV	OC
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
										·	

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: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
JANUARY 2001 - DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

DAY

YEAR

2001

MA0103284 PERMIT NUMBER

YEAR

2001

FROM

MO

C09 A
DISCHARGE NUMBER

DAY

31

TO

MO

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

*** NO DISCHARGE X ***

		JANTITY OR L	OADING	` ,		OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
\sim	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
SAMPLE MEASUREMENT	*****	*****	*****	9	*****	*****	(23)			
PERMIT REQUIREMENT	*****	*****	,	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
SAMPLE MEASUREMENT	*****	*****	*****	9	*****	*****	(23)			
PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMP24
			,				†			
							1			
	THE INFORM	ATION SUBMITTED	HEREIN; AND	BASED ON MY INQUIRY OF THOSE INDIVIDUALS					TELEPHONE	DATE
Michael J. Hornbrook Chief Operating Officer		S TRUE, ACCURAT	TE AND COMPL ALSE INFORMA	ETE. I AM AWARI	E THAT THERE A	RE SIGNIFICANT			(617)788-4359	02/15/2001
1	MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT	SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT I CERTIFY UNDE SER HORDOWN INFORMATION I DEMANT SER INFORMATION I DEMANT SE	SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT I CERTIFY UNDER PENALTY OF LA THE INFORMATION SUBMITTEE IMMEDIATELY RESPONSIBLE F INFORMATION IS TRUE, ACCURATION INFORMATION IS TRUE,	SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT ****** ****** ****** ****** ******	SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXTENDED TO BE AND BASED ON MY IN IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION STRUE, ACCURATE AND COMPLETE. I AM AWAR DENALTIES EOR DE SUMMITTING FALSE ENGROMENTE.	SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT ***** ***** ***** ***** ***** ****	SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT DAILY MN REPORT DAILY MN RE	SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT II CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH IT HE 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 PENALTES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND PENALTES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND PENALTES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND PENALTES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND PENALTES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND	SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT REPORT DAILY MN PERCENT REPORT DAILY MN PERCENT PERCENT REPORT DAILY MN PERCENT REPORT DAILY MN PERCENT SEE 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 MAYARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND See original form for signature	SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT REPORT DAILY MN REPORT DAILY MN PERCENT SEMI / ANNUAL SEMI / ANNUAL SEMI / ANNUAL SEMI / ANNUAL SEMI / ANNUAL SEMI / ANNUAL SEMI / ANNUAL SEMI / ANNUAL DIPAL EXECUTIVE ER 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 INDIDUOLAS INMEDIATELY RESPONSIBLE FOR OBSTANION; THE INFORMATION, IBELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE: I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING THAT INFORMATION, IBELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE: I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE PERSONALITY OF FINEM AND (617)788-4359

9-NO SAMPLING CONDUCTED THIS MONTH

COMMERCIAL POINT CSO

MONITORING PERIOD

YEAR

2001

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE

BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION	SYSTEM (NPDES)
JANUARY 2001 - DISCHARGE MONITORING R	REPORT (DMR)

DAY

MA0103284 PERMIT NUMBER

FROM

MO

YEAR

2001

MINOR (SUBR E) F - FINAL

C11 A

DISCHARGE NUMBER

DAY

31

TO

МО

CSO 211- MONTHLY & QUARTERLY

*** NO DISCHARGE X ***

PARAMETER		(3 Card Only) Ql		OADING	` ,		R CONCENTRA	ATION	NO. EX		SAMPLE TYPE
(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)
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	****	***	9	*****	9	(19)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	***	9	*****	9	(12)			
EFFLUENT	PERMIT REQUIREMENT	*****	****	****	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL	SAMPLE MEASUREMENT	*****	****	***	9	*****	9	(19)			
SUSPENDED EFFLUENT	PERMIT REQUIREMENT	*****	****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	1.67	0.42	(61)	*****	*****	*****	******	0	AL/EV	RC
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches	*****	*****	*****			ALL EVENTS	RCORDR
FLOW, WASTEWATER	SAMPLE MEASUREMENT	0	0	(3R)	*****	*****	*****	******	0	99/99	CN
BYPASSING TREATMENT PLANT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgal mgal	*****	*****	*****			CONTINUOUS	CONTINUOUS
FLOW, IN CONDUIT OR THRU TREATMENT	SAMPLE MEASUREMENT	0.00	0.00	(03)	*****	*****	*****	******	0	99/99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	*****	•		CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL	SAMPLE MEASUREMENT	*****	****	***	9	*****	9	(19)			
RESIDUAL EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L		FOUR/YEAR	GRAB

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: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

MONITORING PERIOD

YEAR

2001

DAY

JANUARY 2001 - DISCHARGE MONITORING REPORT (DMR) MA0103284 PERMIT NUMBER

FROM

MO

1

YEAR

2001

C11 A DISCHARGE NUMBER

DAY

31

TO

MO

1

MINOR (SUBR E) F - FINAL

CSO 211 - MONTHLY & QUARTERLY

		*			` ,		R CONCENTRA	ATION	NO. EX	FREQUENCY OF	SAMPLE TYPE
1	\sim	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
COLIFORM, FECAL GENERAL EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	9	*****	9	(13)			
	PERMIT REQUIREMENT	*****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100ML		FOUR/YEAR	GRAB
BYPASS OF TREATMENT	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
DURATION OF DISCHARGE	SAMPLE MEASUREMENT	*****	С	(79)	*****	*****	*****	****			
	PERMIT REQUIREMENT	*****	CNTESTED	hours/day	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE DURATION	SAMPLE MEASUREMENT	*****	0.0	(8A) hours	*****	*****	*****	*****	0	AL/EV	ОС
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	0	(93) occur/mon	*****	*****	*****	*****	0	AL/EV	OC
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS

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: Michael Hornbrook

MONITORING PERIOD

DAY

YEAR

2001

MA0103284 PERMIT NUMBER

YEAR

2001

FROM

MO

C11 A DISCHARGE NUMBER

DAY

31

TO

MO

MINOR (SUBR E) F - FINAL

CSO 211 - MONTHLY & QUARTERLY

***	NO	DISCHARGE	X
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DADAMETED		(3 Card Only) QUANTITY OR LOADING			(4 Card Only) QUANTITY OR LOADING			١	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 U CERICDAPHNIA EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	9	*****	*****	(23)			
	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC U D. PULEX EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	9	*****	*****	(23) % PERCENT			
	PERMIT REQUIREMENT	****	*****		REPORT DAILY MN	*****	*****			SEMI / ANNUAL	COMP24
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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						See original form for		TELEPHONE	DATE
Michael F. Hornbrook Chief Operating Officer		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.							torm for	(617)788-4359	02/15/2001
9-NO SAMPLING CONDUCTED TI	HIS MONTH	<u> </u>						1			Page 3 of 3

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