#### **DEER ISLAND TREATMENT PLANT**

LAST UPDATED: APRIL 30, 2001

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

ATTN: Michael Hornbrook

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

T01 A

DISCHARGE NUMBER

MAJOR (SUBR E) F - FINAL TREATED SANITARY WASTEWATER

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

MONITORING PERIOD										
	FROM			TO						
YEAR	MO	DAY	YEAR	MO	DAY					
01	03	1	01	03	31					

PARAMETER		QUANTI	TY OR LOADI	NG	QUAN	TITY OR LO	ADING		NO. EX		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	*****	7.4	SU	0	01 / 01	GR
EFFLUENT	PERMIT LIMIT	*****	*****		6.0 MINIMUM	*****	9.0 MAXIMUM	SU SU		DAILY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	134.9	174.6	235.8	(19) mg/L	0	01 / 01	24
NFLUENT	PERMIT LIMIT	*****	*****		REPORT MO AVG	REPORT WKLY	REPORT DAILY MX	MG/L		DAILY	COMP24
SOLIDS, TOTAL SUSPENDED FFLUENT	SAMPLE MEASUREMENT	*****	*****	******	20.0	24.1	34.0	(19)	0	01 / 01	24
	PERMIT LIMIT	*****	*****		30 MO AVG	45 WKLY	REPORT DAILY MX	mg/L MG/L		DAILY	COMP24
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.10	0.10	(25)	0	01 / 01	GR
EFFLUENT	PERMIT LIMIT	*****	*****		*****	REPORT WKLY	REPORT DAILY MX	mL/L ML/L		DAILY	GRAB
NITROGEN, AMMONIA	SAMPLE MEASUREMENT	*****	*****	******	11.84	*****	*****	(19)	0	06/31	24
TOTAL (AS N) EFFLUENT	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	*****	mg/L MG/L		ONCE / MONTH	COMP24
NITROGEN, NITRITE	SAMPLE MEASUREMENT	*****	*****	*****	0.113	*****	*****	(19)	0	06/31	24
OTAL (AS N) FFLUENT	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	*****	mg/L MG/L		ONCE / MONTH	COMP24
NITROGEN, NITRATE FOTAL (AS N) EFFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	0.715	*****	*****	(19)	0	06/31	24
	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	****	mg/L MG/L		ONCE / MONTH	COMP24

Page 1 of 6

PARAMETER		(3 Card Only) <b>Q</b> ( (46-53)	JANTITY OR (54-61)		(4 Card Only) (38-45)	QUANTITY ( (46-53)	OR LOADING (54-61)	i	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	*****	*****	*****	17.65	*****	****	(19)	0	06/31	24
EFFLUENT	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	****	mg/L MG/L		ONCE / MONTH	COMP24
CHLORIDE	SAMPLE MEASUREMENT	*****	*****	******	*****	*****	1369	(19) mg/L	0	01 / 01	GR
(AS CL) INFLUENT	PERMIT LIMIT	*****	*****		*****	*****	REPORT DAILY MX	MG/L		DAILY	GRAB
ARSENIC, TOTAL	SAMPLE MEASUREMENT	****	*****	*****	0.0	*****	0.0	(28)	0	02/31	24
(AS AS) EFFLUENT	PERMIT LIMIT	*****	*****	******	REPORT MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
COPPER TOTAL RECOVERABLE	SAMPLE MEASUREMENT	*****	*****	*****	12.99	*****	15.40	(28)	0	07/31	24
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	*****	*****	******	1.1	*****	****	%	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) FFLUENT	PERMIT LIMIT	*****	*****		0.000045 MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
1, 4'-DDT (P, P'-DDT)	SAMPLE MEASUREMENT	*****	*****	******	0.0	*****	0.0	(28)	0	02/31	24
	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24

PARAMETER		(3 Card Only) QI			` ,		OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)	$\times$	(46-53)	(54-61)	ı	(38-45)	(46-53)	(54-61)		_	ANALYSIS	
(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
FFLUENT GROSS ALUE	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
HLORDANE (TECH MIX. ND METABOLITES) FFLUENT GROSS ALUE	SAMPLE MEASUREMENT	*****	*****	*****	0.0	*****	0.0	(28) ug/L	0	02/31	24
	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	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
FFLUENT GROSS ALUE	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) <b>Q</b> ( (46-53)	JANTITY OR (54-61)		(4 Card Only) (38-45)	QUANTITY ( (46-53)	OR LOADING		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	(/	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) ug/L	0	02/31	24
EFFLUENT GROSS /ALUE	PERMIT LIMIT	****	*****		0.000045 MO AVG	*****	REPORT DAILY MX	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	PERMIT LIMIT	*****	*****		0.000045 MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
POLYCHLORINATED BIPHENYLS (PCBS)	SAMPLE MEASUREMENT	*****	*****	******	1.91	*****	1.91	(28)	0	01/31	24
EFFLUENT GROSS	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) <b>Q</b> (	JANTITY OR		(4 Card Only) (38-45)	QUANTITY (	OR LOADING	i	NO. EX		SAMPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	(/	AVERAGE	MAXIMUM	UNITS	(62-63)	ANALYSIS (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	601.4	1136.2	(03)	*****	*****	*****	*****	0	99 / 99	RC
PLANT EFFLUENT GROSS	PERMIT LIMIT	REPORT MO AVG	REPORT DAILY MX	mgd MGD	*****	*****	*****			CONTIN- UOUS	RCORDR
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	****	*****	*****	31	*****	53	(19) ug/L	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	*****	*****	*****	0.033	*****	0.061	(28)	0	07/31	24
EFFLUENT GROSS VALUE	PERMIT LIMIT	****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	COMP24
COLIFORM, FECAL	SAMPLE MEASUREMENT	****	*****	*****	N/A			(13)		03/01	
GENERAL	PERMIT LIMIT	****	*****		200 MoGeoMea	200 WKLY MN	400 DAILY MX	#/100mL #/100ML		THREE / DAY	GRAB
COLIFORM, FECAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	34	506	(13)	0	03/01	GR
GENERAL	PERMIT LIMIT	*****	*****		*****	14000 WKLY MN	14000 DAILY MX	#/100mL #/100ML		THREE / DAY	GRAB
CYANIDE, TOTAL	SAMPLE MEASUREMENT	****	*****	*****	0.0	*****	0.0	(28)	0	02/31	GR
FFLUENT GROSS /ALUE	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	mg/L MG/L		ONCE / MONTH	GRAB

DADAMETED		(3 Card Only) Ql	JANTITY OR		(4 Card Only)	QUANTITY (	OR LOADING	i	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)
VOLATILE FRACTION ORGANICS (EPA 624)	SAMPLE MEASUREMENT	*****	*****	******	26.54	*****	32.74	(28)	0	02/31	GR
EFFLUENT GROSS VALUE	PERMIT LIMIT	*****	*****		REPORT MO AVG	*****	REPORT DAILY MX	ug/L UG/L		ONCE / MONTH	GRAB
CBOD5 / NH3-N	SAMPLE MEASUREMENT	*****	*****	******	77.1	117.7	144.6	(19)	0	01 / 01	24
RAW SEW/INFLUENT	PERMIT LIMIT	*****	*****		REPORT MO AVG	REPORT WKLY	REPORT DAILY MX	mg/L MG/L		DAILY	COMP24
CBOD5 / NH3-N EFFLUENT GROSS	SAMPLE MEASUREMENT	****	*****	*****	12.9	16.1	24.5	(19)	0	01 / 01	24
VALUE VALUE	PERMIT LIMIT	*****	*****		25 MO AVG	40 WKLY AVG	REPORT DAILY MX	mg/L MG/L		DAILY	COMP24
FLOW,TOTAL EFFLUENT GROSS	SAMPLE MEASUREMENT	327.8	433.0	(03)	*****	*****	*****	*****	0	99 / 99	CA
VALUE	PERMIT LIMIT	436 ANNL AVG	REPORT MO AVG	mgd MGD	*****	*****	*****			CONTINUOUS	CALCULATE
	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					See origir	al form	TELEPHONE	DATE
	Michael J. Hornbrook Chief Operating Officer		THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AMARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATING INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.						ature	(617)788-4359	04/17/01

#### **DEER ISLAND TREATMENT PLANT**

MONITORING PERIOD

YEAR

DAY

PERMITTEE NAME / ADDRESS

**MWRA** 

ADDRESS CHARLESTOWN NAVY YARD

> 100 FIRST AVE BOSTON MA 02129

**FACILITY MWRA** 

NAME

LOCATION BOSTON MA 02129 ATTN: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

MA0103284 PERMIT NUMBER

FROM

МО

03

YEAR

01

MARCH 2001 - DISCHARGE MONITORING REPORT (DMR) T01 T DISCHARGE NUMBER

DAY

31

TO

МО

03

**MAJOR** (SUBR E) F - FINAL

**TUNNEL WET DATA** 

*** NO DISCHARGE	**
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PARAMETER		(3 Card Only) <b>Q</b> (	JANTITY OR (54-61)		(4 Card Only) (38-45)	QUANTITY ( (46-53)	OR LOADING (54-61)	ì	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(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 EFF	PERMIT LIMIT	****	*****	****	50 DAILY MN	*****	*****	%		ONCE / MONTH	COMP24
LC50 STAT 48HR ACU M ENDIA	SAMPLE MEASUREMENT	****	****	***	> 100	*****	*****	(23)	0	01/30	24
TBD6B 1 0 2 EFFLUENT	PERMIT LIMIT	*****	*****	****	50 DAILY MN	*****	*****	%		ONCE / MONTH	COMP24
NOEL STAT 1HR FERT CHR ARBACIA	SAMPLE MEASUREMENT	*****	*****	***	50	*****	*****	(23)	0	01/30	24
TBH3A 1 0 2 EFFLU	PERMIT LIMIT	*****	*****	****	1.5 DAILY MN	*****	*****	%		ONCE / MONTH	COMP24
NOAEL STATRE 7DAY CH R MENIDIA	SAMPLE MEASUREMENT	*****	*****	****	100	*****	*****	(23)	0	01/30	24
TDP6B 1 0 2 EFFLU	PERMIT LIMIT	*****	*****	****	1.5 DAILY MN	*****	*****	%		ONCE / MONTH	COMP24
								=			
								-			
								1			
NAME / TITLE PRINCIP		FAMILIAR WITH	IDER PENALTY C	ON SUBMITT	ED HEREIN; ANI	D BASED ON M	Y INQUIRY OF	See origin	al form	TELEPHONE	DATE
	Michael J. Hornbrook Chief Operating Officer		THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.  See original form for signature  (6)						(617)788-4359	04/17/01	

# **COTTAGE FARM CSO**

# LAST UPDATED: APRIL 30, 2001 PERMITTEE NAME / ADDRESS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) MA

	T DISCHARGE ELIMINATI SCHARGE MONITORING	MINOR (SUBR E)	
MA0103284		C01 A	È - FINAL
PERMIT NUMBER		DISCHARGE NUMBER	CSO 201- MONTHLY & QUARTERLY

NAME MWRA ADDRESS CHARLESTOWN NAVY YARD

> 100 FIRST AVE BOSTON MA 02129

FACILITY **MWRA** 

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

MONITORING PERIOD										
	FROM TO									
YEAR	MO	DAY	YEAR	MO	DAY					
2001	3	1	2001	3	31					

*** NO DISCHARGE	***

DADAMETED	(3 Card Only) Ql	JANTITY OR L	OADING	(4 Card Only)	QUALITY C	R CONCENTR	ATION	NO. EX	FREQUENCY OF	SAMPLE TYPE	
PARAMETER	$\times$	(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)
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	*****	****	47.6	*****	47.6	(19) mg/L	0	01/31	СР
EFFLUENT	PERMIT REQUIREMENT	****	****	***	REPORT AVERAGE	****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
SAMPLE PH MEASUREMENT EFFLUENT PERMIT REQUIREMENT	· · · · · · ·	*****	*****	***	6.4	*****	6.9	(12) SU	0*	37/31	GR
	PERMIT REQUIREMENT	*****	*****	****	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	****	****	***	73.9	****	92.5	(19)	0	37/31	СР
EFFLUENT	PERMIT REQUIREMENT	****	****	****	REPORT AVERAGE	****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	8.16	2.59	(61)	*****	*****	****	******	0	AL/EV	RC
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches	*****	*****	****			ALL EVENTS	RCORDR
FLOW, WASTEWATER	SAMPLE MEASUREMENT	0.0	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	65.9	223.4	(03)	*****	*****	*****	******	0	99/99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	*****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	****	0.07	*****	2.77	(19)	0*	36/31	GR
EFFLUENT  *- UNDERGOING FACILITY LIPS	PERMIT REQUIREMENT	*****	*****	****	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L mg/L		FOUR/YEAR	GRAB

<sup>\* -</sup> UNDERGOING FACILITY UPGRADE 9-NO SAMPLING CONDUCTED THIS MONTH

#### **COTTAGE FARM CSO**

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE

BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

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

MA0103284 PERMIT NUMBER MINOR (SUBR E) F - FINAL

\*\*\* NO DISCHARGE

C01 A

DISCHARGE NUMBER

CSO 201 - MONTHLY & QUARTERLY

MONITORING PERIOD									
	FROM		TO						
YEAR	MO DAY		YEAR	MO	DAY				
2001	3	1	2001	3	31				

		(3 Card Only) QUANTITY OR LOADING			(4 Card Only) QUALITY OR CONCENTRATION				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	SAMPLE MEASUREMENT	*****	*****	******	132	*****	302	(13)	0	37/31	GR
GENERAL PERMIT EFFLUENT REQUIREMENT	*****	*****	*****	REPORT MO GEO	*****	REPORT MAXIMUM	#/100mL #/100ML		FOUR/YEAR	GRAB	
SAMPLE BYPASS OF MEASUREMEN TREATMENT PERMIT	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	****	******			
	PERMIT REQUIREMENT	*****	REPORT EVENT TOT		*****	*****	*****			ALL EVENTS	OCCURS
DURATION OF MEASUR DISCHARGE PERI	SAMPLE MEASUREMENT	*****	С	(79)	*****	*****	*****	****			
	PERMIT REQUIREMENT	*****	CNTESTED	hours/day	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE DURATION	SAMPLE MEASUREMENT	*****	85.5	(8A) hours	*****	*****	*****	****	0	AL/EV	ос
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	6	(93) occur/mon	*****	*****	*****	****	0	AL/EV	ос
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS

#### **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)
MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 C01 A
PERMIT NUMBER DISCHARGE NUMB

MONITORING PERIOD

YEAR

2001

DAY

FROM

МО

3

YEAR

2001

DISCHARGE NUMBER CS

DAY

31

TO

MO

3

F - FINAL
CSO 201 - MONTHLY & QUARTERLY
\*\*\* NO DISCHARGE \*\*\*

MINOR

(SUBR E)

PARAMETER		(3 Card Only) <b>Q</b> (	JANTITY OR I	OADING	(4 Card Only)	QUANTITY (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 MYSID. BAHIA	SAMPLE MEASUREMENT	*****	*****	*****		*****	*****	(23)	(1 23)	(1-1-1)	(5.5.5)
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMPOSITE
LC50/PF STAT 24HR AC MENIDIA	SAMPLE MEASUREMENT	*****	*****	******	> 100	*****	*****	(23)	0	01 / 180	24
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMPOSITE
				•							
OFFICER THE INFORMATION SUBMITTED HEREIN; AND				E PERSONALLY EXAMINED AND AM FAMILIAR WITH BASED ON MY INQUIRY OF THOSE INDIVIDUALS			See original	form for	TELEPHONE	DATE	
Michael J. Ho Chief Operation	INFORMATION IS	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	04/17/2001	

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: Michael Hornbrook

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

MA0103284 C03 Á
PERMIT NUMBER DISCHARGE NUMBER

MINOR (SUBR E) F - FINAL

CSO 203 - MONTHLY & QUARTERLY

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

MONITORING PERIOD										
	FROM		TO							
YEAR	MO	DAY	YEAR	MO	DAY					
2001	3	1	2001	3	31					

DADAMETED		(3 Card Only) QI	JANTITY OR L	OADING	(4 Card Only) QUALITY OR CONCENTRATION				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)
BOD, 5 - DAY	SAMPLE MEASUREMENT	*****	*****	***	22.4	*****	22.4	(19)	0	01/31	СР
(20 DEG. C) EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	****	6.0	*****	7.1	(12) SU	0*	24/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	****	****	6.5 MINIMUM	****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	****	***	75.7	****	75.7	(19) mg/L	0	24/31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	8.16	2.59	(61)	*****	*****	*****	******	0	AL/EV	RC
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches	*****	*****	*****			ALL EVENTS	RCORDR
FLOW, WASTEWATER	SAMPLE MEASUREMENT	0.0	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	71.8	188.0	(03)	*****	*****	*****	******	0	99/99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	***	0.07	*****	0.89	(19) mg/L	0*	24/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L		FOUR/YEAR	GRAB

\*-UNDERGOING FACILITY UPGRADE 9-NO SAMPLING CONDUCTED THIS MONTH 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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES
MARCH 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	3	1	2001	3	31				

		` ,,			(4 Card Only) QUALITY OR CONCENTRATION				NO. EX		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	*****	*****	******	602	*****	602	(13) #/100mL	0	24/31	GR
GENERAL PERMIT EFFLUENT REQUIREMENT		****	*****	•	REPORT MO GEO	****	REPORT MAXIMUM	#/100ML		FOUR/YEAR	GRAB
BYPASS OF	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	****	******			
TREATMENT PERMIT REQUIREMEN	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE PERMIT	SAMPLE MEASUREMENT	*****	С	(79)	*****	*****	*****	****			
	PERMIT REQUIREMENT	*****	CNTESTED	hours/day	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE DURATION M	SAMPLE MEASUREMENT	*****	47.8	(8A) hours	*****	*****	*****	****	0	AL/EV	ОС
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	4	(93)	*****	*****	*****	****	0	AL/EV	ОС
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) MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 C03 A PERMIT NUMBER DISCHARGE NUMBER

		MONITORIN	NG PERIOD		
	FROM			TO	
YEAR	MO	DAY	YEAR	MO	DAY
2001	3	1	2000	3	31

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

\*\*\* NO DISCHARGE

								_			
PARAMETER		` ,,	JANTITY OR I	OADING			OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)		(46-53)	(54-61)		(38-45)	(46-53)	(54-61)	1		ANALYSIS	
, ,		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
LC50/PF STAT 24HR AC PIMPEPHALES	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	(23)	0	01 /180	24
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC	SAMPLE MEASUREMENT	*****	*****		> 100	*****	*****	(23)	0	01 / 180	24
DAPHNIA EFFLUENT	PERMIT REQUIREMENT	*****	*****	*****	REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINCI OFFICE		THE INFORMA	R PENALTY OF LA	HEREIN; AND	BASED ON MY IN	QUIRY OF THOSE	INDIVIDUALS		form for	TELEPHONE	DATE
Michael J. He Chief Operati		INFORMATION IS	IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICAN PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.					See original form for signature		(617)788-4359	04/17/2001

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: Michael Hornbrook

NATIONAL	POLLUTANT DISCHARGE ELIMINATION SYSTE	M (NPDES)
MAR	CH 2001 - DISCHARGE MONITORING REPORT (	DMR)

MA0103284			C05		
PERMIT NUMBER		DISCHAF	RGE N	NUMBE	R
	-				

MINOR (SUBR E) F - FINAL

\*\*\* NO DISCHARGE

CSO 205 - MONTHLY & QUARTERLY

MONITORING PERIOD									
	FROM		ТО						
YEAR	MO DAY		YEAR	MO	DAY				
2001	3	1	2001	3	31				

DADAMETED		(3 Card Only) QI	JANTITY OR L	OADING	(4 Card Only	QUALITY C	R CONCENTE	RATION	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)
BOD, 5 - DAY	SAMPLE MEASUREMENT	*****	*****	***	9	*****	9	(19)			
(20 DEG. C) EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L 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) mg/L			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	8.16	2.59	(61)	*****	*****	*****	******	0	AL/EV	RC
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches	*****	*****	*****			ALL EVENTS	RCORDR
FLOW, WASTEWATER	SAMPLE MEASUREMENT	0.0	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	9.7	32.6	(03)	*****	*****	*****	******	0	99/99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	*****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	***	9	*****	9	(19)			
EFFLUENT	PERMIT REQUIREMENT	*****	****	***	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L mg/L		FOUR/YEAR	GRAB

#### **SOMERVILLE MARGINAL CSO**

PERMITTEE NAME / ADDRESS

NAME **MWRA** 

CHARLESTOWN NAVY YARD ADDRESS

100 FIRST AVE

BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL	POLLUTANT	DISCHARGE I	FLIMINATION:	SYSTEM (I

DAY

(NPDES) MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

YEAR

2001

MA0103284 PERMIT NUMBER

YEAR

2001

FROM

МО

3

C05 DISCHARGE NUMBER

DAY

31

TO

МО

3

MINOR (SUBR E) F - FINAL

CSO 205 - MONTHLY & QUARTERLY

*** NO DISCHARGE	

		(3 Card Only) QI	UANTITY OR L	OADING	(4 Card Only	QUALITY C	R CONCENTE	RATION	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) #/100mL			
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		*****	43.0	(8A) hours	*****	*****	*****	****	0	AL/EV	OC
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	5	(93) occur/mon	*****	*****	*****	****	0	AL/EV	OC
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT		*****	*****	*****			ALL EVENTS	OCCURS

# **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) MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

MA0103284		(
PERMIT NUMBER	DISCHAR	(

(SUBR E) C05 RGE NUMBER F - FINAL

MINOR

CSO 205 - MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE

MONITORING PERIOD									
	FROM		TO						
YEAR	MO	MO DAY		MO	DAY				
2001	3	1	2001	3	31				

PARAMETER		(3 Card Only) QI	JANTITY OR L	OADING	(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)			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)			
EFFLUENT	PERMIT REQUIREMENT	*****	****		REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC DAPHNIA	SAMPLE MEASUREMENT	*****	*****	******	9	*****	*****	(23)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
				•							
NAME / TITLE PRINCI OFFICE		THE INFORMA	RTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH HE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS					See original	form for	TELEPHONE	DATE
	Michael J. Hornbrook Chief Operating Officer  MMEDIATELY RESPONSIBLE FOR OBTAINING INFORMATION IS TRUE, ACCURATE AND COMPLI PENALTIES FOR SUBMITTING FALSE INFORMATION IS TRUE. ACCURATE AND COMPLIANCE INFORMATION INFORMATION IS TRUE. ACCURATE AND COMPLIANCE INFORMATION I			ETE. I AM AWAR	E THAT THERE A	ARE SIGNIFICANT			(617)788-4359	04/17/2001	

9-NO SAMPLING CONDUCTED THIS MONTH

# **SOMERVILLE MARGINAL RELIEF OUTFALL**

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

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

MA0103284	C25	
PERMIT NUMBER	DISCHARGE NUM	/IBER

MONITORING PERIOD									
	FROM			TO					
YEAR	MO	DAY	YEAR	MO	DAY				
2001	3	1	2001	3	31				

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

\*\*\* NO DISCHARGE

DADAMETED		(3 Card Only) QI	JANTITY OR L	OADING	(4 Card Only	QUALITY C	R CONCENTE	RATION	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)
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	*****	***	0.0	*****	0.0	(19) mg/L	0	01/31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	****	7.7	*****	8.2	(12) SU	0	04/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	****	41.1	*****	41.1	(19) mg/L	0	04/31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	8.16	2.59	(61) INCHES	*****	*****	*****	****	0	AL/EV	RC
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches	*****	*****	*****			ALL EVENTS	RCORDR
FLOW, WASTEWATER	SAMPLE MEASUREMENT	0.0	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	7.0	7.0	(03) MGD	*****	*****	*****	*****	0	99/99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd	*****	*****	****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	****	4.65	*****	5.50	(19)	0*	04/31	GR
EFFLUENT  *- UNDERGOING FACILITY UPG	PERMIT REQUIREMENT	*****	****	****	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L mg/L		FOUR/YEAR	GRAB

<sup>\* -</sup> UNDERGOING FACILITY UPGRADE 9-NO SAMPLING CONDUCTED THIS MONTH

# **SOMERVILLE MARGINAL RELIEF OUTFALL**

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE

BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

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

MA0103284
PERMIT NUMBER

C25
DISCHARGE NUMBER

MINOR (SUBR E) F - FINAL

\*\*\* NO DISCHARGE

CSO 205 - MONTHLY & QUARTERLY

MONITORING PERIOD									
FROM TO									
YEAR	MO	DAY	YEAR	MO	DAY				
2001 3 1 2001 3 31									

		(3 Card Only) QI	JANTITY OR L	OADING	(4 Card Only	QUALITY C	R CONCENT	RATION	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	*****	****	*****	378	****	378	(13) #/100mL	0	05/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100ML		FOUR/YEAR	GRAB
BYPASS OF	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	*****	****			
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	*****	5.5	(8A) HOURS	*****	*****	*****	******	0	AL/EV	ОС
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	1	(93) OCC/MON	*****	*****	*****	******	0	AL/EV	ОС
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS

# **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)
MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

	•••••	
MA0103284		C25
PERMIT NUMBER		DISCHARGE NUMBER

MONITORING PERIOD										
	FROM			TO						
YEAR	MO	DAY	YEAR	MO	DAY					
2001	3	1	2001	3	31					

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

-		1									
PARAMETER		` ,	JANTITY OR L	LOADING	` ,		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	(00, 00)	ANALYSIS	(00.70)
LC50/PF STAT 24HR AC	SAMPLE MEASUREMENT	*****	*****	UNITS	> 100	AVERAGE	IVIAXIIVIOIVI	(23)	(62-63) 0	(64-68) 01 / 180	(69-70) 24
PIMPEPHALES EFFLUENT	PERMIT REQUIREMENT	*****	*****	*****	REPORT DAILY MN	****	*****	% PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	(23)	0	01 / 180	24
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINCIPAL EXECUTIVE OFFICER Michael J. Hornbrook Chief Operating Officer		THE INFORMA	TION SUBMITTED	HEREIN; AND I	BASED ON MY INC	QUIRY OF THOSE		Coo origin	form to-	TELEPHONE	DATE
		INFORMATION IS	TRUE, ACCURAT	E AND COMPLI	THE INFORMATION, I BELIEVE THE SUBMITTED  THE. I AM AWARE THAT THERE ARE SIGNIFICANT TION, INCLUDING THE POSSIBILITY OF FINE AND NAMENT			See original form for signature		(617)788-4359	04/17/2001

# **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)
MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

YEAR

2001

MA0103284
PERMIT NUMBER

DAY

FROM

MO

3

YEAR

2001

MINOR (SUBR E) F - FINAL

C09 A

DISCHARGE NUMBER

DAY

31

TO

МО

3

F - FINAL
CSO 209 - MONTHLY & QUARTERLY

PARAMETER		( ),	JANTITY OR L	OADING.	(4 Card Only)		R CONCENTE	RATION	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	*****	*****	***	0.0	*****	0.0	(19)	0	01/31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	****	6.5	*****	8.1	(12)	0	13/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	6.5 MINIMUM	*****	8.3 MAXIMUM	SU SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	****	****	***	87.2	****	87.2	(19)	0	12/31	СР
EFFLUENT	PERMIT REQUIREMENT	****	****	***	REPORT AVERAGE	****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	8.16	2.59	(61)	*****	****	****	******	0	AL/EV	RC
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches	*****	*****	****			ALL EVENTS	RCORDR
FLOW, WASTEWATER	SAMPLE MEASUREMENT	0.0	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	4.8	16.2	(03)	*****	*****	*****	******	0	99/99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	*****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL	SAMPLE MEASUREMENT	*****	*****	***	14.73	*****	26.40	(19)	0*	13/31	GR
RESIDUAL EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L 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)
MARCH 2004 DISCHARGE MONITORING REPORT (DM	ID\

MA0103284 PERMIT NUMBER DISCHARGE NUMBER MINOR (SUBR E) F - FINAL

\*\*\* NO DISCHARGE

C09 A

CSO 209 - MONTHLY & QUARTERLY

MONITORING PERIOD									
	FROM		ТО						
YEAR	MO DAY		YEAR	MO	DAY				
2001	3	1	2001	3	31				

					(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	*****	*****	*****	49	*****	100	(13)	0	13/31	GR
GENERAL EFFLUENT	PERMIT REQUIREMENT	*****	*****	********	REPORT MO GEO	*****	REPORT MAXIMUM	#/100mL #/100ML		FOUR/YEAR	GRAB
BYPASS OF	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	****	*****			
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		*****	37.4	(8A) hours	*****	*****	*****	*****	0	AL/EV	ОС
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	5	(93) occur/mon	*****	*****	*****	******	0	AL/EV	OC
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT		*****	*****	*****			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)
MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 C09 A
PERMIT NUMBER DISCHARGE NUMBER

MONITORING PERIOD

YEAR

2001

DAY

FROM

МО

3

YEAR

2001

 COP T (DMR)
 (SUBR E)

 C09 A
 F - FINAL

 CHARGE NUMBER
 CSO 209 - MONTHLY & QUARTERLY

31

TO

MO

3

DAY \*\*

MINOR

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

PARAMETER		(3 Card Only) QI		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	*****	*****	*****	> 100	*****	*****	(23)	0	02 / 180	24
EFFLUENT	PERMIT REQUIREMENT	*****	****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC DAPHNIA	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	(23)	0	02 / 180	24
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINCI OFFICE		THE INFORMA	I I I  / UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH IFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS							TELEPHONE	DATE
Michael J. He Chief Operati		INFORMATION IS	TRUE, ACCURAT	E AND COMPL ALSE INFORMA	THE INFORMATION, I BELIEVE THE SUBMITTED ETE. I AM AWARE THAT THERE ARE SIGNIFICANT TION, INCLUDING THE POSSIBILITY OF FINE AND ONMENT			See original form for signature		(617)788-4359	04/17/2001
	ng Officer	PENALTIES FO	R SUBMITTING FA		TION, INCLUDING ONMENT.	THE POSSIBILIT	Y OF FINE AND	_		(617)788-4359	04/17/20

9-NO SAMPLING CONDUCTED THIS MONTH

Page 3 of 3

# **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)
MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 PERMIT NUMBER MINOR (SUBR E) F - FINAL

\*\*\* NO DISCHARGE

DISCHARGE NUMBER

CSO 211- MONTHLY & QUARTERLY

MONITORING PERIOD									
	FROM		TO						
YEAR	MO	DAY	YEAR	MO	DAY				
2001	3	1	2001	3	31				

DADAMETED		(3 Card Only) QI	JANTITY OR L	OADING	(4 Card Only)	QUALITY C	R CONCENTE	RATION	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)
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	*****	***	0.0	*****	0.0	(19)	0	01/31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	****	6.1	*****	7.6	(12) SU	0*	16/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	***	147.3	*****	147.3	(19) mg/L	0	16/31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	8.16	2.59	(61)	*****	*****	*****	****	0	AL/EV	RC
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches	*****	*****	*****			ALL EVENTS	RCORDR
FLOW, WASTEWATER	SAMPLE MEASUREMENT	0.0	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	11.7	30.8	(03)	*****	*****	*****	******	0	99/99	CN
PLANT	PERMIT	CNTESTED	CNTESTED	mgd	*****	*****	*****			CONTINUOUS	CONTINUOUS
EFFLUENT	REQUIREMENT	MO AVG	DAILY MAX	mgd						CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	****	3.85	*****	5.50	(19) mg/L	0*	16/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L		FOUR/YEAR	GRAB

<sup>\* -</sup> UNDERGOING FACILITY UPGRADE 9-NO SAMPLING CONDUCTED THIS MONTH

# **COMMERCIAL POINT CSO**

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

	ANT DISCHARGE ELIMINATION SYSTEM (NPDES)	)
MARCH 2001	- DISCHARGE MONITORING REPORT (DMR)	

MA0103284 PERMIT NUMBER

MINOR (SUBR E) F - FINAL DISCHARGE NUMBER

C11 A

CSO 211 - MONTHLY & QUARTERLY

MONITORING PERIOD									
	FROM	TO							
YEAR	MO DAY		YEAR	YEAR MO					
2001	3	1	2001	3	31				

(3 Card Only) QUANTITY C			UANTITY OR I	OADING	DING (4 Card Only) QUALITY OR CONCENTRATION			RATION	NO. EX	FREQUENCY OF	SAMPLE TYPE
1		(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	*****	*****	******	125	*****	125	(13)	0	16/31	GR
GENERAL EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100mL #/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	*****	47.9	(8A) hours	*****	*****	*****	******	0	AL/EV	ОС
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	5	(93) occur/mon	*****	*****	*****	******	0	AL/EV	ОС
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

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

MONITORING PERIOD

YEAR

2001

DAY

MA0103284 PERMIT NUMBER

YEAR

2001

FROM

МО

3

MINOR (SUBR E) F - FINAL

C11 A

DISCHARGE NUMBER

DAY

31

TO

MO

3

CSO 211 - MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE

PARAMETER		(3 Card Only) QI		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 U CERICDAPHNIA	SAMPLE MEASUREMENT	*****	*****	*****	9	*****	*****	(23)	0	02 / 180	24
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC U D. PULEX	SAMPLE MEASUREMENT	*****	*****	******	9	*****	*****	(23)	0	02 / 180	24
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
OFFICER THE INFORMATION SUBMITTED HER			HEREIN; AND	THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH REIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS				form for	TELEPHONE	DATE	
Michael F. H Chief Operation		INFORMATION IS	TRUE, ACCURAT	E AND COMPL ALSE INFORMA	ETE. I AM AWARE THAT THERE ARE SIGNIFICANT TON, INCLUDING THE POSSIBILITY OF FINE AND			signature		(617)788-4359	04/17/2001
	ng Officer	INFORMATION IS	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	04/

9-NO SAMPLING CONDUCTED THIS MONTH

Page 3 of 3