

**Texas Pollutant Discharge Elimination System  
Discharge Monitoring Report  
Submit Parameters**

**EPA ID:** TX0097870

**TPDES:** 12971001

**Permitee Name:** AUSTIN, CITY OF

**Maj/Min:** Minor

**Facility Name:** DESSAU UTILITIES, INC.

**Facility Location:** AUSTIN

**Outfall:** 001A DOMESTIC FACILITY - 001

**Outfall Type:** EFFLUENT

**Monitoring Period:** 04/01/2009-04/30/2009

**Limit Type:** FINAL

**Message from TCEQ:** WQ0012971-001

**Parameter:** OXYGEN, DISSOLVED (DO): EFFLUENT GROSS VALUE - 00300

	Sample Measurement	Permit Requirement
Concentration Minimum	8.4	5.0 MG/L
Frequency of Analysis	WEEKLY	WEEKLY
Sample Type	GRAB	GRAB
Number of Exceedances	00	

**Parameter:** PH: EFFLUENT GROSS VALUE - 00400

**Comment:** Actual frequency of analysis: weekly.

	Sample Measurement	Permit Requirement
Concentration Minimum	7.0	6.0 SU
Concentration Maximum	7.3	9.0 SU
Frequency of Analysis	WEEKLY	TWICE/MONTH
Sample Type	GRAB	GRAB
Number of Exceedances	00	

**Parameter:** SOLIDS, TOTAL SUSPENDED: EFFLUENT GROSS VALUE - 00530

	Sample Measurement	Permit Requirement
Quantity Average	7.9	63 LBS/DY DAILY AVERAGE
Concentration Average	5	15 MG/L DAILY AVERAGE
Concentration Maximum	9	40 MG/L DAILY MAXIMUM
Frequency of Analysis	WEEKLY	WEEKLY
Sample Type	COMPOS	COMPOS
Number of Exceedances	00	

**Parameter:** NITROGEN, AMMONIA TOTAL (AS N): EFFLUENT GROSS VALUE - 00610

	Sample Measurement	Permit Requirement
Quantity Average	0.1	13 LBS/DY DAILY AVERAGE
Concentration Average	0.08	3 MG/L DAILY AVERAGE
Concentration Maximum	0.1	10 MG/L DAILY MAXIMUM
Frequency of Analysis	WEEKLY	WEEKLY
Sample Type	COMPOS	COMPOS
Number of Exceedances	00	

**Parameter:** FLOW, IN CONDUIT OR THRU TREATMENT PLANT: EFFLUENT GROSS VALUE - 50050

	Sample Measurement	Permit Requirement
Quantity Average	0.2	0.5 MGD DAILY AVERAGE
Quantity Maximum	0.2	REPORT MGD DAILY MAXIMUM
Frequency of Analysis	CONTINUOUS	CONTINUOUS
Sample Type	TOTALZ	TOTALZ
Number of Exceedances	00	

**Parameter:** CHLORINE, TOTAL RESIDUAL: EFFLUENT GROSS VALUE - 50060

	<b>Sample Measurement</b>	<b>Permit Requirement</b>
Concentration Minimum	1.1	1.0 MG/L
Concentration Maximum	1.7	4.0 MG/L
Frequency of Analysis	DAILY	DAILY
Sample Type	GRAB	GRAB
Number of Exceedances	00	

**Parameter:** BOD, CARBONACEOUS 05 DAY, 20C: EFFLUENT GROSS VALUE - 80082

**Comment:** No cBOD result for the week of 4/5/09 to 4/11/09. Sample reported as Laboratory Error since it was accidentally set-up for BOD instead of cBOD.

	<b>Sample Measurement</b>	<b>Permit Requirement</b>	
Quantity Average	5.3	42 LBS/DY	DAILY AVERAGE
Concentration Average	4	10 MG/L	DAILY AVERAGE
Concentration Maximum	6	25 MG/L	DAILY MAXIMUM
Frequency of Analysis	WEEKLY	WEEKLY	
Sample Type	COMPOS	COMPOS	
Number of Exceedances	00		

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I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

By entering my password and pressing the "Confirm Submit" button, I agree that:

1. I am Ruth J Burazer, ASSISTANT DIRECTOR.
2. I have protected my account/password and am in full compliance with the electronic signature agreement submitted to receive account ER008320.
3. I have the authority to submit this data on behalf of permittee AUSTIN, CITY OF.
4. This action constitutes an electronic signature equivalent to my written signature.
5. I am knowingly and intentionally submitting 7 discharge monitoring records (parameters).

This document was signed by Ruth J Burazer, ER008320.

**Signature Hash: 97B8C76CCB0608CE0044CBA40F3FD2F65EFDACEF5D775636FBDEC5B7BD62974E**

The following is additional information contained in your Copy of Record:

Submitter Phone Number: 512-972-0133

Submission IP address: 162.89.0.59

Submission date and time: 05/13/2009 02:05 PM

Submission STEERS Version: 5.5

Submission Confirmation Number: 42339

Submission Data Hash Code: E2B40598A975A674DD2378D3B1A55879F19C2E79C9A38CF9C1FB0F85087354BF