

DMR Copy of Record

Permit

|                    |                         |                    |                                                 |                    |                                                     |
|--------------------|-------------------------|--------------------|-------------------------------------------------|--------------------|-----------------------------------------------------|
| Permit #:          | TX0097870               | Permittee:         | AUSTIN, CITY OF                                 | Facility:          | DESSAU WWTF                                         |
| Major:             |                         | Permittee Address: | 1.4M N DESSAU RD&YAGER LANE<br>AUSTIN, TX 78746 | Facility Location: | 1.4M N DESSAU RD AND YAGER LANE<br>AUSTIN, TX 78746 |
| Permitted Feature: | 001<br>External Outfall | Discharge:         | 001-A<br>DOMESTIC FACILITY - 001                |                    |                                                     |

Report Dates & Status

|                    |                           |               |          |         |                  |
|--------------------|---------------------------|---------------|----------|---------|------------------|
| Monitoring Period: | From 09/01/10 to 09/30/10 | DMR Due Date: | 10/20/10 | Status: | NetDMR Validated |
|--------------------|---------------------------|---------------|----------|---------|------------------|

Considerations for Form Completion

WQ0012971-001

Principal Executive Officer

|             |          |        |          |            |              |
|-------------|----------|--------|----------|------------|--------------|
| First Name: | Greg     | Title: | Director | Telephone: | 512-972-0101 |
| Last Name:  | Meszaros |        |          |            |              |

No Data Indicator (NODI)

Form NODI: --

| Parameter |                                          | Monitoring Location | Season # | Param. NODI |             | Quantity or Loading |             |             |                  |             | Quality or Concentration |           |             |              |             |              | # of Ex.       | Frequency of Analysis    | S  |
|-----------|------------------------------------------|---------------------|----------|-------------|-------------|---------------------|-------------|-------------|------------------|-------------|--------------------------|-----------|-------------|--------------|-------------|--------------|----------------|--------------------------|----|
| Code      | Name                                     |                     |          |             |             | Qualifier 1         | Value 1     | Qualifier 2 | Value 2          | Units       | Qualifier 1              | Value 1   | Qualifier 2 | Value 2      | Qualifier 3 | Value 3      | Units          |                          |    |
| 00300     | Oxygen, dissolved (DO)                   | 1 - Effluent Gross  | 0        | --          | Sample      |                     |             |             |                  |             | =                        | 7.8       |             |              |             |              | 19 - mg/L      | 20/30 - Twenty Per Month | G  |
|           |                                          |                     |          |             | Permit Req. |                     |             |             |                  |             | >=                       | 5 MO MIN  |             |              |             |              | 19 - mg/L      | 01/07 - Weekly           | G  |
|           |                                          |                     |          |             | Value NODI  |                     |             |             |                  |             |                          |           |             |              |             |              |                |                          |    |
| 00400     | pH                                       | 1 - Effluent Gross  | 0        | --          | Sample      |                     |             |             |                  |             | =                        | 6.2       |             |              | =           | 7.3          | 12 - SU        | 25/30 - 25 Per Month     | G  |
|           |                                          |                     |          |             | Permit Req. |                     |             |             |                  |             | >=                       | 6 MINIMUM |             |              | <=          | 9 MAXIMUM    | 12 - SU        | 02/30 - Twice Per Month  | G  |
|           |                                          |                     |          |             | Value NODI  |                     |             |             |                  |             |                          |           |             |              |             |              |                |                          |    |
| 00530     | Solids, total suspended                  | 1 - Effluent Gross  | 0        | --          | Sample      | =                   | 9           |             |                  | 26 - lb/d   |                          |           | =           | 9            | =           | 14           | 19 - mg/L      | 01/07 - Weekly           | Cf |
|           |                                          |                     |          |             | Permit Req. | <=                  | 63 DAILY AV |             |                  | 26 - lb/d   |                          |           | <=          | 15 DAILY AV  | <=          | 40 DAILY MX  | 19 - mg/L      | 01/07 - Weekly           | Cf |
|           |                                          |                     |          |             | Value NODI  |                     |             |             |                  |             |                          |           |             |              |             |              |                |                          |    |
| 00610     | Nitrogen, ammonia total (as N)           | 1 - Effluent Gross  | 0        | --          | Sample      | =                   | 1           |             |                  | 26 - lb/d   |                          |           | =           | 1            | =           | 4            | 19 - mg/L      | 01/07 - Weekly           | Cf |
|           |                                          |                     |          |             | Permit Req. | <=                  | 13 DAILY AV |             |                  | 26 - lb/d   |                          |           | <=          | 3 DAILY AV   | <=          | 10 DAILY MX  | 19 - mg/L      | 01/07 - Weekly           | Cf |
|           |                                          |                     |          |             | Value NODI  |                     |             |             |                  |             |                          |           |             |              |             |              |                |                          |    |
| 50050     | Flow, in conduit or thru treatment plant | 1 - Effluent Gross  | 0        | --          | Sample      | =                   | 0.14        | =           | 0.29             | 03 - Mgal/d |                          |           |             |              |             |              |                | 99/99 - Continuous       | Tf |
|           |                                          |                     |          |             | Permit Req. | <=                  | .5 DAILY AV |             | Req Mon DAILY MX | 03 - Mgal/d |                          |           |             |              |             |              |                | 99/99 - Continuous       | Tf |
|           |                                          |                     |          |             | Value NODI  |                     |             |             |                  |             |                          |           |             |              |             |              |                |                          |    |
| 50060     | Chlorine, total residual                 | 1 - Effluent Gross  | 0        | --          | Sample      |                     |             |             |                  |             | =                        | 1.1       |             |              | =           | 3.5          | 19 - mg/L      | 01/01 - Daily            | G  |
|           |                                          |                     |          |             | Permit Req. |                     |             |             |                  |             | >=                       | 1 MO MIN  |             |              | <=          | 4 MO MAX     | 19 - mg/L      | 01/01 - Daily            | G  |
|           |                                          |                     |          |             | Value NODI  |                     |             |             |                  |             |                          |           |             |              |             |              |                |                          |    |
| X 51040   | E. coli                                  | 1 - Effluent Gross  | 0        | --          | Sample      |                     |             |             |                  |             |                          |           | <           | 1            | <           | 1            | 30 - MPN/100mL | 04/30 - Four Per Month   | G  |
|           |                                          |                     |          |             | Permit Req. |                     |             |             |                  |             |                          |           | <=          | 120 DAILY AV | <=          | 374 DAILY MX | 3Z - CFU/100mL | 01/07 - Weekly           | G  |
|           |                                          |                     |          |             | Value NODI  |                     |             |             |                  |             |                          |           |             |              |             |              |                |                          |    |
| 80082     | BOD, carbonaceous, 05 day, 20 C          | 1 - Effluent Gross  | 0        | --          | Sample      | =                   | 3           |             |                  | 26 - lb/d   |                          |           | =           | 3            | =           | 4            | 19 - mg/L      | 01/07 - Weekly           | Cf |
|           |                                          |                     |          |             | Permit Req. | <=                  | 42 DAILY AV |             |                  | 26 - lb/d   |                          |           | <=          | 10 DAILY AV  | <=          | 25 DAILY MX  | 19 - mg/L      | 01/07 - Weekly           | Cf |
|           |                                          |                     |          |             | Value NODI  |                     |             |             |                  |             |                          |           |             |              |             |              |                |                          |    |

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and S Type.

Edit Check Errors

| Parameter |         | Monitoring Location | Field | Type | Description                                                                                                                                                         | Acknow                              |
|-----------|---------|---------------------|-------|------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Code      | Name    |                     |       |      |                                                                                                                                                                     |                                     |
| 51040     | E. coli | 1 - Effluent Gross  | Units | Soft | The selected units do not match the units specified by the permit for this parameter. The provided sample value(s) may be outside the permit limit. (Error Code: 3) | <input checked="" type="checkbox"/> |

Comments

E.coli: No sample collected for the week of 9/5/10 to 9/11/10. Permit requires one grab/week. E.coli results in MPN/100mLs and NOT CFU/100mLs.

Attachments

No attachments.

**Report Last Saved By**

**AUSTIN, CITY OF**

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Date/Time: 2010-10-15 16:04 (Time Zone: -05:00)