

## DMR Copy of Record

### Permit

|                    |                                     |                    |                                              |                    |                                                     |
|--------------------|-------------------------------------|--------------------|----------------------------------------------|--------------------|-----------------------------------------------------|
| Permit #:          | TX0101532                           | Permittee:         | AUSTIN, CITY OF                              | Facility:          | HARRIS BRANCH WWTP                                  |
| Major:             | <input checked="" type="checkbox"/> | Permittee Address: | 0.25MI W OF INTX GILES RD & AUSTIN, TX 78701 | Facility Location: | 0.25MI W OF INTX GILES RD BOYCE LN AUSTIN, TX 78701 |
| Permitted Feature: | 001<br>External Outfall             | Discharge:         | 001-A<br>DOMESTIC FACILITY - 001             |                    |                                                     |

### Report Dates & Status

|                    |                           |               |          |         |                  |
|--------------------|---------------------------|---------------|----------|---------|------------------|
| Monitoring Period: | From 12/01/10 to 12/31/10 | DMR Due Date: | 01/20/11 | Status: | NetDMR Validated |
|--------------------|---------------------------|---------------|----------|---------|------------------|

### Considerations for Form Completion

INTERIM I PHASE EFFECTIVE UPON ISSUANCE AND LASTING UNTIL THE COMPLETION OF THE 0.80 MGD FACILITIES.

### Principal Executive Officer

|             |          |        |          |            |              |
|-------------|----------|--------|----------|------------|--------------|
| First Name: | Greg     | Title: | Director | Telephone: | 972-512-0101 |
| 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      |                     |              |             |                  |             | =                        | 6.8       |              |         |              |                | 19 - mg/L                   | 01/07 - Weekly              | C                     |       |
|           |                                          |                     |          |             | Permit Req. |                     |              |             |                  |             | >=                       | 5 MO MIN  |              |         |              |                | 19 - mg/L                   | 0                           | 01/07 - Weekly        | C     |
|           |                                          |                     |          |             | Value NODI  |                     |              |             |                  |             |                          |           |              |         |              |                |                             |                             |                       |       |
| 00400     | pH                                       | 1 - Effluent Gross  | 0        | --          | Sample      |                     |              |             |                  |             | =                        | 6.1       |              |         | =            | 7.2            | 12 - SU                     | 26/30 - 26 Per Month        | C                     |       |
|           |                                          |                     |          |             | Permit Req. |                     |              |             |                  |             | >=                       | 6 MINIMUM |              |         | <=           | 9 MAXIMUM      | 12 - SU                     | 0                           | 01/30 - Monthly       | C     |
|           |                                          |                     |          |             | Value NODI  |                     |              |             |                  |             |                          |           |              |         |              |                |                             |                             |                       |       |
| 00530     | Solids, total suspended                  | 1 - Effluent Gross  | 0        | --          | Sample      | =                   | 5.3          |             | 26 - lb/d        |             |                          | =         | 2.6          | =       | 5            | 19 - mg/L      | 07/30 - 7 Times Every Month | C                           |                       |       |
|           |                                          |                     |          |             | Permit Req. | <=                  | 17 DAILY AV  |             | 26 - lb/d        |             |                          | <=        | 5 DAILY AV   | <=      | 30 SINGGRAB  | 19 - mg/L      | 0                           | 01/07 - Weekly              | C                     |       |
|           |                                          |                     |          |             | Value NODI  |                     |              |             |                  |             |                          |           |              |         |              |                |                             |                             |                       |       |
| 00610     | Nitrogen, ammonia total (as N)           | 1 - Effluent Gross  | 0        | --          | Sample      | =                   | 2.3          |             | 26 - lb/d        |             |                          | =         | 1.1          | =       | 4.1          | 19 - mg/L      | 07/30 - 7 Times Every Month | C                           |                       |       |
|           |                                          |                     |          |             | Permit Req. | <=                  | 6.7 DAILY AV |             | 26 - lb/d        |             |                          | <=        | 2 DAILY AV   | <=      | 15 SINGGRAB  | 19 - mg/L      | 0                           | 01/07 - Weekly              | C                     |       |
|           |                                          |                     |          |             | Value NODI  |                     |              |             |                  |             |                          |           |              |         |              |                |                             |                             |                       |       |
| 00665     | Phosphorus, total (as P)                 | 1 - Effluent Gross  | 0        | --          | Sample      | =                   | 1.15         |             | 26 - lb/d        |             |                          | =         | 0.53         | =       | 0.8          | 19 - mg/L      | 07/30 - 7 Times Every Month | C                           |                       |       |
|           |                                          |                     |          |             | Permit Req. | <=                  | 3.3 DAILY AV |             | 26 - lb/d        |             |                          | <=        | 1 DAILY AV   | <=      | 6 SINGGRAB   | 19 - mg/L      | 0                           | 01/07 - Weekly              | C                     |       |
|           |                                          |                     |          |             | Value NODI  |                     |              |             |                  |             |                          |           |              |         |              |                |                             |                             |                       |       |
| 50050     | Flow, in conduit or thru treatment plant | 1 - Effluent Gross  | 0        | --          | Sample      | =                   | 0.25         | =           | 0.4              | 03 - Mgal/d |                          |           |              |         |              |                | 01/01 - Daily               | I                           |                       |       |
|           |                                          |                     |          |             | Permit Req. | <=                  | .4 DAILY AV  |             | Req Mon DAILY MX | 03 - Mgal/d |                          |           |              |         |              |                | 05/WK - Five Per Week       | I                           |                       |       |
|           |                                          |                     |          |             | Value NODI  |                     |              |             |                  |             |                          |           |              |         |              |                |                             |                             |                       |       |
| 50060     | Chlorine, total residual                 | 1 - Effluent Gross  | 0        | --          | Sample      |                     |              |             |                  |             | =                        | 1.1       |              |         | =            | 3.8            | 19 - mg/L                   | 29/30 - 29 Per Month        | C                     |       |
|           |                                          |                     |          |             | Permit Req. |                     |              |             |                  |             | >=                       | 1 MO MIN  |              |         | <=           | 4 MO MAX       | 19 - mg/L                   | 0                           | 05/WK - Five Per Week | C     |
|           |                                          |                     |          |             | Value NODI  |                     |              |             |                  |             |                          |           |              |         |              |                |                             |                             |                       |       |
| X 51040   | E. coli                                  | 1 - Effluent Gross  | 0        | --          | Sample      |                     |              |             |                  |             |                          |           | =            | 21      | =            | 42             | 30 - MPN/100mL              | 07/30 - 7 Times Every Month | C                     |       |
|           |                                          |                     |          |             | Permit Req. |                     |              |             |                  |             |                          | <=        | 120 DAILY AV | <=      | 374 SINGGRAB | 32 - CFU/100mL | 0                           | 01/30 - Monthly             | C                     |       |
|           |                                          |                     |          |             | Value NODI  |                     |              |             |                  |             |                          |           |              |         |              |                |                             |                             |                       |       |
| 80082     | BOD, carbonaceous, 05 day, 20 C          | 1 - Effluent Gross  | 0        | --          | Sample      | =                   | 6.4          |             | 26 - lb/d        |             |                          | =         | 2.9          | =       | 4.4          | 19 - mg/L      | 07/30 - 7 Times Every Month | C                           |                       |       |
|           |                                          |                     |          |             | Permit Req. | <=                  | 17 DAILY AV  |             | 26 - lb/d        |             |                          | <=        | 5 DAILY AV   | <=      | 30 SINGGRAB  | 19 - mg/L      | 0                           | 01/07 - Weekly              | C                     |       |
|           |                                          |                     |          |             | 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 Sample Type.

**Edit Check Errors**

| Parameter |         | Monitoring Location | Field | Type | Description                                                                                                                                                         | Acknowledgment                                                                      |
|-----------|---------|---------------------|-------|------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| 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) |  |

**Comments**

E.coli results in MPN/100mLs and NOT CFU/100mLs. CBOD:Seven samples were collected, but the Daily Average is based on 6 results because the 12/15/10 sample was reported as LE (Lab Error).

**Attachments**

No attachments.

**Report Last Saved By**

AUSTIN, CITY OF

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Date/Time:2011-01-13 17:19 (Time Zone: -06:00)