

DMR Copy of Record

Permit

Permit #: TX0097870  
Major: ☐

Permittee: AUSTIN, CITY OF  
Permittee Address: 1.4M N DESSAU RD&YAGER LANE  
AUSTIN, TX 78746

Facility: DESSAU WWTF  
Facility Location: 1.4M N DESSAU RD AND YAGER LANE  
AUSTIN, TX 78746

Permitted Feature: 001  
External Outfall

Discharge: 001-A  
DOMESTIC FACILITY - 001

Report Dates & Status

Monitoring Period: From 09/01/13 to 09/30/13

DMR Due Date: 10/20/13

Status: NetDMR Validated

Considerations for Form Completion

WQ0012971-001

Principal Executive Officer

First Name: Greg  
Last Name: Meszaros

Title: Director

Telephone: 512-972-0101

No Data Indicator (NODI)

Form NODI: --

| Parameter |                                | Monitoring Location | Season # | Param. NODI |             | Quantity or Loading |             |             |         |           | Quality or Concentration |           |             |             |             |             |           | # of Ex. | Frequency of Analysis   | Sample Type |
|-----------|--------------------------------|---------------------|----------|-------------|-------------|---------------------|-------------|-------------|---------|-----------|--------------------------|-----------|-------------|-------------|-------------|-------------|-----------|----------|-------------------------|-------------|
| 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      |                     |             |             |         |           | =                        | 8         |             |             |             |             | 19 - mg/L | 0        | 24/30 - 24 Per Month    | GR - GRAB   |
|           |                                |                     |          |             | Permit Req. |                     |             |             |         |           | >=                       | 5 MO MIN  |             |             |             |             | 19 - mg/L |          | 01/07 - Weekly          | GR - GRAB   |
|           |                                |                     |          |             | Value NODI  |                     |             |             |         |           |                          |           |             |             |             |             |           |          |                         |             |
| 00400     | pH                             | 1 - Effluent Gross  | 0        | --          | Sample      |                     |             |             |         |           | =                        | 6.1       |             |             | =           | 7.6         | 12 - SU   | 0        | 01/01 - Daily           | GR - GRAB   |
|           |                                |                     |          |             | Permit Req. |                     |             |             |         |           | >=                       | 6 MINIMUM |             |             | <=          | 9 MAXIMUM   | 12 - SU   |          | 02/30 - Twice Per Month | GR - GRAB   |
|           |                                |                     |          |             | Value NODI  |                     |             |             |         |           |                          |           |             |             |             |             |           |          |                         |             |
| 00530     | Solids, total suspended        | 1 - Effluent Gross  | 0        | --          | Sample      | =                   | 10.8        |             |         | 26 - lb/d |                          |           | =           | 8           | =           | 9.6         | 19 - mg/L | 0        | 01/07 - Weekly          | CP - COMPOS |
|           |                                |                     |          |             | Permit Req. | <=                  | 63 DAILY AV |             |         | 26 - lb/d |                          |           | <=          | 15 DAILY AV | <=          | 40 DAILY MX | 19 - mg/L |          | 01/07 - Weekly          | CP - COMPOS |
|           |                                |                     |          |             | Value NODI  |                     |             |             |         |           |                          |           |             |             |             |             |           |          |                         |             |
| 00610     | Nitrogen, ammonia total [as N] | 1 - Effluent Gross  | 0        | --          | Sample      | <                   | 0.2         |             |         | 26 - lb/d |                          |           | <           | 0.2         | =           | 0.4         | 19 - mg/L | 0        | 01/07 - Weekly          | CP - COMPOS |
|           |                                |                     |          |             | Permit Req. | <=                  | 13 DAILY AV |             |         | 26 - lb/d |                          |           | <=          | 3 DAILY AV  | <=          | 10 DAILY MX | 19 - mg/L |          | 01/07 - Weekly          | CP - COMPOS |
|           |                                |                     |          |             | Value NODI  |                     |             |             |         |           |                          |           |             |             |             |             |           |          |                         |             |
| 50050     | Flow, in conduit or thru       | 1 - Effluent Gross  | 0        | --          | Sample      | =                   | 0.15        | =           | 0.26    | 03 - MGD  |                          |           |             |             |             |             |           | 0        | 99/99 - Continuous      | TM - TOTALZ |

| Parameter |                                 | Monitoring Location | Season # | Param. NODI |             | Quantity or Loading |             |             |                  |           | Quality or Concentration |          |             |              |             |              |                | # of Ex. | Frequency of Analysis | Sample Type |
|-----------|---------------------------------|---------------------|----------|-------------|-------------|---------------------|-------------|-------------|------------------|-----------|--------------------------|----------|-------------|--------------|-------------|--------------|----------------|----------|-----------------------|-------------|
| Code      | Name                            |                     |          |             |             | Qualifier 1         | Value 1     | Qualifier 2 | Value 2          | Units     | Qualifier 1              | Value 1  | Qualifier 2 | Value 2      | Qualifier 3 | Value 3      | Units          |          |                       |             |
| 50060     | Chlorine, total residual        | 1 - Effluent Gross  | 0        | --          | Permit Req. | <=                  | .5 DAILY AV |             | Req Mon DAILY MX | 03 - MGD  |                          |          |             |              |             |              |                | 0        | 99/99 - Continuous    | TM - TOTALZ |
|           |                                 |                     |          |             | Value NODI  |                     |             |             |                  |           |                          |          |             |              |             |              |                |          |                       |             |
|           |                                 |                     |          |             | Sample      |                     |             |             |                  |           | =                        | 1.05     |             |              | =           | 3.9          | 19 - mg/L      |          |                       |             |
|           |                                 |                     |          |             | Permit Req. |                     |             |             |                  |           | >=                       | 1 MO MIN |             |              | <=          | 4 MO MAX     | 19 - mg/L      |          |                       |             |
|           |                                 |                     |          |             | Value NODI  |                     |             |             |                  |           |                          |          |             |              |             |              |                |          |                       |             |
| X 51040   | E. coli                         | 1 - Effluent Gross  | 0        | --          | Sample      |                     |             |             |                  |           |                          |          | <           | 1            | <           | 1            | 30 - MPN/100mL | 0        | 01/07 - Weekly        | GR - GRAB   |
|           |                                 |                     |          |             | Permit Req. |                     |             |             |                  |           |                          |          | <=          | 120 DAILY AV | <=          | 374 DAILY MX | 3Z - CFU/100mL |          |                       |             |
|           |                                 |                     |          |             | Value NODI  |                     |             |             |                  |           |                          |          |             |              |             |              |                |          |                       |             |
| 80082     | BOD, carbonaceous, 05 day, 20 C | 1 - Effluent Gross  | 0        | --          | Sample      | <                   | 3.2         |             |                  | 26 - lb/d |                          |          | <           | 2.4          | =           | 3.2          | 19 - mg/L      | 0        | 01/07 - Weekly        | CP - COMPOS |
|           |                                 |                     |          |             | Permit Req. | <=                  | 42 DAILY AV |             |                  | 26 - lb/d |                          |          | <=          | 10 DAILY AV  | <=          | 25 DAILY MX  | 19 - mg/L      |          |                       |             |
|           |                                 |                     |          |             | 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                                                                                                                                                         | Acknowledge                         |
|-----------|---------|---------------------|-------|------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| 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: units reported in MPN/100mL, not CFU/100mL.

#### Attachments

No attachments.

#### Report Last Saved By

AUSTIN, CITY OF

User: jane.burazer@austintexas.gov

Name: Jane Burazer

E-Mail: jane.burazer@austintexas.gov

Date/Time:

2013-10-13 13:54 (Time Zone: -05:00)