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Permit

Permit #: TX0124800 Permittee: AUSTIN, CITY OF Facility:

WILD HORSE RANCH WWTP

Major:

Permittee Address:

4800' E INTX BLUE BLUFF RD & Facility Location: AUSTIN, TX 78767

4800' E INTX BLUE BLUFF RD & LINDEL LN, TRAVIS COUNTY

AUSTIN, TX 78767

Permitted Feature:

External Outfall

Discharge:

001-A

DOMESTIC FACILITY - 001

Report Dates & Status

Monitoring Period:

From 02/01/14 to 02/28/14 **DMR Due Date:** 03/20/14

Status:

NetDMR Validated

Considerations for Form Completion

INTERIM PHASE EFFECTIVE UPON ISSUANCE AND LASTING UNTIL THE COMPLETION OF THE 0.99 MGD FACILITIES.

Principal Executive Officer

First Name:

Last Name:

Greg Meszaros Title:

Director

Telephone:

512-972-0101

No Data Indicator (NODI)

Form NODI:

Parameter		Monitoring			Quantity or Loading						Quality or Concentration							#	Frequency	Sample															
Code	Name	Location	#	NODI		Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units	of Ex.	of Analysis	Туре															
00300	Oxygen, dissolved [DO]	1 - Effluent Gross					Sample						=	7.8					19 - mg/L		18/30 - 18 Per Month	GR - GRAB													
			0		Permit Req.						>=	5 MO MIN					19 - mg/L	0	01/07 - Weekly	GR - GRAB															
					Value NODI																														
00400	рН	1 - Effluent Gross			Sample						=	6.3			=	7.1	12 - SU		19/30 - 19 Per Month	GR - GRAB															
			0	0	0															Permit Req.						>=	6 MINIMUM			<=	9 MAXIMUM	12 - SU	0	02/30 - Twice Per Month	GR - GRAB
					Value NODI																														
	Solids, total suspended	1 - Effluent Gross			Sample	<	1.5			26 - lb/d			<	0.8	=	1.2	19 - mg/L		01/07 - Weekly	CP - COMPOS															
00530			0		Permit Req.	<=	31 DAILY AV			26 - lb/d			<=	5 DAILY AV	<=	20 DAILY MX	19 - mg/L	0	01/07 - Weekly	CP - COMPOS															
																	Value NODI																		
	Nitrogen, ammonia total [as N]	1 - Effluent Gross	0	0	0	0	0		Sample	<	0.2			26 - lb/d			<	0.1	=	0.2	19 - mg/L		01/07 - Weekly	CP - COMPOS											
00610								0	0				Permit Req.	<=	13 DAILY AV			26 - lb/d			<=	2 DAILY AV	<=	10 DAILY MX	19 - mg/L	0	01/07 - Weekly	CP - COMPOS							
												Value NODI																							
00665			0		Sample	<	0.12						<	0.07	=	0.11	19 - mg/L	0																	

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P	arameter	Monitoring	Season #	Param. NODI	Quantity or Loading						Quality or Concentration							#	Frequency	Sample																
Code	Name	Location				Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units	of Ex.	of Analysis	Туре																
										26 - lb/d									01/07 - Weekly	CP - COMPOS																
	Phosphorus, total [as P]	1 - Effluent Gross			Permit Req.	<=	6.3 DAILY AV			26 - lb/d			<=	1 DAILY AV	<=	4 DAILY MX	19 - mg/L		01/07 - Weekly	CP - COMPOS																
					Value NODI																															
	Flow, in conduit or thru treatment plant	1 - Effluent Gross			Sample	=	0.2	=	0.24	03 - MGD									99/99 - Continuous	TM - TOTALZ																
50050			0		Permit Req.	<=	.75 DAILY AV		Req Mon DAILY MX	03 - MGD								0	99/99 - Continuous	TM - TOTALZ																
					Value NODI																															
			0		Sample								<	1	=	7	30 - MPN/100mL		01/01 - Daily	GR - GRAB																
X 51040	E. coli	1 - Effluent Gross		0				Permit Req.															<=	120 DAILY AV	<=	374 DAILY MX	3Z - CFU/100mL	0	01/01 - Daily	GR - GRAB						
															Value NODI																					
	BOD, carbonaceous, 05 day, 20 C																				Sample	<	3.6			26 - lb/d			<	2	<	2	19 - mg/L		01/07 - Weekly	CP - COMPOS
80082		1 - Effluent Gross	0		Permit Req.	<=	31 DAILY AV			26 - lb/d			<=	5 DAILY AV	<=	20 DAILY MX	19 - mg/L	0	01/07 - Weekly	CP - COMPOS																
					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 Analsyis, and Sample Type.

Edit Check Errors

Para	meter	Monitoring	Field	Туре	Description	Acknowledge
Code	de Name	Location	rieiu	туре	Description	Acknowledge
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)	V

Comments

E.Coli: Units reported in MPN/100 mL, not CFU/100 mL. E.coli: Sample collected Feb. 6 given a result of Laboratory Error (LE) due to sample not being examined in the allowable timeframe

Attachments

No attachments.

Certification Statement

I certify under penalty of law that this submission was 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 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 criminal penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. By entering my password and security question answer and pressing the Submit button, I agree that:

- 1. I am Jane Burazer.
- 2. I have not violated any term in my Electronic Signature Agreement.
- 3. I am otherwise without any reason to believe that the confidentiality of my password has been compromised now or at any time prior to this submission.

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- 4. I have the authority to submit these data on behalf of the listed facilities.
- 5. This action constitutes an electronic signature equivalent to my written signature.
- 6. I understand that this attestation of fact pertains to the implementation, oversight, and enforcement of a federal environmental program and must be true to the best of my knowledge.

Submission Information

Name: Jane Burazer

User: jane.burazer@austintexas.gov

Submitter Telephone: 512-972-0133

Confirmation Code: 01d3dbf4-fe93-4f68-9520-b230af5061fa

Submitter Hashed Password: 86d67148256edc042730e830cc275ac529c91f3201101a8ff21509d5996a263c DMR Hash: 751203ca4d5a6c6cb8a886e057ac771ee11bd6d89e5c58038c8ed2440aa7fe23

NetDMR Certificate Id: 4

Certificate Alias: netdmr uat sample certificate 2

Date/Time: 2014-03-14 10:24 (Time Zone: -05:00)

E-Mail: jane.burazer@austintexas.gov

Submitter Ip: 162.89.0.59