

# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

P.O. BOX 13087 • CAPITOL STATION • AUSTIN, TEXAS 78711-3087  
MONTHLY EFFLUENT REPORT

Page 1 of 3

AUSTIN, CITY OF  
AUSTIN WATER UTILITY  
P.O. BOX 1088  
AUSTIN, TEXAS 78767-8865



40B SYS	WQ0010543-011 PERMIT NUMBER	01 SET	1   4   0   3 YEAR   MO.	15650 EID
------------	--------------------------------	-----------	-----------------------------	--------------

THIS REPORT TO BE USED FOR **OTFL 800 RECLAIMED WATER TYPE I**

SEE BACK FOR INSTRUCTIONS AND DEFINITIONS

PLEASE RETAIN A PHOTOCOPY FOR YOUR RECORDS

**TCEQ COPY**

PARAMETER	EFFLUENT CONDITION			NO. EX.	FREQUENCY OF ANALYSIS		SAMPLE TYPE	
		VALUE	UNITS					
316164024 FEC. COLI DLY AVG	REPORTED	NA	#/100 ML	0	11	NA	03	NA
	PERMITTED	20.000			11	2/WEEK	03	GRABPKLOAD
316164030 FEC. COLI IND GRAB	REPORTED	NA	#/100 ML	0	11	NA	03	NA
	PERMITTED	75.000			11	2/WEEK	03	GRABPKLOAD
500507124 FLOW DLY AVG	REPORTED	0.21	MGD	0	02	CONT	11	CONT
	PERMITTED				02	CONT	11	CONT
800821024 BOD CARB DLY AVG	REPORTED	<2.1	MG/L	0	11	2/WEEK	03	GRABPKLOAD
	PERMITTED	5.000			11	2/WEEK	03	GRABPKLOAD
820796624 TURBIDITY 30DAYAVG	REPORTED	1.96	NTU	0	11	2/WEEK	03	GRABPKLOAD
	PERMITTED	3.000			11	2/WEEK	03	GRABPKLOAD
NUMBER OF OPERATOR CERTIFICATE	REPORTED	WW0018247	NUMBER	0	01		NA	
	PERMITTED				01	01	NA	NA
EXPIRATION OF OPERATOR CERTIFICATE	REPORTED	15/11/12	DATE	0	01		NA	
	PERMITTED				01	01	NA	NA
CLASS OF OPERATOR CERTIFICATE	REPORTED	A	LETTER	0	01		NA	
	PERMITTED				01	01	NA	NA
	REPORTED							
	PERMITTED							
	REPORTED							
	PERMITTED							
	REPORTED							
	PERMITTED							

## COMMENTS AND EXPLANATIONS (Reference all attachments here)

Data represents reclaimed water flow from Walnut Creek WWTP TPDES Permit # 10543-011 EPA ID TX0046981. Walnut Creek WWTP transferred reclaimed water for 31 days. ECOLI grabs collected 2X/week. DLY AVG = <1 MPN/100mL; IND GRAB Max = <1 MPN/100mL. E. coli Limits: DLY AVG: 20 / 100mL, IND GRAB: 75 / 100 mL. FCOLI not analyzed.

I CERTIFY THAT I AM FAMILIAR WITH THE INFORMATION CONTAINED IN THIS REPORT AND THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF SUCH INFORMATION IS TRUE AND COMPLETE AND ACCURATE

NAME

Mike Welch

SIGNATURE

DATE

1 | 4 | 0 | 4 | 0 | 9

TELEPHONE NUMBER

PLANT OPERATOR

PLANT OPERATOR

YEAR MO. DAY

5 | 1 | 2 | 9 | 7 | 2 | 0 | 1 | 0 | 1

Greg Meszaros, Director

1 | 4 | 0 | 4 | 0 | 9

AREA CODE

NUMBER

EXECUTIVE OFFICER

EXECUTIVE OFFICER

YEAR MO. DAY



# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

P.O. BOX 13087 • CAPITOL STATION • AUSTIN, TEXAS 78711-3087  
MONTHLY EFFLUENT REPORT

AUSTIN, CITY OF  
AUSTIN WATER UTILITY  
P.O. BOX 1088  
AUSTIN, TEXAS 78767-8865

Page 2 of 3



<b>40B</b>	<b>WQ0010543-011</b>	<b>01</b>	<b>1   4</b>	<b>0   3</b>	<b>15651</b>
SYS	PERMIT NUMBER	SET	YEAR	MO.	EID

THIS REPORT TO BE USED FOR **OTFL 900 RECLAIMED WATER TYPE II**

SEE BACK FOR INSTRUCTIONS AND DEFINITIONS

PLEASE RETAIN A PHOTOCOPY FOR YOUR RECORDS

**TCEQ COPY**

PARAMETER	EFFLUENT CONDITION			NO. EX.	FREQUENCY OF ANALYSIS		SAMPLE TYPE	
		VALUE	UNITS					
<b>000085342 TRANSFER DAYS MON</b>	REPORTED	0	DAY	0	01		01	
	PERMITTED				01	NA	01	NA
<b>316164024 FEC. COLI DLY AVG</b>	REPORTED	0	#/100 ML	0	NA	NA	NA	NA
	PERMITTED	200.000			14	1/WEEK	03	GRABPKLOAD
<b>316164030 FEC. COLI IND GRAB</b>	REPORTED	0	#/100 ML	0	NA	NA	NA	NA
	PERMITTED	800.000			14	1/WEEK	03	GRABPKLOAD
<b>500507124 FLOW DLY AVG</b>	REPORTED	0	MGD	0	NA	NA	NA	NA
	PERMITTED				14	1/WEEK	02	GRAB
<b>800821024 BOD CARB DLY AVG</b>	REPORTED	0	MG/L	0	NA	NA	NA	NA
	PERMITTED	15.000			14	1/WEEK	03	GRABPKLOAD
<b>NUMBER OF OPERATOR CERTIFICATE</b>	REPORTED	WW0018247	NUMBER	0	01		NA	
	PERMITTED				01	01	NA	NA
<b>EXPIRATION OF OPERATOR CERTIFICATE</b>	REPORTED	15/11/12	DATE	0	01		NA	
	PERMITTED				01	01	NA	NA
<b>CLASS OF OPERATOR CERTIFICATE</b>	REPORTED	A	LETTER	0	01		NA	
	PERMITTED				01	01	NA	NA
	REPORTED							
	PERMITTED							
	REPORTED							
	PERMITTED							
	REPORTED							
	PERMITTED							

COMMENTS AND EXPLANATIONS (Reference all attachments here)

I CERTIFY THAT I AM FAMILIAR WITH THE INFORMATION CONTAINED IN THIS REPORT AND THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF SUCH INFORMATION IS TRUE AND COMPLETE AND ACCURATE

	NAME	SIGNATURE	DATE
	Mike Welch		1   4   0   4   0   9
TELEPHONE NUMBER	PLANT OPERATOR	PLANT OPERATOR	YEAR MO. DAY
5   1   2   9   7   2   0   1   0   1	Greg Meszaros, Director		1   4   0   4   0   9
NUMBER	EXECUTIVE OFFICER	EXECUTIVE OFFICER	YEAR MO. DAY



# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

P.O. BOX 13087 • CAPITOL STATION • AUSTIN, TEXAS 78711-3087  
MONTHLY EFFLUENT REPORT

AUSTIN, CITY OF  
AUSTIN WATER UTILITY  
P.O. BOX 1088  
AUSTIN, TEXAS 78767-8865

Page 3 of 3



40B SYS	WQ0010543-011 PERMIT NUMBER	01 SET	1   4   0   3 YEAR   MO.	15652 EID
------------	--------------------------------	-----------	-----------------------------	--------------

THIS REPORT TO BE USED FOR **COMBINED OUTFALLS 001 AND RECLAIMED WATER**  
SEE BACK FOR INSTRUCTIONS AND DEFINITIONS  
PLEASE RETAIN A PHOTOCOPY FOR YOUR RECORDS

**TCEQ COPY**

PARAMETER	EFFLUENT CONDITION		NO. EX.	FREQUENCY OF ANALYSIS		SAMPLE TYPE	
		VALUE					
500507124 FLOW DAILY AVG	REPORTED	45.5	0	01		01	
	PERMITTED			01	NA	01	NA
NUMBER OF OPERATOR CERTIFICATE	REPORTED	WW0018247	0	01		NA	
	PERMITTED			01	01	NA	NA
EXPIRATION OF OPERATOR CERTIFICATE	REPORTED	15/11/12	0	01		NA	
	PERMITTED			01	01	NA	NA
CLASS OF OPERATOR CERTIFICATE	REPORTED	A	0	01		NA	
	PERMITTED			01	01	NA	NA
	REPORTED						
	PERMITTED						
	REPORTED						
	PERMITTED						
	REPORTED						
	PERMITTED						
	REPORTED						
	PERMITTED						
	REPORTED						
	PERMITTED						
	REPORTED						
	PERMITTED						
	REPORTED						
	PERMITTED						

COMMENTS AND EXPLANATIONS (Reference all attachments here)

I CERTIFY THAT I AM FAMILIAR WITH THE INFORMATION  
CONTAINED IN THIS REPORT AND THAT TO THE BEST  
OF MY KNOWLEDGE AND BELIEF SUCH INFORMATION  
IS TRUE AND COMPLETE AND ACCURATE

TELEPHONE NUMBER 5   1   2   9   7   2   0   1   0   1	NAME Mike Welch	SIGNATURE 	DATE 1   4   0   4   0   9
	PLANT OPERATOR	PLANT OPERATOR	YEAR MO. DAY
NUMBER	EXECUTIVE OFFICER Greg Meszaros, Director		1   4   0   4   0   9
	EXECUTIVE OFFICER	EXECUTIVE OFFICER	YEAR MO. DAY



# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

P.O. BOX 13087 • CAPITOL STATION • AUSTIN, TEXAS 78711-3087  
MONTHLY EFFLUENT REPORT

Page 1 of 3

AUSTIN, CITY OF  
AUSTIN WATER UTILITY  
P.O. BOX 1088  
AUSTIN, TEXAS 78767-8865



40B SYS	WQ0010543-012 PERMIT NUMBER	01 SET	1   4   0   3 YEAR MO.	19743 EID
------------	--------------------------------	-----------	---------------------------	--------------

THIS REPORT TO BE USED FOR **OTFL 800 RECLAIMED WATER TYPE I**

SEE BACK FOR INSTRUCTIONS AND DEFINITIONS

PLEASE RETAIN A PHOTOCOPY FOR YOUR RECORDS

**TCEQ COPY**

PARAMETER	EFFLUENT CONDITION			NO. EX.	FREQUENCY OF ANALYSIS		SAMPLE TYPE	
	REPORTED	VALUE	UNITS					
000085342 TRANSFER DAYS/MON	REPORTED	31	DAY	0	NA	NA	NA	NA
	PERMITTED				11	2/WEEK	03	GRABPKLOAD
316164024 FEC. COLI DLY AVG	REPORTED	NA	#/100 ML	0	NA	NA	NA	NA
	PERMITTED	20.000			11	2/WEEK	03	GRABPKLOAD
316164030 FEC. COLI IND GRAB	REPORTED	NA	#/100 ML	0	NA	NA	NA	NA
	PERMITTED	75.000			11	2/WEEK	03	GRABPKLOAD
500507124 FLOW DLY AVG	REPORTED	1.03	MGD	0	02	CONT	11	CONT
	PERMITTED				02	CONT	11	CONT
800821024 BOD CARB DLY AVG	REPORTED	<2.0	MG/L	0	11	2/WEEK	03	GRABPKLOAD
	PERMITTED	5.000			11	2/WEEK	03	GRABPKLOAD
820796624 TURBIDITY 30DAYAVG	REPORTED	1.63	NTU	0	11	2/WEEK	03	GRABPKLOAD
	PERMITTED	3.000			11	2/WEEK	03	GRABPKLOAD
NUMBER OF OPERATOR CERTIFICATE	REPORTED	WW0011708	NUMBER	0	01		NA	
	PERMITTED				01	01	NA	NA
EXPIRATION OF OPERATOR CERTIFICATE	REPORTED	15/05/12	DATE	0	01		NA	
	PERMITTED				01	01	NA	NA
CLASS OF OPERATOR CERTIFICATE	REPORTED	B	LETTER	0	01		NA	
	PERMITTED				01	01	NA	NA
	REPORTED							
	PERMITTED							
	REPORTED							
	PERMITTED							

## COMMENTS AND EXPLANATIONS (Reference all attachments here)

Data represents reclaimed water flow from South Austin Regional WWTP TPDES Permit # 10543-012, EPA ID TX0071889. South Austin Regional WWTP transferred reclaimed water for 31 days. ECOLI grabs collected 2/week: DLY AVG = <2 MPN/100mL; IND GRAB Max = 10 MPN/100mL. E. coli Limits: DLY AVG: 20 / 100mL, IND GRAB: 75 / 100 mL. FCOLI not analyzed.

I CERTIFY THAT I AM FAMILIAR WITH THE INFORMATION CONTAINED IN THIS REPORT AND THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF SUCH INFORMATION IS TRUE AND COMPLETE AND ACCURATE

NAME		SIGNATURE		DATE	
Randall Swenson				1   4   0   4   0   9	
TELEPHONE NUMBER		PLANT OPERATOR		YEAR MO. DAY	
5   1   2   9   7   2   0   1   0   1		Greg Meszaros, Director		1   4   0   4   0   9	
AREA CODE		EXECUTIVE OFFICER		YEAR MO. DAY	



# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

P.O. BOX 13087 • CAPITOL STATION • AUSTIN, TEXAS 78711-3087

## MONTHLY EFFLUENT REPORT

Page 2 of 3

AUSTIN, CITY OF  
AUSTIN WATER UTILITY  
P.O. BOX 1088  
AUSTIN, TEXAS 78767-8865



40B SYS	WQ0010543-012 PERMIT NUMBER	01 SET	1   4   0   3 YEAR MO.	19742 EID
------------	--------------------------------	-----------	---------------------------	--------------

THIS REPORT TO BE USED FOR **OTFL 900 RECLAIMED WATER TYPE II**

SEE BACK FOR INSTRUCTIONS AND DEFINITIONS

PLEASE RETAIN A PHOTOCOPY FOR YOUR RECORDS

**TCEQ COPY**

PARAMETER	EFFLUENT CONDITION			NO. EX.	FREQUENCY OF ANALYSIS		SAMPLE TYPE	
		VALUE	UNITS					
000085342 TRANSFER DAYS/MON	REPORTED	0	DAY	0	01		01	
	PERMITTED				01	NA	01	NA
316164024 FEC. COLI DLY AVG	REPORTED	0	#/100 ML	0	NA	NA	NA	NA
	PERMITTED	200.000			14	1/WEEK	03	GRABPKLOAD
316164030 FEC. COLI IND GRAB	REPORTED	0	#/100 ML	0	NA	NA	NA	NA
	PERMITTED	800.000			14	1/WEEK	03	GRABPKLOAD
500507124 FLOW DLY AVG	REPORTED	0	MGD	0	NA	NA	NA	NA
	PERMITTED				14	1/WEEK	12	INSTANT
800821024 BOD CARB DLY AVG	REPORTED	0	MG/L	0	NA	NA	NA	NA
	PERMITTED	15.000			14	1/WEEK	03	GRABPKLOAD
NUMBER OF OPERATOR CERTIFICATE	REPORTED	WW0011708	NUMBER	0	01		NA	
	PERMITTED				01	01	NA	NA
EXPIRATION OF OPERATOR CERTIFICATE	REPORTED	15/05/12	DATE	0	01		NA	
	PERMITTED				01	01	NA	NA
CLASS OF OPERATOR CERTIFICATE	REPORTED	B	LETTER	0	01		NA	
	PERMITTED				01	01	NA	NA
	REPORTED							
	PERMITTED							
	REPORTED							
	PERMITTED							
	REPORTED							
	PERMITTED							

COMMENTS AND EXPLANATIONS (Reference all attachments here)

I CERTIFY THAT I AM FAMILIAR WITH THE INFORMATION CONTAINED IN THIS REPORT AND THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF SUCH INFORMATION IS TRUE AND COMPLETE AND ACCURATE	NAME	SIGNATURE	DATE
	Randall Swenson		1   4   0   4   0   9 YEAR MO. DAY
TELEPHONE NUMBER	PLANT OPERATOR	PLANT OPERATOR	YEAR MO. DAY
5   1   2   9   7   2   0   1   0   1	Greg Meszaros, Director		1   4   0   4   0   9 YEAR MO. DAY
NUMBER	EXECUTIVE OFFICER	EXECUTIVE OFFICER	YEAR MO. DAY



# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

P.O. BOX 13087 • CAPITOL STATION • AUSTIN, TEXAS 78711-3087

## MONTHLY EFFLUENT REPORT

Page 3 of 3

AUSTIN, CITY OF  
AUSTIN WATER UTILITY  
P.O. BOX 1088  
AUSTIN, TEXAS 78767-8865



40B SYS	WQ0010543-012 PERMIT NUMBER	01 SET	1   4   0   3 YEAR MO.	19744 EID
------------	--------------------------------	-----------	---------------------------	--------------

THIS REPORT TO BE USED FOR **COMBINED OTFL 001 AND RECLAIMED WATER**  
SEE BACK FOR INSTRUCTIONS AND DEFINITIONS  
PLEASE RETAIN A PHOTOCOPY FOR YOUR RECORDS

**TCEQ COPY**

PARAMETER	EFFLUENT CONDITION			NO. EX.	FREQUENCY OF ANALYSIS		SAMPLE TYPE	
		VALUE	UNITS					
500507124 FLOW DAILY AVG	REPORTED	46.6	MGD	0	01		01	
	PERMITTED				01	NA	01	NA
NUMBER OF OPERATOR CERTIFICATE	REPORTED	WW0011708	NUMBER	0	01		NA	
	PERMITTED				01	01	NA	NA
EXPIRATION OF OPERATOR CERTIFICATE	REPORTED	15/05/12	DATE	0	01		NA	
	PERMITTED				01	01	NA	NA
CLASS OF OPERATOR CERTIFICATE	REPORTED	B	LETTER	0	01		NA	
	PERMITTED				01	01	NA	NA
	REPORTED							
	PERMITTED							
	REPORTED							
	PERMITTED							
	REPORTED							
	PERMITTED							
	REPORTED							
	PERMITTED							
	REPORTED							
	PERMITTED							
	REPORTED							
	PERMITTED							

COMMENTS AND EXPLANATIONS (Reference all attachments here)

I CERTIFY THAT I AM FAMILIAR WITH THE INFORMATION CONTAINED IN THIS REPORT AND THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF SUCH INFORMATION IS TRUE AND COMPLETE AND ACCURATE	NAME	SIGNATURE	DATE
	Randall Swenson		1   4   0   4   0   9 YEAR MO. DAY
TELEPHONE NUMBER	PLANT OPERATOR	PLANT OPERATOR	
5   1   2   9   7   2   0   1   0   1	Greg Meszaros, Director		1   4   0   4   0   9 YEAR MO. DAY
NUMBER	EXECUTIVE OFFICER	EXECUTIVE OFFICER	