Permittee Name: Water Works & Sewer Board of the City of Oxford

Facility Name: Oxford Tull C. Allen WWTP Location: 2975 Silver Run Road

Oxford, AL 36203

County: Talladega

Permit No: AL0058408					
Monitoring Period					
From:	To:				
2/1/2023	2/28/2023				

Digitally signed by:
AEPACS
Date: 2023.03.24 10:12:25 -05:00
Reason: Copy Of Record
Location: State of Alabama

#### Outfall: 001-1

Parameter		Quantity or Loading		Units	ts Quality or Concentration		Units	No. Ex.	Sample Freq	Sample Type	
Turbidity (00070)	Sample Measurement	****	****	*****	****	11.42	27.20	NTU	0	5X Weekly	Grab
EFFLUENT GROSS VALUE	Permit Requirement	****	****		****	REPORT Monthly Average	REPORT Maximum Daily		U	5X Weekly	Grab
Oxygen, Dissolved (DO) (00300)	Sample Measurement	****	****	*****	6.14	****	****	mg/l S.U.	0	3X Weekly test	Grab
EFFLUENT GROSS VALUE	Permit Requirement	****	****		6.0 Minimum Daily	****	****		U	3X Weekly test	Grab
pH (00400)	Sample Measurement	****	****	****	6.99	****	7.4		0	3X Weekly test	Grab
EFFLUENT GROSS VALUE	Permit Requirement	****	****		6.0 Minimum Daily	****	9.0 Maximum Daily		0	3X Weekly test	Grab
Solids, Total Suspended (00530) EFFLUENT GROSS VALUE	Sample Measurement	455	753		****	8	12.5	- mg/l	0	3X Weekly test	24-Hr Composite
	Permit Requirement	1125 Monthly Average	1688 Weekly Average	lbs/day	****	30.0 Monthly Average	45.0 Weekly Average		0	3X Weekly test	24-Hr Composite

NAME OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

Max Gaskins

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE
Electronically Signed via AEPACS	(256) 405-6821	03/24/2023

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**Outfall: 001-1** 

Permit No: AL0058408					
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From: 2/1/2023	<b>To</b> : 2/28/2023				

Parameter		Quantity (	or Loading	Units	Qua	lity or Concentr	ation	Units	No. Ex.	Sample Freq	Sample Type
Solids, Total Suspended (00530)	Sample Measurement	8129	10866	lbs/day -	****	140	178	mg/l	0	3X Weekly test	24-Hr Composite
(00330) RAW SEW/INFLUENT	Permit Requirement	REPORT Monthly Average	REPORT Weekly Average		****	REPORT Monthly Average	REPORT Weekly Average		U	3X Weekly test	24-Hr Composite
Nitrogen, Ammonia Total (As N) (00610)	Sample Measurement	163.28	229.93	lbs/day	****	2.88	3.65	- mg/l		3X Weekly test	24-Hr Composite
EFFLUENT GROSS VALUE	Permit Requirement	750 Monthly Average	1125 Weekly Average	los/day	****	20.0 Monthly Average	30.0 Weekly Average		0	3X Weekly test	24-Hr Composite
Nitrogen, Kjeldahl Total (As N)	Sample Measurement	192	192	11/4	****	3.3	3.3	mg/l	0	Monthly	24-Hr Composite
(00625) EFFLUENT GROSS VALUE	Permit Requirement	REPORT Monthly Average	REPORT Weekly Average	lbs/day	****	REPORT Monthly Average	REPORT Weekly Average		0	Monthly	24-Hr Composite
Nitrite Plus Nitrate Total 1 Det. (As N) (00630) EFFLUENT GROSS VALUE	Sample Measurement	31	31	lha/day	****	0.54	0.54	- mg/l	0	Monthly	24-Hr Composite
	Permit Requirement	REPORT Monthly Average	REPORT Weekly Average	lbs/day	****	REPORT Monthly Average	REPORT Weekly Average		U	Monthly	24-Hr Composite

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Parameter		Quantity or Loading Units Quality or Concentration		Units	No. Ex.	Sample Freq	Sample Type						
Phosphorus, Total (As P) (00665)	Sample Measurement	*B	*B	lbs/day	****	*B	*B	· mg/l		Monthly	24-Hr Composite		
EFFLUENT GROSS VALUE	Permit Requirement	REPORT Monthly Average	REPORT Weekly Average		****	REPORT Monthly Average	REPORT Weekly Average		0	Monthly	24-Hr Composite		
Silver Total Recoverable (01079)	Sample Measurement	****	****	****	****	*B	*B	ug/l		(1		Monthly	Grab
EFFLUENT GROSS VALUE	Permit Requirement	****	****		****	REPORT Monthly Average	REPORT Maximum Daily		0	Monthly	Grab		
Color (ADMI Units) (01290)	Sample Measurement	****	****	****	****	****	72	ADMI		5X Weekly	Grab		
EFFLUENT GROSS VALUE	Permit Requirement	****	****	*****	****	****	80 Maximum Daily		0	5X Weekly	Grab		
Flow, In Conduit or Thru Treatment Plant (50050) EFFLUENT GROSS VALUE	Sample Measurement	6.86	9.04	- MGD	****	****	****	****	0	Daily	Continuous		
	Permit Requirement	REPORT Monthly Average	REPORT Maximum Daily		****	****	****	******		Daily	Continuous		

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Parameter		Quantity of	r Loading	Units	Qua	lity or Concentr	ation	Units	No. Ex.	Sample Freq	Sample Type
Chlorine, Total Residual	Sample Measurement	****	****	****	****	*9	*9			3X Weekly test	Grab
(50060) EFFLUENT GROSS VALUE	Permit Requirement	****	****		****	0.066 Monthly Average	0.115 Maximum Daily	mg/l	0	3X Weekly test	Grab
E. Coli (51040)	Sample Measurement	****	****	***	****	33	117		0	5X Weekly	Grab
EFFLUENT GROSS VALUE	Permit Requirement	****	****		****	548 Monthly Average	2507 Maximum Daily	col/100mL		5X Weekly	Grab
Cyanide, Free Available	Sample Measurement	****	****	****	****	*B	*B	· ug/l	0	Monthly	Grab
(51173) EFFLUENT GROSS VALUE	Permit Requirement	****	****	*****	****	31.4 Monthly Average	70.5 Maximum Daily			Monthly	Grab
Peracetic Acid (51674)	Sample Measurement	****	****		****	****	0.20		0	5X Weekly	Grab
EFFLUENT GROSS VALUE	Permit Requirement	****	****	****	****	****	1.0 Maximum Daily	mg/l	0	5X Weekly	Grab

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Parameter		Quantity (	or Loading	Units	Qual	lity or Concentr	ation	Units	No. Ex.	Sample Freq	Sample Type
BOD, Carbonaceous 05 Day,	Sample Measurement	210	234		****	3.7	4.1			3X Weekly test	24-Hr Composite
20C (80082) EFFLUENT GROSS VALUE	Permit Requirement	938 Monthly Average	1407 Weekly Average	lbs/day	****	25.0 Monthly Average	37.5 Weekly Average	mg/l	0	3X Weekly test	24-Hr Composite
BOD, Carbonaceous 05 Day, 20C (80082)	Sample Measurement	4423	4722	lbs/day	****	78	82	ma/l	0	3X Weekly test	24-Hr Composite
RAW SEW/INFLUENT	Permit Requirement	REPORT Monthly Average	REPORT Weekly Average	ios/day	****	REPORT Monthly Average	REPORT Weekly Average	mg/l	0	3X Weekly test	24-Hr Composite
BOD, Carb-5 Day, 20 Deg C,	Sample Measurement	****	****	****	95	****	****		0	Monthly	Calculated
Percent Remvl (80091) Percent Removal	Permit Requirement	****	****	*****	85.0 Monthly Average Minimum	****	****	%		Monthly	Calculated
Solids, Suspended Percent	Sample Measurement	****	****	****	92	****	****	%		Monthly	Calculated
Removal (81011) Percent Removal	Permit Requirement	****	****	-11	85.0 Monthly Average Minimum	****	****		0	Monthly	Calculated

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#### Outfall: 001-T

Parameter		Quantity of	or Loading	Units	Qual	ity or Concentr	ation	Units	No. Ex.	Sample Freq	Sample Type
Toxicity, Ceriodaphnia Chronic	Sample Measurement	****	*9	pass=0;fail=1 ***** **** *****			noss=Orfoil=1	***** () -	See Permit Requirements	24-Hr Composite	
(61426) EFFLUENT GROSS VALUE	Permit Requirement	****	0 Single Sample		****	****	****		0	See Permit Requirements	24-Hr Composite
Toxicity, Pimephales Chronic (61428)	Sample Measurement	****	*9	mass=0.fs:1=1	****	****	****	****		See Permit Requirements	24-Hr Composite
EFFLUENT GROSS VALUE	Permit Requirement	****	0 Single Sample	pass 0,1a11-1	ass=0;fail=1 *****	****	****			See Permit Requirements	24-Hr Composite

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END OF REPORT

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**Submission Identifier:** DMR-AL0058408-20230228-1

**Submission Signature Hash:** QfA14f1arwbtCY1JiGveuMJv321e+2ndyyvEbDjM2gw=

**Submitter Name:** Max Gaskins

**Submitter Email:** mgaskins@oxfordwater.com

**Submitted Date/Time:** 3/24/2023 10:12:24 AM