Alabama Department of Environmental Management Discharge Monitoring Report (DMR)

PERMITTEE NAME: Water Works & Sewer Board of the City of Oxford PERMIT NUMBER: AL0058408 MAILING ADDRESS: Post Office Box 3663 Oxford, AL36203 FACILITY: Oxford Tull C Allen Wwtp LOCATION:

0011

MONITORING POINT:

COUNTY:

Monitoring Period : <u>2020-10-01</u>To: <u>2020-10-31</u>

NO DISCHARGE FROM SITE:

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| Parameter TURBIDITY | | Quantity o | Units | Quality or Concentration | | | Units | s No. Ex. | Frequency of Analysis | Sample Type | |
|--|--|---------------------------------------|---|--|---|------------------------------|--|--------------|--------------------------|----------------|--------------------|
| | Sample Measurement | **** | **** | | **** | 2.09 | 4.53 | | 0 | 5X Weekly | Grab |
| PARAM CODE: 00070 Stage Code: 1 Final Effluent | Permit Requirement | **** | **** | 1 | **** | REPORT Monthly Average | REPORT Maximum Daily | - 43 NTU | | 5X Weekly | Grab |
| OXYGEN, DISSOLVED (DO) | Sample Measurement | **** | **** | | 6.18 | **** | **** | 10 | 0 | 3X Weekly test | Grab |
| PARAM CODE: 00300 Stage Code: 1 Final Effluent | Permit Requirement | **** | **** | 1 | 6.0 Minimum Daily | **** | **** | – 19 mg/l | | 3X Weekly test | Grab |
| РН | Sample Measurement | **** | **** | | 6.88 | **** | 7.76 | | 0 | 3X Weekly test | Grab |
| PARAM CODE: 00400 Stage Code: 1 Final Effluent | Permit Requirement | **** | **** |] | 6.0 Minimum Daily | **** | 9.0 Maximum Daily | - 12 S.U. | | 3X Weekly test | Grab |
| SOLIDS, TOTAL SUSPENDED | Sample Measurement | 3021 | 3716 | - 26 | **** | 141 | 194 | - 19 | 0 | 3X Weekly test | 24-Hr Composite |
| PARAM CODE: 00530 Stage Code: G Influent | Permit Requirement | REPORT Monthly Average | REPORT Weekly Average | lbs/day | **** | REPORT Monthly Average | REPORT Weekly Average | mg/l | | 3X Weekly test | 24-Hr Composite |
| SOLIDS, TOTAL SUSPENDED | Sample Measurement | 148 | 225 | 2. | **** | 6.7 | 9.5 | 10 | 0 | 3X Weekly test | 24-Hr Composite |
| PARAM CODE: 00530 Stage Code: 1 Final Effluent | Permit Requirement | 1125 Monthly Average | 1688 Weekly Average | - 26 lbs/day | **** | 30.0 Monthly Average | 45.0 Weekly Average | - 19 mg/l | | 3X Weekly test | 24-Hr Composite |
| NITROGEN, AMMONIA TOTAL (AS N) | Sample Measurement | 0.21 | 0.6 | | **** | *B | *B | | 0 | 3X Weekly test | 24-Hr Composite |
| PARAM CODE: 00610 Stage Code: 1 Final Effluent | Permit Requirement | 37.5 Monthly Average | 56.2 Weekly Average | 26 lbs/day | **** | 1.0 Monthly Average | 1.5 Weekly Average | - 19 mg/l | | 3X Weekly test | 24-Hr Composite |
| NITROGEN, KJELDAHL TOTAL (AS N) | Sample Measurement | 44 | 44 | | **** | 1.50 | 1.50 | | 0 | Monthly | 24-Hr Composite |
| PARAM CODE: 00625 Stage Code: 1 Final Effluent | Permit Requirement | REPORT Monthly Average | REPORT Weekly Average | - 26 lbs/day | **** | REPORT Monthly Average | REPORT Weekly Average | - 19 mg/l | | Monthly | 24-Hr Composite |
| Officer Or Authorized Agent | UBMITTED HEREIN AND BAS NFORMATION. I BELIEVE THE IGNIFICANT PENALTIES FOR EE 18 U.S.C. § 1001 AND 33 U.S Penalties under these statutes may | include fines up to \$10,000 and or m | INDIVIDUALS IMMEDIATELY TRUE, ACCURATE AND COM 'ION, INCLUDING THE POSSII | RESPONSIE PLETE. I AM BILITY OF FI | LE FOR OBTAINING AWARE THAT THER NE AND IMPRISONN | THE Officer (| of Principal Exect Or Authorized Ag | | Te | elephone No | Date (MM/DD/YY) |

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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Alabama Department of Environmental Management Discharge Monitoring Report (DMR)

 PERMITTEE NAME:
 Water Works & Sewer Board of the City of Oxford
 PERMIT NUMBER: AL0058408

 MAILING ADDRESS: Post Office Box 3663
 MONITORING
 0011

Oxford, AL36203 FACILITY: LOCATION: Oxford Tull C Allen Wwtp

MONITORING POINT:

COUNTY:

Monitoring Period : <u>2020-10-01</u>To: <u>2020-10-31</u>

NO DISCHARGE FROM SITE:

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| Parameter | | Quantity or Loading | | | Quality or Concentration | | | Units | No. Ex. | Frequency of Analysis | Sample Type |
|--|--|--|---|--------------------------|--------------------------|---------------------------|--|-----------|------------|--------------------------|--------------------|
| NITRITE PLUS NITRATE TOTAL DET. (AS N) | Sample Measurement | 11 | 11 | 26 | **** | 0.38 | 0.38 | 19 | 0 | Monthly | 24-Hr Composite |
| PARAM CODE: 00630 Stage Code: 1 Final Effluent | Permit Requirement | REPORT Monthly Average | REPORT Weekly Average | lbs/day | **** | REPORT Monthly Average | REPORT Weekly Average | mg/l | | Monthly | 24-Hr Composite |
| PHOSPHORUS, TOTAL (AS P) | Sample Measurement | 13 | 13 | 26 | **** | 0.45 | 0.45 | 19 | 0 | Monthly | 24-Hr Composite |
| PARAM CODE: 00665 Stage Code: 1 Final Effluent | Permit Requirement | REPORT Monthly Average | REPORT Weekly Average | lbs/day | **** | REPORT Monthly Average | REPORT Weekly Average | mg/l | | Monthly | 24-Hr Composite |
| | Sample Measurement | **** | **** | | ***** | *B | *B | 28 | 0 | Monthly | Grab |
| PARAM CODE: 01079 Stage Code: 1 ∛inal Effluent | Permit Requirement | **** | **** | 1 | **** | REPORT Monthly Average | REPORT Maximum Daily | ug/l | | Monthly | Grab |
| COLOR (ADMI UNITS) | Sample Measurement | **** | **** | | **** | **** | 56 | 1E | 0 | 5X Weekly | Grab |
| PARAM CODE: 01290 Stage Code: 1 Final Effluent | Permit Requirement | **** | **** | | **** | **** | 80 Maximum Daily | ADMI | | 5X Weekly | Grab |
| FLOW, IN CONDUIT OR THRU FREATMENT PLANT | Sample Measurement | 2.63 | 3.72 | 03 | **** | **** | **** | | 0 | Daily | Continuous |
| PARAM CODE: 50050 Stage Code: 1 Final Effluent | Permit Requirement | REPORT Monthly Average | REPORT Maximum Daily | MGD | **** | **** | **** | | | Daily | Continuous |
| CHLORINE, TOTAL RESIDUAL | Sample Measurement | **** | **** | | **** | *9 | *9 | 19 | 0 | 3X Weekly test | Grab |
| PARAM CODE: 50060 Stage Code: 1 Final Effluent | Permit Requirement | **** | **** | | **** | 0.066 Monthly Average | 0.115 Maximum Daily | mg/l | | 3X Weekly test | Grab |
| E.COLI | Sample Measurement | **** | **** | | **** | 13 | 42 | 13 | 0 | 5X Weekly | Grab |
| PARAM CODE: 51040 Stage Code: 1 Final Effluent | Permit Requirement | **** | **** | | **** | 126 Monthly Average | 298 Maximum Daily | col/100mL | | 5X Weekly | Grab |
| Officer Or Authorized Agent SU IN SIG | BMITTED HEREIN AND BAS FORMATION. I BELIEVE THE | F LAW THAT I HAVE PERSONAI ED ON MY INQUIRY OF THOSE SUBMITTED INFORMATION IS SUBMITTING FALSE INFORMA (C. \$1319) | INDIVIDUALS IMMEDIATEL' TRUE, ACCURATE AND COM | Y RESPONS IPLETE. I A | IBLE FOR M AWARE | OBTAINING THE C | nature of Principal l Officer Or Authorized | | Te | lephone No | Date (MM/DD/YY) |

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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 PERMITTEE NAME:
 Water Works & Sewer Board of the City of Oxford
 PERMIT NUMBER: AL0058408

 MAILING ADDRESS: Post Office Box 3663
 MONITORING
 0011

Oxford, AL36203 FACILITY: LOCATION: Oxford Tull C Allen Wwtp

MONITORING POINT:

COUNTY:

Monitoring Period : <u>2020-10-01</u>To: <u>2020-10-31</u>

NO DISCHARGE FROM SITE:

()

| Parameter | Quantity or Loading | | | Units | Quality o | Quality or Concentration | | | No. Ex. | Frequency of Analysis | Sample Type | |
|---|---|---------------------------|--------------------------|-----------------|------------------------------------|------------------------------|-----------------------------|--------------|------------|--------------------------|--------------------|--|
| CYANIDE, FREE AVAILABLE | Sample Measurement | **** | **** | | **** | *В | *B | 20 | 0 | Monthly | Grab | |
| PARAM CODE: 51173 Stage Code: 1 Final Effluent | Permit Requirement | **** | **** | | **** | 31.4 Monthly Average | 70.5 Maximum Daily | - 28 ug/l | | Monthly | Grab | |
| PERACETIC ACID | Sample Measurement | **** | **** | | **** | **** | 0.81 | - 19 | 0 | 5X Weekly | Grab | |
| PARAM CODE: 51674 Stage Code: 1 Final Effluent | Permit Requirement | **** | **** | | **** | **** | 1.0 Maximum Daily | mg/l | | 5X Weekly | Grab | |
| BOD, CARBONACEOUS 05 DAY, 20C | Sample Measurement | 1732 | 1931 | | **** | 80 | 91 | | 0 | 3X Weekly test | 24-Hr Composite | |
| PARAM CODE: 80082 Stage Code: G Influent | Permit Requirement | REPORT Monthly Average | REPORT Weekly Average | - 26 lbs/day | **** | REPORT Monthly Average | REPORT Weekly Average | - 19 mg/l | | 3X Weekly test | 24-Hr Composite | |
| BOD, CARBONACEOUS 05 DAY, 20C | Sample Measurement | 74 | 88 | | **** | 3.4 | 4.2 | | 0 | 3X Weekly test | 24-Hr Composite | |
| PARAM CODE: 80082 Stage Code: 1 Final Effluent | Permit Requirement | 300 Monthly Average | 450 Weekly Average | - 26 lbs/day | **** | 8.0 Monthly Average | 12.0 Weekly Average | - 19 mg/l | | 3X Weekly test | 24-Hr Composite | |
| BOD, CARB-5 DAY, 20 DEG C, PERCENT REMVL | Sample Measurement | **** | **** | | 96 | **** | **** | | 0 | Monthly | Calculated | |
| PARAM CODE: 80091 Stage Code: K Percent Removal | Permit Requirement | **** | **** | | 85.0 Monthly Average Minimum | **** | **** | 23 % | | Monthly | Calculated | |
| SOLIDS, SUSPENDED PERCENT REMOVAL | Sample Measurement | **** | **** | | 94 | **** | **** | | 0 | Monthly | Calculated | |
| PARAM CODE: 81011 Stage Code: K Percent Removal | Permit Requirement | **** | **** | | 85.0 Monthly Average Minimum | **** | **** | - 23 % | | Monthly | Calculated | |
| Officer Or Authorized Agent IN SIG | CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION UBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE FORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE GNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. EE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319 enalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months to 5 years.) | | | | | | | | Tele | phone No | Date (MM/DD/YY) | |