

DISCHARGE MONITORING REPORT (DMR)

Digitally signed by:
GlobalSign RSA OV SSL CA 2018
Date: 2021.11.24 10:17:48 -06:00
Reason: Copy Of Record
Location: State of Alabama

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: 10/1/2021	To: 10/31/2021

Outfall: 001-1

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
Turbidity (00070) EFFLUENT GROSS VALUE	Sample Measurement	*****	*****	*****	*****	2.85	8.9	NTU	0	5X Weekly	Grab
	Permit Requirement	*****	*****		*****	*****	*****			Monthly Average	Maximum Daily
Oxygen, Dissolved (DO) (00300) EFFLUENT GROSS VALUE	Sample Measurement	*****	*****	*****	8.06	*****	*****	mg/l	0	3X Weekly test	Grab
	Permit Requirement	*****	*****		6.0	*****	*****			Minimum Daily	3X Weekly test
pH (00400) EFFLUENT GROSS VALUE	Sample Measurement	*****	*****	*****	7.38	*****	7.62	S.U.	0	3X Weekly test	Grab
	Permit Requirement	*****	*****		6.0	*****	9.0			Minimum Daily	Maximum Daily
Solids, Total Suspended (00530) EFFLUENT GROSS VALUE	Sample Measurement	137	165	lbs/day	*****	6.7	8.0	mg/l	0	3X Weekly test	24-Hr Composite
	Permit Requirement	1125	1688		*****	30.0	45.0			Monthly Average	Weekly Average

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	I certify under penalty of law that this document and all attachments were 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 persons 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 significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE
Max Gaskins		Electronically Signed via AEPACS	(256) 405-6821	November/24/2021

DISCHARGE MONITORING REPORT (DMR)

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: 10/1/2021	To: 10/31/2021

Outfall: 001-1

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
		Monthly Average	Weekly Average		Monthly Average	Weekly Average	Monthly Average				
Solids, Total Suspended (00530) RAW SEW/INFLUENT	Sample Measurement	4965	8453	lbs/day	*****	245	417	mg/l	0	3X Weekly test	24-Hr Composite
	Permit Requirement	*****	*****		*****	*****	*****			*****	3X Weekly test
Nitrogen, Ammonia Total (As N) (00610) EFFLUENT GROSS VALUE	Sample Measurement	*B	4.23	lbs/day	*****	*B	0.21	mg/l	0	3X Weekly test	24-Hr Composite
	Permit Requirement	37.5	56.2		*****	1.0	1.5			3X Weekly test	24-Hr Composite
Nitrogen, Kjeldahl Total (As N) (00625) EFFLUENT GROSS VALUE	Sample Measurement	28	28	lbs/day	*****	1.4	1.4	mg/l	0	Monthly	24-Hr Composite
	Permit Requirement	*****	*****		*****	*****	*****			*****	Monthly
Nitrite Plus Nitrate Total 1 Det. (As N) (00630) EFFLUENT GROSS VALUE	Sample Measurement	83	83	lbs/day	*****	4.1	4.1	mg/l	0	Monthly	24-Hr Composite
	Permit Requirement	*****	*****		*****	*****	*****			*****	Monthly

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	I certify under penalty of law that this document and all attachments were 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 persons 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 significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE
Max Gaskins		Electronically Signed via AEPACS	(256) 405-6821	November/24/2021

DISCHARGE MONITORING REPORT (DMR)

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: 10/1/2021	To: 10/31/2021

Outfall: 001-1

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
Phosphorus, Total (As P) (00665) EFFLUENT GROSS VALUE	Sample Measurement	17	17	lbs/day	*****	0.84	0.84	mg/l	0	Monthly	24-Hr Composite
	Permit Requirement	***** Monthly Average	***** Weekly Average		*****	***** Monthly Average	***** Weekly Average			*****	Monthly
Silver Total Recoverable (01079) EFFLUENT GROSS VALUE	Sample Measurement	*****	*****	*****	*****	*B	*B	ug/l	0	Monthly	Grab
	Permit Requirement	*****	*****		*****	***** Monthly Average	***** Maximum Daily			*****	Monthly
Color (ADMI Units) (01290) EFFLUENT GROSS VALUE	Sample Measurement	*****	*****	*****	*****	*****	64	ADMI	0	5X Weekly	Grab
	Permit Requirement	*****	*****		*****	*****	*****			80 Maximum Daily	5X Weekly
Flow, In Conduit or Thru Treatment Plant (50050) EFFLUENT GROSS VALUE	Sample Measurement	2.45	3.25	MGD	*****	*****	*****	*****	0	Daily	Continuous
	Permit Requirement	***** Monthly Average	***** Maximum Daily		*****	*****	*****			*****	Daily

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	I certify under penalty of law that this document and all attachments were 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 persons 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 significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE
Max Gaskins		Electronically Signed via AEPACS	(256) 405-6821	November/24/2021

DISCHARGE MONITORING REPORT (DMR)

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: 10/1/2021	To: 10/31/2021

Outfall: 001-1

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
Chlorine, Total Residual (50060) EFFLUENT GROSS VALUE	Sample Measurement	****	****	****	****	*9	*9	mg/l	0	3X Weekly test	Grab
	Permit Requirement	****	****		****	0.066 Monthly Average	0.115 Maximum Daily			3X Weekly test	Grab
E. Coli (51040) EFFLUENT GROSS VALUE	Sample Measurement	****	****	****	****	11	56	col/100mL	0	5X Weekly	Grab
	Permit Requirement	****	****		****	126 Monthly Average	298 Maximum Daily			5X Weekly	Grab
Cyanide, Free Available (51173) EFFLUENT GROSS VALUE	Sample Measurement	****	****	****	****	*B	*B	ug/l	0	Monthly	Grab
	Permit Requirement	****	****		****	31.4 Monthly Average	70.5 Maximum Daily			Monthly	Grab
Peracetic Acid (51674) EFFLUENT GROSS VALUE	Sample Measurement	****	****	****	****	****	0.18	mg/l	0	5X Weekly	Grab
	Permit Requirement	****	****		****	****	****			1.0 Maximum Daily	5X Weekly

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	I certify under penalty of law that this document and all attachments were 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 persons 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 significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE
Max Gaskins		Electronically Signed via AEPACS	(256) 405-6821	November/24/2021

DISCHARGE MONITORING REPORT (DMR)

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: 10/1/2021	To: 10/31/2021

Outfall: 001-1

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Sample Freq	Sample Type
		Monthly Average	Weekly Average		Monthly Average	Weekly Average	Monthly Average				
BOD, Carbonaceous 05 Day, 20C (80082) EFFLUENT GROSS VALUE	Sample Measurement	76	79	lbs/day	*****	3.7	4.1	mg/l	0	3X Weekly test	24-Hr Composite
	Permit Requirement	300	450		*****	8.0	12.0				
BOD, Carbonaceous 05 Day, 20C (80082) RAW SEW/INFLUENT	Sample Measurement	1596	2022	lbs/day	*****	78	99	mg/l	0	3X Weekly test	24-Hr Composite
	Permit Requirement	*****	*****		*****	*****	*****				
BOD, Carb-5 Day, 20 Deg C, Percent Remvl (80091) Percent Removal	Sample Measurement	*****	*****	*****	95	*****	*****	%	0	Monthly	Calculated
	Permit Requirement	*****	*****		85.0	*****	*****				
Solids, Suspended Percent Removal (81011) Percent Removal	Sample Measurement	*****	*****	*****	97	*****	*****	%	0	Monthly	Calculated
	Permit Requirement	*****	*****		85.0	*****	*****				

NAME OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	I certify under penalty of law that this document and all attachments were 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 persons 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 significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO.	DATE
Max Gaskins		Electronically Signed via AEPACS	(256) 405-6821	November/24/2021