

Permittee Name/Address

Name: LEWISTON-AUBURN WWTF
 Address: PO BOX 1928
 LEWISTON, ME 04241

Facility: LEWISTON-AUBURN WWTF
 Location: LEWISTON
 Attn: Clayton M Richardson

National Pollutant Discharge Elimination System (NPDES)
 Discharge Monitoring Report

Permit Number: ME0101478
 Discharge Number: 001C

Monitoring Period:
 4/01/2011 TO 4/30/2011

DMR Status: Approved by DMR Signatory
 NODI:

Major
 01 SMRO

Public
 Inspector Initials:

Parameter		Quantity or Loading				Quality or Concentration				No. Ex	Freq. of Analysis	Sample Type
		Min	Avg	Max	Units	Min	Avg	Max	Units			
00310 - BOD, 5-DAY (20 DEG. C) : 1 - EFFLUENT GROSS VALUE	Sample Msmnt.	1595	1787	3401	LBS/DY	9.8	11	16	MG/L	0	01/01	24
	Permit Reqmnt.	3553 MO AVG	5329 WKLY AVG	REPORT DAILY MAX		30 MO AVG	45 WKLY AVG	50 DAILY MAX				
00400 - PH : 1 - EFFLUENT GROSS VALUE	Sample Msmnt.	*****	*****	*****	*****	6.8	*****	7.2	SU	0	01/01	GR
	Permit Reqmnt.	*****	*****	*****		6.0 MINIMUM	*****	9.0 MAXIMUM				
00530 - SOLIDS, TOTAL SUSPENDED : 1 - EFFLUENT GROSS VALUE	Sample Msmnt.	1415	1706	3052	LBS/DY	8.6	10	16	MG/L	0	01/01	24
	Permit Reqmnt.	3553 MO AVG	5329 WKLY AVG	REPORT DAILY MAX		30 MO AVG	45 WKLY AVG	50 DAILY MAX				
00545 - SOLIDS, SETTLEABLE : 1 - EFFLUENT GROSS VALUE	Sample Msmnt.	*****	*****	*****	*****	*****	*****	<0.1	ML/L	0	01/01	GR
	Permit Reqmnt.	*****	*****	*****		*****	*****	0.3 DAILY MAX				
01042 - COPPER, TOTAL (AS CU) : 1 - EFFLUENT GROSS VALUE	Sample Msmnt.	*****	*****	N9	LBS/DY	*****	*****		UG/L			
	Permit Reqmnt.	*****	*****	3.6 DAILY MAX		*****	*****	30.3 DAILY MAX				
50050 - FLOW, IN CONDUIT OR THRU TREATMENT PLANT : 1 - EFFLUENT GROSS VALUE	Sample Msmnt.	*****	19.1	31.4	MGD	*****	*****	*****	*****	0	99/99	RC
	Permit Reqmnt.	*****	REPORT MO AVG	REPORT DAILY MAX		*****	*****	*****				
50060 - CHLORINE, TOTAL RESIDUAL : 1 - EFFLUENT GROSS VALUE	Sample Msmnt.	*****	*****	*****	*****	*****	N9		MG/L			
	Permit Reqmnt.	*****	*****	*****		*****	0.1 MO AVG	0.24 DAILY MAX				
51477 - ANALYTIC CHEMISTRY : 1 - EFFLUENT GROSS VALUE	Sample Msmnt.	*****	*****	N9	Y/N	*****	*****	*****	*****			
	Permit Reqmnt.	*****	*****	REPORT VALUE		*****	*****	*****				
		Quantity or Loading				Quality or Concentration				No.	Freq.	Sample

Parameter		Min	Avg	Max	Units	Min	Avg	Max	Units	Ex	of Analysis	Type
81010 - BOD, 5-DAY PERCENT REMOVAL : K - PERCENT REMOVAL	Sample Msmnt.	*****	*****	*****	*****	N9	*****	*****	PERCENT			CALCTD
	Permit Reqmnt.	*****	*****	*****		85 MO AV MN	*****	*****				
81011 - SOLIDS, SUSPENDED PERCENT REMOVAL : K - PERCENT REMOVAL	Sample Msmnt.	*****	*****	*****	*****	N9	*****	*****	PERCENT			CALCTD
	Permit Reqmnt.	*****	*****	*****		85 MO AV MN	*****	*****				
TBP3B - NOEL STATRE 7DAY CHR CERIODAPHNIA : 1 - EFFLUENT GROSS VALUE	Sample Msmnt.	*****	*****	*****	*****	N9	*****	*****	PERCENT			COMP24
	Permit Reqmnt.	*****	*****	*****		REPORT DAILY MIN	*****	*****				
TBQ6F - NOEL STATRE 10DAY CHR SALVEL. SALMONID : 1 - EFFLUENT GROSS VALUE	Sample Msmnt.	*****	*****	*****	*****	N9	*****	*****	PERCENT			COMP24
	Permit Reqmnt.	*****	*****	*****		REPORT DAILY MIN	*****	*****				
TDA3B - NOAEL STAT 48HR ACU CERIODAPHNIA : 1 - EFFLUENT GROSS VALUE	Sample Msmnt.	*****	*****	*****	*****	N9	*****	*****	PERCENT			COMP24
	Permit Reqmnt.	*****	*****	*****		REPORT DAILY MIN	*****	*****				
TDA6F - NOAEL STAT 48HR ACU SALVEL. SALMONID : 1 - EFFLUENT GROSS VALUE	Sample Msmnt.	*****	*****	*****	*****	N9	*****	*****	PERCENT			COMP24
	Permit Reqmnt.	*****	*****	*****		REPORT DAILY MIN	*****	*****				
	Sample Msmnt.											
	Permit Reqmnt.											
	Sample Msmnt.											
	Permit Reqmnt.											

DMR Signatory: Rodney Strout

Date DMR Signatory Approved: 05/10/2011