

**COMMONWEALTH OF VIRGINIA
DEPARTMENT OF ENVIRONMENTAL QUALITY
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

**DEPT. OF ENVIRONMENTAL QUALITY
(REGIONAL OFFICE)**

PERMITTEE NAME/ADDRESS (INCLUDE FACILITY NAME/LOCATION IF DIFFERENT)

Northern Regional Office
13901 Crown Court

Woodbridge, VA 22193

NAME: Alexandria ASA Advanced Wastewater Treatment Plant
ADDRESS: 1500 Eisenhower Ave
Alexandria, VA 22314

VA0025160	001
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD

FACILITY LOCATION: 1500 Eisenhower Ave

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	2011	05	01		2011	05	31

NOTE: READ PERMIT AND GENERAL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

Parameter		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX.	FREQUENCY OF ANALYSIS	SAMPLE TYPE	LAB CODE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
FLOW PARAM CODE: 001	REPORTD	34.4	40.2	MGD	*****	*****	*****		0	CONT	TIRE	
	REQRMNT	54	NL		*****	*****	*****					
PH PARAM CODE: 002	REPORTD	*****	*****		6.4	*****	7.0	SU	0	1/DAY	GRAB	
	REQRMNT	*****	*****		6.0	*****	9.0					
TSS PARAM CODE: 004	REPORTD	25	40	KG/D	*****	0.2	0.3	MG/L	0	1/DAY	24HC	
	REQRMNT	1200	1800		*****	6.0	9.0					
DO PARAM CODE: 007	REPORTD	*****	*****		8.2	*****	*****	MG/L	0	1/DAY	GRAB	
	REQRMNT	*****	*****		6.0	*****	*****					
PHOSPHORUS, TOTAL (AS P) PARAM CODE: 012	REPORTD	19	24	LBS/D	*****	0.07	0.08	MG/L	0	1/DAY	24HC	
	REQRMNT	81	120		*****	0.18	0.27					
NITROGEN, TOTAL (AS N) PARAM CODE: 013	REPORTD	*****	*****		*****	3.4	*****	MG/L	0	1/DAY	CALC	
	REQRMNT	*****	*****		*****	NL	*****					
TKN (N-KJEL) PARAM CODE: 068	REPORTD	*****	*****		*****	0.9	1.1	MG/L	0	1/DAY	24HC	
	REQRMNT	*****	*****		*****	NL	NL					

GENERAL PERMIT REQUIREMENTS OR COMMENTS: QL by row: 004=1; 007=0.20; 012=0.05; 013=0.3; 068=0.3; 120=1; 764=0.2; 159=2; 389=0.05
PARAMETER-SPECIFIC COMMENTS:

BYPASSES AND OVERFLOWS	TOTAL OCCURENCES	TOTAL FLOW(M.G.)	TOTAL BOD5(K.G.)	OPERATOR IN RESPONSIBLE CHARGE			
	0	0	0	James Sizemore		1909000507	
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. SEE 18 U.S.C. & 1001 AND 33 U.S.C. & 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TYPED OR PRINTED NAME		CERTIFICATE NUMBER				
	PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE	703-549-3381			
	TYPED OR PRINTED NAME		SIGNATURE	YEAR	MO.	DAY	

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YEAR	MO	DAY	TO	YEAR	MO	DAY
2011	.05	01		2011	05	31

FACILITY LOCATION 1500 Eisenhower Ave

FROM

TO

NOTE: READ PERMIT AND GENERAL INSTRUCTIONS
BEFORE COMPLETING THIS FORM.

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
E.COLI	REPORTD	*****	*****		*****	<3	*****	0	1/DAY	GRAB	
PARAM CODE: 120	REQRMNT	*****	*****		*****	126	*****	0	1/DAY	GRAB	
CBOD5	REPORTD	9	38	KG/D	*****	0	0	0	1/DAY	24HC	
PARAM CODE: 159	REQRMNT	1000	1600		*****	5	8	0	1/DAY	24HC	
NITRITE+NITRATE-N,TOTAL	REPORTD	*****	*****		*****	2.5	*****	0	1/DAY	24HC	
PARAM CODE: 389	REQRMNT	*****	*****		*****	NL	*****	0	3D/W	24HC	
AMMONIA, AS N APR-OCT	REPORTD	5	13	KG/D	*****	0.0	0.1	0	1/DAY	24HC	
PARAM CODE: 764	REQRMNT	200	900		*****	1.0	4.4	0	1/DAY	24HC	
NITROGEN, TOTAL (AS N) (YEAR-TO-DATE)	REPORTD	*****	*****		*****	4.0	*****	0	1/M	CALC	
PARAM CODE: 805	REQRMNT	*****	*****		*****	NL	*****	0	1/M	CALC	

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		0	0	0	James Sizemore				
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DISCHARGE MONITORING REPORT(DMR)

VA0025160	SO1
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
11	05	01		11	05	31

Municipal Major 05/26/2009
 DEPT. OF ENVIRONMENTAL QUALITY
 (REGIONAL OFFICE)
 Northern Va. Regional Office
 13901 Crown Court
 Woodbridge, Va. 22193

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
672 SOLIDS, TOTAL, SLUDGE AS PERCENT	REPORTD	*****	*****		*****	27.1	27.1	PERCENT	0	1/M	COMP
	REQMNT	*****	*****		*****	NL	NA	PERCENT	***	1/YR	COMP
680 ARSENIC, SLUDGE	REPORTD	*****	*****		*****	4.0	4.0	MG/KG	0	1/M	COMP
	REQMNT	*****	*****		*****	41	75	MG/KG	***	1/YR	COMP
681 MOLYBDENUM, SLUDGE	REPORTD	*****	*****		*****	6	6	MG/KG	0	1/M	COMP
	REQMNT	*****	*****		*****	NA	75	MG/KG	***	1/YR	COMP
682 ZINC, SLUDGE	REPORTD	*****	*****		*****	622	622	MG/KG	0	1/M	COMP
	REQMNT	*****	*****		*****	2800	7500	MG/KG	***	1/YR	COMP
683 LEAD, SLUDGE	REPORTD	*****	*****		*****	35	35	MG/KG	0	1/M	COMP
	REQMNT	*****	*****		*****	300	840	MG/KG	***	1/YR	COMP
684 NICKEL, SLUDGE	REPORTD	*****	*****		*****	13	13	MG/KG	0	1/M	COMP
	REQMNT	*****	*****		*****	420	420	MG/KG	***	1/YR	COMP
685 MERCURY, SLUDGE	REPORTD	*****	*****		*****	1.2	1.2	MG/KG	0	1/M	COMP
	REQMNT	*****	*****		*****	17	57	MG/KG	***	1/YR	COMP
686 COPPER, SLUDGE	REPORTD	*****	*****		*****	292	292	MG/KG	0	1/M	COMP
	REQMNT	*****	*****		*****	1500	4300	MG/KG	***	1/YR	COMP

ADDITIONAL PERMIT REQUIREMENTS OR COMMENTS

BYPASSES AND OVERFLOWS	TOTAL OCCURENCES	TOTAL FLOW (M.G.)	TOTAL BOD5 (K.G.)	OPERATOR IN RESPONSIBLE CHARGE			DATE		
		0	0.000	0.00	James Sizemore		1909000507	11	06
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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or imprisonment for a term of not more than 6 months and 5 years.)				TYPED OR PRINTED NAME	SIGNATURE	CERTIFICATE NO.	YEAR	MO.	DAY
				PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE				
				Karen Pallansch		703 549-3381	11	06	09
				TYPED OR PRINTED NAME	SIGNATURE		YEAR	MO.	DAY

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
687 CADMIUM, SLUDGE	REPORTD	*****	*****		*****	1	1	MG/KG	0	1/M	COMP
	REQRMNT	*****	*****		*****	39	85	MG/KG	***	1/YR	COMP
688 LEVEL OF PATHOGEN REQUIREMENTS ACHIEVED	REPORTD	*****	*****		*****	*****	1	STCL #	0	1/M	*****
	REQRMNT	*****	*****		*****	*****	NL	STCL #	***	1/YR	*****
697 SELENIUM, SLUDGE	REPORTD	*****	*****		*****	1.0	1.0	MG/KG	0	1/M	COMP
	REQRMNT	*****	*****		*****	100	100	MG/KG	***	1/YR	COMP
	REPORTD										
	REQRMNT										
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