## **COTTAGE FARM CSO**

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE

BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

 MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

 MA0103284
 C01 A

 PERMIT NUMBER
 DISCHARGE NUMBER

MINOR (SUBR E) F - FINAL

\*\*\* NO DISCHARGE

CSO 201- MONTHLY & QUARTERLY

MONITORING PERIOD										
	FROM		TO							
YEAR	MO	DAY	YEAR	MO	DAY					
2001	3	1	2001	3	31					

DADAMETER		(3 Card Only) QI	JANTITY OR L	OADING	(4 Card Only	QUALITY C	R CONCENTE	RATION	NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER	$\sim$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
(32-37)	/	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	****	***	47.6	*****	47.6	(19) mg/L	0	01/31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	***	6.4	*****	6.9	(12) SU	0*	37/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	***	73.9	*****	92.5	(19) mg/L	0	37/31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	8.16	2.59	(61) inches	*****	*****	*****	*****	0	AL/EV	RC
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches	*****	*****	*****			ALL EVENTS	RCORDR
FLOW, WASTEWATER	SAMPLE MEASUREMENT	0.0	0.0	(3R) mgal	*****	*****	*****	*****	0	99/99	CN
BYPASSING TREATMENT PLANT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgal	*****	*****	*****			CONTINUOUS	CONTINUOUS
FLOW, IN CONDUIT OR THRU TREATMENT	SAMPLE MEASUREMENT	65.9	223.4	(03)	*****	*****	*****	*****	0	99/99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	*****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	****	***	0.07	*****	2.77	(19)	0*	36/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L mg/L		FOUR/YEAR	GRAB

<sup>\* -</sup> UNDERGOING FACILITY UPGRADE

# **COTTAGE FARM CSO**

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
MARCH 2004 DISCHARGE MONITORING REPORT (DMR)

MANOIT 2001 - DI	INEL OILI (DIVILL)	
MA0103284		C01 A
PERMIT NUMBER		DISCHARGE NUMBER
	='	

MONITORING PERIOD									
	FROM		TO						
YEAR	MO	DAY	YEAR	MO	DAY				
2001	3	1	2001	3	31				

MINOR (SUBR E) F - FINAL CSO 201 - MONTHLY & QUARTERLY

			•	•				_			
_		` ,	UANTITY OR I	LOADING	`	,	R CONCENTE	RATION	NO. EX	FREQUENCY OF	SAMPLE TYPE
1		(46-53)	(54-61)	LINUTO	(38-45)	(46-53)	(54-61)		-	ANALYSIS	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	*****	132	*****	302	(13) #/100mL	0	37/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100ML		FOUR/YEAR	GRAB
BYPASS OF	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	*****	******			
TREATMENT REC	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
DURATION OF	SAMPLE MEASUREMENT	*****	С	(79)	*****	*****	*****	*****			
DISCHARGE	PERMIT REQUIREMENT	*****	CNTESTED	hours/day	*****	*****	****			ALL EVENTS	OCCURS
DISCHARGE DURATION	SAMPLE MEASUREMENT	*****	85.5	(8A)	*****	*****	*****	*****	0	AL/EV	ОС
DISCHARGE  DISCHARGE DURATION EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	6	(93)	*****	*****	*****	*****	0	AL/EV	ОС
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS

## **COTTAGE FARM CSO**

PERMITTEE NAME / ADDRESS

NAME MWRA

**ADDRESS** CHARLESTOWN NAVY YARD

100 FIRST AVE

FACILITY MWRA

LOCATION BOSTON MA 02129 ATTN: Michael Hornbrook

BOSTON MA 02129

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 C01 A DISCHARGE NUMBER PERMIT NUMBER

(SUBR E) È - FINAĹ CSO 201 - MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE

MINOR

MONITORING PERIOD								
	FROM		TO					
YEAR	MO	DAY	YEAR	MO	DAY			
2001	3	1	2001	3	31			

PARAMETER			JANTITY OR I	OADING	(4 Card Only	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)	$\sim$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)		_	ANALYSIS	
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
LC50/PF STAT 24HR AC MYSID. BAHIA	SAMPLE MEASUREMENT	*****	****	*****		*****	*****	(23)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMPOSITE
LC50/PF STAT 24HR AC MENIDIA	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	(23)	0	01 / 180	24
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMPOSITE
NAME / TITLE PRINCI OFFICE		THE INFORMA	I R PENALTY OF LA TION SUBMITTED RESPONSIBLE FO	HEREIN; AND	BASED ON MY INC	QUIRY OF THOS		See original	form for	TELEPHONE	DATE
Michael J. Ho Chief Operation		INFORMATION IS	TRUE, ACCURAT R SUBMITTING FA	E AND COMPLI ALSE INFORMA	ETE. I AM AWAR	E THAT THERE A	ARE SIGNIFICANT			(617)788-4359	4/17/2001

# **PRISON POINT CSO**

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE

BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES
MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 PERMIT NUMBER REPORT (DMR) (SL C03 A F-DISCHARGE NUMBER CS

MINOR (SUBR E) F - FINAL

CSO 203 - MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE \*\*\*

MONITORING PERIOD									
	FROM		TO						
YEAR	MO	DAY	YEAR	MO	DAY				
2001	3	1	2001	3	31				

DADAMETED		(3 Card Only) QI	JANTITY OR L	OADING.	(4 Card Only	QUALITY O	R CONCENTR	RATION	NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER		(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	*****	***	22.4	*****	22.4	(19) mg/L	0	01/31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	***	6.0	*****	7.1	(12) SU	0*	24/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL	SAMPLE MEASUREMENT	*****	*****	***	75.7	*****	75.7	(19) mg/L	0	24/31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	8.16	2.59	(61) inches	*****	*****	*****	*****	0	AL/EV	RC
SOLIDS, TOTAL SUSPENDED EFFLUENT  RAINFALL EFFLUENT  FLOW, WASTEWATER BYPASSING TREATMENT PLANT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches	*****	*****	*****			ALL EVENTS	RCORDR
- ,	SAMPLE MEASUREMENT	0.0	0.0	(3R)	*****	*****	*****	*****	0	99/99	CN
	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgal mgal	*****	*****	*****			CONTINUOUS	CONTINUOUS
FLOW, IN CONDUIT OR THRU TREATMENT	SAMPLE MEASUREMENT	71.8	188.0	(03)	*****	*****	****	******	0	99/99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	****	0.07	*****	0.89	(19) mg/L	0*	24/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L		FOUR/YEAR	GRAB

<sup>\*-</sup>UNDERGOING FACILITY UPGRADE

## **PRISON POINT CSO**

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE

BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT D	ISCHARGE	<b>ELIMINAT</b>	ION SYSTEM (NPDE:	S)
MADOULOGGA DIGG				,

MANOIT 2001 - DI	COLIZINGE MICHITORING	KEI OKI (DIIIK)
MA0103284		C03 A
PERMIT NUMBER		DISCHARGE NUMBER

	FROM			TO	
YEAR	MO	DAY	YEAR	MO	DAY
2001	3	1	2001	3	31

(SUBR E) F - FINAL CSO 203 - MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE [

MINOR

1		(3 Card Only) <b>Q</b> I	UANTITY OR I	OADING	(4 Card Only	QUALITY O	R CONCENTE	RATION	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
•	/	AVERAGE	MAXIMUM	UNITS	MINIMÚM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	*****	602	*****	602	(13) #/100mL	0	24/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100ML		FOUR/YEAR	GRAB
BYPASS OF	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	****	*****			
TREATMENT	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	****			ALL EVENTS	OCCURS
DURATION OF	SAMPLE MEASUREMENT	*****	С	(79)	*****	*****	*****	*****			
DISCHARGE	PERMIT REQUIREMENT	*****	CNTESTED	hours/day	*****	*****	****			ALL EVENTS	OCCURS
DISCHARGE DURATION	SAMPLE MEASUREMENT	*****	47.8	(8A) hours	*****	*****	*****	*****	0	AL/EV	ОС
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	4	(93) occur/mon	*****	*****	*****	****	0	AL/EV	ОС
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS

## **PRISON POINT CSO**

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE

BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)	
MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)	

MA0103284 C03 A
PERMIT NUMBER DISCHARGE NUMBER

(SUBR E) F - FINAL CSO 203- MONTHLY & QUARTERLY

MINOR

\*\*\* NO DISCHARGE

MONITORING PERIOD								
	FROM			TO				
YEAR	MO	DAY	YEAR	MO	DAY			
2001	3	1	2000	3	31			

PARAMETER		(3 Card Only) Ql	JANTITY OR L	OADING	(4 Card Only	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)	$\sim$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
LC50/PF STAT 24HR AC PIMPEPHALES	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	(23)	0	01 / 180	24
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC DAPHNIA	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	(23)	0	01 / 180	24
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINCI OFFICE		THE INFORMA	I R PENALTY OF LA TION SUBMITTED RESPONSIBLE FO	HEREIN; AND	BASED ON MY INC	QUIRY OF THOS	E INDIVIDUALS	See original	form for	TELEPHONE	DATE
Michael J. Ho Chief Operation		INFORMATION IS	TRUE, ACCURAT R SUBMITTING FA	E AND COMPLIALSE INFORMA	ETE. I AM AWAR	E THAT THERE A	RE SIGNIFICANT	signati		(617)788-4359	4/17/2001

# **SOMERVILLE MARGINAL CSO**

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE

BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 C05
PERMIT NUMBER DISCHARGE NUMBER

YEAR

2001

TO

DAY

31

MO

MONITORING PERIOD

DAY

FROM

MO

3

YEAR

2001

MINOR (SUBR E) F - FINAL

CSO 205 - MONTHLY & QUARTERLY

***	NO	DISCHARGE	***

PARAMETER		` ,,	JANTITY OR L	OADING	(4 Card Only	,	R CONCENTE	RATION	NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)		(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63)	ANALYSIS (64-68)	(69-70)
BOD, 5 - DAY	SAMPLE MEASUREMENT	*****	*****	****	9	*****	9	(19)	(62-63)	(04-08)	(69-70)
(20 DEG. C) EFFLUENT	PERMIT REQUIREMENT	*****	****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	****	9	*****	9	(12) SU			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	***	9	*****	9	(19) mg/L			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	8.16	2.59	(61) inches	*****	*****	*****	*****	0	AL/EV	RC
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches	*****	*****	*****			ALL EVENTS	RCORDR
FLOW, WASTEWATER	SAMPLE MEASUREMENT	0.0	0.0	(3R)	*****	*****	*****	*****	0	99/99	CN
BYPASSING TREATMENT PLANT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgal mgal	*****	*****	*****			CONTINUOUS	CONTINUOUS
FLOW, IN CONDUIT OR THRU TREATMENT	SAMPLE MEASUREMENT	9.7	32.6	(03)	*****	*****	*****	****	0	99/99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	****	9	*****	9	(19)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L mg/L		FOUR/YEAR	GRAB

<sup>\*-</sup>UNDERGOING FACILITY UPGRADE

## **SOMERVILLE MARGINAL CSO**

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

MANOTI 2001 - DI	COLIZINGE MICHITORING	KEI OKI (DIIIK)
MA0103284		C05
PERMIT NUMBER		DISCHARGE NUMBER

MONITORING PERIOD								
	FROM			TO				
YEAR	MO	DAY	YEAR	MO	DAY			
2001	3	1	2001	3	31			

MINOR (SUBR E) F - FINAL CSO 205 - MONTHLY & QUARTERLY

1		(3 Card Only) <b>QI</b> (46-53)	JANTITY OR L (54-61)	OADING	(4 Card Only)	QUALITY O	OR CONCENTE (54-61)	RATION	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
ı		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	******	9	*****	9	(13)	(2 22)	(1.1.1)	(***
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100mL #/100ML		FOUR/YEAR	GRAB
BYPASS OF	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	*****	*****			
TREATMENT	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
DURATION OF	SAMPLE MEASUREMENT	*****	С	(79)	*****	*****	*****	*****			
DISCHARGE	PERMIT REQUIREMENT	*****	CNTESTED	hours/day	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE DURATION	SAMPLE MEASUREMENT	*****	43.0	(8A) hours	*****	*****	*****	*****	0	AL/EV	OC
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	5	(93) occur/mon	*****	*****	*****	*****	0	AL/EV	OC
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS

# SOMERVILLE MARGINAL CSO

PERMITTEE NAME / ADDRESS NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE

BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
MARCH 2004 DISCHARGE MONITORING REPORT (DMR)

	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	( · ,
MA0103284			C05
PERMIT NUMBER		DISCHA	RGE NUMBER

	MONITORING PERIOD										
	FROM		ТО								
YEAR	MO	DAY	YEAR	MO	DAY						
2001	3	1	2001	3	31						

(SUBR E) F - FINAL CSO 205 - MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE \*\*\*

MINOR

PARAMETER		` ,,	JANTITY OR L	OADING	(4 Card Only	,	OR LOADING		NO. EX		SAMPLE TYPE
(32-37)	$\sim$	(46-53)	(54-61)	1	(38-45)	(46-53)	(54-61)	1		ANALYSIS	
(02 01)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
LC50/PF STAT 24HR AC	SAMPLE MEASUREMENT	*****	*****	*****	9			(23)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC	SAMPLE MEASUREMENT	*****	*****	*****	9	*****	*****	(23)			
DAPHNIA EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMP24
								<u> </u>			
NAME / TITLE PRINCI OFFICE		THE INFORMA	R PENALTY OF LA TION SUBMITTED RESPONSIBLE FO	HEREIN; AND	BASED ON MY IN	QUIRY OF THOSE	E INDIVIDUALS	See original	form for	TELEPHONE	DATE
Michael J. Ho Chief Operation		INFORMATION IS	S TRUE, ACCURAT R SUBMITTING FA	E AND COMPLIALSE INFORMA	ETE. I AM AWAR	E THAT THERE A	RE SIGNIFICANT	signatu		(617)788-4359	4/17/2001

# **SOMERVILLE MARGINAL RELIEF OUTFALL**

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE

BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 C25
PERMIT NUMBER DISCHARGE NUMBER

MINOR (SUBR E) F - FINAL

\*\*\* NO DISCHARGE

CSO 205 - MONTHLY & QUARTERLY

MONITORING PERIOD										
FROM TO										
YEAR	MO	DAY	YEAR	MO	DAY					
2001	3	1	2001	3	31					

PARAMETER		(	JANTITY OR L	OADING	( )	,	R CONCENTR	RATION	NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)		(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63)	ANALYSIS (64-68)	(69-70)
BOD, 5 - DAY	SAMPLE MEASUREMENT	*****	*****	****	0.0	*****	0.0	(19)	0	01/31	CP
(20 DEG. C) EFFLUENT	PERMIT REQUIREMENT	*****	****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	****	7.7	*****	8.2	(12) SU	0	04/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	****	41.1	*****	41.1	(19) mg/L	0	04/31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	8.16	2.59	(61) INCHES	*****	*****	*****	*****	0	AL/EV	RC
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches	*****	*****	*****			ALL EVENTS	RCORDR
FLOW, WASTEWATER	SAMPLE MEASUREMENT	0.0	0.0	(3R)	*****	*****	*****	*****	0	99/99	CN
BYPASSING TREATMENT PLANT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgal mgal	*****	*****	*****			CONTINUOUS	CONTINUOUS
FLOW, IN CONDUIT OR THRU TREATMENT	SAMPLE MEASUREMENT	7.0	7.0	(03) MGD	*****	*****	*****	*****	0	99/99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd	*****	*****	****	•		CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	****	***	4.65	*****	5.50	(19)	0*	04/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L mg/L		FOUR/YEAR	GRAB

<sup>\* -</sup> UNDERGOING FACILITY UPGRADE

#### SOMERVILLE MARGINAL RELIEF OUTFALL

PERMITTEE NAME / ADDRESS NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

MARCH 2001 - DISCHARGE MONTORING REPORT (DMR)										
MA0103284		C25								
PERMIT NUMBER		DISCHARGE NUMBER								
	·									

MONITORING PERIOD									
FROM TO									
YEAR	MO	DAY	YEAR	MO	DAY				
2001	3	1	2001	3	31				

F - FINAL CSO 205 - MONTHLY & QUARTERLY \*\*\* NO DISCHARGE \*\*\*

MINOR

(SUBR E)

		(3 Card Only) QI	JANTITY OR I	OADING	(4 Card Only	QUALITY C	R CONCENTE	RATION	NO. EX	FREQUENCY OF	SAMPLE TYPE
1	$\sim$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
	/	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	*****	378	*****	378	(13) #/100mL	0	05/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100ML		FOUR/YEAR	GRAB
BYPASS OF	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	*****	*****			
TREATMENT	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
DURATION OF	SAMPLE MEASUREMENT	*****	С	(79)	*****	*****	*****	*****			
DISCHARGE	PERMIT REQUIREMENT	*****	CNTESTED	hours/day	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE DURATION	SAMPLE MEASUREMENT	*****	5.5	(8A) HOURS	*****	*****	*****	*****	0	AL/EV	OC
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	1	(93) OCC/MON	*****	*****	*****	*****	0	AL/EV	ОС
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
										·	

#### **SOMERVILLE MARGINAL RELIEF OUTFALL**

PERMITTEE NAME / ADDRESS
NAME MWRA
ADDRESS CHARLESTOWN NAVY YA

CHARLESTOWN NAVY YARD 100 FIRST AVE

BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 C25
PERMIT NUMBER DISCHARGE NUMBER

MONITORING PERIOD

YEAR

2001

DAY

1

TO

DAY

31

MO

3

FROM

YEAR

2001

MO

3

MINOR (SUBR E) F - FINAL

CSO 205 - MONTHLY & QUARTERLY

*** NO DISCHARGE		***
------------------	--	-----

PARAMETER		(3 Card Only) Ql	_	OADING	,	•	OR LOADING		NO. EX		SAMPLE TYPE
(32-37)	$\sim$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)	1		ANALYSIS	
(02 01)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
LC50/PF STAT 24HR AC PIMPEPHALES	SAMPLE MEASUREMENT	*****	*****	*****	> 100			(23)	0	01 / 180	24
EFFLUENT	PERMIT REQUIREMENT	*****	****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC DAPHNIA	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	(23)	0	01 / 180	24
EFFLUENT	PERMIT REQUIREMENT	*****	****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
								1			
								†			
							1	†			
NAME / TITLE PRINCI OFFICE		THE INFORMA	R PENALTY OF LA TION SUBMITTED RESPONSIBLE FO	HEREIN; AND	BASED ON MY IN	QUIRY OF THOSE	E INDIVIDUALS	See original	form for	TELEPHONE	DATE
Michael J. Ho Chief Operatir		INFORMATION IS	TRUE, ACCURAT R SUBMITTING FA	E AND COMPLIALSE INFORMA	ETE. I AM AWAR	E THAT THERE A	RE SIGNIFICANT	signati		(617)788-4359	4/17/2001

# **FOX POINT CSO**

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE BOSTON MA 02129

MWRA

**FACILITY** 

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 PERMIT NUMBER

C09 A DISCHARGE NUMBER MINOR (SUBR E) È - FINAL

CSO 209 - MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE \*\*\*

		MONITORIN	NG PERIOD					
FROM TO								
YEAR	MO	DAY	YEAR	MO	DAY			
2001	3	1	2001	3	31			

DADAMETED		(3 Card Only) QI	JANTITY OR L	OADING.	(4 Card Only	QUALITY C	R CONCENTE	RATION	NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER (32-37)	$\sim$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	****	***	0.0	*****	0.0	(19)	0	01/31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	****	6.5	*****	8.1	(12) SU	0	13/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	****	87.2	*****	87.2	(19) mg/L	0	12/31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	8.16	2.59	(61) inches	*****	*****	*****	*****	0	AL/EV	RC
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches	*****	*****	*****			ALL EVENTS	RCORDR
FLOW, WASTEWATER	SAMPLE MEASUREMENT	0.0	0.0	(3R) mgal	*****	*****	*****	*****	0	99/99	CN
BYPASSING TREATMENT PLANT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgal	*****	*****	*****			CONTINUOUS	CONTINUOUS
FLOW, IN CONDUIT OR THRU TREATMENT	SAMPLE MEASUREMENT	4.8	16.2	(03)	*****	*****	*****	******	0	99/99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	*****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	****	***	14.73	*****	26.40	(19)	0*	13/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	****	****	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L mg/L		FOUR/YEAR	GRAB

<sup>\* -</sup> UNDERGOING FACILITY UPGRADE

# **FOX POINT CSO**

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT DIS	CHARG	E ELIM	INATION	SYSTEM (NPDES	3)
MARGULAGOA BIGGUL				DODE (DIED)	,

MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)								
MA0103284		C09 A						
PERMIT NUMBER		DISCHARGE NUMBER						
	:	<u> </u>						

MONITORING PERIOD									
	FROM		TO						
YEAR	MO	DAY	YEAR	MO	DAY				
2001	3	1	2001	3	31				

MINOR (SUBR E) F - FINAL CSO 209 - MONTHLY & QUARTERLY

1		(3 Card Only) <b>Q</b> (	UANTITY OR I (54-61)	OADING	(4 Card Only	QUALITY O	R CONCENTE (54-61)	RATION	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMÚM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
COLIFORM, FECAL	SAMPLE MEASUREMENT	*****	*****	******	49	*****	100	(13)	0	13/31	GR
GENERAL EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100mL #/100ML		FOUR/YEAR	GRAB
BYPASS OF	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	****	******			
TREATMENT	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	****	****	*******		ALL EVENTS	OCCURS
DURATION OF	SAMPLE MEASUREMENT	*****	С	(79)	*****	*****	*****	****			
DISCHARGE	PERMIT REQUIREMENT	*****	CNTESTED	hours/day	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE DURATION	SAMPLE MEASUREMENT	*****	37.4	(8A) hours	*****	*****	*****	****	0	AL/EV	OC
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	5	(93) occur/mon	*****	*****	*****	*****	0	AL/EV	OC
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS

#### **FOX POINT CSO**

PERMITTEE NAME / ADDRESS

NAME **MWRA** 

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE BOSTON MA 02129

SAMPLE

**MEASUREMENT** 

PERMIT

REQUIREMENT

SAMPLE

**MEASUREMENT** 

PERMIT

REQUIREMENT

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

**PARAMETER** 

(32-37)

LC50/PF STAT 24HR AC

LC50/PF STAT 24HR AC

**PIMPEPHALES** 

**EFFLUENT** 

DAPHNIA

**EFFLUENT** 

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
MADOU 2004 DISCULADOS MONITORINO DEDOST (DMD)

1117 (1 ( 0 1 1 2 0 0 1 )	<u></u>	IXEI OIXI (Billix)
MA0103284		C09 A
PERMIT NUMBER		DISCHARGE NUMBER

	MONITORING PERIOD   TO   MO   DAY   YEAR   MO   DAY   3   31				
	FROM			TO	
YEAR	MO	DAY	YEAR	MO	DAY
2001	3	1	2001	3	31

UNITS

\*\*\*\*\*\*

\*\*\*\*\*

3 Card Only) QUANTITY OR LOADING

(54-61)

MAXIMUM

\*\*\*\*\*

\*\*\*\*\*

\*\*\*\*\*

\*\*\*\*\*

(46-53)

AVERAGE

\*\*\*\*\*

\*\*\*\*\*

\*\*\*\*\*

MINOR (SUBR E) È - FINAL CSO 209 - MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE \*\*\*

•							
		TO					
	YEAR	MO	DAY				
	2001	3	31				
				<b>-</b> '			
	(4 Card Only)	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
	(38-45)	(46-53)	(54-61)			ANALYSIS	
	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
	> 100	*****	****	(23)	0	02 / 180	24
	REPORT DAILY MN	*****	****	70 PERCENT		SEMI / ANNUAL	COMP24
	> 100	*****	*****	(23)	0	02 / 180	24
	REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24

NAME / TITLE PRINCIPAL EXECUTIVE
OFFICER

Michael J. Hornbrook **Chief Operating Officer**  I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN: AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

TELEPHONE DATE See original form for signature (617)788-4359 4/17/2001

9-NO SAMPLING CONDUCTED THIS MONTH

Page 3 of 3

# **COMMERCIAL POINT CSO**

PERMITTEE NAME / ADDRESS

NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE

BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES
MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 PERMIT NUMBER C11 A F
DISCHARGE NUMBER

MINOR (SUBR E) F - FINAL

CSO 211- MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE \*\*\*

	MONITORING PERIOD									
	FROM			TO						
YEAR	MO	DAY	YEAR	MO	DAY					
2001	3	1	2001	3	31					

BARAMETER		(3 Card Only) QI	JANTITY OR L	OADING	(4 Card Only	QUALITY O	R CONCENTR	RATION	NO. EX	FREQUENCY OF	SAMPLE TYPE
PARAMETER	$\sim$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
(32-37)	/	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	*****	***	0.0	*****	0.0	(19)	0	01/31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	***	6.1	*****	7.6	(12) SU	0*	16/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	***	147.3	*****	147.3	(19) mg/L	0	16/31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	8.16	2.59	(61) inches	*****	*****	*****	*****	0	AL/EV	RC
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches	*****	*****	*****			ALL EVENTS	RCORDR
FLOW, WASTEWATER	SAMPLE MEASUREMENT	0.0	0.0	(3R)	*****	*****	*****	*****	0	99/99	CN
BYPASSING TREATMENT PLANT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgal mgal	*****	*****	*****			CONTINUOUS	CONTINUOUS
FLOW, IN CONDUIT OR THRU TREATMENT	SAMPLE MEASUREMENT	11.7	30.8	(03)	*****	*****	*****	******	0	99/99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	*****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	***	3.85	*****	5.50	(19)	0*	16/31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L mg/L		FOUR/YEAR	GRAB

<sup>\* -</sup> UNDERGOING FACILITY UPGRADE

## **COMMERCIAL POINT CSO**

PERMITTEE NAME / ADDRESS NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)

WANCH 2001 - DI	MARCH 2001 - DISCHARGE MONITORING REPORT (DMR)							
MA0103284		C11 A						
PERMIT NUMBER		DISCHARGE NUMBER						
	•							

MONITORING PERIOD           FROM         TO           YEAR         MO         DAY         YEAR         MO         DAY           2001         3         1         2001         3         31					
FROM TO YEAR MO DAY YEAR MO DAY					
	FROM			10	
YEAR	MO	DAY	YEAR	MO	DAY
2001	3	1	2001	3	31

MINOR (SUBR E) F - FINAL CSO 211 - MONTHLY & QUARTERLY

			UANTITY OR I	LOADING	(4 Card Only	,	R CONCENTE	RATION	NO. EX	FREQUENCY OF	SAMPLE TYPE
1		(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63)	ANALYSIS (64-68)	(69-70)
COLIFORM, FECAL	SAMPLE MEASUREMENT	*****	*****	*******	125	*****	125	(13)	0	16/31	GR
IEEEI I IENI I	PERMIT REQUIREMENT	*****	*****	-	REPORT MO GEO	*****	REPORT MAXIMUM	#/100mL #/100ML		FOUR/YEAR	GRAB
BYPASS OF	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	****	*****			
TREATMENT	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
DURATION OF	SAMPLE MEASUREMENT	*****	С	(79)	*****	*****	*****	*****			
DISCHARGE	PERMIT REQUIREMENT	*****	CNTESTED	hours/day	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE DURATION	SAMPLE MEASUREMENT	*****	47.9	(8A) hours	*****	*****	*****	*****	0	AL/EV	ОС
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****	•		ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	5	(93) occur/mon	*****	*****	*****	*****	0	AL/EV	ОС
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
				1				•			

# **COMMERCIAL POINT CSO**

PERMITTEE NAME / ADDRESS NAME MWRA

ADDRESS CHARLESTOWN NAVY YARD

100 FIRST AVE BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)				
MARCH 2004 DISCHARCE MONITORING REPORT (DMR)				

	 -	
MA0103284		C11 A
PERMIT NUMBER		DISCHARGE NUMBER

MINOR (SUBR E) F - FINAL CSO 211 - MONTHLY & QUARTERLY

\*\*\* NO DISCHARGE \*\*\*

		MONITORIN	NG PERIOD					
	FROM		ТО					
YEAR	MO	DAY	YEAR	MO	DAY			
2001	3	1	2001	3	31			

PARAMETER		(3 Card Only) Ql	JANTITY OR L	OADING	(4 Card Only	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)	$\sim$	(46-53)	(54-61)		(38-45)	(46-53)	(54-61)			ANALYSIS	
(32-37)	/	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
LC50/PF STAT 24HR AC U CERICDAPHNIA	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	(23)	0	02 / 180	24
EFFLUENT	PERMIT REQUIREMENT	****	****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC U D. PULEX	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	(23)	0	02 / 180	24
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINCI OFFICE		THE INFORMA	I R PENALTY OF LA TION SUBMITTED RESPONSIBLE FO	HEREIN; AND	BASED ON MY INC	QUIRY OF THOS		See original	form for	TELEPHONE	DATE
Michael F. He Chief Operation		INFORMATION IS	TRUE, ACCURAT R SUBMITTING FA	E AND COMPLIALSE INFORMA	ETE. I AM AWAR	E THAT THERE A	ARE SIGNIFICANT	signati		(617)788-4359	4/17/2001