COTTAGE FARM CSO

LAST UPDATED: APR 24, 2002

PERMITTEE NAME / ADDRESS

NAME MWRA

CHARLESTOWN NAVY YARD ADDRESS

100 FIRST AVE BOSTON MA 02129

FACILITY MWRA

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
MARCH 2002 - DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

YEAR

2002

MA0103284 PERMIT NUMBER DISCHARGE NUMBER

DAY

FROM

MO

3

YEAR

2002

MINOR (SUBR E)

F - FINAL

C01 A

DAY

31

TO

МО

3

CSO 201- MONTHLY & QUARTERLY

*** NO	DISCHARGE	X

PARAMETER (32-37)		(3 Card Only) Ql (46-53)	(54-61)		(38-45)	(46-53)	R CONCENTR (54-61)	ATION	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	*****	***		*****		(19) mg/L			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	****	***		*****		(12)			
EFFLUENT	PERMIT REQUIREMENT	*****	****	****	6.5 MINIMUM	*****	8.3 MAXIMUM	SU SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	****	***		****		(19)			
EFFLUENT	PERMIT REQUIREMENT	*****	****	****	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	3.52	0.61	(61)	*****	*****	*****	******	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	0.0	0.0	(03)	*****	*****	****	******	0	99 / 99	CN
PLANT	PERMIT	CNTESTED	CNTESTED	mgd	*****	*****	*****	********		CONTINUOUS	CONTINUOUS
EFFLUENT	REQUIREMENT	MO AVG	DAILY MAX	mgd				(40)			
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	***		*****		(19) mg/L			
EFFLUENT * LINDERGOING FACILITY LIPS	PERMIT REQUIREMENT	*****	*****	***	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L		FOUR/YEAR	GRAB

^{* -} 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 2002 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C01 A
PERMIT NUMBER	DISCHARGE NUMBER

MINOR (SUBR E) F - FINAL

CSO 201 - MONTHLY & QUARTERLY

*** NO DISCHARGE X ***

MONITORING PERIOD										
FROM TO										
YEAR	MO	DAY	YEAR	DAY						
2002	3	1	2002	3	31					

		(3 Card Only) QUANTITY OR LOADING			(4 Card Only) QUALITY OR CONCENTRATION				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	SAMPLE	*****	*****			*****		(13)			
GENERAL	MEASUREMENT			*****				#/100mL			
EFFLUENT	PERMIT	*****	*****		REPORT	*****	REPORT	#/ TOOTILE		FOUR/YEAR	GRAB
2.7.202.77	REQUIREMENT				MO GEO		MAXIMUM	#/100ML		TOORTEAR	OIVAD
	SAMPLE	*****	С	(93)	*****	*****	*****				
BYPASS OF TREATMENT	MEASUREMENT							******			
BIT AGG OF THE ATMENT	PERMIT	*****	REPORT		*****	*****	*****			ALL EVENTS	OCCURS
	REQUIREMENT		EVENT TOT	occur/mon						ALL LVLIVIO	0000110
	SAMPLE	*****	С	(79)	*****	*****	*****				
DURATION OF	MEASUREMENT		O					******			
DISCHARGE	PERMIT	*****	CNTESTED		*****	*****	*****			ALL EVENTS	OCCURS
	REQUIREMENT		ONTEOTED	hours/day						ALL LVEIVIO	0000110
	SAMPLE	*****	0.0	(8A)	*****	*****	*****		0	AL / EV	ос
DISCHARGE DURATION	MEASUREMENT		0.0	hours				******		71L 7 L V	
EFFLUENT	PERMIT	*****	CNTESTED		*****	*****	*****			ALL EVENTS	OCCURS
	REQUIREMENT		ONTEGIES	hours						7122 2 7 2 1 1 1 0	0000110
	SAMPLE	*****	0	(93)	*****	*****	*****		0	AL / EV	ос
DISCHARGE EVENT	MEASUREMENT		-	occur/mon				******		712724	
OBSERVATION	PERMIT	*****	REPORT		*****	*****	*****			ALL EVENTS	OCCURS
	REQUIREMENT		EVENT TOT	occur/mon						, 122 2 7 2 1 1 1 0	0000.10
					J						

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 2002 - DISCHARGE MONITORING REPORT (DMR)

1117 (1 (0)) 2 0 2		TILL OIL (Blill)
MA0103284		C01 T
PERMIT NUMBER		DISCHARGE NUMBER
	='	

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

*** NO DISCHARGE X ***

MONITORING PERIOD										
FROM TO										
YEAR	MO	DAY	YEAR MO DAY							
2002	3	1	2002	3	31					

PARAMETER		(3 Card Only) Ql (46-53)	JANTITY OR L	.OADING	(4 Card Only) (38-45)	QUANTITY (46-53)	OR LOADING (54-61)		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(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	*****	*****	******		*****	*****	(23)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMPOSITE
NAME / TITLE PRINCIPAL EXECUTIVE OFFICER I CERTIFY UNDER PENALTY OF LAW THAT I HAVE INFORMATION SUBMITTED HEREIN; AND BASED OF INFORMATION SUBMITTED HEREIN SUBMITTED HEREI					N MY INQUIRY OF	THOSE INDIVIDU	JALS IMMEDIATEL	Coo original	form for	TELEPHONE	DATE
Michael J. Hornbrook Chief Operating Officer Michael J. Hornbrook Chief Operating Officer Michael J. Hornbrook ACCURATE AND COMPLETE. I AM AWAR FALSE INFORMATION, INCLUD					HERE ARE SIGNIF	ICANT PENALTIE	S FOR SUBMITTIN			(617)788-4359	4/12/02
Chief Operation		FALSE	IINI ORIVIA I ION, IN	CLUDING THE I	OSSIBILITY OF FI	IINE AIND IIVIFRISO	ANIVICINT.				Page 3

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

MARCH 2002 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 C03 A

PERMIT NUMBER DISCHARGE NUMBER

*** NO DISCHARGE ***

CSO 203 - MONTHLY & QUARTERLY

MINOR (SUBR E)

F - FINAL

MONITORING PERIOD										
FROM TO										
YEAR	MO	DAY	YEAR MO DAY							
2002	3	1	2002	3	31					

PARAMETER (32-37)	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)					FREQUENCY OF ANALYSIS	SAMPLE TYPE	
(62 6.7)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	*****	***	27.2	*****	31.2	(19) mg/L	0	03 / 31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	****	***	6.6	*****	7.0	(12) SU	0	03 / 31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	***	96.8	*****	124.0	(19)	0	03 / 31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	3.52	0.61	(61)	*****	*****	*****	******	0	AL / EV	RC
EFFLUENT	PERMIT REQUIREMENT	REPORT MO TOTAL	REPORT MAXIMUM	inches 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	2.6	4.8	(03)	*****	*****	*****	*****	0	99 / 99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	*****	******		CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL	SAMPLE MEASUREMENT	*****	*****	***	0.1	*****	0.6	(19)	0*	03 / 31	GR
RESIDUAL EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L mg/L		FOUR/YEAR	GRAB

*-UNDERGOING FACILITY UPGRADE

Page 1 of 3

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 2002 - DISCHARGE MONITORING REPORT (DMR) MA0103284 PERMIT NUMBER

C03 A DISCHARGE NUMBER MINOR (SUBR E) F - FINAL

CSO 203 - MONTHLY & QUARTERLY

*** NO DISCHARGE ***

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

	(3 Card Only) QUANTITY OR LOADING				(4 Card Only) QUALITY OR CONCENTRATION				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	*****	*****	*****	102	*****	210	(13)	0	03 / 31	GR
EFFLUENT	PERMIT REQUIREMENT	****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100mL #/100ML		FOUR/YEAR	GRAB
BYPASS OF TREATMENT	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	*****	*****			
BIT AGO OF 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	*****	7.0	(8A) hours	*****	*****	*****	******	0	AL / EV	OC
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	4	(93) occur/mon	*****	*****	*****	******	0	AL / EV	OC
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 2002 - DISCHARGE MONITORING REPORT (DMR)

1017 (1 (0 1) 2 0 0 2	<u> </u>	1121 0111 (511111)
MA0103284		C03 T
PERMIT NUMBER		DISCHARGE NUMBER

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

*** NO DISCHARGE

MONITORING PERIOD									
FROM TO									
YEAR	MO	DAY	YEAR MO DA'						
2002	3	1	2002	3	31				

DADAMETED		(3 Card Only) Ql	JANTITY OR L	OADING	(4 Card Only) QUANTITY OR LOADING				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)
LC50/PF STAT 24HR AC PIMPEPHALES	SAMPLE MEASUREMENT	*****	*****	*****	10	*****	*****	(23)	1	02 / 180	24
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	70 PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC DAPHNIA	SAMPLE MEASUREMENT	*****	*****	*****	> 100	*****	*****	(23)	0	02 / 180	24
EFFLUENT	PERMIT REQUIREMENT	****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINC	INFORMATION SU	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 IMMEDIATED					/	form for	TELEPHONE	DATE	
Michael J. Ho Chief Operation		ACCURATE AND C	RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTIN FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.							(617)788-4359	4/12/02

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 2002 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 C05 A
PERMIT NUMBER DISCHARGE NUMBER

MONITORING PERIOD											
	FROM		TO								
YEAR	MO	DAY	YEAR	MO	DAY						
2002	3	1	2002	3	31						

*** NO DISCHARGE ***

CSO 205 - MONTHLY & QUARTERLY

MINOR

(SUBR E)

F - FINAL

PARAMETER (32-37)		(3 Card Only) QL (46-53)	(54-61)		(38-45)	(46-53)	R CONCENTR (54-61)	_	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(62 67)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	*****	***	15.3	*****	16.0	(19)	0	02 / 31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	****	***	6.6	****	7.2	(12) SU	0	02 / 31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	****	***	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	***	86.0	*****	122.0	(19)	0	02 / 31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	3.52	0.61	(61)	*****	*****	*****	******	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	0.47	1.10	(03)	*****	*****	****	******	0	99 / 99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	*****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	****	*****	***	0.0	*****	0.0	(19)	0	02 / 31	GR
EFFLUENT *-LINDERGOING FACILITY LIPGE	PERMIT REQUIREMENT	****	*****	****	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L mg/L		FOUR/YEAR	GRAB

*-UNDERGOING FACILITY UPGRADE

Page 1 of 3

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 2002 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 PERMIT NUMBER
 REPORT (DMR)
 (SUBR E)

 C05 A
 F - FINAL

 DISCHARGE NUMBER
 CSO 205 - MONTHLY & QUARTERLY

MINOR

*** NO DISCHARGE ____ ***

	MONITORING PERIOD										
FROM TO											
YEAR	MO	DAY	YEAR	MO	DAY						
2002	3	1	2002	3	31						
	•		•	•	•						

1		(3 Card Only) Ql (46-53)	JANTITY OR L	OADING	(4 Card Only)) QUALITY O	R CONCENTR (54-61)	ATION	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	*****	46	*****	212	(13)	0	02 / 31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100mL #/100ML		FOUR/YEAR	GRAB
BYPASS OF TREATMENT	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	*****	*****			
THACOUT 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	****	8.6	(8A) hours	*****	*****	*****	*****	0	AL / EV	ОС
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	6	(93) occur/mon	*****	*****	*****	*****	0	AL / EV	OC
OBSERVATION	PERMIT REQUIREMENT	****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS

SOMERVILLE MARGINAL CSO

C05 T

DISCHARGE NUMBER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) PERMITTEE NAME / ADDRESS MARCH 2002 - DISCHARGE MONITORING REPORT (DMR) NAME MWRA MA0103284 ADDRESS CHARLESTOWN NAVY YARD PERMIT NUMBER 100 FIRST AVE BOSTON MA 02129 FACILITY **MWRA** LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

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

*** NO DISCHARGE

MONITORING PERIOD										
FROM TO										
YEAR	MO	DAY	YEAR	DAY						
2002	3	1	2002	3	31					

PARAMETER		(3 Card Only) Ql (46-53)	JANTITY OR L	.OADING	(4 Card Only)	QUANTITY (46-53)	OR LOADING		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
LC50/PF STAT 24HR AC	SAMPLE MEASUREMENT	****	*****	*****	> 100			(23)	0	01 / 180	24
PIMPEPHALES 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	CER INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIR					THOSE INDIVIDU	JALS IMMEDIATEL	Coo original	form for	TELEPHONE	DATE
Michael J. Ho Chief Operation		RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PE					S FOR SUBMITTIN	-:4		(617)788-4359	4/12/02

9-NO SAMPLING CONDUCTED THIS MONTH Page 3 of 3

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 2002 - DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

DAY

FROM

MO

3

YEAR

2002

MA0103284 C25 A
PERMIT NUMBER DISCHARGE NUMBER

YEAR

2002

TO

DAY

31

MO

MINOR (SUBR E) F - FINAL

CSO 205 - MONTHLY & QUARTERLY

X ***

***	NO	DIS	СНА	RGE

PARAMETER (32-37)		(3 Card Only) QL (46-53)	(54-61)		(38-45)	(46-53)	R CONCENTR (54-61)		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(== 5.7)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	*****	***		*****		(19) mg/L			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	***		*****		(12)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	****	6.5 MINIMUM	****	8.3 MAXIMUM	SU SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	***		****		(19)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	3.52	0.61	(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		0.0	(03) MGD	*****	*****	*****	******	0	99 / 99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd	*****	*****	*****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	***		*****		(19)			
EFFLUENT *-LINDERGOING FACILITY LIPS	PERMIT REQUIREMENT	****	*****	***	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L mg/L		FOUR/YEAR	GRAB

^{* -} 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 2002 - DISCHARGE MONITORING REPORT (DMR)

 MA0103284
 C25 A

 PERMIT NUMBER
 DISCHARGE NUMBER

MINOR (SUBR E) F - FINAL

CSO 205 - MONTHLY & QUARTERLY

*** NO DISCHARGE X ***

MONITORING PERIOD										
	FROM		TO							
YEAR	MO	DAY	YEAR	MO	DAY					
2002	3	1	2002	3	31					

(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)		(4 Card Only) QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF	SAMPLE TYPE		
\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)
SAMPLE MEASUREMENT	*****	*****			*****		(13)			
PERMIT REQUIREMENT	*****	*****	******	REPORT MO GEO	*****	REPORT MAXIMUM	#/100mL #/100ML		FOUR/YEAR	GRAB
SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	*****	*****			
PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
MEASUREMENT	*****	С	(79)	*****	*****	*****	******			
REQUIREMENT	*****	CNTESTED	hours/day	*****	*****	*****			ALL EVENTS	OCCURS
MEASUREMENT	*****	0.0	(8A) HOURS	*****	*****	*****	******	0	AL / EV	ОС
PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
SAMPLE MEASUREMENT	*****	0	(93)	*****	*****	*****	******	0	AL / EV	ОС
PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
									_	
	MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT	SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT PERMIT ******	(46-53) (54-61) AVERAGE MAXIMUM	(46-53)	(46-53) (54-61) (38-45) AVERAGE MAXIMUM UNITS MINIMUM SAMPLE	AVERAGE MAXIMUM UNITS MINIMUM AVERAGE	AVERAGE MAXIMUM UNITS MINIMUM AVERAGE MAXIMUM	AVERAGE MAXIMUM UNITS MINIMUM AVERAGE MAXIMUM UNITS	AVERAGE MAXIMUM UNITS MINIMUM AVERAGE MAXIMUM UNITS MINIMUM AVERAGE MAXIMUM UNITS MINIMUM AVERAGE MAXIMUM UNITS (62-63)	AVERAGE MAXIMUM UNITS MINIMUM AVERAGE MAXIMUM UNITS (62-63) (64-68)

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 2002 - DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

DAY

FROM

МО

YEAR

2002

MA0103284 C25 T
PERMIT NUMBER DISCHARGE NUMBER

YEAR

2002

DAY

31

TO

МО

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

MINOR

*** NO DISCHARGE X ***

PARAMETER		(3 Card Only) Ql	JANTITY OR L	OADING	(4 Card Only	QUANTITY	OR LOADING		NO. EX	FREQUENCY OF	SAMPLE TYPE
	\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	*****	*****	*****		****	*****	(23)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	*******	REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMP24
C50/PF STAT 24HR AC SAMPLE MEASUREMENT	*****	*****	*****		*****	*****	(23)				
DAPHNIA EFFLUENT	PERMIT REQUIREMENT	*****	*****	******	REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINCI OFFICE			R PENALTY OF LAV					·		TELEPHONE	DATE
Michael J. Ho Chief Operatir	RESPONSIBLE FO ACCURATE AND O	OR OBTAINING THE	E INFORMATION AWARE THAT T	N MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATEL' N, I BELIEVE THE SUBMITTED INFORMATION IS TRUE HERE ARE SIGNIFICANT PENALTIES FOR SUBMITTIN OSSIBILITY OF FINE AND IMPRISONMENT.			See original form for signature		(617)788-4359	4/16/02	

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

MARCH 2002 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 C09 A

PERMIT NUMBER DISCHARGE NUMBER

*** NO DISCHARGE ***

CSO 209 - MONTHLY & QUARTERLY

MINOR (SUBR E)

F - FINAL

	MONITORING PERIOD									
	FROM		TO							
YEAR	MO	DAY	YEAR	MO	DAY					
2002 3 1 2002 3 31										

PARAMETER (32-37)		(3 Card Only) Ql (46-53)	(54-61)		(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(62 67)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	*****	***	9	*****	9	(19)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	***	9	*****	9	(12)			
EFFLUENT PERMIT REQUIREMENT		*****	****	****	6.5 MINIMUM	*****	8.3 MAXIMUM	SU SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	***	9	*****	9	(19)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	3.52	0.61	(61)	*****	*****	*****	******	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	1.3	2.1	(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

^{* -} 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 DISCHARGE ELIMINATION SYSTEM (NPDES) MARCH 2002 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 C09 A PERMIT NUMBER

MONITORING PERIOD

YEAR

2002

DAY

FROM

МО

3

YEAR

2002

DISCHARGE NUMBER

DAY

31

TO

МО

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

*** NO DISCHARGE	

1		(3 Card Only) QI (46-53)	JANTITY OR L (54-61)	.OADING	(4 Card Only (38-45)) QUALITY O (46-53)	R CONCENTR (54-61)	ATION	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	$/\!\!/$	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	*****	9	*****	9	(13)			
EFFLUENT	PERMIT REQUIREMENT	****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100mL #/100ML		FOUR/YEAR	GRAB
BYPASS OF TREATMENT PEI	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	*****	******			
	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	*****	7.3	(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

FACILITY **MWRA**

LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) MARCH 2002 - DISCHARGE MONITORING REPORT (DMR)

1117 (1 (0 1 1 2 0 0 2)		INEL OINT (Blilly)
MA0103284		C09 T
PERMIT NUMBER		DISCHARGE NUMBER
	='	

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

*** NO DISCHARGE

MONITORING PERIOD									
	FROM		TO						
YEAR	MO	DAY	YEAR	MO	DAY				
2002 3 1 2002 3 31									

DADAMETED		(3 Card Only) Ql	JANTITY OR L	OADING.	(4 Card Only)	QUANTITY	OR LOADING		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)
LC50/PF STAT 24HR AC	SAMPLE MEASUREMENT	*****	*****	*****	9	*****	*****	(23)			
PIMPEPHALES EFFLUENT RI	PERMIT REQUIREMENT	*****	*****	******	REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC DAPHNIA	SAMPLE MEASUREMENT	*****	*****	*****	9	*****	*****	(23)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE TELEPHONE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY							TELEPHONE	DATE	
Michael J. Hornbrook Chief Operating Officer		ACCURATE AND C		AWARE THAT TI	HERE ARE SIGNIF	ICANT PENALTIE		See original signati		(617)788-4359	4/12/02
9-NO SAMPLING CONDUCTED	THIS MONTH	1						1			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 2002 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 C11 A
PERMIT NUMBER DISCHARGE NUMBER

MONITORING PERIOD									
	FROM			TO					
YEAR	MO	DAY	YEAR	MO	DAY				
2002	3	1	2002	3	31				

*** NO DISCHARGE ***

CSO 211- MONTHLY & QUARTERLY

MINOR (SUBR E)

F - FINAL

PARAMETER		(3 Card Only) Ql (46-53)	JANTITY OR L	OADING.	(4 Card Only)) QUALITY O	R CONCENTR	ATION	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
BOD, 5 - DAY	SAMPLE MEASUREMENT	****	*****	***	38.9	*****	38.9	(19)	0	01 / 31	СР
(20 DEG. C) EFFLUENT	PERMIT REQUIREMENT	****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	***	6.9	*****	6.9	(12) SU	0	01 / 31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	***	136.0	*****	136.0	(19) mg/L	0	01 / 31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	3.52	0.61	(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	2.0	3.5	(03)	*****	*****	****	******	0	99 / 99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	*****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	***	0.0	*****	0.0	(19)	0	01 / 31	GR
EFFLUENT	PERMIT REQUIREMENT	****	*****	***	0.1 AVERAGE	*****	0.25 MAX HR RT	mg/L mg/L		FOUR/YEAR	GRAB

^{* -} 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 2002 - DISCHARGE MONITORING REPORT (DMR)

MA0103284
PERMIT NUMBER

MINOR (SUBR E) F - FINAL

*** NO DISCHARGE

C11 A

DISCHARGE NUMBER

CSO 211 - MONTHLY & QUARTERLY

MONITORING PERIOD									
	FROM			TO					
YEAR	MO	DAY	YEAR	MO	DAY				
2002	3	1	2002	3	31				

		(3 Card Only) Ql	JANTITY OR L	OADING.	(4 Card Only)	QUALITY O	R CONCENTR	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	*****	*****	*****	<10	*****	<10	(13)	0	01 / 31	GR	
EFFLUENT	PERMIT REQUIREMENT	*****	*****	*********	REPORT MO GEO	*****	REPORT MAXIMUM	#/100mL #/100ML		FOUR/YEAR	GRAB	
BYPASS OF TREATMENT	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	*****	*****				
BIT AGG OF 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	*****	12.1	(8A) hours	*****	*****	*****	******	0	AL / EV	OC	
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS	
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	6	(93) occur/mon	*****	*****	*****	******	0	AL / EV	OC	
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS	

COMMERCIAL POINT CSO

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) MINOR PERMITTEE NAME / ADDRESS MARCH 2002 - DISCHARGE MONITORING REPORT (DMR) (SUBR E) NAME MWRA MA0103284 C11 T F - FINAL ADDRESS CHARLESTOWN NAVY YARD PERMIT NUMBER DISCHARGE NUMBER 100 FIRST AVE CSO 211 - MONTHLY & QUARTERLY BOSTON MA 02129 MONITORING PERIOD *** NO DISCHARGE FACILITY **MWRA** FROM TO LOCATION BOSTON MA 02129 YEAR MO DAY YEAR МО DAY ATTN: Michael Hornbrook 2002 2002 31 3

PARAMETER		(3 Card Only) Ql	JANTITY OR L	OADING.	`	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	SAMPLE MEASUREMENT	*****	*****	*****	9	*****	*****	(23)			
U CERICDAPHNIA EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC U D. PULEX	SAMPLE MEASUREMENT	*****	*****	******	9	*****	*****	(23)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE TELEPHONE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY								DATE	
Michael F. Hornbrook Chief Operating Officer		ACCURATE AND C		AWARE THAT T	HERE ARE SIGNIF	ICANT PENALTIE		See original signati		(617)788-4359	4/12/02
9-NO SAMPLING CONDUCTED T	THIS MONTH									<u> </u>	Page 3 of 3