COTTAGE FARM CSO

LAST UPDATED: NOV 15, 2002

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)
OCTOBER 2002 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 C01 A
PERMIT NUMBER DISCHARGE NUMBER

	MONITORING PERIOD								
FROM TO									
YEAR	MO	DAY	YEAR	MO	DAY				
2002	10	1	2002	10	31				

*** NO DISCHARGE ***

CSO 201- MONTHLY & QUARTERLY

MINOR (SUBR E)

F - FINAL

PARAMETER (32-37)		(3 Card Only) Ql (46-53)	JANTITY OR L (54-61)	OADING	(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				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	*****	*****	***	84.7	*****	84.7	(19) mg/L	0	01 / 31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	***	6.7	*****	6.8	(12) SU	0	01 / 31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	***	67.8	*****	67.8	(19) mg/L	0	01 / 31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	3.48	1.74	(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	12.4	12.4	(03)	*****	*****	*****	******	0	99 / 99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	*****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	***	0.0	*****	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

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)
OCTOBER 2002 - 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 DA					
2002	2002 10 1 2002 10 31							

		(3 Card Only) QUANTITY OR LOADING		(4 Card Only)	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	*****	*****	*****	3112	*****	3112	(13) #/100mL	0	01 / 31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100ML		FOUR/YEAR	GRAB
BYPASS OF TREATMENT	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	*****	*****			
BIT ASS 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	*****	5.1	(8A) hours	*****	*****	*****	******	0	AL / EV	ОС
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	1	(93) occur/mon	*****	*****	*****	******	0	AL / EV	OC
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS

COTTAGE FARM CSO

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) MINOR PERMITTEE NAME / ADDRESS OCTOBER 2002 - DISCHARGE MONITORING REPORT (DMR) (SUBR E) NAME MWRA MA0103284 C01 T F - FINAL ADDRESS CHARLESTOWN NAVY YARD PERMIT NUMBER DISCHARGE NUMBER 100 FIRST AVE CSO 201 - MONTHLY & QUARTERLY BOSTON MA 02129 *** NO DISCHARGE *** MONITORING PERIOD FACILITY MWRA FROM TO LOCATION BOSTON MA 02129 YEAR МО DAY YEAR МО DAY ATTN: Michael Hornbrook 2002 2002 10 10 31 IND EXI ERECHENCY OF SAMPLE TYPE

PARAMETER		(3 Card Only) Ql		OADING.	`	(4 Card Only) QUANTITY OR LOADING			NO. EX		SAMPLE TYPE
(32-37)		(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS		ANALYSIS	(00 -0)
LC50/PF STAT 24HR AC	SAMPLE MEASUREMENT	*****	*****	UNITS	WIINIWIOW	*****	*****	(23)	(62-63)	(64-68)	(69-70)
MYSID. BAHIA 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 PRINCI OFFICE		INFORMATION SU	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXINFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF				JALS IMMEDIATEL	/	form for	TELEPHONE	DATE
Michael J. Hornbrook Chief Operating Officer		ACCURATE AND C	RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TR ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMIT FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.						riginal form for signature (617)788-435		11/29/2002

9-NO SAMPLING CONDUCTED THIS MONTH Page 3 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)

OCTOBER 2002 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 C03 A

PERMIT NUMBER DISCHARGE NUMBER

MINOR (SUBR E) F - FINAL

CSO 203 - MONTHLY & QUARTERLY

*** NO DISCHARGE ***

MONITORING PERIOD								
FROM TO								
YEAR	MO	DAY	YEAR	DAY				
2002 10 1 2002 10 31								

DADAMETED		(3 Card Only) Ql	JANTITY OR L	OADING.	(4 Card Only)	QUALITY O	R CONCENTR	ATION	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	SAMPLE MEASUREMENT	*****	*****	***	24.4	*****	24.7	(19)	0	02 / 31	СР
(20 DEG. C) EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	***	6.5	*****	6.9	(12) SU	0	02 / 31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	***	150.1	*****	248.5	(19) mg/L	0	02 / 31	СР
EFFLUENT	PERMIT REQUIREMENT	****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	3.48	1.74	(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	16.49	25.96	(03)	*****	*****	*****	******	0	99 / 99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	*****	*****	*****			CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	****	*****	***	0.01	*****	0.06	(19)	0	02 / 31	GR
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

NIATIONIAL DOLLLITANT	DISCHARGE ELIMINATION SYSTEM (NP	DECL
INATIONAL I OLLUTANI	DISCHARGE ELIMINATION STSTEM (M	レレン)

OCTOBER 2002 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C03 A
PERMIT NUMBER	DISCHARGE NUMBER

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

*** NO DISCHARGE ***

MINOR

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

		(3 Card Only) Ql	JANTITY OR L	OADING	(4 Card Only)	QUALITY O	R CONCENTR	ATION	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	*****	*****	*****	488	*****	1177	(13)	2	02 / 31	GR
EFFLUENT	PERMIT REQUIREMENT	****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100mL #/100ML		FOUR/YEAR	GRAB
BYPASS OF TREATMENT	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	*****	******			
BIT ASS 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	*****	15.31	(8A) hours	*****	*****	*****	*****	0	AL / EV	ОС
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	2	(93) occur/mon	*****	*****	*****	******	0	AL / EV	OC
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
										·	

PRISON POINT CSO

2002

10

31

Page 3 of 3

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) MINOR PERMITTEE NAME / ADDRESS OCTOBER 2002 - DISCHARGE MONITORING REPORT (DMR) (SUBR E) NAME MWRA MA0103284 ADDRESS C03 T F - FINAL CHARLESTOWN NAVY YARD PERMIT NUMBER DISCHARGE NUMBER 100 FIRST AVE CSO 203- MONTHLY & QUARTERLY BOSTON MA 02129 MONITORING PERIOD *** NO DISCHARGE FACILITY **MWRA** FROM TO LOCATION BOSTON MA 02129 YEAR МО DAY YEAR МО DAY ATTN: Michael Hornbrook

2002

10

PARAMETER (32-37)		(3 Card Only) Ql (46-53) AVERAGE	JANTITY OR L (54-61) MAXIMUM	OADING UNITS	(4 Card Only) (38-45) MINIMUM	QUANTITY (46-53) AVERAGE	OR LOADING (54-61) MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50/PF STAT 24HR AC PIMPEPHALES	SAMPLE MEASUREMENT	****	*****	*****		*****	*****	(23)	(== ==)	(3 : 33)	(55 15)
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC	SAMPLE MEASUREMENT	****	*****	******		*****	****	(23)			
EFFLUENT	PERMIT REQUIREMENT	****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINCI OFFICE		INFORMATION SU	JBMITTED HEREIN	; AND BASED O	N MY INQUIRY OF	THOSE INDIVIDU	FAMILIAR WITH TH UALS IMMEDIATEL		form for	TELEPHONE	DATE
Michael J. Ho Chief Operatir		ACCURATE AND C		AWARE THAT T	HERE ARE SIGNIF	ICANT PENALTIE	RMATION IS TRUE ES FOR SUBMITTIN DNMENT.	-:		(617)788-4359	11/29/2002

9-NO SAMPLING CONDUCTED THIS MONTH

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)
OCTOBER 2002 - DISCHARGE MONITORING REPORT (DMR)

OCTOBER 2002 -	DISCHARGE MONTORIN	G KLFOKT (DIVIN)
MA0103284		C05 A
PERMIT NUMBER		DISCHARGE NUMBER
	='	

		MONITORIN	NG PERIOD				
FROM TO							
YEAR	MO	DAY	YEAR	DAY			
2002	10	1	2002	10	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)	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	*****	*****	***	11.2	*****	11.2	(19) mg/L	0	01 / 31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	****	*****	***	6.7	*****	6.7	(12) SU	0	01 / 31	GR
EFFLUENT	PERMIT REQUIREMENT	****	*****	***	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	***	50.0	*****	50.0	(19) mg/L	0	01 / 31	СР
EFFLUENT	PERMIT REQUIREMENT	****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	3.48	1.74	(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	4.06	6.76	(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 *LINDERGOING FACILITY LIPGR	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)
OCTORED 2002 - DISCHARGE MONITORING PEROPT (DMP)

MA0103284
PERMIT NUMBER

MINOR (SUBR E) F - FINAL

*** NO DISCHARGE

C05 A

DISCHARGE NUMBER

CSO 205 - MONTHLY & QUARTERLY

MONITORING PERIOD									
FROM TO									
YEAR	MO	DAY YEAR MO DAY							
2002	10	1	2002	10	31				

		(3 Card Only) Ql	JANTITY OR L	OADING.	(4 Card Only)	QUALITY O	R CONCENTR	ATION	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)	*****	*****	*****	******			
BTFA33 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	*****	11.93	(8A) hours	*****	*****	*****	******	0	AL / EV	ОС
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	2	(93) occur/mon	*****	*****	*****	******	0	AL / EV	ОС
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS

SOMERVILLE MARGINAL CSO

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) MINOR PERMITTEE NAME / ADDRESS OCTOBER 2002 - DISCHARGE MONITORING REPORT (DMR) (SUBR E) NAME MWRA MA0103284 C05 T F - FINAL ADDRESS CHARLESTOWN NAVY YARD PERMIT NUMBER DISCHARGE NUMBER 100 FIRST AVE CSO 205 - 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 10 2002 10 31 (3 Card Only) QUANTITY OR LOADING NO. EX FREQUENCY OF SAMPLE TYPE (4 Card Only) QUANTITY OR LOADING 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)
LC50/PF STAT 24HR AC PIMPEPHALES	SAMPLE MEASUREMENT	****	*****	*****				(23)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC	SAMPLE MEASUREMENT	*****	*****	*****		*****	*****	(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 INFORMATION SUBMITTED HEREIN; AND BASED OF INFORMATION SUBMITTED HEREIN SUBMITT				N MY INQUIRY OF	F THOSE INDIVIDI	JALS IMMEDIATEL	Y Soo original	form for	TELEPHONE	DATE	
	Michael J. Hornbrook RESPONSIBLE FOR OBTAINING THE INFORMATION, ACCURATE AND COMPLETE. I AM AWARE THAT THE FALSE INFORMATION, INCLUDING THE PO				HERE ARE SIGNIF	FICANT PENALTIE	S FOR SUBMITTIN	-:		(617)788-4359	11/29/2002

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)
OCTOBER 2002 - DISCHARGE MONITORING REPORT (DMR)

MA0103284	C25 A
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					
2002	10	1	2002	10	31					

PARAMETER		(3 Card Only) Ql		.OADING	`	,	R CONCENTR	ATION	NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)	\sim	(46-53)	(54-61)	T	(38-45)	(46-53)	(54-61)	ı		ANALYSIS	
(== 5.7)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
BOD, 5 - DAY	SAMPLE MEASUREMENT	*****	*****	***	9	*****	9	(19)			
(20 DEG. C) 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	3.48	1.74	(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	NM	NM	(03) MGD	*****	*****	*****	******	0	99 / 99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	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

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)

OCTOBER 2002 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 C25 A
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			
2002 10 1 2002 10								

		(3 Card Only) Ql	JANTITY OR L	OADING.	(4 Card Only)	QUALITY O	R CONCENTR	ATION	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	*****	*****	******	9	*****	9	(13)			
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	*****	4.6	(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	OC
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS
										·	

SOMERVILLE MARGINAL RELIEF OUTFALL NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

PERMITTEE NAME / ADDRESS
NAME MWRA
ADDRESS CHARLESTOWN NAVY YARD
100 FIRST AVE
BOSTON MA 02129
FACILITY MWRA
LOCATION BOSTON MA 02129

ATTN: Michael Hornbrook

OCTOBER 2002 - DISCHARGE MONITORING REPORT (DMR)								
MA0103284		C25 T						
PERMIT NUMBER		DISCHARGE NUMBER						
	: · · · · · · · · · · · · · · · · · · ·	•						

MONITORING PERIOD									
	FROM		TO						
YEAR	MO	DAY	YEAR MO DAY						
2002 9 1 2002 9 30									

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

MINOR (SUBR E)

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	*****	*****	*****		*****	*****	(23)			
PIMPEPHALES EFFLUENT	PERMIT REQUIREMENT	*****	*****	******	REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC DAPHNIA	SAMPLE MEASUREMENT	*****	*****	*****		*****	*****	(23)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMP24
											_
NAME / TITLE PRINC		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSI				THOSE INDIVIDU	JALS IMMEDIATEL	,	form for	TELEPHONE	DATE
Michael J. Ho Chief Operation		ACCURATE AND O	RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TR ICCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMIT FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.					See original form for		(617)788-4359	11/29/2002

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)
OCTOBER 2002 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 C09 A
PERMIT NUMBER DISCHARGE NUMBER

CSO 209 - MONTHLY & QUARTERLY

*** NO DISCHARGE ***

MINOR

(SUBR E)

F - FINAL

MONITORING PERIOD								
	FROM		ТО					
YEAR	MO	DAY	YEAR	MO	DAY			
2002 10 1 2002 10 31								

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 6.7)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
BOD, 5 - DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	*****	***	<4.04	*****	<4.04	(19) mg/L	0	01 / 31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L		FOUR/YEAR	COMPOS
PH	SAMPLE MEASUREMENT	*****	****	***	7.2	*****	7.2	(12) SU	0	01 / 31	GR
EFFLUENT	PERMIT REQUIREMENT	*****	****	***	6.5 MINIMUM	*****	8.3 MAXIMUM	SU		FOUR/YEAR	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	***	26.0	*****	26.0	(19)	0	01 / 31	СР
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	3.48	1.74	(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	1.92	2.46	(03)	*****	*****	*****	*****	0	99 / 99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	mgd mgd	****	*****	*****	******		CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL	SAMPLE MEASUREMENT	*****	*****	***	0.0	*****	0.0	(19)	0	01 / 31	GR
RESIDUAL 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)
OCTOBER 2002 - DISCHARGE MONITORING REPORT (DMR)

MA0103284
PERMIT NUMBER

MINOR (SUBR E) F - FINAL

*** NO DISCHARGE

C09 A

DISCHARGE NUMBER

CSO 209 - MONTHLY & QUARTERLY

MONITORING PERIOD								
	FROM		TO					
YEAR	MO	DAY	YEAR MO DAY					
2002	10	1	2002	10	31			

		(3 Card Only) Ql	JANTITY OR L	OADING	(4 Card Only	QUALITY O	R CONCENTR	ATION	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	*****	4.98	(8A) hours	*****	*****	*****	******	0	AL / EV	OC
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	2	(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)
OCTOBER 2002 - DISCHARGE MONITORING REPORT (DMR)

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	10	1	2002	10	31				

	(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	
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
SAMPLE MEASUREMENT	*****	*****	******		*****	*****	(23)			
PERMIT REQUIREMENT	****	*****		REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMP24
SAMPLE MEASUREMENT	*****	*****	*****		*****	*****	(23)			
PERMIT REQUIREMENT	*****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINCIPAL EXECUTIVE OFFICER		INFORMATION SUBMITTED HEREIN: AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATED					See original form for		TELEPHONE	DATE
Michael J. Hornbrook Chief Operating Officer									(617)788-4359	11/29/2002
	MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT IPAL EXECUTIVE ER Ornbrook	SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT I CERTIFY UNDER INFORMATION SU RESPONSIBLE FO ACCURATE AND O FALSE	AVERAGE MAXIMUM SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT I CERTIFY UNDER PENALTY OF LAW INFORMATION SUBMITTED HEREIN RESPONSIBLE FOR OBTAINING TH ACCURATE AND COMPLETE. I AM. FALSE INFORMATION, IN	AVERAGE MAXIMUM UNITS SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT I CERTIFY UNDER PENALTY OF LAW THAT I HAVE I INFORMATION SUBMITTED HEREIN; AND BASED OR RESPONSIBLE FOR OBTAINING THE INFORMATION ACCURATE AND COMPLETE. I AM AWARE THAT THE FALSE INFORMATION, INCLUDING THE FALSE INFORMATION.	AVERAGE MAXIMUM UNITS MINIMUM SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT MEASUREMENT MEASUREMEN	AVERAGE MAXIMUM UNITS MINIMUM AVERAGE SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF FINSE SIDDIVIDING RESPONSIBLE FOR OSTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISO	AVERAGE MAXIMUM UNITS MINIMUM AVERAGE MAXIMUM SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT PERMIT REQUIREMENT PERMIT PERMIT REQUIREMENT PERMIT REPORT DAILY MN PROBLEM NOT THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE PERMIT PROPRESSION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTION IN IST RUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTION FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.	AVERAGE MAXIMUM UNITS MINIMUM AVERAGE MAXIMUM UNITS SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT REPORT DAILY MN PERCENT PERCENT REPORT DAILY MN PERCENT *** *** *** *** *** *** ** **	AVERAGE MAXIMUM UNITS MINIMUM AVERAGE MAXIMUM UNITS (62-63) SAMPLE MEASUREMENT PERMIT REQUIREMENT DAILY MN PERCENT PERMIT REQUIREMENT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT PERMIT REQUIREMENT REPORT DAILY MN PERCENT PERMIT REQUIREMENT PERMIT REQUIREMENT REPORT DAILY MN PERCENT PERMIT REQUIREMENT REPORT DAILY MN PERCENT PERMIT REQUIREMENT REPORT DAILY MN PERCENT PERMIT REPORT DAILY MN PERCENT SAMPLE MEASUREMENT REPORT SERVICE SERVI	AVERAGE MAXIMUM UNITS (62-63) AVERAGE MAXIMUM UNITS MINIMUM AVERAGE MAXIMUM UNITS (62-63) SAMPLE MEASUREMENT PERMIT REQUIREMENT DAILY MN PERCENT SEMI / ANNUAL SAMPLE MEASUREMENT PERMIT REQUIREMENT DAILY MN PERCENT SEMI / ANNUAL REPORT DAILY MN PERC

9-NO SAMPLING CONDUCTED THIS MONTH

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

	DLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
OCTOBE	R 2002 - DISCHARGE MONITORING REPORT (DMR)

MA0103284 C11 A
PERMIT NUMBER DISCHARGE NUMBER

MINOR (SUBR E) F - FINAL

CSO 211- MONTHLY & QUARTERLY

*** NO DISCHARGE ***

MONITORING PERIOD									
	FROM			TO					
YEAR	MO	DAY	YEAR	MO	DAY				
2002	10	1	2002	10	31				

DADAMETED		(3 Card Only) Ql	JANTITY OR L	OADING.	(4 Card Only)	QUALITY O	R CONCENTR	ATION	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	SAMPLE MEASUREMENT	*****	*****	***	9	*****	9	(19)			
(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)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****	***	REPORT AVERAGE	*****	REPORT MAXIMUM	mg/L mg/L		FOUR/YEAR	COMPOS
RAINFALL	SAMPLE MEASUREMENT	3.48	1.74	(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	2.12	2.99	(03) mgd	*****	*****	*****	******	0	99 / 99	CN
PLANT EFFLUENT	PERMIT REQUIREMENT	CNTESTED MO AVG	CNTESTED DAILY MAX	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

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)
OCTOBER 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	9	1	2002	9	30				

		* ***			(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	*****	*****	*****	9	*****	9	(13)			
EFFLUENT	PERMIT REQUIREMENT	*****	*****		REPORT MO GEO	*****	REPORT MAXIMUM	#/100mL #/100ML		FOUR/YEAR	GRAB
BYPASS OF TREATMENT	SAMPLE MEASUREMENT	*****	С	(93)	*****	*****	*****	******			
BTPASS 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	****	8.07	(8A) hours	*****	*****	*****	*****	0	AL / EV	ОС
EFFLUENT	PERMIT REQUIREMENT	*****	CNTESTED	hours	*****	*****	*****			ALL EVENTS	OCCURS
DISCHARGE EVENT	SAMPLE MEASUREMENT	*****	2	(93) occur/mon	*****	*****	*****	******	0	AL / EV	ОС
OBSERVATION	PERMIT REQUIREMENT	*****	REPORT EVENT TOT	occur/mon	*****	*****	*****			ALL EVENTS	OCCURS

COMMERCIAL POINT CSO

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) MINOR PERMITTEE NAME / ADDRESS OCTOBER 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 10 2002 10 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	*****	*****	*****		****	*****	(23)			
U CERICDAPHNIA EFFLUENT	PERMIT REQUIREMENT	*****	*****	******	REPORT DAILY MN	*****	*****	% PERCENT		SEMI / ANNUAL	COMP24
LC50/PF STAT 24HR AC U D. PULEX	SAMPLE MEASUREMENT	*****	*****	*****		*****	*****	(23) %			
EFFLUENT	PERMIT REQUIREMENT	****	*****		REPORT DAILY MN	*****	*****	PERCENT		SEMI / ANNUAL	COMP24
NAME / TITLE PRINCI OFFICE		INFORMATION SU	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH T INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATE					₩.		TELEPHONE	DATE
	Michael F. Hornbrook Chief Operating Officer		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	11/29/2002

9-NO SAMPLING CONDUCTED THIS MONTH Page 3 of 3