

PERMITTEE NAME/ADDRESS
NAME ELKHART WWTP
ADDRESS 1201 S NAPPANEE ST
ELKHARTIN46516
FACILITY ELKHART WWTP
LOCATION ELKHART
ATTN: Q.sairamangara CERT.OPER.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT(DMR)	
IN0025674	035A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
06/ 01/ 2008	06/ 30/ 2008
FROM	TO

MINOR
F-FINAL EFFLUENT

FORM APPROVED
OMB No.2040-000
Approval Expires 05-31-98

Parameter			X	Quantity or Loading			Quality or Concentration				# of Ex.	Analyses per month	Sample Type
Code	Name	Mon.Location		Average	Maximum	Units	Minimum	Average	Maximum	Units			
00300	Oxygen, dissolved (DO)	1---1---0 Effluent Gross	Sample Measurement	****	****	****		****	****	mg/L			
			Permit Req.	****	****		4 DLYAVMIN	****	****			Daily	GRAB-3
00400	pH	1---1---0 Effluent Gross	Sample Measurement	****	****	****		****		SU			
			Permit Req.	****	****		6 DAILY MN	****	9 DAILY MX			Daily	GRAB
00530	Solids, total suspended	1---1---0 Effluent Gross	Sample Measurement			lb/d	****			mg/L			
			Permit Req.	7511 MO AVG	11266 MX WK AV		****	30 MO AVG	45 MX WK AV			Daily	COMP24
00610	Nitrogen, ammonia total (as N)	1---2---0 Effluent Gross	Sample Measurement			lb/d	****			mg/L			
			Permit Req.	1051 MO AVG	2478 MX WK AV		****	4.2 MO AVG	9.9 MX WK AV			Daily	COMP24
00665	Phosphorus, total (as P)	1---1---0 Effluent Gross	Sample Measurement	****	****	****	****		****	mg/L			
			Permit Req.	****	****		****	1 MO AVG	****			Daily	COMP24
00722	Cyanide, free (amen. to chlorination)	1---1---0 Effluent Gross	Sample Measurement			lb/d	****			mg/L			
			Permit Req.	Report MO AVG	Report DAILY MX		****	Report MO AVG	Report DAILY MX			Quarterly	GRAB
00722	Cyanide, free (amen. to chlorination)	G---1---0 RawSewage ICIS Parameter	Sample Measurement	****	****	****	****			mg/L			
			Permit Req.	****	****		****	Report MO AVG	Report DAILY MX			Quarterly	GRAB
01074	Nickel, total recoverable	1---1---0 Effluent Gross	Sample Measurement			lb/d	****			mg/L			
			Permit Req.	Report MO AVG	Report DAILY MX		****	Report MO AVG	Report DAILY MX			Quarterly	COMP24
01074	Nickel, total recoverable	G---1---0 RawSewage ICIS Parameter	Sample Measurement	****	****	****	****			mg/L			
			Permit Req.	****	****		****	Report MO AVG	Report DAILY MX			Quarterly	COMP24
01079	Silver total recoverable	1---1---0 Effluent Gross	Sample Measurement			lb/d	****			mg/L			
			Permit Req.	Report MO AVG	Report DAILY MX		****	Report MO AVG	Report MX WK AV			Quarterly	COMP24
01079	Silver total recoverable	G---1---0 RawSewage ICIS Parameter	Sample Measurement	****	****	****	****			mg/L			
			Permit Req.	****	****		****	Report MO AVG	Report DAILY MX			Quarterly	COMP24
01094	Zinc, total recoverable	1---1---0 Effluent Gross	Sample Measurement			lb/d	****			mg/L			
			Permit Req.	Report MO AVG	Report DAILY MX		****	Report MO AVG	Report DAILY MX			Quarterly	COMP24
01094	Zinc, total recoverable	G---1---0 RawSewage ICIS Parameter	Sample Measurement	****	****	****	****			mg/L			
			Permit Req.	****	****		****	Report MO AVG	Report DAILY MX			Quarterly	COMP24
01113	Cadmium, total recoverable	1---1---0 Effluent Gross	Sample Measurement			lb/d	****			mg/L			
			Permit Req.	Report MO AVG	Report DAILY MX		****	Report MO AVG	Report DAILY MX			Quarterly	COMP24
01113	Cadmium, total recoverable	G---1---0 RawSewage ICIS Parameter	Sample Measurement	****	****	****	****			mg/L			
			Permit Req.	****	****		****	Report MO AVG	Report DAILY MX			Quarterly	COMP24
01114	Lead, total recoverable	1---1---0 Effluent Gross	Sample Measurement			lb/d	****			mg/L			
			Permit Req.	Report MO AVG	Report DAILY MX		****	Report MO AVG	Report DAILY MX			Quarterly	COMP24
01114	Lead, total recoverable	G---1---0 RawSewage ICIS Parameter	Sample Measurement	****	****	****	****			mg/L			
			Permit Req.	****	****		****	Report MO AVG	Report DAILY MX			Quarterly	COMP24
01118	Chromium, total recoverable	1---1---0 Effluent Gross	Sample Measurement			lb/hr	****			mg/L			
			Permit Req.	Report MO AVG	Report DAILY MX		****	Report MO AVG	Report DAILY MX			Quarterly	COMP24
01118	Chromium, total recoverable	G---1---0 RawSewage ICIS Parameter	Sample Measurement	****	****	****	****			mg/L			
			Permit Req.	****	****		****	Report MO AVG	Report DAILY MX			Quarterly	COMP24
01119	Copper, total recoverable	1---1---0 Effluent Gross	Sample Measurement			lb/d	****			mg/L			
			Permit Req.	Report MO AVG	Report DAILY MX		****	Report MO AVG	Report DAILY MX			Quarterly	COMP24

01119	Copper, total recoverable	G---1---0 RawSewage ICIS Parameter	Sample Measurement	****	****	****	****			mg/L			Quarterly	COMP24
			Permit Req.	****	****		****	Report MO AVG	Report DAILY MX					
50050	Flow, in conduit or thru treatment plant	1---1---0 Effluent Gross	Sample Measurement			Mgal/d	****	****	****	*****			Daily	TOTALZ
			Permit Req.	Report MO AVG	Report MX WK AV		****	****	****					
50060	Chlorine, total residual	1---2---0 Effluent Gross	Sample Measurement			lb/d	****			mg/L			Daily	GRAB
			Permit Req.	5 MO AVG	15 DAILY MX		****	.02 MO AVG	.06 DAILY MX					
51041	E. coli, colony forming units (CFU)	1---2---0 Effluent Gross	Sample Measurement	****	****	****	****			CFU/100mL			Daily	GRAB
			Permit Req.	****	****		****	125 MO GEO	235 DAILY MX					
51484	Number of Events	Y---1---0	Sample Measurement	****		#	****	****		# exceed			blank	GRAB
			Permit Req.	****	Report MAXIMUM		****	****	Report DAILY MX					
71901	Mercury, total recoverable	1---1---0 Effluent Gross	Sample Measurement			lb/d	****			ng/L			Six Per Year	GRAB
			Permit Req.	.02 MO AVG	.05 DAILY MX		****	120 MO AVG	280 DAILY MX					
71901	Mercury, total recoverable	G---1---0 RawSewage ICIS Parameter	Sample Measurement	****	****	****	****	****		ng/L			Six Per Year	GRAB
			Permit Req.	****	****		****	****	Report DAILY MX					
80082	BOD, carbonaceous, 05 day, 20 C	1---1---0 Effluent Gross	Sample Measurement			lb/d	****			mg/L			Daily	COMP24
			Permit Req.	6259 MO AVG	10014 MX WK AV		****	25 MO AVG	40 MX WK AV					
81012	Phosphorus, total percent removal	K---1---0	Sample Measurement	****	****	****		****	****	%			Daily	CALCTD
			Permit Req.	****	****		80 MO AV MN	****	****					
82220	Flow, total	1---1---0 Effluent Gross	Sample Measurement	****	0	Mgal/mo	****	****	****	*****			Monthly	RCOTOT
			Permit Req.	****	Report MO TOTAL		****	****	****					

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	Dcfyn3i8EEFrgjxZYJciFKSVnz1fzgZosTBgnZHUr7F3qh3UHmC6NFF3Og/fQoV	TELEPHONE	DATE
Steve Newman Manager	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(317)-657-4488	Sep/24/2008 12:09:21

Demo Version: www.html-to-pdf.net - Demo Version:

COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS (Reference all attachments here)

When Analytical results are below detection limit, 50% of its value used in computing the data reported, as per Lonnie Brumfield during NPDES workshop held on April 26, 1990.

Signatory Attestation

I certify under penalty of law that I have personally examined and am familiar with the information I submitted in:

1. this document

2. all attached documents and

3. all data associated with this document submission.

Based on my inquiry of those individuals immediately responsible for obtaining the information associated with this submission, I believe that the submitted information and all data associated with the submission is true, accurate, and complete.

I further certify that I:

1. have the legal authority to submit this document and all attached documents on behalf of ELKHART WWTP in accordance with appropriate reporting requirements

2. have not violated any term in my Indiana Department of Environmental Management Electronic Signature Agreement

3. fully understand the proper use of my signatory credential

4. am the owner of the signatory credential used to electronically sign this document and all attached documents in this submission.

5. am without any reason to believe that the confidentiality of my signatory credential has been compromised now or at any time prior to this submission and that the use of my signatory credential constitutes an electronic signature equivalent to my written signature.

I understand that this attestation of fact pertains to the implementation, oversight, and enforcement of a federal environmental program and must be true to the best of my knowledge.

☒ I have read and understand the above certifications.

☒ I have had the opportunity to review all pertinent documents and data associated with this submission.

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Submission Source	eDMR
Submission Type	DMR
Submission Document Type	XML
Submission Timestamp	Sep/24/2008 12:09:21
Submitter Login	snewman
Submitter Name	Steve Newman
IP Address of Submitting Computer	10.6.66.7
Secret Question	First child's middle name?
Answer	X5mrA/3+4lqJHVLvfdETmMMInaEOZrsqdc2YHP+mJ8A5wyWNMqbKn4EUyt+ZaocK
Credential	Dcfyn3i8EEFrgjxZYJciFKSVnz1fzgZosTBgnZHU7F3qh3UHmC6NFF3Og/fQoV

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