

WASTEWATER FACILITY OPERATION REPORT FOR THE MONTH OF _____, 20____.

SPDES PERMIT NO.		FACILITY NAME				FACILITY OWNER				FACILITY LOCATION							
NY-																	
Day	Date	Daily Precip In/day	VOLUME OF WASTEWATER TREATED			TEMPERATURE (C°/F°)		pH (S.U.)				SETTLABLE SOLIDS (mg/l)		B.O.D. ₅ (mg/l)		SUSPENDED SOLIDS (mg/l)	
			Inst. Max MGD	Daily Ave. MGD	Inst. Min. MGD	Influent (2)	Effluent (2)	Influent Minimum	Influent Maximum	Effluent Minimum	Effluent Maximum	Influent Maximum	Effluent Maximum	Influent Type	Effluent Type	Influent Type	Effluent Type
	1																
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		Total Precip	Monthly Average		Monthly Average Influent Effluent		Min Influent	Max Influent	Min Effluent	Max Effluent	Monthly Maximum	Monthly Maximum	30 day arithmetic mean (1) Inf.(mg/l) Eff.(mg/l) %Rem.		30 day arithmetic mean (1) Inf.(mg/l) Eff.(mg/l) %Rem.		
											30 Day Average Quantity Loading (1)		lbs/day		lbs/day		

(1) Refer to February 2002 edition of *DMR Manual for Completing the Discharge Monitoring Report for the State Pollutant Discharge Elimination System (SPDES)* for procedures to calculate loadings, arithmetic mean, geometric mean, maximum, minimum, percent removal, etc.

(2) If temperature is measured more than once a day, report the average for day.

(3) List parameter names in these fields as necessary for multiple outfalls and additional paramters. Make additional sheets if necessary.

NOTE: Refer to current SPDES permit for specific monitoring requirements. Sample type for temperature, pH and settleable solids is grab.

FACILITY MAILING ADDRESS (Street, City, State, Zip Code)				TELEPHONE NUMBER () -		CHIEF OPERATOR'S NAME		CERTIFICATION GRADE	
Day	Date	TOTAL PHOSPHORUS(mg/l)		CHLORINE RESIDUAL		FECAL COLIFORM		REMARKS Enter any other comments, observations, operating problems, equipment failure, etc.	
		Influent Type	Effluent Type	Effluent mg/l Minimum Maximum		Effluent MF or MPN/100 ml			
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		30 day arithmetic mean (1) Influent(mg/l) Effluent(mg/l)		Monthly Minimum (1) Maximum (1)		30 day Geometric Mean (1)			
		lbs/day							

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NOTE: Refer to current SPDES permit for specific monitoring requirements. Sample type for chlorine residual and fecal coliform is grab.

										FIXED MEDIA PROCESS CONTROL		ACTIVATED SLUDGE PROCESS CONTROL				
Day	Date	Sample Type:		Sample Type:		Sample Type:		Sample Type:		Media Effluent Recirculation Rate	Settleable Solids	Mixed Liquor S.S. (MLSS)	Settleable Sludge Volume (SSV) ml/l		Return Act. Sludge (RAS)	Waste Act. Sludge (WAS)
		Influent	Effluent	Influent	Effluent	Influent	Effluent	Influent	Effluent	M.G.D.	ml/l	mg/l	5 Minutes	30 Minutes	M.G.D.	lbs/day
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	31															
30 day arithmetic mean (1)																
30 day Ave. Quantity Loading (1)		lbs/day		lbs/day		lbs/day		lbs/day								

(1) Refer to February 2002 edition of *DMR Manual for Completing the Discharge Monitoring Report for the State Pollutant Discharge Elimination System (SPDES)* for procedures to calculate loadings, arithmetic mean, geometric mean, maximum, minimum, percent removal, etc.

