Oregon

ENVIRONMENTAL QUALITY COMMISSION

Jan. 26, 2011

ORIGINAL SENT BY REGULAR U.S. MAIL WITH ONE COPY BY FAX

Magar E. Magar
14102 NE 40th
Vancouver, WA 98682
Fax number: 360-314-4781

Re: Motion regarding exhibits R4 and R5
OAH Case No. 901410
DEQ Case WQ/D-NWR-09-115

Dear Mr. Magar,

On January 25, the Oregon Environmental Quality Commission received your fax and request to include exhibits R4 and R5 from the administrative hearing in the record presented to the commission for its contested case hearing. These exhibits have been included in the full record that will be presented to the commission, so we consider your request to be satisfied by this prior inclusion, and, thus, the commission will take no action on your Jan. 25, 2011, letter.

Your contested case hearing is scheduled for **9 a.m. on Friday, Feb. 18, 2011**, at the next regular meeting of the Oregon Environmental Quality Commission. The meeting will be at the **DEQ's headquarters, in room EQC-A on the 10th floor at 811 SW 6th Avenue in Portland**. I will send you a copy of the contested case materials, including the staff report and attachments, no later than Feb. 3, 2011, two weeks prior to the hearing.

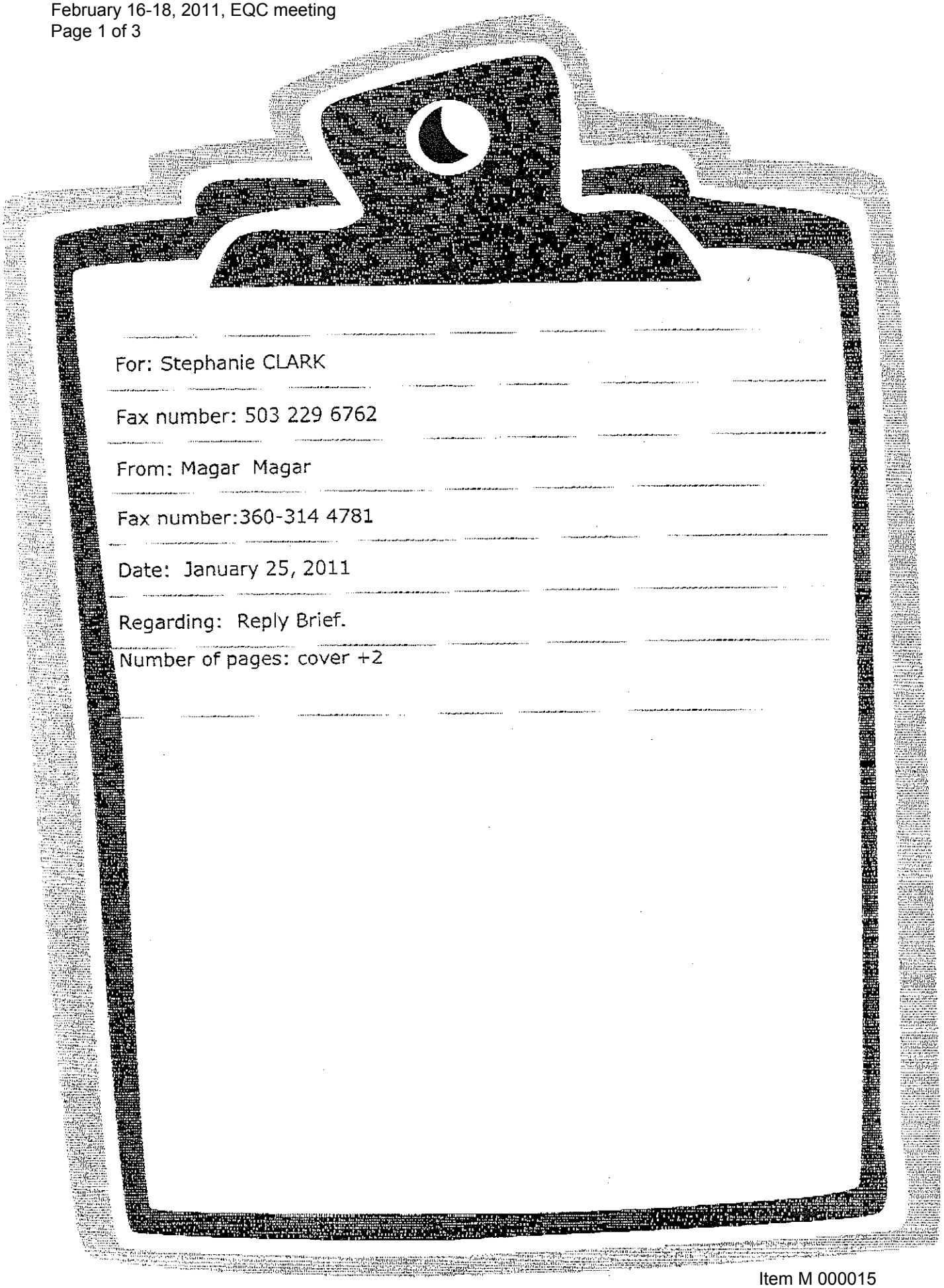
If you have any further questions about this process, please call me at 503-229-5301, or contact me by fax at 503-229-6762.

Sincerely,

Stephanie Clark
Assistant to the Oregon Environmental Quality Commission

Cc: BY HAND DELIVERY: Bryan Smith, DEQ

811 SW Sixth Avenue
Portland, OR 97204-1390
(503) 229-5696



For: Stephanie CLARK

Fax number: 503 229 6762

From: Magar Magar

Fax number:360-314 4781

Date: January 25, 2011

Regarding: Reply Brief.

Number of pages: cover +2

Magar E Magar
Pro se
14102 NE 40th. Street
Vancouver Washington 98682

Tel 360-314 4444
Cell 503 929 1094
Fax 360 314 4781

Before The Environmental Quality Commission of
The State of Oregon.

| | |
|---|---|
| In Re Magar E. Magar<br><br>Respondent. | Case No.WQD-NWR-09-118<br><br>Request to present additional evidence.<br>OAR 340-11-0575 (5) |

Pursuant to OAR 340-11-0575 (5) Additional Evidence is required because the Administrative Law Judge simply disregard the evidence that was before her contrary to OAR 137- 003- 0600(8) which provides that Exhibits shall be marked and **maintained** by the administrative law judge as part of the record of the proceedings. Strictly speaking this is not additional evidence. It is evidence that the Administrative Law Judge deliberately failed to maintain and completely disregarded. This willful disregard I believe permitted the administrative Law Judge to say with respect to first four water quality violations which required the collection[1] of data required by the permit that the data was not collected and hence the violations occurred. The data are contain in Respondent original Exhibits R4 and R5 which is kept at the Northwest regional Office.

They should be easily obtained from that office by contacting Lyle Christensen or the custodian of the record.

[1] OAR 340-012-0055(1)(o) provides: (o) Failing to collect monitoring data required in Schedule B of the permit.

This motion was served on Bryan Smith by faxing to 503 229-6124 and was faxed to the Directors Office to 503 229-6762

Dated this January 25, 2011

Magar E. Magar
Respondent.

Oregon

ENVIRONMENTAL
QUALITY
COMMISSION

Dec. 15, 2010

ORIGINAL SENT BY REGULAR U.S. MAIL WITH ONE COPY BY FAX

Magar E. Magar
14102 NE 40th
Vancouver, WA 98682
Fax number: 360-314-4781

Re: Reply brief received and date for commission hearing
OAH Case No. 901410
DEQ Case WQ/D-NWR-09-115

Dear Mr. Magar,

On December 7, the Oregon Environmental Quality Commission received your reply brief for the contested case noted above. The deadline for the reply brief was Monday, December 6; however, I became aware of a fax you sent to an incorrect fax number requesting a one-day extension. Neither the commission nor director saw or approved your requested extension, but you did submit your reply brief within the requested one-day extension period. For this reason, and in consultation with DEQ's Office of Compliance and Enforcement and reference to the Oregon Administrative Rules for contested cases, the commission will accept your reply brief submitted Dec. 7, 2010.

The reply brief was the last filing in this matter, and it has been tentatively scheduled for 9 a.m. on Friday, Feb. 18, 2011, at the next regular meeting of the Oregon Environmental Quality Commission. The meeting location is not yet final, but is likely to be at the DEQ's headquarters in downtown Portland. I will confirm the date, time and location of the hearing at a later date and in writing. I will send you a copy of the contested case materials, including the staff report and attachments, no later than Feb. 3, 2011, two weeks prior to the hearing.

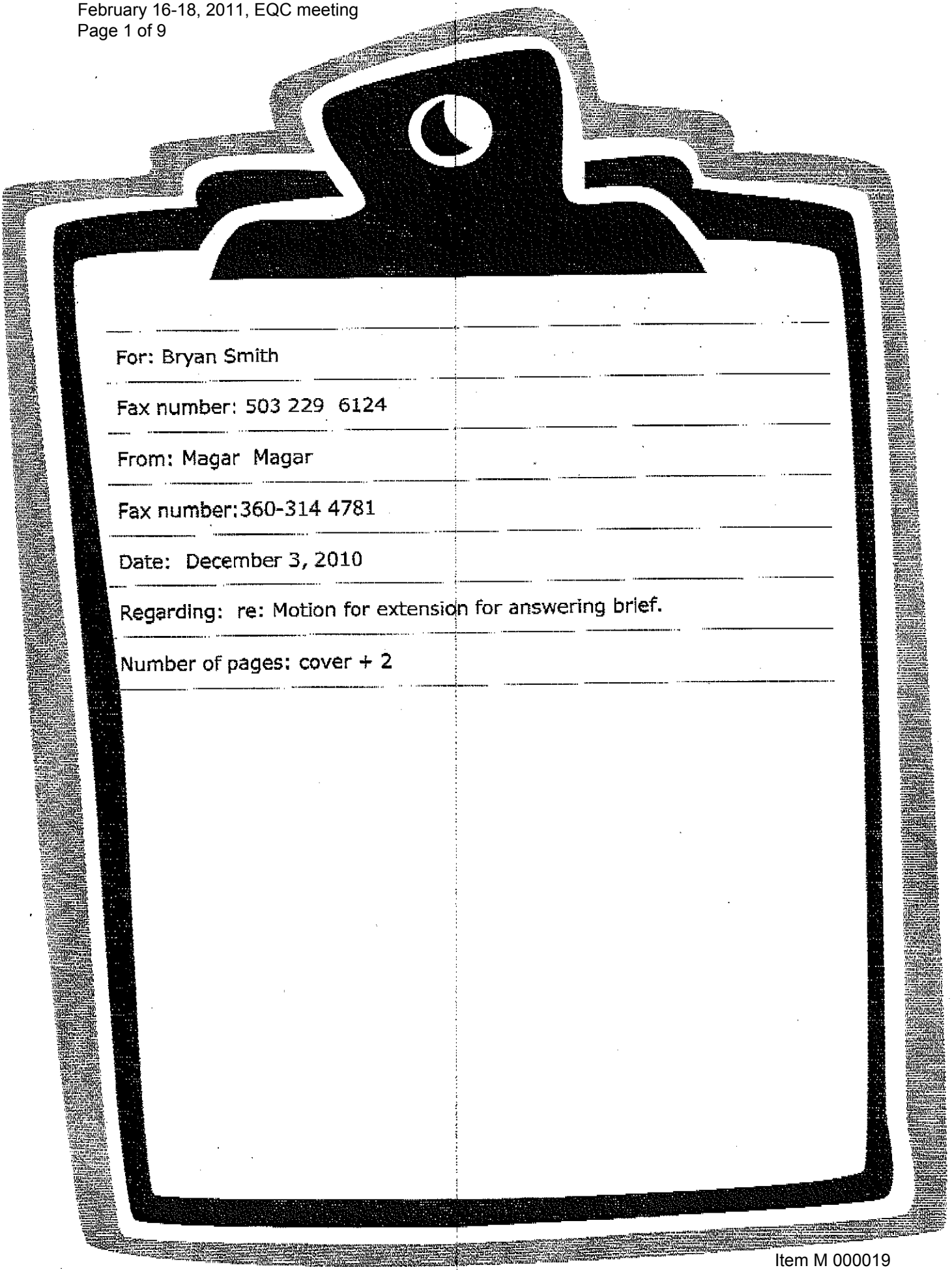
If you have any further questions about this process, please call me at 503-229-5301, or contact me by fax at 503-229-6762.

Sincerely,

Stephanie Clark
Assistant to the Oregon Environmental Quality Commission

Cc: BY HAND DELIVERY: Bryan Smith, DEQ

811 SW Sixth Avenue
Portland, OR 97204-1390
(503) 229-5696



For: Bryan Smith

Fax number: 503 229 6124

From: Magar Magar

Fax number:360-314 4781

Date: December 3, 2010

Regarding: re: Motion for extension for answering brief.

Number of pages: cover + 2

Magar E. Magar
Pro Se.
14102 NE 40th St.
Vancouver, WA 98682
Phone # 360 314 4444
Fax # 360 314 4781
Cell # 503 929 1094
E: Mail: calsport@msn.com

Before the Department of Environmental Quality Commission
Of the State of Oregon

In the Matter of Magar E. Magar,

Respondent

Case No.: No. 90141U
**Reply Brief.**

The DEQ in its answering brief states just about everything in conclusion form. DEQ does not set forth the law and apply the law to the facts which permit it to state its conclusions

**Point A.**

The first point, point A. p. 2 of Answering brief raised by DEQ is that Respondents exhibits R4 and R5 were properly excluded. That is a conclusion without discussing the law and the facts. To discuss the law one has to turn to ORS 183.450 as to what is acceptable evidence in a contested case. The exhibits offered by respondent which contained the bulk of the data that were be collected and calculated by the permit. They are obviously relevant and are on point. It is true that they were amended exhibits but nothing in the rules prohibits amendments to DMR as is clear from respondent R3 which is an admission in response to a request for admission submitted by respondent to the Department; .Admission 1) by DEQ states that there is no administrative rule in chapter 340 forbidding amendments to discharge monitor reports.

DEQ asserts that there is no dispute that the DMR in their exhibit A were copies of the DMR. But they were not the final form of the DMRs. The final forms are the amended forms that are now in the permanent records of the DEQ.

DEQ asserts that Respondent has not shown he has done the testing to support the corrections. That is dead wrong. . DEQ exhibit A8 p.4 and Respondent R. 11 shows the numbers collected and it is those numbers that form the basis of the computations that ultimately went into Respondents exhibits R4 and R5. This is well known to Bryan Smith and it is disingenuous to argue otherwise.

**Point B p. 2 of** answering brief.

The next argument advanced by DEQ is that the ALJ considered the appropriate statutes, rules and permit conditions.That again is a conclusion without analysis. Further is not true. The ALJ did not consider the violation as set forth in the notice of violations, which refer to OAR 340-012-0055(1) (o) which rule states Failing to **collect** (emphasis supplied) monitoring data required in Schedule B of the permit. There was no failure to collect. Rather the ALJ found a different violation not mentioned in the notice of violation. The ALJ found an untimely submission of monitoring reports. That is not considering the appropriate rules. If untimely submission was the relevant rule it should have been stated in the notice. The ALJ was considering different rules of which respondent did not have notice. The problem here is the ALJ rationale on p. 7 of the proposed order stating respondents argument are unpersuasive, exhibits a complete misunderstanding of the administrative scheme for violations as set forth in the rule OAR 340-012-0055. The notice of violation repeatedly cites the administrative rules that were violated [1]

[1] It is those violation that Respondent has notice of and it is those violations that respondent is invited to answer not the violations that ALJ deems important.

but the ALJ does not, as she is required to do deal with the specific rules set forth in the notice[2]. ALJ bases the entire argument of her findings on the fact that complete monitoring reports were not submitted by the 15th of the month. (Proposed order p.7 attached and underlined. This failure the ALJ states violated the conditions of Respondent permit and all penalties follow.

Next DEQ asserts that they and the ALJ properly classified violations one and two. They did not do so. These are violations are according to the administrative rule cited in the notice for failure collect data .But DEQ knows well knows Respondent collected all the necessary data .at the time it was supposed to be collected. This is shown by both Respondent t exhibit R.11 and DEQ exhibit A.8 p 4. The amended exhibits show the computations. If amendments were forbidden it would be another matter. But they are not forbidden. There is one thing that respondent wants to emphasize and that is the BOD measurements and the TSS measurement that went into the amended DMRs must be data taken at the time when they are supposed to be taken and not some other time. That is what respondent did. The fact that

[2] The specific rule cited in the notice is OAR 340-012-0055(1) (o) This rule is cited four times in the notice of violation under the heading III Conclusions on p.3 of the notice in paragraphs 1, 2, 3 and 4 of that section.

7. Respondent violated ORS 468B.025 by failing to properly operate and maintain the Facility's systems of treatment and control, specifically the Facility's flow meter, as required by Schedule F, Section B, Condition 1 of the Permit.

8. A civil penalty in the amount of $18,797 is appropriate.

## OPINION

DEQ bears the burden of proving its allegations by a preponderance of the evidence. ORS 183.450(2) and (5); *Reguero v. Teachers Standards and Practices Commission*, 312 Or 402, 418 (1991) (burden is on Commission in disciplinary action); *Cook v. Employment Div.*, 47 Or App 437 (1980) (in the absence of legislation adopting a different standard, the standard of proof in administrative hearings is preponderance of the evidence). Proof by a preponderance of the evidence means that the fact finder is convinced that the facts asserted are more likely true than false. *Riley Hill General Contractor v. Tandy Corp.*, 303 Or 390, 402 (1987).

Respondent contends that he did not fail to collect the monitoring data required by the Permit. Respondent argues that he did in fact collect the data, but failed to include the measurements in the DMRs submitted to DEQ. Respondent further contends that nothing in DEQ's statutes or rules prohibit him from amending DMRs after they have been submitted. Respondent argues that he amended many of the DMRs to include the missing BOD measurements (and other missing measurements) after submitting the initial DMRs to DEQ.

Respondent's arguments are unpersuasive. The evidence establishes that Respondent submitted incomplete DMRs. That Respondent may have amended the Facility's DMRs after they were submitted does not absolve him from meeting the Permit conditions. The Permit conditions are clear. The conditions require Respondent to follow specific reporting procedures, including submitting monitoring reports for each calendar month on the 15th of the following month with each system classification required in the Permit. Therefore, DEQ established that Respondent violated conditions of the Permit, and that civil penalties should be imposed for those violations.

Pursuant to OAR 340-012-0026, one of DEQ's enforcement goals is to protect the public health and the environment. Under OAR 340-012-0026(5), the department assesses civil penalties based on the class of violation, the magnitude of violation, the application of the penalty matrices and aggravating and mitigating factors, and the economic benefit realized by the Respondent. DEQ established Respondent violated multiple requirements of his NPDES Permit.

### Applicable statutes and rules

Each violation is addressed, in turn, below, and the penalty calculations are based on the following statutes and rules.

the data did not appear on the DMR when submitted does not mean the data were not timely collected.

Now going back to what was actually cited in the notice. Because of the manner in which the ALJ wrote the proposed order there is no point in addressing exceptions to the corrected proposed order. The exceptions are addressed to the notice and the evidence in the case. The notice of violation wrongly cites the rules in paragraphs 1 and 2 in the conclusion section by stating that respondent violated OAR 340-012-0055 (1) (o) by failing to perform monthly effluent mass calculations. But OAR 340-012-0055 (1) (o) says nothing about performing calculations. OAR 340-012-0055 (1) (o) says failure to collect monitoring data. This point is raised at this time because there is no water quality violation classified as failure to calculate as a violation. Again the notice refers to OAR 340-012- 0055 (1)(o). It is true the permit requires the calculations and they in fact were made and inserted by amendment in the relevant exhibits see R. 4 and R.5. But the fact that there is no rule that assigns a class for failure to calculate poses a major problem of classification for the agency. The problem is this; in order to calculate a penalty one must first classify the violation and then determine its magnitude. The relevant rule is OAR **340-012-0045**

**Point C. says that the ALJ properly classified violations one and two.** That is not correct violations one and two are violations for failure to collect. The evidence is abundantly clear the data was collected see R. 11 and A. 8 p.4 and with the amended DMR's R.4 and R.5 the computations were also made.

**D. Respondent Committed Violation 7 by failing to maintain a functional flow meter.** A flow meter measures flow. That is volume of water per some time interval. To begin with the average flow of this facility is well known R. 6 p.2 which says during dry weather the flow is .006 MGD or 6,000 gallons. Next during all relevant times there is a turbo meter measuring the flow every day. .Records of the readings of that meter are found in the DMR's Further according to R.17 an exhibit put out by the DEQ to guide permit writer. In footnote 1 of that exhibit, it says total flow must be representative of flows RECEIVED, TREATED AND DISCHARGED AND MAY BE **INFLUENT**, EFFLUENT OR BOTH. In addition to the flow measured by the turbo flow meter Respondent provided the flow as measured by the consumption of the residents which is a measure of influent. Using all these numbers Respondent computed the mass calculations as required by the permit. As stated and now reiterated the only reason to measure flow is to provide the mass calculations as required by the permit. **RESPONDENT WISHES TO SHOW THAT AT ALL MATERIAL TIMES WHAT HIS SEWAGE TREATMENT PLANT PUT OUT IN THE ENVIRONMENT IS WELL BELOW THE MAXIMUM CONTAMINANT LEVEL PERMITTED BY THE PERMIT. THAT RESPONDENT HAS SHOWN. THAT IS THE ESSENTIAL THING AND WHAT OUGHT TO BE OF MOST CONCERN TO THE COMMISION OR AT LEAST THE ENGINEER MEMBERS OF THE COMMISION WHO ARE IN A POSITION TO APPRECIATE THE USEFULNESS OF ESTIMATES.**

**E. The ALJ properly assessed the economic benefits.** Respondent produced evidence that he has expended the funds to purchase a new magmeter and totalizer. R. 15, $1,009 for the meter and later $416 for the totalizer. DEQ says the ALJ made no findings on that issue. But that ALJ is either deliberately or out of sheer incompetence chose to ignore the evidence. This ALJ

constantly and continuously ignored the evidence, misapplied the law and the administrative rules.

**F. The magnitude of the violations were properly assessed as moderate.** This is incorrect. In fact the violations were minor because they only had a deminimus adverse effect on human health or the environment. OAR 340-12 -0130 provides (4) The magnitude of the violation is minor if the department finds that the violation had no more than a de minimis adverse impact on human health or the environment, and posed no more than a de minimis threat to human health or other environmental receptors. In making this finding, the department will consider all reasonably available information including, but not limited to: the degree of deviation from applicable statutes or commission and department rules, standards, permits or orders; the extent of actual or threatened effects of the violation; the concentration, volume, or toxicity of the materials involved; and the duration of the violation. In making this finding, the department may consider any single factor to be conclusive.

To go from minor to moderate the department has to show an adverse impact on human health or the environment. The Department has not pointed to any instance that Respondents violations impacted human health or the environment. The Department cannot just make statements without giving specific proof. Who got the flu or had a stomach ache as a result of respondent's action. How much pathogenic bacteria were discharged into the environment or how turbid was the sewage discharged and so on,

Since no person became ill as a result of Respondent's activities and since there was no demonstrable harm to the environment Respondent has met his difficult burden. This is the

burden of proving a negative which in this case no one person became sick and there was no harm to the environment.

Submitted by Magar E. Magar Respondent by fax to Dick Pedersen Director of DEQ by faxing same on December 7, 2010 to 503 229 6762 (the Director's Office). Also served on Bryan Smith by fax to 503 229 6124.

Magar E. Magar
Respondent.

For: Director Pedersen

Fax number: 503 229 6762

From: Magar Magar

Fax number:360-314 4781

Date: December 3, 2010

Regarding: Extension of time for answering brief.

Number of pages: cover + 2

RECEIVED
DEC 03 2010
OFFICE OF THE DIRECTOR
DEPARTMENT OF ENVIRONMENTAL QUALITY

Magar E. Magar
Pro Se.
14102 NE 40th St.
Vancouver, WA 98682
Phone # 360 314 4444
Fax # 360 314 4781
Cell # 503 929 1094
E: Mail: calsport@msn.com

Before the Department of Environmental Quality Commission
Of the State of Oregon

In the Matter of Magar E. Magar,
Respondent

Case No.: No. 901410
**Motion for Extension of Time**

Magar E. Magar Respondent moves the commission to grant until the end of business on December 7, 2010. At present the answering brief is due December 5, 2010m which is a Sunday so in effect the brief is due on December 6, 2010. This request is only a one day extension until December 7, 2010. The reason for the extension is respondent needs to some more research on the points raised by Bryan Smith. . In addition Respondent has an off and on infection of pneumonia since his vocal cord operation on October 28, 2010 which has been acting up especially the last 4 days. days

Submitted by Magar E. Magar Respondent by fax to Dick Pedersen Director of DEQ by faxing same on December 3, 2010 to 503 229 6762 (the Director's Office) .

Also on December 3, 2010 this motion was served on Bryan Smith by fax to 503 229 6124.

---.



RECEIVED
DEC 03 2010
DEPARTMENT OF ENVIRONMENTAL QUALITY

Magar E. Magar
Respondent.

2 Motion for extension of time

Oregon

ENVIRONMENTAL
QUALITY
COMMISSION

Nov. 23, 2010

BY REGULAR U.S. MAIL WITH ONE COPY BY FAX

Magar E. Magar
14102 NE 40th
Vancouver, WA 98682
Fax number: 360-314-4781

Re: DEQ's answering brief
OAH Case No. 901410
DEQ Case WQ/D-NWR-09-115

Dear Mr. Magar,

On November 15, the Oregon Environmental Quality Commission received DEQ's answering brief in the above-referenced case. You have 20 days from the date of that brief to file a reply brief. December 5 is 20 days from the date of DEQ's filing and is a Sunday, so you have until Monday, December 6. The reply brief is not required and has no bearing on the contested case process. Once all briefs have been filed, this case will be set for commission consideration at a regular EQC meeting.

If you have any questions about this process, please call me at 503-229-5301 or by fax at 503-229-6762.

Sincerely,

Stephanie Clark
Assistant to the Oregon Environmental Quality Commission

Cc: By hand delivery: Bryan Smith, DEQ

NOV 24 2010

811 SW Sixth Avenue
Portland, OR 97204-1390
(503) 229-5696

BEFORE THE ENVIRONMENTAL QUALITY COMMISSION

OF THE STATE OF OREGON

| | | |
|---|---|---|
| IN THE MATTER OF:<br>MAGAR EDWARD MAGAR, | ) | DEPARTMENT'S ANSWERING BRIEF<br>No. WQ/D-NWR-09-118 |
| Respondent. | ) | COLUMBIA COUNTY |

The Department of Environmental Quality (Department) submits this Answering Brief to the Environmental Quality Commission (Commission) for its consideration in the matter of Magar Edward Magar, Case No. WQ/D-NWR-09-118.

## I. CASE HISTORY

1. On August 18, 2009, the Department assessed Respondent a civil penalty of $18,797 for (1) failing to perform required monthly effluent mass amount Biochemical Oxygen Demand ($BOD_5$) calculation and reporting; (2) failing to perform required monthly effluent mass amount Total Suspended Solids (TSS) calculation and reporting; (3) failing to perform the required influent monitoring data for pH at a minimum frequency of at least two times per week; (4) failing to report the required monthly effluent monitoring and sampling for bacteria; (5) discharging treated effluent from its wastewater treatment system that was not within the range of 6.0 to 9.0 pH; (6) failing to include operator certification information including name, certificate classification and grade level of each principal operator of the Facility's wastewater treatment system on discharge monitoring reports; and (7) failing to properly operate and maintain the Facility's systems of treatment and control (the Facility's flow meter).

2. On October 6, 2009, Respondent appealed and on June 22, 2010, a contested case hearing was held.

3. On August 6, 2010, the Administrative Law Judge issued a Corrected Proposed and Final Order (Proposed Order). The ALJ upheld all the violations enumerated in Paragraph 1 and also upheld the civil penalty of $18,797.

4. On September 2, 2010, Respondent appealed the Proposed Order.

5. On September 28, 2010, Respondent submitted his Exceptions and Brief to the Commission for review of the Proposed Order.

## II. ARGUMENTS

### A. *Exhibits R4 and R5 were properly excluded.*

Respondent argues that the ALJ erred in refusing to admit Exhibits R4 and R5. Respondent characterizes these two exhibits as "the original records DMR (Daily Monitoring Reports) permanently kept by the DEQ."[1] Some of the documents were the DMRs at issue, but the DMRs in Exhibits R4 and R5 were marred with later-made markings and numbers that Respondent contends were intended as later corrections. There was no dispute that the DMRs in admitted Exhibit A2 were copies of the DMRs that Respondent submitted which did not contain the markings when submitted at the time they were required to be submitted, and Respondent did not introduce any evidence showing that he had done the testing needed to support any corrections to data as marked on Exhibits R4 and R5. For these reasons, the Department believed there was no foundation for Exhibits R4 and R5 and objected based on relevance. The ALJ correctly sustained the Department's relevancy objection to Exhibits R4 and R5.[2]

### B. *The ALJ considered the appropriate statutes, rules and permit conditions.*

Respondent argues, in essence, that the ALJ did not adhere to and address the violations that are contained in the Notice, and that somehow this alleged defect deprived him of due process.[3] The ALJ's Proposed Order properly cited, interpreted and applied the *same* statutes, rules, and permit conditions cited in the Department's Notice, therefore Respondent is unable to argue that he was not properly notified of which statutes, rules or permit conditions he was alleged to have violated.

### C. *The Department and the ALJ properly classified violations one and two.*

Respondent argues that the Department's Notice "wrongly cites the rules in paragraphs 1 and 2 in the conclusion section of the notice by stating that Respondent violated OAR 340-012-

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[1] Respondent's Exceptions and Brief, page 1.
[2] Proposed and Final Order, page 2.
[3] Respondent's Exceptions and Brief, page 2.

0055(1)(o)."[4] Respondent seems to be arguing that violations one and two – failures to perform monthly effluent mass amount calculations – cannot be classified at OAR 340-012-0055(1)(o) which applies to "Failing to collect monitoring data required in Schedule B of the permit."

Regarding violation one, the ALJ found that "the evidence establishes that during each month for the period April 2008 through June 2009, Respondent submitted reports to DEQ that did not contain $BOD_5$ effluent mass data. Therefore, Respondent failed to comply with Schedule B, Condition (1)(b) of the Permit."[5] The ALJ also properly considered the missing $BOD_5$ effluent mass amount calculations to be monitoring data, concluding that "(f)ailure to collect monitoring data required in Schedule B of the Permit is a Class I violation. OAR 340-012-0055(1)(o)."[6] On page 13 of the Proposed Order the ALJ made the same statements and conclusion regarding violation two being properly classified under OAR 340-012-0055(1)(o). Violations one and two were therefore properly considered and classified by the ALJ and should be upheld as Class I violations under OAR 340-012-0055(1)(o).

D. ***Respondent committed violation seven by failing to maintain and utilize a functional flow meter.***

Respondent seems to argue that he did not commit violation seven because his permit does not require him to maintain a functioning flow meter and to record actual flow data. He argues "Granted it is necessary to measure flow, however it is only necessary to measure flow for the purpose of making mass calculations. In making the mass calculations actually reported by Respondent, Respondent has taken the daily input of water and doubled it."[7]

Respondent is incorrect that he may supply estimates of flow rather than actual measurements. Schedule (1)(B)(b) of Respondent's permit requires him to take daily flow measurements "just before the facility's chlorine contact pipe," and to verify "flow meter calibration" annually.[8] The ALJ found that "(o)n or about April 25, 2008, Respondent's flow

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[4] Proposed and Final Order, page 12.
[5] Proposed and Final Order, page 12.
[6] Proposed and Final Order, page 12.
[7] Respondent's Exceptions and Brief, page 9.
[8] Exhibit A1, page 3.

meter stopped working," and "(a)s a result of the broken flow meter, Respondent could not accurately measure the Facility's flow, as required by the Permit."[9] For this reason, the ALJ was correct to find that Respondent committed violation seven.

***E. The ALJ properly assessed the "economic benefit" factor of violation seven.***

Respondent argues that the ALJ erred when assessing the appropriate "economic benefit" of violation seven by not including what he believes to be mitigating information regarding his alleged expenditures for a flow meter and totalizer.[10] Whether or not Respondent submitted sufficient information to show that these costs were spent, spent on the proper equipment, and should be considered as mitigating information, was a matter of sufficiency and credibility for the ALJ. The ALJ made no findings of fact on this issue, and instead used the evidence supplied by the Department.

***F. The magnitude of the violations was properly assessed as "moderate."***

Respondent argues that the magnitude of the violations should have been assessed as minor magnitude because his violations caused no more than a de minimis adverse impact on health or the environment.[11] He also argues that, unless the Department articulates why the magnitude is greater than minor magnitude, the magnitude must be minor. This opinion is directly contradicted by the wording of the rule he quotes: "the magnitude is moderate unless: (a) A selected magnitude is specified in OAR 340-012-0135 . . . ; or (b) The department determines, using information reasonably available to it that the magnitude should be major under section [340-012-0135(3)] or minor under section [340-012-0135(4)]. The Department's determination is the presumed magnitude of the violation, but the person against whom the violation is alleged has the opportunity and the burden to prove that another magnitude applies and is more probable than the presumed magnitude." OAR 340-012-0135(2). Respondent failed to meet this burden at the hearing, and does not provide any specific argument in his Exceptions and Brief as to why the ALJ

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[9] Proposed and Final Order, page 18.
[10] Respondent's Exceptions and Brief, page 10.
[11] Respondent's Exceptions and Brief, page 10.

should have found differently on the issue of magnitude. For these reasons the magnitudes were properly assessed and should be upheld.

## III. CONCLUSION

Respondent did not raise any exception that would require a change to any part of the ALJ's Corrected Proposed and Final Order. Therefore the Department requests that the Commission issue a Final Order upholding the Corrected Proposed and Final Order and the $18,797 civil penalty.

11/15/10
Date

Bryan Smith, Environmental Law Specialist

CERTIFICATE OF SERVICE

I hereby certify that I served the Hearing Memorandum on the 15th day of November, 2010 by PERSONAL SERVICE upon

The Oregon Environmental Quality Commission
c/o Stephanie Clark, Assistant to the Commission
811 SW Sixth Avenue
Portland, OR 97204

and upon

Magar Edward Magar
14102 N.E. 40th Street
Vancouver, WA 98682

by mailing a true copy of the above by placing it in a sealed envelope, with postage prepaid at the U.S. Post Office in Portland, Oregon, on November 15, 2010.

Oregon

ENVIRONMENTAL
QUALITY
COMMISSION

Oct. 13, 2010

BY HAND DELIVERY

Bryan Smith
Oregon DEQ
811 SW 6th Ave.
Portland, OR 97204

Re: Request for an extension of time to file DEQ's reply brief
OAH Case No. 901410
DEQ Case WQ/D-NWR-09-115

Dear Mr. Smith,

On October 12, the Oregon Environmental Quality Commission received your request for an extension of time to file DEQ's reply brief in the above-referenced case. Your request for an extension has been approved, and you must now file DEQ's reply brief by 5 p.m. on Tuesday, Nov. 16, 2010.

Once all briefs have been filed, this case will be scheduled for consideration at a regular meeting of the Oregon Environmental Quality Commission.

If you have any questions about this process, please call me at 503-229-5301.

Sincerely,

Stephanie Clark
Assistant to the Oregon Environmental Quality Commission

Cc: BY FAX: Magar E. Magar
Fax number: 1-360-314-4781

811 SW Sixth Avenue
Portland, OR 97204-1390
(503) 229-5696

Oregon

ENVIRONMENTAL
QUALITY
COMMISSION

Oct. 12, 2010

ORIGINAL SENT BY REGULAR U.S. MAIL WITH ONE COPY BY FAX

Magar E. Magar
14102 NE 40th
Vancouver, WA 98682
Fax number: 360-314-4781

Re: Denial of motion to consolidate
Regarding OAH Case No. 901117 and OAH Case No. 901410

Dear Mr. Magar,

On October 1, the Oregon Environmental Quality Commission received your motion to consolidate OAH cases 90117 and 901410. After consultation with legal counsel, EQC has determined that it wants to proceed with OAH Case No. 901117 as scheduled to be heard before the commission on October 21, and to not consolidate the two cases.

OAH Case No. 901410 is in the appeal process and will be scheduled for commission consideration once the appeals process has been completed.

If you have any further questions about this process, please call me at 503-229-5301, or contact me by fax at 503-229-6762.

Sincerely,

Stephanie Clark
Assistant to the Oregon Environmental Quality Commission

Cc: BY HAND DELIVERY: Bryan Smith, DEQ

811 SW Sixth Avenue
Portland, OR 97204-1390
(503) 229-5696

Oregon
Theodore R. Kulongoski, Governor

Department of Environmental Quality
Headquarters
811 SW Sixth Avenue
Portland, OR 97204-1390
(503) 229-5696
FAX (503) 229-6124
TTY (503) 229-6993

October 12, 2010

Oregon Environmental Quality Commission
Attention: Stephanie Clark, Assistant to the Commission
811 SW 6th Avenue
Portland, OR 97204

Re: Magar Edward Magar
Notice of Civil Penalty Assessment and Order
Case No. WQ/D-NWR-09-115
OAH Case No. 901410

Dear Ms. Clark:

DEQ respectfully requests an extension of the October 28, 2010, deadline to reply to Mr. Magar's Exceptions and brief. The reasons are as follows. First, Mr. Magar's Exceptions and Brief refers to proposed exhibits (R4 and R5) of his that are not in my file, as Mr. Magar was not required to provide them to DEQ after the Judge excluded the proposed exhibits from the record. I eventually located the proposed exhibits in a file that was in the possession of DEQ's Lyle Christensen, but only on October 11, 2010, as Mr. Christensen was out of the office between October 4 and 11, 2010.

Additionally, I have knee surgery scheduled for October 22, 2010, and I am uncertain as to whether I will be able to work on DEQ's Reply Brief in the few days following that surgery. Finally, I am representing DEQ in an appeal before the EQC on October 21, 2010, and again at a contested case hearing on October 27, 2010. For these reasons DEQ requests an extension until November 16, 2010.

Sincerely,

Bryan Smith
Environmental Law Specialist

cc: Magar Edward Magar, 14102 N.E. 40th Vancouver, WA 98682

For: Bryan Smith

Fax number: 503 229 6124

From: Magar Magar

Fax number:360-314 4781

Date: October 1, 2010

Regarding: motion to consolidate

Number of pages: cover + 2

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OCT 01 2010

Magar E. Magar
Pro Se.
14102 NE 40th St.
Vancouver, WA 98682
Phone # 360 314 4444
Fax # 360 314 4781
Cell # 503 929 1094
E-Mail: calsport@msn.com

**STATE OF OREGON**
**for the**
**THE ENVIRONMENTAL QUALITY COMMISSION**

| | |
|---|---|
| IN THE MATTER OF: | *) Motion To Consolidate* |
| | *) OAH Case No.: 901117* |
| **MAGAR EDWARD MAGAR, an individual,** | *) with case No.901410* |
| | *)* |
| **Respondent.** | *)* |

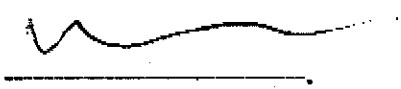
**Case No. 901117 has been fully briefed and submitted and is due to be argued before the Commission on October 18, 2010.**

**Respondent has submitted his petition and exceptions in Case No. 901410 on September 27, 2010 and awaits DEQ brief on the matter which he assumes will be forthcoming in due course.**

**Respondent moves that the Commission consolidate case No. 901117 with Case No. 901410 for the purposes of final argument before the Commission.**

**Respondent believes that if this motion is granted it will save time. Further rightly or wrongly Respondent believes it is in his best interest that the two cases be consolidated.**

**Respectfully submitted.**



Submitted by Magar E. Magar Respondent by fax to Dick Pedersen Director of DEQ by faxing same on October 1, 2010 to 503 229 6762 (the Director's Office).
Also served on Bryan Smith by fax to 503 229 6124.

Magar E. Magar
Respondent.

For: Bryan Smith

Fax number: 503 229 6124

From: Magar Magar

Fax number:360-314 4781

Date: September 27, 2010

Regarding: Exceptions and Brief

Number of pages: cover + 12

SEP 2 7 2010

Magar E. Magar
Pro Se.
14102 NE 40th St.
Vancouver, WA 98682
Phone # 360 314 4444
Fax # 360 314 4781
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E-Mail: calsport@msn.com

Before the Department of Environmental Quality Commission
Of the State of Oregon

| | | |
|---|---|---|
| In the Matter of Magar E. Magar, | ) | Case No.: 901410 |
| | ) | **Exceptions and Brief.** |
| Respondent | ) | **Petition for Review** |

Magar E. Magar Respondent and participant states his intent to petition for review and submit his exceptions brief in the above entitled proceedings.

**First Exception.**

The ALJ's (Administrative Law Judge) refusal to admit Respondent's Exhibits R4 and R5. R4 and R5 are the original records DMR (Daily Monitoring Reports) permanently kept by the DEQ. They contain all the data and reports relevant to this notice of violation.[1] The evidentiary ruling is found on p. 2 of the corrected proposed order. DEQ objected to the admission of these exhibits on the grounds that they were irrelevant.[2] It is impossible to see how they are irrelevant.

[1] The notice of violation is what commences the case. In the text it will simply be referred to as the notice.

[2] **183.450 Evidence in contested cases.** In contested cases:
(1) Irrelevant, immaterial or unduly repetitious evidence shall be excluded but erroneous rulings on evidence shall not preclude agency action on the record unless shown to have

The original and completed DMR offered into evidence contains the bulk of the data that was required to be collected and calculated by the permit. It is the failure to collect these data that is the subject of the notice. They are not irrelevant.

The proposed alternative is to admit the Exhibits and accept what is contained therein. When that is done the commission will find that the allegations in notice p.3 III. Conclusions paragraph 1, paragraph 2 and paragraph 4 are not true and not proven.

**Second Exception;**

That exception is also directed to the notice of violations p.5 III. Conclusions paragraph 1 and paragraph 2. The problem here is the ALJ's rationale on p.7 of the proposed order stating Respondent's arguments are unpersuasive exhibits a complete misunderstanding of the administrative scheme for water quality violations as set forth in the rule OAR 340-012-0055. The notice of violation repeatedly cites which administrative rules were violated.[3] But the ALJ does not, as she is required to do, deal with the specific rules allegedly violated as set forth in the notice.[4] ALJ bases the entire argument of her findings on the fact that complete monitoring reports were not submitted by the 15th of the month. This failure to submit by the 15th, the ALJ states (p.7 of the opinion) violated the conditions of Respondent permit and therefore all penalties follow.[5]

---

substantially prejudiced the rights of a party. All other evidence of a type commonly relied upon by reasonably prudent persons in conduct of their serious affairs shall be admissible. Agencies and hearing officers shall give effect to the rules of privilege recognized by law. Objections to evidentiary offers may be made and shall be noted in the record. Any part of the evidence may be received in written form.

[3] It is those violations that Respondent has notice of and it is those violations that Respondent is invited to answer not the violations that the ALJ deems important.

[4] The specific rule cited in the notice is OAR 340-012-0055(1)(o) which rule states Failing to **collect** ( emphasis supplied) monitoring data required in Schedule B of the permit. This rule is cited four times in the notice of violation under the heading III Conclusions on p.3 of the notice in paragraphs 1, 2, 3 and 4 of that section.

[5] The precise text in the proposed corrected order p.7 says:
The permit conditions are clear. The conditions require respondent to follow specific reporting procedures including submitting monitoring reports for each calendar month on the 15th of the following month with each system classification required in the Permit. Therefore DEQ established that Respondent violated the conditions of the Permit and that civil penalties should be imposed for those violations.

It is fundamental in administrative law that due process be given to Respondent. Due process is given by the agency when notice of charges or claims is given. There Oregon Court of Appeals has imposed certain formal requirements on the notices. The Court of Appeals said, in a contested case, the notice should include a reference to any administrative rule involved including a notice of statute or rule that eventually formed the basis of the final decision, *Villanueva v. Board of Psychologist Examiner*, 175 Or App 345, 357 (2001).

It is not the Respondent's intent to fault DEQ personnel in the drafting of the notice of violation for, by and large, they did an adequate job.

Basing a proposed order and ultimately a decision on administrative rules not mentioned in the notice is contrary to *Villanueva* and is excepted to as explained herein.

Failure to submit a timely DMR is a separate and general **Class II** violation as defined by OAR 340-012-0055(2)(D) and such a violation is ***not*** charged in the notice and carries lesser penalties. That is contrary to *Villanueva.*

And further, failure to submit a complete monitoring report is a separate and general **Class III** violation OAR 340-012-0055 III (a) and further such a violation is ***not*** charged in the notice and carries even lesser penalties. That also is contrary to *Villanueva.* How can Respondent anticipate that the ALJ is going to address violations not mentioned in the notice? How can Respondent prepare for such a hearing?

The ALJ must adhere to and address the violations that are contained in the notice not whatever strikes her fancy or her sense of indignation.

As to what was actually cited in the notice. The exceptions or objections noted below are addressed to the violations cited in the notice and the evidence in the case.

The notice of violation wrongly cites the rules in paragraphs 1 and 2 in the conclusion section of that notice by stating that Respondent violated OAR 340-012-0055 (1) (o) by failing to perform monthly effluent mass **calculations**. But OAR 340-012-0055 (1) (o), the rule allegedly violated, says nothing about **performing calculations**. OAR 340-012-0055 (1) (o) says failure to **collect** monitoring data. This point is raised at this time because there is no water quality violation that is classified as failure to calculate. Again the notice refers to OAR 340-012- 0055 etc. It is true the permit requires the calculations and they were in fact made and inserted by amendment in R.4 and R.5. But the fact that there is no rule that assigns a class for failure to calculate may or may not pose a major problem of classification for the agency. The problem is this: in order to

calculate a penalty one must first classify the violation and then determine its magnitude. The relevant rule on Penalty determination is OAR **340-012-0045**. The rule provides:

> Except as provided in OAR 340-012-0038(3), in addition to any other liability, duty, or other penalty provided by law, the department may assess a civil penalty for any violation. Except for civil penalties assessed under 340-012-0155(2), the department determines the amount of the civil penalty using the following procedures:
>
> (1) The classification of each violation is determined by consulting OAR 340-012-0053 to 340-012-0097;
>
> (2) The magnitude of the violation is determined as follows:
>
> (a) The selected magnitude categories in OAR 340-012-0135 are used

Clearly if failure to make mass calculations is going to be a violation the rules must be written to give it a proper classification because without a classification a penalty cannot be calculated. Perhaps in writing the rules the Agency will classify failure to calculate as a class I violation or the agency may deem class II more appropriate.[6]

The ALJ found, p.7 of proposed order, that Respondent may have amended the DMR after they were submitted but that did not absolve him from meeting the permit requirements. The problem with the ALJ's rationale is that there is no rule that prohibits amending the DMRs so long as the data is timely collected. That is a fact, as well as an admission by the agency Exhibit R.3 p.1 agency response to request for first request for admission.[7] In addition, in Exhibit R.9 p.4 e-mail dated January 4, 2010 the permit writer Lyle Christensen writes to Bryan Smith and says

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[6] In fact according to **340-012-0053** an unclassified violation is a general violations that Apply to all Programs and it is a **Class II** (Violating any otherwise unclassified requirement). In pointing this fact out I am essentially doing DEQ legal homework for them. I do this cheerfully because the DMRs were in fact amended to include the mass calculations and as a former lawyer our code of professional conduct requires us to point to adverse authority. Pointing to the adverse authority yields a lower class of violation.

[7] Respondent can report that on March 25, 2010 at 2:00 p.m. at the Water Environmental School held at the Clackamas Community College in Oregon City he attended a class on that very topic titled

"My personal belief is that he has the opportunity to correct his omissions by revising his DMR". In the same e-mail Christensen also says "I suspect that he has done all the required bacterial and just not reported it to us or gave it to us in a form where we really cannot accept it." Christensen's conclusions that the data was in fact collected (thereby satisfying the rule), Respondent surmises, is probably based on correspondence with Respondent where earlier versions of Exhibit R.11 (which exhibit contains the collected data) were mailed to Christensen and appear as part of the agency exhibit A8 p.4.

**Therefore with respect to collection of the data specifically e.coli bacteria, BOD and TSS as required by the permit and the rule Respondent has collected all the data required by the rules and the permit which information is reported in the amended DMR. Respondent has also made the mass calculations. In this respect Respondent has not violated the conditions of the permit a fact that is well known to the permit writer Lyle Christensen as he reports his personal belief e-mail Exhibit R. 9 p.4. Conclusions 1 (no calculations on BOD, Conclusion 2 (no calculations on TSS) and Conclusion 4 (no collection of bacteria) are all erroneous.**

**Violation contained on p.4 line 3 paragraph or conclusion 5.** Discharge of effluent with a low pH. Respondent **admits** this violation and the penalty.

**Violation contained on p.4 line 6 paragraph 6.** Failure to sign DMR and to include operator certificate. Respondent has amended the DMR to include the required information and no penalty should accrue.

**Violation contained on p.3 line 18, conclusion 3** Failure to monitor influent pH at a frequency of 2 times per week.

Respondent contends that the insertion of this monitoring requirement with a frequency of twice a week is an abuse of discretion on the part of DEQ or the permit writer. Matters of abuse of discretion are fact intensive. The facts relating to this requirement are as follows:

1- Although the reporting requirements of the 2002 permit and the 2007 permit are identical in terms as to the number of times per week the influent pH is required to be monitored (twice).

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Records/reporting for Permit compliance, given by April Graybill DEQ WQ western Region. The topic of amending DMR's was both a popular and prominent feature of that subject.

For the entire life of the 2002 permit the influent pH was measured only once a month. And for a considerable time in the present permit (2007) the same was done. No notices of violations were issued to Riverwood for failing to record the influent pH twice a week.

2- The influent pH is not actually discharged to the environment. This fact causes Respondent to question whether regulation of the influent pH has been delegated by the legislature to the agency.

3- The pH of the effluent which is discharged to the environment is **measured and reported daily.**

4- The influent pH being the pH of domestic untreated sewage is remarkably constant as shown by Exhibit R. 14. Exhibit R.14 is a record of all measurements of the influent pH that respondent has a record of. Analysis of those records show that the mean values of the effluent pH is 6.88 with a 95% confidence level of 0.0168 which means that if one took 100 samples of influent pH one can confidently expect to see 95 per cent of those samples to have a pH between 6.872 and 6.899.

5- DEQ exhibit A.10 p.4. The permit writer says that the influent pH is more useful to the operator than to us, meaning DEQ.

6- It is pertinent to record what the permit writer says about the effluent of the sewer plant, that is what is actually discharged in the Columbia Exhibit R. 6 p.3:

**Outfalls**

Treated wastewater is discharged to Columbia River. The effluent actually enters a small unnamed seasonal creek just before it cascades over a 50 foot cliff. At the base of the cliff is a railroad grade about 50 feet above the Columbia River. The effluent stream ***disappears*** into the gravel along the railroad track and no visible stream is observed along the river (emphasis supplied). The permit writer goes on to say Exhibit R.6

**Receiving Streams/Impact**

Because this is such a small discharge and it is difficult to even determine where it enters the river, it is difficult to accept that any of these parameters are influenced by the discharge from Riverwood Mobile Home Park. The Department is not aware of any water quality violations that may be attributed to this source.

Given the minimal impact of the **effluent** on the environment one really wonders about the requirement of having to measure the **influent** pH twice a week. Respondent submits that that requirement is an abuse of discretion on the part of DEQ that is the permit writer.

An extensive and frequently cited legal analysis on abuse of discretion can be found in *Liberty Northwest In. Corp v. Jacobson* 164 Or App 37, 45 (1999)

In both judicial trials and administrative hearings, many decisions covering a wide range of matters, both substantive and procedural, are committed "discretion" of the judge or other official presiding over the adjudication. Discretion, in that context, describes the decision-makers power to choose among several courses of action, any one of which is legally permissible. *State v. Caruso,* 289 Or 315, 322, 613 P2d 752 (1980); *State ex rel Maizels v. Juba,* 254 Or 323, 330, 460 P2d 850 (1969). "Abuse of discretion" is the familiar standard of review for such decision. As a standard, however, it is relatively without content, for it describes the conclusion to be reached, not the analysis used to reach it. The essential question is whether the choice made is consistent with one or several objectives to be served by vesting discretion in the decision maker, under circumstances pertinent to the decision to be made. *See generally Dickenson v. Davis,* 277 Or 665, 673-76, 561 P2d 1019 (1977) (discussing the nature of discretion in administrative proceedings.)

Or looking at it another way an administrator or a court abuses its discretion, when the relevant evidence is undisputed and does not rationally support the decision made by the administrator *EMCMortgage Corp v. Davis,* 174 Or App 524, 526 (2001). That is the case here. Why require a parameter be measured twice a week when that parameter is stable and relatively constant over time? Why require a parameter be measured twice a week when that parameter has minimal or no impact on the environment? Why suddenly decide to enforce a provision that has not been enforced for years on end with no ill effects on the environment? Why require that parameter be measured twice a week when the more important parameter the effluent pH, which does have an impact on the environment, is measured daily? The permit writer has the discretion to choose the frequency of measurement of that parameter. How often, given the facts of this case would the engineer members of the Commission choose to have the influent pH measured? Respondent submits no more than once or twice a month. Any greater requirement is an abuse of discretion because it serves no useful purpose and is simply an over regulation or make work for Respondent and increases his expenses.

**Violation in paragraph 7 p. 4 line 16.** Failure to properly operate and maintain the treatment plant. The notice refers to two administrative rules OAR 340-041-0007(16)(a)(A)(ii)

and OAR 340-012-0055(2)(d). Again the reference to OAR 340 - 041-0007(16)(a)(A)(ii)[8] is not meaningful .The rule is reproduced in footnote 8. It has to do with minimum design criteria and has nothing to do with the operation of flow meters. The other administrative rule mentioned on p.4 of the notice is OAR 340-012-0055 (2) (d) which provides (d) Violating any management, monitoring, or operational plan established pursuant to a waste discharge permit, unless otherwise classified. That also is too vague and does not conform to the requirements of adequate notice as required by *Villanueva*. The permit is the permit and there is no reference in the permit

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[8] **340-041-0007**

**Statewide Narrative Criteria**

(1) Notwithstanding the water quality standards contained in this Division,……

(16) Minimum Design Criteria for Treatment and Control of Wastes. Except as provided in OAR 340-041-0101 through 340-041-0350, and subject to the implementation requirements set forth in OAR 340-041-0061, prior to discharge of any wastes from any new or modified facility to any waters of the State, such wastes must be treated and controlled in facilities designed in accordance with the following minimum criteria.

(a) In designing treatment facilities, average conditions and a normal range of variability are generally used in establishing design criteria. A facility once completed and placed in operation should operate at or near the design limit most of the time but may operate below the design criteria limit at times due to variables which are unpredictable or uncontrollable. This is particularly true for biological treatment facilities. The actual operating limits are intended to be established by permit pursuant to ORS 468.740 and recognize that the actual performance level may at times be less than the design criteria.

(A) Sewage wastes:

… (ii) Sewage wastes must be disinfected, after treatment, equivalent to thorough mixing with sufficient chlorine to provide a residual of at least 1 part per million after 60 minutes of contact time unless otherwise specifically authorized by permit;

(iii) Positive protection must be provided to prevent bypassing raw or inadequately treated sewage to public waters unless otherwise approved by the Department where elimination of inflow and infiltration would be necessary but not presently practicable; and

(iv) More stringent waste treatment and control requirements may be imposed where special conditions make such action appropriate.

to a management plan, a monitoring plan, or an operational plan. There are monitoring and other requirements in the permit but no management or operational plan. DEQ is going out of its way to find administrative rules to fit what they deem violations.

The obsession of the permit writer to know the **exact** number of gallons discharged by Riverwood is quite baffling to Respondent. In general the flow of this facility is well known and is in fact reported in R. 6 to be on the average 6,000 gallons per day in dry weather and 9,500 gallons per day in wet weather. Other facilities discharge more than 10,000,000 gallons per day. If the state were taking inventory of the total amount of treated sewage discharged by all facilities in the state this requirement would make some sense except as to why the State would want to add this tiny fraction.

Granted it is necessary to measure flow, however it is only necessary to measure flow for the purposes of making the mass calculations.[9] In making the mass calculations actually reported by Respondent, Respondent has taken the daily input of water and **doubled** it. That, in turn, yields to an estimate double the calculated mass of BOD and TSS discharged. This doubling, while unhelpful to Respondent, still yields numbers that are well below the limits of what Respondent is allowed to discharge.[10] The permit exhibit A1 in schedule A allows a discharge of 2.2 lbs BOD or TSS daily from May 1 to October 1 and 3.3 lbs daily of BOD or TSS from November 1 to April 30.

There are three ways of measuring flow. One way is a turbo meter placed prior to discharging the effluent, another is a magnetic flow meter, which ceased to function, and which has been replaced, and the last is a another turbo meter which measures the input of water that is supplied daily and consumed by the tenants of the mobile home park.

The permit Exhibit R.1 has a provision in section Schedule F section B the last sentence of which says; This provision requires the operation of back or auxillary facilities or similar system that are installed by the permitee only when the operation is necessary to achieve compliance with the conditions of the permit.

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[9] The permitted maximum design discharge is 13,000 gallons per day. Contrast that with allowable discharges for other plants in excess of 10,000,000 gallons per day exhibit R. 17. R. 17 applies to lagoons. There is a similar exhibit that applies to trickle filters which respondent will substitute.

[10] In other words DEQ is saying to Respondent you may discharge so much BOD or TSS but you have a limit. How are you going to compute your mass calculations if your flow meter is not working 100 per cent and Respondent says alright I will be on the safe side, give DEQ the benefit of doubt and double the volume and show you that I am still well below the limits of what I am permitted to discharge.

The two additional turbo meters, one to measure potable water input and one to measure outflow, as a check on the magmeter were put in by respondent pursuant to Section B.1 to achieve, among other reasons, compliance with the permit.

As stated and as is shown by exhibit R.15 a replacement meter was purchased for Omega engineering on 12/24/ 2009 for $1,009.15 as well as, on 3/17/2010, for $416.40, a replacement totalizer. Having purchased this replacement meter and other equipment, if a penalty is assessed for this violation, it is error, as DEQ has done, to add the cost of the meter to the penalty

**Errors in Penalty computations.**

To the extent that the commission deems a penalty is due Respondent contends that the magnitude of the violations are minor because these violations have caused no more than a deminimus adverse impact on health or the environment. DEQ has argued in the past that in order to determine magnitude they are entitled to consider other factors beside human health and/or the environment. That is correct, but the DEQ must specifically articulate those factors so that Respondent may respond. Absent the DEQ stating why they wish to consider factors other than health and the environment, the magnitude of the violations must remain minor and the penalties computed accordingly. The relevant rule regarding magnitude is reproduced below.

**340-012-0130**

**Determination of Violation Magnitude**

(1) For each civil penalty assessed, the magnitude is moderate unless:

(a) A selected magnitude is specified in 340-012-0135 and information is reasonably available to the department to determine the application of that selected magnitude; or

(b) The department determines, using information reasonably available to it, that the magnitude should be major under section (3) or minor under section (4).

(2) If the department determines, using information reasonably available to the department, that a general or selected magnitude applies, the department's determination is the presumed magnitude of the violation, but the person against whom the violation is alleged has the opportunity and the burden to prove that another magnitude applies and is more probable than the presumed magnitude.

(3) The magnitude of the violation is major if the department finds that the violation had a significant adverse impact on human health or the environment. In making this finding,

the department will consider all reasonably available information, including, but not limited to: the degree of deviation from applicable statutes or commission and department rules, standards, permits or orders; the extent of actual effects of the violation; the concentration, volume, or toxicity of the materials involved; and the duration of the violation. In making this finding, the department may consider any single factor to be conclusive.

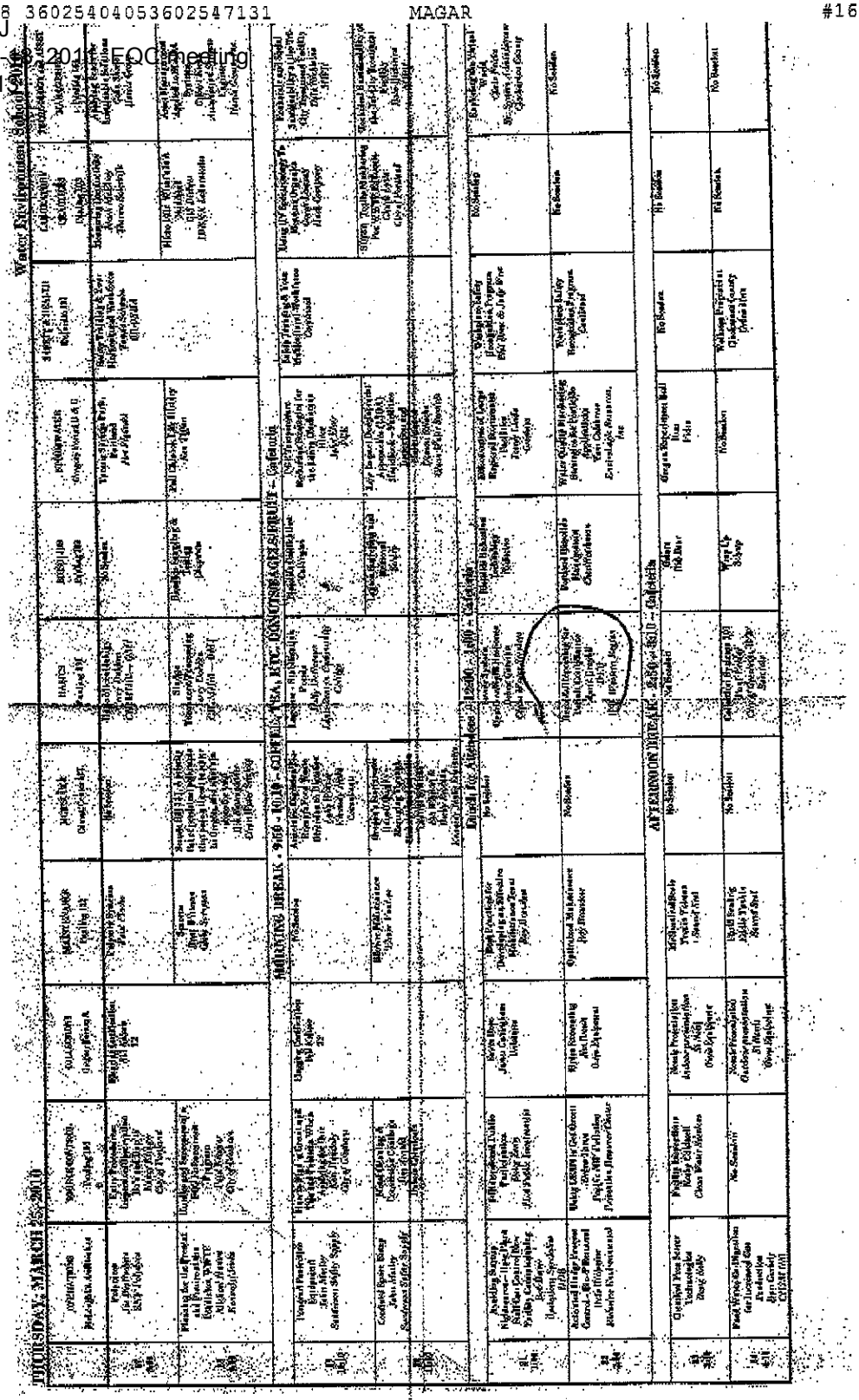
(4) The magnitude of the violation is minor if the department finds that the violation had no more than a de minimis adverse impact ***on human health or the environment, and posed no more than a de minimis threat to human health or other environmental receptors.*** In making this finding, the department will consider all reasonably available information including, but not limited to: the degree of deviation from applicable statutes or commission and department rules, standards, permits or orders; the extent of actual or threatened effects of the violation; the concentration, volume, or toxicity of the materials involved; and the duration of the violation. In making this finding, the department may consider any single factor to be conclusive. (emphasis supplied).

In conclusion, the Commission should find that Respondent did make the mass calculations for BOD and TTS. That Respondent did collect the bacterial samples. That it was an abuse of discretion by DEQ to require the measuring of the influent pH twice a week. The volume measurements made and reported by Respondent were adequate for the purposes of the permit. Respondent has conceded the violation of the low pH discharge.

Submitted by Magar E. Magar Respondent by fax to Dick Pedersen Director of DEQ by faxing same on September 27, 2010 to 503 229 6762 (the Director's Office) as directed.
Also served on Bryan Smith by fax to 503 229 6124.

---

Magar E. Magar
Respondent.



Oregon

ENVIRONMENTAL
QUALITY
COMMISSION

Sept. 7, 2010

BY CERTIFIED MAIL WITH ONE COPY BY FAX

Magar E. Magar
14102 NE 40th Street
Vancouver, WA 98682
Fax: 1-360-314-4781

Re: Petition for commission review
OAH Case No. 901410

Dear Mr. Magar,

On Sept. 2, 2010, the Oregon Environmental Quality Commission received your timely petition for review of the proposed order for the above-referenced case. Your petition, received by fax, also asked for an extension of time in which to file your exceptions and brief. Your exceptions and brief are not due until 30 days until after your petition is filed, so no extension is necessary at this time.

You must file exceptions and a brief within 30 days from the filing of your request for commission review. Your exceptions must specify the findings and conclusions in the proposed order that you object to and alternative proposed findings. Your exceptions and brief must be received by Monday, Oct. 4, 2010, since your 30 days expire on Sunday, Oct. 3, 2010. If you do not submit exceptions and brief by this deadline, the commission may dismiss your petition for review.

To file your exceptions and brief, please mail these documents to: Environmental Quality Commission, c/o Stephanie Clark, 811 SW 6th Avenue, Portland, Oregon 97204 with a copy to Bryan Smith at 811 SW 6th Avenue, Portland, Oregon 97204.

After both parties file their briefs, the commission will consider the briefs and hear arguments at a regularly scheduled commission meeting. I will notify you of the date and location of that meeting.

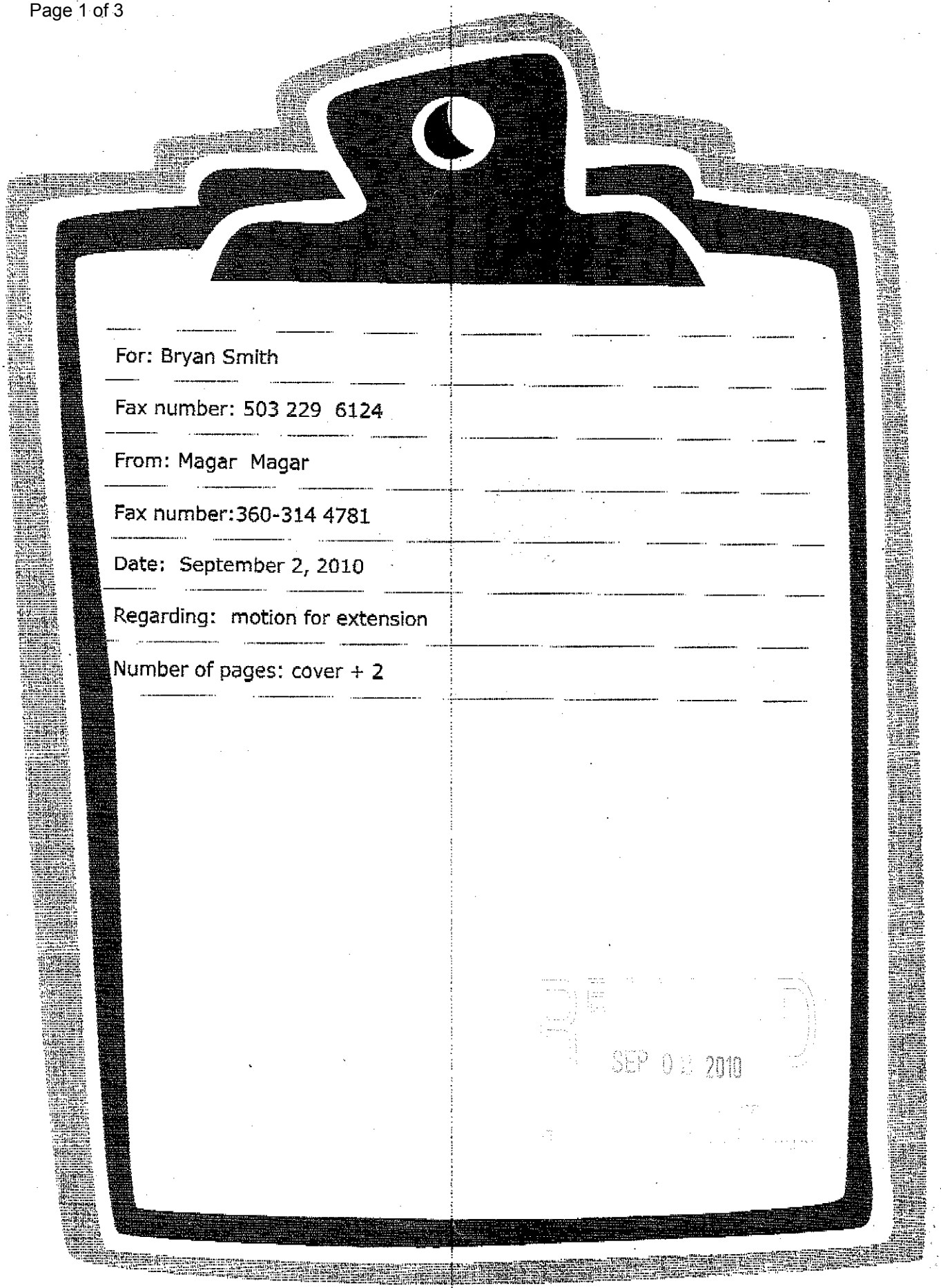
If you have any questions about this process, please call me at 503-229-5301. You may also reach me by fax at 503-229-6762.

Sincerely,

Stephanie Clark
Assistant to the Oregon Environmental Quality Commission

Enclosure with mailing: Copy of OAR 340-011-0575
Cc: BY HAND DELIVERY: Bryan Smith, DEQ

811 SW Sixth Avenue
Portland, OR 97204-1390
(503) 229-5696



For: Bryan Smith

Fax number: 503 229 6124

From: Magar Magar

Fax number:360-314 4781

Date: September 2, 2010

Regarding: motion for extension

Number of pages: cover + 2

SEP 0 2 2010

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Phone # 360 314 4444
Fax # 360 314 4781
Cell # 503 929 1094
E: Mail: calsport@msn.com

Before the Department of Environmental Quality Commission
Of the State of Oregon

In the Matter of Magar E. Magar,

Respondent

Case No.: No. 901418
Motion for Extension of time to file Exceptions Brief
**Pursuant to OAR 340-011-0575 (4)(e)**

Magar E. Magar Respondent and participant states his intent to petition for review and moves for an extension of time until September 10, 2010 to file his exceptions brief in the above entitled proceedings'

The request is made because Respondent, among other matters is not exactly clear as to when the exceptions are due. The Administrative Law Judge issued two orders labeling the order mailed August 6, 2010 corrected Proposed and Final Order. According to

**340-011-0500 ...**

(2) In computing any period of time prescribed or allowed by this Division, the day of the act or event from which the designated period of time begins to run will not be included. The last day of the time period is included, unless it is a Saturday or a legal holiday (including Sunday), in which event the time period runs until the end of the next day that is not a Saturday or a legal holiday.

Since Labor Day is a legal holiday then the exceptions appear to be due on September 7, 2010. Requesting until September 10, 2010 is a three day extension.

This three day extension is requested because in the proposed order the ALJ made rulings evidentiary rulings which were impossible for respondent to comprehend. Respondent requires the additional time to do legal research concerning those rulings.

The exclusion of Respondent R4 and R5 on grounds of lack of relevancy was an amazing ruling since those exhibits as amended contained the essential relevant data that is required by the permit, which if fairly read would negate the bulk of the violations.

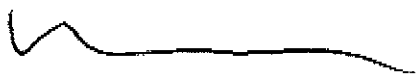
SEP 02 2010

In addition Respondent as a result of Respondent's bout with lymphoma which was treated first by chemotherapy ended late March 2010 and radiation therapy ended June 9, 2010 has left Respondent with compromised immunity. This compromised immunity has resulted in three similar chest infections and also thrush infections. These occurred on or about March 25, 2010 and again on or about May 25, 2010 and finally on or about August 15, 2010. Fortunately each infection was progressively milder that the former indicating the return of some immunity.

Therefore Respondent respectfully submits this request for extension. Thank you for your consideration of the motion.

Submitted by Magar E. Magar Respondent by fax to Dick Pedersen Director of DEQ by faxing same on September 2, 2010 to 503 229 6762 (the Director's Office) as directed on p.15 of the order that is sought to be reviewed.

Also served on Bryan Smith by fax to 503 229 6124.



Magar E. Magar
Respondent.

**BEFORE THE OFFICE OF ADMINISTRATIVE HEARINGS**
**STATE OF OREGON**
**for the**
**ENVIRONMENTAL QUALITY COMMISSION**

| | |
|---|---|
| IN THE MATTER OF: | ) **CORRECTED PROPOSED** |
| | ) **AND FINAL ORDER**[1] |
| **MAGAR EDWARD MAGAR,** | ) |
| **an individual,** | ) OAH Case No.: 901410 |
| **Respondent.** | ) Agency Case No.: WQ/D-NWR-09-118 |
| | ) |

## HISTORY OF THE CASE

On August 18, 2009, the Department of Environmental Quality (DEQ) for the State of Oregon issued a Notice of Civil Penalty Assessment and Order (Notice) to Magar Edward Magar (Respondent), alleging that he violated DEQ laws. Respondent timely filed a request for hearing. DEQ referred the case to the Office of Administrative Hearings (OAH) on November 23, 2009.

The OAH assigned Senior Administrative Law Judge (ALJ) Monica Whitaker to preside over the matter. The OAH scheduled a prehearing conference for February 2, 2010. Based upon a request from Mr. Magar, ALJ Whitaker postponed the prehearing. The OAH scheduled a hearing for February 18, 2010, but the hearing was postponed and a telephone prehearing conference convened. Bryan Smith, an Environmental Law Specialist with DEQ, appeared for the prehearing. Mr. Magar did not participate. A second telephone prehearing conference convened on February 18, 2010. Mr. Smith and Mr. Magar participated. A third telephone prehearing conference convened on March 1, 2010. Mr. Smith and Mr. Magar participated.

On March 2, 2010, ALJ Whitaker issued a Scheduling Order setting forth deadlines upon which certain documents should be filed. On March 5, 2010, ALJ Whitaker issued an Amended Scheduling Order.

A hearing convened in Portland, Oregon, on June 22, 2010. Mr. Smith represented DEQ, and Mr. Magar appeared *pro se* and testified as a witness.[2] Lyle Christensen, a Compliance Officer and Natural Resource Specialist with DEQ, also testified as a witness. The record closed at the conclusion of the hearing. Thereafter, Respondent submitted written correspondence to the ALJ, raising various issues. The ALJ did not leave the record open for any additional correspondence or arguments from the parties. Therefore, the content of the letter is not addressed or considered in this Proposed and Final Order.

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[1] This Corrected Proposed and Final Order is issued to correct a typographical error contained in the first sentence of the "History of the Case." The date has been corrected to read "August 18, 2009."
[2] Respondent also submitted written direct testimony at the beginning of the hearing.

## ISSUES

1. Whether Respondent failed to perform monthly effluent mass amount Biochemical Oxygen Demand (BOD)[3] calculations and reporting required by Schedule B, Condition 1(b) of the Permit, in violation of ORS 468B.025(2).

2. Whether Respondent failed to perform the monthly effluent mass amount Total Suspended Solids (TSS) calculation and reporting required by Schedule B, Condition 1(b) of the Permit, in violation of ORS 468B.025(2).

3. Whether Respondent failed to perform the influent monitoring data for pH at a minimum frequency of two times per week, as required by Schedule B, Condition 1(a)(1) of the Permit, in violation of ORS 468B.025(2).

4. Whether Respondent failed to report the monthly effluent monitoring and sampling for bacteria, required by Schedule B, Condition 1(b) of the Permit, in violation of ORS 468B.025(2).

5. Whether Respondent discharged treated effluent from its wastewater treatment system that was not within the range of 6.0 to 9.0 pH, as required by Schedule A, Condition 1(a)(3) of the Permit, in violation of ORS 468B.025.

6. Whether Respondent failed to include operator certification information on discharge monitoring reports, as required by Schedule B, Condition 2(b) of the Permit, in violation of ORS 468B.025(2).

7. Whether Respondent failed to properly operate and maintain the Facility's systems of treatment and control, specifically the Facility's flow meter, in violation of Schedule F, Section B, Condition 1 of the Permit, and in violation of ORS 468B.025(2).

8. If Respondent committed one or more of the above violations, what is the appropriate civil penalty?

## EVIDENTIARY RULINGS

Exhibits A1 and A3 through A12, offered by DEQ, were admitted into the record without objection. Respondent's objection to the admission of exhibit A2 was overruled based on the exhibit's relevancy, and exhibit A2 was admitted into the record.

Exhibits R1, R3, R6 through R7, R9, and R17 were admitted into the record without objection. DEQ's relevancy objections to the admission of exhibits R4 and R5 was sustained, and exhibits R4 and R5 were not admitted into the record. DEQ's objections to the admission of exhibits R11 through R16 were overruled based on the relevancy of the documents. Exhibits R11 through R16 were admitted into the record.[4]

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[3] BOD means five-day biochemical oxygen demand ($BOD_5$). (Ex. A1 at 15.)
[4] Respondent did not offer exhibits R2, R8, or R10.

## FINDINGS OF FACT

1. Respondent owns and operates Riverwood Mobile Home Park (the Facility), located outside of Rainier, Oregon. (Test. of Christensen.) In June 2007, DEQ issued National Pollutant Discharge Elimination System Waste Discharge Permit (NPDES) number 10520 (the Permit) to Respondent. (Ex. A1.)

2. Respondent has a history of non-compliance with the Permit. (Test. of Christensen.) On July 11, 2001, DEQ issued a formal enforcement action to Respondent in case number WQ/D-NWR-01-129 that assessed a civil penalty for six Class I violations. The formal enforcement action accused Respondent of discharging inadequately treated and non-disinfected waste water from the Facility's sewage collection system into an unnamed tributary of the Columbia River, in violation of ORS 468B.025(1)(a) and the conditions of the Permit. (Ex. A12 at 10-15.) The civil penalty was paid in full on or about April 10, 2002. (*Id.* at 1.) Respondent eventually repaired the Facility's failing wastewater treatment system. (Test. of Respondent and Christensen.)

3. On or about February 7, 2006, DEQ issued a formal enforcement action to Respondent in case number WQ/D-NWR-05-181 that assessed a civil penalty for one Class I violation and one Class II violation. The formal enforcement action accused Respondent of operating a wastewater treatment system without a certified operator as required by Permit conditions. The formal enforcement action also accused of failing to do sampling of BOD and TSS at the Facility, as required by the Permit. (Ex. A12 at 17-26.) The civil penalty was paid in full on or about August 18, 2006. (*Id.* at 1.) Respondent eventually obtained his certified operator permit. (Test. of Christensen and Respondent.)

4. On March 12, 2007, Respondent filed an application with DEQ to renew his NPDES permit. On June 4, 2007, DEQ renewed Respondent's NPDES permit with an expiration date of May 31, 2012. (Ex. A1 at 1.)

5. In or about 2008, DEQ issued a formal enforcement action to Respondent. The resulting civil penalty has not been resolved. (Test. of Christensen.)

6. Schedule B, Condition 1(b) of the Permit requires Respondent to calculate and report BOD effluent mass on a monthly basis.[5] (Ex. A1 at 3.)

7. During each month for the period April 2008 through June 2009, Respondent failed to calculate and report effluent mass data for BOD and TSS. (Ex. A2.)

8. Schedule B, Condition 1(b) of the Permit requires Respondent to calculate and report effluent mass data (pounds discharged) for Total Suspended Solids (TSS) on a monthly basis. (Ex. A1 at 3.)

9. Schedule B, Condition 1(a) of the Permit requires Respondent to monitor the influent monitoring data for pH at a minimum frequency of two times per week.[6] (Ex. A1 at 3.)

[5] "Month" means calendar month. (Ex. A1 at 15.)

10. During each month for the period June 2008 through June 2009, Respondent failed to collect and report influent monitoring data for pH at a minimum frequency of two times per week. (Ex. A2 at 3-18.)

11. Schedule B, Condition 1(b) of the Permit requires Respondent to monitor and report, on a monthly basis, effluent E. coli bacteria levels. (Ex. A1 at 3.)

12. For the months of May, June, and September 2008, as well as January, May, and June 2009, Respondent failed to report effluent monitoring data for E. coli bacteria levels. (Ex. A2 at 2, 3, 7, 13, 17, and 18.)

13. Schedule A, Condition 1(a)(3) of the Permit requires that treated effluent waste discharge fall within a range of 6.0 to 9.0 pH. (Ex. A1 at 2.)

14. On January 1, 6, 7, 8, 9, 10, and 11, 2009, as well as May 16, 2009, Respondent reported that the treated effluent from its wastewater treatment system was not within the range of 6.0 to 9.0 pH. Specifically, Respondent reported the following results: 5.8, 5.6, 5.8, 5.8, 5.5, 5.4, 5.5, and 5.9 pH. (Ex. A2 at 13 and 17.)

15. Schedule B, Condition 2(a) and (b) of the Permit sets forth the reporting procedures Respondent must follow. It provides:

> a. Monitoring results shall be reported on approved forms. The reporting period is the calendar month. Reports must be submitted to the Department's Northwest Region – Portland office by the 15th day of the following month.
>
> b. State monitoring reports shall identify the name, certificate classification and grade level of each principal operator designated by the permittee as responsible for supervising the wastewater collection and treatment systems during the reporting period. Monitoring reports shall also identify each system classification as found on page one of this permit.

(Ex. A1 at 4.)

16. For the months of April, May, June, July, August, and December 2008, as well as January, February, March, and May 2009, Respondent submitted discharge monitoring reports (DMRs) to DEQ without including operator certification information, including name, certification number and grade level of each principal operator, of the Facility's wastewater management system. (Ex. A2 at 1-5, 11-15, and 17.)

17. Schedule F, Section B, Condition 1 of the Permit provides:

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[6] "Week" means a calendar week of Sunday through Saturday. (Ex. A1 at 15.)

> The permittee must at all times properly operate and maintain all facilities and systems of treatment and control (and related appurtenances) that are installed or used by the permittee to achieve compliance with the conditions of this permit. Proper operation and maintenance also includes adequate laboratory controls and appropriate quality assurance procedures. This provision requires the operation of back-up or auxiliary facilities or similar systems that are installed by a permittee only when the operation is necessary to achieve compliance with the conditions of the permit.

(Ex. A1 at 8.)

18. On or about April 25, 2008, Respondent's flow meter stopped working. (Ex. A2 at 1.) As a result, Respondent could not accurately measure the Facility's flow. (Test. of Christensen.) In a February 8, 2009 email communication to Mr. Christensen, Respondent reported the Facility's water meter needed to be repaired and properly calibrated. In a February 10, 2009 response, Mr. Christensen responded that "You as the owner and permit holder need to get the meter issue resolved. Many meters at wastewater plants are installed in wet locations and function just fine. It is your challenge to get a meter installed that provides reliable information on the flow from your plant..." (Ex. A4 at 1.)

19. On October 15, 2008, DEQ issued a letter to Respondent, explaining that his discharge monitoring reports (DMRs) did not meet the minimum monitoring and reporting requirements set forth in Schedule B of the permit. Specifically, the letter explained that Respondent's August 2008 DMR included one day of pH sampling on the plant influent, but that the Permit required influent pH monitoring twice each week. (Ex. A3 at 1.) The letter further explained that Respondent's DMRs did not contain daily flow (in millions of gallons), as required by the Permit. (*Id.*)

20. On or about December 30, 2008, DEQ discussed DMR requirements with Respondent. DEQ explained to Respondent that the Facility's operator was expected to submit complete, accurate, and legible reports in a timely manner. DEQ discussed with Respondent that DMRs needed to include all required data, and that any DMR submitted with missing data needed to include a written explanation regarding what information was missing, why it was missing, and when it would be provided. (Ex. A5.)

21. On July 7, 2009, DEQ issued a Preenforcement Notice to Respondent, alleging that Respondent violated several conditions of the Permit, including: 1) failure to include operator certification information in the DMRs; 2) failure to meet minimum monitoring, including influent pH monitoring twice per week, mass amounts for BOD and TSS, and bacteria results; 3) failure to timely submit DMRs; 4) failure to accurately report or provide flow measurement; 5) failure to meet the effluent pH limit. (Ex. A6.)

22. On July 21, 2009, Respondent submitted a written response to the July 7, 2009 Preenforcement Notice. (Ex. A8.) In his response, Respondent included his operator certificate numbers and expiration dates. (*Id.* at 2.) Respondent also included a spreadsheet that contained levels for influent and effluent BOD and TSS, effluent E. coli, and ammonia levels. (*Id.* at 4.)

Respondent explained that pH measurements were missing from his DMRs because the pH electrodes were defective and had to be replaced, and that "equipment failure is a fact of life." (*Id.* at 2.) Finally, Respondent explained that, at most, the Facility put out less than 2.2 pounds of BOD or TSS per day in the summer, and no more than 3.3 pounds per day during the winter. Respondent questioned why DEQ would require him to report the BOD and/or TSS measurements when "we have forever at a maximum put out at most 3.5 ounces per day." (*Id.*)

23. DEQ estimates that Respondent would have incurred a cost of $500 to take two pH samples at least twice per week between June 1, 2008 and June 1, 2009. (Ex. A11 at 3.) DEQ used the U.S. Environmental Protection Agency's BEN computer model to estimate that by avoiding this cost, Respondent benefited by $312. (Ex. A11.)

24. DEQ estimates it would have cost Respondent approximately $25 per month to take bacteria samples for the months of May, June, and September 2008, as well as January, May, and June 2009. (Ex. A11 at 3.) DEQ used the U.S. Environmental Protection Agency's BEN computer model to estimate that by avoiding this cost, Respondent benefited by $94. (Ex. A11.)

25. DEQ estimates it would have cost Respondent $2,800 to replace the Facility's flow meter. (Ex. A11 at 3.) DEQ used the U.S. Environmental Protection Agency's BEN computer model to estimate that by avoiding the cost, Respondent benefited by $2,101. (Ex. A11.)

## CONCLUSIONS OF LAW

1. Respondent violated ORS 468B.025 by failing to perform monthly effluent mass amount Biochemical Oxygen Demand calculations and reporting required by Schedule B, Condition 1(b) of the Permit.

2. Respondent violated ORS 468B.025 by failing to perform the monthly effluent mass amount Total Suspended Solids calculation and reporting required by Schedule B, Condition 1(b) of the Permit.

3. Respondent violated ORS 468B.025 by failing to perform the influent monitoring data for pH at a minimum frequency of two times per week, as required by Schedule B, Condition 1(a)(1) of the Permit.

4. Respondent violated ORS 468B.025 by failing to report the monthly effluent monitoring and sampling for bacteria, required by Schedule B, Condition 1(b) of the Permit.

5. Respondent violated ORS 468B.025 by discharging treated effluent from its wastewater treatment system that was not within the range of 6.0 to 9.0 pH, as required by Schedule A, Condition 1(a)(3) of the Permit.

6. Respondent violated ORS 468B.025 by failing to include operator certification information on the discharge monitoring reports, as required by Schedule B, Condition 2(b) of the Permit.

7. Respondent violated ORS 468B.025 by failing to properly operate and maintain the Facility's systems of treatment and control, specifically the Facility's flow meter, as required by Schedule F, Section B, Condition 1 of the Permit.

8. A civil penalty in the amount of $18,797 is appropriate.

## OPINION

DEQ bears the burden of proving its allegations by a preponderance of the evidence. ORS 183.450(2) and (5); *Reguero v. Teachers Standards and Practices Commission*, 312 Or 402, 418 (1991) (burden is on Commission in disciplinary action); *Cook v. Employment Div.*, 47 Or App 437 (1980) (in the absence of legislation adopting a different standard, the standard of proof in administrative hearings is preponderance of the evidence). Proof by a preponderance of the evidence means that the fact finder is convinced that the facts asserted are more likely true than false. *Riley Hill General Contractor v. Tandy Corp.*, 303 Or 390, 402 (1987).

Respondent contends that he did not fail to collect the monitoring data required by the Permit. Respondent argues that he did in fact collect the data, but failed to include the measurements in the DMRs submitted to DEQ. Respondent further contends that nothing in DEQ's statutes or rules prohibit him from amending DMRs after they have been submitted. Respondent argues that he amended many of the DMRs to include the missing BOD measurements (and other missing measurements) after submitting the initial DMRs to DEQ.

Respondent's arguments are unpersuasive. The evidence establishes that Respondent submitted incomplete DMRs. That Respondent may have amended the Facility's DMRs after they were submitted does not absolve him from meeting the Permit conditions. The Permit conditions are clear. The conditions require Respondent to follow specific reporting procedures, including submitting monitoring reports for each calendar month on the 15th of the following month with each system classification required in the Permit. Therefore, DEQ established that Respondent violated conditions of the Permit, and that civil penalties should be imposed for those violations.

Pursuant to OAR 340-012-0026, one of DEQ's enforcement goals is to protect the public health and the environment. Under OAR 340-012-0026(5), the department assesses civil penalties based on the class of violation, the magnitude of violation, the application of the penalty matrices and aggravating and mitigating factors, and the economic benefit realized by the Respondent. DEQ established Respondent violated multiple requirements of his NPDES Permit.

### Applicable statutes and rules

Each violation is addressed, in turn, below, and the penalty calculations are based on the following statutes and rules.

ORS 468B.025 provides:

> (1) Except as provided in ORS 468B.050 or 468B.053, no person shall:
>
> (a) Cause pollution of any waters of the state or place or cause to be placed any wastes in a location where such wastes are likely to escape or be carried into the waters of the state by any means.
>
> (b) Discharge any wastes into the waters of the state if the discharge reduces the quality of such waters below the water quality standards established by rule for such waters by the Environmental Quality Commission.
>
> (2) No person shall violate the conditions of any waste discharge permit issued under ORS 468B.050.
>
> (3) Violation of subsection (1) or (2) of this section is a public nuisance.

OAR 340-012-0055 provides, in part:

> (1) **Class I:**
>
> * * * * *
>
> (o) Failing to collect monitoring data required in Schedule B of the permit[.]
>
> * * * * *
>
> (2) **Class II:**
>
> * * * * *
>
> (d) Violating any management, monitoring, or operational plan established pursuant to a waste discharge permit, unless otherwise classified; or
>
> * * * * *
>
> (3) **Class III**:
>
> (a) Failing to submit a complete discharge monitoring report[.]

(b) Violating a technology based effluent limitation, except for removal efficiency, in an NPDES or WPCF permit if:

* * * * *

(B) the discharge is outside the permitted pH range by 1 pH unit or less[.]

OAR 340-012-0130 provides, in part:

(1) For each civil penalty assessed, the magnitude is moderate unless:

(a) A selected magnitude is specified in 340-012-0135 and information is reasonably available to the department to determine the application of that selected magnitude; or

(b) The department determines, using information reasonably available to it, that the magnitude should be major under section (3) or minor under section (4).

Base penalties are determined as set forth in OAR 340-012-0140, which provides, in part:

(1) Except for Class III violations and for penalties assessed under OAR 340-012-0155, the base penalty (BP) is determined by applying the type, class and magnitude of the violation to the matrices set forth in this section. For Class III violations, no magnitude determination is required.

* * * * *

(4) $2,500 Penalty Matrix:

* * * * *

(b) The base penalty values for the $2,500 penalty matrix are as follows:

(A) Class I:

* * * * *

(ii) Moderate -- $1250[.]

* * * * *

(B) Class II:

* * * * *

(ii) Moderate -- $625

* * * * *

(C) Class III: $200

OAR 340-012-0145 provides, in part:

(2) "P" is whether the respondent has any prior significant actions (PSAs). A violation becomes a PSA on the date the first FEA in which it is cited is issued.

(a) Except as otherwise provided in this section, the values for "P" and the finding that supports each are as follows:

* * * * *

(C) 2 if the PSA (s) included one Class I violation or Class I equivalent.

(D) For each additional Class I violation or Class I equivalent, the value of "P" is increased by 1.

* * * * *

(3) "H" is the respondent's history of correcting PSAs.

(a) The values for "H" and the finding that supports each are as follows:

* * * * *

(B) -1 if the violations were uncorrectable and the respondent took reasonable efforts to minimize the effects of the violations cited as PSAs; or

* * * * *

(4) "O" is whether the violation was repeated or ongoing.

(a) The values for "O" and the finding that supports each are as follows:

* * * * *

(B) 2 if the violation recurred on the same day, or existed for or occurred on more than one day up to and including six days, which need not be consecutive days.

(C) 3 if the violation existed for or occurred from seven to 28 days, which need not be consecutive days.

(D) 4 if the violation existed for or occurred on more than 28 days, which need not be consecutive days.

* * * * *

(5) "M" is the mental state of the respondent. For any violation where the findings support more than one mental state, the mental state with the highest value will apply.

(a) The values for "M" and the finding that supports each are as follows:

* * * * *

(B) 2 if the respondent's conduct was negligent or the respondent had constructive knowledge (reasonably should have known) that the conduct would be a violation. Holding a permit that prohibits or requires conduct is presumed to constitute at least constructive knowledge and may be actual knowledge depending in the specific facts of the case.

(C) 6 if the respondent's conduct was reckless, or the respondent had actual knowledge that its conduct would be a violation and respondent's conduct was intentional. A respondent that previously received a Notice of Noncompliance, WL, PEN or any FEA for the same violation is presumed to have actual knowledge. Holding a permit that prohibits or requires conduct may be actual knowledge depending on the specific facts of the case.

* * * * *

(6) "C" is the respondent's efforts to correct the violation.

(a) The values for "C" and the finding that supports each are as follows:

* * * * *

(D) 0 if there is insufficient information to make a finding under paragraphs (6)(a)(A) through (6)(a)(C), or (6)(a)(E), or if the violation or the effects of the violation could not be corrected or minimized.

(E) 2 if the respondent did not address the violation as described in paragraphs (6)(a)(A) through (6)(a)(C) and the facts do not support a finding under paragraph (6)(a)(D).

OAR 340-012-0150(1) provides:

The Economic Benefit (EB) is the approximate dollar value of the benefit gained and the costs avoided or delayed (without duplication) as a result of the respondent's noncompliance. The EB may be determined using the U.S. Environmental Protection Agency's BEN computer model. Upon request of the respondent, the department will provide the name of the version of the model used and respond to any reasonable request for information about the content or operation of the model. The model's standard values for income tax rates, inflation rate and discount rate are presumed to apply to all respondents unless a specific respondent can demonstrate that the standard value does not reflect that respondent's actual circumstance. Upon request of the Respondent, the department will use the model in determining the economic benefit component of a civil penalty.

**Violation 1: Failure to perform monthly effluent mass BOD calculations and reporting**

*a. Discussion*

Schedule B, Condition 1(b) of the Permit requires Respondent to provide $BOD_5$ effluent flow measurements on a monthly basis. The evidence establishes that during each month for the period April 2008 through June 2009, Respondent submitted reports to DEQ that did not contain $BOD_5$ effluent mass data. Therefore, Respondent failed to comply with Schedule B, Condition 1(b) of the Permit.

*b. Penalty*

Failure to collect monitoring data required in Schedule B of the Permit is a Class I violation. OAR 340-012-0055(1)(o). This is a moderate magnitude violation, because there is no selected magnitude specified in OAR 340-012-0135 for this violation, and the evidence does not establish a minor or major magnitude. OAR 340-012-0130(1).

The "BP" for a Class I moderate magnitude violation is $1,250. OAR 340-012-0140(4)(b)(A)(ii). Respondent receives a "P" value of 9 because Respondent has 7 Class I and 2 Class II violations from significant actions in the same media. OAR 340-012-0145(2)(a)(C) and (D). Respondent receives an "H" value of -1 because some of the violations were uncorrectable, but Respondent took reasonable efforts to minimize the effects of some of his prior violations by repairing the failing wastewater treatment system and by obtaining an operator certificate. OAR 340-012-0145(3)(a)(B). Respondent receives an "O" value of 3 because the violation existed from 7 to 28 days, and because Respondent violated the permit condition during 15 different months. OAR 340-012-0145(4)(a)(C). Respondent receives an "M" value of 6 because Respondent engaged in reckless conduct. Respondent has had a NPDES Permit for his Facility since 2002 and has been issued civil penalties in 2001, 2006, and 2008, and had actual knowledge that his conduct would violate the Permit conditions. OAR 340-012-0145(5)(a)(C). Respondent receives a "C" value of 0 because his failure to report the required information in a timely manner could not be minimized. OAR 340-012-0145(6)(a)(D). Respondent's "EB" is $0 because the Department has insufficient evidence to base a finding that Respondent received an economic benefit from this particular violation.

Therefore, Respondent's penalty for violation 1 is:

Penalty = BP + [(0.1 x BP) x (P + H + O + M + C) + EB
= $1,250 + [(0.1 x $1,250) x (9 + -1 + 3 + 6 + 0)] + $0
= $1,250 + $2,125 + $0
= $3,375

**Violation 2: Failure to perform monthly TSS calculation and reporting**

*a. Discussion*

Schedule B, Condition 1(b) of the Permit requires Respondent to submit monthly effluent TSS flow. During each month for the period April 2008 through June 2009, Respondent submitted DMRs that failed to include information regarding TSS effluent mass data (pounds discharged) as required by Schedule B, Condition 1(b) of the Permit. Therefore, Respondent violated this Permit condition.

*b. Penalty*

Failure to collect monitoring data required in Schedule B of the Permit is a Class I violation. OAR 340-012-0055(1)(o). This is a moderate magnitude violation, because there is no selected magnitude specified in OAR 340-012-0135 for this violation, and the evidence does not establish a minor or major magnitude. OAR 340-012-0130(1).

As previously discussed, the "BP" for a Class I, moderate magnitude violation, is $1,250. Also, as previously discussed, Respondent receives a "P" value of 9 because Respondent has seven Class I and two Class II violations from prior significant actions in the same media. Respondent receives an "H" value of -1 because some of his violations were uncorrectable, but Respondent did take some reasonable efforts to minimize the effects of some prior violations.

Respondent receives an "O" value of 3 because the violation existed from 7 to 28 days, and because Respondent violated the permit condition during 15 different months. OAR 340-012-0145(4)(a)(C). As previously discussed, Respondent receives an "M" value of 6. OAR 340-012-0145(5)(a)(C). Respondent receives a "C" value of 0 because his failure to report the required information in a timely manner could not be minimized. OAR 340-012-0145(6)(a)(D). Respondent's "EB" is $0 because the Department has insufficient evidence to base a finding that Respondent received an economic benefit from this particular violation.

Therefore, Respondent's penalty for violation 2 is:

Penalty = BP + [(0.1 x BP) x (P + H + O + M + C) + EB
= $1,250 + [(0.1 x $1,250) x (9 + -1 + 3 + 6 + 0)] + $0
= $1,250 + $2,125 + $0
= $3,375

**Violation 3: Failure to perform influent monitoring data for pH at a minimum frequency of two times per week**

*a. Discussion*

Schedule B, Condition 1(a) of the Permit requires Respondent to report influent monitoring data for pH at a minimum of twice per week. For each month during the period June 2008 through June 2009, Respondent failed to collect and report the required information. Therefore, Respondent violated Schedule B, Condition 1(a) of the Permit.

*b. Penalty*

Failure to collect monitoring data required in Schedule B of the Permit is a Class I violation. OAR 340-012-0055(1)(o). This is a moderate magnitude violation, because there is no selected magnitude specified in OAR 340-012-0135 for this violation, and the evidence does not establish a minor or major magnitude. OAR 340-012-0130(1).

As previously discussed, the "BP" for a Class I, moderate magnitude violation, is $1,250. Also, as previously discussed, Respondent receives a "P" value of 9 because Respondent has seven Class I and two Class II violations from prior significant actions in the same media. Respondent receives an "H" value of -1 because some of his violations were uncorrectable, but Respondent did take some reasonable efforts to minimize the effects of some prior violations. Respondent receives an "O" value of 3 because the violation existed for or occurred from 7 to 28 days, and Respondent violated the conditions of the Permit during 13 different months. OAR 340-012-0145(4)(a)(C). Respondent receives an "M" value of 6 because Respondent's conduct was reckless and intentional. Respondent possessed an NPDES Permit for the Facility since 2002. The Permit sets forth the conditions for pH and required sampling, but Respondent repeatedly disregarded this condition. OAR 340-012-0145(5)(a)(C). Respondent receives a "C" value of 0 because his failure to report the required information in a timely manner could not be minimized. OAR 340-012-0145(6)(a)(D).

DEQ estimates that Respondent would have incurred a cost of $500 to take two pH samples at least twice per week between June 1, 2008 and June 1, 2009. DEQ computed an "EB" of $312 for this violation, in accordance with OAR 340-012-0150(1), using the U.S. Environmental Protection Agency's BEN computer model.

Therefore, Respondent's penalty for violation 3 is:

Penalty = BP + [(0.1 x BP) x (P + H + O + M + C) + EB
= $1,250 + [(0.1 x $1,250) x (9 + -1 + 3 + 6 + 0)] + $312
= $1,250 + [($125) x (17)] + $312
= $1,250 + $2,125 + $312
= $3,687

**Violation 4: Failure to report monthly effluent monitoring and sampling for bacteria**

*a. Discussion*

Schedule B, Condition 1(b) of the Permit requires Respondent to measure and report effluent E. coli levels on a monthly basis. For the months of May, June, and September 2008, as well as January, May, and June 2009, Respondent failed to report effluent monitoring data for E. coli bacteria levels. Therefore, Respondent failed to comply with Schedule B, Condition 1(b) of the Permit.

*b. Penalty*

Failure to collect monitoring data required in Schedule B of the permit is a Class I violation. OAR 340-012-0055(1)(o). This is a moderate magnitude violation, because there is no selected magnitude specified in OAR 340-012-0135 for this violation, and the evidence does not establish a minor or major magnitude. OAR 340-012-0130(1).

As previously discussed, the BP for a Class I, moderate magnitude violation, is $1,250. Also, as previously discussed, Respondent receives a "P" value of 9 because Respondent has seven Class I and two Class II violations from prior significant actions in the same media. Respondent receives an "H" value of -1 because some of his violations were uncorrectable, but Respondent did take some reasonable efforts to minimize the effects of some prior violations. Respondent receives an "O" value of 2 because this violation existed or occurred on more than one day and up to, and including, six days. Respondent violated this Permit condition during six different months. OAR 340-012-0145(4)(a)(B). As previously discussed, Respondent receives an "M" value of 6 because his conduct was reckless and intentional. Respondent possessed an NPDES Permit for the Facility since 2002. The Permit sets forth the conditions and requirements for compliance. In 2001, 2007, and 2008, DEQ issued Respondent civil penalties for permit violations. Respondent knew the Permit set forth conditions for E. coli sampling, but he repeatedly disregarded this condition. Respondent receives a "C" factor of 0 because the violation could not be corrected or minimized. OAR 340-012-0145(6)(a)(D).

DEQ estimates it would have cost Respondent approximately $25 per month to take bacteria samples for the months of May, June, and September 2008, as well as January, May, and June 2009. Pursuant to OAR 340-012-0150(1) and the U.S. Environmental Protection Agency's BEN computer model, DEQ computed Respondent's "EB" as $94.

Therefore, Respondent's penalty for violation 4 is:

Penalty = BP + [(0.1 x BP) x (P + H + O + M + C) + EB
= $1,250 + [(0.1 x $1,250) x (9 + -1 + 2 + 6 + 0)] + $94
= $1,250 + [($125) x (16)] + $94
= $1,250 + $2,000 + $94
= $3,344

**Violation 5: Discharging treated effluent from wastewater treatment system not within required pH range**

*a. Discussion*

Schedule A, Condition 1(a)(3) of the Permit requires that waste discharge fall within a range of 6.0 to 9.0 pH. On January 1, 6, 7, 8, 9, 10, and 11, 2009, as well as May 16, 2009, Respondent reported that the treated effluent from its wastewater treatment system was not within the range required by the Permit. Therefore, Respondent failed to comply with the terms of the Permit.

*b. Penalty*

Discharge that is outside the permitted pH range by 1 pH unit or less is a Class III violation. OAR 340-012-0055(3)(b)(B). This is a moderate magnitude violation, because there is no selected magnitude specified in OAR 340-012-0135 for this violation, and the evidence does not establish a minor or major magnitude. OAR 340-012-0130(1).

Respondent receives a "BP" of $200 for this Class III, moderate magnitude, violation. OAR 340-012-0140(4)(b)(C). As previously discussed, Respondent receives a "P" value of 9 because Respondent has seven Class I and two Class II violations from prior significant actions in the same media. Respondent receives an "H" value of -1 because some of his violations were uncorrectable, but Respondent did take some reasonable efforts to minimize the effects of some violations by eventually repairing the wastewater treatment system that was failing and by obtaining an operator certificate. Respondent receives an "O" value of 3 because the violation existed from 7 to 28 days, and because Respondent violated this Permit condition on 8 different days. OAR 340-012-0145(4)(a)(C). Respondent receives an "M" value of 2 because Respondent's conduct was negligent. The effluent limitation for pH is clearly set forth in the Permit. Respondent knew, or should have known, that discharging effluent that exceeded a Permit limitation would result in a violation. Respondent failed to exercise reasonable care to ensure that the effluent was properly treated. OAR 340-012-0145(5)(a)(B). Respondent receives a "C" factor of 0 because the violation could not be corrected or minimized. OAR 340-012-

0145(6)(a)(D). Respondent receives an "EB" of $0 because there is no evidence that Respondent received an economic benefit from the violation.

Therefore, Respondent's penalty for violation 5 is:

Penalty = BP + [(0.1 x BP) x (P + H + O + M + C) + EB
= $200 + [(0.1 x $200) x (9 + -1 + 3 + 2 + 0)] + $0
= $200 + $260 + $0
= $460

**Violation 6: Failure to include operator certification information on discharge monitoring reports**

*a. Discussion*

Schedule B, Condition 2(b) of the Permit requires Respondent to provide operator name, certificate classification, and grade of each principal operator of the Facility's wastewater treatment system on monitoring reports. For the months of April, May, June, July, August, and December 2008, as well as January, February, March, and May 2009, Respondent submitted DMRs without including the required information. Therefore, Respondent violated Schedule B, Condition 2(b) of the Permit.

*b. Penalty*

Failure to submit a complete discharge monitoring report is a Class III violation. OAR 340-012-0055(3)(a). The magnitude of the violation is moderate, as there is no selected magnitude specified in OAR 340-012-0135 for this violation, and there is no evidence to indicate this violation is minor or major. OAR 340-012-0130(1).

The "BP" for a Class III, moderate magnitude violation, is $200. OAR 340-012-0140(4)(b)(C). As previously discussed, Respondent receives a "P" value of 9 because Respondent has seven Class I and two Class II violations from prior significant actions in the same media. Respondent receives an "H" value of -1 because some of his violations were uncorrectable, but Respondent did take some reasonable efforts to minimize the effects of some prior violations. Respondent receives an "O" value of 3 because the violation existed from 7 to 28 days, and because Respondent violated this Permit condition during 10 different months. OAR 340-012-0145(4)(a)(C). Respondent receives an "M" value of 6 because Respondent's conduct was reckless. Respondent possessed an NPDES Permit for the Facility since 2002. The Permit sets forth the conditions and requirements for compliance. In 2001, 2006, and 2008, DEQ issued Respondent civil penalties for permit violations. Respondent was made aware of the Permit requirement regarding operator certification information on more than one occasion, but repeatedly failed to provide the required information. OAR 340-012-0145(5)(a)(C). Respondent receives a "C" value of 2 because Respondent could have provided the information, but did not. OAR 340-012-0145(6)(a)(E). Respondent receives an "EB" of $0 because there is no evidence that Respondent received an economic benefit from the violation.

Therefore, Respondent's penalty for violation 6 is:

Penalty = BP + [(0.1 x BP) x (P + H + O + M + C) + EB
= $200 + [(0.1 x $200) x (9 + -1 + 3 + 6 + 2)] + $0
= $200 + [($20)x (19)] + $0
= $200 + $390 + $0
= $580

**Violation 7: Failure to properly operate and maintain Facility's systems of treatment and control**

*a. Discussion*

Schedule F, Section 1, Condition 1 of the Permit requires Respondent to properly operate and maintain all facilities and systems of treatment and control that are installed or used to achieve compliance with the conditions of the Permit. On or about April 25, 2008, Respondent's flow meter stopped working. In October 2008, DEQ wrote to Respondent and informed him that he was required to report daily flow (in millions of gallons). In February 2009, DEQ communicated to Respondent that it was his responsibility to replace the flow meter. As a result of the broken flow meter, Respondent could not accurately measure the Facility's flow, as required by the Permit. As such, Respondent failed to comply with Schedule F, Section 1, Condition 1 of the Permit.

*b. Penalty*

Violating any management, monitoring, or operational plan established pursuant to a waste discharge permit, unless otherwise classified, is a Class II violation. OAR 340-012-0055(2)(d). The magnitude of the violation is moderate, as there is no selected magnitude specified in OAR 340-012-0135 for this violation, and there is no evidence to indicate this violation is minor or major. OAR 340-012-0130(1).

The "BP" for a Class II, moderate magnitude violation, is $625. OAR 340-012-0140(4)(b)(B)(ii). As previously discussed, Respondent receives a "P" value of 9 because Respondent has seven Class I and two Class II violations from prior significant actions in the same media. Respondent receives an "H" value of -1 because some of his violations were uncorrectable, but Respondent did take some reasonable efforts to minimize the effects of some prior violations. Respondent receives an "O" value of 4 because the violation existed on more than 28 days. The violation started on or about April 25, 2008 when Respondent's flow meter stopped working, and was ongoing through at least May 2009. OAR 340-012-0145(4)(a)(D). Respondent receives an "M" value of 6 because Respondent's conduct was reckless. Respondent possessed an NPDES Permit for the Facility since 2002. The Permit sets forth the conditions and requirements for compliance. In 2001, 2007, and 2008, DEQ issued Respondent civil penalties for permit violations. Respondent was aware of the Permit requirements that he have a functional flow meter at the Facility, that he measure flow from the meter, and report the results each month. Respondent receives a "C" value of 2 because Respondent could have provided the information, but did not. OAR 340-012-0145(6)(a)(E).

DEQ estimates that it would have cost Respondent $2,800 to for a new flow meter. DEQ computed an "EB" of $2,101 for this violation, in accordance with OAR 340-012-0150(1), using the U.S. Environmental Protection Agency's BEN computer model.

Therefore, Respondent's penalty for violation 7 is:

Penalty = BP + [(0.1 x BP) x (P + H + O + M + C) + EB
= $625 + [(0.1 x $625) x (9 + -1 + 4 + 6 + 2)] + $2,101
= $625 + [($62.50) x (20)] + $2,101
= $625 + $1,250 + $2,101
= $3,976

**Conclusion**

For the aforementioned reasons, DEQ established Respondent violated conditions set forth in the Permit, and that a civil penalty is appropriate for the violations. The total civil penalty with which Respondent shall be assessed is $18,797 ($3,375 + $3,375 + $3,687 + $3,344 + $460 + $580 + $3,976).

**ORDER**

*I propose DEQ issue the following order:*

Respondent, Magar Edward Magar, is hereby assessed a civil penalty in the amount of $18,797.

Monica A. Whitaker
Senior Administrative Law Judge
Office of Administrative Hearings

**APPEAL RIGHTS**

If you are not satisfied with this decision, you have the right to have the decision reviewed by the Oregon Environmental Quality Commission (Commission). To have the decision reviewed, you must file a "Petition for Review" within 30 days of the date this order is served on you. Service, as defined in Oregon Administrative Rule (OAR) 340-011-0525, means the date that the decision is **mailed** to you, and not the date that you receive it.

The Petition for Review must comply with OAR 340-011-0575 and must be **received** by the Commission within 30 days of the date the Proposed and Final Order was mailed to you. You should mail your Petition for Review to:

Environmental Quality Commission
c/o Dick Pedersen, Director, DEQ
811 SW Sixth Avenue
Portland, OR 97204.

You may also fax your Petition for Review to (503) 229-6762 (the Director's Office).

Within 30 days of filing the Petition for Review, you must also file exceptions and a brief as provided in OAR 340-011-0575. The exceptions and brief must be **received** by the Commission within 30 days from the date the Commission received your Petition for Review. If you file a Petition but not a brief with exceptions, the Environmental Quality Commission may dismiss your Petition for Review.

If the Petition, exceptions and brief are filed in a timely manner, the Commission will set the matter for oral argument and notify you of the time and place of the Commission's meeting. The requirements for filing a petition, exceptions and briefs are set out in OAR 340-011-0575.

Unless you timely file a Petition for Review as set forth above, this Proposed Order becomes the Final Order of the Commission 30 days from the date this Proposed Order is mailed to you. If you wish to appeal the Final Order, you have 60 days from the date the Proposed Order becomes the Final Order to file a petition for review with the Oregon Court of Appeals. See ORS 183.480 et. seq.

## CERTIFICATE OF MAILING

On August 6, 2010, I mailed the foregoing Correct Proposed and Final Order issued on this date in OAH Case No. 901410.

By: First Class and Certified Mail
Certified Mail Receipt #7009 2250 0001 6584 6779

Magar Edward Magar
14102 NE 40th
Vancouver WA 98682

By: First Class Mail

Bryan Smith
Dept. of Environmental Quality
811 SW 6th St
Portland OR 97204

Lucy Garcia
Administrative Specialist
Hearing Coordinator

**BEFORE THE OFFICE OF ADMINISTRATIVE HEARINGS**
**STATE OF OREGON**
**for the**
**DEPT. OF ENVIRONMENTAL QUALITY**

| | | |
|---|---|---|
| IN THE MATTER OF: | ) | **NOTICE OF IN-PERSON HEARING** |
| | ) | |
| **MAGAR E MAGAR** | ) | OAH Case No.: 901410 |
| | ) | Agency Case No.: WQ/D-NWR-09-118 |

**PLEASE TAKE NOTICE** that a contested case hearing has been scheduled in the above matter before the Office of Administrative Hearings.

**Hearing Date:** **June 22, 2010 through June 23, 2010** **Hearing Time:** **9:00 am**

**Location:** **DEQ-Portland Office**
**811 SW 6th Ave**
**Portland OR 97204**

Your case has been assigned to **Administrative Law Judge Monica Whitaker** an employee of the Office of Administrative Hearings. The Office of Administrative Hearings is an impartial tribunal, and is independent of the agency proposing the action.

Unless otherwise notified, all correspondence, inquiries, exhibits and filings should be sent to:

Monica Whitaker
Office of Administrative Hearings
7995 SW Mohawk St.
Tualatin, OR 97062
Fax: (503) 612-4340

OAR 137-003-0520 requires a copy of any correspondence, exhibits or other filings to be provided to all parties and the agency at the same time they are provided to the ALJ. **Please use the OAH case number above on all correspondence and filings.**

A request for reset of the hearing must be submitted in writing prior to the hearing. A postponement request will only be granted on a showing of good cause and with the approval of the administrative law judge.

**If you are hearing impaired, need a language interpreter or require another type of accommodation to participate in or attend the hearing, immediately notify the Office of Administrative Hearings at (503) 947-1637 or TDD at 1-800-735-1232 to make the appropriate arrangements. The Office of Administrative Hearings can arrange for an interpreter at the hearing. Interpreters must be certified or qualified in order to participate in a contested case hearing and may not have a conflict of interest with the hearing participants.**

You are required to notify the Office of Administrative Hearings at (503) 947-1637 immediately if you change your address or telephone number prior to a decision in this matter.

DEPARTMENT OF ENVIRONMENTAL QUALITY HEARINGS

IMPORTANT INFORMATION FOR PREPARING FOR YOUR HEARING

NOTICE OF CONTESTED CASE RIGHTS AND PROCEDURES

Under ORS 183.413(2), you must be informed of the following:

1. Law that applies. The hearing is a contested case and it will be conducted under ORS Chapter 183 and Oregon Administrative Rules of the Department of Environmental Quality, Chapters 137 and 340.

2. Rights to an attorney. You may represent yourself at the hearing, or be represented by an attorney or an authorized representative, such as a partner, officer, or an employee. If you are a company, corporation, organization or association, you must be represented by an attorney or an authorized representative. Prior to appearing on your behalf, an authorized representative must provide a written statement of authorization. If you choose to represent yourself, but decide during the hearing that an attorney is necessary, you may request a recess. About half of the parties are not represented by an attorney. DEQ will be represented by an Assistant Attorney General or an Environmental Law Specialist.

3. Administrative law judge. The person presiding at the hearing is known as the administrative law judge. The administrative law judge is an employee of the Office of Administrative Hearings under contract with the Environmental Quality Commission. The administrative law judge is not an employee, officer or representative of the agency.

4. Appearance at hearing. If you withdraw your request for a hearing, notify either DEQ or the administrative law judge that you will not appear at the hearing, or fail to appear at the hearing, a final default order will be issued. This order will be issued only upon a prima facie case based on DEQ's file. No hearing will be conducted.

5. Address change or change of representative. It is your responsibility to notify DEQ and the administrative law judge of any change in your address or a withdrawal or change of your representative.

6. Interpreters. If you have a disability or do not speak English, the administrative law judge will arrange for an interpreter. DEQ will pay for the interpreter if (1) you require the interpreter due to a disability or (2) you file with the administrative law judge a written statement under oath that you are unable to speak English and you are unable to obtain an interpreter yourself. You must provide notice of your need for an interpreter at least 14 days before the hearing.

7. Witnesses. All witnesses will be under oath or affirmation to tell the truth. All parties and the administrative law judge will have the opportunity to ask questions of all witnesses. DEQ or the administrative law judge will issue subpoenas for witnesses on your behalf if you show that their testimony is relevant to the case and is reasonably needed to establish your position. You are not required to issue subpoenas for appearance of your own witnesses. If you are represented by an attorney, your attorney may issue subpoenas. Payment of witness fees and mileage is your responsibility.

8. Order of evidence. A hearing is similar to a court trial but less formal. The purpose of the hearing is to determine the facts and whether DEQ's action is appropriate. In most cases, DEQ will offer its evidence first in support of its action. You will then have an opportunity to present evidence to oppose DEQ's evidence. Finally, DEQ and you will have an opportunity to rebut any evidence.

9. Burden of presenting evidence. The party who proposes a fact or position has the burden of proving that fact or position. You should be prepared to present evidence at the hearing which will support your position. You may present physical, oral or written evidence, as well as your own testimony.

10. Admissible evidence. Only relevant evidence of a type relied upon by reasonably prudent persons in the conduct of their serious affairs will be considered. Hearsay evidence is not automatically excluded. Rather, the fact that it is hearsay generally affects how much the Commission will rely on it in reaching a decision.

There are four kinds of evidence:

a. Knowledge of DEQ and the administrative law judge. DEQ or the administrative law judge may take "official notice" of conclusions developed as a result of its knowledge in its specialized field. This includes notice of general, technical or scientific facts. You will be informed should DEQ or the administrative law judge take "official notice" of any fact and you will be given an opportunity to contest any such facts.

b. Testimony of witnesses. Testimony of witnesses, including you, who have knowledge of facts may be received in evidence.

c. Writings. Written documents including letters, maps, diagrams and other written materials may be received in evidence.

d. Experiments, demonstrations and similar means used to prove a fact. The results of experiments and demonstrations may be received in evidence if they are reliable.

11. Objections to evidence. Objections to the consideration of evidence must be made at the time the evidence is offered. Objections are generally made on one of the following grounds:

a. The evidence is unreliable;

b. The evidence is irrelevant or immaterial and has no tendency to prove or disprove any issue involved in the case;

c. The evidence is unduly repetitious and duplicates evidence already received.

12. Continuances. There are normally no continuances granted at the end of the hearing for you to present additional testimony or other evidence. Please make sure you have all your evidence ready for the hearing. However, if you can show that the record should remain open for additional evidence, the administrative law judge may grant you additional time to submit such evidence.

13. Record. A record will be made of the entire proceeding to preserve the testimony and other evidence for appeal. This will be done by tape recorder. This tape and any exhibits received in the record will be the whole record of the hearing and the only evidence considered by the administrative law judge. A copy of the tape is available upon payment of a minimal amount, as established by DEQ. A transcript of the record will not normally be prepared, unless there is an appeal to the Court of Appeals.

14. Proposed and Final Order. The administrative law judge has the authority to issue a proposed order based on the evidence at the hearing. The proposed order will become the final order of the Environmental Quality Commission if you do not petition the Commission for review within 30 days of service of the order. The date of service is the date the order is mailed to you, not the date that you receive it. The Department must receive your petition seeking review within 30 days. See OAR 340-011-0132.

15. Appeal. If you are not satisfied with the decision of the Commission, you have 60 days from the date of service of the order, to appeal this decision to the Court of Appeals. See ORS 183.480 *et seq.*

## CERTIFICATE OF MAILING

On March 12, 2010, I mailed the foregoing NOTICE OF IN-PERSON HEARING and NOTICE OF CONTESTED CASE RIGHTS AND PROCEDURES in OAH Case No. 901410.

By: First Class and Certified Mail
Certified Mail Receipt # 7009 2250 0001 6584 7424

Magar Edward Magar
14102 NE 40th
Vancouver WA 98682

By: First Class Mail

Bryan Smith
Dept. of Environmental Quality
811 SW 6th St
Portland OR 97204

Lucy Garcia
Administrative Specialist
Hearing Coordinator

**BEFORE THE OFFICE OF ADMINISTRATIVE HEARINGS**
**STATE OF OREGON**
**for the**
**DEPT. OF ENVIRONMENTAL QUALITY**

| | | |
|---|---|---|
| IN THE MATTER OF: | ) | **NOTICE OF IN-PERSON HEARING** |
| | ) | |
| **MAGAR E MAGAR** | ) | OAH Case No.: 901410 |
| | ) | Agency Case No.: WQ/D-NWR-09-118 |

**PLEASE TAKE NOTICE** that a contested case hearing has been scheduled in the above matter before the Office of Administrative Hearings.

**Hearing Date:** **May 26, 2010** **Hearing Time:** **9:00 am**

**Location:** **DEQ-Portland Office**
**811 SW 6th Ave**
**Portland OR 97204**

Your case has been assigned to **Administrative Law Judge Monica Whitaker** an employee of the Office of Administrative Hearings. The Office of Administrative Hearings is an impartial tribunal, and is independent of the agency proposing the action.

Unless otherwise notified, all correspondence, inquiries, exhibits and filings should be sent to:

Monica Whitaker
Office of Administrative Hearings
7995 SW Mohawk St.
Tualatin, OR 97062
Fax: (503) 612-4340

OAR 137-003-0520 requires a copy of any correspondence, exhibits or other filings to be provided to all parties and the agency at the same time they are provided to the ALJ. **Please use the OAH case number above on all correspondence and filings.**

A request for reset of the hearing must be submitted in writing prior to the hearing. A postponement request will only be granted on a showing of good cause and with the approval of the administrative law judge.

**If you are hearing impaired, need a language interpreter or require another type of accommodation to participate in or attend the hearing, immediately notify the Office of Administrative Hearings at (503) 947-1637 or TDD at 1-800-735-1232 to make the appropriate arrangements. The Office of Administrative Hearings can arrange for an interpreter at the hearing. Interpreters must be certified or qualified in order to participate in a contested case hearing and may not have a conflict of interest with the hearing participants.**

You are required to notify the Office of Administrative Hearings at (503) 947-1637 immediately if you change your address or telephone number prior to a decision in this matter.

DEPARTMENT OF ENVIRONMENTAL QUALITY HEARINGS

IMPORTANT INFORMATION FOR PREPARING FOR YOUR HEARING

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1. Law that applies. The hearing is a contested case and it will be conducted under ORS Chapter 183 and Oregon Administrative Rules of the Department of Environmental Quality, Chapters 137 and 340.

2. Rights to an attorney. You may represent yourself at the hearing, or be represented by an attorney or an authorized representative, such as a partner, officer, or an employee. If you are a company, corporation, organization or association, you must be represented by an attorney or an authorized representative. Prior to appearing on your behalf, an authorized representative must provide a written statement of authorization. If you choose to represent yourself, but decide during the hearing that an attorney is necessary, you may request a recess. About half of the parties are not represented by an attorney. DEQ will be represented by an Assistant Attorney General or an Environmental Law Specialist.

3. Administrative law judge. The person presiding at the hearing is known as the administrative law judge. The administrative law judge is an employee of the Office of Administrative Hearings under contract with the Environmental Quality Commission. The administrative law judge is not an employee, officer or representative of the agency.

4. Appearance at hearing. If you withdraw your request for a hearing, notify either DEQ or the administrative law judge that you will not appear at the hearing, or fail to appear at the hearing, a final default order will be issued. This order will be issued only upon a prima facie case based on DEQ's file. No hearing will be conducted.

5. Address change or change of representative. It is your responsibility to notify DEQ and the administrative law judge of any change in your address or a withdrawal or change of your representative.

6. Interpreters. If you have a disability or do not speak English, the administrative law judge will arrange for an interpreter. DEQ will pay for the interpreter if (1) you require the interpreter due to a disability or (2) you file with the administrative law judge a written statement under oath that you are unable to speak English and you are unable to obtain an interpreter yourself. You must provide notice of your need for an interpreter at least 14 days before the hearing.

7. Witnesses. All witnesses will be under oath or affirmation to tell the truth. All parties and the administrative law judge will have the opportunity to ask questions of all witnesses. DEQ or the administrative law judge will issue subpoenas for witnesses on your behalf if you show that their testimony is relevant to the case and is reasonably needed to establish your position. You are not required to issue subpoenas for appearance of your own witnesses. If you are represented by an attorney, your attorney may issue subpoenas. Payment of witness fees and mileage is your responsibility.

8. Order of evidence. A hearing is similar to a court trial but less formal. The purpose of the hearing is to determine the facts and whether DEQ's action is appropriate. In most cases, DEQ will offer its evidence first in support of its action. You will then have an opportunity to present evidence to oppose DEQ's evidence. Finally, DEQ and you will have an opportunity to rebut any evidence.

9. Burden of presenting evidence. The party who proposes a fact or position has the burden of proving that fact or position. You should be prepared to present evidence at the hearing which will support your position. You may present physical, oral or written evidence, as well as your own testimony.

10. Admissible evidence. Only relevant evidence of a type relied upon by reasonably prudent persons in the conduct of their serious affairs will be considered. Hearsay evidence is not automatically excluded. Rather, the fact that it is hearsay generally affects how much the Commission will rely on it in reaching a decision.

There are four kinds of evidence:

a. Knowledge of DEQ and the administrative law judge. DEQ or the administrative law judge may take "official notice" of conclusions developed as a result of its knowledge in its specialized field. This includes notice of general, technical or scientific facts. You will be informed should DEQ or the administrative law judge take "official notice" of any fact and you will be given an opportunity to contest any such facts.

b. Testimony of witnesses. Testimony of witnesses, including you, who have knowledge of facts may be received in evidence.

c. Writings. Written documents including letters, maps, diagrams and other written materials may be received in evidence.

d. Experiments, demonstrations and similar means used to prove a fact. The results of experiments and demonstrations may be received in evidence if they are reliable.

11. Objections to evidence. Objections to the consideration of evidence must be made at the time the evidence is offered. Objections are generally made on one of the following grounds:

a. The evidence is unreliable;

b. The evidence is irrelevant or immaterial and has no tendency to prove or disprove any issue involved in the case;

c. The evidence is unduly repetitious and duplicates evidence already received.

12. Continuances. There are normally no continuances granted at the end of the hearing for you to present additional testimony or other evidence. Please make sure you have all your evidence ready for the hearing. However, if you can show that the record should remain open for additional evidence, the administrative law judge may grant you additional time to submit such evidence.

13. Record. A record will be made of the entire proceeding to preserve the testimony and other evidence for appeal. This will be done by tape recorder. This tape and any exhibits received in the record will be the whole record of the hearing and the only evidence considered by the administrative law judge. A copy of the tape is available upon payment of a minimal amount, as established by DEQ. A transcript of the record will not normally be prepared, unless there is an appeal to the Court of Appeals.

14. Proposed and Final Order. The administrative law judge has the authority to issue a proposed order based on the evidence at the hearing. The proposed order will become the final order of the Environmental Quality Commission if you do not petition the Commission for review within 30 days of service of the order. The date of service is the date the order is mailed to you, not the date that you receive it. The Department must receive your petition seeking review within 30 days. See OAR 340-011-0132.

15. Appeal. If you are not satisfied with the decision of the Commission, you have 60 days from the date of service of the order, to appeal this decision to the Court of Appeals. See ORS 183.480 *et seq.*

## CERTIFICATE OF MAILING

On February 25, 2010, I mailed the foregoing NOTICE OF IN-PERSON HEARING and NOTICE OF CONTESTED CASE RIGHTS AND PROCEDURES in OAH Case No. 901410.

By: First Class and Certified Mail
Certified Mail Receipt # 7009 0820 0001 6777 4871

Magar E Magar
14102 NE 40th
Vancouver WA 98682

By: First Class Mail

Bryan Smith
Dept. of Environmental Quality
811 SW 6th St
Portland OR 97204

Lucy Garcia
Administrative Specialist
Hearing Coordinator

**BEFORE THE OFFICE OF ADMINISTRATIVE HEARINGS**
**STATE OF OREGON**
**for the**
**DEPT. OF ENVIRONMENTAL QUALITY**

| | | |
|---|---|---|
| IN THE MATTER OF: | ) | **NOTICE OF PREHEARING CONFERENCE** |
| | ) | |
| **MAGAR E MAGAR** | ) | OAH Case No.: 901410 |
| | ) | Agency Case No.: WQ/D-NWR-09-118 |

**PLEASE TAKE NOTICE** that a prehearing conference has been scheduled in the above matter before the Office of Administrative Hearings.

**Prehearing Date:** **March 1, 2010** **Prehearing Time:** **2:00 pm**

**Location:** **By Telephone: Prehearing Phone Numbers and Access Code:**

- Toll Free – 1-877-622-4041
- ACCESS CODE – 7101410

**IMPORTANT PREHEARING PHONE INSTRUCTIONS**

At the date and time of your prehearing conference you **must:**

1. Call the toll free prehearing phone number listed above.
2. When asked for the Access Code, enter the code listed above followed by the "#" key.
3. If the administrative law judge is not already on the line, remain on the line for ten (10) minutes past the prehearing time.
4. If you fail to call within fifteen (15) minutes after the time set for the prehearing conference, the prehearing conference may proceed without you.
5. If you have any trouble connecting to the prehearing or are on hold more than ten (10) minutes past the prehearing start time, call the Office of Administrative Hearings immediately at (503) 947-1637.
6. ONLY call the prehearing phone number to attend your prehearing.

The following may be addressed at the prehearing conference: identification of issues, motions, preliminary rulings, documentary and testimonial evidence (if known), exchange of witness lists (if known), procedural conduct of the hearing, date, time and location of the hearing, and other matters relating to the hearing. Failure to participate in the prehearing will not preclude the Administrative Law Judge from making decisions on issues raised during the prehearing. (OAR 137-003-0575)

Your case has been assigned to **Administrative Law Judge Monica Whitaker** an employee of the Office of Administrative Hearings. The Office of Administrative Hearings is an impartial tribunal, and is independent of the agency proposing the action.

Unless otherwise notified, all correspondence, inquiries, exhibits and filings should be sent to:

Monica Whitaker
Office of Administrative Hearings
7995 SW Mohawk St.
Tualatin, OR 97062
Fax: (503) 612-4340

OAR 137-003-0520 requires a copy of any correspondence, exhibits or other filings to be provided to all parties and the agency at the same time they are provided to the ALJ. **Please use the OAH case number above on all correspondence and filings.**

A request for reset of the hearing must be submitted in writing prior to the hearing. A postponement request will only be granted on a showing of good cause and with the approval of the administrative law judge.

**If you are hearing impaired, need a language interpreter or require another type of accommodation to participate in or attend the hearing, immediately notify the Office of Administrative Hearings at (503) 947-1637 or TDD at 1-800-735-1232 to make the appropriate arrangements. The Office of Administrative Hearings can arrange for an interpreter at the hearing. Interpreters must be certified or qualified in order to participate in a contested case hearing and may not have a conflict of interest with the hearing participants.**

You are required to notify the Office of Administrative Hearings at (503) 947-1637 immediately if you change your address or telephone number prior to a decision in this matter.

## CERTIFICATE OF MAILING

On February 19, 2010, I mailed the foregoing NOTICE OF PREHEARING CONFERENCE in OAH Case No. 901410.

By: First Class Mail

Magar Magar
14102 NE 40th
Vancouver WA 98682

Bryan Smith
Dept. of Environmental Quality
811 SW 6th St
Portland OR 97204

Lucy Garcia
Administrative Specialist
Hearing Coordinator

**BEFORE THE OFFICE OF ADMINISTRATIVE HEARINGS**
**STATE OF OREGON**
**for the**
**DEPT. OF ENVIRONMENTAL QUALITY**

| | | |
|---|---|---|
| IN THE MATTER OF: | ) | **NOTICE OF PREHEARING CONFERENCE** |
| | ) | |
| **MAGAR E MAGAR** | ) | OAH Case No.: 901410 |
| | ) | Agency Case No.: WQ/D-NWR-09-118 |

**PLEASE TAKE NOTICE** that a prehearing conference has been scheduled in the above matter before the Office of Administrative Hearings.

**Prehearing Date:** **February 18, 2010** **Prehearing Time:** **9:00 am**

**Location:** **By Telephone: Prehearing Phone Numbers and Access Code:**

- Toll Free – 1-877-622-4041
- ACCESS CODE – 7101410

**IMPORTANT PREHEARING PHONE INSTRUCTIONS**

At the date and time of your prehearing conference you **must:**

1. Call the toll free prehearing phone number listed above.
2. When asked for the Access Code, enter the code listed above followed by the "#" key.
3. If the administrative law judge is not already on the line, remain on the line for ten (10) minutes past the prehearing time.
4. If you fail to call within fifteen (15) minutes after the time set for the prehearing conference, the prehearing conference may proceed without you.
5. If you have any trouble connecting to the prehearing or are on hold more than ten (10) minutes past the prehearing start time, call the Office of Administrative Hearings immediately at (503) 947-1637.
6. ONLY call the prehearing phone number to attend your prehearing.

The following may be addressed at the prehearing conference: identification of issues, motions, preliminary rulings, documentary and testimonial evidence (if known), exchange of witness lists (if known), procedural conduct of the hearing, date, time and location of the hearing, and other matters relating to the hearing. Failure to participate in the prehearing will not preclude the Administrative Law Judge from making decisions on issues raised during the prehearing. (OAR 137-003-0575)

Your case has been assigned to **Administrative Law Judge Monica Whitaker** an employee of the Office of Administrative Hearings. The Office of Administrative Hearings is an impartial tribunal, and is independent of the agency proposing the action.

Unless otherwise notified, all correspondence, inquiries, exhibits and filings should be sent to:

Monica Whitaker
Office of Administrative Hearings
7995 SW Mohawk St.
Tualatin, OR 97062
Fax: (503) 612-4340

OAR 137-003-0520 requires a copy of any correspondence, exhibits or other filings to be provided to all parties and the agency at the same time they are provided to the ALJ. **Please use the OAH case number above on all correspondence and filings.**

A request for reset of the hearing must be submitted in writing prior to the hearing. A postponement request will only be granted on a showing of good cause and with the approval of the administrative law judge.

**If you are hearing impaired, need a language interpreter or require another type of accommodation to participate in or attend the hearing, immediately notify the Office of Administrative Hearings at (503) 947-1637 or TDD at 1-800-735-1232 to make the appropriate arrangements. The Office of Administrative Hearings can arrange for an interpreter at the hearing. Interpreters must be certified or qualified in order to participate in a contested case hearing and may not have a conflict of interest with the hearing participants.**

You are required to notify the Office of Administrative Hearings at (503) 947-1637 immediately if you change your address or telephone number prior to a decision in this matter.

## CERTIFICATE OF MAILING

On February 4, 2010, I mailed the foregoing NOTICE OF PREHEARING CONFERENCE in OAH Case No. 901410.

By: First Class Mail

Magar Magar
14102 NE 40th
Vancouver WA 98682

Bryan Smith
Dept. of Environmental Quality
811 SW 6th St
Portland OR 97204

Lucy Garcia
Administrative Specialist
Hearing Coordinator

**BEFORE THE OFFICE OF ADMINISTRATIVE HEARINGS**
**STATE OF OREGON**
**for the**
**DEPT. OF ENVIRONMENTAL QUALITY**

| | | |
|---|---|---|
| IN THE MATTER OF: | ) | **NOTICE OF PREHEARING CONFERENCE** |
| | ) | |
| **MAGAR E MAGAR** | ) | OAH Case No.: 901410 |
| | ) | Agency Case No.: WQ/D-NWR-09-118 |

**PLEASE TAKE NOTICE** that a prehearing conference has been scheduled in the above matter before the Office of Administrative Hearings.

**Prehearing Date:** **February 2, 2010** **Prehearing Time:** **3:00 pm**

**Location:** **By Telephone: Prehearing Phone Numbers and Access Code:**

- Toll Free – 1-877-622-4041
- ACCESS CODE – 7101410

**IMPORTANT PREHEARING PHONE INSTRUCTIONS**

At the date and time of your prehearing conference you **must:**

1. Call the toll free prehearing phone number listed above.
2. When asked for the Access Code, enter the code listed above followed by the "#" key.
3. If the administrative law judge is not already on the line, remain on the line for ten (10) minutes past the prehearing time.
4. If you fail to call within fifteen (15) minutes after the time set for the prehearing conference, the prehearing conference may proceed without you.
5. If you have any trouble connecting to the prehearing or are on hold more than ten (10) minutes past the prehearing start time, call the Office of Administrative Hearings immediately at (503) 947-1637.
6. ONLY call the prehearing phone number to attend your prehearing.

The following may be addressed at the prehearing conference: identification of issues, motions, preliminary rulings, documentary and testimonial evidence (if known), exchange of witness lists (if known), procedural conduct of the hearing, date, time and location of the hearing, and other matters relating to the hearing. Failure to participate in the prehearing will not preclude the Administrative Law Judge from making decisions on issues raised during the prehearing. (OAR 137-003-0575)

Your case has been assigned to **Administrative Law Judge Monica Whitaker** an employee of the Office of Administrative Hearings. The Office of Administrative Hearings is an impartial tribunal, and is independent of the agency proposing the action.

Unless otherwise notified, all correspondence, inquiries, exhibits and filings should be sent to:

Monica Whitaker
Office of Administrative Hearings
7995 SW Mohawk St.
Tualatin, OR 97062
Fax: (503) 612-4340

OAR 137-003-0520 requires a copy of any correspondence, exhibits or other filings to be provided to all parties and the agency at the same time they are provided to the ALJ. **Please use the OAH case number above on all correspondence and filings.**

A request for reset of the hearing must be submitted in writing prior to the hearing. A postponement request will only be granted on a showing of good cause and with the approval of the administrative law judge.

**If you are hearing impaired, need a language interpreter or require another type of accommodation to participate in or attend the hearing, immediately notify the Office of Administrative Hearings at (503) 947-1637 or TDD at 1-800-735-1232 to make the appropriate arrangements. The Office of Administrative Hearings can arrange for an interpreter at the hearing. Interpreters must be certified or qualified in order to participate in a contested case hearing and may not have a conflict of interest with the hearing participants.**

You are required to notify the Office of Administrative Hearings at (503) 947-1637 immediately if you change your address or telephone number prior to a decision in this matter.

## CERTIFICATE OF MAILING

On January 28, 2010, I mailed the foregoing NOTICE OF PREHEARING CONFERENCE in OAH Case No. 901410.

By: First Class Mail

Magar Magar
14102 NE 40th
Vancouver WA 98682

Bryan Smith
Dept. of Environmental Quality
811 SW 6th St
Portland OR 97204

Lucy Garcia
Administrative Specialist
Hearing Coordinator

**BEFORE THE OFFICE OF ADMINISTRATIVE HEARINGS**
**STATE OF OREGON**
**for the**
**DEPT. OF ENVIRONMENTAL QUALITY**

| | | |
|---|---|---|
| IN THE MATTER OF: | ) | **NOTICE OF IN-PERSON HEARING** |
| | ) | |
| **MAGAR E MAGAR** | ) | OAH Case No.: 901410 |
| | ) | Agency Case No.: WQ/D-NWR-09-118 |

**PLEASE TAKE NOTICE** that a contested case hearing has been scheduled in the above matter before the Office of Administrative Hearings.

**Hearing Date:** **February 18, 2010**

**Hearing Time:** **9:00 am**

**Location:** **DEQ-Portland Office**
**811 SW 6th Ave**
**Check in with receptionist**
**Portland OR 97204**

RECEIVED
JAN 04 2010
Office of Administrative Hearings
Tualatin

Your case has been assigned to **Administrative Law Judge Monica Whitaker** an employee of the Office of Administrative Hearings. The Office of Administrative Hearings is an impartial tribunal, and is independent of the agency proposing the action.

Unless otherwise notified, all correspondence, inquiries, exhibits and filings should be sent to:

Monica Whitaker
Office of Administrative Hearings
7995 SW Mohawk St.
Tualatin, OR 97062
Fax: (503) 612-4340

OAR 137-003-0520 requires a copy of any correspondence, exhibits or other filings to be provided to all parties and the agency at the same time they are provided to the ALJ. **Please use the OAH case number above on all correspondence and filings.**

A request for reset of the hearing must be submitted in writing prior to the hearing. A postponement request will only be granted on a showing of good cause and with the approval of the administrative law judge.

**If you are hearing impaired, need a language interpreter or require another type of accommodation to participate in or attend the hearing, immediately notify the Office of Administrative Hearings at (503) 947-1637 or TDD at 1-800-735-1232 to make the appropriate arrangements. The Office of Administrative Hearings can arrange for an interpreter at the hearing. Interpreters must be certified or qualified in order to participate in a contested case hearing and may not have a conflict of interest with the hearing participants.**

You are required to notify the Office of Administrative Hearings at (503) 947-1637 immediately if you change your address or telephone number prior to a decision in this matter.

**CERTIFICATE OF MAILING**

On December 31, 2009, I mailed the foregoing NOTICE OF IN-PERSON HEARING in OAH Case No. 901410.

By: First Class

Magar E. Magar
14102 NE 40th
Vancouver WA 98682

Bryan Smith
Dept. of Environmental Quality
811 SW 6th St
Portland OR 97204

Carol Buntjer for Lucy Garcia
Administrative Specialist
Hearing Coordinator

DEPARTMENT OF ENVIRONMENTAL QUALITY HEARINGS

IMPORTANT INFORMATION FOR PREPARING FOR YOUR HEARING

NOTICE OF CONTESTED CASE RIGHTS AND PROCEDURES

Under ORS 183.413(2), you must be informed of the following:

1. Law that applies. The hearing is a contested case and it will be conducted under ORS Chapter 183 and Oregon Administrative Rules of the Department of Environmental Quality, Chapters 137 and 340.

2. Rights to an attorney. You may represent yourself at the hearing, or be represented by an attorney or an authorized representative, such as a partner, officer, or an employee. If you are a company, corporation, organization or association, you must be represented by an attorney or an authorized representative. Prior to appearing on your behalf, an authorized representative must provide a written statement of authorization. If you choose to represent yourself, but decide during the hearing that an attorney is necessary, you may request a recess. About half of the parties are not represented by an attorney. DEQ will be represented by an Assistant Attorney General or an Environmental Law Specialist.

3. Administrative law judge. The person presiding at the hearing is known as the administrative law judge. The administrative law judge is an employee of the Office of Administrative Hearings under contract with the Environmental Quality Commission. The administrative law judge is not an employee, officer or representative of the agency.

4. Appearance at hearing. If you withdraw your request for a hearing, notify either DEQ or the administrative law judge that you will not appear at the hearing, or fail to appear at the hearing, a final default order will be issued. This order will be issued only upon a prima facie case based on DEQ's file. No hearing will be conducted.

5. Address change or change of representative. It is your responsibility to notify DEQ and the administrative law judge of any change in your address or a withdrawal or change of your representative.

6. Interpreters. If you have a disability or do not speak English, the administrative law judge will arrange for an interpreter. DEQ will pay for the interpreter if (1) you require the interpreter due to a disability or (2) you file with the administrative law judge a written statement under oath that you are unable to speak English and you are unable to obtain an interpreter yourself. You must provide notice of your need for an interpreter at least 14 days before the hearing.

7. Witnesses. All witnesses will be under oath or affirmation to tell the truth. All parties and the administrative law judge will have the opportunity to ask questions of all witnesses. DEQ or the administrative law judge will issue subpoenas for witnesses on your behalf if you show that their testimony is relevant to the case and is reasonably needed to establish your position. You are not required to issue subpoenas for appearance of your own witnesses. If you are represented by an attorney, your attorney may issue subpoenas. Payment of witness fees and mileage is your responsibility.

8. Order of evidence. A hearing is similar to a court trial but less formal. The purpose of the hearing is to determine the facts and whether DEQ's action is appropriate. In most cases, DEQ will offer its evidence first in support of its action. You will then have an opportunity to present evidence to oppose DEQ's evidence. Finally, DEQ and you will have an opportunity to rebut any evidence.

9. Burden of presenting evidence. The party who proposes a fact or position has the burden of proving that fact or position. You should be prepared to present evidence at the hearing which will support your position. You may present physical, oral or written evidence, as well as your own testimony.

10. Admissible evidence. Only relevant evidence of a type relied upon by reasonably prudent persons in the conduct of their serious affairs will be considered. Hearsay evidence is not automatically excluded. Rather, the fact that it is hearsay generally affects how much the Commission will rely on it in reaching a decision.

There are four kinds of evidence:

a. Knowledge of DEQ and the administrative law judge. DEQ or the administrative law judge may take "official notice" of conclusions developed as a result of its knowledge in its specialized field. This includes notice of general, technical or scientific facts. You will be informed should DEQ or the administrative law judge take "official notice" of any fact and you will be given an opportunity to contest any such facts.

b. Testimony of witnesses. Testimony of witnesses, including you, who have knowledge of facts may be received in evidence.

c. Writings. Written documents including letters, maps, diagrams and other written materials may be received in evidence.

d. Experiments, demonstrations and similar means used to prove a fact. The results of experiments and demonstrations may be received in evidence if they are reliable.

11. Objections to evidence. Objections to the consideration of evidence must be made at the time the evidence is offered. Objections are generally made on one of the following grounds:

a. The evidence is unreliable;

b. The evidence is irrelevant or immaterial and has no tendency to prove or disprove any issue involved in the case;

c. The evidence is unduly repetitious and duplicates evidence already received.

12. Continuances. There are normally no continuances granted at the end of the hearing for you to present additional testimony or other evidence. Please make sure you have all your evidence ready for the hearing. However, if you can show that the record should remain open for additional evidence, the administrative law judge may grant you additional time to submit such evidence.

13. Record. A record will be made of the entire proceeding to preserve the testimony and other evidence for appeal. This will be done by tape recorder. This tape and any exhibits received in the record will be the whole record of the hearing and the only evidence considered by the administrative law judge. A copy of the tape is available upon payment of a minimal amount, as established by DEQ. A transcript of the record will not normally be prepared, unless there is an appeal to the Court of Appeals.

14. Proposed and Final Order. The administrative law judge has the authority to issue a proposed order based on the evidence at the hearing. The proposed order will become the final order of the Environmental Quality Commission if you do not petition the Commission for review within 30 days of service of the order. The date of service is the date the order is mailed to you, not the date that you receive it. The Department must receive your petition seeking review within 30 days. See OAR 340-011-0132.

15. Appeal. If you are not satisfied with the decision of the Commission, you have 60 days from the date of service of the order, to appeal this decision to the Court of Appeals. See ORS 183.480 *et seq.*

For: Office of Compliance and Enforcement Appeals

Fax number: 503 229 5100

From: Magar Magar

Fax number: 360-254 0405

Date: October 5, 2009

Regarding: Response to WQ/D-NWR-09-118

Number of pages: cover + 3
Will tape record conference and hope Christensen Superior appears.

RECEIVED
OCT 06 2009

Magar E. Magar
Pro Se.
14102 NE 40th St.
Vancouver, WA 98682
Phone # 360 254 7131
Fax # 360 254 0405
Cell # 503 929 1094
E: Mail: calsport@msn.com

Before the Department of Environmental Quality Commission
Of the State of Oregon

| | |
|---|---|
| In the Matter of Magar E. Magar,<br>Respondent | Case No.: No. WQ/D-NWR-09-118<br>Response to Notice of Violation and **Request for Contested Hearing** and **Request For Conference.** |

1.

The agency has Jurisdiction. As to violations

2.

**Failure to include Operator Certification.**

During the relevant period there was only one operator his name was Magar E. Magar and his certification is Exhibit A attached to this response and by reference incorporated. That is well known to the permit writer Lyle Christensen and it is also known because Respondent signs the monitoring reports. Respondent offers to come in and sign the reports.

3. **Failure to include Mass Calculations BOD.**

The daily discharge is a **maximum** of **3 ounces** per day. The allowed limits by the permit are 2.2 pounds in summer and 3.3 pounds in winter. Respondent offers to come to DEQ and put the figure of less than 3 ounces or a more precise one if that is desired. But what is the point. The facility discharges at a maximum less than 10 per cent of the allowed discharge limits.

4. **Failure to include Mass Calculations TSS**

The daily discharge is a **maximum** of **3 ounces** per day. The allowed limits by the permit are 2.2 pounds in summer and 3.3 pounds in winter. Respondent offers to come to DEQ and put the figure of a maximum of 3 ounces or a more precise computation if that is desired. But what is the point. The facility discharges at a maximum less than 10 per cent of the allowed discharge limits

5. **Failure to Report Effluent Bacteria.**

At all material times respondent monitored the effluent bacteria and has offered to supplement the monitoring reports and is still willing to do so.

6. **Failure to include influent pH.**

The influent pH is always within the range of 6.8 to 6.9 and is measured 3 to 4 times a month. Any measurement not in that range requires calibration of the pH meter. This condition in the permit bears no rational relationship to the objectives of the legislation, is a whim of the permit writer and therefore an improper delegation.

7. **Effluent pH outside the range.**

Respondent denies that. As pointed out in the report that was an improperly calibrated pH meter and the effluent was within the limits set by the permit.

8. **Not properly operating the Facility.**

Respondent denies that. Adequate flow numbers are given every month. Moreover the amount of flow which is seasonal is well known to the Agency and the Agency has said that flow is about 11,000 gpd in winter and 6000 gpd in summer. Thos flows have never been a concern of the agency. To require flow numbers more accurate than those bears no rational relationship to the objectives of the legislation are a whim of the permit writer and therefore an improper delegation.

Respectfully submitted.

Magar E. Magar.
Respondent. Pro Se.
Served by fax to Deborah Nesbit fax #503 229 5100 and to Leah Koss by fax to 503 229 6142

Oregon
Theodore R. Kulongoski, Governor

Department of Environmental Quality
Headquarters
811 SW Sixth Avenue
Portland, OR 97204-1390
(503) 229-5696
FAX (503) 229-6124
TTY 1-800-735-2900

August 18, 2009

CERTIFIED MAIL No. 7008 1300 0000 5752 3564

Magar Edward Magar
14102 N.E. 40th
Vancouver, WA 98682

Re: Notice of Civil Penalty Assessment and Order
Case No. WQ/D-NWR-09-118

This letter is to inform you that DEQ has issued you a civil penalty of $18,797 for failure to comply with conditions of your National Pollutant Discharge Elimination System Waste Discharge (NPDES) wastewater discharge permit (the permit) for the Riverwood Mobile Home Park (the Park) near Rainier, Oregon.

The violations include (1) failure to submit required monitoring reports for the wastewater treatment system; (2) failure to timely submit the monitoring reports; (3) failure to include required operator certification information on the monitoring reports; (4) exceeding the effluent limit for pH; and (5) failure to replace the failed flow meter at the Park.

The State of Oregon requires regular monitoring of wastewater through such permits to help protect the State's water quality. Influent and effluent limits are set to protect aquatic life and human health. Compliance with the terms of your permit is essential to protecting the quality of our public waters. This is the fourth separate penalty action DEQ has issued to you for similar violations of your wastewater discharge permit since 2001, and DEQ is concerned that you continue to violate the requirements of your permit.

If you wish to appeal this matter, you have 20 calendar days from receipt of this letter to request a contested case hearing. This hearing request must be in writing. Send your hearing request to DEQ Office of Compliance and Enforcement – Appeals:

Via mail - 811 S.W. 6th Ave., Portland, OR 97204
Via fax - 503-229-5100

Once DEQ receives your request, we will arrange to meet with you to discuss this matter. If DEQ does not receive a written hearing request from you within 20 days, the penalty will become due. Alternatively, you can pay the penalty by sending a check or money order to the above address.

The attached Notice further details DEQ's reasons for issuing the penalty and provides further instructions for appealing the penalty. Please review it and refer to it when discussing this case with DEQ.

DEQ may allow you to resolve part of your penalty through the completion of a Supplemental Environmental Project (SEP). SEPs are environmental improvement projects that you sponsor in lieu of paying your penalty. Enclosed is more detail on how to pursue a SEP.

DEQ's rules are available on the internet at http://www.deq.state.or.us/regulations/rules.htm, or by calling the number below to request a paper copy.

If you have any questions, please contact DEQ Environmental Law Specialist Bryan Smith at (503) 229-5395. You may call toll-free within Oregon at 1-800-452-4011, extension 5395.

Sincerely,

Leah E. Koss

Leah E. Koss, Manager
Office of Compliance and Enforcement

Enclosures

cc: Lyle Christensen, Northwestern Region, Portland Office, DEQ
Columbia County District Attorney
Larry Knudsen, Department of Justice, Portland Office

BEFORE THE ENVIRONMENTAL QUALITY COMMISSION

OF THE STATE OF OREGON

| | | |
|---|---|---|
| IN THE MATTER OF:<br>MAGAR EDWARD MAGAR,<br>an individual,<br><br>Respondent. | ) | NOTICE OF CIVIL PENALTY ASSESSMENT AND ORDER<br><br>NO. WQ/D-NWR-09-118 |

## I. AUTHORITY

This Notice of Civil Penalty Assessment and Order is issued pursuant to Oregon Revised Statutes (ORS) 468.100 and 468.126 through 468.140, 468B, ORS Chapter 183 and Oregon Administrative Rules (OAR) Chapter 340, Divisions 011, 012, 041 and 045.

## II. FACTS

1. On June 4, 2007, the Department issued National Pollutant Discharge Elimination System Waste Discharge (NPDES) Permit No. 102520 (the Permit) to Magar E. Magar (Respondent) for the wastewater treatment system located just outside the City of Rainier, in Columbia County, Oregon, known as the Riverwood Mobile Home Park (the Facility), which Respondent controls and operates.

2. The Permit authorizes Respondent to operate and maintain a wastewater treatment and disposal system and to discharge to Columbia River, public waters, adequately treated wastewater only in conformance with all the requirements, limitations and conditions set forth in the Permit schedules. The Permit was in effect at all pertinent times.

3. Schedule B, Condition 2(b) of the Permit requires Respondent to submit discharge monitoring reports that include operator certification information including name, certificate classification and grade level of each principal operator of the Facility's wastewater treatment system.

4. For the months of April, May, June, July, August and December 2008, as well as January, February, March and May 2009, Respondent submitted discharge monitoring reports without including operator certification information including name, certificate classification and grade level of each principal operator of the Facility's wastewater treatment system.

5. Schedule B, Condition 1(b) of the Permit requires Respondent to calculate and report effluent mass data (pounds discharged) for Biochemical Oxygen Demand ($BOD_5$) monthly.

6. During each month between April 2008 and June 2009, Respondent failed to calculate and report effluent mass data for $BOD_5$.

7. Schedule B, Condition 1(b) of the Permit requires Respondent to calculate and report effluent mass data (pounds discharged) for Total Suspended Solids (TSS) monthly.

8. During each month between April 2008 and June 2009, Respondent failed to calculate and report effluent mass data for TSS.

9. Schedule B, Condition 1(a) of the Permit requires Respondent to monitor the pH of the wastewater influent at least two times per week.

10. During each month between June 2008 and June 2009, Respondent failed to collect influent monitoring data for pH at a minimum frequency of at least two times per week. Specifically, Respondent collected influent monitoring data for pH at a maximum frequency of three times per month during these 13 months, which does not satisfy the required minimum frequency of two times per week, or eight times per month.

11. Schedule B, Condition 1(a) of the Permit requires Respondent to monitor and report bacteria monthly.

12. During the months of May, June and September 2008, as well as January, May and June 2009, Respondent failed to report effluent monitoring data for bacteria.

13. Schedule A, Condition 1(a)(3) of the Permit requires that the treated effluent from Respondent's wastewater treatment system shall be within the range of 6.0 to 9.0 pH.

14. On January 1, 6, 7, 8, 9, 10 and 11, 2009, as well as May 16, 2009, Respondent reported that the treated effluent from its wastewater treatment system was not the range of 6.0 to 9.0. Specifically, the results were 5.8, 5.6, 5.8, 5.8, 5.5, 5.4, 5.5 and 5.9 pH.

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15. Schedule F, Section B, Condition 1 of the Permit requires Respondent to maintain the Facility and its systems of treatment and control to achieve compliance with the permit.

16. On or about April 25, 2008, Respondent's flow meter stopped working, and Respondent has not been able to accurately measure the Facility's flow since that date.

## III. CONCLUSIONS

1. By failing to perform the monthly effluent mass amount Biochemical Oxygen Demand ($BOD_5$) calculation and reporting required by Schedule B, Condition 1(b) of the Permit, on 15 occasions, as described in paragraph 6 above, Respondent violated ORS 468B.025(2). These are Class I violations, according to OAR 340-012-0055(1)(o). DEQ has assessed a $3,375 civil penalty for these violations. The determination of this civil penalty is attached and incorporated as Exhibit No. 1.

2. By failing to perform the monthly effluent mass amount Total Suspended Solids (TSS) calculation and reporting required by Schedule B, Condition 1(b) of the Permit, on 15 occasions, as described in paragraph 8 above, Respondent violated ORS 468B.025(2). These are Class I violations, according to OAR 340-012-0055(1)(o). DEQ has assessed a $3,375 civil penalty for these violations. The determination of this civil penalty is attached and incorporated as Exhibit No. 2.

3. By failing to perform the influent monitoring data for pH at a minimum frequency of at least two times per week, as required by Schedule B, Condition 1(a)(1) of the Permit, on 13 occasions, as described in paragraph 10 above, Respondent violated ORS 468B.025(2). These are Class I violations, according to OAR 340-012-0055(1)(o). DEQ has assessed a $3,687 civil penalty for these violations. The determination of this civil penalty is attached and incorporated as Exhibit No. 3.

4. By failing to report the monthly effluent monitoring and sampling for bacteria, required by Schedule B, Condition 1(b) of the Permit, on 6 occasions, as described in paragraph 12 above, Respondent violated ORS 468B.025(2). These are Class I violations, according to

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OAR 340-012-0055(1)(o). DEQ has assessed a $3,344 civil penalty for these violations. The determination of this civil penalty is attached and incorporated as Exhibit No. 4.

5. By discharging treated effluent from its wastewater treatment system that was not within the range of 6.0 to 9.0 pH, as required by Schedule A, Condition 1(a)(3) of the Permit, and as described in paragraph 14 above, on 8 occasions, Respondent violated ORS 468B.025(2). These are Class III violations, according to OAR 340-012-0055(3)(b)(B). DEQ has assessed a $460 civil penalty for these violations. The determination of this civil penalty is attached and incorporated as Exhibit No. 5.

6. By failing to include operator certification information including name, certificate classification and grade level of each principal operator of the Facility's wastewater treatment system on discharge monitoring reports, as required by Schedule B, Condition 2(b) of the Permit, and as described in paragraph 4 above, on 10 occasions, Respondent violated ORS 468B.025(2). These are Class III violations, according to OAR 340-012-0055(3)(a). DEQ has assessed a $580 civil penalty for these violations. The determination of this civil penalty is attached and incorporated as Exhibit No. 6.

7. By failing to properly operate and maintain the Facility's systems of treatment and control – specifically, the Facility's flow meter - as described in paragraph 16 above and as required by Schedule F, Section B, Condition (1) of the Permit, Respondent violated OAR 340-041-0007(16)(a)(A)(ii) and ORS 468B.025(2). This is a Class II violation, according to OAR 340-012-0055(2)(d). DEQ has assessed a $3,976 civil penalty for this violation. The determination of this civil penalty is attached and incorporated as Exhibit No. 7.

## IV. ORDER TO PAY CIVIL PENALTY

Based upon the foregoing FINDINGS OF FACTS AND CONCLUSIONS OF LAW, Respondent is hereby ORDERED TO:

Pay a total civil penalty of $18,797. The determination of the civil penalty is attached as Exhibit Nos. 1 through 7 and is incorporated as part of this Notice.

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If you do not file a request for hearing as set forth in Section V below, your check or money order must be made payable to "**State Treasurer, State of Oregon**" and sent to the **DEQ, Business Office, 811 S.W. Sixth Avenue, Portland, Oregon 97204**. Once you pay the penalty, the Findings of Fact, Conclusions and Order become final.

V. NOTICE OF RIGHT TO REQUEST A CONTESTED CASE HEARING

You have a right to a contested case hearing on this Notice, if you request one in writing. DEQ must receive the request for hearing **within 20 calendar days** from the date you receive this Notice. The request should include any affirmative defenses and either admit or deny each allegation of fact in this Notice. (See OAR 340-011-0530.) You must mail the request for hearing to: **DEQ, Office of Compliance and Enforcement - Appeals, 811 SW Sixth Avenue, Portland, Oregon 97204**, or faxed to **(503) 229-5100**. An administrative law judge employed by the Office of Administrative Hearings will conduct the hearing, according to ORS Chapter 183, OAR Chapter 340, Division 011 and OAR 137-003-0501 to 0700. You have a right to be represented by an attorney at the hearing, or you may represent yourself unless you are a corporation, agency or association.

If you fail to file a request for hearing in writing within 20 calendar days of receipt of the Notice, the Notice will become a final order by default without further action by DEQ, as per OAR 340-011-0535(5). If you do request a hearing but later withdraw your request, fail to attend the hearing, or notify DEQ that you will not be attending the hearing, DEQ will issue a final order by default pursuant to OAR 137-003-0670. DEQ designates the relevant portions of its files, including information submitted by you, as the record for purposes of proving a prima facie case.

8/18/2009
Date

Leah E. Koss
Leah E. Koss, Manager
Office of Compliance and Enforcement

EXHIBIT 1

FINDINGS AND DETERMINATION OF RESPONDENT'S CIVIL PENALTY PURSUANT TO OREGON ADMINISTRATIVE RULE (OAR) 340-012-0045

VIOLATION 1: Failure to perform required calculation and reporting for effluent mass amount Biochemical Oxygen Demand ($BOD_5$) set forth in Schedule A, Condition (1)(b) of Respondent's permit, which is a violation of Oregon Revised Statute (ORS) 468B.025(2).

CLASSIFICATION: This is a Class I violation pursuant to OAR 340-012-0055(1)(o).

MAGNITUDE: The magnitude of the violation is moderate pursuant to OAR 340-012-0130(1), as there is no selected magnitude specified in OAR 340-012-0135 for this violation, and the information reasonably available to the Department does not indicate a minor or major magnitude.

CIVIL PENALTY FORMULA: The formula for determining the amount of penalty of each violation is:
BP + [(0.1 x BP) x (P + H + O + M + C)] + EB

"BP" is the base penalty, which is $1,250 for a Class I, moderate magnitude violation in the matrix listed in OAR 340-012-0140(4)(b)(A)(ii) and applicable pursuant to OAR 340-012-0140(4)(a)(E)(i).

"P" is whether Respondent has any prior significant actions, as defined in OAR 340-012-0030(17), in the same media as the violation at issue that occurred at a facility owned or operated by the same Respondent, and receives a value of 9 according to OAR 340-012-0145(2)(a)(C) and (D), because Respondent has seven (7) Class I and two (2) Class II prior significant actions in the same media in case no. WQ/I-NWR-05-181 issued February 7, 2006 and case no. WQ/D-NWR-01-129 issued November 7, 2001.

"H" is Respondent's history of correcting prior significant action(s) and receives a value of -1 according to OAR 340-012-0145(3)(a)(B), because some of the violations were uncorrectable, but Respondent took reasonable efforts to minimize the effects of some of the violations by repairing the wastewater treatment system that was failing and by obtaining an operator certificate.

"O" is whether the violation was repeated or ongoing and receives a value of 3 according to OAR 340-012-0145(4)(a)(C), because the violation has existed for or occurred from 7 to 28 days. Respondent violated this permit condition 15 times during 15 different months.

"M" is the mental state of the Respondent and receives a value of 6 according to OAR 340-012-0145(5)(a)(C), because Respondent's conduct was reckless. Respondent has had an NPDES Permit for the system at Respondent's Facility since 2002 which states the conditions and requirements for compliance with the Permit. The Department issued Respondent civil penalties for permit violations, including violations of this same requirement, in 2001, 2007, and 2008. As permittee, Respondent had actual knowledge of the required calculation and reporting conditions for $BOD_5$ set forth in the Permit and consciously disregarded this permit condition.

"C" is Respondent's efforts to correct the violation and receives a value of 0 according to OAR 340-012-0145(6)(a)(D), because the violation or the effects of the violation could not be corrected or minimized.

"EB" is the approximate economic benefit that an entity gained by not complying with the law. It is designed to "level the playing field" by taking away any economic advantage the entity gained and to deter potential violators from deciding it is cheaper to violate and pay the penalty than to pay the costs of compliance. In this case, "EB" receives a value of $0 because the Department has insufficient evidence to base a finding that Respondent received an economic benefit from the violation.

PENALTY CALCULATION:

Penalty= BP + [(0.1 x BP) x (P + H + O + M + C)] + EB
= $1,250 + [(0.1 x $1,250) x (9 + -1 + 3 + 6 + 0)] + $0
= $1,250 + [($125) x (17)] + $0
= $1,250 + $2,125 + $0
= $3,375

EXHIBIT 2

FINDINGS AND DETERMINATION OF RESPONDENT'S CIVIL PENALTY PURSUANT TO OREGON ADMINISTRATIVE RULE (OAR) 340-012-0045

VIOLATION 2: Failure to perform required calculation and reporting for the effluent mass amount Total Suspended Solids (TSS) set forth in Schedule A, Condition (1)(b) of Respondent's permit, which is a violation of Oregon Revised Statute (ORS) 468B.025(2).

CLASSIFICATION: This is a Class I violation pursuant to OAR 340-012-0055(1)(o).

MAGNITUDE: The magnitude of the violation is moderate pursuant to OAR 340-012-0130(1), as there is no selected magnitude specified in OAR 340-012-0135 for this violation, and the information reasonably available to the Department does not indicate a minor or major magnitude.

CIVIL PENALTY FORMULA: The formula for determining the amount of penalty of each violation is:
$BP + [(0.1 \times BP) \times (P + H + O + M + C)] + EB$

"BP" is the base penalty, which is $1,250 for a Class I, moderate magnitude violation in the matrix listed in OAR 340-012-0140(4)(b)(A)(ii) and applicable pursuant to OAR 340-012-0140(4)(a)(E)(i).

"P" is whether Respondent has any prior significant actions, as defined in OAR 340-012-0030(17), in the same media as the violation at issue that occurred at a facility owned or operated by the same Respondent, and receives a value of 9 according to OAR 340-012-0145(2)(a)(C) and (D), because Respondent has seven (7) Class I and two (2) Class II prior significant actions in the same media in case no. WQ/I-NWR-05-181 issued February 7, 2006 and case no. WQ/D-NWR-01-129 issued November 7, 2001.

"H" is Respondent's history of correcting prior significant action(s) and receives a value of -1 according to OAR 340-012-0145(3)(a)(B), because some of the violations were uncorrectable, but Respondent took reasonable efforts to minimize the effects of some of the violations by repairing the wastewater treatment system that was failing and by obtaining an operator certificate.

"O" is whether the violation was repeated or ongoing and receives a value of 3 according to OAR 340-012-0145(4)(a)(C), because the violation has existed for or occurred from 7 to 28 days. Respondent violated this permit condition 15 times during 15 different months.

"M" is the mental state of the Respondent and receives a value of 6 according to OAR 340-012-0145(5)(a)(C), because Respondent's conduct was reckless. Respondent has had an NPDES Permit for the system at Respondent's Facility since 2002 which states the conditions and requirements for compliance with the Permit. The Department issued Respondent civil penalties for permit violations, including violations of this same requirement, in 2001, 2007, and 2008. As permittee, Respondent had actual knowledge of the required sampling and monitoring conditions for TSS set forth in the Permit and consciously disregarded this permit condition.

"C" is Respondent's efforts to correct the violation and receives a value of 0 according to OAR 340-012-0145(6)(a)(D), because the violation or the effects of the violation could not be corrected or minimized.

"EB" is the approximate economic benefit that an entity gained by not complying with the law. It is designed to "level the playing field" by taking away any economic advantage the entity gained and to deter potential violators from deciding it is cheaper to violate and pay the penalty than to pay the costs of compliance. In this case, "EB" receives a value of $0 because the Department has insufficient evidence to base a finding that Respondent received an economic benefit from the violation.

PENALTY CALCULATION:

Penalty = BP + [(0.1 x BP) x (P + H + O + M + C)] + EB
= $1,250 + [(0.1 x $1,250) x (9 + -1 + 3 + 6 + 0)] + $0
= $1,250 + [($125) x (17)] + $0
= $1,250 + $2,125 + $0
= $3,375

EXHIBIT 3

FINDINGS AND DETERMINATION OF RESPONDENT'S CIVIL PENALTY PURSUANT TO OREGON ADMINISTRATIVE RULE (OAR) 340-012-0045

VIOLATION 3: Failure to perform required sampling and monitoring for pH, set forth in Schedule A, Condition (1)(a)(1) of Respondent's permit, which is a violation of Oregon Revised Statute (ORS) 468B.025(2).

CLASSIFICATION: This is a Class I violation pursuant to OAR 340-012-0055(1)(o).

MAGNITUDE: The magnitude of the violation is moderate pursuant to OAR 340-012-0130(1), as there is no selected magnitude specified in OAR 340-012-0135 for this violation, and the information reasonably available to the Department does not indicate a minor or major magnitude.

CIVIL PENALTY FORMULA: The formula for determining the amount of penalty of each violation is:
$BP + [(0.1 \times BP) \times (P + H + O + M + C)] + EB$

"BP" is the base penalty, which is $1,250 for a Class I, moderate magnitude violation in the matrix listed in OAR 340-012-0140(4)(b)(A)(ii) and applicable pursuant to OAR 340-012-0140(4)(a)(E)(i).

"P" is whether Respondent has any prior significant actions, as defined in OAR 340-012-0030(17), in the same media as the violation at issue that occurred at a facility owned or operated by the same Respondent, and receives a value of 9 according to OAR 340-012-0145(2)(a)(C) and (D), because Respondent has seven (7) Class I and two (2) Class II prior significant actions in the same media in case no. WQ/I-NWR-05-181 issued February 7, 2006 and case no. WQ/D-NWR-01-129 issued November 7, 2001.

"H" is Respondent's history of correcting prior significant action(s) and receives a value of -1 according to OAR 340-012-0145(3)(a)(B), because some of the violations were uncorrectable, but Respondent took reasonable efforts to minimize the effects of some of the violations by repairing the wastewater treatment system that was failing and by obtaining an operator certificate.

"O" is whether the violation was repeated or ongoing and receives a value of 3 according to OAR 340-012-0145(4)(a)(C), because the violation has existed for or occurred from 7 to 28 days. Respondent violated this permit condition 13 times during 13 different months.

"M" is the mental state of the Respondent and receives a value of 6 according to OAR 340-012-0145(5)(a)(C), because Respondent's conduct was reckless. Respondent has had an NPDES Permit for the system at Respondent's Facility since 2002 which states the conditions and requirements for compliance with the Permit. The Department issued Respondent civil penalties for permit violations, including violations of similar requirements, in 2001, 2007, and 2008. As permittee, Respondent had actual knowledge of the required sampling and monitoring conditions for pH set forth in the Permit and consciously disregarded this permit condition.

"C" is Respondent's efforts to correct the violation and receives a value of 0 according to OAR 340-012-0145(6)(a)(D), because the violation or the effects of the violation could not be corrected or minimized.

"EB" is the approximate economic benefit that an entity gained by not complying with the law. It is designed to "level the playing field" by taking away any economic advantage the entity gained and to deter potential violators from deciding it is cheaper to violate and pay the penalty than to pay the costs of compliance. In this case, "EB" receives a value of $312 This is the amount Respondent gained by avoiding spending a total of $500 to take pH samples at least twice per week between June 1, 2008, and June 1, 2009. This "EB" was calculated pursuant to OAR 340-012-0150(1) using the U.S. Environmental Protection Agency's BEN computer model.

PENALTY CALCULATION:

Penalty= BP + [(0.1 x BP) x (P + H + O + M + C)] + EB
= $1,250 + [(0.1 x $1,250) x (9 + -1 + 3 + 6 + 0)] + $312
= $1,250 + [($125) x (17)] + $312
= $1,250 + $2,125 + $312
= $3,687

EXHIBIT 4

FINDINGS AND DETERMINATION OF RESPONDENT'S CIVIL PENALTY PURSUANT TO OREGON ADMINISTRATIVE RULE (OAR) 340-012-0045

VIOLATION 4: Failure to perform required monitoring and sampling for effluent bacteria, as set forth in Schedule A, Condition (1)(b) of Respondent's permit, which is a violation of Oregon Revised Statute (ORS) 468B.025(2).

CLASSIFICATION: This is a Class I violation pursuant to OAR 340-012-0055(1)(o).

MAGNITUDE: The magnitude of the violation is moderate pursuant to OAR 340-012-0130(1), as there is no selected magnitude specified in OAR 340-012-0135 for this violation, and the information reasonably available to the Department does not indicate a minor or major magnitude.

CIVIL PENALTY FORMULA: The formula for determining the amount of penalty of each violation is:
$BP + [(0.1 \times BP) \times (P + H + O + M + C)] + EB$

"BP" is the base penalty, which is $1,250 for a Class I, moderate magnitude violation in the matrix listed in OAR 340-012-0140(4)(b)(A)(ii) and applicable pursuant to OAR 340-012-0140(4)(a)(E)(i).

"P" is whether Respondent has any prior significant actions, as defined in OAR 340-012-0030(17), in the same media as the violation at issue that occurred at a facility owned or operated by the same Respondent, and receives a value of 9 according to OAR 340-012-0145(2)(a)(C) and (D), because Respondent has seven (7) Class I and two (2) Class II prior significant actions in the same media in case no. WQ/I-NWR-05-181 issued February 7, 2006 and case no. WQ/D-NWR-01-129 issued November 7, 2001.

"H" is Respondent's history of correcting prior significant action(s) and receives a value of -1 according to OAR 340-012-0145(3)(a)(B), because some of the violations were uncorrectable, but Respondent took reasonable efforts to minimize the effects of some of the violations by repairing the wastewater treatment system that was failing and by obtaining an operator certificate.

"O" is whether the violation was repeated or ongoing and receives a value of 2 according to OAR 340-012-0145(4)(a)(B), because the violation has existed for or occurred on more than one day up to and including six days. Respondent violated this permit condition 6 times during 6 different months.

"M" is the mental state of the Respondent and receives a value of 6 according to OAR 340-012-0145(5)(a)(C), because Respondent's conduct was reckless. Respondent has had an NPDES Permit for the system at Respondent's Facility since 2002 which states the conditions and requirements for compliance with the Permit. The Department issued Respondent civil penalties for permit violations, including violations of this same requirement, in 2001, 2007, and 2008. As permittee, Respondent had actual knowledge of the required sampling and monitoring conditions for bacteria set forth in the Permit and consciously disregarded this permit condition.

"C" is Respondent's efforts to correct the violation and receives a value of 0 according to OAR 340-012-0145(6)(a)(D), because the violation or the effects of the violation could not be corrected or minimized.

"EB" is the approximate economic benefit that an entity gained by not complying with the law. It is designed to "level the playing field" by taking away any economic advantage the entity gained and to deter potential violators from deciding it is cheaper to violate and pay the penalty than to pay the costs of compliance. In this case, "EB" receives a value of $94. This is the amount Respondent gained by avoiding spending $25 per month to take bacteria samples during the months of May, June and September 2008, as well as January, May and June 2009. This "EB" was calculated pursuant to OAR 340-012-0150(1) using the U.S. Environmental Protection Agency's BEN computer model.

PENALTY CALCULATION:

Penalty= BP + [(0.1 x BP) x (P + H + O + M + C)] + EB
= $1,250 + [(0.1 x $1,250) x (9 + -1 + 2 + 6 + 0)] + $94
= $1,250 + [($125) x (16)] + $94
= $1,250 + $2,000 + $94
= $3,344

EXHIBIT 5

FINDINGS AND DETERMINATION OF RESPONDENT'S CIVIL PENALTY PURSUANT TO OREGON ADMINISTRATIVE RULE (OAR) 340-012-0045

VIOLATION 5: Discharging treated effluent from a wastewater treatment system that was not within the range of 6.0 to 9.0 pH, in violation of Schedule A, Condition (1)(a)(3) of Respondent's permit, which is a violation of Oregon Revised Statute (ORS) 468B.025(2).

CLASSIFICATION: This is a Class III violation pursuant to OAR 340-012-0055(3)(b)(B).

MAGNITUDE: The magnitude of the violation is moderate pursuant to OAR 340-012-0130(1), as there is no selected magnitude specified in OAR 340-012-0135 for this violation, and the information reasonably available to the Department does not indicate a minor or major magnitude.

CIVIL PENALTY FORMULA: The formula for determining the amount of penalty of each violation is:

$$BP + [(0.1 \times BP) \times (P + H + O + M + C)] + EB$$

"BP" is the base penalty, which is $200 for a Class III violation in the matrix listed in OAR 340-012-0140(4)(b)(C) and applicable pursuant to OAR 340-012-0140(4)(a)(E)(i).

"P" is whether Respondent has any prior significant actions, as defined in OAR 340-012-0030(17), in the same media as the violation at issue that occurred at a facility owned or operated by the same Respondent, and receives a value of 9 according to OAR 340-012-0145(2)(a)(C) and (D), because Respondent has seven (7) Class I and two (2) Class II prior significant actions in the same media in case no. WQ/I-NWR-05-181 issued February 7, 2006 and case no. WQ/D-NWR-01-129 issued November 7, 2001.

"H" is Respondent's history of correcting prior significant action(s) and receives a value of -1 according to OAR 340-012-0145(3)(a)(B), because some of the violations were uncorrectable, but Respondent took reasonable efforts to minimize the effects of some of the violations by repairing the wastewater treatment system that was failing and by obtaining an operator certificate.

"O" is whether the violation was repeated or ongoing and receives a value of 3 according to OAR 340-012-0145(4)(a)(C), because the violation has existed for or occurred from 7 to 28 days. Respondent violated this permit condition 8 times on 8 different days.

"M" is the mental state of the Respondent and receives a value of 2 according to OAR 340-012-0145(5)(a)(B), because Respondent knew or reasonably should have known that

discharging effluent that violated an effluent limitation in its permit is a violation. The requirement to meet the effluent limitation for pH is express in Respondent's permit and Respondent failed to exercise reasonable care to avoid the foreseeable risk of committing the violation when he failed to properly treat the effluent.

"C" is Respondent's efforts to correct the violation and receives a value of 0 according to OAR 340-012-0145(6)(a)(D), because the violation or the effects of the violation could not be corrected or minimized.

"EB" is the approximate economic benefit that an entity gained by not complying with the law. It is designed to "level the playing field" by taking away any economic advantage the entity gained and to deter potential violators from deciding it is cheaper to violate and pay the penalty than to pay the costs of compliance. In this case, "EB" receives a value of $0 because the Department has insufficient evidence to base a finding that Respondent received an economic benefit from the violation.

PENALTY CALCULATION:

Penalty = BP + [(0.1 x BP) x (P + H + O + M + C)] + EB
= $200 + [(0.1 x $200) x (9 + -1 + 3 + 2 + 0)] + $0
= $200 + [($20) x (13)] + $0
= $200 + $260 + $0
= $460

EXHIBIT 6

FINDINGS AND DETERMINATION OF RESPONDENT'S CIVIL PENALTY PURSUANT TO OREGON ADMINISTRATIVE RULE (OAR) 340-012-0045

VIOLATION 6: Failure to include operator name, certificate classification, and grade level of each principal operator of the Facility's wastewater treatment system on daily monitoring reports, in violation of Schedule B, Condition (2)(b) of Respondent's permit, which is a violation of Oregon Revised Statute (ORS) 468B.025(2).

CLASSIFICATION: This is a Class III violation pursuant to OAR 340-012-0055(3)(b)(B).

MAGNITUDE: The magnitude of the violation is moderate pursuant to OAR 340-012-0130(1), as there is no selected magnitude specified in OAR 340-012-0135 for this violation, and the information reasonably available to the Department does not indicate a minor or major magnitude.

CIVIL PENALTY FORMULA: The formula for determining the amount of penalty of each violation is:
$BP + [(0.1 \times BP) \times (P + H + O + M + C)] + EB$

"BP" is the base penalty, which is $200 for a Class III violation in the matrix listed in OAR 340-012-0140(4)(b)(C) and applicable pursuant to OAR 340-012-0140(4)(a)(E)(i).

"P" is whether Respondent has any prior significant actions, as defined in OAR 340-012-0030(17), in the same media as the violation at issue that occurred at a facility owned or operated by the same Respondent, and receives a value of 9 according to OAR 340-012-0145(2)(a)(C) and (D), because Respondent has seven (7) Class I and two (2) Class II prior significant actions in the same media in case no. WQ/I-NWR-05-181 issued February 7, 2006 and case no. WQ/D-NWR-01-129 issued November 7, 2001.

"H" is Respondent's history of correcting prior significant action(s) and receives a value of -1 according to OAR 340-012-0145(3)(a)(B), because some of the violations were uncorrectable, but Respondent took reasonable efforts to minimize the effects of some of the violations by repairing the wastewater treatment system that was failing and by obtaining an operator certificate.

"O" is whether the violation was repeated or ongoing and receives a value of 3 according to OAR 340-012-0145(4)(a)(C), because the violation has existed for or occurred from 7 to 28 days. Respondent violated this permit condition 10 times during 10 different months.

"M" is the mental state of the Respondent and receives a value of 6 according to OAR 340-012-0145(5)(a)(C), because Respondent's conduct was reckless. Respondent has had an NPDES Permit for the system at Respondent's Facility since 2002 which states the conditions and requirements for compliance with the Permit. The Department's agent has informed Respondent of this requirement in person numerous times, yet Respondent continues to submit discharge monitoring reports that do not include the required information of operator name, certificate classification and grade level of each principal operator of the Facility's wastewater treatment system. As permittee, Respondent had actual knowledge of this requirement and consciously disregarded this permit condition.

"C" is Respondent's efforts to correct the violation and receives a value of 2 pursuant to OAR 340-012-0145(6)(a)(E), because Respondent did not address the violation as described in paragraphs (6)(a)(A) through (6)(a)(C) and the facts do not support a finding under paragraph (6)(a)(D). Respondent has had the opportunity to provide the required information but has not done so.

"EB" is the approximate economic benefit that an entity gained by not complying with the law. It is designed to "level the playing field" by taking away any economic advantage the entity gained and to deter potential violators from deciding it is cheaper to violate and pay the penalty than to pay the costs of compliance. In this case, "EB" receives a value of $0 because the Department has insufficient evidence to base a finding that Respondent received an economic benefit from the violation.

PENALTY CALCULATION:

Penalty = BP + [(0.1 x BP) x (P + H + O + M + C)] + EB
= $200 + [(0.1 x $200) x (9 + -1 + 3 + 6 + 2)] + $0
= $200 + [($20) x (19)] + $0
= $200 + $380 + $0
= $580

EXHIBIT 7

FINDINGS AND DETERMINATION OF RESPONDENT'S CIVIL PENALTY PURSUANT TO OREGON ADMINISTRATIVE RULE (OAR) 340-012-0045

VIOLATION 7: Failure to properly operate and maintain the Facility's systems of treatment and control, which is a violation of Schedule F, Section B, Condition (1) of Respondent's permit, which is a violation of Oregon Revised Statute (ORS) 468B.025(2)and OAR 340-041-0007(16)(a)(A)(ii).

CLASSIFICATION: This is a Class II violation pursuant to OAR 340-012-0055(2)(d).

MAGNITUDE: The magnitude of the violation is moderate pursuant to OAR 340-012-0130(1), as there is no selected magnitude specified in OAR 340-012-0135 for this violation, and the information reasonably available to the Department does not indicate a minor or major magnitude.

CIVIL PENALTY FORMULA: The formula for determining the amount of penalty of each violation is:
$BP + [(0.1 \times BP) \times (P + H + O + M + C)] + EB$

"BP" is the base penalty, which is $625 for a Class II, moderate magnitude violation in the matrix listed in OAR 340-012-0140(4)(b)(B)(ii) and applicable pursuant to OAR 340-012-0140(4)(a)(E)(i).

"P" is whether Respondent has any prior significant actions, as defined in OAR 340-012-0030(17), in the same media as the violation at issue that occurred at a facility owned or operated by the same Respondent, and receives a value of 9 according to OAR 340-012-0145(2)(a)(C) and (D), because Respondent has seven (7) Class I and two (2) Class II prior significant actions in the same media in case no. WQ/I-NWR-05-181 issued February 7, 2006 and case no. WQ/D-NWR-01-129 issued November 7, 2001.

"H" is Respondent's history of correcting prior significant action(s) and receives a value of -1 according to OAR 340-012-0145(3)(a)(B), because some of the violations were uncorrectable, but Respondent took reasonable efforts to minimize the effects of some of the violations by repairing the wastewater treatment system that was failing and by obtaining an operator certificate.

"O" is whether or not the violation was repeated or ongoing and receives a value of 4 according to OAR 340-012-0145(4)(a)(D), because the violation existed for or occurred on more than 28 days, which need not be consecutive days. This violation began on or about April

25, 2008, when Respondent's flow meter stopped working, and the violation is ongoing as Respondent has not replaced or repaired the flow meter.

"M" is the mental state of the Respondent and receives a value of 6 according to OAR 340-012-0145(5)(a)(C), because Respondent's conduct was reckless. Respondent has had an NPDES Permit for the system at Respondent's Facility since 2002 which states the conditions and requirements for compliance with the Permit. Respondent is aware of the requirement that he must have a functional flow meter at the Facility, as his Permit requires him to measure flow, and to use the results from the flow meter to fulfill other monitoring requirements that his Permit requires. As permittee, Respondent had actual knowledge of this requirement and consciously disregarded this permit condition.

"C" is Respondent's efforts to correct the violation and receives a value of 2 pursuant to OAR 340-012-0145(6)(a)(E), because Respondent did not address the violation as described in paragraphs (6)(a)(A) through (6)(a)(C) and the facts do not support a finding under paragraph (6)(a)(D). Respondent has had the opportunity to repair or replace the broken flow meter but has not done so.

"EB" is the approximate economic benefit that an entity gained by not complying with the law. It is designed to "level the playing field" by taking away any economic advantage the entity gained and to deter potential violators from deciding it is cheaper to violate and pay the penalty than to pay the costs of compliance. In this case, "EB" receives a value of $2,101. This is the amount Respondent gained by avoiding spending $2,800 for a new flow meter. This cost should have been incurred on or after April 25, 2008. This "EB" was calculated pursuant to OAR 340-012-0150(1) using the U.S. Environmental Protection Agency's BEN computer model.

PENALTY CALCULATION:

Penalty = BP + [(0.1 x BP) x (P + H + O + M + C)] + EB
= $625 + [(0.1 x $625) x (9 + -1 + 4 + 6 + 2)] + $2,101
= $625 + [($62.50) x (20)] + $2,101
= $625 + $1,250 + $2,101
= $3,976

Oregon
Theodore R. Kulongoski, Governor

**Department of Environmental Quality**
Headquarters
811 SW Sixth Avenue
Portland, OR 97204-1390
(503) 229-5696
FAX (503) 229-6124
TTY (503) 229-6993

RECEIVED
JUN 04 2010
Office of Administrative Hearings
Tualatin

June 3, 2010

Monica A. Whitaker
Administrative Law Judge
Office of Administrative Hearings
7995 S.W. Mohawk Street
Tualatin, OR 97062

Re: Magar Edward Magar
Notice of Civil Penalty Assessment and Order
Case No. WQ/D-NWR-09-115
OAH Case No. 901410

Dear Ms. Whitaker:

Please find enclosed the exhibits that the Department of Environmental Quality intends to introduce in the above-referenced matter that is scheduled for hearing on June 22 and 23, 2010. Additionally, DEQ's sole witness will be Lyle Christensen.

Please note that I have also sent a copy of both this letter and the exhibits to Respondent's attorney. If you have any questions, please contact me at 503-229-5395.

Sincerely,

Bryan Smith

Bryan Smith
Environmental Law Specialist

cc: Magar Edward Magar, 14102 N.E. 40th, Vancouver, WA 98682

Enclosure

Expiration Date: May 31, 2012
Permit Number: 102520
File Number: 75541
Page 1 of 15 Pages

# NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
# WASTE DISCHARGE PERMIT

Department of Environmental Quality
Northwest Region – Portland Office
2020 SW 4th Ave., Suite 400, Portland, OR 97201
Telephone: (503) 229-5263

Issued pursuant to ORS 468B.050 and The Federal Clean Water Act

**ISSUED TO:**

Magar E. Magar
~~1616 NW Northrup~~ As of 2008 14102 NE 40th
~~Portland OR 97209~~ Vancouver WA 98682

**SOURCES COVERED BY THIS PERMIT:**

| Type of Waste | Outfall Number | Outfall Location |
|---|---|---|
| Treated Wastewater | 001 | R.M. 70.6 |

**FACILITY TYPE AND LOCATION:**
Recirculating Gravel Filter
RIVERWOOD MOBILE HOME PARK
Highway 30, about 2 miles south of City of Rainier

**Treatment System Class:** Level I
**Collection System Class:** N/A

**RECEIVING STREAM INFORMATION:**
Basin: Lower Columbia
Sub-Basin: Lower Columbia-Clatskanie
Receiving Stream: Columbia River
Hydro Code: 1240483462464 70.6 D
County: COLUMBIA

**EPA REFERENCE NO:** OR0031143

Issued in response to Application No. 975424 received 3/12/2007.
This permit is issued based on the land use findings in the permit record.

Neil Mullane, Water Quality Manager
Northwest Region

June 4, 2007
Date

## PERMITTED ACTIVITIES

Until this permit expires or is modified or revoked, the permittee is authorized to construct, install, modify, or operate a wastewater collection, treatment, control and disposal system and discharge to public waters adequately treated wastewaters only from the authorized discharge point or points established in Schedule A and only in conformance with all the requirements, limitations, and conditions set forth in the attached schedules as follows:


| | Page |
|---|---|
| Schedule A - Waste Discharge Limitations not to be Exceeded | 2 |
| Schedule B - Minimum Monitoring and Reporting Requirements | 3 |
| Schedule C - Compliance Conditions and Schedules | 5 |
| Schedule D - Special Conditions | 5 |
| Schedule F - General Conditions | 7 |


Unless specifically authorized by this permit, by another NPDES or WPCF permit, or by Oregon Administrative Rule, any other direct or indirect discharge of waste is prohibited, including discharge to waters of the state or an underground injection control system.

EXHIBIT # A1 M000134 p.1

## SCHEDULE A

**1. Waste Discharge Limitations not to be exceeded after permit issuance.**

a. Treated Effluent Outfall 001

(1) May 1 - October 31:

| Parameter | Average Effluent Concentrations Monthly | Monthly* Average lb/day | Daily* Maximum lbs |
|---|---|---|---|
| $BOD_5$ | 20 mg/L | 2.2 | 4.4 |
| TSS | 20 mg/L | 2.2 | 4.4 |

(2) November 1 - April 30:

| Parameter | Average Effluent Concentrations Monthly | Monthly* Average lb/day | Daily* Maximum lbs |
|---|---|---|---|
| $BOD_5$ | 30 mg/L | 3.3 | 6.6 |
| TSS | 30 mg/L | 3.3 | 6.6 |

* Average dry weather design flow to the facility equals .013 MGD. Mass load limits based upon average dry weather design flow to the facility.

(3)

| Other parameters (year-round) | Limitations |
|---|---|
| *E. coli* Bacteria | Shall not exceed 126 organisms per 100 mL monthly geometric mean. No single sample shall exceed 406 organisms per 100 mL. (See Note 1) |
| pH | Shall be within the range of 6.0 - 9.0 |
| $BOD_5$ and TSS Removal Efficiency | Shall not be less than 85% monthly average for $BOD_5$ and 85% monthly for TSS. |

(4) No wastes may be discharged or activities conducted that violate Water Quality standards adopted in OAR 340-041 for the Northern Oregon Coastal Basin except in the regulatory mixing zone and as provided for in OAR 340-045-0080. The regulatory mixing zone is defined as:

That portion of the Columbia River contained within a radius extending out twenty (20) feet from a discharge point on east bank of the river.

b. No activities shall be conducted that could cause an adverse impact on existing or potential uses of groundwater. All wastewater and process related residuals shall be managed and disposed in a manner that will prevent a violation of the Groundwater Quality Protection Rules (OAR 340-040).

**NOTES:**

1. If a single sample exceeds 406 organisms per 100 mL, then five consecutive re-samples may be taken at four-hour intervals beginning within 28 hours after the original sample was taken. If the log mean of the five re-samples is less than or equal to 126 organisms per 100 mL, a violation shall not be triggered.

## SCHEDULE B

1. **Minimum Monitoring and Reporting Requirements** (unless otherwise approved in writing by the Department).

The permittee shall monitor the parameters as specified below at the locations indicated. The laboratory used by the permittee to analyze samples shall have a quality assurance/quality control (QA/QC) program to verify the accuracy of sample analysis. If QA/QC requirements are not met for any analysis, the results shall be included in the report, but not used in calculations required by this permit. When possible, the permittee shall re-sample in a timely manner for parameters failing the QA/QC requirements, analyze the samples, and report the results.

a. Influent

The facility influent sampling locations are the following:

* Influent grab samples are taken after the septic tank prior to the recirculation/mix tank.

| Item or Parameter | Minimum Frequency | Type of Sample |
|---|---|---|
| $BOD_5$ | Monthly | Grab |
| TSS | Monthly | Grab |
| pH | 2/Week | Grab |

b. Treated Effluent Outfall 001

The facility effluent sampling locations are the following:

* Flow measurements are taken just before the chlorine contact pipe. Effluent grab samples are taken following chlorination.

| Item or Parameter | Minimum Frequency | Type of Sample |
|---|---|---|
| Total Flow (MGD) | Daily | Measurement |
| Flow Meter Calibration | Annually | Verification |
| $BOD_5$ | Monthly | Grab |
| TSS | Monthly | Grab |
| pH | 2/Week | Grab |
| *E. coli* | Monthly | Grab (See Note 1) |
| Quantity Chlorine Used | Daily | Measurement |
| Total Residual Chlorine | Daily | Grab |
| Pounds Discharged ($BOD_5$ and TSS) | Monthly | Calculation |
| Average Percent Removed ($BOD_5$ and TSS) | Monthly | Calculation |
| Nutrient: Ammonia ($NH_3$-N) | Quarterly | Grab |

c. Biosolids Management

| Item or Parameter | Minimum Frequency | Type of Sample |
|---|---|---|
| Inspect septic tank and recirculation tank | Annually (in August) | Measure accumulated solids and scum as a % of volume |
| Solids pumped from treatment system | Each Occurrence | Date, volume (gallons), percent solids, hauler, transfer point |

d. Temperature Monitoring

| Item or Parameter | Minimum Frequency | Type of Sample |
|---|---|---|
| Effluent Temperature, Daily Max (See Note 2) | 2/week | Grab between 3 and 4 PM |

2. **Reporting Procedures**

a. Monitoring results shall be reported on approved forms. The reporting period is the calendar month. Reports must be submitted to the Department's Northwest Region - Portland office by the 15th day of the following month.

b. State monitoring reports shall identify the name, certificate classification and grade level of each principal operator designated by the permittee as responsible for supervising the wastewater collection and treatment systems during the reporting period. Monitoring reports shall also identify each system classification as found on page one of this permit.

c. Monitoring reports shall also include a record of the quantity and method of use of all sludge removed from the treatment facility and a record of all applicable equipment breakdowns and bypassing.

3. **Report Submittals**

For any year in which sludge is transported to another facility, a report shall be submitted to the Department by February 19 of the following year that describes solids handling activities for the previous year and includes, but is not limited to, the required information outlined in OAR 340-050-0035(6)(a)-(e).

NOTES:

1. *E. coli* monitoring must be conducted according to any of the following test procedures as specified in **Standard Methods for the Examination of Water and Wastewater, 19th Edition**, or according to any test procedure that has been authorized and approved in writing by the Director or an authorized representative:

| Method | Reference | Page | Method Number |
|---|---|---|---|
| mTEC agar, MF | Standard Methods, 18th Edition | 9-29 | 9213 D |
| NA-MUG, MF | Standard Methods, 19th Edition | 9-63 | 9222 G |
| Chromogenic Substrate, MPN Colilert QT | Standard Methods, 19th Edition Idexx Laboratories, Inc. | 9-65 | 9223 B |

## SCHEDULE C

**Compliance Conditions**

1. Within 180 days of permit issuance the permittee shall have the existing treatment system evaluated by a qualified consultant experienced in the operation of recirculating gravel filters and submit the results of the evaluation to the Department. The evaluation should be comprehensive and, at minimum
   a. address any issues with the recirculating gravel filter to alleviate surface ponding and unequal distribution, and
   b. evaluate if collection system repairs are needed to reduce hydraulic loading at the septic tank.

2. If the Department or Permittee determines that repair, upgrade or modification is needed, Permittee shall develop and submit plans and specifications within 90 days of Department notification. If such plans and specifications cannot be reasonably developed and submitted within such period, Permittee shall immediately notify the Department and shall provide a written time schedule that is acceptable to the Department for submission of plans and specifications. Unless otherwise authorized by the Department, the Permittee shall complete all required upgrades within 90 days of plan approval.

3. The permittee is expected to meet the compliance dates which have been established in this schedule. Either prior to or no later than 14 days following any lapsed compliance date, the permittee shall submit to the Department a notice of compliance or noncompliance with the established schedule. The Director may revise a schedule of compliance if he/she determines good and valid cause resulting from events over which the permittee has little or no control.

## SCHEDULE D

**Special Conditions**

1. The permittee shall comply with Oregon Administrative Rules (OAR), Chapter 340, Division 49, "Regulations Pertaining To Certification of Wastewater System Operator Personnel" and accordingly:

   a. The permittee shall have its wastewater system supervised by one or more operators who are certified in a classification and grade level (equal to or greater) that corresponds with the classification (collection and /or treatment) of the system to be supervised as specified on page one of this permit. The permittee may contract for part-time supervision in accordance with OAR 340-49-15(3) and 340-49-070.

   **Note: A "supervisor" is defined as the person exercising authority for establishing and executing the specific practice and procedures of operating the system in accordance with the policies of the permittee and requirements of the waste discharge permit. "Supervise" means responsible for the technical operation of a system, which may affect its performance or the quality of the effluent produced. Supervisors are not required to be on-site at all times.**

   b. The permittee's wastewater system may not be without supervision (as required by Special Condition 1.a. above) for more than thirty (30) days unless otherwise authorized by the Department of Environmental Quality in writing.

   c. The permittee is responsible for ensuring the wastewater system has a properly certified supervisor available at all times to respond on-site at the request of the permittee and to any other operator.

   d. The permittee shall notify the Department of Environmental Quality in writing within thirty (30) days of replacement or redesignation of certified operators responsible for supervising wastewater system

operation. The notice shall be filed with the Water Quality Division, Operator Certification Program, 400 East Scenic Drive, Suite 307, The Dalles, OR 97058. This requirement is in addition to the reporting requirements contained under Schedule B of this permit.

e. Upon written request, the Department may grant the permittee reasonable time, not to exceed 120 days, to obtain the services of a qualified person to supervise the wastewater system. The written request must include justification for the time needed, a schedule for recruiting and hiring, the date the system supervisor availability ceased and the name of the alternate system supervisor(s) as required by 1.b. above.

2. An adequate contingency plan for prevention and handling of spills and unplanned discharges shall be in force at all times. A continuing program of employee orientation and education shall be maintained to ensure awareness of the necessity of good in-plant control and quick and proper action in the event of a spill or accident.

3. The permittee shall not be required to perform a hydrogeologic characterization or groundwater monitoring during the term of this permit provided:

a. The facilities are operated in accordance with the permit conditions, and;

b. There are no adverse groundwater quality impacts (complaints or other indirect evidence) resulting from the facility's operation.

If warranted, at permit renewal the Department may evaluate the need for a full assessment of the facilities impact on groundwater quality.

4. The permittee shall notify the DEQ Northwest Region - Portland Office (phone: 503- 229-5263) in accordance with the response times noted in the General Conditions of this permit, of any malfunction so that corrective action can be coordinated between the permittee and the Department.

## SCHEDULE F

**NPDES General Conditions – Domestic Facilities**

### SECTION A. STANDARD CONDITIONS

1. Duty to Comply with Permit

The permittee must comply with all conditions of this permit. Failure to comply with any permit condition is a violation of the Clean Water Act, Oregon Revised Statutes (ORS) 468B.025, and 40 Code of Federal Regulations (CFR) Section 122.41(a), and grounds for an enforcement action. Failure to comply is also grounds for the Department to modify, revoke, or deny renewal of a permit.

2. Penalties for Water Pollution and Permit Condition Violations

ORS 468.140 allows the Department to impose civil penalties up to $10,000 per day for violation of a term, condition, or requirement of a permit. Additionally 40 CFR 122.41 (A) provides that any person who violates any permit condition, term, or requirement may be subject to a federal civil penalty not to exceed $25,000 per day for each violation.

Under ORS 468.943 and 40 CFR 122.41(a), unlawful water pollution, if committed by a person with criminal negligence, is punishable by a fine of up to $25,000 imprisonment for not more than one year, or both. Each day on which a violation occurs or continues is a separately punishable offense.

Under ORS 468.946, a person who knowingly discharges, places, or causes to be placed any waste into the waters of the state or in a location where the waste is likely to escape into the waters of the state is subject to a Class B felony punishable by a fine not to exceed $200,000 and up to 10 years in prison. Additionally, under 40 CFR 122.41(a) any person who knowingly discharges, places, or causes to be placed any waste into the waters of the state or in a location where the waste is likely to escape into the waters of the state is subject to a federal civil penalty not to exceed $100,000, and up to 6 years in prison.

3. Duty to Mitigate

The permittee must take all reasonable steps to minimize or prevent any discharge or sludge use or disposal in violation of this permit that has a reasonable likelihood of adversely affecting human health or the environment. In addition, upon request of the Department, the permittee must correct any adverse impact on the environment or human health resulting from noncompliance with this permit, including such accelerated or additional monitoring as necessary to determine the nature and impact of the noncomplying discharge.

4. Duty to Reapply

If the permittee wishes to continue an activity regulated by this permit after the expiration date of this permit, the permittee must apply for and have the permit renewed. The application must be submitted at least 180 days before the expiration date of this permit.

The Department may grant permission to submit an application less than 180 days in advance but no later than the permit expiration date.

5. Permit Actions

This permit may be modified, revoked and reissued, or terminated for cause including, but not limited to, the following:

a. Violation of any term, condition, or requirement of this permit, a rule, or a statute
b. Obtaining this permit by misrepresentation or failure to disclose fully all material facts

c. A change in any condition that requires either a temporary or permanent reduction or elimination of the authorized discharge
d. The permittee is identified as a Designated Management Agency or allocated a wasteload under a Total Maximum Daily Load (TMDL)
e. New information or regulations
f. Modification of compliance schedules
g. Requirements of permit reopener conditions
h. Correction of technical mistakes made in determining permit conditions
i. Determination that the permitted activity endangers human health or the environment
j. Other causes as specified in 40 CFR 122.62, 122.64, and 124.5

The filing of a request by the permittee for a permit modification, revocation or reissuance, termination, or a notification of planned changes or anticipated noncompliance, does not stay any permit condition.

6. Toxic Pollutants
The permittee must comply with any applicable effluent standards or prohibitions established under Oregon Administrative Rules (OAR) 340-041-0033 for toxic pollutants within the time provided in the regulations that establish those standards or prohibitions, even if the permit has not yet been modified to incorporate the requirement.

7. Property Rights and Other Legal Requirements
The issuance of this permit does not convey any property rights of any sort, or any exclusive privilege, or authorize any injury to persons or property or invasion of any other private rights, or any infringement of federal, tribal, state, or local laws or regulations.

8. Permit References
Except for effluent standards or prohibitions established under OAR 340-041-0033 for toxic pollutants and standards for sewage sludge use or disposal established under Section 405(d) of the Clean Water Act, all rules and statutes referred to in this permit are those in effect on the date this permit is issued.

9. Permit Fees
The permittee must pay the fees required by Oregon Administrative Rules.

## SECTION B. OPERATION AND MAINTENANCE OF POLLUTION CONTROLS

1. Proper Operation and Maintenance
The permittee must at all times properly operate and maintain all facilities and systems of treatment and control (and related appurtenances) that are installed or used by the permittee to achieve compliance with the conditions of this permit. Proper operation and maintenance also includes adequate laboratory controls and appropriate quality assurance procedures. This provision requires the operation of back-up or auxiliary facilities or similar systems that are installed by a permittee only when the operation is necessary to achieve compliance with the conditions of the permit.

2. Need to Halt or Reduce Activity Not a Defense
For industrial or commercial facilities, upon reduction, loss, or failure of the treatment facility, the permittee must, to the extent necessary to maintain compliance with its permit, control production or all discharges or both until the facility is restored or an alternative method of treatment is provided. This requirement applies, for example, when the primary source of power of the treatment facility fails or is reduced or lost. It is not a defense for a permittee in an enforcement action that it would have been necessary to halt or reduce the permitted activity in order to maintain compliance with the conditions of this permit.

3. Bypass of Treatment Facilities

a. Definitions

(1) "Bypass" means intentional diversion of waste streams from any portion of the treatment facility. The term "bypass" does not apply if the diversion does not cause effluent limitations to be exceeded, provided the diversion is to allow essential maintenance to assure efficient operation or the diversion is due to nonuse of nonessential treatment units or processes at the treatment facility.

(2) "Severe property damage" means substantial physical damage to property, damage to the treatment facilities or treatment processes that causes them to become inoperable, or substantial and permanent loss of natural resources that can reasonably be expected to occur in the absence of a bypass. Severe property damage does not mean economic loss caused by delays in production.

b. Prohibition of bypass.

(1) Bypass is prohibited unless:

(a) Bypass was necessary to prevent loss of life, personal injury, or severe property damage;

(b) There were no feasible alternatives to the bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of equipment downtime. This condition is not satisfied if adequate backup equipment should have been installed in the exercise of reasonable engineering judgment to prevent a bypass that occurred during normal periods of equipment downtime or preventative maintenance; and

(c) The permittee submitted notices and requests as required under General Condition B.3.c.

(2) The Department may approve an anticipated bypass, after considering its adverse effects and any alternatives to bypassing, when the Department determines that it will meet the three conditions listed above in General Condition B.3.b.(1).

c. Notice and request for bypass.

(1) Anticipated bypass. If the permittee knows in advance of the need for a bypass, a written notice must be submitted to the Department at least ten days before the date of the bypass.

(2) Unanticipated bypass. The permittee must submit notice of an unanticipated bypass as required in General Condition D.5.

4. Upset

a. Definition. "Upset" means an exceptional incident in which there is unintentional and temporary noncompliance with technology based permit effluent limitations because of factors beyond the reasonable control of the permittee. An upset does not include noncompliance to the extent caused by operation error, improperly designed treatment facilities, inadequate treatment facilities, lack of preventative maintenance, or careless or improper operation.

b. Effect of an upset. An upset constitutes an affirmative defense to an action brought for noncompliance with such technology-based permit effluent limitations if the requirements of General Condition B.4.c are met. No determination made during administrative review of claims that noncompliance was caused by upset, and before an action for noncompliance, is final administrative action subject to judicial review.

c. Conditions necessary for a demonstration of upset. A permittee who wishes to establish the affirmative defense of upset must demonstrate, through properly signed, contemporaneous operating logs, or other relevant evidence that:
   (1) An upset occurred and that the permittee can identify the causes(s) of the upset;
   (2) The permitted facility was at the time being properly operated;
   (3) The permittee submitted notice of the upset as required in General Condition D.5, hereof (24-hour notice); and
   (4) The permittee complied with any remedial measures required under General Condition A.3 hereof.

d. Burden of proof. In any enforcement proceeding the permittee seeking to establish the occurrence of an upset has the burden of proof.

5. Treatment of Single Operational Upset

For purposes of this permit, A Single Operational Upset that leads to simultaneous violations of more than one pollutant parameter will be treated as a single violation. A single operational upset is an exceptional incident that causes simultaneous, unintentional, unknowing (not the result of a knowing act or omission), temporary noncompliance with more than one Clean Water Act effluent discharge pollutant parameter. A single operational upset does not include Clean Water Act violations involving discharge without a NPDES permit or noncompliance to the extent caused by improperly designed or inadequate treatment facilities. Each day of a single operational upset is a violation.

6. Overflows from Wastewater Conveyance Systems and Associated Pump Stations

a. Definitions
   (1) "Overflow" means the diversion and discharge of waste streams from any portion of the wastewater conveyance system including pump stations, through a designed overflow device or structure, other than discharges to the wastewater treatment facility.
   (2) "Severe property damage" means substantial physical damage to property, damage to the conveyance system or pump station which causes them to become inoperable, or substantial and permanent loss of natural resources which can reasonably be expected to occur in the absence of an overflow.
   (3) "Uncontrolled overflow" means the diversion of waste streams other than through a designed overflow device or structure, for example to overflowing manholes or overflowing into residences, commercial establishments, or industries that may be connected to a conveyance system.

b. Prohibition of storm related overflows. Storm related overflows of raw sewage are prohibited to waters of the State. However, the Environmental Quality Commission (EQC) recognizes that it is impossible to design and construct a conveyance system that will prevent overflows under all storm conditions. The State of Oregon has determined that all wastewater conveyance systems should be designed to transport storm events up to a specific size to the treatment facility. Therefore, such storm related overflows will not be considered a violation of this permit if:
   (1) The permittee has conveyance and treatment facilities adequate to prevent overflows except during a storm event greater than the one-in-five-year, 24-hour duration storm from November 1 through May 21 and except during a storm event greater than the one-in-ten-year, 24-hour duration storm from May 22 through October 31. However, overflows during a storm event less than the one-in-five-year, 24-hour duration storm from November 1 through May 21 are also not permit violations if, the permittee had separate sanitary and storm sewers on January 10, 1996, had experienced sanitary sewer overflows due to inflow and infiltration problems,

and has submitted an acceptable plan to the Department to address these sanitary sewer overflows by January 1, 2010;

(2) The permittee has provided the highest and best practicable treatment and/or control of wastes, activities, and flows and has properly operated the conveyance and treatment facilities in compliance with General Condition B.1.;

(3) The permittee has minimized the potential environmental and public health impacts from the overflow; and

(4) The permittee has properly maintained the capacity of the conveyance system.

c. Prohibition of other overflows. All overflows other than stormwater-related overflows (discussed in Schedule F, Section B, Condition 6.b.) are prohibited unless:

(1) Overflows were unavoidable to prevent an uncontrolled overflow, loss of life, personal injury, or severe property damage;

(2) There were no feasible alternatives to the overflows, such as the use of auxiliary pumping or conveyance systems, or maximization of conveyance system storage; and

(3) The overflows are the result of an upset as defined in General Condition B.4. and meeting all requirements of this condition.

d. Uncontrolled overflows are prohibited where wastewater is likely to escape or be carried into the waters of the State by any means.

e. Reporting required. Unless otherwise specified in writing by the Department, all overflows and uncontrolled overflows must be reported orally to the Department within 24 hours from the time the permittee becomes aware of the overflow. Reporting procedures are described in more detail in General Condition D.5. Reports concerning storm related overflows must include information about the amount and intensity of the rainfall event causing the overflow.

7. Public Notification of Effluent Violation or Overflow

If effluent limitations specified in this permit are exceeded or an overflow occurs, upon request by the Department, the permittee must take such steps as are necessary to alert the public about the extent and nature of the discharge. Such steps may include, but are not limited to, posting of the river at access points and other places, news releases, and paid announcements on radio and television.

8. Removed Substances

Solids, sludges, filter backwash, or other pollutants removed in the course of treatment or control of wastewaters must be disposed of in such a manner as to prevent any pollutant from such materials from entering waters of the state, causing nuisance conditions, or creating a public health hazard.

## SECTION C. MONITORING AND RECORDS

1. Representative Sampling

Sampling and measurements taken as required herein must be representative of the volume and nature of the monitored discharge. All samples must be taken at the monitoring points specified in this permit, and shall be taken, unless otherwise specified, before the effluent joins or is diluted by any other waste stream, body of water, or substance. Monitoring points may not be changed without notification to and the approval of the Department.

2. Flow Measurements

Appropriate flow measurement devices and methods consistent with accepted scientific practices must be selected and used to ensure the accuracy and reliability of measurements of the volume of monitored discharges. The devices must be installed, calibrated and maintained to insure that the accuracy of the

measurements is consistent with the accepted capability of that type of device. Devices selected must be capable of measuring flows with a maximum deviation of less than ± 10 percent from true discharge rates throughout the range of expected discharge volumes.

3. Monitoring Procedures
Monitoring must be conducted according to test procedures approved under 40 CFR part 136, unless other test procedures have been specified in this permit.

4. Penalties of Tampering
The Clean Water Act provides that any person who falsifies, tampers with, or knowingly renders inaccurate any monitoring device or method required to be maintained under this permit may, upon conviction, be punished by a fine of not more than $10,000 per violation, imprisonment for not more than two years, or both. If a conviction of a person is for a violation committed after a first conviction of such person, punishment is a fine not more than $20,000 per day of violation, or by imprisonment of not more than four years, or both.

5. Reporting of Monitoring Results
Monitoring results must be summarized each month on a Discharge Monitoring Report form approved by the Department. The reports must be submitted monthly and are to be mailed, delivered or otherwise transmitted by the 15th day of the following month unless specifically approved otherwise in Schedule B of this permit.

6. Additional Monitoring by the Permittee
If the permittee monitors any pollutant more frequently than required by this permit, using test procedures approved under 40 CFR part 136 or as specified in this permit, the results of this monitoring must be included in the calculation and reporting of the data submitted in the Discharge Monitoring Report. Such increased frequency must also be indicated. For a pollutant parameter that may be sampled more than once per day (e.g., Total Chlorine Residual), only the average daily value must be recorded unless otherwise specified in this permit.

7. Averaging of Measurements
Calculations for all limitations that require averaging of measurements must utilize an arithmetic mean, except for bacteria which shall be averaged as specified in this permit.

8. Retention of Records
Except for records of monitoring information required by this permit related to the permittee's sewage sludge use and disposal activities, which shall be retained for a period of at least five years (or longer as required by 40 CFR part 503). The permittee must retain records of all monitoring information, including: all calibration, maintenance records, all original strip chart recordings for continuous monitoring instrumentation, copies of all reports required by this permit, and records of all data used to complete the application for this permit for a period of at least 3 years from the date of the sample, measurement, report, or application. This period may be extended by request of the Department at any time.

9. Records Contents

Records of monitoring information must include:
a. The date, exact place, time, and methods of sampling or measurements;
b. The individual(s) who performed the sampling or measurements;
c. The date(s) analyses were performed;
d. The individual(s) who performed the analyses;
e. The analytical techniques or methods used; and
f. The results of such analyses.

10. Inspection and Entry

The permittee must allow the Department representative upon the presentation of credentials to:

a. Enter upon the permittee's premises where a regulated facility or activity is located or conducted, or where records must be kept under the conditions of this permit;
b. Have access to and copy, at reasonable times, any records that must be kept under the conditions of this permit;
c. Inspect at reasonable times any facilities, equipment (including monitoring and control equipment), practices, or operations regulated or required under this permit, and
d. Sample or monitor at reasonable times, for the purpose of assuring permit compliance or as otherwise authorized by state law, any substances or parameters at any location.

**SECTION D. REPORTING REQUIREMENTS**

1. Planned Changes

The permittee must comply with OAR chapter 340, division 52, "Review of Plans and Specifications" and 40 CFR Section 122.41(l) (1). Except where exempted under OAR chapter 340, division 52, no construction, installation, or modification involving disposal systems, treatment works, sewerage systems, or common sewers may be commenced until the plans and specifications are submitted to and approved by the Department. The permittee must give notice to the Department as soon as possible of any planned physical alternations or additions to the permitted facility.

2. Anticipated Noncompliance

The permittee must give advance notice to the Department of any planned changes in the permitted facility or activity that may result in noncompliance with permit requirements.

3. Transfers

This permit may be transferred to a new permittee provided the transferee acquires a property interest in the permitted activity and agrees in writing to fully comply with all the terms and conditions of the permit and the rules of the Commission. No permit may be transferred to a third party without prior written approval from the Department. The Department may require modification, revocation, and reissuance of the permit to change the name of the permittee and incorporate such other requirements as may be necessary under the Clean Water Act (see 40 CFR Section 122.61; in some cases, modification or revocation and reissuance is mandatory).. The permittee must notify the Department when a transfer of property interest takes place.

4. Compliance Schedule

Reports of compliance or noncompliance with, or any progress reports on interim and final requirements contained in any compliance schedule of this permit must be submitted no later than 14 days following each schedule date. Any reports of noncompliance must include the cause of noncompliance, any remedial actions taken, and the probability of meeting the next scheduled requirements.

5. Twenty-Four Hour Reporting

The permittee must report any noncompliance that may endanger health or the environment. Any information must be provided orally (by telephone) within 24 hours, unless otherwise specified in this permit, from the time the permittee becomes aware of the circumstances. During normal business hours, the Department's Regional office must be called. Outside of normal business hours, the Department must be contacted at 1-800-452-0311 (Oregon Emergency Response System).

A written submission must also be provided within 5 days of the time the permittee becomes aware of the circumstances. Pursuant to ORS 468.959 (3) (a), if the permittee is establishing an affirmative defense of upset or bypass to any offense under ORS 468.922 to 468.946, delivered written notice must be made to the

Department or other agency with regulatory jurisdiction within 4 (four) calendar days of the time the permittee becomes aware of the circumstances. The written submission must contain:

a. A description of the noncompliance and its cause;
b. The period of noncompliance, including exact dates and times;
c. The estimated time noncompliance is expected to continue if it has not been corrected;
d. Steps taken or planned to reduce, eliminate, and prevent reoccurrence of the noncompliance; and
e. Public notification steps taken, pursuant to General Condition B.7

The following must be included as information that must be reported within 24 hours under this paragraph:

f. Any unanticipated bypass that exceeds any effluent limitation in this permit;
g. Any upset that exceeds any effluent limitation in this permit;
h. Violation of maximum daily discharge limitation for any of the pollutants listed by the Department in this permit; and
i. Any noncompliance that may endanger human health or the environment.

The Department may waive the written report on a case-by-case basis if the oral report has been received within 24 hours.

6. Other Noncompliance

The permittee must report all instances of noncompliance not reported under General Condition D.4 or D.5, at the time monitoring reports are submitted. The reports must contain:

a. A description of the noncompliance and its cause;
b. The period of noncompliance, including exact dates and times;
c. The estimated time noncompliance is expected to continue if it has not been corrected; and
d. Steps taken or planned to reduce, eliminate, and prevent reoccurrence of the noncompliance.

7. Duty to Provide Information

The permittee must furnish to the Department within a reasonable time any information that the Department may request to determine compliance with this permit. The permittee must also furnish to the Department, upon request, copies of records required to be kept by this permit.

Other Information: When the permittee becomes aware that it has failed to submit any relevant facts or has submitted incorrect information in a permit application or any report to the Department, it must promptly submit such facts or information.

8. Signatory Requirements

All applications, reports or information submitted to the Department must be signed and certified in accordance with 40 CFR Section 122.22.

9. Falsification of Information

Under ORS 468.953, any person who knowingly makes any false statement, representation, or certification in any record or other document submitted or required to be maintained under this permit, including monitoring reports or reports of compliance or noncompliance, is subject to a Class C felony punishable by a fine not to exceed $100,000 per violation and up to 5 years in prison. Additionally, according to 40 CFR 122.41(k)(2), any person who knowingly makes any false statement, representation, or certification in any record or other document submitted or required to be maintained under this permit including monitoring reports or reports of compliance or non-compliance shall, upon conviction, be punished by a federal civil penalty not to exceed $10,000 per violation, or by imprisonment for not more than 6 months per violation, or by both.

10. Changes to Indirect Dischargers

The permittee must provide adequate notice to the Department of the following:

a. Any new introduction of pollutants into the POTW from an indirect discharger which would be subject to section 301 or 306 of the Clean Water Act if it were directly discharging those pollutants and;

b. Any substantial change in the volume or character of pollutants being introduced into the POTW by a source introducing pollutants into the POTW at the time of issuance of the permit.

c. For the purposes of this paragraph, adequate notice shall include information on (i) the quality and quantity of effluent introduced into the POTW, and (ii) any anticipated impact of the change on the quantity or quality of effluent to be discharged from the POTW.

## SECTION E. DEFINITIONS

1. *BOD* means five-day biochemical oxygen demand.
2. *CBOD* means five day carbonaceous biochemical oxygen demand
3. *TSS* means total suspended solids.
4. "*Bacteria*" includes but is not limited to fecal coliform bacteria, total coliform bacteria, and E. coli bacteria.
5. *FC* means fecal coliform bacteria.
6. *Total residual chlorine* means combined chlorine forms plus free residual chlorine
7. *Technology based permit effluent limitations* means technology-based treatment requirements as defined in 40 CFR Section 125.3, and concentration and mass load effluent limitations that are based on minimum design criteria specified in OAR Chapter 340, Division 41.
8. *mg/l* means milligrams per liter.
9. *kg* means kilograms.
10. $m^3/d$ means cubic meters per day.
11. *MGD* means million gallons per day.
12. 24-hour *Composite sample* means a sample formed by collecting and mixing discrete samples taken periodically and based on time or flow. The sample must be collected and stored in accordance with 40 CFR part 136.
13. *Grab sample* means an individual discrete sample collected over a period of time not to exceed 15 minutes.
14. *Quarter* means January through March, April through June, July through September, or October through December.
15. *Month* means calendar month.
16. *Week* means a calendar week of Sunday through Saturday.
17. *POTW* means a publicly owned treatment works

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name RIVERWOOD | Phone Number 3602547713 | Month/Year APRIL 2008
DEQ Permit No. 102520 | DEQ File No./Facility ID 75541 | EPA Reference No. OR 0031143
Plant Type CIR. GRAVEL | County COLUMBIA | Population Served ~ 100

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____
Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] Authorized Signature — 5/28/08 Date

MAGAR MAGAR — COUNTER-OPERATOR Name (Print)

√LWC

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | 6.0 | 6151 | | | | | |
| 2 | | 6.1 | 6477 | | | | | |
| 3 | | 6.1 | 6482 | | | | 64 | |
| 4 | | 6.0 | 6011 | | | | | |
| 5 | | 6.0 | 6977 | | | | | |
| 6 | | 6.1 | 7286 | | | | | |
| 7 | | 6.0 | 6340 | | | | | |
| 8 | | 6.1 | 6860 | | | | | |
| 9 | | 6.2 | 7063 | | | | | |
| 10 | | 6.2 | 8011 | | | | | |
| 11 | | 6.1 | 5216 | | | | | |
| 12 | | 6.0 | 6778 | | | | | |
| 13 | | 6.0 | 6403 | | | | | |
| 14 | | 6.1 | 8691 | | | | | |
| 15 | | 6.0 | 4936 | | | | | |
| 16 | | 6.1 | 6553 | | | | | |
| 17 | | 6.2 | 6329 | | | | | |
| 18 | | 6.1 | 6626 | | | | | |
| 19 | | 6.1 | 6718 | | | | | |
| 20 | | 6.1 | 7799 | | | | | |
| 21 | | 6.0 | 7610 | | | | | |
| 22 | | 6.1 | ~~8778~~ | | | | | |
| 23 | | 6.1 | 8713 | | | | | |
| 24 | | 6.0 | 2507 | | | | | |
| 25 | | | FLOW METER MALFUNCTION | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

| Date | EFFLUENT (identify outfall number – e.g. 001, 002, 003): Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Amnonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 1 |
| 2 | | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 2 |
| 3 | | | | | | | | | | | | | | | | | | | 0.3 | | | 1 | | | | | | | | Add Cl. | 3 |
| 4 | | | | | | | | | | | | | | | | | | | 1.05 | ? | | | | | | | | | | | 4 |
| 5 | | | | | | | | | | | | | | | | | | | 1.04 | ? | | | | | | | | | | | 5 |
| 6 | | | | | | | | | | | | | | | | | | | 1.03 | ? | | | | | | | | | | | 6 |
| 7 | | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | 7 |
| 8 | | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | Add Cl. | 8 |
| 9 | | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 9 |
| 10 | | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 10 |
| 11 | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 11 |
| 12 | | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 12 |
| 13 | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 13 |
| 14 | | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add Cl. | 14 |
| 15 | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 15 |
| 16 | | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 16 |
| 17 | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 17 |
| 18 | | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 18 |
| 19 | | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 19 |
| 20 | | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 20 |
| 21 | | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 21 |
| 22 | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Add Cl. | 22 |
| 23 | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 23 |
| 24 | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 24 |
| 25 | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | Flow METER MALFUNCTION | 25 |
| 26 | | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | 26 |
| 27 | | | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 27 |
| 28 | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 28 |
| 29 | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 29 |
| 30 | | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 30 |
| 31 | | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

FLOW METER MALFUNCTION. QUIT WORKING.

RECEIVED JUN 02 2008 NORTHWEST REGION DEPT OF ENVIRONMENTAL QUALITY

EXHIBIT # Item M 000149 A2 pl

# Discharge Monitoring Report - Oregon Department of Environmental Quality

JUL 07 2008
DEPT OF ENVIRONMENTAL QUALITY
NW REGION WATER QUALITY

VWC

Facility Name: River Wood MHP | Phone Number: 360-254-7131 | Month/Year: May 2008
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR 00314
Plant Type: Recirc. Gravel | County: Columbia | Population Served: 100+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature — 7/8/08 Date

Megan Mayo Name (Print)

## Operator Certification

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD Concentration mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | 6.8 | 0.3 | | | | | |
| 2 | | 6.8 | Meter | | | | | |
| 3 | | 6.8 | | | | | | |
| 4 | | 6.8 | | | | | | |
| 5 | | 6.7 | | | | | | |
| 6 | | 6.7 | | | | | | |
| 7 | | 6.7 | | | | | | |
| 8 | | 6.7 | | | | | | |
| 9 | | 6.7 | | | | | | |
| 10 | | 6.8 | | | | | | |
| 11 | | 6.9 | | | | | | |
| 12 | | 6.9 | | | | | | |
| 13 | | 6.8 | | | | | | |
| 14 | | 6.8 | | | | | | |
| 15 | | 6.8 | | | | | | |
| 16 | | 6.7 | | | | | | |
| 17 | | 6.8 | | | | | | |
| 18 | | 6.7 | | | | | | |
| 19 | | 6.7 | | | | | | |
| 20 | | 6.7 | | | | | | |
| 21 | | 6.7 | | | | | | |
| 22 | | 6.9 | 70 | | 75 | | | |
| 23 | | 6.7 | | | | | | |
| 24 | | 0.4 | | | | | | |
| 25 | | 6.9 | | | | | | |
| 26 | | 6.7 | | | | | | |
| 27 | | 6.9 | | | | | | |
| 28 | | 6.9 | | | | | | |
| 29 | | 6.8 | | | | | | |
| 30 | | 6.7 | | | | | | |
| 31 | | 6.7 | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number – e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Transmittance % | Turbidity N.T.U. | COLIFORM E.coli MPN/MF CFU/100 ml | COLIFORM Fecal MPN/MF CFU/100 ml | COLIFORM Total MPN/MF CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution CFS | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | +Cl2 ad |
| 6 | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | |
| 8 | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | +Cl2 |
| 10 | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | |
| 11 | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | |
| 12 | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | |
| 13 | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | |
| 14 | | | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | | +Cl2 |
| 15 | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | |
| 16 | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | |
| 17 | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | |
| 18 | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | +Cl2 |
| 19 | | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | |
| 20 | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | |
| 21 | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | |
| 22 | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | |
| 23 | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | |
| 24 | | | | | | | | | | | | | | | | | | 0.03 | | | | | | | | | | | | Add Cl2 |
| 25 | | | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | | |
| 26 | | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | |
| 27 | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | |
| 28 | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | |
| 29 | | | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | |
| 30 | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | |
| 31 | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | Add Cl2 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

6.2 6.2 6.4 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2 6.2

nal 7.9 nal 7.9

Meter not working sent to Factory putting in spare turbo meter

Flow Meter "Not Working"

Item M 000150

A2 p2

# Discharge Monitori g Report - Oregon Department of Environmental Quality

Facility Name: Riverwood MHP | Phone Number: 360-254-2131 | Month/Year: June 2008
DEQ Permit No.: 10250 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR. 00514
Plant Type: Recirc. gravel | County: Columbia | Population Served: 100 +

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature — Date: 7/22/08

MAGAN E. MAGOR — Name (Print)

RECEIVED JUL 25 2008 DEQ NWR

**Operator Certification**

Collection Sys. Class: ____ Principal Operator Name (print): ____ Certification No. & Grade: ____
Treatment Sys. Class: ____ Principal Operator Name (print): ____ Certification No. & Grade: ____

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | no | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | 130 | | | 115 | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | ↓ | | | | | |
| 13 | | | 5,700 | | | | | |
| 14 | | | 5,200 | | | | | |
| 15 | | | 5,200 | | | | | |
| 16 | | | 4,500 | | | | | |
| 17 | | | 4,500 | | | | | |
| 18 | | | 5,200 | | | | | |
| 19 | | | 4,500 | | | | | |
| 20 | | | 3,500 | | | | | |
| 21 | | | 5,700 | | | | | |
| 22 | | | 5,200 | | | | | |
| 23 | | | 4,500 | | | | | |
| 24 | | | 4,500 | | | | | |
| 25 | | | 4,800 | | | | | |
| 26 | | | 5,200 | | | | | |
| 27 | | | 4,500 | | | | | |
| 28 | | | 3,500 | | | | | |
| 29 | | | 3,500 | | | | | |
| 30 | | | 2,500 | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number – e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U. | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.2 | | | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | Flow meter Malfunction |
| 2 | | 6.1 | | | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | |
| 3 | | 6.2 | | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | No reagent (3,4,5) |
| 4 | | 6.2 | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | Add Cl / Rain |
| 5 | | 6.2 | | | <2 | 99 | | | | | <2 | 99 | | | | 0.3 | | | | 0.2 | | | | | | | | | | Add Cl / Rain |
| 6 | | 6.2 | | | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | ~~Add Cl / Rain~~ |
| 7 | | 6.2 | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | |
| 8 | | 6.2 | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | |
| 9 | | 6.1 | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | |
| 10 | | 6.1 | | | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | |
| 11 | | 6.2 | | | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | |
| 12 | | 6.2 | | | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | |
| 13 | | 6.1 | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | |
| 14 | | 6.1 | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | |
| 15 | | 6.2 | | | | | | | | | | | | | | | | | | 0.27 | | | | | | | | | | add Cl |
| 16 | | 6.2 | | | | | | | | | | | | | | | | | | 0.37 | | | | | | | | | | |
| 17 | | 6.1 | | | | | | | | | | | | | | | | | | 0.16 | | | | | | | | | | ~~Add Cl~~ |
| 18 | | 6.1 | | | | | | | | | | | | | | | | | | 0.93 | | | | | | | | | | |
| 19 | | 6.2 | | | | | | | | | | | | | | | | | | 0.53 | | | | | | | | | | |
| 20 | | 6.2 | | | | | | | | | | | | | | | | | | 0.27 | | | | | | | | | | |
| 21 | | 6.1 | | | | | | | | | | | | | | | | | | 0.35 | | | | | | | | | | |
| 22 | | 6.2 | | | | | | | | | | | | | | | | | | 0.56 | | | | | | | | | | |
| 23 | | 6.2 | | | | | | | | | | | | | | | | | | 1.07 | | | | | | | | | | |
| 24 | | 6.1 | | | | | | | | | | | | | | | | | | .86 | | | | | | | | | | |
| 25 | | 6.1 | | | | | | | | | | | | | | | | | | 0.52 | | | | | | | | | | add Cl |
| 26 | | 6.2 | | | | | | | | | | | | | | | | | | 2.5 | | | | | | | | | | |
| 27 | | 6.2 | | | | | | | | | | | | | | | | | | 2.01 | | | | | | | | | | |
| 28 | | 6.2 | | | | | | | | | | | | | | | | | | 1.8 | | | | | | | | | | |
| 29 | | 6.2 | | | | | | | | | | | | | | | | | | 1.7 | | | | | | | | | | |
| 30 | | 6.2 | | | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | |
| 31 | | | | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

NORTHWEST REGION
JUL 25 2008
DEPT OF ENVIRONMENTAL QUALITY
RECEIVED

RECEIVED
AUG 28 2008
DEPT OF ENVIRONMENTAL QUALITY
N.W. REGION WATER QUALITY
8/27/08

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: RIVERWOOD MHP | Phone Number: 360 254 7131 | Month/Year: July 2008
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR0031
Plant Type: RECIR. GRAVEL | County: COLUMBIA | Population Served: 100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature | Date: 8/27/08

MAGGIE MAGYAR Name (Print)

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____
Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD Concentration mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT (identify outfall number – e.g. 001, 002, 003): Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab: Total Phosphorous mg/L | NUTRIENTS Grab: Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite: Ammonia Nitrogen mg/L | NUTRIENTS Composite: Nitrate Nitrogen mg/L | DISINFECTION CHLORINE: Used lbs. | DISINFECTION CHLORINE: Total Residual mg/L | DISINFECTION UV: Trans-mittance % | Turbidity N.T.U. | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | 6.2 | ~ | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | 1 |
| 2 | | | | | | | | | | 6.2 | ~ | | | | | | | | | | | | | | | .64 | | | | | | | | | | 2 |
| 3 | | | | | 99 | | 100 | | | 6.0 | ~ | | <2748 | | | | | <3797 | | | | | | | | 3.6 | | | <1 | | | | | | | 3 |
| 4 | | | | | | | | | | 6.11 | ~ | | | | | | | | | | | | | | | 0.52 | | | | | | | | | | 4 |
| 5 | | | | | | | | | | 6.5 | ~ | | | | | | | | | | | | | | | 0.16 | | | | | | | | | | 5 |
| 6 | | | | | | | | | | 6.5 | ~ | | | | | | | | | | | | | | | 0.56 | | | | | | | | | | 6 |
| 7 | | | | | | | | | | 6.0 | 0.100 | | | | | | | | | | | | | | | 0.21 | | | | | | | | | | 7 |
| 8 | | | | | | | | | | 6.0 | Plug | | | | | | | | | | | | | | | 0.56 | | | | | | | | | | 8 |
| 9 | 6.5 | 6.7 | | | | | | | | 6.5 | 350 | | | | | | | | | | | | | | | 0.58 | | | | | | | | | | 9 |
| 10 | | | | | | | | | | 6.19 | 0.25 | | | | | | | | | | | | | | | 0.52 | | | | | | | | | | 10 |
| 11 | | | | | | | | | | 6.0 | 0.451 | | | | | | | | | | | | | | | 0.33 | | | | | | | | | | 11 |
| 12 | | | | | | | | | | 6.07 | 0.237 | | | | | | | | | | | | | | | 0.50 | | | | | | | | | | 12 |
| 13 | | | | | | | | | | 6.09 | 0.220 | | | | | | | | | | | | | | | 0.46 | | | | | | | | | | 13 |
| 14 | | | | | | | | | | 6.07 | 0.538 | | | | | | | | | | | | | | | 0.47 | | | | | | | | | add Cl2 | 14 |
| 15 | 6.8 | | | | | | | | | 6.02 | 0.729 | | | | | | | | | | | | | | | 1.12 | | | | | | | | | | 15 |
| 16 | | | | | | | | | | 6.0 | 0.434 | | | | | | | | | | | | | | | 0.46 | | | | | | | | | add Cl2 | 16 |
| 17 | | | | | | | | | | 6.05 | 0.100 | | | | | | | | | | | | | | | 0.73 | | | | | | | | | | 17 |
| 18 | | | | | | | | | | 6.05 | 0.150 | | | | | | | | | | | | | | | 0.57 | | | | | | | | | | 18 |
| 19 | | | | | | | | | | | — | | | | | | | | | | | | | | | X | | | | | | | | | | 19 |
| 20 | | | | | | | | | | | — | | | | | | | | | | | | | | | X | | | | | | | | | | 20 |
| 21 | | | | | | | | | | | 0.546 | | | | | | | | | | | | | | | 0.2 | | | | | | | | | add Cl2 | 21 |
| 22 | | | | | | | | | | 6.1 | 0.350 | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | 22 |
| 23 | | | | | | | | | | 6.2 | 1.723 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | 23 |
| 24 | | | | | | | | | | 6.0 | 1.161 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | add Cl2 | 24 |
| 25 | | | | | | | | | | 5.9 | 1.598 | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | 25 |
| 26 | | | | | | | | | | 6.0 | 1.315 | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | 26 |
| 27 | | | | | | | | | | 6.0 | 0.151 | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | 27 |
| 28 | | | | | | | | | | 6.0 | 0.535 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | add Cl2 | 28 |
| 29 | | | | | | | | | | 6.0 | 0.174 | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | 29 |
| 30 | | | | | | | | | | 6.0 | 0.326 | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | 30 |
| 31 | | | | | | | | | | 6.1 | 0.157 | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: RIVERWOOD | Phone Number: 360 254 7131 | Month/Year: August 08
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR 0031
Plant Type: RECIR. GRAVEL | County: Columbia | Population Served: ~100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] 9/15/08
Authorized Signature Date

MAGAR MAGAR
Name (Print)

DEPT OF ENVIRONMENTAL QUALITY RECEIVED SEP 17 2008 NORTHWEST REGION

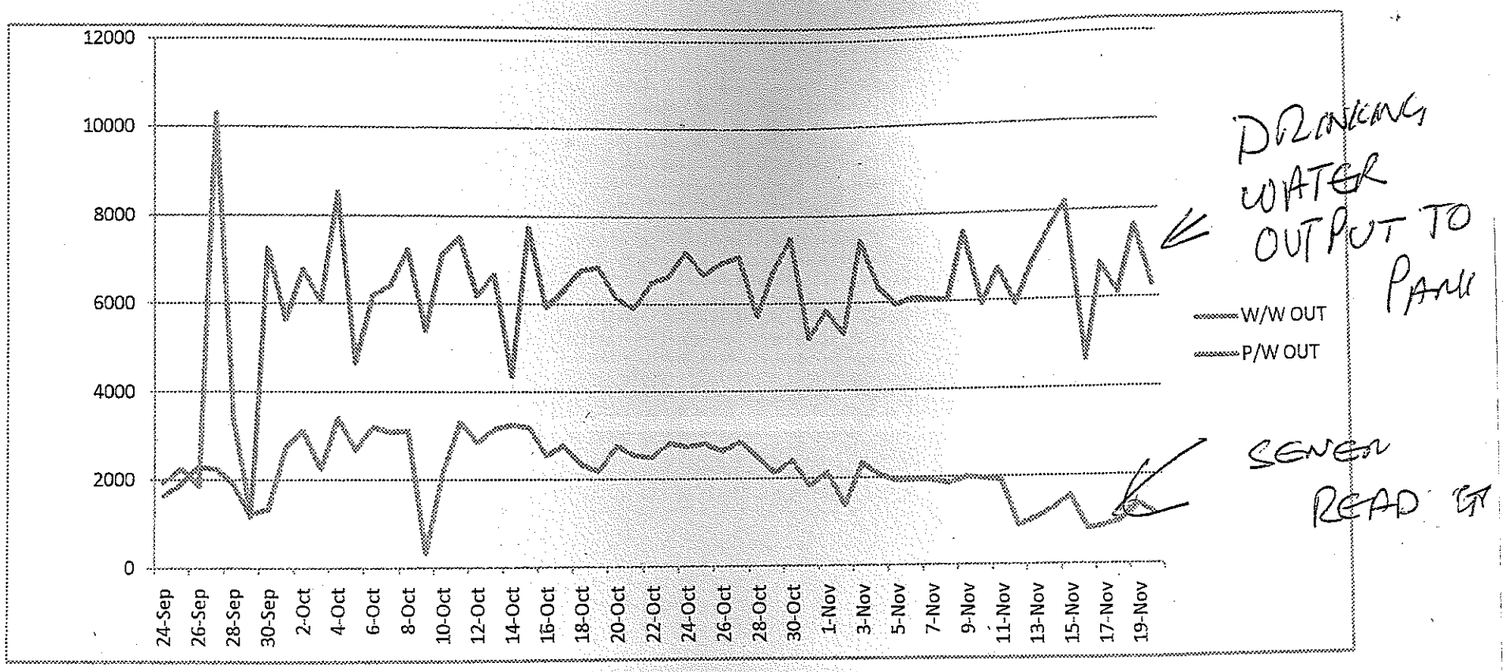
Operator Certification

Collection Sys. Class ___ Principal Operator Name (print) ___ Certification No. & Grade ___
Treatment Sys. Class ___ Principal Operator Name (print) ___ Certification No. & Grade ___

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD Concentration mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal | COLIFORM MPN/MF Total | RECEIVING STREAM Amnonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | 6.1 | | 102 | 62 | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | 1 |
| 2 | | | | | | | | | 6.1 | | 106 | 55 | | | | | | | | | | | | | | | .9 | | | | | | | | | | 2 |
| 3 | | | | | | | | | 6.2 | | 111 | 65 | | | | | | | | | | | | | | | .3 | | | | | | | | | Added 2CL2 | 3 |
| 4 | | | | | | | | | 6.1 | | 118 | 97 | | | | | | | | | | | | | | | 2.3 | | | | | | | | | | 4 |
| 5 | | | | | | | | | 5.91 | | 122 | 00 | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | 5 |
| 6 | | | | | | | | | 6.1 | | 127 | 37 | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | 6 |
| 7 | | 6.7 | | 100 | | | 84 | | 6.1 | | 132 | 30 | 22 | 79 | | | | | 62 | 79 | | | | | | | .9 | | | Est 1 | | | | | | | 7 |
| 8 | | | | | | | | | 6.1 | | 137 | 81 | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | 8 |
| 9 | | | | | | | | | 6.1 | | 142 | 93 | | | | | | | | | | | | | | | .3 | | | | | | | | | Added 2CL2 | 9 |
| 10 | | | | | | | | | 6.1 | | 148 | 90 | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | 10 |
| 11 | | | | | | | | | 6.1 | | 154 | 47 | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | 11 |
| 12 | | | | | | | | | 6.1 | | 159 | 88 | | | | | | | | | | | | | | | .8 | | | | | | | | | | 12 |
| 13 | | | | | | | | | 6.1 | | 165 | 60 | | | | | | | | | | | | | | | .5 | | | | | | | | | | 13 |
| 14 | | | | | | | | | 6.1 | | 171 | 68 | | | | | | | | | | | | | | | .4 | | | | | | | | | Added 2CL2 | 14 |
| 15 | | | | | | | | | 6.1 | | 177 | 12 | | | | | | | | | | | | | | | .3 | | | | | | | | | | 15 |
| 16 | | | | | | | | | 6.0 | | 181 | 40 | | | | | | | | | | | | | | | 2.0 | | | | | | | | | | 16 |
| 17 | | | | | | | | | 6.1 | | 187 | 43 | | | | | | | | | | | | | | | 1.7 | | | | | | | | | | 17 |
| 18 | | | | | | | | | 6.3 | | 192 | 10 | | | | | | | | | | | | | | | .9 | | | | | | | | | | 18 |
| 19 | | | | | | | | | 6.2 | | 199 | 50 | | | | | | | | | | | | | | | .2 | | | | | | | | | Added 2CL2 | 19 |
| 20 | | | | | | | | | 6.2 | | 206 | 90 | | | | | | | | | | | | | | | 2.3 | | | | | | | | | | 20 |
| 21 | | | | | | | | | 6.1 | | 213 | 76 | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | 21 |
| 22 | | | | | | | | | 6.1 | | 219 | 93 | | | | | | | | | | | | | | | .7 | | | | | | | | | | 22 |
| 23 | | | | | | | | | 6.1 | | 224 | 11 | | | | | | | | | | | | | | | .7 | | | | | | | | | | 23 |
| 24 | | | | | | | | | 6.1 | | 227 | 65 | | | | | | | | | | | | | | | .4 | | | | | | | | | | 24 |
| 25 | | | | | | | | | 6.1 | | 234 | 18 | | | | | | | | | | | | | | | .09 | | | | | | | | | Added 2CL2 | 25 |
| 26 | | | | | | | | | 6.2 | | 239 | 75 | | | | | | | | | | | | | | | 1.9 | | | | | | | | | | 26 |
| 27 | | | | | | | | | 6.1 | | 244 | 65 | | | | | | | | | | | | | | | .8 | | | | | | | | | | 27 |
| 28 | | | | | | | | | 6.1 | | 249 | 35 | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | 28 |
| 29 | | | | | | | | | 6.2 | | 253 | 75 | | | | | | | | | | | | | | | .5 | | | | | | | | | | 29 |
| 30 | | | | | | | | | 6.2 | | 258 | 84 | | | | | | | | | | | | | | | .3 | | | | | | | | | Added 2CL2 | 30 |
| 31 | | | | | | | | | 6.2 | | 261 | 91 | | | | | | | | | | | | | | | 1.3 | | | | | | | | | Mowed | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

(CUMMULATIVE)

SEPTEMBER
2008





A2,p6

# Discharge Monitoring Report - Oregon Department of Environmental Quality

✓ LWC

Facility Name: Riverwood MHP | Phone Number: 360 254 7131 | Month/Year: Sept. 2008
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.:
Plant Type: Recir. Gravel | County: Columbia | Population Served: 1001

RECEIVED DEPT OF ENVIRONMENTAL QUALITY OCT 28 2008

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalities for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature | 10/25/2008 Date

MAGAR MAGAR Name (Print)

Operator Certification

Collection Sys. Class: IV | Principal Operator Name (print): MAGAR | Certification No. & Grade: 10621
Treatment Sys. Class: II | Principal Operator Name (print): MAGAR | Certification No. & Grade: 10622

## INFLUENT

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | 6.9 | | 68 | | | 67 | |
| 3–31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

## EFFLUENT (identify outfall number – e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Transmittance % | Turbidity N.T.U | COLIFORM E.coli MPN/MF | COLIFORM Fecal MPN/MF | COLIFORM Total MPN/MF | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.2 | 4994 | | <2 | 79% | | | | | <2 | 79% | | | | | | | 0.9 | | | CFU/100 ml | | | | | | | | | 1 |
| 2 | | 6.2 | 4756 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | Add Cl2 | 2 |
| 3 | | 6.2 | 3870 | | | | | | | | | | | | | | | | 2.8 | | | | | | | | | | | | 3 |
| 4 | | 6.1 | 4239 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 4 |
| 5 | | 6.1 | 1485 | | | | | | | | | | | | | | | | 2.0 | | | | | | | | | | | | 5 |
| 6 | | 6.7 | 3934 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | 6 |
| 7 | | 6.7 | 3680 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Add Cl2 | 7 |
| 8 | | 6.2 | 3726 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | 8 |
| 9 | | 6.3 | 3324 | | | | | | | | | | | | | | | | 2.4 | | | | | | | | | | | | 9 |
| 10 | | 6.2 | 2934 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | 10 |
| 11 | | 6.7 | 2937 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | 11 |
| 12 | | 6.3 | 3015 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 12 |
| 13 | | 6.3 | 2470 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add Cl2 | 13 |
| 14 | | 6.2 | 3526 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | 14 |
| 15 | | 6.2 | 2924 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | 15 |
| 16 | | 6.1 | 3360 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | 16 |
| 17 | | 6.3 | 3080 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | 17 |
| 18 | | 6.2 | 2067 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 18 |
| 19 | | 6.3 | 3479 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 19 |
| 20 | | 6.1 | 3374 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 20 |
| 21 | | 6.1 | 1290 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Add Cl2 | 21 |
| 22 | | 6.2 | 2390 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 22 |
| 23 | | 6.2 | 2473 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 23 |
| 24 | | 6.1 | 1940 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 24 |
| 25 | | 6.2 | 2249 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 25 |
| 26 | | 6.3 | 1864 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 26 |
| 27 | | 6.2 | 10312 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | Flush Line @ SP3 | 27 |
| 28 | | 6.2 | 3397 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 28 |
| 29 | | 6.2 | 1228 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 29 |
| 30 | | 6.2 | 1322 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add Cl2 / Rain | 30 |
| 31 | | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Item M 0[illegible]

A2, 17

**CHRISTENSEN Lyle**

**From:** Magar E Magar [calsport@msn.com]
**Sent:** Wednesday, November 05, 2008 5:04 PM
**To:** CHRISTENSEN Lyle
**Subject:** Re: table

I sent this table to you before here it is again more complete hope you cqan read it

| DATE | bod inf. | bod eff | tss inf. | tss eff. | e.coli eff | ammonia |
|---|---|---|---|---|---|---|
| 4/3/2008 | 68 | nd 0 | 64 | 6 | less 1 | |
| 5/22/2008 | 70 | nd 0 | 75 | nd | 0 less 1 | |
| 6/5/2008 | 130 | nd <2 | 115 | <2 | 2 less 1 | .42mg/L 0.3 |
| 7/3/2008 | 99 | nd <2 | 100 | <3 | 3 less 1 | |
| 8/7/2008 | 100 | nd <2 | 84 | <2 | 2 less 1 | |
| 9/4/2008 | 68 | nd <2 | 67 | <2 | 2 less 1 | nd |
| 10/2/2008 | 100 | nd | 120 | | 3 no samp | |
| 10/28/2008 | | | | | 10 | |

**From:** CHRISTENSEN Lyle
**Sent:** Wednesday, November 05, 2008 4:55 PM
**To:** Magar E Magar
**Subject:** FW: table

This was the response that came back...

---

**From:** System Administrator
**Sent:** Monday, October 27, 2008 8:34 AM
**To:** CHRISTENSEN Lyle
**Subject:** Undeliverable:RE: table

Your message did not reach some or all of the intended recipients.

Subject: RE: table

Sent: 10/27/2008 8:20 AM

The following recipient(s) cannot be reached:

calsport@msn.com on 10/27/2008 8:34 AM

There was a SMTP communication problem with the recipient's email server. Please contact your system administrator.



A2pd

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Riverwood MHP | Phone Number: 360-254 7131 | Month/Year: Oct. 2008
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.:
Plant Type: Rectec. gravel | County: Columbia | Population Served: 150 +

**Operator Certification**

Collection Sys. Class: 4 | Principal Operator Name (print): Magan Magan | Certification No. & Grade:
Treatment Sys. Class: 4 | Principal Operator Name (print): Magan Magan | Certification No. & Grade:

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x [signature] Authorized Signature — 10/15/2008 Date

MAGAN MAGAN Name (Print)

RECEIVED NOV 17 2008 DEPT OF ENVIRONMENTAL QUALITY NW REGION WATER QUALITY

| Date | INFLUENT Temperature °C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT (identify outfall number – e.g. 001, 002, 003): Temperature °C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | Total Phosphorous Grab mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | Ammonia Nitrogen mg/L | Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | CHLORINE Total Residual mg/L | UV Trans-mittance % | Turbidity N.T.U | COLIFORM E.coil MPN/MF CFU/100 ml | Fecal MPN/MF CFU/100 ml | Total MPN/MF CFU/100 ml | RECEIVING STREAM Ammonia | Dilution | Stream Flow CFS | Temperature °F/°C | pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 1 |
| 2 | | | | 160 | | | 120 | | | 6.2 | 2757 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | Rain | 2 |
| 3 | | | | | | | | | | 6.1 | 3105 | | 62 | 79% | | | | | 62 | 79% | | | | | | | | 0.7 | | | | | | | | | | | Rain | 3 |
| 4 | | | | | | | | | | 6.2 | 2834 | | 59 | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add / Rain | 4 |
| 5 | | | | | | | | | | 6.2 | 3416 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 5 |
| 6 | | | | | | | | | | 6.2 | 2678 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 6 |
| 7 | | | | | | | | | | 6.2 | 3211 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add | 7 |
| 8 | | | | | | | | | | 6.2 | 3088 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | 8 |
| 9 | | | | | | | | | | 6.1 | 3114 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 9 |
| 10 | | | | | | | | | | 6.2 | 3311 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add | 10 |
| 11 | | | | | | | | | | 6.3 | 2149 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 11 |
| 12 | | | | | | | | | | 6.3 | 3317 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 12 |
| 13 | | | | | | | | | | 6.2 | 2856 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Rain | 13 |
| 14 | | | | | | | | | | 6.3 | 3154 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 14 |
| 15 | | | | | | | | | | 6.3 | 3258 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add / Rain | 15 |
| 16 | | | | | | | | | | 6.3 | 3171 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 16 |
| 17 | | | | | | | | | | 6.3 | 2548 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 17 |
| 18 | | | | | | | | | | 6.3 | 2781 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | Rain | 18 |
| 19 | | | | | | | | | | 6.3 | 2341 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 19 |
| 20 | | | | | | | | | | 6.3 | 2178 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Rain | 20 |
| 21 | | | | | | | | | | 6.2 | 2780 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add / Rain | 21 |
| 22 | | | | | | | | | | 6.3 | 2550 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 22 |
| 23 | | | | | | | | | | 6.3 | 2499 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add | 23 |
| 24 | | | | | | | | | | 6.3 | 2830 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 24 |
| 25 | | | | | | | | | | 6.3 | 2738 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 25 |
| 26 | | | | | | | | | | 12.5°C 6.2 | 2814 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add | 26 |
| 27 | | | | | | | | | | 12.9°C 6.2 | 2638 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | 27 |
| 28 | | | | | | | | | | 12.2°C 6.2 | 2848 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | 28 |
| 29 | | | | | | | | | | 12.9°C 6.7 | 2484 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 29 |
| 30 | | | | | | | | | | 11.9°C 6.2 | 2135 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | Rain | 30 |
| 31 | | | | | | | | | | 12.4°C 6.2 | 2404 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add / Rain | 31 |
| | | | | | | | | | | 12.8°C 6.1 | 1823 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

10 min rain

The influent pH was recorded as 6.7. I do not recall the day.

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: RIVERWOOD MHC | Phone Number: 360 254 7131 | Month/Year: NOV 2008
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.:
Plant Type: Recir. gravel | County: | Population Served: 7 100

**Operator Certification**

Collection Sys. Class: | Principal Operator Name (print): MAGAN MAGAN | Certification No. & Grade:
Treatment Sys. Class: | Principal Operator Name (print): | Certification No. & Grade:

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] Authorized Signature — 12/20/08 Date

MAGAN Name (Print)

## INFLUENT

| Date | Temperature °F | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | 82 | | | 84 | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | 6.1 | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | 6.8 | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

## EFFLUENT (identify outfall number – e.g. 001, 002, 003):

| Date | Temperature °C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Transmittance % | Turbidity N.T.U | COLIFORM E.coli MPN/MF CFU/100 ml | COLIFORM Fecal MPN/MF CFU/100 ml | COLIFORM Total MPN/MF CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 13.2 | Ø | 2134 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | PH Electrode Bad | 1 |
| 2 | 14.0 | Ø | 1384 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | Float Bad / Add | 2 |
| 3 | 13.0 | Ø | 2338 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Elect Bad | 3 |
| 4 | 16.5 | Ø | 2057 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | Elect Bad | 4 |
| 5 | 11.8 | Ø | 1930 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Elect Bad / Add | 5 |
| 6 | 13.1 | Ø | 1938 | | <2 | 73% | | | | | 3 | 96% | | | | | | | 0.7 | | | | | | | | | | | Elect Bad / System | 6 |
| 7 | 14.7 | Ø | 1942 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Elect Bad Bad / Flood | 7 |
| 8 | 14.0 | Ø | 1860 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add / Rain / PH Elect | 8 |
| 9 | 13.6 | Ø | 2000 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | Rain / Elect Bad | 9 |
| 10 | 12.5 | Ø | 1965 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add / Rain / Elect | 10 |
| 11 | 12.5 | Ø | 1920 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add / Rain / Flood gate #1 | 11 |
| 12 | 14.4 | 6.0 | 887 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | Add 2 TABS / Rain | 12 |
| 13 | 12.5 | 5.9 | 1048 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | Recirculate New | 13 |
| 14 | 12.2 | 6.0 | 1270 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | over flow gate | 14 |
| 15 | 12.2 | 6.1 | 1554 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Add / over flow | 15 |
| 16 | 12.5 | 6.1 | 797 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | clean Filt #1 / Flush | 16 |
| 17 | 12.3 | 6.2 | 864 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Add / Rain / Flush Meter | 17 |
| 18 | 12.4 | 6.2 | 984 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Rain / Flush Meter | 18 |
| 19 | 10.9 | 6.2 | 1361 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Add | 19 |
| 20 | 10.5 | 6.2 | 1120 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Rain 5/20" / clean Filt #1 | 20 |
| 21 | 11.2 | 6.2 | 1040 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Add 2 TABS / over flow | 21 |
| 22 | 10.7 | 6.2 | 976 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | R=1/20" / over Flow | 22 |
| 23 | 10.0 | 6.2 | 987 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | over flow gate | 23 |
| 24 | 10.0 | 6.2 | 1080 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | Add / over flow gate | 24 |
| 25 | 9.5 | 6.7 | 989 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | R=1/20" / over flow gate | 25 |
| 26 | 9.3 | 6.3 | 976 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | Add 2 TABS / over gate | 26 |
| 27 | 10.1 | 6.3 | 723 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | over flow gate | 27 |
| 28 | 10.3 | 6.3 | 1052 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | over flow gate | 28 |
| 29 | 11.8 | 6.2 | 791 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | R=3/20" / over gate | 29 |
| 30 | 12.2 | 6.3 | 737 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | Add / over gate | 30 |
| 31 | | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Rain
Rain / Syst Flood
Flooding over gate
over gate
Bad / clean Filt #1
Bad
Elect Bad
Recirc TANK over flow
PH meter
meter plug
meter plug
over flow gate #1
Rain 5/20"
Influent PH 6.7 @ 1:49 pm
Flush meter
Flush meter
Flush meter
Influent PH 6.8 11:55
Flush meter
R=1/20" / Add
Flush meter

Flow readings are Not Accurate - Meter Failing - flooding over gate = ~~90%~~ (Estimated) 80%
meter = less than ~~50%~~. 20%

BEST ESTIMATE

METER BASE + SERVICE

A2 P10

# Notes on riverwood monitoring

Monitoring for December 2008.

1- The flow readings are highly suspect so instead of using the measurements recorded by the meter at the discharge point I have instead supplied you with the data of our water consumption amd analyzed this instead
2- The results for the BOD and TSS on the influent were quite low. So I suspected that again we are getting excessive extraneous water coming into the system. Despite huge expenditure for repairing sewer pipes last summer it appears that the manhole behind the duplexes was being inundated by our creek. Being fond of water courses I have decided to name one after my daughter Yasmeen . hence forth that creek will be called Yasmeen's creek which as you are aware is now a tributary of the Columbia Yasmeen creek runs the length of the park. Yasmeen creek runs right by the manhole. In times of heavy rain it completely covers the manhole. In addition to the inundation one could not exclude leakage from the seam of manhole . The seam that exists between the base and the manhole. Over the last two weeks finishing about mid-January we did the following.
3- We exposed the manhole on all sides and but an 8" wide rubber band all around the seam of the manhole .Next we purchased 80 feet of culvert. We directed Yasmeen's creek through that culvert directed and stream away from the manhole. It is too early to tell how effective this work was but, prior to this work, as stated Yasmeen's creek was practically flowing over the manhole..

# Discharge Monitori g Report - Oregon Department of Environmental Quality

VWC

Facility Name: LA Erwood | Phone Number: 360-247121 | Month/Year: Dec 2008
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.:
Plant Type: recir. Gravel filter | County: COLUMBIA | Population Served: 150+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X JAN 23 2009 — Authorized Signature — Date: 1/20/09

Name (Print): Magan Magn

**Operator Certification**

Collection Sys. Class: ____ Principal Operator Name (print): ____ Certification No. & Grade: ____
Treatment Sys. Class: ____ Principal Operator Name (print): ____ Certification No. & Grade: ____

ofg = overflow gate
R = Rain

| Date | INFLUENT Temperature °C | INFLUENT pH S.U. | INFLUENT Flow MGD | INFLUENT BOD Grab Concentration mg/L | INFLUENT BOD Comp. Loading lbs. | INFLUENT CBOD mg/L | INFLUENT TSS Grab Concentration mg/L | INFLUENT TSS Comp. Loading lbs. | EFFLUENT Temperature °C | EFFLUENT pH S.U. | EFFLUENT Flow MGD | EFFLUENT DO mg/L | EFFLUENT BOD Grab Concentration mg/L | EFFLUENT BOD Comp. Removal % | EFFLUENT BOD Comp. Loading lbs. | EFFLUENT CBOD Grab Concentration mg/L | EFFLUENT CBOD Comp. Removal % | EFFLUENT CBOD Comp. Loading lbs. | EFFLUENT TSS Grab Concentration mg/L | EFFLUENT TSS Comp. Removal % | EFFLUENT TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | 11.7 | 6.3 | 776 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Rain 1/20 | 1 |
| 2 | | | | | | | | | 12.1 | 6.3 | 800 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add Cl2 / Rain 9/10 | 2 |
| 3 | | | | | | | | | 10.1 | 6.7 | 1014 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | RØ | 3 |
| 4 | | | | | | | | | 9.9 | 6.4 | 987 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | RØ | 4 |
| 5 | | 6.9 | | 21 | | | 8 | | 9.1 | 6.5 | 875 | | <2 | 88% | | | | 2.2 mg/L | | | | n.d. | | | | 0.6 | | | | 92 | | | | | | | RØ | 5 |
| 6 | | | | | | | | | 9.7 | 6.5 | 1019 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | RØ | 6 |
| 7 | | | | | | | | | 9.9 | 6.4 | 887 | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add Cl2 / R 7/20 | 7 |
| 8 | | | | | | | | | 10.0 | 6.4 | 983 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add Cl2 / RØ | 8 |
| 9 | | | | | | | | | 9.9 | 6.3 | 1119 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | RØ | 9 |
| 10 | | | | | | | | | 10.9 | 6.4 | 749 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | RØ | 10 |
| 11 | | | | | | | | | 10.0 | 6.5 | 824 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add (2) Cl2 / RØ | 11 |
| 12 | | | | | | | | | 9.2 | 6.7 | 1135 | | | | | | | | | | | | | | | 1.8 | | | | | | | | | | | R 15/20 | 12 |
| 13 | | | | | | | | | 8.5 | 6.8 | 781 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 1/10 | 13 |
| 14 | | 7.1 | | | | | | | 6.8 | 6.8 | 782 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | RØ | 14 |
| 15 | | | | | | | | | 5.6 | 6.8 | 874 | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add (2) Cl2 / RØ | 15 |
| 16 | | | | | | | | | 6.2 | 6.8 | 953 | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | RØ | 16 |
| 17 | | | | | | | | | 6.9 | 6.9 | 898 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | RØ | 17 |
| 18 | | | | | | | | | 6.8 | 6.9 | 1971 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | RØ | 18 |
| 19 | | | | | | | | | 6.2 | 6.8 | 2028 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add Cl2 / RØ | 19 |
| 20 | | | | | | | | | 5.4 | 6.8 | 938 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | RØ | 20 |
| 21 | | | | | | | | | 5.4 | 6.9 | 1090 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add (2) Cl2 / RØ | 21 |
| 22 | | | | | | | | | 5.4 | 6.9 | 984 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | RØ | 22 |
| 23 | | | | | | | | | 5.9 | 6.9 | 1204 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | RØ | 23 |
| 24 | | | | | | | | | 6.9 | 6.9 | 1103 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add Cl2 / RO | 24 |
| 25 | | | | | | | | | 7.1 | 6.9 | 485 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add (2) Cl2 / R 1½ | 25 |
| 26 | | | | | | | | | 8.2 | 6.8 | 774 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add (2) Cl2 / R 1½ | 26 |
| 27 | | 7.8 | | | | | | | 10.9 | 6.8 | 244 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add (2) Cl2 / R 1¾ | 27 |
| 28 | | | | | | | | | 7.0 | 6.2 | 100 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add (2) Cl2 / R 4/10 | 28 |
| 29 | | | | | | | | | 7.0 | 6.3 | Ø | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | R 3/20 | 29 |
| 30 | | | | | | | | | 7.0 | 6.1 | Ø | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 1/20 | 30 |
| 31 | | | | | | | | | 7.0 | 6.4 | 1 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add (2) Cl2 / R ½ | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

overflow gate
Flush Flow Meter
overflow gate
ofg
Flush Meter
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ofg / Flush Meter
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ofg / ICE
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ofg / of Recirc Cl2
ofg
ofg / Meter Failed
ofg / clean Filters 2&3
ofg / Pettzer
Remove 3,000 gal clean pumps #3 pump broken #2 pump weak

Attachment V
August 18-19, 2010 EQC meeting
Page 30 of 370

# Discharge Monitori[illegible] Report - Oregon Department of Environmental Quality

Facility Name: Riverwood MHP | Phone Number: 360-257-7131 | Month/Year: January 2009
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR 0031447
Plant Type: Recirc. Gravel | County: Columbia | Population Served: 150+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x [signature] 2/16/09
Authorized Signature — Date

MAGAN C MAGAR
Name (Print)

RECEIVED
FEB 19 2009
DEPT OF ENVIRONMENTAL QUALITY
N.W. REGION WATER QUALITY

NWC

## Operator Certification

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____
Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

| Date | INFLUENT °F/°C Temperature | pH | Flow | BOD Grab Concentration | BOD Comp. Loading | CBOD | TSS Grab Concentration | TSS Comp. Loading |
|---|---|---|---|---|---|---|---|---|
| | | S.U. | MGD | mg/L | lbs. | mg/L | mg/L | lbs. |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
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| 10 | | | | | | | | |
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| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | 6.8 | | 140 | | 110 | | |
| 17 | | | | | | | | |
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| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

Recalibrated

| Date | EFFLUENT (identify outfall number – e.g. 001, 002, 003): °F/°C Temperature | pH | Flow | DO | BOD Grab Concentration | BOD Comp. Removal | BOD Comp. Loading | CBOD Grab Concentration | CBOD Comp. Removal | CBOD Comp. Loading | TSS Grab Concentration | TSS Comp. Removal | TSS Comp. Loading | NUTRIENTS Grab Total Phosphorous | NUTRIENTS Composite Total Kjeldahl Nitrogen | NUTRIENTS Composite Ammonia Nitrogen | NUTRIENTS Composite Nitrate Nitrogen | DISINFECTION CHLORINE Used | DISINFECTION CHLORINE Total Residual | DISINFECTION UV Trans-mittance | Turbidity | COLIFORM MPN/MF E.coli | COLIFORM MPN/MF Fecal | COLIFORM MPN/MF Total | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow | RECEIVING STREAM °F/°C Temperature | RECEIVING STREAM pH | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | S.U. | MGD | mg/L | mg/L | % | lbs. | mg/L | % | lbs. | mg/L | % | lbs. | mg/L | | | | lbs. | mg/L | % | N.T.U | CFU/100 ml | | | | | CFS | | S.U. | | |
| 1 | 7.6 | 5.8 | — | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Add(2) / R 1½" | 1 |
| 2 | 5.7 | 6.0 | — | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 1 7/20" | 2 |
| 3 | 5.5 | 6.3 | — | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add(2) / | 3 |
| 4 | 6.3 | 6.2 | — | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 1" | 4 |
| 5 | 6.5 | 6.1 | — | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add(2) / R ¾" | 5 |
| 6 | 10.4 | 5.6 | — | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Add(1) / R 9/10" | 6 |
| 7 | 10.3 | 5.8 | — | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | Add(2) / R 2 1/16" | 7 |
| 8 | 5.4 | 5.8 | — | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 1" | 8 |
| 9 | 7.4 | 5.5 | — | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 1/20" | 9 |
| 10 | 6.7 | 5.4 | — | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add(2) / R 1/20" | 10 |
| 11 | 8.4 | 5.5 | 905 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | Add(2) / R 5/20" | 11 |
| 12 | 10.2 | 6.2 | 1666 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | Add(3) / R 1/20" | 12 |
| 13 | 9.3 | 6.2 | 1569 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 13 |
| 14 | 7.2 | 6.2 | 1770 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add(1) | 14 |
| 15 | 6.9 | 6.3 | 1029 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add(2) | 15 |
| 16 | 6.3 | 6.3 | 2570 | | <2 | 99% | | | | | <2 | 99% | | | | | | | 0.5 | | | | | | | | | | | Add(3) | 16 |
| 17 | 6.2 | 6.3 | 1680 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add(3) | 17 |
| 18 | 7.4 | 6.3 | 2055 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 18 |
| 19 | 6.9 | 6.3 | 2004 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 19 |
| 20 | 6.9 | 6.3 | 2271 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 20 |
| 21 | 5.9 | 6.3 | 2401 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add(1) | 21 |
| 22 | 5.8 | 6.3 | 1561 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 22 |
| 23 | 5.8 | 6.4 | 741 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add(2) | 23 |
| 24 | 5.7 | 6.3 | 5482 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 24 |
| 25 | 5.7 | 6.4 | 2008 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 9/10" | 25 |
| 26 | 4.8 | 6.4 | 2218 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 26 |
| 27 | 4.5 | 6.5 | 2687 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | R 3/10" | 27 |
| 28 | 6.5 | 6.4 | 2473 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add(1) / R 9/10" | 28 |
| 29 | 6.4 | 6.4 | 2126 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add(2) | 29 |
| 30 | 6.2 | 6.4 | 2404 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 1/20" | 30 |
| 31 | 5.9 | 6.4 | 2195 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

The readings for pH on from 6 – 11 January were done prior to the Operator realized that the pH meter was recalibrated

Item M.00016
42 of 13

Attachment V
August 18-19, 2010 EQC meeting
Page 3 of 370

# Discharge Monitoring Report - Oregon Department of Environmental Quality

V LWC

Facility Name: Riverwood MHP | Phone Number: 360-254-7131 | Month/Year: Feb 2009
DEQ Permit No.: 7554 - file # | DEQ File No./Facility ID: 102520 - Permit # | EPA Reference No.: OR 003114-3
Plant Type: Recirculating Gravel | County: Columbia | Population Served: 150 +

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x [signature] Authorized Signature

3/16/09 Date — Not date stamped but Logged in to DMS 3/17/09

MAGDA G MAGDA Name (Print)

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____
Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | 0.8 | 89 | | | 70 | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
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| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | 6.9 | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
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| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

| Date | EFFLUENT (identify outfall number -- e.g. 001, 002, 003): Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Grab Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 6.1 | 6.4 | 1280 | | | | | | | | | | |
| 2 | 7.9 | 6.3 | 1766 | | | | | | | | | | |
| 3 | 8.6 | 6.3 | 1056 | | | | | | | | | | |
| 4 | 8.6 | 6.3 | 1907 | | | | | | | | | | |
| 5 | 7.3 | 6.3 | 1625 | | <2 | 98 | | | | | <2 | 97 | |
| 6 | 8.1 | 6.3 | 1470 | | | | | | | | | | |
| 7 | 6.8 | 6.3 | 1702 | | | | | | | | | | |
| 8 | 6.6 | 6.3 | 1531 | | | | | | | | | | |
| 9 | 6.2 | 6.4 | 973 | | | | | | | | | | |
| 10 | 5.5 | 6.4 | 731 | | | | | | | | | | |
| 11 | 7.4 | 6.3 | 1342 | | | | | | | | | | |
| 12 | 6.3 | 6.3 | 782 | | | | | | | | | | |
| 13 | 6.2 | 6.3 | 1275 | | | | | | | | | | |
| 14 | 6.6 | 6.2 | 840 | | | | | | | | | | |
| 15 | 5.9 | 6.3 | 807 | | | | | | | | | | |
| 16 | 6.8 | 6.3 | 726 | | | | | | | | | | |
| 17 | 6.6 | 6.2 | 737 | | | | | | | | | | |
| 18 | 8.2 | 6.1 | 459 | | | | | | | | | | |
| 19 | 8.4 | 6.2 | 448 | | | | | | | | | | |
| 20 | 7.6 | 6.2 | 385 | | | | | | | | | | |
| 21 | 8.7 | 6.2 | 519 | | | | | | | | | | |
| 22 | 8.5 | 6.2 | 512 | | | | | | | | | | |
| 23 | 8.0 | 6.2 | 423 | | | | | | | | | | |
| 24 | 9.1 | 6.2 | 376 | | | | | | | | | | |
| 25 | 8.3 | 6.2 | 542 | | | | | | | | | | |
| 26 | 7.5 | 6.2 | 378 | | | | | | | | | | |
| 27 | 7.9 | 6.2 | 362 | | | | | | | | | | |
| 28 | 8.8 | 6.2 | 340 | | | | | | | | | | |
| 29 | | | | | | | | | | | | | |
| 30 | | | | | | | | | | | | | |
| 31 | | | | | | | | | | | | | |
| TOTAL | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | |
| MONTHLY AVERAGE | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | |

| Date | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | 0.6 | | | | | | | | | | | Add (2) | 1 |
| 2 | | | | | | 0.7 | | | | | | | | | | | | 2 |
| 3 | | | | | | 0.6 | | | | | | | | | | | | 3 |
| 4 | | | | | | 0.6 | | | | | | | | | | | | 4 |
| 5 | | | | | | 0.8 | | | | | | | | | | | Infl PH 6.9 | 5 |
| 6 | | | | | | 0.7 | | | | | | | | | | | Rain 1/10" | 6 |
| 7 | | | | | | 0.6 | | | | | | | | | | | | 7 |
| 8 | | | | | | 0.6 | | | | | | | | | | | | 8 |
| 9 | | | | | | 0.5 | | | | | | | | | | | Add (2) / Rain 3/20" | 9 |
| 10 | | | | | | 0.6 | | | | | | | | | | | Rain 3/10" | 10 |
| 11 | | | | | | 0.5 | | | | | | | | | | | Add (1) | 11 |
| 12 | | | | | | 0.6 | | | | | | | | | | | | 12 |
| 13 | | | | | | 0.6 | | | | | | | | | | | | 13 |
| 14 | | | | | | 0.5 | | | | | | | | | | | Add (1) | 14 |
| 15 | | | | | | 0.4 | | | | | | | | | | | Add (2) / Rain 1/20" | 15 |
| 16 | | | | | | 0.3 | | | | | | | | | | | Add (3) | 16 |
| 17 | | | | | | 0.5 | | | | | | | | | | | Add (3) | 17 |
| 18 | | | | | | 1.2 | | | | | | | | | | | Infl PH 6.9 | 18 |
| 19 | | | | | | 1.1 | | 83 | | | | | | | | | | 19 |
| 20 | | | | | | 1.1 | | | | | | | | | | | | 20 |
| 21 | | | | | | 1.1 | | | | | | | | | | | | 21 |
| 22 | | | | | | 0.9 | | | | | | | | | | | | 22 |
| 23 | | | | | | 0.8 | | | | | | | | | | | Rain 3/10" | 23 |
| 24 | | | | | | 0.4 | | | | | | | | | | | Add (1) / Rain 1/2" | 24 |
| 25 | | | | | | 0.4 | | | | | | | | | | | Add (3) / Rain 7/10" | 25 |
| 26 | | | | | | 2.2 | | | | | | | | | | | Rain 5/20" | 26 |
| 27 | | | | | | 1.7 | | | | | | | | | | | Rain 1/20" | 27 |
| 28 | | | | | | 1.5 | | | | | | | | | | | | 28 |
| 29 | | | | | | | | | | | | | | | | | | 29 |
| 30 | | | | | | | | | | | | | | | | | | 30 |
| 31 | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | |

Infl PH 6.9

New Clz meter

Item M000172

A2 p.14

# Discharge Monitoring Report - Oregon Department of Environmental Quality

VLWC

Facility Name: Riverwood MHP | Phone Number: 360-254-7131 | Month/Year: 3/2009
DEQ Permit No.: 75541 - file# | DEQ File No./Facility ID: 102520 | EPA Reference No.: OR0031143
Plant Type: Recirc. gravel | County: Columbia | Population Served: 150+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X Authorized Signature | Name (Print) | Date: 4/18/09

RECEIVED
APR 20 2009
OREGON DEPT OF ENVIRONMENTAL QUALITY
NW REGION WATER QUALITY

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____
Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | 6.9 | | 110 | | | 116 | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
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| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | 6.9 | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
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| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | | 6.8 | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM RECEIVING STREAM E.coli MPN/MF CFU/100 ml | COLIFORM RECEIVING STREAM Fecal MPN/MF CFU/100 ml | COLIFORM RECEIVING STREAM Total MPN/MF CFU/100 ml | Ammonia mg/L | Dilution | Stream Flow CFS | Temperature °F/°C | pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 9.1 | 6.2 | 522 | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | Rain 1/10" | 1 |
| 2 | | 9.7 | 6.2 | 409 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | R 2/10" | 2 |
| 3 | | 9.1 | 6.2 | 258 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | R 3/10" | 3 |
| 4 | | 10.0 | 6.2 | 46 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | Flush Meter | 4 |
| 5 | | 8.7 | 6.2 | 554 | 12.798 | | | | | | 2 | 98.2 | | | | 2 | | | 0.5 | | | | | | | | | | | Add ① / R 3/20" | 5 |
| 6 | | 8.8 | 6.2 | 342 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 6 |
| 7 | | 7.3 | 6.2 | 51 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 3/10" | 7 |
| 8 | | 6.8 | 6.2 | 193 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 3/10" | 8 |
| 9 | | 6.6 | 6.3 | 212 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add ② / R 1/2" | 9 |
| 10 | | 7.3 | 6.2 | 63 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | R 1/10" | 10 |
| 11 | | 7.9 | 6.2 | 55 | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 11 |
| 12 | | 8.0 | 6.2 | 49 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 12 |
| 13 | | 9.2 | 6.3 | 176 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add ② / | 13 |
| 14 | | 7.9 | 6.2 | 2 | | | | | | | | | | | | | | | 1.4 | | | < 1 | | | | | | | | R 3/10" | 14 |
| 15 | | 8.6 | 6.4 | 34 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 1" | 15 |
| 16 | | 8.4 | 6.2 | 167 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 2/10" | 16 |
| 17 | | 9.2 | 6.3 | 97 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add ① / R 3/10" | 17 |
| 18 | | 11.2 | 6.2 | 77 | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | Flush Meter | 18 |
| 19 | | 11.1 | 6.2 | 38 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 1/10" | 19 |
| 20 | | 10.5 | 6.3 | 52 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Add ① / R 1/20" | 20 |
| 21 | | 9.8 | 6.3 | 139 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 21 |
| 22 | | 8.9 | 6.3 | 6 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Flush Meter | 22 |
| 23 | | 7.5 | 6.3 | 29 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add ① / R 3/10" | 23 |
| 24 | | 9.6 | 6.3 | 127 | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | R 1/10" | 24 |
| 25 | | 9.4 | 6.3 | 396 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add ① / R 3/10" | 25 |
| 26 | | 10.8 | 6.3 | 431 | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 26 |
| 27 | | 8.9 | 6.4 | 287 | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | R 1/20 | 27 |
| 28 | | 9.0 | 6.3 | 416 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | R 1/2" | 28 |
| 29 | | 10.1 | 6.3 | 367 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 1/10" | 29 |
| 30 | | 9.8 | 6.4 | 498 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 30 |
| 31 | | 9.0 | 6.3 | 412 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add ② / R 3/10" | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Flush meter

Item M-2007-03

A2 p15

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Riverwood MHP | Phone Number: 360-254-7131 | Month/Year: April 2009
DEQ Permit No.: 75541 ← File # | DEQ File No./Facility ID: 102520 ← permit | EPA Reference No.: OR0033114-3
Plant Type: Re-Circulating Gravel | County: Columbia | Population Served: 150 +

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

RECEIVED MAY 18 2009 DEPT OF ENVIRONMENTAL QUALITY N.W. REGION WATER QUALITY

X ✓ Authorized Signature — 5/16/09 Date

✓LWC Name (Print)

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print): MAdsen — Certification No. & Grade: 10621
Treatment Sys. Class ____ Principal Operator Name (print): MAdsen — Certification No. & Grade: 10622

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | 6.9 | | 165 | | | 120 | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | 6.9 | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | 6.8 | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number – e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | R 4/10" | 1 |
| 2 | | | | | | | | | | | | | | | | | | | 1.1 | | | | | | 0.4 | | | | | R 1/2" | 2 |
| 3 | | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Add ① | 3 |
| 4 | | | | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 4 |
| 5 | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 5 |
| 6 | | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Add ① | 6 |
| 7 | | | | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | | 7 |
| 8 | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 8 |
| 9 | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 7/10" | 9 |
| 10 | | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add ① R 3/10" | 10 |
| 11 | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | R 4/10" | 11 |
| 12 | | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | R 1/2" | 12 |
| 13 | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 1/2" | 13 |
| 14 | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | R 1/20" | 14 |
| 15 | | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 15 |
| 16 | | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add ② | 16 |
| 17 | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | R 1/2" | 17 |
| 18 | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 18 |
| 19 | | | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 19 |
| 20 | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 20 |
| 21 | | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 21 |
| 22 | | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 22 |
| 23 | | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add ② | 23 |
| 24 | | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 24 |
| 25 | | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add ② | 25 |
| 26 | | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add ② | 26 |
| 27 | | | | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | R 1/20" | 27 |
| 28 | | | | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | 28 |
| 29 | | | | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | R 3/10" | 29 |
| 30 | | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Dead Cat IN CL2 RESERVOIR

Intl. PH 6.9

Flush Meters

Intl. PH 6.8

PUMPED 2000 gallons from recirculation tank 5/14/09 to expose clogged pump's pump working OK now

Item M 000564

A2pk

# Discharge Monitor g Report - Oregon Department of Environmental Quality

RECEIVED
JUN 22 2009
DEPT OF ENVIRONMENTAL QUALITY
N.W. REGION WATER QUALITY

Facility Name: Riverwood MHP | Phone Number: 360-254-7131 | Month/Year: May 2009
DEQ Permit No.: 75541 | DEQ File No./Facility ID: 102520 | EPA Reference No.: OR0031143
Plant Type: Rec Lec. Gravel | County: Columbia | Population Served: 150+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature — 6/22/09 Date

Megan E. Morgan — Name (Print)

## Operator Certification

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____
Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Transmittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | 15.8 | 6.4 | 1829 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | Rain 1/2" | 1 |
| 2 | | | | | | | | | 14.5 | 6.4 | 1355 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | Rain 1/10" | 2 |
| 3 | | | | | | | | | 13.8 | 6.5 | 1510 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Rain 1/10" | 3 |
| 4 | | 7.5 | | | | | | | 13.0 | 6.5 | 1188 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add② / Rain 1/2" | 4 |
| 5 | | | | | | | | | 14.7 | 6.5 | 957 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Rain 4/10" | 5 |
| 6 | | | | | | | | | 14.5 | 6.6 | 1808 | | | | | | | | | | | | | | | | — | | | | | | | | | | | Flooded Rain 7/10" | 6 |
| 7 | | | | | | | | | 14.3 | 6.6 | 1580 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | Rain 3/10" | 7 |
| 8 | | | | | | | | | 15.7 | 6.5 | 1217 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | Add③ | 8 |
| 9 | | | | | | | | | 15.7 | 6.5 | 990 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add③ | 9 |
| 10 | | | | | | | | | 15.8 | 6.4 | 1577 | | | | | | | | | | | | | | | | 2.7 | | | | | | | | | | | | 10 |
| 11 | | | | | | | | | 13.1 | 6.6 | 1108 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | Rain 1/10" | 11 |
| 12 | | | | | | | | | 14.6 | 6.7 | 820 | | | | | | | | | | | | | | | | — | | | | | | | | | | | Add② R = 1/2" | 12 |
| 13 | | | | | | | | | 12.4 | 6.7 | 643 | | | | | | | | | | | | | | | | — | | | | | | | | | | | Add③ R = 3/10" | 13 |
| 14 | | | | | | | | | 14.2 | 6.7 | 181 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Remove 2,000 gal / R = 6/10" | 14 |
| 15 | | | | | | | | | 15.1 | 6.4 | 1017 | | | | | | | | | | | | | | | | 0.1 | | | | | | | | | | | Clean ④ Pumps | 15 |
| 16 | | | | | | | | | 19.1 | 5.9 | 3 | | | | | | | | | | | | | | | | 3.4 | | | | | | | | | | | | 16 |
| 17 | | | | | | | | | 17.4 | 6.0 | 2 | | | | | | | | | | | | | | | | 2.6 | | | | | | | | | | | | 17 |
| 18 | | | | | | | | | 15.9 | 6.0 | 1 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | Blue Light - No Flow | 18 |
| 19 | | | | | | | | | 14.0 | 6.1 | — | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | R = 6/10" | 19 |
| 20 | | | | | | | | | 15.4 | 6.1 | 1 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | Blue light / R = 1/20" | 20 |
| 21 | | | 130 | | | 53 | | | 12.5 | 6.0 | — | | <25 | 98% | | | | | 50 | 90 | | | | | | | 0.3 | | | | | | | | | | | Add① / Blue light | 21 |
| 22 | | | | | | | | | 17.1 | 6.0 | 5 | | | | | | | | | | | | | | | | 1.7 | | | | | | | | | | | | 22 |
| 23 | | | | | | | | | 16.6 | 6.0 | 10 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | Flush meter | 23 |
| 24 | | | | | | | | | 16.2 | 6.0 | — | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | Flush meter | 24 |
| 25 | | | | | | | | | 16.5 | 6.0 | — | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Blue Light | 25 |
| 26 | | | | | | | | | 15.7 | 6.0 | — | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add① / Flush meter | 26 |
| 27 | | | | | | | | | 17.7 | 6.0 | — | | | | | | | | | | | | | | | | 2.1 | | | | | | | | | | | | 27 |
| 28 | | | | | | | | | 12.9 | 6.0 | — | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 28 |
| 29 | | | | | | | | | 19.8 | 6.1 | 192 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | Add① | 29 |
| 30 | | | | | | | | | 20.1 | 6.0 | 570 | | | | | | | | | | | | | | | | 1.9 | | | | | | | | | | | | 30 |
| 31 | | | | | | | | | 18.7 | 6.0 | 625 | | | | | | | | | | | | | | | | 1.7 | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

May 6 Influ. ph 7.1 @ 5pm
May 22 Influ ph 6.9 @ 6pm

Flooding PH meter Test w/ 7.00 buffer

CL2 Reservoir Flooded x 2 feet

CL2 Reservoir Flooded this Gray Cloudiness

Pumped 2,000 gallons from Recirc. tank to May 14, 2009

PUMPED 2000 gallons from recirculating tank

IN STATISTICAL ANALYSIS ALL pH readings of 0.75 are fill in numbers because pH meter was not functioning

# Discharge Monitoring Report - Oregon Department of Environmental Quality

√ LWC

Facility Name: Riverwood MHP | Phone Number: 360-254-7131 | Month/Year: June 2009
DEQ Permit No.: 75541 | DEQ File No./Facility ID: 102520 | EPA Reference No.: ORD031149-3
Plant Type: Rec/RC. Gravel | County: Columbia | Population Served: 150+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature — 7/18/09 Date

MAGAR MAGAN Name (Print)

## Operator Certification

Collection Sys. Class: I — Principal Operator Name (print): Magar √ — Certification No. & Grade: 10621
Treatment Sys. Class: I — Principal Operator Name (print): Magan √ — Certification No. & Grade: 10622

RC=Recirc. ONLY
Blue Lake

| Date | INFLUENT Temperature °F / °C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT (identify outfall number – e.g. 001, 002, 003): Temperature °F / °C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab: Total Phosphorous mg/L | NUTRIENTS Composite: Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite: Ammonia Nitrogen mg/L | NUTRIENTS Composite: Nitrate Nitrogen mg/L | DISINFECTION CHLORINE: Used lbs. | DISINFECTION CHLORINE: Total Residual mg/L | DISINFECTION UV: Transmittance % | Turbidity N.T.U. | COLIFORM MPN/MF: E.coli CFU/100 ml | COLIFORM MPN/MF: Fecal CFU/100 ml | COLIFORM MPN/MF: Total CFU/100 ml | RECEIVING STREAM: Ammonia | RECEIVING STREAM: Dilution | RECEIVING STREAM: Stream Flow CFS | RECEIVING STREAM: Temperature °F / °C | RECEIVING STREAM: pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | 20.7 | 6.0 | 22 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | Recirculating ONLY | 1 |
| 2 | | | | | | | | | 18.5 | 6.0 | 6 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | RC | 2 |
| 3 | | | | | | | | | 20.3 | 6.0 | 4 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | RC | 3 |
| 4 | | | 24 | | | 30 | | | 19.5 | 6.0 | 30 | | 12 | 92% | | | | | | | | | | | | | 0.5 | | | | | | | | 0.6 | | | | Add①/RC/ R=3/10" | 4 |
| 5 | | | | | | | | | 18.4 | 6.0 | 426 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | R=3/10" | 5 |
| 6 | | | | | | | | | 17.5 | 6.0 | 1092 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | R=1/10" | 6 |
| 7 | | | | | | | | | 16.7 | 6.0 | 1543 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | R=1/10" | 7 |
| 8 | | | | | | | | | 17.9 | 6.0 | 508 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 8 |
| 9 | | | | | | | | | 20.1 | 6.1 | 892 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | 9 |
| 10 | | | | | | | | | 17.1 | 6.1 | 1213 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | 10 |
| 11 | | | | | | | | | 18.6 | 6.0 | 1361 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | Add① | 11 |
| 12 | | | | | | | | | 18.4 | 6.0 | 1825 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | Add① | 12 |
| 13 | | | | | | | | | 17.9 | 6.0 | 1185 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | 13 |
| 14 | 6.9 | | | | | | | | 18.3 | 6.0 | 1976 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add① | 14 |
| 15 | ~~7.4~~ | | | | | | | | 18.2 | 6.0 | 3343 | | | | | | | | | | | | | | | | 2.0 | | | | | | | | | | | 15 |
| 16 | | | | | | | | | 17.1 | 6.0 | 1281 | | | | | | | | | | | | | | | | 2.0 | | | | | | | | | | | 16 |
| 17 | | | | | | | | | 17.1 | 6.0 | 2453 | | | | | | | | | | | | | | | | 1.8 | | | | | | | | | | | 17 |
| 18 | | | | | | | | | 18.8 | 6.0 | 2502 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | 18 |
| 19 | | | | | | | | | 18.9 | 6.1 | 2969 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | R=6/10" | 19 |
| 20 | | | | | | | | | 16.6 | 6.0 | 3200 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | R=1/10" | 20 |
| 21 | | | | | | | | | 17.3 | 6.1 | 2270 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Add① | 21 |
| 22 | | | | | | | | | 17.9 | 6.1 | 2207 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | 22 |
| 23 | TV | | | | | | | | 20.5 | 6.1 | 1350 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | 23 |
| 24 | | | | | | | | | 17.2 | 6.1 | 2367 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 24 |
| 25 | | | | | | | | | 17.9 | 6.1 | 2731 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | Add① | 25 |
| 26 | | | | | | | | | 18.5 | 6.1 | 3121 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | 26 |
| 27 | | | | | | | | | 18.9 | 6.1 | 2390 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | 27 |
| 28 | | | | | | | | | 17.4 | 6.1 | 2726 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 28 |
| 29 | | | | | | | | | 18.7 | 6.1 | 3415 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | 29 |
| 30 | | | | | | | | | 18.5 | 6.1 | 2783 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add① | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

Infl pH 6.9 @ 6pm

Infl pH 7.0 @ 7:45

RECEIVED
JUL 20 2009
DEQ OF ENVIRONMENTAL QUALITY
NW REGION WATER QUALITY

The numbers for BOD & TSS in Powell are low
Right in Tills Run was BOD 1 TTS was 50



A2 pg

+. 6

Oregon
Theodore R. Kulongoski, Governor

**Department of Environmental Quality**
Northwest Region
2020 SW Fourth Avenue, Suite 400
Portland, OR 97201-4987
(503) 229-5263
*Fax:* (503) 229-6945
*TTY:* (503) 229-5471

October 15, 2008

Magar E Magar
14102 NE 40th
Vancouver, WA 98682

RE: Riverwood Mobile Home Park STP
**File #75541 Permit #102520**
Columbia County

Dear Mr. Magar:

Discharge Monitoring Reports (DMRs) submitted in accordance with your National Pollutant Discharge Elimination System (NPDES) permit continue to not meet the "Minimum Monitoring and Reporting Requirements" as established in Schedule B (on pages 3 and 4) of your permit. In addition, the reporting is sloppy and often illegible.

For example, the August 2008 report only included one day of pH sampling on the plant influent yet the permit requires influent pH monitoring twice each week. No effluent data for pH was reported; though it is likely the numbers listed under Effluent "Temperature" are pH values. Effluent temperature and pH are required to be reported at least twice each week. On this DMR you also recorded cumulative flow meter readings off the meter totalizer but these numbers did not correspond with the daily numbers you show on your statistical summary sheet. Daily flow (in millions of gallons) is required to be reported. For this facility the average daily flow for the month of August should have been reported as 0.005 MGD and should be clearly shown on the DMR. It is fine to add your supplemental statistical analysis sheets but the summary values (max, min, average) need to be transferred to the official DMR form. Your DMR also does not give "pounds discharged" values for BOD and TSS. The permit requires that this be calculated on a monthly basis. The formula for calculating mass discharge is Flow (in MGD) X Concentration (in mg/L) X 8.34. Ammonia (NH3-N) monitoring is required at minimum on a quarterly basis. I reviewed the last year of DMRs and found only two months where samples for ammonia were reported.

You have indicated that you cannot get your reports submitted by the 15th day of the month following the reporting period. There is no reason why this should be difficult. If you cannot do the reporting as required then you need to hire someone who can. The failure to submit timely reports indicates to the Department that you are not accepting the responsibility that comes with an NPDES permit. As the designated certified operator for this facility it is you responsibility to make every effort to comply with the NPDES permit. Failure to do so will lead to additional enforcement action and the potential for additional civil penalty action. This does not seem like a productive way to spend your time and resources.

EXHIBIT # A3.1 M 000167

DEQ-DC1

If you believe any of the facts in this letter are in error, you may provide information to me at the office at the address shown at the top of this letter.

The Department endeavors to assist you in your compliance efforts. Should you have any questions about the content of this letter, please feel free to contact me in writing or by phone at 503-229-5295.

Sincerely,

Lyle Christensen
Environmental Specialist

Cc: Leah Koss, Office of Compliance and Enforcement, DEQ Headquarters

**CHRISTENSEN Lyle**

**From:** MAGAR EDWARD MAGAR [CALSPORT@MSN.COM]
**Sent:** Tuesday, February 10, 2009 9:30 AM
**To:** CHRISTENSEN Lyle
**Subject:** Re: Reminder: Biosolids Annual reports

your reply is suficient. as to the measurements of the various layers in the septic tank I beleve I told you I was relying on Smits report shich was generated in July 2008. Mr. Smit is always compensated.

----- Original Message -----
**From:** CHRISTENSEN Lyle
**To:** MAGAR EDWARD MAGAR
**Sent:** Tuesday, February 10, 2009 8:55 AM
**Subject:** RE: Reminder: Biosolids Annual reports

I do not believe I am difficult to reach, I am available by phone, mail, email or in person.

The solids handling report referred to by the previous e-mail is required by your permit (Schedule B, Condition #3 found on Page 4). It sounds like from what you provided below that your report would be brief. It would also be appropriate to report the monitoring required in the permit under **Biosolids Management** in Schedule B 1. c. (found on page 3). Under that monitoring you are required to provide results of a septic tank inspection conducted each August where you note the accumulated sludge solids in your septic tank and recirculation tank (as a % of volume). Also in addition to volume (in gallons) removed, you need to provide the date of the pumping, %solids of the sludge removed, name of the hauler and where it was taken (transfer point).

Mr. Smits is not the permit holder and will not follow up unless he is compensated for his time. You as the owner and permit holder need to get the meter issue resolved. Many meters at wastewater plants are installed in wet locations and function just fine. It is your challenge to get a meter installed that provides reliable information on the flow from your plant. I would suggest that you talk to someone who installs wastewater flow meters if the vendor (Water Metrics) cannot assist you. Continuing to rely on estimated flow based on your potable water supplied or the old plant meter is pointless.

**Lyle Christensen, ORDEQ/NWR, 503-229-5295**

---

**From:** MAGAR EDWARD MAGAR [mailto:CALSPORT@MSN.COM]
**Sent:** Sunday, February 08, 2009 2:40 PM
**To:** CHRISTENSEN Lyle
**Subject:** Re: Reminder: Biosolids Annual reports

need to talk to you what does that involve.. I have in the last year as I reported pumped part of the sludge in the septic tank and part of the sludge in the recirculation tank a total of 6,000 gallons followed by another partial pumping in the last month or so of the recirculation tank another 2000 gallons. That is all the I have done with the biosolids. I do not do anything with them other than that
Mr. Smith promised to look into the matter of the meter and get back to me. The old meter is at Water Metrics of Tualatin and they suggested that they send it back to Seimens for evaluation but concluded that it was not worth doing. I can according to water metrics buy a new meter for about $2,800. However before I do that: First I want to be sure that what happened to the first one does not happened to the new one and second that it is properly caliberated. I do not have the personnel to insure that that will not happened. The caaliberation is easy but installation to avoid these problems is not. smith was supposed to help but he seems to forget.
----- Original Message -----



EXHIBIT # A4 p1 Item M 090369

**From:** CHRISTENSEN Lyle
**To:** Brian S Hickman ; Dan Snyder ; dpatch@cityofseaside.us ; estwwtp@cityofestacada.org ; petersen.dena@gmail.com ; Dennis Ervin ; jhsikking@comcast.net ; MAGAR EDWARD MAGAR ; Robert.Watts@CH2M.com ; Tony Owen ; rash@co.clatsop.or.us ; nrsa@harborside.com ; true@clatskanie.com
**Sent:** Monday, February 02, 2009 12:01 PM
**Subject:** FW: Reminder: Biosolids Annual reports

FYI

---

**From:** DOUGHTEN Ron
**Sent:** Monday, February 02, 2009 9:54 AM
**To:** MOORE Beth; CHRISTENSEN Lyle; WEST Jayne; BAGGETT Robert; BOWER Karen; BROWN Larry; DOUGHTEN Ron; KENNEDY Paul; MCMILLAN Steve; NADLER Carl
**Cc:** GEIST Gregory; NIGG Eric; SMITH Duane; RUSCIGNO John; JOHNDOHL Judy
**Subject:** Reminder: Biosolids Annual reports

***Please remind facilities to submit their annual reports and avoid warning letters!***

2008 Annual reports from NPDES and WPCF facilities that land applied bulk biosolids or domestic septage, or sold or gave away biosolids derived products (e.g., biosolids compost) for distribution and marketing are due on 19 February 2009.

All permittees must submit:

- **One copy** (original) to the regional DEQ office **and**
- **One copy** to the DEQ biosolids program coordinator:

  Biosolids Program Coordinator
  Oregon DEQ Water Quality Division
  811 SW 6th Ave
  Portland OR 97204

Class I major facilities must also submit an annual report to the Environmental Protection Agency (EPA) Region 10 by 19 February 2009 for the
2008 calendar year. A copy of the annual report prepared for DEQ should meet all federal reporting requirements. Reports should be sent to:

NPDES Compliance Unit, OCE133
EPA Biosolids Attn: Cindy Phing - #900
1200 Sixth Avenue
Seattle, WA 98101

**Report Contents:**
The annual report must include the following:

- Description of how biosolids or septage were produced, stabilized, and tested,
- The amount of biosolids or septage produced,
- Information characterizing the quality of the biosolids or septage,
- Description of how and where the biosolids or septage were managed,
- Necessary signed certifications for pathogen reduction, vector attraction reduction, and site management practices
- Description of any major modifications to solids handling or land application site management practices, and
- Description of any violation of state or federal rules pertaining to biosolids or septage and remedial actions taken.

In addition to the above information, if biosolids or septage are land applied, the following is needed on the beneficial use sites:

- Site names and locations,
- Crops grown, and for septage the nitrogen requirements for each site,
- Amount of acreage,
- Amount of biosolids (dry tons/acre) or septage (gallons/acre) applied,
- Amount of available nitrogen supplied by the biosolids or septage,
- Specific types of septage treated and applied, and
- Soil test(s) if required by a site authorization letter.

http://www.deq.state.or.us/wq/biosolids/assistance.htm

Please let me know if you have any questions.

Thanks.

--
Ron Doughten
Biosolids & Water Reuse Program Coordinator
Oregon Dept. of Environmental Quality
811 SW 6th Ave
Portland, OR 97204
ph: 503.229.5472



A4p3

## CHRISTENSEN Lyle

**From:** MOORE Beth
**Sent:** Tuesday, February 17, 2009 3:41 PM
**To:** KOSS Leah; CHRISTENSEN Lyle
**Cc:** DESMOND Steven M
**Subject:** FW: Discussion on DMRs

This is what I have. I will put it in the file.

---

**From:** MOORE Beth
**Sent:** Tuesday, December 30, 2008 4:13 PM
**To:** MAGAR EDWARD MAGAR
**Cc:** DESMOND Steven M
**Subject:** Discussion on DMRs

Lyle,

Steve Desmond, Mr. Magar and myself were discussing the responsibilities an owner operator. The discharge monitoring report (report) that is required to be submitted by the 15th was discussed.

The question on why the report had to be there on the 15th rather than "the report eventually makes it" approach was answered. The report has to be in the office for EPA and third parties to look at. The report is submitted at that time so that it can be reviewed. The 15th is already two weeks into the next month's reporting period so that date is necessary to provide feedback on any problems that there may be with compliance. With the large number of reports that come in, the expectation is that time can be set aside to do those reviews.

The advice that was given to Mr. Magar on submitting discharge monitoring reports is that operators are expected to submit complete , accurate and legible reports. That the sample should be taken earlier rather than later in order to get sample results back on time to submit the report by the due date.

We discussed that the discharge monitoring report needs to be submitted on time. (no later than postmarked on the 15th).

Some "what if's " were asked about, for example late lab report and checking data.

If there is a case where the laboratory results will not be done in order for the discharge monitoring report to be submitted on time then, the approach is to submit the discharge monitoring report with all the other data with an explanation in writing that the laboratory has not submitted certain data yet. That way the discharge monitoring report will be submitted on time. The explanation needs to include a statement of what is missing and when it will be provided. Then the operator needs to follow up which means providing the laboratory data with a revised discharge monitoring report. The revised discharge monitoring report will have all the data in one place on the discharge monitoring report.

We discussed that the discharge monitoring report needs to include all the data, that if there is a question on the quality of a certain data point..the data point in question still needs to be reported with a Flag or asterisk with an explanation on the quality of that data. This way the discharge monitoring report will be submitted on time. Again follow up is required if the data point in question is resolved.



EXHIBIT # A5

file

Oregon
Theodore R. Kulongoski, Governor

**Department of Environmental Quality**
Northwest Region
2020 SW Fourth Avenue, Suite 400
Portland, OR 97201-4987
(503) 229-5263
*Fax:* (503) 229-6945
*TTY:* (503) 229-5471

July 7, 2009

Magar E Magar
14102 NE 40th
Vanciouver, WA 98682

RE: Preenforcement Notice
Riverwood Mobile Home Park STP
PEN - NWR-WQ-09-0088
**File #75541 Permit #102520**
Columbia County

Dear Mr. Magar:

On June 4, 2007, the Department of Environmental Quality (DEQ) issued a renewal NPDES permit for the wastewater treatment system at Riverwood Mobile Home Park located about two miles south of the City of Rainier in Columbia County. As the owner and certified operator for this facility you are responsible to assure compliance with the NPDES permit.

Within the permit, specific effluent limits are established for your wastewater treatment plant discharge along with a number of monitoring and reporting requirements which must be adhered to. A review of recent monitoring reports (DMRs) reveals that a number of issues continue to be noted within the Riverwood DMRs. Many of these same issues were listed in a letter to you dated October 15, 2008. In accordance with Oregon Revised Statute (ORS) Chapter 468B.025(2)- No person shall violate the conditions of any waste discharge permit…

VIOLATIONS:

(1) Your DMRs continue to omit the required operator certification information as listed Schedule B, Condition 2 b. Specifically the condition requires that:

> State monitoring reports shall identify the name, certificate classification and grade level of each principal operator designated by the permittee as responsible for supervising the wastewater collection and treatment systems during the reporting period. Monitoring reports shall also identify each system classification as found on page one of this permit.

Failing to submit a complete discharge monitoring report is a Class III violation.

(2) Minimum monitoring and reporting requirements are not being met. In particular:
(a) Influent pH monitoring is required to be reported at minimum twice each week per Schedule B, Condition 1.a.. Some months it is reported only a single time for the month.
(b)No mass amounts are being reported for biochemical oxygen demand (BOD) and total suspended solids (TSS) per Schedule B, Condition 1.b.
c) For May, 2009, no bacteria results were noted on the DMR.
Failing to collect monitoring data required by Schedule B of the permit is a Class I violation.

EXHIBIT #A6 p1

DEQ-DC1

(3) Monitoring reports are almost never submitted in a timely manner. The permit requires (Schedule B, Condition 2.a.) that reports be submitted by the 15th day of the month following the reporting period.
Failing to timely submit a report required by the permit is a Class II violation.

(4) Flow measurement has been suspect or non-existent since you reported a failure of your flow meter in May 2008. Under Schedule F, Section B, Condition 1 of your permit you are required to properly operate and maintain your facilities. You are required to replace failed equipment (like the flow meter) with like equipment in a timely manner.
Violating a management or operational plan established in a waste discharge permit is a Class II violation.

(5) The effluent limit for pH was not met one day as indicated on the May 2009 DMR and 6 days on the January 2009 DMR.
Violating a technology based effluent limit in an NPDES permit by less than 1 pH unit is a Class III violation.

Class I violations are the most serious violations; Class III violations are the least serious.

The violations cited above caused significant environmental harm or posed the risk of significant environmental harm and are being referred to the Department's Office of Compliance and Enforcement for formal enforcement action. Formal enforcement action may result in assessment of one or more civil penalties and/or a Department order. A formal enforcement action may include a civil penalty assessment for each day of violation.

If you believe any of the facts in this Pre-enforcement Notice are in error, you may provide written information to me at the office at the address shown at the top of this letter. The Department will consider new information you submit and take appropriate action.

The Department endeavors to assist you in your compliance efforts. Should you have any questions about the content of this letter, please feel free to contact me in writing or by phone at 503-229-5295.

Sincerely,

Lyle Christensen
Environmental Specialist

Ec: Office of Compliance and Enforcement, DEQ Headquarters

A6p2

**SMITH Bryan**

**From:** CHRISTENSEN Lyle
**Sent:** Tuesday, July 21, 2009 9:40 AM
**To:** SMITH Bryan
**Subject:** RE: Magar Magar: EB

Hey Bryan, lucky you. As Leah can attest we have had issues with Mr. Magar in the past. Still attempting to have a formal hearing for the last enforcement action initiated in December 2007. Anyway I went back to when his flow meter quit on about April 25, 2008. I copied all DMRs since then for you and tried to highlight the issues that I cited in my latest PEN (NWR-WQ-09-0088). Though he has reported flow values most months, to my knowledge he has never repaired or replaced his flow meter and has been reporting flows that just make little or no sense. In September 2008 he sent me a graph (attached to the DMRs between August 2008 and September 2008) to show that is potable water flow and wastewater flow were quite different.

Magar's reports are often almost illegible. He scribbles notes that make little sense, marks over and scratches out numbers, places values in the wrong columns and all this makes my review very difficult.

I developed a table to summarize my PEN listed concerns:

| DMR Month/yr | Date received: | Op. Cert info? | BOD/TSS mass reported? | Times Influent pH reported during month? Due 2 times per week | Bacteria results reported? |
|---|---|---|---|---|---|
| Apr 08 | 6/2/2008 | none | no | 23 but I suspect these are actually effluent pH values | yes |
| May 08 | 7/7/2008 | none | no | 31 but I suspect these are effluent values again | no |
| Jun 08 | 7/25/2008 | none | no | none | no |
| Jul 08 | 8/28/2008 | none | no | 2 | yes |
| Aug 08 | 9/17/2008 | none | no | 1 | yes |
| Sep 08 | 10/28/2008 | yes | no | 1 | no |
| Oct 08 | 11/17/2008 | partial | no | none | yes |
| Nov 08 | 12/24/2008 | partial | no | 2 | yes |
| Dec 08 | 1/23/2009 | none | no | 3 | yes |
| Jan 09 | 2/19/2009 | none | no | 2 | no |
| Feb 09 | 3/17/2009 | none | no | 2 | yes |
| Mar 09 | 4/20/2009 | none | no | 3 | yes |
| Apr 09 | 5/18/2009 | partial | no | 3 | yes |
| May 09 | 6/22/2009 | none | no | 1 | no |
| Jun 09 | 7/20/09 | yes | no | 2 | no |

Mr. Magar has been dropping off (I think he has had difficulties he attributed to the US mail) the DMRs for the past several months at NWR but even then he does not typically sign and date them until after the 15th day of the following month. Even though I have met with him and explained that it is his responsibility as the permit holder to assure that they are submitted in a timely manner.

The DMR form has a place for reporting "Operator Certification" info and he seldom uses it.

EXHIBIT # A7p1

Though he reports effluent concentration (mg/L) values for BOD and TSS he has never bothered to do the math necessary to calculate the mass (lbs) associated with those concentrations. In order to do the math he needs to have a valid flow value for the sampling day.

He seems to have issues with both his field meters for evaluating pH and total residual chlorine. Some of his pH values that were outside the permitted 6.0-9.0 range seem to have occurred when his meter was not calibrated. Though he typically does pH measurement on his effluent each day he was never reporting influent pH as required by his permit. DEQ asked him to start monitoring influent pH as well as effluent pH in accordance with the permit (at minimum 2 times each week). So for most of the past year he has reported about twice each month. So for economic benefit calculation we could say that in the past year (52 weeks) he should have done pH at least twice each week (104 times) and yet in most recent twelve months reporting he provided 22 pH values. Since he has the meter and needs only spend the time to do the field sample and test, 82 pH samples missed at say 20 minutes per sample would equate to about 27 hours of time. At $20/hour for his time we could say an estimate for EB of about $500.

With the missing bacteria sample results, I suspect he will have values, but he fails to record them on the DMR. When I asked last November about missing samples in May, June and September he sent me the email that you will find between the September and October 2008 reports that showed values that were not recorded on the DMR. In 2009 he did not report bacteria results in January , May and June. I suspect that the analysis costs for bacteria samples at an outside lab are about $25 per event.

Once you get the DMR packet coming via inter office mail, call me if you have further questions or would like to discuss this.
Lyle 503 -229-5295

---

**From:** SMITH Bryan
**Sent:** Thursday, July 16, 2009 3:54 PM
**To:** CHRISTENSEN Lyle
**Cc:** SMITH Bryan
**Subject:** RE: Magar Magar: EB

I looked at the case Leah has currently against him, and she assessed EB for missed sampling – so for consistency we ought to do the same here.

Please provide a list of each parameter, per month, for which he failed to sample, and provide an estimate for the avoided cost of each month. (You'll already have this list after answering my previous questions, so essentially just add a cost to each month, depending on how many parameters weren't sampled in each month)

Thanks again, Bryan.

---

**From:** SMITH Bryan
**Sent:** Thursday, July 16, 2009 3:47 PM
**To:** CHRISTENSEN Lyle
**Cc:** SMITH Bryan
**Subject:** Magar Magar

Hi Lyle. I've got this one. These questions are meant to identify the exact dates of each and every violation so I can cite them all accurately, so please try to respond in a way that captures them all and also provides me with the paperwork to identify each violation (i.e. the DMRs) unless it would be pointless or burdensome to get something to me at this time.

For example, you say he never reported for BOD and TSS; what months and years are missing those 2 parameters? (and please provide DMRs)

A7 p2

You also say he isn't sampling pH "often enough" in 'some months." Can you please tell me which exact months, and send me the DMRs for those months?

(I do see the 7 total days in 2009 when he exceeded the pH limit, so we are good there as long as you send me the January 09 DMR so I can state the results he reported)

Same thing regarding failure to include certification information – for how many separate months?

Same thing regarding late submissions of DMRs – please identify how late each DMR arrives, and each separate month this violation occurred (and please provide DMRs).

This may overlap with the above questions, but I only see the May 09 DMR in the file, yet you refer to violations in January as well, so can you please route me a copy of the January 09 DMR?

Also, when was the oldest/earliest date when you have evidence his flow meter broke? Was it May 1, 2008, when he stopped reporting flow? (I need this initial date of noncompliance so that I can assess EB for this violation.)

Thanks as always, Bryan.



A7, p. 3

**SMITH Bryan**

**From:** CHRISTENSEN Lyle
**Sent:** Tuesday, July 21, 2009 10:02 AM
**To:** SMITH Bryan
**Subject:** FW: pre-enfocement letter
**Attachments:** christensen .l011.docx; sewerplant.xlsx

Bryan, please find attached Mr. Magar's response to the PEN.
Lyle 503 -229-5295

---

**From:** MAGAR EDWARD MAGAR [mailto:CALSPORT@MSN.COM]
**Sent:** Tuesday, July 21, 2009 9:53 AM
**To:** CHRISTENSEN Lyle
**Subject:** pre-enfocement letter

see attachments



EXHIBIT # A8 p1

1

***Magar E. Magar***

**14102 NE 40th Street**
**Vancouver WA. 98682**

***Tel 360 254 7131, cell 503 929 1094 fax 360 254 0405***

Lyle Chistensen
Norwest Region
2020 SW 4thn Ave suite 400
Portland, Or 97201

Re: Pre-enforcement Notice.

The most important point you bring up is that the e.coli for May 2009. That was inadvertent . In fact it was read on May 21, 2009 and was less than 1. I append my lab sheet to this lettter

As for who the operator was I am the operator and my certificate numbers are 10621 and 10622 and they are C/I and T/I and they expire on June 30, 2010.

The influent pH is always in the range of 6.7 -7.00 with an a median of 6.8 and that has never varied. As a writer of the permit you know that and yet you put these conditions in the permit even though you know that a statistical analysis would reliably predict that the influent pH would be in the reported range with a very very high degree of confidence. So one is left to wonder why you put those conditions in there. This is a domestic water system where the influent does not seem to vary. If you give me a logical reason where you might suspect I will have an outlier please tell me where it is and I will monitor it. I cannot imagine any of our population putting anything foreign in the sewer system.

As to mass amounts as I understand it DEQ do not want us to put out more than 2.2 lbs of BOD or TSS per day in summer and no more than 3.3 pounds per day in winter. We only put out ***at most*** and I mean at most , 70 grams of BOD per day and ***less than 70 grams of TSS.*** When I last looked at the conversion tables 70 grams is less than 3 ounces (3 oz. if about 84 grams) per day. These numbers are a far cry from the poundage that DEQ permits allows us to discharge. Even if we discharge 13,000 gallons per day which is approximately 50,000 liters per day. At 2 mg/L of effluent that works out work out 2mg x 50,000 which equals 100,000 mgs which in turn is 100 grams which works out 3.5 ounces per day. A far cry from the 2 to 3 pounds allowed. You should develop a sense of proportion. Whenever you see 2or 3mg/ l of effluent compute the maximum possible by assuming what was put out is less than 3.5 ounces per day. Why do you require that number when we have forever at a maximum put out at most 3.5 ounces per day.

As for the pH measurements. If they are missing it is because the pH electrodes were defective and had to be replaced . When replaced we started to measure again. Equipment failure is a fact of life. When it happens we purchase replacements and go on with our life..

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I understood we were to have some flexibility on the timeliness of the submission. You are getting the reports.

By submitting the water consumption we are giving you reliable numbers. Last summerwhen we replaced the greater part of the cast iron sewer lines; and some time this winter when we put in a culvert and purchased and installed a gasket for the manhole right behind space 46 we considerably reduced the water infiltration. We spent over $30,000 on these two projects and we are not done. Next month we are scheduled to replace the rest of the cast iron pipes . Fortuneatel that is a less ambitious project than the one last summer.,

II will answer the rest of your concerns if you will e-mail by attachment the rest of your letter as right now the letter is in Portland and I will not get it for a couple of days.

Very truly yours

Magar E. Magar

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| DATE | bod inf. | bod eff | tss inf. | tss eff. | e.coli eff | ammonia |
|---|---|---|---|---|---|---|
| 4/3/2008 | 68 | 0 | 64 | 6 | less 1 | |
| 5/22/2008 | 70 | 0 | 75 | 0 | less 1 | |
| 6/5/2008 | 130 | nd | 115 | 2 | less 1 | .42mg/L |
| 7/3/2008 | 99 | nd | 100 | 3 | less 1 | |
| 8/7/2008 | 100 | nd | 84 | 2 | less 1 | |
| 9/4/2008 | 68 | nd | 67 | 2 | less 1 | nd |
| 10/2/2008 | 100 | nd | 120 | 3 | no samp | |
| 10/28/2008 | | | | | 10 | |
| 11/6/2008 | 82 | nd | 84 | 3 | 1 | |
| 12/5/2008 | 27 | nd | 8 | 2 | 92 | nd |
| | | | | | less 1 | |
| 1/16/2009 | 140 | nd | 110 | nd | 2 | |
| 2/5/2009 | 89 | nd | 70 | nd | | |
| 19-Feb | | | | | 83 | |
| 3/13/2009 | | | | | LESS 1 | |
| 3/5/2009 | 110 | nd | 116 | 2 | | |
| 4/2/2009 | 115 | 3 | 120 | 4 | | |
| 4/9/2009 | | | | | LESS 1 | |
| 5/21/2003 | 130 | 2 | 53 | 5 | *LESS 1* | |
| 6/4/2009 | 24 | less 2 | 38 | less2 | LESS 1 | 0.6mg/L |
| 7/2/2009 | 100 | less 2 | 50 | less2 | LESS 1 | |

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**SMITH Bryan**

**From:** CHRISTENSEN Lyle
**Sent:** Wednesday, July 22, 2009 5:09 PM
**To:** SMITH Bryan
**Subject:** RE: Magar Magar: EB

I think "bacteria" is a Ok to say. From Magar's letter it seems he may have done some of the missing bacteria tests but again failed to record them on the DMR, so the EB may be somewhat moot on that parameter. pH he basically says he does not think we need that information and isn't going to do sample it as required.

---

**From:** SMITH Bryan
**Sent:** Wednesday, July 22, 2009 4:39 PM
**To:** CHRISTENSEN Lyle
**Cc:** SMITH Bryan
**Subject:** RE: Magar Magar: EB

OK, so I can just say "bacteria" then?

And there is no avoided EB for TSS/BOD, then – only for pH and bacteria?

---

**From:** CHRISTENSEN Lyle
**Sent:** Wednesday, July 22, 2009 4:37 PM
**To:** SMITH Bryan
**Subject:** RE: Magar Magar: EB

Bryan, bacteria is the parameter. E.coli , fecal coliform, Enterrococcus, total coliform are different indicator organisms to evaluate bacteria levels. The Riverwood NPDES permit specifies the bacteria indicator E.coli. The cost of the test is pretty much the same I believe for E.coli and/or total coliform.

Mr. Magar does test as required for BOD and TSS, what he is not doing is taking the concentration values and mathematically deriving the mass associated with that concentration. Flow times concentration times a conversion factor gives you mass. From his response letter, he indicates that it does not seem to be necessary to calculate but the permit specifies that he report the mass.

Lyle 503 -229-5295

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**From:** SMITH Bryan
**Sent:** Wednesday, July 22, 2009 3:57 PM
**To:** CHRISTENSEN Lyle
**Cc:** SMITH Bryan
**Subject:** RE: Magar Magar: EB

Lyle, this was some really useful information in the chart; thanks.

A question or two: you said it cost $25 per sample for bacteria. But "bacteria" is not listed in the permit. When you say mean "bacteria" do you mean only E. coli? Or total coliform? And is it still $25 per event regardless of the answers to the above?



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Also, you didn't give me an EB for the avoided cost of not sampling for BOD and TSS – is that because you forgot, or is that because you mean to say that he could sample for these items at the same time he samples for "bacteria" and so there is no more EB for those two missed parameters?

---

**From:** CHRISTENSEN Lyle
**Sent:** Tuesday, July 21, 2009 9:40 AM
**To:** SMITH Bryan
**Subject:** RE: Magar Magar: EB

Hey Bryan, lucky you. As Leah can attest we have had issues with Mr. Magar in the past. Still attempting to have a formal hearing for the last enforcement action initiated in December 2007. Anyway I went back to when his flow meter quit on about April 25, 2008. I copied all DMRs since then for you and tried to highlight the issues that I cited in my latest PEN (NWR-WQ-09-0088). Though he has reported flow values most months, to my knowledge he has never repaired or replaced his flow meter and has been reporting flows that just make little or no sense. In September 2008 he sent me a graph (attached to the DMRs between August 2008 and September 2008) to show that is potable water flow and wastewater flow were quite different.

Magar's reports are often almost illegible. He scribbles notes that make little sense, marks over and scratches out numbers, places values in the wrong columns and all this makes my review very difficult.

I developed a table to summarize my PEN listed concerns:

| DMR Month/yr | Date received: | Op. Cert info? | BOD/TSS mass reported? | Times Influent pH reported during month? Due 2 times per week | Bacteria results reported? |
|---|---|---|---|---|---|
| Apr 08 | 6/2/2008 | none | no | 23 but I suspect these are actually effluent pH values | yes |
| May 08 | 7/7/2008 | none | no | 31 but I suspect these are effluent values again | no |
| Jun 08 | 7/25/2008 | none | no | none | no |
| Jul 08 | 8/28/2008 | none | no | 2 | yes |
| Aug 08 | 9/17/2008 | none | no | 1 | yes |
| Sep 08 | 10/28/2008 | yes | no | 1 | no |
| Oct 08 | 11/17/2008 | partial | no | none | yes |
| Nov 08 | 12/24/2008 | partial | no | 2 | yes |
| Dec 08 | 1/23/2009 | none | no | 3 | yes |
| Jan 09 | 2/19/2009 | none | no | 2 | no |
| Feb 09 | 3/17/2009 | none | no | 2 | yes |
| Mar 09 | 4/20/2009 | none | no | 3 | yes |
| Apr 09 | 5/18/2009 | partial | no | 3 | yes |
| May 09 | 6/22/2009 | none | no | 1 | no |
| Jun 09 | 7/20/09 | yes | no | 2 | no |

Mr. Magar has been dropping off (I think he has had difficulties he attributed to the US mail) the DMRs for the past several months at NWR but even then he does not typically sign and date them until after the 15th day of the following month. Even though I have met with him and explained that it is his responsibility as the permit holder to assure that they are submitted in a timely manner.

The DMR form has a place for reporting "Operator Certification" info and he seldom uses it.



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# WQ ENFORCEMENT REFERRAL

| | |
|---|---|
| Inspector: Lyle Christensen | Manager: Greg Geist |
| What Q-Time number do you want the ELS to use? 37469 | |
| Referring Region & Office: NWR | |
| Respondent's Name: Magar Magar | |
| PEN No.: NWR-WQ-09-0088 | Permit Type & No.: NPDES #102520 (*Example: NPDES 124124)* |

1. Significant Non-Complier (SNC)? ☐ Yes *or* ☒ No
2. Are any violations ongoing? ☒ Yes *or* ☐ No
3. Where did the violation(s) occur? Address: Riverwood Mobile Home Park County: Columbia
4. What is the Respondent's connection to the violation(s)? (e.g., property owner, generator, permit or license holder, etc.) *Attach documentation.* Property owner, permit holder, certified operator
5. How did the Department discover the violation(s)? (e.g. complaint, required reporting, inspection, self-reported, etc.) *Attach documentation.* required reporting with DMRs, example (May 2009) attached
6. What are the violations? Please describe each violation and cite to the Department rule, statute, and/or permit condition for each violation.
   Violations are of ORS 468B.025 (2) see attached PEN
7. Has the Department had any prior communication with this Respondent about compliance issues?
   ☒ Yes *or* ☐ No see attached courtesy letter dated October 15, 2008. See Email memo from Beth Moore that was sent to Mr. Magar December 30, 2008. The email came after a requested meeting by Mr. Magar with Beth Moore (my manager) and Steve Desmond. See PEN dated July 7, 2009
   *(If so, please attach copies of WLs, PENs, and/or any other correspondence to Respondent, and discuss any verbal communications with Respondent)*
8. Did you have conversations or correspondence with anyone other than the Respondent about the violation(s)?
   ☐ Yes *or* ☒ No
   *(If so, discuss the details of any conversations and attach any correspondence, and please provide name and contact information.)*
9. If the PEN requested corrective action or response, please attach any response received.
10. If the responsible party is a permittee **(in which case please attach permit)** or should have a permit, please check the appropriate box (this information is necessary to determine which penalty matrix to use in the penalty calculation):

    ☐ General Permit 1200-C for Site 5 Acres or Greater
    ☐ Other General Permit
    ☐ Municipal or Private Sewage Treatment Facility with a permitted flow of 5 MGD or more
    ☐ Municipal or Private Sewage Treatment Facility with a permitted flow of 2 MGD or more but less than 5 MGD
    ☒ Municipal or Private Sewage Treatment Facility with a permitted flow of less than 2 MGD
    ☐ Major Industrial Source NPDES Permit
    ☐ WPCF permit for a major fruit or vegetable processing facility

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- ☐ WPCF permit for a major mining operation involving over 500,000 cubic yards per year or a mining operation using chemical leaching or froth flotation
- ☐ WPCF permit for a mining operation involving 100,000 to up to 500,000 cubic yards per year other than those using chemical leaching or froth flotation
- ☐ WPCF Municipal Stormwater UIC System Permit or NPDES MS4 Permit for an entity with a population of 100,000 or more
- ☐ WPCF Municipal Stormwater UIC System Permit or NPDES MS4 Permit for an entity with a population of 10,000 or more but less than 100,000
- ☐ WPCF Municipal Stormwater UIC System Permit or NPDES MS4 Permit for an entity with a population of less than 10,000

For UICs, check the box that applies:

- ☐ Prohibited Class I, II, III, IV, or V UIC System, excluding Cesspools
- ☐ UIC that disposes of wastewater other than stormwater or sewage
- ☐ UIC System that disposes of stormwater or sewage

**11. Selected Magnitude Calculations (Check all that apply, indicate which violation applies, and provide the requested information.)**

A. Spills and Effluent Limit Violations

| | Violations |
|---|---|
| **Technology-Based Effluent Limit exceedances or spills:**<br>Dilution: ☐ <2 ☐ ≥2 and <10 ☐ ≥ 10<br>Assumptions used in determining D (D = ((QR /4) + QI)/ QI): _____ | pH violations noted in May and January 2009 |
| **WQBEL Violations:**<br>Ratio of WQBEL flow to stream flow: ☐ <1 ☐ ≥1 and <2 ☐ ≥2<br>Assumptions used in determining flows: _____ | |
| **Toxic Pollutant Discharges:**<br>Ratio of CS/D to CAcute: ☐ <1 ☐ ≥1 and <2 ☐ ≥2<br>[Note: CS = discharge conc.; D = dilution; CAcute = acute toxicity concentration]<br>Assumptions used in determining flows: _____ | |
| **Thermal Pollutant Discharges:**<br>If yes, was the effluent temperature ≥32°C after 2 seconds of mixing? ☐ Yes *or* ☐ No<br>Assumptions used in determining effluent temperature: _____ | |

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| **BOD5 Discharges:** | |
|---|---|
| Was (BOD5)/D >10? ☐ Yes *or* ☐ No<br>Assumptions used in determining (BOD5)/D: _____ | |

B. For violations of numeric water quality standards, please check any that apply:

| | |
|---|---|
| Increase in concentration (C) of any pollutant except for toxics, DO, pH and turbidity:<br>Measured increase: ☐ ≥25% ☐ <25% and >10% ☐ ≥10%<br>Method used in determining increase (C_downstream)/C_standard): _____ | |
| Decrease in dissolved oxygen (DO):<br>Measured decrease: ☐ ≥2 mg/L ☐ <2 and ≥1 ☐ <1 mg/L<br>Method used in determining DO decrease (DO_standard - DO_instream): _____ | |
| Increase in toxic pollutants:<br>Measured impact: ☐ >acute criteria<br>☐ ≥100% of chronic criteria<br>☐ <100% of chronic criteria and >10% increase instream concentration<br>☐ ≥10% increase in instream concentration.<br>Method used in determining impact: _____ | |
| Increase or decrease in pH:<br>Measured instream pH change: ☐ ≥1 unit ☐ <1 and ≥0.5 ☐ <0.5<br>Method used in determining pH change: _____ | |
| Increase in turbidity:<br>Measured instream turbidity increase: ☐ ≥50 ntu ☐ <50 and <20 ☐ ≥20<br>Method used in determining turbidity increase: _____ | |
| Violation occurred in a water body that is water-quality limited (listed on the most current 303(d) list) and the discharge is the same pollutant for which the water body is listed | ☐ |
| Violation depressed oxygen levels or increased turbidity and/or sedimentation in a stream in which salmonids may be rearing or spawning as indicated by the beneficial use maps available at OAR 340-041-0101 through 0340 | ☐ |
| Violation is of a bacteria standard either in shell-fish growing waters or during the period from June 1 through September 30 | ☐ |
| Violation resulted in a documented fish or wildlife kill | ☐ |

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**12. Magnitude of Other Violations**: For each violation that does not have a select magnitude category (above), please complete the following table (copy and paste rows to address multiple violations by selecting Unprotect Document from the Tools menu):

| Violation | Did the violation cause significant adverse impact on human heath or the environment? | Did the violation have no more than a de minimus adverse impact on human health or the environment? | Assumptions used in making this determination. |
|---|---|---|---|
| failure to include required operator certification information on the DMR | ——— | yes | Mr Magar seems to be under the impression that since he is the operator and owner that he does not need to include this information each time. His reports are sloppy and often difficult to read or understand. |
| Failure to meet minimum monitoring and reporting requirements | | yes | Influent monitoring of pH is more useful to the operator than to us. Mass loads can be calculated using the concentrations reported but the permittee is required. Bacteria monitoring was likely done but not reported |
| Not submitting monitoring reports in a timely manner | | yes | |
| Failure to replace the flow meter when it failed | | yes | Flow monitoring is necessary to tell what volume is discharged |
| | | | |

**ADDITIONAL INFORMATION (including economic benefit):**
(Use separate "Confidential Intra-Office Advisory" form (the last page of this document) for confidential information.)

Most of the items for which this notice is being issued have no direct economic benefit. When he does things late or omits information he really gains no direct benefit. He has gained economic benefit by not replacing the faulty flow meter for over a year. Earlier this year he indicated a cost for the meter of $2800. It is less than clear why he has not replaced the meter as required.

Attached to this referral is a copy of his most recent discharge monitoring report as an example of the issues that seem to be continuing. This report was signed June 20 and delivered June 22 though it should have been received on the 15th.

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**CONFIDENTIAL Intra-Agency Advisory Communication**
**Exempt from public disclosure**
Please make sure this information is on a separate page.

Please provide any recommendations and observations about the violations, strengths and weaknesses of the case, case strategy, mental state, or other information that would be useful in drafting the case.

For example, is there any evidence that the Respondent was dishonest or deceitful in committing the violation? (e.g. they tried to cover up the violation, reported false information, lied to DEQ staff, discarded records they are required to keep, etc.)

**Be aware that these statements may become public record after the case is closed.**

We presently have an outstanding penalty assessment for Mr. Magar. Leah Koss has those records.

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## WHEELER Sarah

**From:** SMITH Bryan
**Sent:** Thursday, July 23, 2009 9:42 AM
**To:** WHEELER Sarah
**Cc:** SMITH Bryan
**Subject:** EB for Magar Magar

Hi Sarah. Can you please run this EB for Magar Edward Magar:

Individual.
For-profit.
July 22, 2009, estimates.

Please itemize each number separately.

1) Between June 1, 2008, and June 1, 2009, he should have spent $500 overall to take pH samples at a minimum frequency of twice per week. (Can you run this as an avoided annually recurring cost?)

2) During the months of May, June and September 2008, as well as January, May and June 2009, he should have spent $25 per month to take bacteria samples. (Again, can you run this as an avoided annually recurring cost?)

3) On or before April 25, 2008, he should have spent $2,800 to buy a new flow meter. Avoided.

Q Time ~~37649~~ 37469

Thanks, Bryan.



EXHIBIT # A11p1

State of Oregon
Department of Environmental Quality **Memorandum**

**Date:** July 23, 2009
**To:** File
**From:** Sarah Wheeler, Environmental Law Specialist, Office of Compliance and Enforcement
**Subject:** BEN calculation for Magar Edward Magar

## I. General Purpose and Authority

The economic benefit portion of the civil penalty formula is simply the monetary benefit that an entity gained by not complying with the law. It is designed to "level the playing field" by taking away any economic advantage the entity gained and to deter potential violators from deciding it is cheaper to violate and pay the penalty than to pay the costs of compliance.

Oregon Revised Statute 468.130(2)(c,h) directs the Environmental Quality Commission to consider economic conditions of the entity in assessing a penalty as well as other factors that Commission makes relevant by rule. Accordingly, the Commission adopted economic benefit as part of its penalty calculation in Oregon Administrative Rules (OAR) 340-012-0045(1)(e) and -0155. Pursuant to OAR 340-012-0150, the Department generally uses the U.S. Environmental Protection Agency's BEN computer model to determine economic benefit and will use it upon request of a respondent.

## II. Theory of Economic Benefit

Compliance with environmental regulations may require an entity to expend financial resources. These expenditures support the public goal of better environmental quality, but often do not yield direct financial return to the entity. Economic benefit is the amount by which an entity is financially better off from not having complied with environmental requirements in a timely manner. If an entity avoids an expenditure, it increases its profit margin or has additional funds available for other profit-making activities. Sometimes the benefit may not be intuitive. For example, if an entity would have had to obtain a loan to make the expenditure, it might seem that the entity did not enjoy the benefit of the extra money – but avoiding the need to repay a loan is a direct financial advantage. If an entity did not make the expenditure on time, but later did make the expenditure, it might seem that the entity did not retain an economic advantage – but temporary access to the monies it should have spent is equivalent to an interest-free loan during the period of noncompliance which is also a direct financial advantage. For this reason BEN generally ignores the potential or likely source of the monies not used.

Economic benefit is "no fault" in nature. An entity need not have deliberately chosen to delay compliance, or even have been aware of its noncompliance, for it to accrue an economic benefit of noncompliance. An economic benefit may accrue before the entity is in actual violation

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because planning costs, permitting fees, and similar costs often must be paid long before beginning the regulated activity that is in violation.

An appropriate economic benefit calculation represents the amount of money that would make the entity indifferent between compliance and noncompliance. If DEQ does not recover, through a civil penalty, at least this economic benefit, then the entity will retain a gain. Because of the precedent of this retained gain, other regulated companies may see an economic advantage in similar noncompliance. The U.S. Supreme Court has noted that deterrence is a primary purpose of a penalty[1] and that a penalty which fails to include sufficient economic benefit to remove the advantage of noncompliance will fail to deter future violations.[2]

## III. Basis of the Costs Considered

Determining economic benefit always requires evaluating circumstances to determine what necessary or reasonable costs would have been required to obtain compliance or to determine what benefits were received from noncompliance. Often, an entity has more than one option to reach compliance and the Department evaluates the circumstances to determine what probable or reasonable steps the entity should have taken. The Department then estimates the reasonable costs and benefits pursuant to OAR 340-012-0150(2).

Between June 1, 2008, and June 1, 2009, Mr. Magar should have spent $500 to take pH samples at a minimum frequency of twice per week. By avoiding this cost of compliance, Mr. Magar benefited by an estimated **$312**.

During the months of May, June, and September 2008,and January, May, and June 2009, Mr. Magar should have spent $25 per month to take bacteria samples. By avoiding this cost of compliance, Mr. Magar benefited by an estimated **$94**.

On or before April 25, 2008, Mr. Magar should have spent $2,800 to buy a new flow meter. By avoiding this cost of compliance, Mr. Magar benefited by an estimated **$2,101**.

## IV. Applicability of Standard Rates Presumed by Rule

The BEN model relies on income-tax rates, inflation rates, and discount rates. The model allows the operator to input particular rates, but in the absence of operator input, the BEN model uses

[1] *See Tull v. United States*, 481 U.S. 412 (1987) (finding that the legislature intended penalties for environmental violations under the Clean Water Act to create deterrence). *Note also* OAR 340-012-0026(1)(c) which states that a goal of enforcement under the Oregon Environmental Quality Commission rules is deterrence.
[2] *See Friends of the Earth v. Laidlaw Environmental Services, Inc.*, 528 U.S. 167, fn. 2 (2000) (discussing the insufficiency of the economic benefit portion of a penalty for hazardous waste violations).

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standard values based on the years of the violation, the state where the violation occurred and the entity's legal and profit status (*e.g.*, C-corporation, other for profit, non-profit, municipality, or federal facility). It calculates inflation rates from the Plant Cost Index (PCI) published by the magazine *Chemical Engineering* and from the Consumer Price Index. Alternative optional inflation indices include:

| **Abbreviation and Full Name** | | **Description** | **Typical Applications** |
|---|---|---|---|
| 2.5 % | Constant rate of 2.5% | Assumes annual inflation rate is constant at 2.5 percent. | |
| CCI | Construction Cost Index | Construction costs (based on 1.128 tons Portland cement, 1,088 bd. ft. 2x4 lumber) and 200 common labor. | General construction costs, especially where labor costs are a high proportion of total costs. |
| ECI | Employment Cost Index | Total civilian compensation for all workers, seasonally adjusted. | One-time nondepreciable expenditures or annual costs that comprise mainly labor. |
| GDP | Gross Domestic Product Implicit Price Deflator | Measured by U.S. Commerce Department through the Bureau of Economic Analysis. Equals GDP in current dollars divided by GDP in constant dollars. | general expenses that affect multiple sectors of the economy (e.g., labor and construction). |
| PCI | Plant Cost Index | Plant cost index published by *Chemical Engineering*. | Standard default and for plant equipment costs. |
| PPI | Producer Price Index for Finished Goods | Reflects the price level for processing finished goods. | Processing finished goods, general expenses that affect multiple sectors of the economy (*e.g.*, labor and construction). |

Pursuant to OAR 340-012-0150(1), the "model's standard values for income tax rates, inflation rate and discount rate shall be presumed to apply to all Respondents unless a specific Respondent can demonstrate that the standard value does not reflect the Respondent's actual circumstance."

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## V. Description of the Attached Run

BEN calculates the economic benefits gained from delaying and avoiding required environmental expenditures. Such expenditures can include: (1) capital investments (*e.g.*, larger pollution control or monitoring equipment, costs of design and installation), (2) one-time non-depreciable expenditures (*e.g.*, permit fees, clean-up costs, setting up a reporting system, acquiring land needed for a capital improvement), (3) annually recurring costs (*e.g.*, routine operating and maintenance costs, utilities). Each of these expenditures can be either delayed or avoided. BEN's baseline assumption is that capital investments and one-time non-depreciable expenditures are merely delayed over the period of noncompliance, whereas annual costs are avoided entirely over this period.

The calculation incorporates the economic concept of the "time value of money." Stated simply, a dollar today is worth more than a dollar tomorrow, because you can invest today's dollar to start earning a return immediately. Thus, the further in the future the dollar is, the less it is worth in "present-value" terms. Similarly, the greater the time value of money (*i.e.*, the greater the "discount" or "compound" rate used to derive the present value), the lower the present value of future costs. To calculate an entity's economic benefit, BEN uses standard financial cash flow and net-present-value analysis techniques based on modern and generally accepted financial principles, which were subjected to extensive national notice-and-comment processes.[3]

Inputs to the model include costs specific to the situation of the entity which include the values described in Section III as well as the presumed standard indexes and rates described in Section IV. The values used are listed in the lower three-quarters of the attached BEN Run Table. Using these values, BEN makes a series of calculations the results of which are listed in the top of the attached BEN Run Table by the letter indicated below.

---

[3] *See* Calculation of the Economic Benefit of Noncompliance in EPA's Civil Penalty Enforcement Cases, Request for comment, 61 Fed. Reg. 53025-53030 (Oct. 9, 1996); Calculation of the Economic Benefit of Noncompliance in EPA's Civil Penalty Enforcement Cases, Extension of time for request for comment, 61 Fed. Reg. 65391 (Dec. 12, 1996); Calculation of the Economic Benefit of Noncompliance in EPA's Civil Penalty Enforcement Cases, Advance notice of proposed action, response to comment, and request for additional comment, 64 Fed. Reg. 32947-32972 (June 18, 1999); Calculation of the Economic Benefit of Noncompliance in EPA's Civil Penalty Enforcement Cases, Advance notice of proposed action, response to comment, and request for additional comment, 64 Fed. Reg. 39135-39136 (July 21, 1999); Calculation of the Economic Benefit of Noncompliance in EPA's Civil Penalty Enforcement Cases, Notice of final action and response to comment, 70 Fed. Reg. 50326-50345 (August 26, 2005) available at http://www.epa.gov/EPA-GENERAL/2005/August/Day-26/g17033.htm.

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A) **On-Time Capital & One-Time Costs**. This is what compliance would have cost had the entity made its purchases of capital on time or paid its one-time costs on time. BEN calculates this value from the estimated costs as of the date the costs are estimated by discounting the annual cash flows at an average of the cost of capital through-out this time period. The value of the costs is adjusted to account for tax deductibility and depreciation. "A" is the value of noncompliance as of the date of initial noncompliance. (*See* **Fig. 1**) If "A" is zero, there are no capital or one-time costs in the calculation.

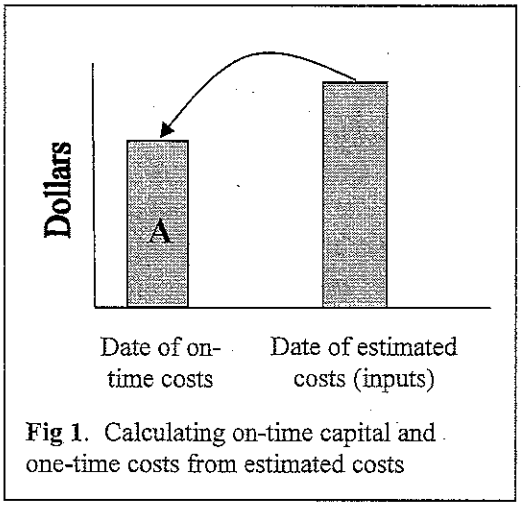



**Fig 1**. Calculating on-time capital and one-time costs from estimated costs

B) **Delay Capital & One Time Costs**. If the entity eventually did pay or will pay the costs of compliance in the future, BEN calculates what the entity would have needed to set aside on the date of noncompliance so as to have sufficient funds as of the date of delayed compliance. This number is used to mitigate the economic benefit by considering the known amount the entity will pay. BEN derives this number by: (1) determining the predicted delayed costs by adjusting for inflation and to account for tax deductibility in the year in which the funds were or will be spent and also for future depreciation tax shields, and (2) discounting the annual cash flows at an average of the cost of capital throughout this time period to account for interest. (*See* **Fig. 2**) "B" will be zero if all costs were avoided.

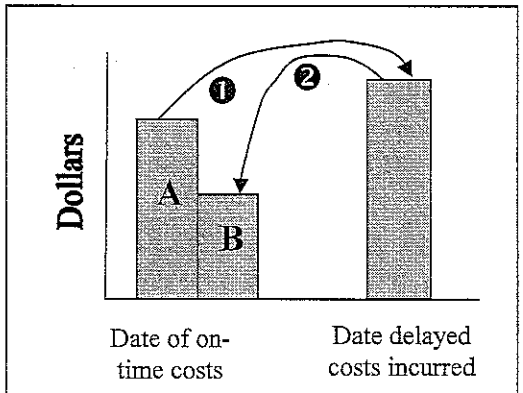



**Fig. 2**. Calculating the delayed capital and one-time costs from estimated costs

C) **Avoided Annually Recurring Costs**. This is the value of the avoided annual recurring costs as of the date of initial noncompliance. BEN derives this value by discounting the annual cash flows at an average of the cost of capital throughout this time period and accounting for tax deductibility.

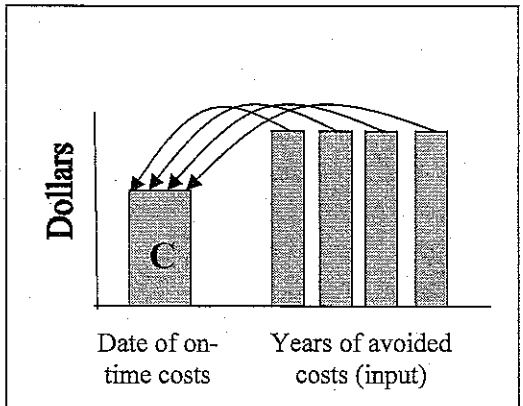



**Fig. 3**. Calculating annual recurring costs

A 11p6

(*See* **Fig. 3**) "C" will be zero if there are no recurring annual costs.

D) **Initial Economic Benefit (A – B+C)**. The values for A, B, and C are all values as of the date of noncompliance. The economic benefit received as of the date of noncompliance is determined by taking the on-time capital and one-time costs that should have been paid (A), subtracting the delayed capital and one-time costs which had been or will be paid (B), and adding the avoided annually recurring costs (C). The result is the economic benefit received as of the date of noncompliance. (*See* **Fig. 4**) The economic benefit is often much lower than the originally-estimated costs. This is because inflation tends to make more recent costs higher than historical costs and because the entity could have taken a tax deduction for the year in which the expenditure was made.

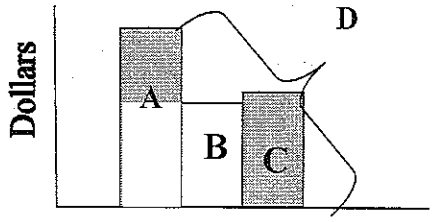



**Fig. 4**. Calculating the initial economic benefit. The total initial economic benefit is shown in grey.

E) **Final Economic Benefit at Penalty Payment Date**. BEN compounds the initial economic benefit forward to the penalty payment date at the same cost of capital to determine the final economic benefit of noncompliance. (*See* **Fig. 5**) Occasionally an entity looses money because the economic benefit is a negative number. In that case the economic benefit used in the penalty calculation is zero.

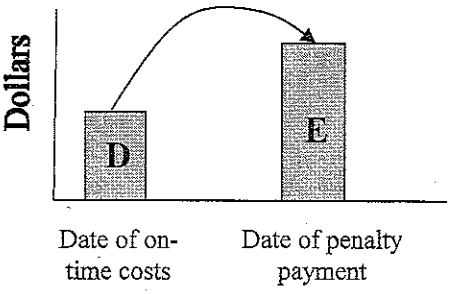



**Fig 5**. Final economic benefit

## IV. Final Economic Benefit Is Likely an Underestimate

The economic benefit calculated above may underestimate the total economic benefit that the respondent received to date because it is based on conservative assumptions and does not include unknown or incidental costs. It also does not address uncertain indirect financial benefits, including:

- *Advantage-of-risk* – the value of (1) the risk of never getting caught and (2) keeping future options open by delaying a decision to institute a process or purchase capital;
- *Competitive advantage* – (1) beginning production earlier than would be possible if in compliance; (2) attracting clients by avoiding compliance costs, having a higher profit margin and therefore being able to offer goods or services at a lower cost than competitors; (3)

A 11 p7

keeping those clients attracted by lower prices because of brand loyalty or high switching costs; or (4) using the time or money saved to increase production; and

- *Illegal profits* – selling illegal products or services.

EPA has undertaken a review of these indirect factors and may craft an economic method for calculating them.[4] Until that evaluation is complete, I consider these other economic benefits to be "de minimis" in light of the difficulties in calculation. Pursuant to OAR 340-012-0150(3), the Department need not calculate an economic benefit if that benefit is de minimis.

Another reason that the estimate above may be an underestimate is that the calculation is based on the time value of money, and is sensitive to when delayed costs are actually incurred and when penalties are actually paid. When the Department calculates an economic benefit for incorporation in a Notice of Civil Penalty Assessment, it often assumes the entity will comply with the schedule in the Order and that the penalty will be paid without the delays required for an appeal. This results in a lower economic benefit than would be obtained if the actual dates were initially known and used. For this reason the Department may recalculate the economic benefit for the hearing or in settlement so as to reach a more accurate final economic benefit.

---

[4] *See* EPA Office of Enforcement and Compliance Assurance, "*Identifying and Calculating Economic Benefit That Goes Beyond Avoided and/or Delayed Costs*," (May 25, 2003) available at http://www.epa.gov/compliance/resources/publications/civil/programs/econben-costs.pdf; EPA Illegal Competitive Advantage Economic Benefit Advisory Panel of the Science Advisory Board, Advisory no. EPA-SAB-ADV-05-003, (Sept. 7, 2005) available at http://www.epa.gov/sab/pdf/ica_eb_sab-adv-05-003.pdf; EPA Office of Enforcement and Compliance Assurance, Response to advisory, (July 19, 2006) available at http://www.epa.gov/sab/pdf/sab-adv-05-003_response_07-19-06.pdf.

A 11 p8

| Run Name = | pH samples |
|---|---|
| Present Values as of Noncompliance Date (NCD), | 01-Jun-2008 |
| A) On-Time Capital & One-Time Costs | $0 |
| B) Delay Capital & One-Time Costs | $0 |
| C) Avoided Annually Recurring Costs | $281 |
| D) Initial Economic Benefit (A-B+C) | $281 |
| **E) Final Econ. Ben. at Penalty Payment Date,** | |
| ***23-Sep-2009*** | **$312** |
| | |
| *For Profit (not C-Corp.), w/ OR tax rates* | |
| Discount/Compound Rate | 8.3% |
| Discount/Compound Rate Calculated By: | BEN |
| Compliance Date | 01-Jun-2009 |
| Capital Investment: | |
| Cost Estimate | $0 |
| Cost Estimate Date | N/A |
| Cost Index for Inflation | N/A |
| Consider Future Replacement (Useful Life) | N/A (N/A) |
| One-Time, Nondepreciable Expenditure: | |
| Cost Estimate | $0 |
| Cost Estimate Date | N/A |
| Cost Index for Inflation | N/A |
| Tax Deductible? | N/A |
| Annually Recurring Costs: | |
| Cost Estimate | $500 |
| Cost Estimate Date | 22-Jul-2009 |
| Cost Index for Inflation | PCI |
| User-Customized Specific Cost Estimates: | N/A |
| On-Time Capital Investment | |
| Delay Capital Investment | |
| On-Time Nondepreciable Expenditure | |
| Delay Nondepreciable Expenditure | |

A 11 p9

| Run Name = | 5-08 bacteria |
|---|---|
| Present Values as of Noncompliance Date (NCD), | 31-May-2008 |
| A) On-Time Capital & One-Time Costs | $14 |
| B) Delay Capital & One-Time Costs | $0 |
| C) Avoided Annually Recurring Costs | $0 |
| D) Initial Economic Benefit (A-B+C) | $14 |
| **E) Final Econ. Ben. at Penalty Payment Date,** | |
| ***23-Sep-2009*** | **$16** |
| | |
| *For Profit (not C-Corp.), w/ OR tax rates* | |
| Discount/Compound Rate | 8.3% |
| Discount/Compound Rate Calculated By: | BEN |
| Compliance Date | 23-Sep-2009 |
| Capital Investment: | |
| Cost Estimate | $0 |
| Cost Estimate Date | N/A |
| Cost Index for Inflation | N/A |
| Consider Future Replacement (Useful Life) | N/A (N/A) |
| One-Time, Nondepreciable Expenditure: | avoided |
| Cost Estimate | $25 |
| Cost Estimate Date | 22-Jul-2009 |
| Cost Index for Inflation | PCI |
| Tax Deductible? | y |
| Annually Recurring Costs: | |
| Cost Estimate | $0 |
| Cost Estimate Date | N/A |
| Cost Index for Inflation | N/A |
| User-Customized Specific Cost Estimates: | N/A |
| On-Time Capital Investment | |
| Delay Capital Investment | |
| On-Time Nondepreciable Expenditure | |
| Delay Nondepreciable Expenditure | |

A II, p.10

| Run Name = | 6-08 bacteria |
|---|---|
| Present Values as of Noncompliance Date (NCD), | 30-Jun-2008 |
| A) On-Time Capital & One-Time Costs | $14 |
| B) Delay Capital & One-Time Costs | $0 |
| C) Avoided Annually Recurring Costs | $0 |
| D) Initial Economic Benefit (A-B+C) | $14 |
| **E) Final Econ. Ben. at Penalty Payment Date,** | |
| ***23-Sep-2009*** | **$16** |
| | |
| *For Profit (not C-Corp.), w/ OR tax rates* | |
| Discount/Compound Rate | 8.3% |
| Discount/Compound Rate Calculated By: | BEN |
| Compliance Date | 23-Sep-2009 |
| Capital Investment: | |
| Cost Estimate | $0 |
| Cost Estimate Date | N/A |
| Cost Index for Inflation | N/A |
| Consider Future Replacement (Useful Life) | N/A (N/A) |
| One-Time, Nondepreciable Expenditure: | avoided |
| Cost Estimate | $25 |
| Cost Estimate Date | 22-Jul-2009 |
| Cost Index for Inflation | PCI |
| Tax Deductible? | y |
| Annually Recurring Costs: | |
| Cost Estimate | $0 |
| Cost Estimate Date | N/A |
| Cost Index for Inflation | N/A |
| User-Customized Specific Cost Estimates: | N/A |
| On-Time Capital Investment | |
| Delay Capital Investment | |
| On-Time Nondepreciable Expenditure | |
| Delay Nondepreciable Expenditure | |

All pll

| Run Name = | 9-08 bacteria |
|---|---|
| Present Values as of Noncompliance Date (NCD), | 30-Sep-2008 |
| A) On-Time Capital & One-Time Costs | $15 |
| B) Delay Capital & One-Time Costs | $0 |
| C) Avoided Annually Recurring Costs | $0 |
| D) Initial Economic Benefit (A-B+C) | $15 |
| **E) Final Econ. Ben. at Penalty Payment Date,** | |
| ***23-Sep-2009*** | **$16** |
| | |
| *For Profit (not C-Corp.), w/ OR tax rates* | |
| Discount/Compound Rate | 8.3% |
| Discount/Compound Rate Calculated By: | BEN |
| Compliance Date | 23-Sep-2009 |
| Capital Investment: | |
| Cost Estimate | $0 |
| Cost Estimate Date | N/A |
| Cost Index for Inflation | N/A |
| Consider Future Replacement (Useful Life) | N/A (N/A) |
| One-Time, Nondepreciable Expenditure: | avoided |
| Cost Estimate | $25 |
| Cost Estimate Date | 22-Jul-2009 |
| Cost Index for Inflation | PCI |
| Tax Deductible? | y |
| Annually Recurring Costs: | |
| Cost Estimate | $0 |
| Cost Estimate Date | N/A |
| Cost Index for Inflation | N/A |
| User-Customized Specific Cost Estimates: | N/A |
| On-Time Capital Investment | |
| Delay Capital Investment | |
| On-Time Nondepreciable Expenditure | |
| Delay Nondepreciable Expenditure | |

All p12

| Run Name = | 1-09 bacteria |
|---|---|
| Present Values as of Noncompliance Date (NCD), | 31-Jan-2009 |
| A) On-Time Capital & One-Time Costs | $15 |
| B) Delay Capital & One-Time Costs | $0 |
| C) Avoided Annually Recurring Costs | $0 |
| D) Initial Economic Benefit (A-B+C) | $15 |
| **E) Final Econ. Ben. at Penalty Payment Date,** | |
| ***23-Sep-2009*** | **$16** |
| | |
| *For Profit (not C-Corp.), w/ OR tax rates* | |
| Discount/Compound Rate | 8.3% |
| Discount/Compound Rate Calculated By: | BEN |
| Compliance Date | 23-Sep-2009 |
| Capital Investment: | |
| Cost Estimate | $0 |
| Cost Estimate Date | N/A |
| Cost Index for Inflation | N/A |
| Consider Future Replacement (Useful Life) | N/A (N/A) |
| One-Time, Nondepreciable Expenditure: | avoided |
| Cost Estimate | $25 |
| Cost Estimate Date | 22-Jul-2009 |
| Cost Index for Inflation | PCI |
| Tax Deductible? | y |
| Annually Recurring Costs: | |
| Cost Estimate | $0 |
| Cost Estimate Date | N/A |
| Cost Index for Inflation | N/A |
| User-Customized Specific Cost Estimates: | N/A |
| On-Time Capital Investment | |
| Delay Capital Investment | |
| On-Time Nondepreciable Expenditure | |
| Delay Nondepreciable Expenditure | |

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| Run Name = | 5-09 bacteria |
|---|---|
| Present Values as of Noncompliance Date (NCD), | 31-May-2009 |
| A) On-Time Capital & One-Time Costs | $15 |
| B) Delay Capital & One-Time Costs | $0 |
| C) Avoided Annually Recurring Costs | $0 |
| D) Initial Economic Benefit (A-B+C) | $15 |
| **E) Final Econ. Ben. at Penalty Payment Date,** | |
| ***23-Sep-2009*** | **$15** |
| | |
| *For Profit (not C-Corp.), w/ OR tax rates* | |
| Discount/Compound Rate | 8.3% |
| Discount/Compound Rate Calculated By: | BEN |
| Compliance Date | 23-Sep-2009 |
| Capital Investment: | |
| Cost Estimate | $0 |
| Cost Estimate Date | N/A |
| Cost Index for Inflation | N/A |
| Consider Future Replacement (Useful Life) | N/A (N/A) |
| One-Time, Nondepreciable Expenditure: | avoided |
| Cost Estimate | $25 |
| Cost Estimate Date | 22-Jul-2009 |
| Cost Index for Inflation | PCI |
| Tax Deductible? | y |
| Annually Recurring Costs: | |
| Cost Estimate | $0 |
| Cost Estimate Date | N/A |
| Cost Index for Inflation | N/A |
| User-Customized Specific Cost Estimates: | N/A |
| On-Time Capital Investment | |
| Delay Capital Investment | |
| On-Time Nondepreciable Expenditure | |
| Delay Nondepreciable Expenditure | |

All pm

| Run Name = | 6-09 bacteria |
|---|---|
| Present Values as of Noncompliance Date (NCD), | 30-Jun-2009 |
| A) On-Time Capital & One-Time Costs | $15 |
| B) Delay Capital & One-Time Costs | $0 |
| C) Avoided Annually Recurring Costs | $0 |
| D) Initial Economic Benefit (A-B+C) | $15 |
| **E) Final Econ. Ben. at Penalty Payment Date,** | |
| ***23-Sep-2009*** | **$15** |
| | |
| *For Profit (not C-Corp.), w/ OR tax rates* | |
| Discount/Compound Rate | 8.3% |
| Discount/Compound Rate Calculated By: | BEN |
| Compliance Date | 23-Sep-2009 |
| Capital Investment: | |
| Cost Estimate | $0 |
| Cost Estimate Date | N/A |
| Cost Index for Inflation | N/A |
| Consider Future Replacement (Useful Life) | N/A (N/A) |
| One-Time, Nondepreciable Expenditure: | avoided |
| Cost Estimate | $25 |
| Cost Estimate Date | 22-Jul-2009 |
| Cost Index for Inflation | PCI |
| Tax Deductible? | y |
| Annually Recurring Costs: | |
| Cost Estimate | $0 |
| Cost Estimate Date | N/A |
| Cost Index for Inflation | N/A |
| User-Customized Specific Cost Estimates: | N/A |
| On-Time Capital Investment | |
| Delay Capital Investment | |
| On-Time Nondepreciable Expenditure | |
| Delay Nondepreciable Expenditure | |

Allp's

| Run Name = | flow meter |
|---|---|
| Present Values as of Noncompliance Date (NCD), | 25-Apr-2008 |
| A) On-Time Capital & One-Time Costs | $1,877 |
| B) Delay Capital & One-Time Costs | $0 |
| C) Avoided Annually Recurring Costs | $0 |
| D) Initial Economic Benefit (A-B+C) | $1,877 |
| **E) Final Econ. Ben. at Penalty Payment Date,** | |
| ***23-Sep-2009*** | **$2,101** |
| | |
| *For Profit (not C-Corp.), w/ OR tax rates* | |
| Discount/Compound Rate | 8.3% |
| Discount/Compound Rate Calculated By: | BEN |
| Compliance Date | 23-Sep-2009 |
| Capital Investment: | avoided |
| Cost Estimate | $2,800 |
| Cost Estimate Date | 22-Jul-2009 |
| Cost Index for Inflation | PCI |
| Consider Future Replacement (Useful Life) | y (15) |
| One-Time, Nondepreciable Expenditure: | |
| Cost Estimate | $0 |
| Cost Estimate Date | N/A |
| Cost Index for Inflation | N/A |
| Tax Deductible? | N/A |
| Annually Recurring Costs: | |
| Cost Estimate | $0 |
| Cost Estimate Date | N/A |
| Cost Index for Inflation | N/A |
| User-Customized Specific Cost Estimates: | N/A |
| On-Time Capital Investment | |
| Delay Capital Investment | |
| On-Time Nondepreciable Expenditure | |
| Delay Nondepreciable Expenditure | |

All pg

A 12

BEFORE THE OREGON ENVIRONMENTAL
QUALITY COMMISSION

| | | |
|---|---|---|
| In the Matter of: | ) | |
| Magar Edward Magar, | ) | AFFIDAVIT |
| Case No. WQ/D-NWR-08-019 | ) | |
| | ) | |
| STATE OF OREGON | ) | |

I, Amy Smothers, being duly sworn, depose and say that the following is true to the best of my knowledge:

1. That, I, Amy Smothers, am employed by the Oregon Department of Environmental Quality as Office Specialist with the Office of Compliance and Enforcement.

2. That in the course of that employment I regularly enter and retrieve information from the Department's electronic database and hard copy files regarding the issuance and status of formal enforcement actions against respondents.

3. That based on the information contained in the Department's electronic database, I assert that on or about July 11, 2001, the Department issued to Magar Edward Magar a formal enforcement action in case no. WQ/D-NWR-01-129. The action assessed a civil penalty for six Class I violations. I further assert that the civil penalty was paid in full on or about April 10, 2002.

4. That based on information contained in the Department's electronic database and hard copy files, I assert that on or about February 7, 2006, the Department issued to Magar Edward Magar a formal enforcement action in case no. WQ/D-NWR-05-181. The action assessed a civil penalty for one Class I violation and one Class II violation. I further assert that the civil penalty was paid in full on or about August 18, 2006.

6. That in the regular course of my employment, I compile, copy and transmit the record under review for the appeal of formal enforcement actions.

7. That the attached documents marked as Exhibits A1, A2, A3 and A4 are true and exact copies of the originals thereto.

Date: 9-30-09

Amy Smothers
Department of Environmental Quality

OFFI
DEBOR
NOTARY P
COMMISS
MY COMMISSION



Ex. A12

# DEPARTMENT OF ENVIRONMENTAL QUALITY
## TRANSMITTAL ADVICE
## CIVIL PENALTY RECEIPTS

| CK # | TRAN AMNT | FOR THE ACCOUNT OF | CIVIL PENALTY # | |
|---|---|---|---|---|
| CHECK NAME | | REASON FOR PAYMENT | INV # | RCPT # |
| 150-2 | 4,561.00 | MAGAR E. MAGAR | WQ/D-NWR-01-129 | |
| KENNETH S. EILER, BANKRUPTCY TRUSTEE | | FINAL PMT DUE TO BANKRUPTCY SETTLEMENT | | |
| | 4,561.00 | TOTAL | | |

CIVIL PENALTIES
Page 1 of 1

DEPOSIT SLIP # 08896
$4,561.00

10-Apr-2002

A12 p.2

HARDY MYERS
Attorney General

PETER D. SHEPHERD
Deputy Attorney General

**DEPARTMENT OF JUSTICE**
CIVIL ENFORCEMENT DIVISION

April 2, 2002

Barrett MacDougall
Department of Environmental Quality
811 SW 6th Avenue
Portland, OR 97204

Re: Magar E. Magar
Case No. 340310 – XCB1197-01

Enclosed is check No. 150 in the amount of $5,000.00 received in this office per settlement of claim approved by the U.S. Bankruptcy Court Trustee Kenneth S. Eiler as agreed to in the settlement agreement.

If you have any questions, please call the number listed below.

Sincerely,

Faye M. Poschwatta

Faye M. Poschwatta
Legal Assistant

FMP
Enclosure
Cc: Lyle Christensen
Larry Schurr

CED94968

# KENNETH S. EILER, P.C

*Attorney at Law*

PMB 810
515 NW Saltzman Rd.
Portland, Oregon 97229

kenneth.eiler@psinet.com
Phone 503.292.6020
Fax 503.297.9402

MARCH 13, 2002

DANIEL ROSENHOUSE
1515 SW 5TH
ste #410
PORTLAND, OR 97201

RE: In Re: MAGAR E. MAGAR
Case No.: 301-33525-tmb11

Dear Dan,

Pursuant to the settlement agreement enclosed please find a check in the sum of $5,000. I can advise you that I will be meeting with Mr. Smits on site on March 14th. Hopefully I will get a sense of when Mr. Smits expects to complete his work. I will try to keep you informed of his progress. Thank you.

Very truly yours,

Kenneth S. Eiler
enc.

RECEIVED
APR - 2 2002
DEPARTMENT OF JUSTICE
PORTLAND LEGAL

A12P

BANKRUPTCY COURT
DISTRICT OF OREGON

FEB 19 2002

LODGED ____ REC'D ____
PAID ____ DOCKETED

Kenneth S. Eiler, P.C. OSB 79035
Kenneth S. Eiler
Attorney at Law
PMB 810
515 NW Saltzman Rd.
Portland, Or. 97229
Telephone: (503) 292-6020
Attorney for Trustee

KENNETH S. EILER, P.C.
Attorney at Law
P.O. Box 53
322 South Holladay
Seaside, Oregon 97138
(503) 738-3314 Fax (503) 738-8421

IN THE UNITED STATES BANKRUPTCY COURT

FOR THE DISTRICT OF OREGON

| | |
|---|---|
| In Re: | Case No: 301-33525-TMB11 |
| MAGAR E. MAGAR | ORDER APPROVING SETTLEMENT WITH OREGON DEQ |
| Debtor, | |

This matter having come before the court on February 1, 2002 on the Trustee's Notice of Intent to Settle and Compromise the proof of claim filed by the Oregon Department of Environmental Quality; the debtor having advised the court that he had withdrawn his objection to the proposed settlement, and no other objections having been filed; testimony taken and argument heard and good cause appearing; now therefore:

IT IS HEREBY ORDERED that the Trustee is authorized to settle the claim of the Oregon Department of Environmental Quality pursuant to the terms set forth in the Notice of Intent to Settle on file herein.

Trish M Brown
Hon Trish M. Brown

Presented by:
Kenneth S. Eiler
c: UST
Ken Eiler
Laura Walker
Magar E. Magar
Daniel Rosenhouse



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UNITED STATES BANKRUPTCY COURT
DISTRICT OF OREGON

In re )
) Case No. 301-33525-TMB11
MAGAR E. MAGAR )
) MOTION AND NOTICE OF INTENT
) TO SETTLE AND COMPROMISE,
) AND ORDER THEREON
Debtor(s))

The trustee, Kenneth S. Eiler (print or type name), moves to settle and compromise the following described dispute upon the following terms:

The Trustee proposes to settle the objection to the proof of claim filed by the Oregon DEQ in the sum of $51,239 upon the following terms:

1. Pay $5000 to the Oregon DEQ upon approval of this settlement.

2. The Trustee will set aside an additional $30,000 to be held by the Trustee and used as described below.

3. Using the $30,000 set aside, the trustee shall hire a "qualified engineering firm" (subject to court approval ) to evaluate the present condition of the wastewater collection and treatment system serving Riverwood Mobile Home Park. The engineering firm's evaluation shall provide cost estimates for repairing/replacing/upgrading any wastewater system components found in disrepair. The trustee shall submit to the Oregon DEQ a plan for the repair/replacement of the system based upon the engineering firm's report. A "qualified engineering firm" is be one independent of the debtor and using people knowledgeable of and experienced with both the physical/structural engineering evaluation (concrete, piping, pumps, valves, soils, etc.) and the operational/treatment nuances of a recirculating gravel filter wastewater treatment process.

4. From the remaining balance of the $30,000, the trustee shall undertake the improvements and repairs that are identified b the engineering firm as needing to be made. If any money is left after making all such improvements and repairs, the remaining money may be returned to the bankruptcy estate. Upon completion of the terms set out above the claim of the Oregon DEQ shall be considered fully satisfied.

5. The terms set out in this settlement are without prejudice to Oregon DEQ requiring additional work as a condition of renewal extension or maintenance of any governmental permits, or such work as is consistent with Oregon DEQ statutes and regulations.

NOTICE IS GIVEN that unless within 22 days of the above "FILED" date of this notice, an interested party BOTH: (1) files written objections thereto, setting forth the specific grounds for such objection, with the Clerk of Court , mailed to 1001 SW 5th Ave. #700, Portland OR 97204, AND (2) mails a copy to the trustee at PMB 810; 515 NW Saltzman Rd. Portland, Or. 97229 , the trustee will thereafter settle and compromise said dispute upon the above terms and the settlement will be deemed approved by the court without further order.

NOTICE IS GIVEN that a hearing will be held to consider any timely objection filed herein on Friday February 1, 2001 at the hour of 10:00 am in Courtroom #4 1001 SW 5th Ave. Ste 700 Portland, Or. 97204.

FILED DATE: 1-4-02

/s/ Kenneth S. Eiler
Trustee

On 1-4-02 copies of the above notice were mailed to the debtor(s), any debtor's attorney, U.S. Trustee, creditors and other interested parties.

/s/ Kenneth S. Eiler
Trustee

DATE | INVOICE #

**United States Bankruptcy Court** District of Oregon

**PROOF OF CLAIM**

CLERK, U.S. BANKRUPTCY COURT
'01 AUG 14 A11 :11
LOGGED ... ED
PAID ... DOCKETED

In re (Name of Debtor)
Magar E. Magar

Case Number
01-33525

NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" of payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.

Name of Creditor
*(The person or entity to whom the debtor owes money or property)*
State of Oregon Dept. Environmental Qual.

Name and Addresses Where Notices Should be Sent
c/o Barrett MacDougall
811 SW Sixth Ave.
Portland, Oregon 97204-1390

Telephone No. (503) 229-5355

☐ Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

☒ Check box if you have never received any notices from the bankruptcy court in this case.

☐ Check box if the address differs from the address on the envelope sent to you by the court.

THIS SPACE IS FOR COURT USE ONLY

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR:
Source # 75541

Check here if this claim: ☐ replaces ☐ amends a previously filed claim, dated: _____

1. BASIS FOR CLAIM:
- ☐ Goods sold
- ☐ Services performed
- ☐ Money loaned
- ☐ Personal injury/wrongful death
- ☐ Taxes
- ☒ Other (Describe briefly) Civil Penalty, NPDES permit fee
- ☐ Retiree benefits as defined in 11 U.S.C. § 1114(a)
- ☐ Wages, salaries, and compensations (Fill out below)
  Your social security number _____
  Unpaid compensations for services performed
  from _____ (date) to _____ (date)

2. DATE DEBT WAS INCURRED:
7.31.00; 3.30.01 through 4.4.01

3. IF COURT JUDGMENT, DATE OBTAINED:

4. CLASSIFICATION OF CLAIM. Under the Bankruptcy Code all claims are classified as one or more of the following: (1) Unsecured nonpriority, (2) Unsecured Priority, (3) Secured. It is possible for part of a claim to be in one category and part in another. CHECK THE APPROPRIATE BOX OR BOXES that best describe your claim and STATE THE AMOUNT OF THE CLAIM.

☐ SECURED CLAIM $ _____
Attach evidence of perfection of security interest
Brief Description of Collateral:
☐ Real Estate ☐ Motor Vehicle ☐ Other (Describe briefly)

Amount of arrearage and other charges included in secured claim above, if any $ _____

☒ UNSECURED NONPRIORITY CLAIM $ 51,239
A claim is unsecured if there is no collateral or lien on property of the debtor securing the claim or to the extent that the value of such property is less than the amount of the claim.

☐ UNSECURED PRIORITY CLAIM $ _____
Specify the priority of the claim.
- ☐ Wages, salaries, or commissions (up to $2000), earned not more than 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier)—11 U.S.C. § 507(a)(3)
- ☐ Contributions to an employee benefit plan—U.S.C. § 507(a)(4)
- ☐ Up to $900 of deposits toward purchase, lease, or rental of property or services for personal, family, or household use—11 U.S.C. § 507(a)(6)
- ☐ Taxes or penalties of governmental units—11 U.S.C. § 507(a)(7)
- ☐ Other—11 U.S.C. §§ 507(a)(2), (a)(5)—(Describe briefly)

5. TOTAL AMOUNT OF CLAIM AT TIME CASE FILED: $ 51,239 (Unsecured) $ _____ (Secured) $ _____ (Priority) $ 51,239 (Total)

☐ Check this box if claim includes prepetition charges in addition to the principal amount of the claim. Attach itemized statement of all additional charges.

6. CREDITS AND SETOFFS: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. In filing this claim, claimant has deducted all amounts that claimant owes to debtor.

7. SUPPORTING DOCUMENTS: *Attach copies of supporting documents*, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, or evidence of security interests. If the documents are not available, explain. If the documents are voluminous, attach a summary.

8. TIME-STAMPED COPY: To receive an acknowledgement of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

THIS SPACE IS FOR COURT USE ONLY

Date
13 AUG 2001

Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any)
Barrett MacDougall, Financial Analyst
bmacdougall

*Penalty for presenting fraudulent claim:* Fine of up to $500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

45

A12

Attachment V
[illegible] meeting
Page 8 of 11 pages

State of Oregon
Department of Environmental Quality

# Invoice

Partial

COPY

Water Quality Annual Compliance Determination Fee
For Fiscal Year 2001: July 1, 2000 through June 30, 2001

TO: Magar E. Magar
RIVERWOOD MOBILE HOME PARK
1616 NW Northrup Street
Portland, OR 97209

Invoice Number: WQ01DOM-0282
Invoice Date: 05-25-00
**Invoice Due Date: 07-31-00**

FOR: Source #75541
RIVERWOOD MOBILE HOME PARK
HWY 30, 2 MI S OF RAINIER
RAINIER

Region: NWR
County: COLUMBIA

Permit Number 101247
Permit Type NPDES

Basis for Fee Amount: Sewage disposal – less than 1 MGD

Ownership: PRIVATE

Total Fee: $963.00
124.00
839.00.

If this source has not begun operating, is no longer operating, or if the permit is no longer needed, contact us *in writing by July 31st,* with the signature of your *legally authorized representative.*
Valerie A. Ross: DEQ Water Quality, 811 SW Sixth Avenue, Portland, OR 97204-1390
Phone: 503-229-5437; Fax: 503-229-5408; TTY: 503-229-6993; E-mail: ross.valerie@deq.state.or.us

*Cut here and return this portion with your payment.*

DEQ COPY
*Remit and make checks payable to:*

Department of Environmental Quality
Attention: Business Office
811 SW Sixth Avenue
Portland OR 97204-1390

RIVERWOOD MOBILE HOME PARK
Invoice Number: WQ01DOM-0282
**Amount Due $963.00**

Amount Enclosed: 24.- / 400.- CK# 2040-2

MAR 14 2001

covers - WQ99DOM-0084

☐ *Check here if your address or phone number has changed and write your new information on the back of this portion.*

☐ *Check here if facility has been sold or the name has changed. Change forms may be found on our Web site http://waterquality.deq.state.or.us/wq/wqpermit/wqpermit.htm or you may contact your local DEQ office.*

WQ01DOM-0282

#100.- CK# 2204 APR 06 2001

A12p.8

EXHIBIT 1 to WQ/D-NWR-01-129

FINDINGS AND DETERMINATION OF RESPONDENT'S CIVIL PENALTY PURSUANT TO OREGON ADMINISTRATIVE RULE (OAR) 340-012-0045

VIOLATIONS: On each of six days, Respondent discharged inadequately treated and non-disinfected waste water into waters of the state and/or onto the surface of the ground where it was likely to escape into waters of the state.

CLASSIFICATION: The violation is a Class I violation pursuant to OAR 340-012-0055(1)(b), (d) and/or (k).

MAGNITUDE: In consideration of OAR 340-012-0090(2)(a)(A)(iv), the magnitude of each violation is major. The fecal coliform levels in the non-disinfected wastewater likely exceeded 1200 organisms per 100ml. Respondent's Permit limit is 200 organisms per 100ml. The violation posed a significant threat to public health.

CIVIL PENALTY FORMULA: The formula for determining the amount of penalty of each violation is:
BP + [(.1 x BP) (P+H+O+R+C)] + EB.

"BP" is the base penalty which is $6,000 for a Class I major magnitude violation in the matrix listed in OAR 340-012-0042(1)(b)(B).

"P" is Respondent's prior significant action(s) and receives a value of 0 in that Respondent has had no prior significant actions as defined in OAR 340-012-0030(14). Respondent has had several previous violations as were cited in numerous Notices of Permit Violations on file with the Environmental Quality Commission.

"H" is the past history of Respondent in taking all feasible steps or procedures necessary to correct any violation cited in any prior significant action(s) and receives a value of 0.

"O" is whether the violation was repeated or continuous and receives a value of 0 in that each day of violation is treated as a separate incident.

"R" is whether the violation resulted from an unavoidable accident, or a negligent, intentional or flagrant act of the Respondent, and receives a value of +2 in that Respondent failed to take reasonable care to avoid a foreseeable risk of committing a violation. Respondent failed to make an adequate and timely investigation and response when the system began exhibiting operational problems.

"C" is Respondent's cooperativeness and efforts to correct the violation and receives a value of +2 in that Respondent failed to take reasonable and timely affirmative efforts to correct and/or to minimize the effects of the violations.

"EB" is the approximated dollar amount of the economic benefit that the Respondent gained through noncompliance and receives a value of 0 in that there is insufficient information on which to base a finding.

PENALTY CALCULATION:

Penalty = BP + [(.1 x BP) (P+H+O+R+C)] + EB
= $ 6,000 + [(.1 x $6,000) (0+0+0+2+2] + $0
= $ 6,000 + [($600)(+4)] + $0
= $ 6,000 + $2,400 + $0
= $ 8,400 is the amount of Respondent's civil penalty for each of six days of violation.

= $50,400 is the total amount of Respondent's civil penalty for the cited violations.

A12p.9

Oregon
John A. Kitzhaber, M.D., Governor

Department of Environmental Quality
811 SW Sixth Avenue
Portland, OR 97204-1390
(503) 229-5696
TTY (503) 229-6993

CERTIFIED MAIL NO. 7099 3220 0004 8966 6144
RETURN RECEIPT REQUESTED

July 11, 2001

Magar E. Magar
dba/Riverwood Mobile Home Park
1616 N.W. Northrup Street
Portland, OR 97209

RE: Notice of Assessment of Civil Penalty
No. WQ/D-NWR-01-129
Columbia County
NPDES Permit No. 101247

On March 30, 2001, DEQ received a complaint that untreated sewage was discharging into the Columbia River from your mobile home park located south of Rainier, Oregon. An inspector from the Portland Office of DEQ's Northwest Region investigated the complaint. The inspector observed sewage flowing out of a manhole and into a small unnamed tributary of the Columbia River.

The collection and treatment of sewage at your mobile home park is regulated under the terms and conditions of your National Pollutant Discharge Elimination System (NPDES) Permit No. 101247. That Permit prohibits all direct or indirect discharges of inadequately treated waste water. According to a complainant, there had been recurring problems with the sewage collection during the previous several weeks. Little substantive work was done to effect a long-term solution to those problems. Sewage on the surface of the ground and in water constitutes a major risk of harm to public health. In addition, a lid had been removed from a septic tank in order to collect some of the surfacing sewage. That open septic tank presented an additional health and safety hazard. In addition to the direct discharge of sewage onto the ground and into public waters, excess storm water runoff, mixed with surfacing sewage entered the septic tank, overloaded your permitted system, and caused a bypass of inadequately treated sewage from the outfall of your permitted treatment plant.

The illegal discharges continued until the afternoon of April 4, 2001 when a broken pipe was repaired. During the six day period of violation, you took no action to barricade or post the hazardous areas or clean up the sewage on the surface of the ground. On review, DEQ has concluded that your response to the incident was inadequate and untimely.

The enclosed Notice of Assessment of Civil Penalty (WQ/D-NWR-01-129) assesses an $8,400 civil penalty for each of six days of violation, for a total civil penalty of $50,400. The amounts of the daily and total penalties were determined using procedures set forth in OAR 340-012-0045. Exhibit 1 contains DEQ's findings and civil penalty calculations.

Unless you pay the total $50,400 civil penalty or appeal this enforcement action within 20 days of service of the enclosed Notice, a Default Order will be entered. Appeal procedures are outlined within Section V of the Notice.

If you wish to discuss this enforcement action or believe there are mitigating factors that DEQ might not have considered in assessing the civil penalty, you may request an informal discussion with DEQ by attaching a request to your appeal. A request to discuss the matter with DEQ will not waive your right to a contested case hearing if a timely appeal is filed.

Also enclosed is a copy of DEQ's internal management directive regarding civil penalty mitigation for Supplemental Environmental Projects (SEP's). If you are interested in having a portion of the civil penalty fund an SEP, you should review the enclosed SEP directive carefully.

If you have any questions about the enclosed enforcement action, please telephone Mr. Larry M. Schurr of DEQ's Office of Compliance and Enforcement in Portland at (503) 229-6932.

Sincerely,

Stephanie Hallock

Stephanie Hallock
Director

SH:lms
Enclosure(s)
cc: Lyle W Christensen, Northwest Region, Portland Office, DEQ
Water Quality Division, DEQ
Oregon Department of Justice
U.S. Environmental Protection Agency
Environmental Quality Commission
Columbia County District Attorney

BEFORE THE ENVIRONMENTAL QUALITY COMMISSION

OF THE STATE OF OREGON

| | |
|---|---|
| IN THE MATTER OF:<br>MAGAR E. MAGAR,<br>DBA/RIVERWOOD MOBILE HOME PARK,<br><br>Respondent. | NOTICE OF ASSESSMENT<br>OF CIVIL PENALTY<br>No. WQ/D-NWR-01-129<br>COLUMBIA COUNTY |

## I. AUTHORITY

This Notice of Assessment of Civil Penalty (Notice) is issued to Respondent, Magar E. Magar, doing business as Riverwood Mobile Home Park, by the Department of Environmental Quality (Department) pursuant to Oregon Revised Statutes (ORS) 468.126 through 468.140, ORS Chapter 183 and Oregon Administrative Rules (OAR) Chapter 340, Divisions 11 and 12.

## II. PERMIT

On November 28, 1994, the Department issued National Pollutant Discharge Elimination System (NPDES) Permit No. 101247 (Permit) to Respondent. The Permit authorized Respondent to construct, install, modify, or operate a wastewater collection, treatment, control, and disposal system and discharge to public waters adequately treated wastewaters in conformance with the requirements, limitations, and conditions set forth in Respondent's Permit. The Permit was scheduled to expire on November 30, 1999. However, Respondent made timely application for renewal. Therefore, pursuant to OAR 340-014-0030, the Permit is and was in effect at all material times.

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## III. VIOLATIONS

On each of six days from March 30, 2001, through April 4, 2001, Respondent violated ORS 468B.025(1)(a) and (2), and Respondent's Permit, in that Respondent discharged inadequately treated and non-disinfected waste water (a polluting substance) from the sewage collection system at Respondent's Permitted facility into an unnamed tributary of the Columbia River, waters of the state, and/or onto the surface of the ground where such waste was likely to escape or be carried into waters of the state. The violation posed a major risk of harm to public health. Each day of violation constitutes a Class I violation pursuant to OAR 340-012-0055(1)(b), (d) and/or (k).

## IV. ASSESSMENT OF CIVIL PENALTIES

The Director imposes an $8,400 civil penalty for each of the six days of violation cited in Section III, for a total civil penalty of $50,400. The findings and determination of the amounts of Respondent's daily and total civil penalties, made pursuant to OAR 340-012-0045, are attached and incorporated as Exhibit 1. The penalties are being imposed without advance notice pursuant to ORS 468.126(2) and OAR 340-012-0040(2)(c) as Respondent has received a Notice of Permit Violation within 36 months of the cited violations.

## V. OPPORTUNITY FOR CONTESTED CASE HEARING

This Notice of Assessment of Civil Penalty shall become final unless Respondent requests a hearing before the Environmental Quality Commission pursuant to ORS 466.190, ORS Chapter 183, and OAR Chapter 340, Division 11. The request must be made in writing and must be received by the Department's Rules Coordinator within twenty (20) days from the date of service of this Notice, and must be accompanied by a written "Answer" to the allegations contained in this Notice. In the written "Answer", Respondent shall admit or deny each allegation of fact contained in this Notice and Respondent shall affirmatively allege any and all affirmative claims or defenses to violations and assessment of any civil penalty that Respondent may have and the reasoning in support thereof.

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Except for good cause shown:

1. Factual matters not controverted shall be presumed admitted;
2. Failure to raise a claim or defense shall be presumed to be a waiver of such claim or defense;
3. New matters alleged in the "Answer" shall be presumed to be denied unless admitted in subsequent pleading or stipulation by the Department or Commission.

Send the request for hearing and "Answer" to: Deborah Nesbit, Department of Environmental Quality, 811 S.W. Sixth Avenue, Portland, Oregon 97204. Following receipt of a request for hearing and an "Answer," Respondent will be notified of the date, time and place of the hearing. Failure to file a timely request for hearing and "Answer" may result in a Default Order for the relief sought in this Notice. Failure to appear at a scheduled hearing or meet a required deadline may result in a dismissal of the request for hearing and also an entry of a Default Order. The Department's case file at the time the Notice was issued may serve as the record for purposes of entering a Default Order.

## VI. OPPORTUNITY FOR INFORMAL DISCUSSION

In addition to filing a request for a contested case hearing, Respondent may also request an informal discussion with the Department by attaching a written request to the hearing request and "Answer."

## VII. PAYMENT OF CIVIL PENALTY

The civil penalty is due and payable 10 days after the order imposing the penalty becomes final by operation of law or on appeal. Respondent's check or money order in the amount of $50,400 should be made payable to "Department of Environmental Quality" and sent to the Business Office, Department of Environmental Quality, 811 S.W. Sixth Avenue, Portland, Oregon 97204.

9-11-01
Date

Stephanie Hallock
Stephanie Hallock, Director

# EXHIBIT 1 to WQ/D-NWR-01-129

## FINDINGS AND DETERMINATION OF RESPONDENT'S CIVIL PENALTY PURSUANT TO OREGON ADMINISTRATIVE RULE (OAR) 340-012-0045

VIOLATIONS: On each of six days, Respondent discharged inadequately treated and non-disinfected waste water into waters of the state and/or onto the surface of the ground where it was likely to escape into waters of the state.

CLASSIFICATION: The violation is a Class I violation pursuant to OAR 340-012-0055(1)(b), (d) and/or (k).

MAGNITUDE: In consideration of OAR 340-012-0090(2)(a)(A)(iv), the magnitude of each violation is major. The fecal coliform levels in the non-disinfected wastewater likely exceeded 1200 organisms per 100ml. Respondent's Permit limit is 200 organisms per 100ml. The violation posed a significant threat to public health.

CIVIL PENALTY FORMULA: The formula for determining the amount of penalty of each violation is:
BP + [(.1 x BP) (P+H+O+R+C)] + EB.

"BP" is the base penalty which is $6,000 for a Class I major magnitude violation in the matrix listed in OAR 340-012-0042(1)(b)(B).

"P" is Respondent's prior significant action(s) and receives a value of 0 in that Respondent has had no prior significant actions as defined in OAR 340-012-0030(14). Respondent has had several previous violations as were cited in numerous Notices of Permit Violations on file with the Environmental Quality Commission.

"H" is the past history of Respondent in taking all feasible steps or procedures necessary to correct any violation cited in any prior significant action(s) and receives a value of 0.

"O" is whether the violation was repeated or continuous and receives a value of 0 in that each day of violation is treated as a separate incident.

"R" is whether the violation resulted from an unavoidable accident, or a negligent, intentional or flagrant act of the Respondent, and receives a value of +2 in that Respondent failed to take reasonable care to avoid a foreseeable risk of committing a violation. Respondent failed to make an adequate and timely investigation and response when the system began exhibiting operational problems.

"C" is Respondent's cooperativeness and efforts to correct the violation and receives a value of +2 in that Respondent failed to take reasonable and timely affirmative efforts to correct and/or to minimize the effects of the violations.

"EB" is the approximated dollar amount of the economic benefit that the Respondent gained through noncompliance and receives a value of 0 in that there is insufficient information on which to base a finding.

PENALTY CALCULATION:

Penalty = BP + [(.1 x BP) (P+H+O+R+C)] + EB
= $ 6,000 + [(.1 x $6,000) (0+0+0+2+2] + $0
= $ 6,000 + [($600)(+4)] + $0
= $ 6,000 + $2,400 + $0
= $ 8,400 is the amount of Respondent's civil penalty for each of six days of violation.

**= $50,400 is the total amount of Respondent's civil penalty for the cited violations.**

p.15

Oregon
Theodore R. Kulongoski, Governor

Department of Environmental Quality
811 SW Sixth Avenue
Portland, OR 97204-1390
503-229-5696
TTY: 503-229-6993

August 18, 2006

CERTIFIED MAIL NO. 7004 2510 0006 0441 6291

Magar Edward Magar
1015 N.W. 16th Avenue
Portland, OR 97209

Re: In the Matter of:
Magar Edward Magar
Case No. WQ/I-NWR-05-181
Columbia County

Dear Mr. Magar:

I have approved the Mutual Agreement and Order (MAO) mitigating the $4,036 civil penalty in the above case to $2,223.50 on behalf of the Environmental Quality Commission. Thank you for your check #1877 for $2,223.50. The mitigated penalty has been paid in full and the case is now closed.

Please note that the violations as described in the Notice of Violation, Department Order and Assessment of Civil Penalty will count as "prior significant actions" in the event that any future violations occur. I look forward to your cooperation with Oregon's environmental laws in the future. If you need any assistance with your wastewater treatment system or have questions, feel free to call Department staff to assist you.

Thank you for your cooperation.

Sincerely,

Jane K. Hickman
Administrator
Office of Compliance and Enforcement

Enclosure

cc: Business Office, DEQ
Lyle Christensen, Northwest Region, Portland Office, DEQ
Water Quality, HQ, DEQ

Oregon
Theodore R. Kulongoski, Governor

Department of Environmental Quality
811 SW Sixth Avenue
Portland, OR 97204-1390
503-229-5696
TTY 503-229-6993

February 7, 2006

CERTIFIED MAIL NO. 7004 0550 0000 7975 5578

Magar Edward Magar
1616 N.W. Northrup
Portland, OR 97209

Re: Notice of Violation, Department Order and Assessment of Civil Penalty
No. WQ/I-NWR-05-181
Columbia County

On June 10, 2002, the Department of Environmental Quality (Department) issued you National Pollutant Discharge Elimination System (NPDES) Permit No. 102520 (Permit) which authorizes you to operate a wastewater treatment system, at the Riverwood Mobile Home Park facility which you own and control, and to discharge properly treated wastewater into waters of the state according to the schedules in the Permit. On July 5, 2005, the Department received the June 2005 discharge monitoring report, a monthly report required by the Permit. The monitoring report did not include the sampling results for biochemical oxygen demand (BOD) levels and total suspended solid (TSS) levels as required by Schedule B of the Permit.

Additionally, in July 2005, the Department was notified that the certified operator of the treatment facility at the Riverwood Mobile Home Park was no longer operating the system. The Department sent you a Warning Letter notifying you that the incomplete monitoring report for June, 2005 was a violation of the Permit and Oregon law. The letter also stated that the Permit requires the services of a certified operator at the treatment facility. On August 30, 2005, the Department sent you a Pre-Enforcement Notice requesting that you obtain the services of a certified operator for your facility by September 30, 2005. As of the date of this Notice, there is not a certified operator monitoring the treatment system at your facility.

The Department requires that wastewater treatment facilities be operated under the supervision of a certified operator in order to ensure the protection of the public's health and the environment. Permitted facilities are required to abide by specific waste disposal limitations and methods, minimum monitoring and reporting requirements, and compliance conditions and schedules to assure proper and environmentally sound wastewater management. Facilities operating without a certified operator do not provide such assurances. The failure to obtain the services of a properly certified operator may lead to improper treatment of the wastewater as well as potential effluent violations. Finally, facilities operating without a certified operator may gain an economic advantage over competitors by avoiding the cost of these services.

In the enclosed Notice and Order, the Department has assessed a civil penalty of $4,036. The penalty was determined as set forth in Oregon Administrative Rule (OAR) 340-012-0045. The Department's findings and civil penalty determination are attached to the Notice as Exhibit No. 1. Also included in Section IV is an Order requiring you to obtain the services of a certified operator for the wastewater treatment system at the Riverwood Mobile Home Park within ten (10) of days of receipt of this Notice and Order.

If you wish to dispute the civil penalty or Order, you must file a written request for a hearing, along with a written Answer that admits or denies each of the facts alleged in Sections II and III of the enclosed Notice and Order. In the Answer, you should also allege all affirmative defenses and provide reasons why they apply in this matter. You will not be allowed to raise these issues at a later time, unless you can show good cause for that failure.

The steps you must follow to request a review of the Department's allegations and determinations in this matter are set forth in Section VI of the enclosed Notice and Order and in OAR 340-011-0530 and 137-003-0528. You need to follow the rules to ensure that you do not lose the opportunity to dispute the Department's findings.

If the Department does not receive a request for a hearing and answer within **twenty** calendar days from the date that you receive the enclosed documents, the Department will issue a Default Order and the civil penalty assessment and Order will become final and enforceable. You can fax your request for hearing and answer to the Department at 503-229-6762.

If you wish to discuss this matter, or believes there are mitigating factors that the Department might not have considered in assessing the civil penalty, a request for an informal discussion may be attached to the appeal. A request to discuss this matter with the Department does not waive the right to a contested case hearing. Copies of referenced rules are enclosed.

I look forward to your cooperation in complying with Oregon environmental law in the future. If, however, any additional violations occur, you may be assessed additional civil penalties.

If you have any questions about the Notice and Order, please contact Leah Koss with the Department's Office of Compliance and Enforcement in Portland at 503-229-6408 or toll-free at 1-800-452-4011, extension 6408.

Sincerely,

Anne R. Price, Administrator
Office of Compliance and Enforcement

CoverNCP/O.11/05

Enclosures

cc: Lyle Christensen, Northwest Region, Portland Office, DEQ
Neil Mullane, Northwest Region, DEQ
Dick Pedersen, Northwest Region, DEQ
Water Quality Division, HQ, DEQ
Larry Knudsen, Department of Justice, Portland Office
Environmental Protection Agency
Environmental Quality Commission
Columbia County District Attorney

BEFORE THE ENVIRONMENTAL QUALITY COMMISSION

OF THE STATE OF OREGON

| | | |
|---|---|---|
| IN THE MATTER OF:<br>MAGAR EDWARD MAGAR,<br><br>Respondent. | ) | NOTICE OF VIOLATION, DEPARTMENT ORDER AND ASSESSMENT OF CIVIL PENALTY<br>No. WQ/I-NWR-05-181<br><br>COLUMBIA COUNTY |

## I. AUTHORITY

This Notice of Violation, Department Order and Assessment of Civil Penalty (Notice and Order) is issued to Respondent Magar Edward Magar by the Department of Environmental Quality (Department) pursuant to Oregon Revised Statutes (ORS) 468.126 through 468.140, ORS Chapter 183 and Oregon Administrative Rules (OAR) Chapter 340, Divisions 011 and 012.

## II. FINDINGS

1. Respondent controls and operates the wastewater treatment facility at the Riverwood Mobile Home Park, located in Rainier, Oregon (the facility).

2. On June 10, 2002, the Department issued National Pollutant Discharge Elimination System (NPDES) Permit No. 102520 (the Permit) to Magar E. Magar. The Permit authorizes Respondent to operate a wastewater treatment system and discharge to public waters adequately treated wastewater only in conformance with all the requirements, limitations, and conditions set forth in the Permit schedules.

3. Before July 2005, Cliff West, a certified wastewater facility operator, monitored and operated the treatment system at Respondent's facility.

4. Since July 2005, Cliff West has not been employed by Respondent, and there has not been a certified operator monitoring and operating the system since then and as of the date of this Notice and Order.

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5. On July 5, 2005, the Department received Mr. Magar's discharge monitoring report for June 2005, which did not include all of the required monitoring results per Schedule B of the Permit.

6. On July 25, 2005, the Department issued Warning Letter No. WQ/D-0061 to Respondent notifying him that this failure to properly report results of sampling at his facility is a violation of the Permit and a Class II violation. The Department requested that Respondent conduct the required sampling and properly report the sampling results in the future. This letter also stated that Cliff West had informed the Department that he was no longer operating Respondent's facility. The Department notified Respondent that his Permit requires that a certified operator be responsible for this operation and that failure to obtain services of a qualified operator may result in further enforcement action by the Department.

7. On August 30, 2005, the Department issued Pre-Enforcement Notice No. WQ/D-0090 to Respondent requesting that by September 30, 2005 he obtain the services of a qualified wastewater treatment plant operations specialist to directly manage his facility.

8. As of date of issuance of this Notice and Order, Respondent has not taken the steps requested in the Pre-Enforcement Notice.

## III. VIOLATIONS

Based upon the Findings above, Respondent has violated Oregon's laws as follows:

1. From approximately July 1, 2005 to the date of this Notice, Respondent violated OAR 340-049-0015(3) by operating a wastewater treatment system without a certified operator as required by Schedule D, Condition 3(a) of Respondent's National Pollutant Discharge Elimination System (NPDES) Permit No. 102520. According to OAR 340-012-0055(1)(j), this is a Class I violation.

2. In June 2005, Respondent violated ORS 468B.025(2) by failing to do sampling of biochemical oxygen demand (BOD) and total suspended solids (TSS) at the treatment plant as required by Schedule B of Respondent's NPDES Permit. According to OAR 340-012-0055(2)(a), this is a Class II violation.

## IV. DEPARTMENT ORDER

Based upon the foregoing FINDINGS AND VIOLATIONS, Respondent is hereby ORDERED TO:

1. Immediately initiate actions necessary to correct all of the above-cited violations and come into full compliance with Oregon's statutes and regulations.

2. Within ten (10) days of receipt of this Notice and Order, obtain a certified operator for the wastewater treatment facility at the Riverwood Mobile Home Park or apply for a Grade 1 Provisional Certificate. Application for a Provisional Certificate requires that you are gaining acceptable operating experience at the time of making the application and that you are supervised by a certified wastewater treatment system operator who will document that you are gaining the required operating experience to become certified as an operator.

3. Within fifteen (15) days of receipt of this Notice and Order, submit written documentation which demonstrates Respondent's full compliance with this Notice and Order to: **Lyle Christensen, Department of Environmental Quality, 2020 SW 4th Avenue, #400, Portland, Oregon 97201-4987.**

## V. ASSESSMENT OF CIVIL PENALTIES

The Department imposes a civil penalty of $4,036 for the violation in Section III, paragraph 1 above.

The findings and determination of Respondent's civil penalty, pursuant to OAR 340-012-0045, are attached and incorporated as Exhibit No. 1.

## VI. OPPORTUNITY FOR CONTESTED CASE HEARING

Respondent has the right to have a contested case hearing before the Environmental Quality Commission or its hearings officer regarding the matters contained in this Notice and Order, provided Respondent files a written request for a hearing and an answer within **twenty (20) calendar days** from the date of service of this Notice and Order. According to OAR 340-011-0530(4), if Respondent fails to file a timely request for a hearing, a late filing will not be allowed unless the reason for the late filing was beyond Respondent's reasonable control.

According to OAR 137-003-0528(1), if Respondent fails to file a timely answer, the late filing will not be allowed unless Respondent can show good cause for the late filing.

The request for a hearing must either specifically request a hearing or state that Respondent wishes to appeal this Notice and Order. In the written answer, Respondent must admit or deny each allegation of fact contained in this Notice and Order, and must specifically state all affirmative defenses to the assessment of the civil penalty that Respondent may have and the reasoning in support of any defenses. The contested case hearing will be limited to those issues raised in this Notice and Order and in the answer. Unless Respondent is able to show good cause:

1. Factual matters not denied in a timely manner will be considered admitted;

2. Failure to timely raise a defense will waive the ability to raise that defense at a later time;

3. New matters alleged in the answer will be presumed to be denied by the Department unless admitted in subsequent pleading or stipulation by the Department or Commission.

Send the request for hearing and answer to: **Deborah Nesbit, Oregon Department of Environmental Quality, 811 S.W. Sixth Avenue, Portland, Oregon 97204, or via fax at 503-229-6762.** Following the Department's receipt of a request for hearing and an answer, Respondent will be notified of the date, time and place of the hearing.

Failure to file a timely request for hearing or an answer may result in the entry of a Default Order for the relief sought in this Notice and Order.

Failure to appear at a scheduled hearing may result in an entry of a Default Order.

The Department's case file at the time this Notice was issued may serve as the record for purposes of entering the Default Order.

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## VII. OPPORTUNITY FOR INFORMAL DISCUSSION

In addition to filing a request for a contested case hearing, Respondent may also request an informal discussion with the Department by attaching a written request to the hearing request and answer.

## VIII. PAYMENT OF CIVIL PENALTY

The civil penalty is due and payable ten (10) days after the Order imposing the civil penalty becomes final by operation of law or on appeal. Respondent may pay the penalty before that time. Respondent's check or money order in the amount of $4,036 should be made payable to **"State Treasurer, State of Oregon"** and sent to the **Business Office, Department of Environmental Quality, 811 S.W. Sixth Avenue, Portland, Oregon 97204.**

2/7/06
Date

Anne R. Price, Administrator
Office of Compliance and Enforcement

**EXHIBIT 1**

FINDINGS AND DETERMINATION OF RESPONDENT'S CIVIL PENALTY PURSUANT TO OREGON ADMINISTRATIVE RULE (OAR) 340-012-0045

VIOLATION 1: Operating a wastewater treatment system without a certified operator as required by Schedule D, Condition 3(a) of Respondent's National Pollutant Discharge Elimination System (NPDES) Permit in violation of OAR 340-049-0015(3).

CLASSIFICATION: This is a Class I violation pursuant to OAR 340-012-0055(1)(j).

MAGNITUDE: The magnitude of the violation is moderate pursuant to OAR 340-012-0130(1), as there is no selected magnitude specified in OAR 340-012-0135 for this violation, and the information reasonably available to the Department does not indicate a minor or major magnitude.

CIVIL PENALTY FORMULA: The formula for determining the amount of penalty of each violation is:

$$BP + [(0.1 \times BP) \times (P + H + O + M + C)] + EB$$

"BP" is the base penalty, which is $1,250 for a Class I, moderate magnitude violation in the matrix listed in OAR 340-012-0140(4)(b)(A(ii) and applicable pursuant to OAR 340-012-0140(4)(a)(A).

"P" is whether Respondent has any prior significant actions, as defined in OAR 340-012-0030(16), in the same media as the violation at issue that occurred at a facility owned or operated by the same Respondent, and receives a value of 5 according to OAR 340-012-0145(2)(a)(C) and (D) and 340-012-0145(2)(d)(A)(i), because Respondent has six (6) Class I prior significant actions in the same media which were all issued more than three (3) years before the current violation occurred.

"H" is Respondent's history of correcting prior significant action(s) and receives a value of -1 according to OAR 340-012-0145(3)(a)(B), because the violations were uncorrectable, but Respondent took reasonable efforts to minimize the effects of the violations by repairing the wastewater treatment system that was failing.

"O" is whether the violation was repeated or ongoing and receives a value of 4 according to OAR 340-012-0145(4)(a)(D), because the violation existed for more than 28 days. Respondent has operated the wastewater treatment plant since July 2005 without a certified operator.

"M" is the mental state of the Respondent and receives a value of 6 according to OAR 340-012-0145(5)(a)(C), because Respondent had actual knowledge that his conduct would be a violation. Respondent's Permit specifically states that the system must be supervised by a certified operator. Respondent has had the system supervised by a certified operator in the past, and when that operator ceased employment, Respondent did not contract with or hire another operator for the system. Additionally, the Department sent Warning Letter WQ/D-0061 and Pre-Enforcement Notice WQ/D-0090, which both notified Respondent that the permit requires that a certified operator be responsible for the facility operations to assure that all permit compliance conditions are met.

"C" is Respondent's efforts to correct the violation and receives a value of 2 according to OAR 340-012-0145(6)(a)(D), because Respondent has not obtained a certified operator for the facility as of the date of this Notice.

"EB" is the approximate economic benefit that an entity gained by not complying with the law. It is designed to "level the playing field" by taking away any economic advantage the entity gained and to deter potential violators from deciding it is cheaper to violate and pay the penalty than to pay the costs of compliance. In this case, "EB" receives a value of $786. This is the amount Respondent gained by avoiding spending $2,000 to incur the costs of paying a certified operator to monitor the facility for the months of July 2005 through February 2006. This "EB" was calculated pursuant to OAR 340-012-0150(1) using the U.S. Environmental Protection Agency's BEN computer model.

PENALTY CALCULATION:

Penalty= BP + [(0.1 x BP) x (P + H + O + M + C)] + EB
= $1,250 + [(0.1 x $1,250) x (5 + -1 + 4 + 6 + 2)] + $786
= $1,250 + [($125) x (16)] + $786
= $1,250 + $2,000 + $786
= $4,036

***Magar E. Magar***

**14102 NE 40th Street**
**Vancouver WA. 98682**

***June 8, 2010***

***RE case number OAH Case Number 901410***

***Administrative Law Judge Monica Whitaker.***

RECEIVED
JUN 09 2010
Office of Administrative Hearings
Tualatin

Judge Whitaker
Office of Administrative Hearings
7995 SW Mohawk St.
Tualatin, Or. 97062.

Attached are my exhibits.

I may have one witness probably Robert Fountain of the Department of Statistics of PSU.. Will provide phone number as soon as I know where he will be located on the and date of hearing.

Very truly yours,

Magar E. Magar.
cc. Bryan Smith by personal delivery.

# Exhibit List 2nd.

Title of Exhibit.

R. 1. 2002 Permit.

R. 2. 2007 Permit same as DEQ A.1

R.3 DEQ Letter in Responses to discovery.

R.4 Original DMR's from mid-June 2002 to mid June 2007 (to be supplied)

R.5 Original DMR's from mid June 2007 to date (to be supplied)

R. 6 Fact Sheet and permit Evaluation for 2002 permit addressed to Ken Eiler.

R.7 Fact Sheet and Permit Evaluation for 2007 permit addressed to Magar.

R. 8 WQ enforcement Referral Christenson to Geist same asA.10

R.9 e-mails from Smith to Christensen and VV

12/28/2009

E-mails from Smith to Christensen and vv 1/4/10.

R. 10 also DEQ A.10 particular reference is made to p.4. Entering the data for BOD , TSS , e.coli and ammonia ( every three months ) up to until 7/2/2009

R. 11 Complete figures for BOD, TSS, and e.coli From April 2009 to May 2010.

R.12 Tables of Mass Calculations 2 pages

R. 13 Notes on Tables on Mass Calculations.

R. 14 Influent pH data.

R. 15 Credit Card statements regarding purchases of Magnetic Flow Meters and accessories.

Invoices may be substituted for statements actual pictures of the purchased Mag Flow meters. Also pictures of the totalizer.

R. 16 Relevant portions of Respondent 1040 tax return pertaining to Facility. To be supplied.

R.17 Table 2 WPCF and NPDES DOMESTIC TREATMENT FACILITIES

R-1

Expiration Date: 5/31/2007
Permit Number: 102520
File Number: 75541
Page 1 of 15 Pages

# NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM WASTE DISCHARGE PERMIT

Department of Environmental Quality
Northwest Region – Portland Office
2020 SW 4th Ave., Suite 400, Portland, OR 97201
Telephone: (503) 229-5263

Issued pursuant to ORS 468B.050 and The Federal Clean Water Act

**MAGAR E. MAGAR**
**1616 NW NORTHRUP**
**PORTLAND, OR 97209**

## SOURCES COVERED BY THIS PERMIT:

| Type of Waste | Outfall Number | Outfall Location |
|---|---|---|
| Treated Wastewater | 001 | R.M. 70.6 |

## FACILITY TYPE AND LOCATION:

Recirculating Gravel Filter
Riverwood Mobile Home Park
2 miles south of Rainier off Highway 30
Rainier

**Treatment System Class:** Level I
**Collection System Class:** N/A

## RECEIVING STREAM INFORMATION:

Basin: North Coast
Sub-Basin: Lower Columbia/Clatskanie

Receiving Stream: Columbia River
Hydro Code: 10=-COLU 70.6 I
County: Columbia

**EPA REFERENCE NO:** OR-003114-3

Issued in response to Application No. 990076 received 7-27-1999.

This permit is issued based on the land use findings in the permit record.

Elliott J. Zais for
Robert P. Baumgartner, Water Quality Manager
Northwest Region

June 10, 2002
Date

## PERMITTED ACTIVITIES

Until this permit expires or is modified or revoked, the permittee is authorized to construct, install, modify, or operate a wastewater collection, treatment, control and disposal system and discharge to public waters adequately treated wastewater only from the authorized discharge point or points established in Schedule A and only in conformance with all the requirements, limitations, and conditions set forth in the attached schedules as follows:


| | Page |
|---|---|
| Schedule A - Waste Discharge Limitations not to be Exceeded | 2 |
| Schedule B - Minimum Monitoring and Reporting Requirements | 3 |
| Schedule C - Compliance Conditions and Schedules | 5 |
| Schedule D - Special Conditions | 5 |
| Schedule F - General Conditions | 7 |


Unless specifically authorized by this permit, by another NPDES or WPCF permit, or by Oregon Administrative Rule, any other direct or indirect discharge to waters of the state is prohibited, including discharge to an underground injection control system.

Post-it™ brand fax transmittal memo 7671 | # of pages ▸ 15

| To | From |
|---|---|
| LEAH KOSS | Lyle C. |
| Co. DEQ HQ | Co. NWR |
| Dept. OCE | Phone # 5295 |

EXHIBIT # Item D 000252

R1

## SCHEDULE A

1. **Waste Discharge Limitations not to be exceeded after permit issuance.**

a. Treated Effluent Outfall 001

(1) May 1 - October 31:

| Parameter | Average Effluent Concentrations Monthly | Monthly* Average lb/day | Daily Maximum lbs. |
|---|---|---|---|
| $BOD_5$ | 20 mg/L | 2.2 | 4.4 |
| TSS | 20 mg/L | 2.2 | 4.4 |

(2) November 1 - April 30:

| Parameter | Average Effluent Concentrations Monthly | Monthly* Average lb/day | Daily Maximum lbs |
|---|---|---|---|
| $BOD_5$ | 30 mg/L | 3.3 | 6.6 |
| TSS | 30 mg/L | 3.3 | 6.6 |

* Average dry weather design flow to the facility equals .013 MGD. Mass load limits based upon average dry weather design flow to the facility.

(3)

| Other parameters (year-round) | Limitations |
|---|---|
| *E. coli* Bacteria | Shall not exceed 126 organisms per 100 mL monthly geometric mean. No single sample shall exceed 406 organisms per 100 mL. (See Note 1) |
| pH | Shall be within the range of 6.0 - 9.0 |
| $BOD_5$ and TSS Removal Efficiency | Shall not be less than 85% monthly average for $BOD_5$ and 85% monthly for TSS. |

(4) Except as provided for in OAR 340-45-080, no wastes shall be discharged and no activities shall be conducted which violate Water Quality Standards as adopted in OAR 340-41-0205, except in the following defined mixing zone:

From the point of discharge at the edge of the cliff, through the drainage area, to the Columbia River and within a radius of 20 feet of the point of entry to the river.

(5) Raw sewage discharges are prohibited to waters of the State from November 1 through May 21, except during a storm event greater than the one-in-five-year, 24-hour duration storm, and from May 22 through October 31, except during a storm event greater than the one-in-ten-year, 24-hour duration storm.

If an overflow occurs between May 22 and June 1, and if the permittee demonstrates to the Department's satisfaction that no increase in risk to beneficial uses occurred because of the overflow, no violation shall be triggered if the storm associated with the overflow was greater than the one-in-five-year, 24-hour duration storm.

b. No activities shall be conducted that could cause an adverse impact on existing or potential beneficial uses of groundwater. All wastewater shall be managed and disposed in a manner that will prevent a violation of the Groundwater Quality Protection Rules (OAR 340-040).

NOTES:

1. If a single sample exceeds 406 organisms per 100 mL, then five consecutive re-samples may be taken at four-hour intervals beginning within 28 hours after the original sample was taken. If the log mean of the five re-samples is less than or equal to 126 organisms per 100 mL, a violation shall not be triggered.

## SCHEDULE B

**Minimum Monitoring and Reporting Requirements** (unless otherwise approved in writing by the Department). The permittee shall monitor the parameters as specified below at the locations indicated. The laboratory used by the permittee to analyze samples shall have a quality assurance/quality control (QA/QC) program to verify the accuracy of sample analysis. If QA/QC requirements are not met for any analysis, the results shall be included in the report, but not used in calculations required by this permit. When possible, the permittee shall re-sample in a timely manner for parameters failing the QA/QC requirements, analyze the samples, and report the results.

a. Influent

The facility influent sampling location is the following:
the septic tank effluent line

| Item or Parameter | Minimum Frequency | Type of Sample |
|---|---|---|
| $BOD_5$ | Monthly | Grab |
| TSS | Monthly | Grab |
| pH | 2/Week | Grab |

b. Treated Effluent Outfall 001

The facility effluent sampling locations are the following:
at the V-notch weir leaving the chlorine contact chamber

| Item or Parameter | Minimum Frequency | Type of Sample |
|---|---|---|
| Total Flow (MGD) | Daily | Measurement |
| Flow Meter Calibration | Annually | Verification |
| $BOD_5$ | Monthly | Grab |
| TSS | Monthly | Grab |
| pH | 2/Week | Grab |
| Temperature | 2/Week | Grab |
| *E. coli* | Monthly | Grab (See Note 1) |
| Quantity Chlorine Used | Daily | Measurement |
| Chlorine Residual | Daily | Grab |
| Pounds Discharged ($BOD_5$ and TSS) | Monthly | Calculation |
| Average Percent Removed ($BOD_5$ and TSS) | Monthly | Calculation |
| Nutrients: | | |
| Ammonia | Quarterly | Grab |

c. Sludge Management

| Item or Parameter | Minimum Frequency | Type of Sample |
|---|---|---|
| Inspect septic tanks and recirculation tank | Annually (in August) | Measure accumulated solids and scum as a % of volume |
| | | |
| Solids pumped from treatment system | Each Occurrence | Date, volume (gallons), percent solids, hauler, transfer point |

2. **Reporting Procedures**

a. Monitoring results shall be reported on approved forms. The reporting period is the calendar month. Reports must be submitted to the Department's Northwest Region - Portland office by the 15th day of the following month.

b. State monitoring reports shall identify the name, certificate classification and grade level of each principal operator designated by the permittee as responsible for supervising the wastewater collection and treatment systems during the reporting period. Monitoring reports shall also identify each system classification as found on page one of this permit.

c. Monitoring reports shall also include a record of the quantity and method of use of all sludge removed from the treatment facility and a record of all applicable equipment breakdowns and bypassing.

NOTES:

1. *E. coli* monitoring must be conducted according to any of the following test procedures as specified in **Standard Methods for the Examination of Water and Wastewater, 19th Edition**, or according to any test procedure that has been authorized and approved in writing by the Director or his authorized representative:

| Method | Reference | Page | Method Number |
|---|---|---|---|
| mTEC agar, MF | Standard Methods, 19th Edition | 9-28 | 9213 D |
| NA-MUG, MF | Standard Methods, 19th Edition | 9-63 | 9222 G |
| Chromogenic Substrate, MPN | Standard Methods, 19th Edition | 9-65 | 9223 B |
| Colilert QT | Idexx Laboratories, Inc. | | |

## SCHEDULE C

Compliance Schedules and Conditions

By no later than 12 months after permit issuance, the permittee shall provide the Department with a report on the status of the upgrades and/or improvements completed in response to the recent engineering evaluation completed at this facility.

Accumulated solids in the septic tanks must be removed at least every other year. Solids in the recirculation basin must be removed at least once every five years.

The permittee is expected to meet the compliance dates, which have been established in this schedule. Either prior to or no later than 14 days following any lapsed compliance date, the permittee shall submit to the Department a notice of compliance or noncompliance with the established schedule. The Director may revise a schedule of compliance if he determines good and valid cause resulting from events over which the permittee has little or no control.

## SCHEDULE D

pecial Conditions

An adequate contingency plan for prevention and handling of spills and unplanned discharges shall be in force at all times. A continuing program of employee orientation and education shall be maintained to ensure awareness of the necessity of good in-plant control and quick and proper action in the event of a spill or accident.

The permittee shall not be required to perform a hydrogeologic characterization or groundwater monitoring during the term of this permit provided:

a. The facilities are operated in accordance with the permit conditions, and;

b. There are no adverse groundwater quality impacts (complaints or other indirect evidence) resulting from the facility's operation.

If warranted, at permit renewal the Department may evaluate the need for a full assessment of the facilities impact on groundwater quality.

The permittee shall comply with Oregon Administrative Rules (OAR), Chapter 340, Division 49, "Regulations Pertaining To Certification of Wastewater System Operator Personnel" and accordingly:

a. The permittee shall have its wastewater system supervised by one or more operators who are certified in a classification and grade level (equal to or greater) that corresponds with the classification (collection and /or treatment) of the system to be supervised as specified on page one of this permit. The permittee may contract for part-time supervision in accordance with OAR 340-49-15(3) and 340-49-070.

**Note: A "supervisor" is defined as the person exercising authority for establishing and executing the specific practice and procedures of operating the system in accordance with the policies of the permittee and requirements of the waste discharge permit. "Supervise" means responsible for the technical operation of a system, which may affect its performance or the quality of the effluent produced. Supervisors are not required to be on-site at all times.**

b. The permittee's wastewater system may not be without supervision (as required by Special Condition 3.a. above) for more than thirty (30) days unless otherwise authorized by the Department of Environmental Quality in writing.

c. The permittee is responsible for ensuring the wastewater system has a properly certified supervisor available at all times to respond on-site at the request of the permittee and to any other operator.

d. The permittee shall notify the Department of Environmental Quality in writing within thirty (30) days of replacement or redesignation of certified operators responsible for supervising wastewater system operation. The notice shall be filed with the Water Quality Division, Operator Certification Program, 811 SW 6th Ave, Portland, OR 97204. This requirement is in addition to the reporting requirements contained under Schedule B of this permit.

e. Upon written request, the Department may grant the permittee reasonable time, not to exceed 120 days, to obtain the services of a qualified person to supervise the wastewater system. The written request must include justification for the time needed, a schedule for recruiting and hiring, the date the system supervisor availability ceased and the name of the alternate system supervisor(s) as required by 3.b. above.

4. The permittee shall notify the DEQ Northwest Region - Portland Office (phone: (503) 229-5263) in accordance with the response times noted in the General Conditions of this permit, of any malfunction so that corrective action can be coordinated between the permittee and the Department.

# NPDES GENERAL CONDITIONS
# (SCHEDULE F)

## SECTION A. STANDARD CONDITIONS

Duty to Comply

The permittee must comply with all conditions of this permit. Any permit noncompliance constitutes a violation of Oregon Revised Statutes (ORS) 468B.025 and is grounds for enforcement action; for permit termination, suspension, or modification; or for denial of a permit renewal application.

Penalties for Water Pollution and Permit Condition Violations

Oregon Law (ORS 468.140) allows the Director to impose civil penalties up to $10,000 per day for violation of a term, condition, or requirement of a permit.

In addition, a person who unlawfully pollutes water as specified in ORS 468.943 or ORS 468.946 is subject to criminal prosecution.

Duty to Mitigate

The permittee shall take all reasonable steps to minimize or prevent any discharge or sludge use or disposal in violation of this permit which has a reasonable likelihood of adversely affecting human health or the environment. In addition, upon request of the Department, the permittee shall correct any adverse impact on the environment or human health resulting from noncompliance with this permit, including such accelerated or additional monitoring as necessary to determine the nature and impact of the noncomplying discharge.

Duty to Reapply

If the permittee wishes to continue an activity regulated by this permit after the expiration date of this permit, the permittee must apply for and have the permit renewed. The application shall be submitted at least 180 days before the expiration date of this permit.

The Director may grant permission to submit an application less than 180 days in advance but no later than the permit expiration date.

Permit Actions

This permit may be modified, suspended, revoked and reissued, or terminated for cause including, but not limited to, the following:

a. Violation of any term, condition, or requirement of this permit, a rule, or a statute;

b. Obtaining this permit by misrepresentation or failure to disclose fully all material facts; or

c. A change in any condition that requires either a temporary or permanent reduction or elimination of the authorized discharge.

The filing of a request by the permittee for a permit modification or a notification of planned changes or anticipated noncompliance, does not stay any permit condition.

Toxic Pollutants

The permittee shall comply with any applicable effluent standards or prohibitions established under Section 307(a) of the Clean Water Act for toxic pollutants within the time provided in the regulations that establish those standards or prohibitions, even if the permit has not yet been modified to incorporate the requirement.

7. Property Rights

The issuance of this permit does not convey any property rights of any sort, or any exclusive privilege.

8. Permit References

Except for effluent standards or prohibitions established under Section 307(a) of the Clean Water Act for toxic pollutants and standards for sewage sludge use or disposal established under Section 405(d) of the Clean Water Act, all rules and statutes referred to in this permit are those in effect on the date this permit is issued.

## SECTION B. OPERATION AND MAINTENANCE OF POLLUTION CONTROLS

1. Proper Operation and Maintenance

The permittee shall at all times properly operate and maintain all facilities and systems of treatment and control (and related appurtenances) which are installed or used by the permittee to achieve compliance with the conditions of this permit. Proper operation and maintenance also includes adequate laboratory controls, and appropriate quality assurance procedures. This provision requires the operation of back-up or auxiliary facilities or similar systems that are installed by a permittee only when the operation is necessary to achieve compliance with the conditions of the permit.

2. Duty to Halt or Reduce Activity

For industrial or commercial facilities, upon reduction, loss, or failure of the treatment facility, the permittee shall, to the extent necessary to maintain compliance with its permit, control production or all discharges or both until the facility is restored or an alternative method of treatment is provided. This requirement applies, for example, when the primary source of power of the treatment facility fails or is reduced or lost. It shall not be a defense for a permittee in an enforcement action that it would have been necessary to halt or reduce the permitted activity in order to maintain compliance with the conditions of this permit.

3. Bypass of Treatment Facilities

a. Definitions

(1) "Bypass" means intentional diversion of waste streams from any portion of the treatment facility. The term "bypass" does not include nonuse of singular or multiple units or processes of a treatment works when the nonuse is insignificant to the quality and/or quantity of the effluent produced by the treatment works. The term "bypass" does not apply if the diversion does not cause effluent limitations to be exceeded, provided the diversion is to allow essential maintenance to assure efficient operation.

(2) "Severe property damage" means substantial physical damage to property, damage to the treatment facilities or treatment processes which causes them to become inoperable, or substantial and permanent loss of natural resources which can reasonably be expected to occur in the absence of a bypass. Severe property damage does not mean economic loss caused by delays in production.

b. Prohibition of bypass.

(1) Bypass is prohibited unless:

(a) Bypass was necessary to prevent loss of life, personal injury, or severe property damage;

(b) There were no feasible alternatives to the bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of

equipment downtime. This condition is not satisfied if adequate backup equipment should have been installed in the exercise of reasonable engineering judgement to prevent a bypass which occurred during normal periods of equipment downtime or preventative maintenance; and

(c) The permittee submitted notices and requests as required under General Condition B.3.c.

(2) The Director may approve an anticipated bypass, after considering its adverse effects and any alternatives to bypassing, when the Director determines that it will meet the three conditions listed above in General Condition B.3.b.(1).

c. Notice and request for bypass.

(1) Anticipated bypass. If the permittee knows in advance of the need for a bypass, it shall submit prior written notice, if possible at least ten days before the date of the bypass.

(2) Unanticipated bypass. The permittee shall submit notice of an unanticipated bypass as required in General Condition D.5.

Upset

a. Definition. "Upset" means an exceptional incident in which there is unintentional and temporary noncompliance with technology based permit effluent limitations because of factors beyond the reasonable control of the permittee. An upset does not include noncompliance to the extent caused by operation error, improperly designed treatment facilities, inadequate treatment facilities, lack of preventative maintenance, or careless or improper operation.

b. Effect of an upset. An upset constitutes an affirmative defense to an action brought for noncompliance with such technology based permit effluent limitations if the requirements of General Condition B.4.c are met. No determination made during administrative review of claims that noncompliance was caused by upset, and before an action for noncompliance, is final administrative action subject to judicial review.

c. Conditions necessary for a demonstration of upset. A permittee who wishes to establish the affirmative defense of upset shall demonstrate, through properly signed, contemporaneous operating logs, or other relevant evidence that:

(1) An upset occurred and that the permittee can identify the causes(s) of the upset;

(2) The permitted facility was at the time being properly operated;

(3) The permittee submitted notice of the upset as required in General Condition D.5, hereof (24-hour notice); and

(4) The permittee complied with any remedial measures required under General Condition A.3 hereof.

d. Burden of proof. In any enforcement proceeding the permittee seeking to establish the occurrence of an upset has the burden of proof.

Treatment of Single Operational Event

For purposes of this permit. A Single Operational Event which leads to simultaneous violations of more than one pollutant parameter shall be treated as a single violation. A single operational event is an exceptional incident which causes simultaneous, unintentional, unknowing (not the result of a knowing act or omission), temporary noncompliance with more than one Clean Water Act effluent discharge pollutant parameter. A single operational event does not include Clean Water Act violations involving discharge without a NPDES permit or noncompliance

to the extent caused by improperly designed or inadequate treatment facilities. Each day of a single operational event is a violation.

6. Overflows from Wastewater Conveyance Systems and Associated Pump Stations

a. Definitions

(1) "Overflow" means the diversion and discharge of waste streams from any portion of the wastewater conveyance system including pump stations, through a designed overflow device or structure, other than discharges to the wastewater treatment facility.

(2) "Severe property damage" means substantial physical damage to property, damage to the conveyance system or pump station which causes them to become inoperable, or substantial and permanent loss of natural resources which can reasonably be expected to occur in the absence of an overflow.

(3) "Uncontrolled overflow" means the diversion of waste streams other than through a designed overflow device or structure; for example to overflowing manholes or overflowing into residences, commercial establishments, or industries that may be connected to a conveyance system.

b. Prohibition of overflows. Overflows are prohibited unless:

(1) Overflows were unavoidable to prevent an uncontrolled overflow, loss of life, personal injury, or severe property damage;

(2) There were no feasible alternatives to the overflows, such as the use of auxiliary pumping or conveyance systems, or maximization of conveyance system storage; and

(3) The overflows are the result of an upset as defined in General Condition B.4. and meeting all requirements of this condition.

c. Uncontrolled overflows are prohibited where wastewater is likely to escape or be carried into the waters of the State by any means.

d. Reporting required. Unless otherwise specified in writing by the Department, all overflows and uncontrolled overflows must be reported orally to the Department within 24 hours from the time the permittee becomes aware of the overflow. Reporting procedures are described in more detail in General Condition D.5.

7. Public Notification of Effluent Violation or Overflow

If effluent limitations specified in this permit are exceeded or an overflow occurs, upon request by the Department, the permittee shall take such steps as are necessary to alert the public about the extent and nature of the discharge. Such steps may include, but are not limited to, posting of the river at access points and other places, news releases, and paid announcements on radio and television.

8. Removed Substances

Solids, sludges, filter backwash, or other pollutants removed in the course of treatment or control of wastewaters shall be disposed of in such a manner as to prevent any pollutant from such materials from entering public waters, causing nuisance conditions, or creating a public health hazard.

## SECTION C. MONITORING AND RECORDS

1. Representative Sampling

Sampling and measurements taken as required herein shall be representative of the volume and nature of the monitored discharge. All samples shall be taken at the monitoring points specified in this permit and shall be taken, unless otherwise specified, before the effluent joins or is diluted by any other waste stream, body of water, or substance. Monitoring points shall not be changed without notification to and the approval of the Director.

2. Flow Measurements

Appropriate flow measurement devices and methods consistent with accepted scientific practices shall be selected and used to ensure the accuracy and reliability of measurements of the volume of monitored discharges. The devices shall be installed, calibrated and maintained to insure that the accuracy of the measurements is consistent with the accepted capability of that type of device. Devices selected shall be capable of measuring flows with a maximum deviation of less than ± 10 percent from true discharge rates throughout the range of expected discharge volumes.

3. Monitoring Procedures

Monitoring must be conducted according to test procedures approved under 40 CFR Part 136, unless other test procedures have been specified in this permit.

4. Penalties of Tampering

The Clean Water Act provides that any person who falsifies, tampers with, or knowingly renders inaccurate, any monitoring device or method required to be maintained under this permit shall, upon conviction, be punished by a fine of not more than $10,000 per violation, or by imprisonment for not more than two years, or by both. If a conviction of a person is for a violation committed after a first conviction of such person, punishment is a fine not more than $20,000 per day of violation, or by imprisonment of not more than four years or both.

5. Reporting of Monitoring Results

Monitoring results shall be summarized each month on a Discharge Monitoring Report form approved by the Department. The reports shall be submitted monthly and are to be mailed, delivered or otherwise transmitted by the 15th day of the following month unless specifically approved otherwise in Schedule B of this permit.

6. Additional Monitoring by the Permittee

If the permittee monitors any pollutant more frequently than required by this permit, using test procedures approved under 40 CFR 136 or as specified in this permit, the results of this monitoring shall be included in the calculation and reporting of the data submitted in the Discharge Monitoring Report. Such increased frequency shall also be indicated. For a pollutant parameter that may be sampled more than once per day (e.g., Total Chlorine Residual), only the average daily value shall be recorded unless otherwise specified in this permit.

7. Averaging of Measurements

Calculations for all limitations which require averaging of measurements shall utilize an arithmetic mean, except for bacteria which shall be averaged as specified in this permit.

Retention of Records

Except for records of monitoring information required by this permit related to the permittee's sewage sludge use and disposal activities, which shall be retained for a period of at least five years (or longer as required by 40 CFR part 503), the permittee shall retain records of all monitoring information, including all calibration and maintenance records of all original strip chart recordings for continuous monitoring instrumentation, copies of all reports required by this permit, and records of all data used to complete the application for this permit, for a period of at least 3 years from the date of the sample, measurement, report or application. This period may be extended by request of the Director at any time.

9. Records Contents

Records of monitoring information shall include:

a. The date, exact place, time and methods of sampling or measurements;

b. The individual(s) who performed the sampling or measurements;

c. The date(s) analyses were performed;

d. The individual(s) who performed the analyses;

e. The analytical techniques or methods used; and

f. The results of such analyses.

10. Inspection and Entry

The permittee shall allow the Director, or an authorized representative upon the presentation of credentials to:

a. Enter upon the permittee's premises where a regulated facility or activity is located or conducted, or where records must be kept under the conditions of this permit;

b. Have access to and copy, at reasonable times, any records that must be kept under the conditions of this permit;

c. Inspect at reasonable times any facilities, equipment (including monitoring and control equipment), practices, or operations regulated or required under this permit, and

d. Sample or monitor at reasonable times, for the purpose of assuring permit compliance or as otherwise authorized by state law, any substances or parameters at any location.

## SECTION D. REPORTING REQUIREMENTS

1. Planned Changes

The permittee shall comply with Oregon Administrative Rules (OAR) 340, Division 52, "Review of Plans and Specifications". Except where exempted under OAR 340-52, no construction, installation, or modification involving disposal systems, treatment works, sewerage systems, or common sewers shall be commenced until the plans and specifications are submitted to and approved by the Department. The permittee shall give notice to the Department as soon as possible of any planned physical alternations or additions to the permitted facility.

2. Anticipated Noncompliance

The permittee shall give advance notice to the Director of any planned changes in the permitted facility or activity that may result in noncompliance with permit requirements.

3. Transfers

This permit may be transferred to a new permittee provided the transferee acquires a property interest in the permitted activity and agrees in writing to fully comply with all the terms and conditions of the permit and the rules of the Commission. No permit shall be transferred to a third party without prior written approval from the Director. The permittee shall notify the Department when a transfer of property interest takes place.

4. Compliance Schedule

Reports of compliance or noncompliance with, or any progress reports on interim and final requirements contained in any compliance schedule of this permit shall be submitted no later than 14 days following each schedule date. Any reports of noncompliance shall include the cause of noncompliance, any remedial actions taken, and the probability of meeting the next scheduled requirements.

5. Twenty-Four Hour Reporting

The permittee shall report any noncompliance that may endanger health or the environment. Any information shall be provided orally (by telephone) within 24 hours, unless otherwise specified in this permit, from the time the permittee becomes aware of the circumstances. During normal business hours, the Department's Regional office shall be called. Outside of normal business hours, the Department shall be contacted at 1-800-452-0311 (Oregon Emergency Response System).

A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances. If the permittee is establishing an affirmative defense of upset or bypass to any offense under ORS 468.922 to 468.946, and in which case if the original reporting notice was oral, delivered written notice must be made to the Department or other agency with regulatory jurisdiction within 4 (four) calendar days. The written submission shall contain:

a. A description of the noncompliance and its cause;

b. The period of noncompliance, including exact dates and times;

c. The estimated time noncompliance is expected to continue if it has not been corrected;

d. Steps taken or planned to reduce, eliminate, and prevent reoccurrence of the noncompliance; and

e. Public notification steps taken, pursuant to General Condition B.7.

The following shall be included as information that must be reported within 24 hours under this paragraph:

a. Any unanticipated bypass which exceeds any effluent limitation in this permit.

b. Any upset which exceeds any effluent limitation in this permit.

c. Violation of maximum daily discharge limitation for any of the pollutants listed by the Director in this permit.

The Department may waive the written report on a case-by-case basis if the oral report has been received within 24 hours.

6. Other Noncompliance

The permittee shall report all instances of noncompliance not reported under General Condition D.4 or D.5, at the time monitoring reports are submitted. The reports shall contain:

a. A description of the noncompliance and its cause;

b. The period of noncompliance, including exact dates and times;

c. The estimated time noncompliance is expected to continue if it has not been corrected; and

d. Steps taken or planned to reduce, eliminate, and prevent reoccurrence of the noncompliance.

7. Duty to Provide Information

The permittee shall furnish to the Department, within a reasonable time, any information that the Department may request to determine compliance with this permit. The permittee shall also furnish to the Department, upon request, copies of records required to be kept by this permit.

Other Information: When the permittee becomes aware that it failed to submit any relevant facts in a permit application, or submitted incorrect information in a permit application or any report to the Department, it shall promptly submit such facts or information.

8. Signatory Requirements

All applications, reports or information submitted to the Department shall be signed and certified in accordance with 40 CFR 122.22.

9. Falsification of Information

A person who supplies the Department with false information, or omits material or required information, as specified in ORS 468.953 is subject to criminal prosecution.

10. Changes to Indirect Dischargers - **[Applicable to Publicly Owned Treatment Works (POTW) only]**

The permittee must provide adequate notice to the Department of the following:

a. Any new introduction of pollutants into the POTW from an indirect discharger which would be subject to section 301 or 306 of the Clean Water Act if it were directly discharging those pollutants and;

b. Any substantial change in the volume or character of pollutants being introduced into the POTW by a source introducing pollutants into the POTW at the time of issuance of the permit.

c. For the purposes of this paragraph, adequate notice shall include information on (i) the quality and quantity of effluent introduced into the POTW, and (ii) any anticipated impact of the change on the quantity or quality of effluent to be discharged from the POTW.

11. Changes to Discharges of Toxic Pollutant - **[Applicable to existing manufacturing, commercial, mining, and silvicultural dischargers only]**

The permittee must notify the Department as soon as they know or have reason to believe of the following:

a. That any activity has occurred or will occur which would result in the discharge, on a routine or frequent basis, of any toxic pollutant which is not limited in the permit, if that discharge will exceed the highest of the following "notification levels:

(1) One hundred micrograms per liter (100 µg/L);

(2) Two hundred micrograms per liter (200 µg/L) for acrolein and acrylonitrile; five hundred micrograms per liter (500 µg/L) for 2,4-dinitrophenol and for 2-methyl-4,6-dinitrophenol; and one milligram per liter (1 mg/L) for antimony;

(3) Five (5) times the maximum concentration value reported for that pollutant in the permit application in accordance with 40 CFR 122.21(g)(7); or

(4) The level established by the Department in accordance with 40 CFR 122.44(f).

b. That any activity has occurred or will occur which would result in any discharge, on a non-routine or infrequent basis, of a toxic pollutant which is not limited in the permit, if that discharge will exceed the highest of the following "notification levels":

(1) Five hundred micrograms per liter (500 µg/L);

(2) One milligram per liter (1 mg/L) for antimony;

(3) Ten (10) times the maximum concentration value reported for that pollutant in the permit application in accordance with 40 CFR 122.21(g)(7); or

(4) The level established by the Department in accordance with 40 CFR 122.44(f).

## SECTION E. DEFINITIONS

1. BOD means five-day biochemical oxygen demand.
2. TSS means total suspended solids.
3. mg/L means milligrams per liter.
4. kg means kilograms.
5. $m^3/d$ means cubic meters per day.
6. MGD means million gallons per day.
7. Composite sample means a sample formed by collecting and mixing discrete samples taken periodically and based on time or flow.
8. FC means fecal coliform bacteria.
9. Technology based permit effluent limitations means technology-based treatment requirements as defined in 40 CFR 125.3, and concentration and mass load effluent limitations that are based on minimum design criteria specified in OAR 340-41.
10. CBOD means five day carbonaceous biochemical oxygen demand.
11. Grab sample means an individual discrete sample collected over a period of time not to exceed 15 minutes.
12. Quarter means January through March, April through June, July through September, or October through December.
13. Month means calendar month.
14. Week means a calendar week of Sunday through Saturday.
15. Total residual chlorine means combined chlorine forms plus free residual chlorine.
16. The term "bacteria" includes but is not limited to fecal coliform bacteria, total coliform bacteria, and E. coli bacteria.
17. POTW means a publicly owned treatment works.

R 3 p 1

March 3, 2010

Monica Whitaker
Administrative Law Judge
Office of Administrative Hearings
7995 SW Mohawk St.
Tualatin, OR 97062

Re: Magar Edward Magar
OAH Case No. 901410
Notice of Civil Penalty Assessment and Order
Case No. WQ/D-NWR-09-118
Columbia County

Dear Judge Whitaker:

The following is DEQ's response to Respondent's Request for Admissions and Interrogatories.

**Admissions:**

#1 I admit to my personal knowledge there is no administrative rule in Chapter 340 forbidding amendments to discharge monitoring reports (DMRs).

#2 Though I may be able to assume that from mid-July 2005 on that it was Respondent who submitted DMRs - based on the observed document being in form and content similar to something I have seen before - I cannot admit that anyone else at DEQ would be able to make that same assumption as to the identity or certificate number of the person submitting the DMRs.

#3 I cannot admit what the maximum record flow for the Riverwood facility is. I can only admit what the reported values on the DMR have been.

#4 I cannot admit that I have seen the chronological record referred to as Exhibit A as no such exhibit accompanied or was attached to respondent's Request for Admission.

#5 I cannot admit that. In fact if I note an unusually high or low influent pH value I would contact the source reporting that value to find out the cause.

**Interrogatories:**

#1 I am unclear what is meant by the term "maximum number" as this term is not defined by either respondent's Permit or the relevant OARs or ORSs. Without knowledge of what this term refers to, I am unable to answer this question as it is written.

EXHIBIT # R3
Item M-000268

R3

p. 2

#2 See the answer to #1.

#3 See the answer to #1.

#4 See the answer to #1.

#5 Respondent is correct that OAR 340-041-0007(16)(a)(A)(ii) is inapplicable to Violation Seven of the Notice of Civil Penalty Assessment and Order and the Department apologizes for this typographical error. However, even conceding that Respondent did not violate OAR 340-041-0007(16)(a)(A)(ii), the allegation represented by Violation 7 is correctly noted as a violation of Schedule F, Section B, Condition (1) of the Permit, which is therefore a violation of ORS 468B.025(2). Therefore Respondent was given adequate notice of Violation 7 as the specific condition in Respondent's permit was referred to in this part of the Notice.

Sincerely,

Lyle Christensen
Natural Resource Specialist

cc: Bryan Smith, HQ, OCE, DEQ
Magar Edward Magar, 14102 N.E. 40th Vancouver, WA 98682

***Magar E. Magar***

**14102 NE 40th Street**
**Vancouver WA. 98682**

***Tel 360 314 4444, cell 503 929 1094 fax 360 314 4781***

**e-mail : calsport@msn.com**

***June 18, 2010***

***RE case number OAH Case Number 901410***

***Administrative Law Judge Monica Whitaker.***

Judge Whitaker
Office of Administrative Hearings
7995 SW Mohawk St.
Tualatin, Or. 97062.

Dear Judge Whitaker;

I enclose a copy of a letter I sent to Bryan Smith. In that letter I requested informally the following:

R.4 Original DMR's from mid-June 2002 to mid June 2007 (to be supplied) and

R.5 Original DMR's from mid June 2007 to date (to be supplied).

Those are exhibits in my case in chief.

It is my anticipation that Bryan Smith or the custodian of the records or some person at DEQ will informally comply.

If DEQ does not intend to honor this informal request then please take this letter as ***a renewed motion*** for the production of the records at the hearing.

The Exhibits are vital to my case .They are not in my custody. They are in the custody of the DEQ. I cannot present my case without them.

As I indicated to Bryan Smith, at your direction and at my expense I will provide acceptable substitutes as you instruct. I do quite understand that those documents are permanent records of the DEQ which will require substitution.

At present June 22 and June 23, 2010 are good dates. I see no reason why cannot proceed as scheduled.

Attachment V
August 18-19, 2010 EQC meeting
Page 142 of 370

# Discharge Monitorin Report - Oregon Department of Environmental Quality

Facility Name [illegible] MHC | Phone Number | Month/Year JANUARY 2014
DEQ Permit No. 102520 | DEQ File No./Facility ID 75541 | EPA Reference No.
Plant Type RGF | County COLUMBIA | Population Served <100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] 4-2-2014
Authorized Signature Date

CLIFF W WEST
Name (Print)

## Operator Certification

Collection Sys. Class — Principal Operator Name (print) — Certification No. & Grade
Treatment Sys. Class I — Principal Operator Name (print) CLIFF W WEST — Certification No. & Grade 9415 I

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab/Comp. Concentration mg/L | BOD Grab/Comp. Loading lbs. | CBOD mg/L | TSS Grab/Comp. Concentration mg/L | TSS Grab/Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
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| 14 | | | | | | | | |
| 15 | | 7.0 | | 280 | 9.1 | | 200 | 6.5 |
| 16 | | | | | | | | |
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| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| AILY MAXIMUM | | | | | | | | |
| /KLY. AVG. MAX. | | | | | | | | |
| ONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| /EEKLY LIMITS | | | | | | | | |
| ONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab/Comp. Concentration mg/L | BOD Grab/Comp. Removal % | BOD Grab/Comp. Loading lbs. | CBOD Grab/Comp. Concentration mg/L | CBOD Grab/Comp. Removal % | CBOD Grab/Comp. Loading lbs. | TSS Grab/Comp. Concentration mg/L | TSS Grab/Comp. Removal % | TSS Grab/Comp. Loading lbs. | NUTRIENTS Grab/Composite Total Phosphorous mg/L | Total Kjeldahl Nitrogen mg/L | Ammonia Nitrogen mg/L | Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U. | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 6.4 | 461Φ | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | ADDED $Cl_2$ | 1 |
| | 6.4 | 731Φ | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 2 |
| | 6.4 | 733Φ | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 3 |
| | 6.4 | 722Φ | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | | 4 |
| | * | — | | | | | | | | | | | | | | | | — | | | | | | | | | | | | 5 |
| | * | — | | | | | | | | | | | | | | | | — | | | | | | | | | | | | 6 |
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| | * | — | | | | | | | | | | | | | | | | — | | | | | | | | | | | | 8 |
| | 6.4 | 2388Φ | 4 DAY FLOW | | | | | | | | | | | | | | | .1 | | | | | | | | | | | ADDED $Cl_2$ | 9 |
| | 6.3 | 743Φ | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 10 |
| | 6.4 | 678Φ | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 11 |
| | 6.4 | 600Φ | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 12 |
| | 6.4 | 445Φ | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | ADDED $Cl_2$ | 13 |
| | 6.4 | 408Φ | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | | 14 |
| | 6.4 | 353Φ | | 38 | 86 | 1.2 | | | | 12 | 94 | .39 | | | 7.2 | | | 1.5 | | | 2419 | | | | | | | | | 15 |
| | 6.4 | 389Φ | | | | | | | | | | | | | | | | 1.Φ | | | | | | | | | | | | 16 |
| | 6.4 | 461Φ | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | ADDED $Cl_2$ | 17 |
| | 6.4 | 476Φ | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | 18 |
| | 6.4 | 461Φ | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | ADDED $Cl_2$ | 19 |
| | 6.4 | 751Φ | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 20 |
| | 6.4 | 666Φ | | | | | | | | | | | | | | | | 1.8 | | | | | | | | | | | | 21 |
| | 6.4 | 464Φ | | | | | | | | | | | | | | | | 1.9 | | | | | | | | | | | | 22 |
| | 6.4 | 632Φ | | | | | | | | | | | | | | | | 1.Φ | | | | | | | | | | | | 23 |
| | 6.4 | 778Φ | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 24 |
| | 6.4 | 671Φ | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | ADDED $Cl_2$ | 25 |
| | 6.4 | 553Φ | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 26 |
| | 6.4 | 600Φ | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | 27 |
| | 6.4 | 975Φ | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | ADDED $Cl_2$ | 28 |
| | 6.4 | 1227Φ | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | | 29 |
| | 6.4 | 1093Φ | | | | | | | | | | | | | | | | 1.Φ | | | | | | | | | | | | 30 |
| | 6.4 | 783Φ | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 31 |
| | | 19194Φ | | 38 | | 1.2 | | | | 12 | | .39 | | | 7.2 | | | 23.2 | | | 2419 | | | | | | | | | TOTAL |
| | 6.3 | 389Φ | | | | | | | | | | | | | | | | .1 | | | | | | | | | | | | DAILY MINIMUM |
| | 6.4 | 1227Φ | | | | | | | | | | | | | | | | 1.8 | | | | | | | | | | | | DAILY MAXIMUM |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| | | 619Φ | | 38 | 86 | 1.2 | | | | 12 | 94 | .39 | | | 7.2 | | | .8 | | | 2419 | | | | | | | | | MONTHLY AVERAGE |
| | 6.Φ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| | ↓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| | 9.Φ | 13K | | 3Φ | 85% | 3 | | | | 3Φ | 85% | 3 | | | | | | | | | 126 | | | | | | | | | MONTHLY LIMITS |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: ST HELENS PAC | Phone Number: — | Month/Year: FEBRUARY 2004
DEQ Permit No.: 102526 | DEQ File No./Facility ID: 75541 | EPA Reference No.: —
Plant Type: T.G.F. | County: COLUMBIA | Population Served: <100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x [signature] — Authorized Signature — 2-3-2004 Date

CLIFF W WEST — Name (Print)

## Operator Certification

Collection Sys. Class: — Principal Operator Name (print): — Certification No. & Grade: —
Treatment Sys. Class: I Principal Operator Name (print): CLIFF W WEST Certification No. & Grade: 9425-I

| Date | INFLUENT Temperature °F/°C | INFLUENT pH S.U. | INFLUENT Flow MGD | INFLUENT BOD Grab/Comp. Concentration mg/L | INFLUENT BOD Grab/Comp. Loading lbs. | INFLUENT CBOD mg/L | INFLUENT TSS Grab/Comp. Concentration mg/L | INFLUENT TSS Grab/Comp. Loading lbs. | EFFLUENT Temperature °F/°C | EFFLUENT pH S.U. | EFFLUENT Flow MGD | EFFLUENT DO mg/L | EFFLUENT BOD Grab Concentration mg/L | EFFLUENT BOD Removal % | EFFLUENT BOD Loading lbs. | EFFLUENT CBOD Grab Concentration mg/L | EFFLUENT CBOD Removal % | EFFLUENT CBOD Loading lbs. | EFFLUENT TSS Grab Concentration mg/L | EFFLUENT TSS Removal % | EFFLUENT TSS Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MF E.coli CFU/100 ml | COLIFORM MF Fecal CFU/100 ml | COLIFORM MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | 6.4 | 838Φ | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | |
| 2 | | | | | | | | | | 6.4 | 829Φ | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | ADDED Cl2 | 2 |
| 3 | | | | | | | | | | 6.4 | 695Φ | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | 3 |
| 4 | | | | | | | | | | 6.4 | 586Φ | | | | | | | | | | | | | | | | | 1.9 | | | | | | | | | | | 4 |
| 5 | | 6.9 | | 130 | 6.0 | | 160 | 7.4 | | 6.4 | 560Φ | | 14 | 89 | .65 | | | | 4 | 97 | .18 | | | | | | 1.3 | | | <1 | | | | | | | | 5 |
| 6 | | | | | | | | | | 6.4 | 571Φ | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | ADDED Cl2 | 6 |
| 7 | | | | | | | | | | 6.4 | 551Φ | | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | 7 |
| 8 | | | | | | | | | | 6.4 | 477Φ | | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | 8 |
| 9 | | | | | | | | | | 6.4 | 418Φ | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | 9 |
| 10 | | | | | | | | | | 6.4 | 445Φ | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | ADDED Cl2 | 10 |
| 11 | | | | | | | | | | 6.4 | 428Φ | | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | 11 |
| 12 | | | | | | | | | | 6.4 | 481Φ | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | EFF TURBID | 12 |
| 13 | | | | | | | | | | 6.4 | 419Φ | | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | ADDED Cl2 ↑ | 13 |
| 14 | | | | | | | | | | 6.8 | 361Φ | | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | 14 |
| 15 | | | | | | | | | | 6.8 | 331Φ | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 15 |
| 16 | | | | | | | | | | 6.8 | 436Φ | | | | | | | | | | | | | | | | | 0.0 | | | | | | | | | | ADDED Cl2 | 16 |
| 17 | | | | | | | | | | 6.6 | 662Φ | | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | EFF TURBID ↑ | 17 |
| 18 | | | | | | | | | | 6.6 | 722Φ | | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | 18 |
| 19 | | | | | | | | | | 6.6 | 760Φ | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | ADDED Cl2 | 19 |
| 20 | | | | | | | | | | 6.6 | 633Φ | | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | 20 |
| 21 | | | | | | | | | | 6.6 | 592Φ | | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | 21 |
| 22 | | | | | | | | | | 6.6 | 671Φ | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 22 |
| 23 | | | | | | | | | | 6.6 | 644Φ | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | ADDED Cl2 | 23 |
| 24 | | | | | | | | | | 6.6 | 662Φ | | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | 24 |
| 25 | | | | | | | | | | 6.6 | 688Φ | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | 25 |
| 26 | | | | | | | | | | 6.6 | 776Φ | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | 26 |
| 27 | | | | | | | | | | 6.6 | 879Φ | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | ADDED Cl2 | 27 |
| 28 | | | | | | | | | | 6.6 | 857Φ | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | ADDED Cl2 | 28 |
| 29 | | | | | | | | | | 6.6 | 703Φ | | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | WEEDED FILTER ↑ | 29 |
| 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | 130 | 6.0 | | 160 | 7.4 | | | 17480Φ | | 14 | | .65 | | | | 4 | | .18 | | | | | | 20.8 | | | | <1 | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | 6.4 | 331Φ | | | | | | | | | | | | | | | | | 0.0 | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | 6.8 | 879Φ | | | | | | | | | | | | | | | | | 1.9 | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | 13Φ | 6.0 | | 16Φ | 7.4 | | | 6Φ3Φ | | 14 | 89 | .65 | | | | 4 | 97 | .18 | | | | | | 0.9 | | | | <1 | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | 6.0 | 13K | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | ↓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | 9.0 | | | 30 | 85% | 3 | | | | 30 | 85% | 3 | | | | | | | | | | 126 | | | | | | | | MONTHLY LIMITS |

Attachment V
August 18-19, 2010 EQC meeting
Page 144 of 370

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name REVEREWOOD MHC | Phone Number | Month/Year MARCH 2K+4
DEQ Permit No. 102520 | DEQ File No./Facility ID 75541 | EPA Reference No.
Plant Type R.G.F. | County COLUMBIA | Population Served <100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] — Authorized Signature — Date: 8-4-2K+4

CLIFF W WEST — Name (Print)

## Operator Certification

Collection Sys. Class — Principal Operator Name (print) — Certification No. & Grade
Treatment Sys. Class I — Principal Operator Name (print) CLIFF W WEST — Certification No. & Grade 9415 I

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab/Comp. Concentration mg/L | BOD Grab/Comp. Loading lbs. | CBOD mg/L | TSS Grab/Comp. Concentration mg/L | TSS Grab/Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | 6.9 | | 13Ø | 9.3 | | 19Ø | 13.6 |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
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| 16 | | | | | | | | |
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| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | 13Ø | | | 19Ø | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | 13Ø | | | 19Ø | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab/Comp. Concentration mg/L | BOD Grab/Comp. Removal % | BOD Grab/Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab/Comp. Concentration mg/L | TSS Grab/Comp. Removal % | TSS Grab/Comp. Loading lbs. | NUTRIENTS Grab: Total Phosphorous mg/L | NUTRIENTS Grab: Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite: Ammonia Nitrogen mg/L | NUTRIENTS Composite: Nitrate Nitrogen mg/L | DISINFECTION CHLORINE: Used lbs. | DISINFECTION CHLORINE: Total Residual mg/L | DISINFECTION UV: Transmittance % | Turbidity N.T.U | COLIFORM: E.coli MPN/MF CFU/100 ml | COLIFORM: Fecal MPN/MF CFU/100 ml | COLIFORM: Total MPN/MF CFU/100 ml | RECEIVING STREAM: Ammonia mg/L | RECEIVING STREAM: Dilution | RECEIVING STREAM: Stream Flow CFS | RECEIVING STREAM: Temperature °F/°C | RECEIVING STREAM: pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 6.6 | 827Ø | | | | | | | | | | | | | | | Ø.9 | | | | | | | | | | | | | 1 |
| | 6.6 | 628Ø | | | | | | | | | | | | | | | Ø.8 | | | | | | | | | | | | | 2 |
| | 6.6 | 886Ø | | | | | | | | | | | | | | | Ø.4 | | | | | | | | | | | | ADDED $Cl_2$ | 3 |
| | 6.5 | 868Ø | | 6 | 95 | .43 | | | | 3 | 98 | .21 | | | | | Ø.5 | | | 6 | | | | | | | | | | 4 |
| | 6.6 | 814Ø | | | | | | | | | | | | | | | Ø.5 | | | | | | | | | | | | | 5 |
| | 6.6 | 815Ø | | | | | | | | | | | | | | | Ø.4 | | | | | | | | | | | | ADDED $Cl_2$ | 6 |
| | 6.6 | 706Ø | | | | | | | | | | | | | | | Ø.8 | | | | | | | | | | | | | 7 |
| | 6.6 | 643Ø | | | | | | | | | | | | | | | Ø.6 | | | | | | | | | | | | ADDED $Cl_2$ | 8 |
| | 6.6 | 642Ø | | | | | | | | | | | | | | | 1.Ø | | | | | | | | | | | | | 9 |
| | 6.6 | 649Ø | | | | | | | | | | | | | | | Ø.9 | | | | | | | | | | | | | 10 |
| | 6.6 | 631Ø | | | | | | | | | | | | | | | 1.Ø | | | | | | | | | | | | | 11 |
| | 6.6 | 576Ø | | | | | | | | | | | | | | | Ø.8 | | | | | | | | | | | | | 12 |
| | 6.6 | 626Ø | | | | | | | | | | | | | | | 1.Ø | | | | | | | | | | | | | 13 |
| | 6.6 | 618Ø | | | | | | | | | | | | | | | Ø.8 | | | | | | | | | | | | | 14 |
| | 6.6 | 632Ø | | | | | | | | | | | | | | | Ø.5 | | | | | | | | | | | | ADDED $Cl_2$ | 15 |
| | 6.6 | 535Ø | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | | 16 |
| | 6.6 | 621Ø | | | | | | | | | | | | | | | Ø.5 | | | | | | | | | | | | ADDED $Cl_2$ | 17 |
| | 6.6 | 551Ø | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | | 18 |
| | 6.6 | 568Ø | | | | | | | | | | | | | | | 1.Ø | | | | | | | | | | | | | 19 |
| | 6.6 | 586Ø | | | | | | | | | | | | | | | Ø.5 | | | | | | | | | | | | ADDED $Cl_2$ | 20 |
| | 6.6 | 574Ø | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | | 21 |
| | 6.6 | 577Ø | | | | | | | | | | | | | | | Ø.9 | | | | | | | | | | | | | 22 |
| | 6.6 | 660Ø | | | | | | | | | | | | | | | Ø.5 | | | | | | | | | | | | ADDED $Cl_2$ | 23 |
| | 6.6 | 627Ø | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | | 24 |
| | 6.6 | 658Ø | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | | 25 |
| | 6.6 | 539Ø | | | | | | | | | | | | | | | Ø.9 | | | | | | | | | | | | | 26 |
| | 6.6 | 619Ø | | | | | | | | | | | | | | | Ø.6 | | | | | | | | | | | | ADDED $Cl_2$ | 27 |
| | 6.6 | 525Ø | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | | 28 |
| | 6.6 | 543Ø | | | | | | | | | | | | | | | Ø.8 | | | | | | | | | | | | | 29 |
| | 6.6 | 584Ø | | | | | | | | | | | | | | | Ø.5 | | | | | | | | | | | | ADDED $Cl_2$ | 30 |
| | 6.6 | 517Ø | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | | 31 |
| | | 19824Ø | | 6 | | .43 | | | | 3 | | .21 | | | | | 25.1 | | | 6 | | | | | | | | | TOTAL | |
| | 6.5 | 584Ø | | | | | | | | | | | | | | | Ø.4 | | | | | | | | | | | | DAILY MINIMUM | |
| | 6.6 | 886Ø | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | DAILY MAXIMUM | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| | | 6395 | | 6 | 95 | .43 | | | | 3 | 98 | .21 | | | | | Ø.8 | | | 6 | | | | | | | | | MONTHLY AVERAGE | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | |
| | | 13K | | 3Ø | 85% | 3 | | | | 3Ø | 85% | 3 | | | | | | | | 126 | | | | | | | | | MONTHLY LIMITS | |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: NEWBERG SOD MHC | Phone Number: | Month/Year: APRIL 2K+4
DEQ Permit No.: 102526 | DEQ File No./Facility ID: 75541 | EPA Reference No.:
Plant Type: TRF | County: COLUMBIA | Population Served: <1PP

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] Authorized Signature — 7-5-2K+4 Date

CLIFF W WEST Name (Print)

## Operator Certification

Collection Sys. Class: | Principal Operator Name (print): | Certification No. & Grade:
Treatment Sys. Class: 1 | Principal Operator Name (print): CLIFF W WEST | Certification No. & Grade: 9415-I

| Date | INFLUENT Temperature °F/°C | pH | Flow | BOD Grab/Comp. Concentration | BOD Grab/Comp. Loading | CBOD | TSS Grab/Comp. Concentration | TSS Grab/Comp. Loading | EFFLUENT Temperature °F/°C | pH | Flow | DO | BOD Grab Concentration | BOD Comp. Removal | BOD Comp. Loading | CBOD Grab Concentration | CBOD Comp. Removal | CBOD Comp. Loading | TSS Grab Concentration | TSS Comp. Removal | TSS Comp. Loading | NUTRIENTS Grab Total Phosphorous | NUTRIENTS Grab Total Kjeldahl Nitrogen | NUTRIENTS Composite Ammonia Nitrogen | NUTRIENTS Composite Nitrate Nitrogen | DISINFECTION CHLORINE Used | DISINFECTION CHLORINE Total Residual | DISINFECTION UV Trans-mittance | Turbidity | COLIFORM MPN/MF E.coli | COLIFORM MPN/MF Fecal | COLIFORM MPN/MF Total | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | S.U. | MGD | mg/L | lbs. | mg/L | mg/L | lbs. | | S.U. | MGD | mg/L | mg/L | % | lbs. | mg/L | % | lbs. | mg/L | % | lbs. | mg/L | | | | lbs. | mg/L | % | N.T.U | CFU/100 ml | | | CFS | | S.U. | | |
| 1 | | | | | | | | | | 6.6 | 4960 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | ADDED Cl2 | 1 |
| 2 | | | | | | | | | | 6.6 | 4270 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | 2 |
| 3 | | | | | | | | | | 6.6 | 4600 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | 3 |
| 4 | | | | | | | | | | 6.6 | 3480 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | 4 |
| 5 | | | | | | | | | | 6.6 | 2780 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 5 |
| 6 | | | | | | | | | | 6.6 | 4330 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 6 |
| 7 | | | | | | | | | | 6.6 | 4180 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | ADDED Cl2 | 7 |
| 8 | | 6.9 | | 150 | 4.8 | | 200 | 6.4 | | 6.6 | 3880 | | 6 | 96 | .19 | | | | 3 | 98 | .09 | | | 6.6 | | | 1.4 | | | 0 | | | | | | | | 8 |
| 9 | | | | | | | | | | 6.6 | 3510 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | 9 |
| 10 | | | | | | | | | | 6.6 | 3790 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | 10 |
| 11 | | | | | | | | | | 6.6 | 3380 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | 11 |
| 12 | | | | | | | | | | 6.6 | 5030 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | ADDED Cl2 | 12 |
| 13 | | | | | | | | | | 6.6 | 3730 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | 13 |
| 14 | | | | | | | | | | 6.6 | 3860 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 14 |
| 15 | | | | | | | | | | 6.6 | 3510 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | ADDED Cl2 | 15 |
| 16 | | | | | | | | | | 6.6 | 4190 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | 16 |
| 17 | | | | | | | | | | 6.6 | 5210 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | ADDED Cl2 | 17 |
| 18 | | | | | | | | | | 6.6 | 3370 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | WEEDED FILTER | 18 |
| 19 | | | | | | | | | | 6.6 | 4970 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 19 |
| 20 | | | | | | | | | | 6.6 | 5510 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | 20 |
| 21 | | | | | | | | | | 6.6 | 6020 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | ADDED Cl2 | 21 |
| 22 | | | | | | | | | | 6.6 | 4590 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | FINISHED WEEDING | 22 |
| 23 | | | | | | | | | | 6.6 | 4330 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | 23 |
| 24 | | | | | | | | | | 6.6 | 6550 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 24 |
| 25 | | | | | | | | | | 6.6 | 5390 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | ADDED Cl2 | 25 |
| 26 | | | | | | | | | | 6.6 | 5470 | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | 26 |
| 27 | | | | | | | | | | 6.6 | 5160 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | 27 |
| 28 | | | | | | | | | | 6.6 | 5410 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | 28 |
| 29 | | | | | | | | | | 6.6 | 4720 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | ADDED Cl2 | 29 |
| 30 | | | | | | | | | | 6.6 | 4850 | | | | | | | | | | | | | | | | 1.7 | | | | | | | | | | | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | 150 | 4.8 | | 200 | 6.4 | | | 136838 | | 6 | | .19 | | | | 3 | | .09 | | | 6.6 | | | 24.8 | | | 0 | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | 6.6 | 3370 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | 6.6 | 5510 | | | | | | | | | | | | | | | | 1.7 | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | 150 | 4.8 | | 200 | 6.4 | | | 4535 | | 6 | 96 | .19 | | | | 3 | 98 | .09 | | | 6.6 | | | 0.8 | | | 0 | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | .013 | | 30 | 85 | 3 | | | | 30 | 85 | 3 | | | | | | | | | 126 | | | | | | | | MONTHLY LIMITS |

Attachment V
August 18-19, 2010 EQC meeting

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name [illegible] Phone Number _____ Month/Year MAY 2K+4

DEQ Permit No. 102526 DEQ File No./Facility ID 75541 EPA Reference No. _____

Plant Type → COLUMBIA ← County R6F Population Served <100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x CLIFF W WEST — Authorized Signature — 10-6-2K+4 Date

CLIFF W WEST — Name (Print)

## Operator Certification

Collection Sys. Class NA Principal Operator Name (print) _____ Certification No. & Grade _____

Treatment Sys. Class 1 Principal Operator Name (print) CLIFF W WEST Certification No. & Grade 9415-1

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab/Comp. Concentration mg/L | BOD Grab/Comp. Loading lbs. | CBOD mg/L | TSS Grab/Comp. Concentration mg/L | TSS Grab/Comp. Loading lbs. |
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| 13 | | | | 27Φ | 8.8 | | 23Φ | 7.5 |
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| 30 | | | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | 27Φ | | | 23Φ | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | 27Φ | | | 23Φ | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab/Comp. Concentration mg/L | BOD Grab/Comp. Removal % | BOD Grab/Comp. Loading lbs. | CBOD Grab/Comp. Concentration mg/L | CBOD Grab/Comp. Removal % | CBOD Grab/Comp. Loading lbs. | TSS Grab/Comp. Concentration mg/L | TSS Grab/Comp. Removal % | TSS Grab/Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM E.coli MPN/MF CFU/100 ml | COLIFORM Fecal MPN/MF | COLIFORM Total MPN/MF | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.6 | 434Φ | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | |
| 2 | | 6.6 | 567Φ | | | | | | | | | | | | | | | | .07 | | | | | | | | | | | ADDED $Cl_2$ |
| 3 | | 6.6 | 466Φ | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | |
| 4 | | 6.6 | 697Φ | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | |
| 5 | | 6.6 | 593Φ | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | |
| 6 | | 6.6 | 392Φ | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | ADDED $Cl_2$ |
| 7 | | 6.6 | 408Φ | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | |
| 8 | | 6.6 | 452Φ | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | |
| 9 | | 6.6 | 521Φ | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | |
| 10 | | 6.6 | 481Φ | | | | | | | | | | | | | | | | .2 | | | | | | | | | | | ADDED $Cl_2$ |
| 11 | | 6.6 | 420Φ | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | |
| 12 | | 6.6 | 496Φ | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | |
| 13 | | 6.6 | 391Φ | 6 | 97% | .19 | | | | 7 | 97% | .22 | | | | | | | .5 | | | 1Φ | | | | | | | | |
| 14 | | 6.6 | 412Φ | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | |
| 15 | | 6.6 | 542Φ | | | | | | | | | | | | | | | | .2 | | | | | | | | | | | ADDED $Cl_2$ |
| 16 | | 6.6 | 335Φ | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | |
| 17 | | 6.6 | 323Φ | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | |
| 18 | | 6.6 | 368Φ | | | | | | | | | | | | | | | | .3 | | | | | | | | | | | ADDED $Cl_2$ |
| 19 | | 6.6 | 358Φ | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | |
| 20 | | 6.6 | 345Φ | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | |
| 21 | | 6.6 | 268Φ | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | |
| 22 | | 6.6 | 447Φ | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | ADDED $Cl_2$ |
| 23 | | 6.6 | 197Φ | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | |
| 24 | | 6.6 | 336Φ | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | |
| 25 | | 6.6 | 188Φ | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | |
| 26 | | 6.6 | 163Φ | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | ADDED $Cl_2$ |
| 27 | | 6.6 | 382Φ | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | |
| 28 | | 6.6 | 214Φ | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | |
| 29 | | 6.6 | 326Φ | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | |
| 30 | | 6.6 | 386Φ | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | ADDED $Cl_2$ |
| 31 | | 6.6 | 331Φ | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | |
| TOTAL | | | 11978Φ | 6 | | .19 | | | | 7 | | .22 | | | | | | | 22.5 | | | 1Φ | | | | | | | | |
| DAILY MINIMUM | | | 163Φ | | | | | | | | | | | | | | | | .2 | | | | | | | | | | | |
| DAILY MAXIMUM | | | 697Φ | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVERAGE | | | 386Φ | 6 | 97% | .19 | | | | 7 | 97% | .22 | | | | | | | .72 | | | 1Φ | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | 13K | 2Φ | 85% | 2 | | | | 2Φ | 85% | 2 | | | | | | | | | | 126 | | | | | | | | |

Attachment V
August 18-19, 2010 EQC meeting
Page 147 of 3707

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name PARKDALE (WWTP) | Phone Number | Month/Year JUNE 2K14
DEQ Permit No. 102520 | DEQ File No./Facility ID 75541 | EPA Reference No.
Plant Type R.B.C. | County COLUMBIA | Population Served <100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X Cliff West — Authorized Signature — 7-7-2K14 — Date

CLIFF W WEST — Name (Print)

## Operator Certification

Collection Sys. Class N/A | Principal Operator Name (print) | Certification No. & Grade
Treatment Sys. Class I | Principal Operator Name (print) CLIFF W WEST | Certification No. & Grade 9345-I

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab/Comp. Concentration mg/L | BOD Grab/Comp. Loading lbs. | CBOD mg/L | TSS Grab/Comp. Concentration mg/L | TSS Grab/Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | 6.8 | | 170 | 6.8 | | 142 | 5.7 |
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| 31 | | | | | | | | |
| TOTAL | | | 170 | 6.8 | | 142 | 5.7 | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | 170 | 6.8 | | 142 | 5.7 | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab/Comp. Concentration mg/L | BOD Grab/Comp. Removal % | BOD Grab/Comp. Loading lbs. | CBOD Grab/Comp. Concentration mg/L | CBOD Grab/Comp. Removal % | CBOD Grab/Comp. Loading lbs. | TSS Grab/Comp. Concentration mg/L | TSS Grab/Comp. Removal % | TSS Grab/Comp. Loading lbs. | NUTRIENTS Grab: Total Phosphorous mg/L | NUTRIENTS Composite: Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite: Ammonia Nitrogen mg/L | NUTRIENTS Composite: Nitrate Nitrogen mg/L | DISINFECTION CHLORINE: Used lbs. | DISINFECTION CHLORINE: Total Residual mg/L | DISINFECTION UV: Transmittance % | Turbidity N.T.U. | COLIFORM MF: E.coli CFU/100 ml | COLIFORM MF: Fecal CFU/100 ml | COLIFORM MF: Total CFU/100 ml | RECEIVING STREAM: Ammonia | RECEIVING STREAM: Dilution | RECEIVING STREAM: Stream Flow CFS | RECEIVING STREAM: Temperature °F/°C | RECEIVING STREAM: pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 6.6 | 341Ø | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 1 |
| | 6.6 | 392Ø | | | | | | | | | | | | | | | | Ø.8 | | | | | | | | | | | | 2 |
| | 6.6 | 484Ø | | 4 | 97 | .16 | | | | 3 | 98 | .12 | | | | | | 1.1 | | | Ø | | | | | | | | | 3 |
| | 6.6 | 433Ø | | | | | | | | | | | | | | | | Ø.8 | | | | | | | | | | | | 4 |
| | 6.6 | 583Ø | | | | | | | | | | | | | | | | Ø.5 | | | | | | | | | | | ADDED Cl2 | 5 |
| | 6.6 | 541Ø | | | | | | | | | | | | | | | | Ø.9 | | | | | | | | | | | | 6 |
| | 6.6 | 383Ø | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 7 |
| | 6.6 | 447Ø | | | | | | | | | | | | | | | | Ø.7 | | | | | | | | | | | | 8 |
| | 6.6 | 468Ø | | | | | | | | | | | | | | | | Ø.4 | | | | | | | | | | | ADDED Cl2 | 9 |
| | 6.6 | 324Ø | | | | | | | | | | | | | | | | Ø.9 | | | | | | | | | | | | 10 |
| | 6.6 | 483Ø | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 11 |
| | 6.6 | 391Ø | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | 12 |
| | 6.6 | 436Ø | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 13 |
| | 6.6 | 386Ø | | | | | | | | | | | | | | | | Ø.8 | | | | | | | | | | | | 14 |
| | 6.6 | 362Ø | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 15 |
| | 6.6 | 401Ø | | | | | | | | | | | | | | | | Ø.8 | | | | | | | | | | | | 16 |
| | 6.6 | 354Ø | | | | | | | | | | | | | | | | Ø.6 | | | | | | | | | | | | 17 |
| | 6.6 | 376Ø | | | | | | | | | | | | | | | | Ø.4 | | | | | | | | | | | ADDED Cl2 | 18 |
| | 6.6 | 330Ø | | | | | | | | | | | | | | | | 1.Ø | | | | | | | | | | | | 19 |
| | 6.6 | 421Ø | | | | | | | | | | | | | | | | Ø.7 | | | | | | | | | | | | 20 |
| | 6.6 | 289Ø | | | | | | | | | | | | | | | | Ø.4 | | | | | | | | | | | ADDED Cl2 | 21 |
| | 6.6 | 361Ø | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | 22 |
| | 6.6 | 319Ø | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | WEEDED FILTER | 23 |
| | 6.6 | 3Ø8Ø | | | | | | | | | | | | | | | | Ø.9 | | | | | | | | | | | | 24 |
| | 6.6 | 266Ø | | | | | | | | | | | | | | | | Ø.7 | | | | | | | | | | | | 25 |
| | 6.6 | 313Ø | | | | | | | | | | | | | | | | Ø.4 | | | | | | | | | | | ADDED Cl2 | 26 |
| | 6.6 | 298Ø | | | | | | | | | | | | | | | | Ø.8 | | | | | | | | | | | | 27 |
| | 6.6 | 188Ø | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 28 |
| | 6.6 | 284Ø | | | | | | | | | | | | | | | | 1.Ø | | | | | | | | | | | | 29 |
| | 6.6 | 289Ø | | | | | | | | | | | | | | | | Ø.5 | | | | | | | | | | | ADDED Cl2 | 30 |
| | — | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| | | 1698Ø | | 4 | | .16 | | | | 3 | | .12 | | | | | | 25.9 | | | Ø | | | | | | | | | TOTAL |
| | 6.6 | 188Ø | | | | | | | | | | | | | | | | Ø.4 | | | | | | | | | | | | DAILY MINIMUM |
| | 6.6 | 541Ø | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | DAILY MAXIMUM |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| | | 3663 | | 4 | 97 | .16 | | | | 3 | 98 | .12 | | | | | | Ø.86 | | | Ø | | | | | | | | | MONTHLY AVERAGE |
| | 6.Ø | 13K | | 2Ø | 85% | 2 | | | | 2Ø | 85% | 2 | | | | | | | | | 126 | | | | | | | | | DAILY LIMITS |
| | ↓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| | 9.Ø | | | 2Ø | | 2 | | | | 2Ø | | 2 | | | | | | | | | 126 | | | | | | | | | MONTHLY LIMITS |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: RIVERWOOD | Phone Number: | Month/Year: JULY 2K+4
DEQ Permit No.: 102526 | DEQ File No./Facility ID: 75541 | EPA Reference No.:
Plant Type: R.G.F. | County: COLUMBIA | Population Served: 2100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X CLIFF West — Authorized Signature — 10-8-2K+4 — Date

CLIFF W WEST — Name (Print)

## Operator Certification

Collection Sys. Class: N/A | Principal Operator Name (print): | Certification No. & Grade:
Treatment Sys. Class: 1 | Principal Operator Name (print): CLIFF W WEST | Certification No. & Grade: 9415-I

**INFLUENT**

| Date | Temperature °F | Temperature °C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|---|
| 1 | | | 6.8 | | 160 | 4.4 | | 380 | 10.5 |
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| TOTAL | | | | | 160 | | | 380 | |
| DAILY MINIMUM | | | | | | | | | |
| AILY MAXIMUM | | | | | | | | | |
| KLY. AVG. MAX. | | | | | | | | | |
| ONTHLY AVG. | | | | | 160 | | | 380 | |
| DAILY LIMITS | | | | | | | | | |
| EEKLY LIMITS | | | | | | | | | |
| ONTHLY LIMITS | | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Temperature °F | Temperature °C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U. | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 6.6 | 333Ø | | 4 | 97 | .11 | | | | 6 | 98 | .16 | | | 6.6 | | | 1.4 | | | Ø | | | | | | | | | 1 |
| | | 6.6 | 299Ø | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 2 |
| | | 6.6 | 369Ø | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 3 |
| | | 6.6 | 315Ø | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 4 |
| | | 6.6 | 394Ø | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | ADDED $Cl_2$ | 5 |
| | | 6.6 | 262Ø | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 6 |
| | | 6.6 | 303Ø | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 7 |
| | | 6.6 | 364Ø | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | ADDED $Cl_2$ | 8 |
| | | 6.6 | 121Ø | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 9 |
| | | 6.6 | 353Ø | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 10 |
| | | 6.6 | 282Ø | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 11 |
| | | 6.6 | 258Ø | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | ADDED $Cl_2$ | 12 |
| | | 6.6 | 232Ø | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | 13 |
| | | 6.6 | 243Ø | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 14 |
| | | 6.6 | 237Ø | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 15 |
| | | 6.6 | 251Ø | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 16 |
| | | 6.6 | 215Ø | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | ADDED $Cl_2$ | 17 |
| | | 6.6 | 228Ø | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 18 |
| | | 6.6 | 226Ø | | | | | | | | | | | | | | | | >3.0 | | | | | | | | | | | | 19 |
| | | 6.6 | 339Ø | | | | | | | | | | | | | | | | 3.1 | | | | | | | | | | | | 20 |
| | | 6.6 | 179Ø | | | | | | | | | | | | | | | | 2.6 | | | | | | | | | | | | 21 |
| | | 6.6 | 327Ø | | | | | | | | | | | | | | | | 2.Ø | | | | | | | | | | | | 22 |
| | | 6.6 | 312Ø | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | 23 |
| | | 6.6 | 322Ø | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 24 |
| | | 6.6 | 353Ø | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | ADDED $Cl_2$ | 25 |
| | | 6.6 | 278Ø | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 26 |
| | | 6.6 | 240Ø | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 27 |
| | | 6.6 | 35Ø | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | ADDED $Cl_2$ | 28 |
| | | 6.6 | 9Ø | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | 29 |
| | | 6.6 | 38Ø | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | 30 |
| | | 6.6 | NONE | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 31 |
| | | | 7594Ø | | 4 | | .11 | | | | 6 | | .16 | | | 6.6 | | | 34.2 | | | Ø | | | | | | | | | TOTAL |
| | | 6.6 | NONE | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | DAILY MINIMUM |
| | | 6.6 | 394Ø | | | | | | | | | | | | | | | | >3.0 | | | | | | | | | | | | DAILY MAXIMUM |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| | | | 245Ø | | 4 | 97 | .11 | | | | 6 | 98 | .16 | | | 6.6 | | | 1.1 | | | Ø | | | | | | | | | MONTHLY AVERAGE |
| | | | 13K | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| | | | | | 2Ø | 85% | 2 | | | | 2Ø | 85% | 2 | | | | | | | | | 126 | | | | | | | | | MONTHLY LIMITS |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: ROSEBURG MHC | Phone Number: | Month/Year: AUGUST 2K+4
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.:
Plant Type: REF | County: COLUMBIA | Population Served: 2100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] — Authorized Signature — 6-9-2K+4 Date

CLIFF W WEST — Name (Print)

## Operator Certification

Collection Sys. Class: N/A | Principal Operator Name (print): | Certification No. & Grade:
Treatment Sys. Class: I | Principal Operator Name (print): CLIFF W WEST | Certification No. & Grade: 9415 - I

| INFLUENT | | | | | | | EFFLUENT (identify outfall number -- e.g. 001, 002, 003): | | | | | | |

# Discharge Monitori g Report - Oregon Department of Environmental Quality

Facility Name RIVER'S EDD | Phone Number | Month/Year SEPTEMBER 2004
DEQ Permit No. 102520 | DEQ File No./Facility ID 75541 | EPA Reference No. —
Plant Type R.G.F. | County COLUMBIA | Population Served 2100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] Authorized Signature — 10-10-2004 Date

CLIFF W WEST Name (Print)

## Operator Certification

Collection Sys. Class N/A | Principal Operator Name (print) | Certification No. & Grade
Treatment Sys. Class 1 | Principal Operator Name (print) CLIFF W WEST | Certification No. & Grade 9415 1

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab/Comp. Concentration mg/L | BOD Grab/Comp. Loading lbs. | CBOD mg/L | TSS Grab/Comp. Concentration mg/L | TSS Grab/Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | 7.2 | | 190 | 9.9 | | 50 | 2.6 |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
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| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | 19Ø | 9.9 | | 5Ø | 2.6 | |
| DAILY MINIMUM | | | | | | | | |
| AILY MAXIMUM | | | | | | | | |
| 'KLY. AVG. MAX. | | | | | | | | |
| ONTHLY AVG. | | | 19Ø | 9.9 | | 5Ø | 2.6 | |
| DAILY LIMITS | | | | | | | | |
| EEKLY LIMITS | | | | | | | | |
| ONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab/Comp. Concentration mg/L | BOD Grab/Comp. Removal % | BOD Grab/Comp. Loading lbs. | CBOD Grab/Comp. Concentration mg/L | CBOD Grab/Comp. Removal % | CBOD Grab/Comp. Loading lbs. | TSS Grab/Comp. Concentration mg/L | TSS Grab/Comp. Removal % | TSS Grab/Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Transmittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.4 | 3717 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | 1 |
| 2 | | 6.4 | 6242 | | 4 | 97 | .2 | | | | 2 | 96 | .1 | | | | | | Ø.8 | | | Ø | | | | | | | | | FIRST SAMPLES | 2 |
| 3 | | 6.4 | 3536 | | | | | | | | | | | | | | | | Ø.7 | | | | | | | | | | | | WEEDED FILTER | 3 |
| 4 | | 6.4 | 6447 | | | | | | | | | | | | | | | | Ø.4 | | | | | | | | | | | | ADDED Cl2 | 4 |
| 5 | | 6.4 | 4415 | | | | | | | | | | | | | | | | Ø.7 | | | | | | | | | | | | | 5 |
| 6 | | 6.4 | 4358 | | | | | | | | | | | | | | | | Ø.6 | | | | | | | | | | | | ADDED Cl2 | 6 |
| 7 | | 6.4 | 2884 | | | | | | | | | | | | | | | | Ø.9 | | | | | | | | | | | | | 7 |
| 8 | | 6.4 | 32 | | | | | | | | | | | | | | | | 2.4 | | | | | | | | | | | | FLOWMETER | 8 |
| 9 | | 6.4 | 771 | | | | | | | | | | | | | | | | Ø.8 | | | | | | | | | | | | PROBLEMS | 9 |
| 10 | | 6.4 | 4960 | | | | | | | | | | | | | | | | Ø.4 | | | | | | | | | | | | ADDED Cl2 | 10 |
| 11 | | 6.4 | 6139 | | | | | | | | | | | | | | | | Ø.9 | | | | | | | | | | | | | 11 |
| 12 | | 6.4 | 6621 | | | | | | | | | | | | | | | | Ø.6 | | | | | | | | | | | | | 12 |
| 13 | | 6.4 | 3894 | | | | | | | | | | | | | | | | Ø.4 | | | | | | | | | | | | ADDED Cl2 | 13 |
| 14 | | 6.4 | 2377 | | | | | | | | | | | | | | | | Ø.6 | | | | | | | | | | | | CONST. FINISHED | 14 |
| 15 | | 6.4 | 8480 | | | | | | | | | | | | | | | | Ø.7 | | | | | | | | | | | | | 15 |
| 16 | | 6.4 | 8639 | | | | | | | | | | | | | | | | Ø.4 | | | | | | | | | | | | ADDED Cl2 | 16 |
| 17 | | 6.4 | 5413 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | | 17 |
| 18 | | 6.4 | 6996 | | | | | | | | | | | | | | | | Ø.8 | | | | | | | | | | | | RAIN!! | 18 |
| 19 | | 6.4 | 11966 | | | | | | | | | | | | | | | | Ø.3 | | | | | | | | | | | | ADDED Cl2 | 19 |
| 20 | | 6.4 | 8861 | | | | | | | | | | | | | | | | Ø.8 | | | | | | | | | | | | | 20 |
| 21 | | 6.4 | 7888 | | | | | | | | | | | | | | | | Ø.6 | | | | | | | | | | | | ADDED Cl2 | 21 |
| 22 | | 6.4 | 5622 | | | | | | | | | | | | | | | | Ø.7 | | | | | | | | | | | | | 22 |
| 23 | | 6.4 | 6480 | | | | | | | | | | | | | | | | Ø.6 | | | | | | | | | | | | ADDED Cl2 | 23 |
| 24 | | 6.4 | 7140 | | | | | | | | | | | | | | | | Ø.9 | | | | | | | | | | | | | 24 |
| 25 | | 6.4 | 5395 | | | | | | | | | | | | | | | | Ø.9 | | | | | | | | | | | | | 25 |
| 26 | | 6.4 | 5224 | | | | | | | | | | | | | | | | Ø.7 | | | | | | | | | | | | | 26 |
| 27 | | 6.4 | 4707 | | | | | | | | | | | | | | | | Ø.4 | | | | | | | | | | | | ADDED Cl2 | 27 |
| 28 | | 6.4 | 6539 | | | | | | | | | | | | | | | | Ø.5 | | | | | | | | | | | | ADDED Cl2 | 28 |
| 29 | | 6.4 | 4197 | | | | | | | | | | | | | | | | Ø.8 | | | | | | | | | | | | | 29 |
| 30 | | 6.4 | 3659 | | | | | | | | | | | | | | | | Ø.6 | | | | | | | | | | | | ADDED Cl2 | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | 164781 | | 4 | | .2 | | | | 2 | | .1 | | | | | | 22.6 | | | Ø | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | 6.4 | 32 | | | | | | | | | | | | | | | | Ø.3 | | | | | | | | | | | | | DAILY MINIMUM |
| AILY MAXIMUM | | 6.4 | 11966 | | | | | | | | | | | | | | | | 2.4 | | | | | | | | | | | | | DAILY MAXIMUM |
| 'KLY. AVG. MAX. | | | — | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| ONTHLY AVG. | | | 5479 | | 4 | 97 | .2 | | | | 2 | 96 | .1 | | | | | | .75 | | | Ø | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | 6.0 | | | 2Ø | 85% | 2 | | | | 2Ø | 85% | 2 | | | | | | | | | 126 | | | | | | | | | | DAILY LIMITS |
| EEKLY LIMITS | | ↓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| ONTHLY LIMITS | | 9.0 | 13K | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

Attachment V
August 18-19, 2010 EQC meeting

# Discharge Monitoring Report - Oregon Department of Environmental Quality

cility Name: PACIFIC WOOD | Phone Number: | Month/Year: OCTOBER 2004
:Q Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.:
ant Type: RGF | County: COLUMBIA | Population Served: 2100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] — Authorized Signature — 1-11-2004 — Date

CLIFF W WEST — Name (Print)

## Operator Certification

llection Sys. Class: N/A | Principal Operator Name (print): | Certification No. & Grade:
eatment Sys. Class: 1 | Principal Operator Name (print): CLIFF W WEST | Certification No. & Grade: 9415 - I

| INFLUENT | | | | | | | | EFFLUENT (identify outfall number -- e.g. 001, 002, 003): | | | | | | | |

Attachment V
August 18-19, 2010 EQC meeting
Page 152 of 3701

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name PACIFIC COAST FISH CO. | Phone Number 503-556-2407 | Month/Year NOVEMBER 2K+4
DEQ Permit No. 102520 | DEQ File No./Facility ID 75541 | EPA Reference No.
Plant Type RGF | County COLUMBIA | Population Served <100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X Cliff W West — Authorized Signature — 7-12-2K+4 Date

CLIFF W WEST — Name (Print)

## Operator Certification

Collection Sys. Class N/A | Principal Operator Name (print) | Certification No. & Grade
Treatment Sys. Class I | Principal Operator Name (print) CLIFF W WEST | Certification No. & Grade 9415-I

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab/Comp. Concentration mg/L | BOD Grab/Comp. Loading lbs. | CBOD mg/L | TSS Grab/Comp. Concentration mg/L | TSS Grab/Comp. Loading lbs. | EFFLUENT Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab: Total Phosphorous mg/L | NUTRIENTS Composite: Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite: Ammonia Nitrogen mg/L | NUTRIENTS Composite: Nitrate Nitrogen mg/L | DISINFECTION CHLORINE: Used lbs. | DISINFECTION CHLORINE: Total Residual mg/L | DISINFECTION CHLORINE: Trans-mittance % | DISINFECTION UV | Turbidity N.T.U | COLIFORM MPN/MF: E.coli CFU/100 ml | COLIFORM MPN/MF: Fecal CFU/100 ml | COLIFORM MPN/MF: Total CFU/100 ml | RECEIVING STREAM: Ammonia mg/L | RECEIVING STREAM: Dilution | RECEIVING STREAM: Stream Flow CFS | RECEIVING STREAM: Temperature °F/°C | RECEIVING STREAM: pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | 6.4 | 8753 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 1 |
| 2 | | | | | | | | | | 6.4 | 15499 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 2 |
| 3 | | | | | | | | | | 6.4 | 10953 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | ADDED Cl2 | 3 |
| 4 | | 6.9 | | 58 | 3.9 | | 43 | 2.9 | | 6.4 | 8388 | | 4 | 93 | .27 | | | | 2 | 95 | .13 | | | | | | 1.3 | | | | 0 | | | | | | | | 4 |
| 5 | | | | | | | | | | 6.4 | 7287 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 5 |
| 6 | | | | | | | | | | 6.4 | 7461 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 6 |
| 7 | | | | | | | | | | 6.4 | 6647 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | ADDED Cl2 | 7 |
| 8 | | | | | | | | | | 6.4 | 7254 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | 8 |
| 9 | | | | | | | | | | 6.4 | 6812 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 9 |
| 10 | | | | | | | | | | 6.4 | 5493 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | ADDED Cl2 | 10 |
| 11 | | | | | | | | | | 6.4 | 7643 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 11 |
| 12 | | | | | | | | | | 6.4 | 6778 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 12 |
| 13 | | | | | | | | | | 6.4 | 7264 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | 13 |
| 14 | | | | | | | | | | 6.4 | 5555 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 14 |
| 15 | | | | | | | | | | 6.4 | 6991 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 15 |
| 16 | | | | | | | | | | 6.4 | 6876 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 16 |
| 17 | | | | | | | | | | 6.4 | 6643 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 17 |
| 18 | | | | | | | | | | 6.4 | 8185 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | ADDED Cl2 | 18 |
| 19 | | | | | | | | | | 6.4 | 7284 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 19 |
| 20 | | | | | | | | | | 6.4 | 6656 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | ADDED Cl2 | 20 |
| 21 | | | | | | | | | | 6.4 | 7066 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 21 |
| 22 | | | | | | | | | | 6.4 | 7319 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 22 |
| 23 | | | | | | | | | | 6.4 | 6627 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 23 |
| 24 | | | | | | | | | | 6.4 | 7627 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | ADDED Cl2 | 24 |
| 25 | | | | | | | | | | 6.4 | 8559 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | ADDED Cl2 | 25 |
| 26 | | | | | | | | | | 6.4 | 7260 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 26 |
| 27 | | | | | | | | | | 6.4 | 8455 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 27 |
| 28 | | | | | | | | | | 6.4 | 6631 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 28 |
| 29 | | | | | | | | | | 6.4 | 8296 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | ADDED Cl2 | 29 |
| 30 | | | | | | | | | | 6.4 | 8122 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | 58 | | | 43 | | | | 229814 | | 4 | | .27 | | | | 2 | | | | | | | | 24.1 | | | | 0 | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | 6.4 | 5493 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | 6.4 | 15499 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | 58 | | | 43 | | | | 7660 | | 4 | 93 | .27 | | | | 2 | 95 | | | | | | | 0.8 | | | | 0 | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | 13K | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | 30 | 85% | 3 | | | | 30 | 85% | 3 | | | | | | | | | | 126 | | | | | | | | MONTHLY LIMITS |

Attachment V
August 18-19, 2010 EQC meeting


# Discharge Monitoring Report - Oregon Department of Environmental Quality

RECEIVED
FEB 8 2005
6-2-2K45
DEPT OF ENVIRONMENTAL QUALITY
NORTHWEST REGION

Facility Name: RIVERWOOD MHE | Phone Number: | Month/Year: JANUARY MMV
WQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.:
Plant Type: R.G.F. | County: COLUMBIA | Population Served: <100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature

CLIFF W WEST Name (Print)

## Operator Certification

Collection Sys. Class: N/A | Principal Operator Name (print): | Certification No. & Grade:
Treatment Sys. Class: 1 | Principal Operator Name (print): CLIFF W WEST | Certification No. & Grade: 9415-I

### INFLUENT

| Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|
| | 6.9 | | 91 | 6.3 | | 50 | 3.5 |
| TOTAL | | | 91 | | | 50 | |
| ILY MINIMUM | | | | | | | |
| Y MAXIMUM | | | | | | | |
| Y. AVG. MAX. | | | | | | | |
| THLY AVG. | | | 91 | | | 50 | |
| AILY LIMITS | | | | | | | |
| KLY LIMITS | | | | | | | |
| THLY LIMITS | | | | | | | |

### EFFLUENT (identify outfall number -- e.g. 001, 002, 003):

| Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal | COLIFORM MPN/MF Total | RECEIVING STREAM Amnonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 6.4 | 6882 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 1 |
| | 6.4 | 6136 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 2 |
| | 6.4 | 7410 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | ADDED $Cl_2$ | 3 |
| | 6.4 | 7700 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 4 |
| | 6.4 | 9172 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | ADDED $Cl_2$ | 5 |
| | 6.4 | 8384 | 4 | 95 | .28 | | | | 3 | 94 | .21 | | | | | | | 1.0 | | | 0 | | | | | | | | 6 |
| | 6.4 | 8468 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 7 |
| | 6.4 | 8520 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | ADDED $Cl_2$ | 8 |
| | 6.4 | 7930 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 9 |
| | 6.4 | 7351 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | ADDED $Cl_2$ | 10 |
| | 6.4 | 7196 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 11 |
| | 6.4 | 7683 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 12 |
| | 6.4 | 8554 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 13 |
| | 6.4 | 7658 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 14 |
| | 6.4 | 7670 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | ADDED $Cl_2$ | 15 |
| | 6.4 | 9121 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | ADDED $Cl_2$ | 16 |
| | 6.4 | 8411 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 17 |
| | 6.4 | 14928 | | | | | | | | | | | | | | | | .3 | | | | | | | | | | | ADDED $Cl_2$ | 18 |
| | 6.4 | 10315 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 19 |
| | 6.4 | 7197 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 20 |
| | 6.4 | 6933 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 21 |
| | 6.4 | 7169 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | ADDED $Cl_2$ | 22 |
| | 6.4 | 6985 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | 23 |
| | 6.4 | 6705 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 24 |
| | 6.4 | 6269 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | CLEANED SCREENS | 25 |
| | 6.4 | 5910 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 26 |
| | 6.4 | 6283 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | ADDED $Cl_2$ | 27 |
| | 6.4 | 5865 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 28 |
| | 6.4 | 9420 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 29 |
| | 6.4 | 5390 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | ADDED $Cl_2$ | 30 |
| | 6.4 | 6960 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 31 |
| TOTAL | | 239195 | 4 | | | | | | 3 | | | | | | | | | 28.1 | | | 0 | | | | | | | | TOTAL |
| ILY MINIMUM | 6.4 | 5390 | | | | | | | | | | | | | | | | .3 | | | | | | | | | | | DAILY MINIMUM |
| Y MAXIMUM | 6.4 | 14928 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | DAILY MAXIMUM |
| Y. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| THLY AVG. | | 7716 | 4 | | | | | | 3 | | | | | | | | | .9 | | | 0 | | | | | | | | MONTHLY AVERAGE |
| AILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| KLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| THLY LIMITS | | 13K | 30 | 85% | 3 | | | | 30 | 85% | 3 | | | | | | | | | | 126 | | | | | | | | MONTHLY LIMITS |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: RIVERWOOD — Phone Number: — Month/Year: DECEMBER 2KH4
DEQ Permit No.: 102520 — DEQ File No./Facility ID: 75541 — EPA Reference No.:
Plant Type: R.G.F — County: COLUMBIA — Population Served: <100

**Operator Certification**

Collection Sys. Class: N/A — Principal Operator Name (print): — Certification No. & Grade:
Treatment Sys. Class: I — Principal Operator Name (print): CLIFF W WEST — Certification No. & Grade: 9415-1

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] — Authorized Signature — Date: 4-1-2K+5

CLIFF W WEST — Name (Print)

RECEIVED — Date — 5 — DEPARTMENTAL OF ENVIRONMENTAL QUALITY REGION

LWC

| | INFLUENT | | | | | | | | EFFLUENT (identify outfall number -- e.g. 001, 002, 003): | | | | | | | |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: RIVERWOOD MHC | Phone Number: N/A | Month/Year: FEBRUARY 2015
DEQ Permit No.: 102529 | DEQ File No./Facility ID: 75541 | EPA Reference No.:
Plant Type: R.B.C | County: COLUMBIA | Population Served: <100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] Authorized Signature — 8-3-2015 Date

CLIFF W WEST Name (Print)

## Operator Certification

Collection Sys. Class: N/A | Principal Operator Name (print): | Certification No. & Grade:
Treatment Sys. Class: I | Principal Operator Name (print): CLIFF W WEST | Certification No. & Grade: 9415-I

### INFLUENT

| Date | Temperature °C | pH S.U. | Flow MGD | BOD Grab/Comp. Concentration mg/L | BOD Grab/Comp. Loading lbs. | CBOD mg/L | TSS Grab/Comp. Concentration mg/L | TSS Grab/Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | 6.9 | | 156 | 7.3 | | 67 | 3.2 |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
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| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | 156 | 7.3 | | 67 | 3.2 |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WEEKLY AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

### EFFLUENT (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °C | pH S.U. | Flow MGD | DO mg/L | BOD Grab/Comp. Concentration mg/L | BOD Grab/Comp. Removal % | BOD Grab/Comp. Loading lbs. | CBOD Grab/Comp. Concentration mg/L | CBOD Grab/Comp. Removal % | CBOD Grab/Comp. Loading lbs. | TSS Grab/Comp. Concentration mg/L | TSS Grab/Comp. Removal % | TSS Grab/Comp. Loading lbs. | NUTRIENTS Grab: Total Phosphorous mg/L | NUTRIENTS Grab: Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite: Ammonia Nitrogen mg/L | NUTRIENTS Composite: Nitrate Nitrogen mg/L | DISINFECTION CHLORINE: Used lbs. | DISINFECTION CHLORINE: Total Residual mg/L | DISINFECTION UV: Transmittance % | Turbidity N.T.U | COLIFORM MPN/MF: E.coli CFU/100 ml | COLIFORM MPN/MF: Fecal CFU/100 ml | COLIFORM MPN/MF: Total CFU/100 ml | RECEIVING STREAM: Ammonia | RECEIVING STREAM: Dilution | RECEIVING STREAM: Stream Flow CFS | RECEIVING STREAM: Temperature °C | RECEIVING STREAM: pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.4 | 674Φ | | | | | | | | | | | | | | | | Φ.4 | | | | | | | | | | | ADDED Cl2 |
| 2 | | 6.4 | 5726 | | | | | | | | | | | | | | | | Φ.8 | | | | | | | | | | | |
| 3 | | 6.4 | 5832 | | 4 | 97 | .19 | | | | 2 | 97 | .10 | | | | | | 1.0 | | | Φ | | | | | | | | |
| 4 | | 6.4 | 6452 | | | | | | | | | | | | | | | | Φ.7 | | | | | | | | | | | |
| 5 | | 6.4 | 7108 | | | | | | | | | | | | | | | | Φ.5 | | | | | | | | | | | |
| 6 | | 6.4 | 6985 | | | | | | | | | | | | | | | | Φ.4 | | | | | | | | | | | ADDED Cl2 |
| 7 | | 6.4 | 9268 | | | | | | | | | | | | | | | | Φ.8 | | | | | | | | | | | |
| 8 | | 6.4 | 7011 | | | | | | | | | | | | | | | | Φ.6 | | | | | | | | | | | |
| 9 | | 6.4 | 7219 | | | | | | | | | | | | | | | | Φ.4 | | | | | | | | | | | ADDED Cl2 |
| 10 | | 6.4 | 7259 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | |
| 11 | | 6.4 | 7075 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | |
| 12 | | 6.4 | 5583 | | | | | | | | | | | | | | | | Φ.8 | | | | | | | | | | | |
| 13 | | 6.4 | 6890 | | | | | | | | | | | | | | | | Φ.6 | | | | | | | | | | | |
| 14 | | 6.4 | 7065 | | | | | | | | | | | | | | | | Φ.5 | | | | | | | | | | | ADDED Cl2 |
| 15 | | 6.4 | 6823 | | | | | | | | | | | | | | | | Φ.3 | | | | | | | | | | | ADDED Cl2 |
| 16 | | 6.4 | 6713 | | | | | | | | | | | | | | | | Φ.7 | | | | | | | | | | | |
| 17 | | 6.4 | 8531 | | | | | | | | | | | | | | | | Φ.4 | | | | | | | | | | | ADDED Cl2 |
| 18 | | 6.4 | 6771 | | | | | | | | | | | | | | | | Φ.9 | | | | | | | | | | | MOWED GRASS |
| 19 | | 6.4 | 6868 | | | | | | | | | | | | | | | | Φ.6 | | | | | | | | | | | |
| 20 | | 6.4 | 6794 | | | | | | | | | | | | | | | | Φ.5 | | | | | | | | | | | |
| 21 | | 6.4 | 6523 | | | | | | | | | | | | | | | | Φ.4 | | | | | | | | | | | ADDED Cl2 |
| 22 | | 6.4 | 6942 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | |
| 23 | | 6.4 | 6981 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | |
| 24 | | 6.4 | 6573 | | | | | | | | | | | | | | | | Φ.8 | | | | | | | | | | | |
| 25 | | 6.4 | 5874 | | | | | | | | | | | | | | | | Φ.6 | | | | | | | | | | | |
| 26 | | 6.4 | 6144 | | | | | | | | | | | | | | | | Φ.5 | | | | | | | | | | | |
| 27 | | 6.4 | 4467 | | | | | | | | | | | | | | | | Φ.4 | | | | | | | | | | | ADDED Cl2 |
| 28 | | 6.4 | 5976 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | |
| 29 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL | | | 18622Φ | | 4 | | .19 | | | | 2 | | .10 | | | | | | 17.Φ | | | Φ | | | | | | | | |
| DAILY MINIMUM | | 6.4 | 5583 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | 6.4 | 9268 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVG. | | | 6650 | | 4 | 97 | .19 | | | | 2 | 97 | .10 | | | | | | Φ.67 | | | Φ | | | | | | | | |
| DAILY LIMITS | | | 13K | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | 3Φ | 85% | 3 | | | | 3Φ | 85% | 3 | | | | | | | | | 126 | | | | | | | | |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: RIVERWOOD | Phone Number: | Month/Year: MARCH 2015
DEQ Permit No.: 102526 | DEQ File No./Facility ID: 75541 | EPA Reference No.:
Plant Type: R.B.F. | County: COLUMBIA | Population Served: <100

## Operator Certification

Collection Sys. Class: N/A | Principal Operator Name (print): | Certification No. & Grade:
Treatment Sys. Class: I | Principal Operator Name (print): CLIFF W WEST | Certification No. & Grade: 9415 - I

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] Authorized Signature — Date: 10-4-15

CLIFF W WEST Name (Print)

| INFLUENT | | | | | | | | EFFLUENT (identify outfall number -- e.g. 001, 002, 003): | | | | | | | |

# Discharge Monitorin Report - Oregon Department of Environmental Quality

cility Name RIVERWOOD MHC | Phone Number | Month/Year APRIL 2K+5
EQ Permit No. 102526 | DEQ File No./Facility ID 75541 | EPA Reference No.
ant Type R.G.F. | County COLUMBIA | Population Served <100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] Authorized Signature — 5-MAY-2K+5 Date

CLIFF W WEST Name (Print)

## Operator Certification

llection Sys. Class N/A | Principal Operator Name (print) | Certification No. & Grade
eatment Sys. Class 1 | Principal Operator Name (print) CLIFF W WEST | Certification No. & Grade 9415-1

**INFLUENT**

| Date | °F/°C | Temperature | pH | Flow | BOD Grab/Comp. Concentration | BOD Grab/Comp. Loading | CBOD | TSS Grab/Comp. Concentration | TSS Grab/Comp. Loading |
|---|---|---|---|---|---|---|---|---|---|
| | | S.U. | MGD | mg/L | lbs. | mg/L | mg/L | lbs. | |
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | |
| 7 | | | 6.9 | | 120 | 5.1 | | 43 | 1.8 |
| 8 | | | | | | | | | |
| 9 | | | | | | | | | |
| 10 | | | | | | | | | |
| 11 | | | | | | | | | |
| 12 | | | | | | | | | |
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| 21 | | | | | | | | | |
| 22 | | | | | | | | | |
| 23 | | | | | | | | | |
| 24 | | | | | | | | | |
| 25 | | | | | | | | | |
| 26 | | | | | | | | | |
| 27 | | | | | | | | | |
| 28 | | | | | | | | | |
| 29 | | | | | | | | | |
| 30 | | | | | | | | | |
| 31 | | | | | | | | | |
| TOTAL | | | | | 120 | | | 43 | |
| AILY MINIMUM | | | | | | | | | |
| .Y MAXIMUM | | | | | | | | | |
| .Y. AVG. MAX. | | | | | | | | | |
| NTHLY AVG. | | | | | 120 | | | 43 | |
| DAILY LIMITS | | | | | | | | | |
| EKLY LIMITS | | | | | | | | | |
| NTHLY LIMITS | | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | °F/°C | Temperature | pH | Flow | DO | BOD Grab/Comp. Concentration | BOD Grab/Comp. Removal | BOD Grab/Comp. Loading | CBOD Grab/Comp. Concentration | CBOD Grab/Comp. Removal | CBOD Grab/Comp. Loading | TSS Grab/Comp. Concentration | TSS Grab/Comp. Removal | TSS Grab/Comp. Loading | NUTRIENTS Grab: Total Phosphorous | NUTRIENTS Grab: Total Kjeldahl Nitrogen | NUTRIENTS Composite: Ammonia Nitrogen | NUTRIENTS Composite: Nitrate Nitrogen | DISINFECTION CHLORINE Used | DISINFECTION CHLORINE Total Residual | DISINFECTION UV Trans-mittance | Turbidity |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | S.U. | MGD | mg/L | mg/L | % | lbs. | mg/L | % | lbs. | mg/L | % | lbs. | mg/L | | | | lbs. | mg/L | % | N.T.U |
| 1 | | | 6.5 | 6763 | | | | | | | | | | | | | | | | 0.7 | | |
| 2 | | | 6.5 | 6231 | | | | | | | | | | | | | | | | 0.5 | | |
| 3 | | | 6.5 | 6159 | | | | | | | | | | | | | | | | 1.1 | | |
| 4 | | | 6.5 | 8687 | | | | | | | | | | | | | | | | 0.9 | | |
| 5 | | | 6.4 | 6097 | | | | | | | | | | | | | | | | 0.8 | | |
| 6 | | | 6.4 | 5945 | | | | | | | | | | | | | | | | 0.6 | | |
| 7 | | | 6.5 | 5145 | | 4 | 96 | .17 | | | | 3 | 93 | .13 | | | | | | 1.3 | | |
| 8 | | | 6.4 | 7022 | | | | | | | | | | | | | | | | 1.0 | | |
| 9 | | | 6.4 | 5761 | | | | | | | | | | | | | | | | 0.6 | | |
| 10 | | | 6.4 | 5984 | | | | | | | | | | | | | | | | 0.4 | | |
| 11 | | | 6.4 | 7775 | | | | | | | | | | | | | | | | 0.4 | | |
| 12 | | | 6.4 | 12564 | | | | | | | | | | | | | | | | 0.4 | | |
| 13 | | | 6.4 | 8341 | | | | | | | | | | | | | | | | 0.6 | | |
| 14 | | | 6.4 | 6558 | | | | | | | | | | | | | | | | 0.8 | | |
| 15 | | | 6.4 | 6361 | | | | | | | | | | | | | | | | 0.6 | | |
| 16 | | | 6.5 | 12786 | | | | | | | | | | | | | | | | 0.3 | | |
| 17 | | | 6.5 | 16832 | | | | | | | | | | | | | | | | 0.2 | | |
| 18 | | | 6.5 | 12553 | | | | | | | | | | | | | | | | 0.6 | | |
| 19 | | | 6.4 | 7481 | | | | | | | | | | | | | | | | 1.2 | | |
| 20 | | | 6.4 | 6097 | | | | | | | | | | | | | | | | 0.8 | | |
| 21 | | | 6.4 | 6376 | | | | | | | | | | | | | | | | 0.7 | | |
| 22 | | | 6.4 | 5982 | | | | | | | | | | | | | | | | 0.5 | | |
| 23 | | | 6.4 | 5322 | | | | | | | | | | | | | | | | 0.7 | | |
| 24 | | | 6.4 | 7827 | | | | | | | | | | | | | | | | 0.5 | | |
| 25 | | | 6.4 | 7720 | | | | | | | | | | | | | | | | 0.3 | | |
| 26 | | | 6.4 | 7955 | | | | | | | | | | | | | | | | 0.6 | | |
| 27 | | | 6.4 | 6233 | | | | | | | | | | | | | | | | 0.5 | | |
| 28 | | | 6.4 | 5195 | | | | | | | | | | | | | | | | 0.4 | | |
| 29 | | | 6.4 | 5531 | | | | | | | | | | | | | | | | 1.1 | | |
| 30 | | | 6.4 | 4622 | | | | | | | | | | | | | | | | 0.9 | | |
| 31 | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL | | | | 219586 | | 4 | | .17 | | | | | | .13 | | | | | | 20.0 | | |
| AILY MINIMUM | | | CH | 4622 | | | | | | | | | | | | | | | | 0.2 | | |
| .Y MAXIMUM | | | 6.5 | 16832 | | | | | | | | | | | | | | | | 1.2 | | |
| .Y. AVG. MAX. | | | | 51886 | | | | | | | | | | | | | | | | 4.67 | | |
| NTHLY AVG. | | | | 7317 | | 4 | 96% | .17 | | | | | | .13 | | | | | | .66 | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | |
| EKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | |
| NTHLY LIMITS | | | | 13K | | 30 | 85% | 3 | | | | 30 | 85% | 3 | | | | | | | | |

| Date | COLIFORM MPN/MF E.coli | COLIFORM MPN/MF Fecal | COLIFORM MPN/MF Total | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow | RECEIVING STREAM °F/°C Temperature | RECEIVING STREAM pH | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. |
|---|---|---|---|---|---|---|---|---|---|
| | CFU/100 ml | | | | | CFS | | S.U. | |
| 1 | | | | | | | | | |
| 2 | | | | | | | | | ADDED Cl2 |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | ADDED Cl2 |
| 7 | 0 | | | | | | | | |
| 8 | | | | | | | | | |
| 9 | | | | | | | | | |
| 10 | | | | | | | | | ADDED Cl2 |
| 11 | | | | | | | | | ADDED Cl2 |
| 12 | | | | | | | | | |
| 13 | | | | | | | | | ADDED Cl2 |
| 14 | | | | | | | | | |
| 15 | | | | | | | | | |
| 16 | | | | | | | | | |
| 17 | | | | | | | | | ADDED Cl2 - RECHT |
| 18 | | | | | | | | | |
| 19 | | | | | | | | | |
| 20 | | | | | | | | | |
| 21 | | | | | | | | | |
| 22 | | | | | | | | | ADDED Cl2 |
| 23 | | | | | | | | | |
| 24 | | | | | | | | | |
| 25 | | | | | | | | | ADDED Cl2 |
| 26 | | | | | | | | | |
| 27 | | | | | | | | | |
| 28 | | | | | | | | | ADDED Cl2 |
| 29 | | | | | | | | | |
| 30 | | | | | | | | | |
| 31 | | | | | | | | | |
| TOTAL | 0 | | | | | | | | |
| AILY MINIMUM | | | | | | | | | |
| .Y MAXIMUM | | | | | | | | | |
| .Y. AVG. MAX. | | | | | | | | | |
| NTHLY AVG. | 0 | | | | | | | | |
| DAILY LIMITS | | | | | | | | | |
| EKLY LIMITS | | | | | | | | | |
| NTHLY LIMITS | 126 | | | | | | | | |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

V LWC

Facility Name: REVERE WWTP | Phone Number: | Month/Year: MAY 2005
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.:
Plant Type: R.E.F. | County: COLUMBIA | Population Served: <100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X Cliff West — Authorized Signature
13-6-2005 — Date
CLIFF W WEST — Name (Print)

## Operator Certification

Collection Sys. Class: N/A — Principal Operator Name (print): — Certification No. & Grade:
Treatment Sys. Class: 1 — Principal Operator Name (print): CLIFF W WEST — Certification No. & Grade: 7415-1

| INFLUENT | | | | | | | | EFFLUENT (identify outfall number -- e.g. 001, 002, 003): | | | | | | | |

WL 0061 Sent 7/28/05

# Discharge Monitoring Report - Oregon Department of Environmental Quality

cility Name: RIVERWOOD | Phone Number: | Month/Year: JUNE 2K+5
EQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.:
ant Type: TGF | County: COLUMBIA | Population Served: 2100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature — 2-7-2K+5 Date

CLIFF W WEST Name (Print)

## Operator Certification

llection Sys. Class: N/A | Principal Operator Name (print): | Certification No. & Grade:
eatment Sys. Class: 1 | Principal Operator Name (print): CLIFF W WEST | Certification No. & Grade: 9415-1

| INFLUENT | | | | | | | | | EFFLUENT (identify outfall number -- e.g. 001, 002, 003): | | | | | | | | |

RECEIVED
AUG 16 2005
DEPT OF ENVIRONMENTAL QUALITY
NORTHWEST REGION

Magar E. Magar
1616 NW Northrup
Portland, Or. 97209
Phone 503-2261913
Fax. 503-226 1914

August 15, 2005

Lyle Christensen
DEQ
2020 SW 4th. Ave- Suite 400.
Portland, Or. 97201

Dear Mr. Christensen.

Enclosed please find the monthly monitoring for July 2005.
I do not have the proper forms but I will be glad to get some blanks and to re-do this month on the proper forms.
Your letter of warning is not accepted. I demand a formal hearing. Let me know when you plan on scheduling one.
Pursuant to Schedule D of the permit section d. you have already been notified that the operator Cliff West has on or about June 29, 2005 quit the facility with less than 2 to 3 days notice. I shall send a copy of this letter to the certification program.
I am requesting until September 30, 2005 to recertify myself and to try to get some provisional certificate for Tim Fowler.

Very truly yours,

Magar E. Magar.
cc. Water Quality Certification. Letter only.

# Riverwood July 2005

EPA OR-003114-3

| Da | Flow | pH | CL | Remarks |
|---|---|---|---|---|
| *1* | *4510* | *6.4* | *0.8* | |
| 2 | 3700 | 6.4 | 0.8 | |
| 3 | 2847 | 6.4 | 0.5 | add CL |
| 4 | 3578 | 6.4 | 1 | |
| 5 | 4330 | 6.4 | 0.8 | |
| 6 | 3425 | 6.4 | 0.5 | |
| 7 | 3306 | 6.4 | 1.2 | |
| 8 | 2906 | 6.4 | 1.4 | |
| 9 | 6562 | 6.4 | 0.4 | |
| 10 | 3474 | 6.4 | 1.3 | |
| 11 | 4299 | 6.4 | 1.1 | weed filter |
| 12 | 3195 | 6.4 | 0.8 | |
| 13 | 3453 | 6.4 | 0.5 | |
| 14 | 2826 | 6.4 | 0.4 | VALVE CLOSED |
| 15 | 9961 | 6.4 | 1 | ADD CL. VALVE CLOSED |
| 16 | 3013 | 6.4 | 0.9 | |
| 17 | 2412 | 6.4 | 0.5 | ADD CL |
| 18 | 2370 | 6.4 | 0.5 | |
| 19 | 3142 | 6.4 | 0.5 | |
| 20 | 2815 | 6.4 | 0.5 | add CL |
| 21 | 2685 | 6.4 | 1.2 | |
| 22 | 3617 | 6.4 | 1.9 | |
| 23 | 3135 | 6.4 | 0.6 | |
| 24 | 3125 | 6.4 | 1.3 | |
| 25 | 3175 | 6.4 | 0.5 | |
| 26 | 2987 | 6.4 | 0.5 | add CL |
| 27 | 2877 | 6.4 | 0.7 | add CL |
| 28 | 3667 | 6.4 | 1 | |
| 29 | 2805 | 6.4 | 0.7 | |
| 30 | 2683 | 6.4 | 0.7 | |
| 31 | 2518 | 6.4 | 0.4 | |

#####

109 369

Operator
Magar E. Magar

ENCLOSED BOD, TSS
and E. Coli Samples collected
ON July 13, 2005

✓ LWC

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Riverwood MHP | Phone Number: 503 226 1913 | Month/Year: AUG. 05
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR 003114-3
Plant Type: Recirc. Gravel Filter | County: COLUMBIA | Population Served: ~ 100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x [signature] 9/15/2005
Authorized Signature — Date

MAGAN C. MAGAN
Name (Print)

RECEIVED
SEP 16 2005
DEPT OF ENVIRONMENTAL QUALITY
NORTHWEST REGION

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____
Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

| Date | INFLUENT °F/°C | Temperature | pH | Flow | BOD Grab Concentration | BOD Comp. Loading | CBOD | TSS Grab Concentration | TSS Comp. Loading | EFFLUENT °F/°C | Temperature | pH | Flow | DO | BOD Grab Concentration | BOD Comp. Removal | BOD Comp. Loading | CBOD Grab Concentration | CBOD Comp. Removal | CBOD Comp. Loading | TSS Grab Concentration | TSS Comp. Removal | TSS Comp. Loading | NUTRIENTS Grab Total Phosphorous | NUTRIENTS Grab Total Kjeldahl Nitrogen | NUTRIENTS Composite Ammonia Nitrogen | NUTRIENTS Composite Nitrate Nitrogen | DISINFECTION CHLORINE Used | DISINFECTION CHLORINE Total Residual | DISINFECTION UV Trans-mittance | | Turbidity | COLIFORM MPN/MF E.coli | COLIFORM MPN/MF Fecal | COLIFORM MPN/MF Total | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow | RECEIVING STREAM °F/°C Temperature | RECEIVING STREAM pH | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | S.U. | MGD | mg/L | lbs. | mg/L | mg/L | lbs. | | | S.U. | ~~MGD~~ GPD | mg/L | mg/L | % | lbs. | mg/L | % | lbs. | mg/L | % | lbs. | mg/L | | | | | lbs. | mg/L | % | | N.T.U | CFU/100 ml | | | | | CFS | | S.U. | | |
| 1 | | | | | | | | | | | | 6.4 | 2674 | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add Cl2 | 1 |
| 2 | | | | | | | | | | | | 6.4 | 2591 | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 2 |
| 3 | | | | | | | | | | | | 6.4 | 2654 | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 3 |
| 4 | | | | | | | | | | | | 6.4 | 2277 | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 4 |
| 5 | | | | | | | | | | | | 6.4 | 2860 | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 5 |
| 6 | | | | | | | | | | | | 6.4 | 2822 | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 6 |
| 7 | | | | | | | | | | | | 6.4 | 4415 | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add Cl2 | 7 |
| 8 | | | | | | | | | | | | 6.4 | 4075 | | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | 8 |
| 9 | | | | | | | | | | | | 6.4 | 4662 | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 9 |
| 10 | | | | | | | | | | | | 6.4 | 6583 | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add Cl2 | 10 |
| 11 | | | | | | | | | | | | 6.4 | 5052 | | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | 11 |
| 12 | | | | | | | | | | | | 6.4 | 4782 | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 12 |
| 13 | | | | | | | | | | | | 6.4 | 5337 | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 13 |
| 14 | | | | | | | | | | | | 6.4 | 6504 | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add Cl2 | 14 |
| 15 | | | | | | | | | | | | 6.4 | 5478 | | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | | 15 |
| 16 | | | | | | | | | | | | 6.4 | 5939 | | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 16 |
| 17 | | | | | | | | | | | | 6.4 | 6491 | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add Cl2 | 17 |
| 18 | | | | | | | | | | | | 6.4 | 6981 | | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | 18 |
| 19 | | | | | | | | | | | | 6.4 | 5412 | | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | 19 |
| 20 | | | | | | | | | | | | 6.4 | 5145 | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Add Cl2 | 20 |
| 21 | | | | | | | | | | | | 6.4 | 6810 | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 21 |
| 22 | | | | | | | | | | | | 6.4 | 4095 | | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | ~~Add Cl2~~ | 22 |
| 23 | | | | | | | | | | | | 6.4 | 7630 | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add Cl2 | 23 |
| 24 | | | | | | | | | | | | 6.4 | 6292 | | | | | | | | | | | | | | | | | 1.9 | | | | | | | | | | | | 24 |
| 25 | | INFLUENT 108/80 <10 | | | | | 8 | | | | | 6.4 | 5043 | | <3 | 70 | | | | | <3 | 63 | | | | | | | | 1.7 | | | | <1 | | | | | | | | 25 |
| 26 | | | | | | | | | | | | 6.4 | 6855 | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Add Cl2 | 26 |
| 27 | | | | | | | | | | | | 6.4 | 6851 | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 27 |
| 28 | | | | | | | | | | | | 6.4 | 6455 | | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 28 |
| 29 | | | | | | | | | | | | 6.4 | 5703 | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 29 |
| 30 | | | | | | | | | | | | 6.4 | 6324 | | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | Add Cl2 | 30 |
| 31 | | | | 121 | | | 50 | | | | | 6.4 | 6860 | | <3 | 97 | | | | | <3 | 94 | | | | | | | | 1.8 | | | | <1 | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | 161078 | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | 2277 | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | 7636 | | | | | | | | | | | | | | | | | 1.8 | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | 5196 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Riverwood MHP | Phone Number: 503 226 1918 | Month/Year: SEPT. 2005
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR 0031147-3
Plant Type: Recirc. Gravel Filter | County: COLUMBIA | Population Served: ~100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

RECEIVED
OCT 19 2005
DEPT OF ENVIRONMENTAL QUALITY
NORTHWEST REGION

X _____ Authorized Signature — 10/17/05 Date

MAGAN G MACTAGGART Name (Print)

## Operator Certification

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____
Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD Concentration mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Transmittance % | Turbidity N.T.U. | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | 6.4 | 5197 | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | 1 |
| 2 | | | | | | | | | | 6.4 | 5053 | | | | | | | | | | | | | | | | 1.7 | | | | | | | | | | | 2 |
| 3 | | | | | | | | | | 6.4 | 6154 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | 3 |
| 4 | | | | | | | | | | 6.4 | 7233 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | 4 |
| 5 | | | | | | | | | | 6.4 | 7489 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | 5 |
| 6 | | | | | | | | | | 6.4 | 5686 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | 6 |
| 7 | | | | | | | | | | 6.4 | 7101 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | 7 |
| 8 | | | | | | | | | | 6.4 | 6659 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | 8 |
| 9 | | | | | | | | | | 6.4 | 7212 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | 9 |
| 10 | | | | | | | | | | 6.4 | 5797 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | 10 |
| 11 | | | | | | | | | | 6.4 | 6822 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | 11 |
| 12 | | | | | | | | | | 6.4 | 7433 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | 12 |
| 13 | | | | | | | | | | 6.4 | 4843 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | 13 |
| 14 | | | | | | | | | | 6.4 | 6435 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | 14 |
| 15 | | | | | | | | | | 6.4 | 7783 | | | | | | | | | | | | | | | | .3 | | | | | | | | | | | 15 |
| 16 | | | | | | | | | | 6.4 | 6804 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | 16 |
| 17 | | | | | | | | | | 6.4 | 6163 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | 17 |
| 18 | | | | | | | | | | 6.4 | 6341 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | 18 |
| 19 | | | | | | | | | | 6.4 | 6932 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | 19 |
| 20 | | | | | | | | | | 6.4 | 6980 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | 20 |
| 21 | | | | | | | | | | 6.4 | 6273 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | 21 |
| 22 | | | | | | | | | | 6.4 | 4656 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | 22 |
| 23 | | | | | | | | | | 6.4 | 6415 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | 23 |
| 24 | | | | | | | | | | 6.4 | 6672 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | 24 |
| 25 | | | | | | | | | | 6.4 | 4853 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | 25 |
| 26 | | | | | | | | | | 6.4 | 7197 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | 26 |
| 27 | | | | | | | | | | 6.4 | 6825 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | 27 |
| 28 | | | | | | | | | | 6.4 | 4857 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | 28 |
| 29 | | | 276 | | | | 177 | | | 6.4 | 7315 | | <3 | 799 | | | | | <3 | 798 | | | | | | | | .7 | | | <1 | | | | | | | 29 |
| 30 | | | | | | | | | | 6.5 | 6785 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | 194003 | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | 4656 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | 7433 | | | | | | | | | | | | | | | | 1.7 | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | 6560.1 | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

RECEIVED
NOV 18 2005
DEPT OF ENVIRONMENTAL QUALITY
NORTHWEST REGION

Facility Name: RIVERWOOD MHP | Phone Number: 503 2261913 | Month/Year: Oct 05
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR 0031147
Plant Type: Recir. gravel filter | County: Columbia | Population Served: ~100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x _____ Authorized Signature — Date: 11/16/05

UPGRAN C. MACIAS OWNER — Name (Print)

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
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| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.4 | 7969 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 1 |
| 2 | | 6.5 | 9331 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add clz | 2 |
| 3 | | 6.5 | 9654 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 3 |
| 4 | | 6.2 | 8746 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add clz | 4 |
| 5 | | 6.4 | 6803 | | | | | | | | | | | | | | | | 2.0 | | | | | | | | | | | | 5 |
| 6 | | 6.4 | 7888 | | | | | | | | | | | | | | | | 1.9 | | | | | | | | | | | | 6 |
| 7 | | 6.4 | 7319 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | 7 |
| 8 | | 6.4 | 6743 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 8 |
| 9 | | 6.3 | 8311 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz rain | 9 |
| 10 | | 6.5 | 8015 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz rain | 10 |
| 11 | | 6.4 | 7718 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz | 11 |
| 12 | | 6.5 | 8723 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | 12 |
| 13 | | 6.4 | 925 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 13 |
| 14 | | 6.5 | 3578 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz | 14 |
| 15 | | 6.3 | 7419 | | | | | | | | | | | | | | | | 1.7 | | | | | | | | | | | rain | 15 |
| 16 | | 6.4 | 8315 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | rain | 16 |
| 17 | | 6.3 | 8784 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz | 17 |
| 18 | | 6.4 | 8308 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 18 |
| 19 | | 6.3 | 8569 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 19 |
| 20 | | 6.4 | 8560 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz rain | 20 |
| 21 | | 6.4 | 7154 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 21 |
| 22 | | 6.4 | 7463 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 22 |
| 23 | | 6.4 | 6212 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | rain | 23 |
| 24 | | 6.4 | 7945 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz | 24 |
| 25 | | 6.3 | 6418 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 25 |
| 26 | | 6.3 | 7216 | <3 | 98.5 | | | <3 | 98 | | | | | | | | | | .5 | | <1 | | | | | | | | | | 26 |
| 27 | | 6.4 | 9015 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz | 27 |
| 28 | | 6.4 | 8878 | | | | | | | | | | | | | | | | 1.7 | | | | | | | | | | | rain | 28 |
| 29 | | 6.4 | 8055 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | rain | 29 |
| 30 | | 6.5 | 8135 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 30 |
| 31 | | 6.4 | 15059 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | Add clz rain | 31 |
| TOTAL | | | 34210 | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| DAILY MINIMUM | | | 925 | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| DAILY MAXIMUM | | | 15059 | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| MONTHLY AVG. | | | 7914 | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
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| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: RIVERWOOD | Phone Number: 503 2261912 | Month/Year: NOV 2005
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR0031164-3
Plant Type: RECIR. GRAVEL FILTER | County: | Population Served: ~100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x OWNER — Authorized Signature — Date: DEC 15, 2005

MARTIN MARTIN — Name (Print)

RECEIVED DEC 19 2005 DEPT OF ENVIRONMENTAL QUALITY NORTHWEST REGION

## Operator Certification

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____
Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD Concentration mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
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| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM E.coli MPN/MF CFU/100 ml | COLIFORM Fecal MPN/MF CFU/100 ml | COLIFORM Total MPN/MF CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.4 | 17743 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | |
| 2 | | 6.3 | 9573 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | Add clz |
| 3 | | 6.3 | 670 | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | Pvalve closed |
| 4 | | 6.3 | 1331 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | |
| 5 | | 6.3 | 3360 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | Add clz |
| 6 | | 6.4 | 7241 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | |
| 7 | | 6.4 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | |
| 8 | | 6.4 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | Flowmeter offline |
| 9 | | 6.2 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | Add clz |
| 10 | | 6.2 | V5400 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | meter reset |
| 11 | | 6.2 | 7874 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | Add clz |
| 12 | | 6.2 | 11739 | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | |
| 13 | | 6.2 | 17847 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | |
| 14 | | 6.2 | 12113 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | |
| 15 | | 6.3 | 10710 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | |
| 16 | | 6.3 | 8004 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | Add clz |
| 17 | | 6.2 | 6342 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | |
| 18 | | 6.3 | 6899 | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | |
| 19 | | 6.3 | 6507 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | |
| 20 | | 6.2 | 7033 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | |
| 21 | | 6.2 | 2749 | | <3 | 97.6 | | | <3 | 93.6 | | | | | | | | 0.5 | | | <1 | | | | | | | | | Add clz |
| 22 | | 6.3 | 4258 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | |
| 23 | | 6.2 | 10860 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | |
| 24 | | 6.3 | 6479 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | |
| 25 | | 6.3 | Flow meter off line | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | Add clz |
| 26 | | 6.2 | Flow Meter repair and reset | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | |
| 27 | | 6.3 | 1645 | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | |
| 28 | | 6.3 | 3209 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | |
| 29 | | 6.2 | 6795 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | |
| 30 | | 6.3 | 9686 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | Add clz |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL | | | 212817 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Riverwood WWF | Phone Number: 503 226 1912 | Month/Year: Dec 2007
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75591 | EPA Reference No.: OR 00319-3
Plant Type: recir. gravel filter | County: Columbia | Population Served: ~100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x _____ Authorized Signature

Margaret C. Magura Name (Print)

RECEIVED FEB 15 2008 Date DEPT OF ENVIRONMENTAL QUALITY NORTHWEST REGION

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print): Margaret C. Magura Certification No. & Grade: Operator 4

Treatment Sys. Class ____ Principal Operator Name (print): Margaret C. Magura Certification No. & Grade: Lead

**INFLUENT**

| Date | Temp °F | Temp °C | pH S.U. | Flow MGD | BOD Grab Conc. mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Conc. mg/L | TSS Comp. Loading lbs. |
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| TOTAL | | | | | | | | | |
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| DAILY MAXIMUM | | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | | |
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| DAILY LIMITS | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | |

**EFFLUENT** (identify outfall number – e.g. 001, 002, 003):

| Date | Temp °F | Temp °C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Conc. mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Conc. mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Conc. mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U. | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F | RECEIVING STREAM Temperature °C | pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | 6.2 | 7564 | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | | | Add cl2 lots of Rain | 2 |
| 2 | | | 6.3 | 18740 | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | | | | 3 |
| 3 | | | 6.3 | 16003 | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | | | | 4 |
| 4 | | | 6.2 | 8016 | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | | | | 5 |
| 5 | | | 6.2 | 8874 | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | | | | 6 |
| 6 | | | 6.2 | 7311 | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | | | | 7 |
| 7 | | | 6.2 | 8644 | | | | | | | | | | | | | | | .5 | | | | | | | | | | | | | | Add cl2 | 8 |
| 8 | | | 6.2 | 7962 | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | | | | 9 |
| 9 | | | 6.2 | 8696 | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | | | | 10 |
| 10 | | | 6.2 | 8221 | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | | | | 11 |
| 11 | | | 6.2 | 8476 | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | | | | 12 |
| 12 | | | 6.3 | 8172 | | | | | | | | | | | | | | | .5 | | | | | | | | | | | | | | Add cl2 | 13 |
| 13 | | | 6.3 | 7009 | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | | | | 14 |
| 14 | | | 6.3 | 8013 | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | | | | 15 |
| 15 | | | 6.2 | 7965 | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | | | | 16 |
| 16 | | | 6.2 | 7886 | | | | | | | | | | | | | | | .5 | | | | | | | | | | | | | | | 17 |
| 17 | | | 6.2 | 10050 | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | | | Add cl2 Rain | 18 |
| 18 | | | 6.3 | 10,872 | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | | | Rain | 19 |
| 19 | | | 6.3 | 10146 | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | | | Rain | 20 |
| 20 | | | 6.3 | 12388 | | | | | | | | | | | | | | | .5 | | | | | | | | | | | | | | Add cl2 – Rain | 21 |
| 21 | | | 6.3 | 13076 | <3 | | 95% | <3 | 91% | | | | | | | | | | .3 | | | | | | | | | | | | | | Add cl2 – Rain | 22 |
| 22 | | | 6.3 | 22142 | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | | | Rain | 23 |
| 23 | | | 6.2 | 18283 | | | | | | | | | | | | | | | 6.1 | | | | | | | | | | | | | | Rain | 24 |
| 24 | | | 6.3 | 13304 | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | | | Rain | 25 |
| 25 | | | 6.3 | 12812 | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | | | Rain | 26 |
| 26 | | | 6.3 | 15843 | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | | | Rain | 27 |
| 27 | | | 6.3 | 15499 | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | | | Add cl2 – Rain | 28 |
| 28 | | | 6.3 | 20486 | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | | | Add cl2 – Rain | 29 |
| 29 | | | 6.2 | 18627 | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | | | Add cl2 – Rain | 30 |
| 30 | | | 6.3 | 24263 | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | | | Rain | 31 |
| 31 | | | 6.3 | 25457 | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | | | | |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

WE SUSPECT WATER MIGHT BE GETTING INTO THE SYSTEM ~~FROM~~ FILTER?

Attachment V
August 18-19, 2010 EQC meeting

# Discharge Monitoring Report - Oregon Department of Environmental Quality



Facility Name: Rogue Valley MHP
Phone Number: 503 226 1913
Month/Year: 1/1-31/06

DEQ Permit No.: 102520
DEQ File No./Facility ID: ~~00 003114 3~~
EPA Reference No.: OR 0031143

Plant Type: RAF
County: ~100
Population Served: ~10

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x _____ Authorized Signature

MAGAR E MAGAR Name (Print)

RECEIVED FEB 24 2006 DEPT OF ENVIRONMENTAL QUALITY NORTHWEST REGION

## Operator Certification

Collection Sys. Class: 1 — Principal Operator Name (print): MAGAR — Certification No. & Grade: review

Treatment Sys. Class: 1 — Principal Operator Name (print): MAGAR — Certification No. & Grade: review

| Date | INFLUENT °F/°C Temperature | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
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| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

| Date | EFFLUENT (identify outfall number – e.g. 001, 002, 003): °F/°C Temperature | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN MF E.coli CFU/100 ml | COLIFORM MPN MF Fecal CFU/100 ml | COLIFORM MPN MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM °F/°C Temperature | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.2 | 8854 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add Cl2 Rain | 1 |
| 2 | | 6.2 | 18856 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | Rain | 2 |
| 3 | | 6.2 | 12857 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | Rain | 3 |
| 4 | | 6.2 | 11073 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 4 |
| 5 | | 6.2 | 9182 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add Cl2 Rain | 5 |
| 6 | | 6.2 | 16392 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | Rain | 6 |
| 7 | | 6.2 | 20484 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add Cl2 Rain | 7 |
| 8 | | 6.2 | 17443 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | Rain | 8 |
| 9 | | 6.3 | 15514 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add Cl2 Rain | 9 |
| 10 | | 6.3 | 35964 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | Rain | 10 |
| 11 | | 6.2 | 43164 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add Cl2 Rain | 11 |
| 12 | | 6.2 | 22930 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | Rain | 12 |
| 13 | | 6.1 | 17725 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | Rain | 13 |
| 14 | | 6.2 | 19809 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add Cl2 | 14 |
| 15 | | 6.2 | 13032 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 15 |
| 16 | | 6.3 | 14312 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add Cl2 Rain | 16 |
| 17 | | 6.3 | 20365 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | Rain | 17 |
| 18 | | 6.4 | 19329 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | Rain | 18 |
| 19 | | 6.2 | 10781 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | Rain | 19 |
| 20 | | 6.2 | 22379 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add Cl2 Rain | 20 |
| 21 | | 6.3 | 14958 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | Rain | 21 |
| 22 | | 6.3 | 10150 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add Cl2 | 22 |
| 23 | | 6.2 | 9771 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 23 |
| 24 | | 6.3 | 9489 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 24 |
| 25 | | 6.3 | 6113 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | Rain | 25 |
| 26 | | 6.3 | 7531 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 26 |
| 27 | | 6.2 | 8758 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | Rain | 27 |
| 28 | | 6.2 | 16257 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add Cl2 Rain | 28 |
| 29 | | 6.2 | 13693 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add Cl2 Rain | 29 |
| 30 | | 6.4 | 50923 | | 1 | 94 | | | | <3 | 72 | | | | | | | | .5 | | | | | | | | | | | Add Cl2 Rain | 30 |
| 31 | | 6.3 | 17666 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
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| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

It is possible that water is leaking in the system

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name Klamath Falls | Phone Number 503 226 1913 | Month/Year Feb 2006
DEQ Permit No. 102570 | DEQ File No./Facility ID 10241 75541 | EPA Reference No. OR 0020346-3
Plant Type Recirculating Filter | County Klamath | Population Served 21,100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

RECEIVED MAR 17 2006 DEPARTMENT OF ENVIRONMENTAL QUALITY NORTHWEST REGION

X [signature] Authorized Signature — 3/14/06 Date

Magar E. Magar
Name (Print)

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____
Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

**INFLUENT**

| Date | Temperature °C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
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| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.3 | 23488 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 1 |
| 2 | | 6.2 | 13644 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Addclz - Rain | 2 |
| 3 | | 6.3 | 16600 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | Rain | 3 |
| 4 | | 6.3 | 19479 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Addclz - Rain | 4 |
| 5 | | 6.3 | 14660 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | Rain | 5 |
| 6 | | 6.4 | 13690 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 6 |
| 7 | | 6.4 | 8326 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 7 |
| 8 | | 6.4 | 9119 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Addclz | 8 |
| 9 | | 6.3 | 9265 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | 9 |
| 10 | | 6.4 | 5681 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Addclz | 10 |
| 11 | | 6.4 | 7236 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Addclz | 11 |
| 12 | | 6.4 | 7159 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Addclz | 12 |
| 13 | | 6.3 | 9027 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 13 |
| 14 | | 6.4 | 9674 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 14 |
| 15 | | 6.4 | 7840 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 15 |
| 16 | | 6.4 | 7584 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 16 |
| 17 | | 6.3 | [redacted] | 8439 ← | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Addclz | 17 |
| 18 | | 6.3 | 9753 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 18 |
| 19 | | 6.3 | 10579 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Addclz | 19 |
| 20 | | 6.4 | 9450 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 20 |
| 21 | | 6.4 | 9047 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 21 |
| 22 | | 6.4 | 6499 | | <3 | Min. | | | | | <3 | 98 | | | | | | | .7 | | | <1 | | | | | | | | Addclz | 22 |
| 23 | | 6.3 | 7766 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | 23 |
| 24 | | 6.4 | 9257 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 24 |
| 25 | | 6.4 | 6434 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Addclz | 25 |
| 26 | | 6.4 | 8287 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Addclz Rain | 26 |
| 27 | | 6.4 | 8315 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | Rain | 27 |
| 28 | | 6.4 | 10984 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 28 |
| 29 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 29 |
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| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | 287.49 | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | 5681 | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | 23488 | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | — | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | — | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

.86 .21 .33 .49 .25 .45 .42 .81

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Riverwood Map | Phone Number: 503 226 1913 | Month/Year: March 06
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR0031143
Plant Type: recv. gravel filler | County: Columbia | Population Served: a-100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] Date: 4/6/06

Authorized Signature

Magar E. Magar

Name (Print)

**Operator Certification**

Collection Sys. Class: ____ Principal Operator Name (print): ____ Certification No. & Grade: ____
Treatment Sys. Class: ____ Principal Operator Name (print): ____ Certification No. & Grade: ____

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
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| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Amnonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.4 | 19318 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 1 |
| 2 | | 6.4 | 7274 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add Cl2 | 2 |
| 3 | | 6.4 | 6687 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 3 |
| 4 | | 6.3 | 9625 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | Rain | 4 |
| 5 | | 6.4 | 6668 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add Cl2 Rain | 5 |
| 6 | | 6.3 | 8139 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | Rain | 6 |
| 7 | | 6.3 | 9323 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 7 |
| 8 | | 6.2 | 10327 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add Cl2 Rain | 8 |
| 9 | | 6.3 | 12803 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | Rain | 9 |
| 10 | | 6.3 | 19113 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add Cl2 Rain | 10 |
| 11 | | 6.4 | 15141 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | Rain | 11 |
| 12 | | 6.3 | 8472 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 12 |
| 13 | | 6.4 | 8647 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add Cl2 | 13 |
| 14 | | 6.3 | 7103 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 14 |
| 15 | | 6.3 | 8398 | | | | | | | | | | | | | | | | .3 | | | | | | | | | | | Add Cl2 Rain | 15 |
| 16 | | 6.4 | 9368 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add Cl2 Rain | 16 |
| 17 | | 6.4 | 8516 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | Rain | 17 |
| 18 | | 6.4 | 9453 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 18 |
| 19 | | 6.4 | 10257 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 19 |
| 20 | | 6.3 | 7389 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 20 |
| 21 | | 6.3 | 7343 | | | | | | | | | | | | | | | | .3 | | | | | | | | | | | Add Cl2 Rain | 21 |
| 22 | | 6.4 | 8610 | | | | | | | | | | | | | | | | 1.9 | | | | | | | | | | | | 22 |
| 23 | | 6.4 | 8439 | <3 | 797 | | | | | <3 | 796 | | | | | | | | 1.5 | | | | | | | | | | | | 23 |
| 24 | | 6.3 | 8260 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | Rain | 24 |
| 25 | | 6.2 | 7507 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | Add Cl2 | 25 |
| 26 | | 6.3 | 8694 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | Rain | 26 |
| 27 | | 6.3 | 9543 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add Cl2 | 27 |
| 28 | | 6.3 | 8847 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 28 |
| 29 | | 6.3 | 7415 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 29 |
| 30 | | 6.3 | 7443 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add Cl2 | 30 |
| 31 | | 6.3 | 7767 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Attachment V
August 18-19, 2010 EQC meeting
Page 170 of 370

# Discharge Monitoring Report - Oregon Department of Environmental Quality

RECEIVED
MAY 18 2006
DEPT OF ENVIRONMENTAL QUALITY
NORTHWEST REGION

Facility Name: [illegible] MHV | Phone Number: 503 2261913 | Month/Year: 4-1-06
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR 0031143
Plant Type: RECIR. GRAVEL | County: COLUMBIA | Population Served: ~100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x [signature] Authorized Signature — Date: 5/14/06

MAGAN MAGAN
Name (Print)

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print): MAGAN — Certification No. & Grade: pending
Treatment Sys. Class ____ Principal Operator Name (print): ____ — Certification No. & Grade: ____

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
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| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM E.coli MPN/MF CFU/100 ml | COLIFORM Fecal MPN/MF CFU/100 ml | COLIFORM Total MPN/MF CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.3 | 10173 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz Rain | 1 |
| 2 | | 6.3 | 9510 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 2 |
| 3 | | 6.3 | 8748 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | Rain | 3 |
| 4 | | 6.3 | 9113 | | | | | | | | | | | | | | | | .3 | | | | | | | | | | | Add clz | 4 |
| 5 | | 6.4 | 9197 | | | | | | | | | | | | | | | | .3 | | | | | | | | | | | Add clz | 5 |
| 6 | | 6.3 | 8935 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 6 |
| 7 | | 6.3 | 7009 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 7 |
| 8 | | 6.4 | 11171 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add clz Rain | 8 |
| 9 | | 6.3 | 12070 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 9 |
| 10 | | 6.3 | 9905 | | | | | | | | | | | | | | | | .3 | | | | | | | | | | | Add clz | 10 |
| 11 | | 6.3 | 9687 | | <3 | 91 | | | | | <3 | 93 | | | | | | | .7 | | | <1 | | | | | | | | | 11 |
| 12 | | 6.3 | 8971 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz | 12 |
| 13 | | 6.4 | 8411 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 13 |
| 14 | | 6.3 | 9216 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz Rain | 14 |
| 15 | | 6.4 | 8708 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | Rain | 15 |
| 16 | | 6.3 | 10038 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz Rain | 16 |
| 17 | | 6.3 | 11280 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | Rain | 17 |
| 18 | | 6.3 | 10302 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 18 |
| 19 | | 6.4 | 7889 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 19 |
| 20 | | 6.3 | 8765 | | | | | | | | | | | | | | | | .3 | | | | | | | | | | | Add clz | 20 |
| 21 | | 6.3 | 7247 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 21 |
| 22 | | 6.3 | 9535 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz | 22 |
| 23 | | 6.3 | 8111 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 23 |
| 24 | | 6.4 | 8409 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 24 |
| 25 | | 6.3 | 10580 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add clz | 25 |
| 26 | | 6.3 | 8228 | | | | | | | | | | | | | | | | 1.7 | | | | | | | | | | | | 26 |
| 27 | | 6.3 | 7843 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | 27 |
| 28 | | 6.3 | 6891 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 28 |
| 29 | | 6.3 | 9210 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add clz Rain | 29 |
| 30 | | 6.4 | 6570 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | 270722 | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| DAILY MINIMUM | | | 6570 | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| DAILY MAXIMUM | | | 12070 | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
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# Discharge Monitoring Report - Oregon Department of Environmental Quality

RECEIVED
2 1 JUN
LWQ

Facility Name RIVERWOOD | Phone Number 503 2261913 | Month/Year MAY 06
DEQ Permit No. 102520 | DEQ File No./Facility ID 75541 | EPA Reference No. OR 00034
Plant Type RECIR. GRAVEL | County Columbia | Population Served ~100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x _____ Authorized Signature _____ Date

MAGAN MAGAN Name (Print)

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print) MAGAN C MAGAN Certification No. & Grade 10622

Treatment Sys. Class ____ Principal Operator Name (print) _____ Certification No. & Grade 10621

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
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| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.3 | 6211 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | |
| 2 | | 6.4 | 7946 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add clz |
| 3 | | 6.3 | 7322 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | |
| 4 | | 6.4 | 7242 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | |
| 5 | | 6.3 | 5676 | <3 | 198 | | | | | <2 | 798 | | | | | | | | .7 | | | nd | | | | | | | |
| 6 | | 6.3 | 7250 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz |
| 7 | | 6.2 | 6209 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | Rain |
| 8 | | 6.4 | 9472 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | |
| 9 | | 6.3 | 6665 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz |
| 10 | | 6.2 | 5871 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz |
| 11 | | 6.3 | 5748 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | |
| 12 | | 6.3 | 8048 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | |
| 13 | | 6.3 | 6694 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | |
| 14 | | 6.2 | 5452 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz |
| 15 | | 6.2 | 5195 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | |
| 16 | | 6.3 | 5710 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | |
| 17 | | 6.2 | 5196 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | |
| 18 | | 6.2 | 6865 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | |
| 19 | | 6.3 | 6446 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add clz |
| 20 | | 6.3 | 4956 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | |
| 21 | | 6.2 | 4887 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | |
| 22 | | 6.3 | 7375 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add clz Rain |
| 23 | | 6.3 | 6672 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | Rain |
| 24 | | 6.3 | 12443 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz Rain |
| 25 | | 6.3 | 11538 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | Rain |
| 26 | | 6.3 | 11018 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add clz Rain |
| 27 | | 6.3 | 12435 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | Rain |
| 28 | | 6.3 | 12479 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add clz Rain |
| 29 | | 6.2 | 7552 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | |
| 30 | | 6.3 | 7693 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | |
| 31 | | 6.3 | 7204 | | | | | | | | | | | | | | | | .3 | | | | | | | | | | | Add clz Rain |
| TOTAL | | | 211624 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | 4887 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | 12479 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVG. | | | 7468 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Attachment V
August 18-19, 2010 EQC meeting
Page 172 of 370

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: [illegible] NHP | Phone Number: 503 226 1913 | Month/Year: JUNE 2006
DEQ Permit No.: 105520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR 003114-3
Plant Type: REGRS. FILTR | County: COLUMBIA | Population Served: ~100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x [signature] 7/15/06
Authorized Signature — Date

MICHAEL C NHOM
Name (Print)

RECEIVED
JUL 19 2006
DEPT OF ENVIRONMENTAL QUALITY
NORTHWEST REGION

Operator Certification

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____
Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Removal % | BOD Loading lbs. | CBOD Grab Concentration mg/L | CBOD Removal % | CBOD Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Total Phosphorous mg/L | NUTRIENTS Total Kjeldahl Nitrogen mg/L | NUTRIENTS Ammonia Nitrogen mg/L | NUTRIENTS Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | [illegible] | | | 125 | | | 6.3 | 6803 | | <3 | 98.5 | | <3 | 97.2 | | | | | | | | | | 1.3 | | | | | | | | | | | | 1 |
| 2 | | | | | | | | | | 6.3 | 8034 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | Rain | 2 |
| 3 | | | | | | | | | | 6.2 | 11579 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Rain Add clz | 3 |
| 4 | | | | | | | | | | 6.4 | 9579 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 4 |
| 5 | | | | | | | | | | 6.3 | 12946 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Rain Add clz | 5 |
| 6 | | | | | | | | | | 6.3 | 7949 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | 6 |
| 7 | | | | | | | | | | 6.2 | 5924 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 7 |
| 8 | | | | | | | | | | 6.3 | 6832 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz | 8 |
| 9 | | | | | | | | | | 6.3 | 6360 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | 9 |
| 10 | | | | | | | | | | 6.2 | 6392 | | | | | | | | | | | | | | | 1.0 | .5 | | | | | | | | | | Rain | 10 |
| 11 | | | | | | | | | | 6.3 | 6255 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | Rain | 11 |
| 12 | | | | | | | | | | 6.3 | 7791 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | Rain | 12 |
| 13 | | | | | | | | | | 6.3 | 6911 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | Rain | 13 |
| 14 | | | | | | | | | | 6.3 | 6826 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Rain Add clz | 14 |
| 15 | | | | | | | | | | 6.3 | 5582 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 15 |
| 16 | | | | | | | | | | 6.3 | 6693 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 16 |
| 17 | | | | | | | | | | 6.2 | 4742 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add clz | 17 |
| 18 | | | | | | | | | | 6.3 | 5125 | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | | 18 |
| 19 | | | | | | | | | | 6.2 | 5497 | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | | 19 |
| 20 | | | | | | | | | | 6.2 | 7119 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 20 |
| 21 | | | | | | | | | | 6.3 | 4954 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 21 |
| 22 | | | | | | | | | | 6.3 | 5497 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 22 |
| 23 | | | | | | | | | | 6.3 | 4884 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 23 |
| 24 | | | | | | | | | | 6.2 | 3906 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add clz | 24 |
| 25 | | | | | | | | | | 6.3 | 3065 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 25 |
| 26 | | | | | | | | | | 6.3 | 4995 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add clz | 26 |
| 27 | | | | | | | | | | 6.3 | 5035 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | 27 |
| 28 | | | | | | | | | | 6.3 | 4987 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 28 |
| 29 | | | | | | | | | | 6.3 | 4919 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 29 |
| 30 | | | | | | | | | | 6.2 | 4991 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | 187434 | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | 6025 | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

Attachment V
August 18-19, 2010 EQC meeting
Page 7 of 11

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Prescott Beach CCD | Phone Number: 503 226 1913 | Month/Year: July 06
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR 000314
Plant Type: Pond Aerated | County: Columbia | Population Served: ~100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature

AUG 24 2006 Date

MAGAN MAGEE Name (Print)

VLWC

DEPT OF ENVIRONMENTAL QUALITY NORTHWEST REGION

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print): MAGAN MAGEE Certification No. & Grade: 16622

Treatment Sys. Class ____ Principal Operator Name (print): ____ Certification No. & Grade: 16621

**INFLUENT**

| Date | Temperature °C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
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| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Removal % | BOD Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION CHLORINE Transmittance % | DISINFECTION UV | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.3 | 4413 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | | Add Cl2 | 1 |
| 2 | | 6.3 | 4828 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | | 2 |
| 3 | | 6.3 | 3369 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | | 3 |
| 4 | | 6.3 | 5629 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | | 4 |
| 5 | | 6.3 | 4817 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | | 5 |
| 6 | | 6.3 | 4780 | 93 | 98.6 | | | | | | 4 | 96 | | | | | | | .4 | | | | | | | | | | | | Add Cl2 | 6 |
| 7 | | 6.3 | 3989 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | | 7 |
| 8 | | 6.3 | 3706 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | | 8 |
| 9 | | 6.3 | 5112 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | | 9 |
| 10 | | 6.4 | 2709 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | | 10 |
| 11 | | 6.3 | 5088 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | | 11 |
| 12 | | 6.3 | 4446 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | Add Cl2 | 12 |
| 13 | | 6.3 | 5641 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | | 13 |
| 14 | | 6.3 | 3375 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | | 14 |
| 15 | | 6.3 | 5335 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | | 15 |
| 16 | | 6.3 | 3551 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | Add Cl2 | 16 |
| 17 | | 6.4 | 3655 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | | 17 |
| 18 | | 6.3 | 5715 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | | 18 |
| 19 | | 6.3 | 5923 | | | | | | | | | | | | | | | | 1.9 | | | | | | | | | | | | | 19 |
| 20 | | 6.3 | 5924 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | | 20 |
| 21 | | 6.3 | 3942 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | | 21 |
| 22 | | 6.4 | 6416 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | | 22 |
| 23 | | 6.4 | 5865 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | Add Cl2 | 23 |
| 24 | | 6.3 | 4356 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | | 24 |
| 25 | | 6.3 | 3176 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | | 25 |
| 26 | | 6.3 | 6548 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | | 26 |
| 27 | | 6.3 | 3418 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | | 27 |
| 28 | | 6.3 | 5056 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | | 28 |
| 29 | | 6.3 | 2939 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | Add Cl2 Rain | 29 |
| 30 | | 6.2 | 4398 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | Rain | 30 |
| 31 | | 6.3 | 7936 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | | 31 |
| TOTAL | | | 146019 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | 2709 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | 7936 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | - | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | 4716 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: [illegible] Wood  Phone Number: 503 226 1915  Month/Year: Aug 2006
DEQ Permit No.: 102520  DEQ File No./Facility ID: 75544  EPA Reference No.: OR 0033413
Plant Type: TECH CMPNT  County: COLUMBIA  Population Served: ~100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] Authorized Signature  Date

Name (Print): [illegible] Lowe

RECEIVED SEP 22 2006 DEPT OF ENVIRONMENTAL QUALITY NORTHWEST REGION

**Operator Certification**

Collection Sys. Class: ___  Principal Operator Name (print): ___  Certification No. & Grade: ___
Treatment Sys. Class: I  Principal Operator Name (print): Megan Mayne  Certification No. & Grade: 1

**INFLUENT**

| Date | Temp °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
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| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temp °F/°C | pH | Flow | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U. | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Amnonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.3 | 4068 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 1 |
| 2 | | 6.3 | 4739 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | Add cl2 | 2 |
| 3 | | 6.3 | 4854 | | <4 | 98 | | | | | <4 | 94 | | | | | | | 1.4 | | | 10 | | | | | | | | | 3 |
| 4 | | 6.3 | 5122 | | | | | | | | >1 | | | | | | | | 1.0 | | | | | | | | | | | | 4 |
| 5 | | 6.3 | 5097 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 5 |
| 6 | | 6.3 | 3793 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Add cl2 | 6 |
| 7 | | 6.4 | 4376 | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | | 7 |
| 8 | | 6.4 | 5276 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 8 |
| 9 | | 6.3 | 7630 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | 6in Rain | 9 |
| 10 | | 6.3 | 4341 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add cl2 | 10 |
| 11 | | 6.3 | 4936 | | | | | | | | | | | | | | | | 1.7 | | | | | | | | | | | | 11 |
| 12 | | 6.3 | 7226 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 12 |
| 13 | | 6.3 | 3433 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 13 |
| 14 | | 6.3 | 4742 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add cl2 | 14 |
| 15 | | 6.3 | 4136 | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | | 15 |
| 16 | | 6.3 | 4481 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | 16 |
| 17 | | 6.3 | 4706 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 17 |
| 18 | | 6.3 | 4065 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 18 |
| 19 | | 6.3 | 4129 | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | | 19 |
| 20 | | 6.3 | 4026 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add cl2 | 20 |
| 21 | | 6.3 | 5115 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 21 |
| 22 | | 6.3 | 4041 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 22 |
| 23 | | 6.3 | 5387 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Add cl2 | 23 |
| 24 | | 6.3 | 8696 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | 24 |
| 25 | | | 5874 | | | | | | | | | | | | | | | | | | | | | | | | | | | All test supplies stolen | 25 |
| 26 | | | 3644 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 26 |
| 27 | | | 4192 | | | | | | | | | | | | | | | | | | | | | | | | | | | Add cl2 | 27 |
| 28 | | | 5281 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 28 |
| 29 | | | 4135 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 29 |
| 30 | | | 5083 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 30 |
| 31 | | | 6346 | | | | | | | | | | | | | | | | | | | | | | | | | | | Add cl2 | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

All tests & equipment also stolen

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name RIVERWOOD | Phone Number 503 226 1913 | Month/Year 9/1/06
DEQ Permit No. 102520 | DEQ File No./Facility ID 75541 | EPA Reference No. OR 0034
Plant Type NON-CONTACT | County COLUMBIA | Population Served 4100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x [signature] 10/25/01
Authorized Signature Date

MAGNA MAGAR
Name (Print)

DEPT OF ENVIRONMENTAL QUALITY
RECEIVED
OCT 30 2006
NORTHWEST REGION

Operator Certification

Collection Sys. Class ____ Principal Operator Name (print) WILLIAM MCGRAW Certification No. & Grade 10622
Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade 10622

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Transmittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | | 5039 | | | | | | | | | | | | | | | | | | | | | | | | | | | Added | 1 |
| 2 | | | | | | | | | | | 4304 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 2 |
| 3 | | | | | | | | | | | 4136 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 3 |
| 4 | | | | | | | | | | | 5037 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 4 |
| 5 | | | | | | | | | | | 5229 | | | | | | | | | | | | | | | | | | | | | | | | | | | Added | 5 |
| 6 | | | | | | | | | | | 5029 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 6 |
| 7 | | | | 280 | | | 143 | | | | 4677 | | <3 | 99% | | | | | <2 | 98% | | | | | | | | | | | Nil | | | | | | clean filters | 7 |
| 8 | | | | | | | | | | | 5111 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 8 |
| 9 | | | | | | | | | | | 4557 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 9 |
| 10 | | | | | | | | | | | 4907 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 10 |
| 11 | | | | | | | | | | 6.4 | 4513 | | | | | | | | | | | | | | | | | | | | | | | | | | | Added | 11 |
| 12 | | | | | | | | | | 6.2 | 3956 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 12 |
| 13 | | | | | | | | | | | 5469 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 13 |
| 14 | | | | | | | | | | 6.2 | 3930 | | | | | | | | | | | | | | | | | | | | | | | | | | | Rain Added | 14 |
| 15 | | | | | | | | | | | 4851 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 15 |
| 16 | | | | | | | | | | 6.2 | 3552 | | | | | | | | | | | | | | | | | | | | | | | | | | | Rain | 16 |
| 17 | | | | | | | | | | | 5731 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 17 |
| 18 | | | | | | | | | | 6.2 | 6386 | | | | | | | | | | | | | | | | | | | | | | | | | | | Rain Added | 18 |
| 19 | | | | | | | | | | 6.2 | 7142 | | | | | | | | | | | | | | | | | | | | | | | | | | | clean filters Added | 19 |
| 20 | | | | | | | | | | | 7748 | | | | | | | | | | | | | | | | | | | | | | | | | | | Rain | 20 |
| 21 | | | | | | | | | | 10/1 | 6164 | | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | 21 |
| 22 | | | | | | | | | | | 7730 | | | | | | | | | | | | | | | | | .8 | | | | | | | | | | 22 |
| 23 | | | | | | | | | | | 4826 | | | | | | | | | | | | | | | | | .6 | | | | | | | | | | 23 |
| 24 | | | | | | | | | | 1 | 3976 | | | | | | | | | | | | | | | | | .4 | | | | | | | | | Added | 24 |
| 25 | | | | | | | | | | | 6053 | | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | 25 |
| 26 | | | | | | | | | | 6.3 | 5120 | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | All new test supplies | 26 |
| 27 | | | | | | | | | | 6.3 | 9814 | | | | | | | | | | | | | | | | | .4 | | | | | | | | | Added | 27 |
| 28 | | | | | | | | | | 6.3 | 3811 | | | | | | | | | | | | | | | | | .4 | | | | | | | | | | 28 |
| 29 | | | | | | | | | | 6.3 | 5017 | | | | | | | | | | | | | | | | | .7 | | | | | | | | | | 29 |
| 30 | | | | | | | | | | 6.3 | 5274 | | | | | | | | | | | | | | | | | .4 | | | | | | | | | Added | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
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| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

OCT 2006

Facility Name RIVERWOOD — Phone Number 503 2261913 — Month/Year OCT 06
DEQ Permit No. 102520 — DEQ File No./Facility ID 75541 — EPA Reference No. OR 000314
Plant Type RECIR GRAVEL — County COLUMBIA — Population Served ~100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x _____ 11/23/06
Authorized Signature — Date

MICHAEL C MAGHAN
Name (Print)

RECEIVED
NOV 28 2006
DEPT OF ENVIRONMENTAL QUALITY
NORTHWEST REGION

**Operator Certification**

Collection Sys. Class 1 — Principal Operator Name (print) MAGHAN — Certification No. & Grade
Treatment Sys. Class 1 — Principal Operator Name (print) MAGHAN — Certification No. & Grade

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
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| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U. | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 6.2 | 5596 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 1 |
| | 6.3 | 4750 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 2 |
| | 6.3 | 4611 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Added | 3 |
| | 6.3 | 6221 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | cleanFilter 1500gl tank | 4 |
| | 6.3 | 6276 | | <2 | 99 | | | | | 12 | 127 | | | | | | | 1.0 | | | NO | | | | | | | | | 5 |
| | 6.3 | 4191 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 6 |
| | 6.3 | 5006 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 7 |
| | 6.3 | 422 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | low Flow Oxidve | 8 closed |
| | 6.3 | 4292 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Added | 9 |
| | 6.3 | 6981 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 10 |
| | 6.3 | 3484 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 11 |
| | 6.2 | 4781 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 12 |
| | 6.3 | 4580 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 13 |
| | 6.3 | 5060 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Added | 14 |
| | 6.3 | 3035 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | Rain | 15 |
| | 6.4 | 6839 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | Rain | 16 |
| | 6.3 | 5427 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 17 |
| | 6.3 | 3948 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | Rain | 18 |
| | 6.3 | 6740 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 19 |
| | 6.3 | 5470 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Added | 20 |
| | 6.3 | 6737 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | 21 |
| | 6.3 | 5216 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 22 |
| | 6.4 | 3934 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 23 |
| | 6.4 | 5710 | | | | | | | | | | | | | | | | .3 | | | | | | | | | | | Added Rain | 24 |
| | 6.3 | 5606 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 25 |
| | 6.3 | 4814 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 26 |
| | 6.3 | 6584 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 27 |
| | 6.3 | 3984 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 28 |
| | 6.3 | 4062 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Added | 29 |
| | 6.3 | 5520 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | clean Filter 1500gl tank | 30 |
| | 6.3 | 2506 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 31 |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

Attachment V
August 18,19, 2010 EQC meeting
Page 172 of 370

# Discharge Monitoring Report - Oregon Department of Environmental Quality

| | | | | | |
|---|---|---|---|---|---|
| Facility Name | SANITARY DIST | Phone Number | 503 226 19[illegible] | Month/Year | NOV 2006 |
| DEQ Permit No. | 102520 | DEQ File No./Facility ID | 75541 | EPA Reference No. | OR0030317 |
| Plant Type | RECIR. GRAVEL | County | COLUMBIA | Population Served | 21,108 |

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

RECEIVED
DEC 20 2006
DEQ/WQ

X [signature] Authorized Signature Date

MAGAN MAGAN Name (Print)

**Operator Certification**

| | | | |
|---|---|---|---|
| Collection Sys. Class 1 | Principal Operator Name (print) Magan Magan | Certification No. & Grade | 10622 |
| Treatment Sys. Class | Principal Operator Name (print) | Certification No. & Grade | 10621 |

| Date | INFLUENT Temperature °C/°F | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT (identify outfall number -- e.g. 001, 002, 003): Temperature °C/°F | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM E.coli MPN/MF | COLIFORM Fecal MPN/MF CFU/100 ml | COLIFORM Total MPN/MF | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °C/°F | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | 6.3 | 4555 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | 1 |
| 2 | | | | 310 | | | 177 | | | 6.3 | 4652 | | 67 | 99 | | | | | 8 | 96 | | | | | | | .7 | | | | | 2 | | | | | 2 |
| 3 | | | | | | | | | | 6.4 | 9966 | | | | | | | | | | | | | | | | .5 | | | | | | | | | Rain | 3 |
| 4 | | | | | | | | | | 6.4 | 9402 | | | | | | | | | | | | | | | | .3 | | | | | | | | | Addcl Rain | 4 |
| 5 | | | | | | | | | | 6.4 | 13255 | | | | | | | | | | | | | | | | .9 | | | | | | | | | Heavy Rain | 5 |
| 6 | | | | | | | | | | 6.4 | 38802 | | | | | | | | | | | | | | | | .2 | | | | | | | | | Addcl Heavy Rain | 6 |
| 7 | | | | | | | | | | 6.4 | 48172 | | | | | | | | | | | | | | | | .3 | | | | | | | | | Addcl Heavy Rain | 7 |
| 8 | | | | | | | | | | 6.3 | 23188 | | | | | | | | | | | | | | | | .2 | | | | | | | | | Addcl Rain | 8 |
| 9 | | | | | | | | | | 6.3 | 13059 | | | | | | | | | | | | | | | | .5 | | | | | | | | | Addcl Rain | 9 |
| 10 | | | | | | | | | | 6.4 | 10870 | | | | | | | | | | | | | | | | .7 | | | | | | | | | Rain | 10 |
| 11 | | | | | | | | | | 6.4 | 28002 | | | | | | | | | | | | | | | | .3 | | | | | | | | | Addcl Rain | 11 |
| 12 | | | | | | | | | | 6.3 | 11937 | | | | | | | | | | | | | | | | .7 | | | | | | | | | Rain w/ wind storm | 12 |
| 13 | | | | | | | | | | 6.3 | 12226 | | | | | | | | | | | | | | | | .3 | | | | | | | | | Addcl Rain | 13 |
| 14 | | | | | | | | | | 6.3 | 14295 | | | | | | | | | | | | | | | | .7 | | | | | | | | | Rain | 14 |
| 15 | | | | | | | | | | 6.3 | 10023 | | | | | | | | | | | | | | | | .4 | | | | | | | | | Addcl Rain | 15 |
| 16 | | | | | | | | | | 6.2 | 12852 | | | | | | | | | | | | | | | | .8 | | | | | | | | | 1/2 Day | 16 |
| 17 | | | | | | | | | | 6.3 | 7987 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | 17 |
| 18 | | | | | | | | | | 6.3 | 8189 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | 18 |
| 19 | | | | | | | | | | 6.3 | 6410 | | | | | | | | | | | | | | | | .3 | | | | | | | | | Rain Addcl | 19 |
| 20 | | | | | | | | | | 6.3 | 12057 | | | | | | | | | | | | | | | | .6 | | | | | | | | | Rain | 20 |
| 21 | | | | | | | | | | 6.3 | 11856 | | | | | | | | | | | | | | | | .4 | | | | | | | | | Addcl Heavy Rain | 21 |
| 22 | | | | | | | | | | 6.4 | 22763 | | | | | | | | | | | | | | | | .4 | | | | | | | | | Addcl Heavy Rain | 22 |
| 23 | | | | | | | | | | 6.4 | 15318 | | | | | | | | | | | | | | | | .7 | | | | | | | | | Rain | 23 |
| 24 | | | | | | | | | | 6.4 | 36855 | | | | | | | | | | | | | | | | .4 | | | | | | | | | Addcl Heavy Rain | 24 |
| 25 | | | | | | | | | | 6.4 | 9645 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | 1/2 Rain | 25 |
| 26 | | | | | | | | | | 6.4 | 18902 | | | | | | | | | | | | | | | | .6 | | | | | | | | | Rain | 26 |
| 27 | | | | | | | | | | 6.4 | 24686 | | | | | | | | | | | | | | | | .4 | | | | | | | | | Addcl Rain Storms! | 27 |
| 28 | | | | | | | | | | 6.4 | 15315 | | | | | | | | | | | | | | | | .7 | | | | | | | | | Rain | 28 |
| 29 | | | | | | | | | | 6.4 | 12902 | | | | | | | | | | | | | | | | .5 | | | | | | | | | Rain | 29 |
| 30 | | | | | | | | | | 6.3 | 12955 | | | | | | | | | | | | | | | | .3 | | | | | | | | | Addcl Rain | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

Item M 000308

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: RIVER WOOD | Phone Number: 503 226 [illegible] | Month/Year: DEC 2006
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR 003164 3
Plant Type: RBC [illegible] | County: COLUMBIA | Population Served: ~ 100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x [signature] Authorized Signature

Magan C [illegible] Name (Print)

RECEIVED
JAN 31 2007
DEPT OF ENVIRONMENTAL QUALITY
N.W. REGION WATER QUALITY

Operator Certification

Collection Sys. Class: 1 | Principal Operator Name (print): MAGAN MAGLA | Certification No. & Grade: 10621
Treatment Sys. Class: [illegible] | Principal Operator Name (print): MAGAN | Certification No. & Grade: 10621

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT (identify outfall number -- e.g. 001, 002, 003): Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM °F/°C Temperature | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | 6.3 | 58768 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | 1 |
| 2 | | | | | | | | | | 6.3 | 58764 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | 2 |
| 3 | | | | | | | | | | 6.3 | 58586 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | 3 |
| 4 | | | | | | | | | | 6.3 | 59140 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | Added | 4 |
| 5 | | | | | | | | | | 6.3 | 56810 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | Added | 5 |
| 6 | | | | | | | | | | 6.3 | 57469 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | 6 |
| 7 | | | | | | | | | | 6.3 | 54586 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | 7 |
| 8 | | | | | | | | | | 6.3 | 53341 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | Rain | 8 |
| 9 | | | | | | | | | | 6.3 | 56253 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | Added Rain | 9 |
| 10 | | | | | | | | | | 6.3 | 56792 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | Rain | 10 |
| 11 | | | | | | | | | | 6.3 | 52073 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | Added Rain | 11 |
| 12 | | | | | | | | | | 6.3 | 59618 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | Rain | 12 |
| 13 | | | | | | | | | | 6.3 | 20752 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | Added Rain | 13 |
| 14 | | | | 57 | | | 67 | | | 6.3 | 24062 | <2 | 98 | | | <3 | 95 | | | | | | | | | | .5 | | | | 21 | | | | | | Added Rain | 14 |
| 15 | | | | | | | | | | 6.3 | 23088 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | Added | 15 |
| 16 | | | | | | | | | | 6.3 | 22005 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | 16 |
| 17 | | | | | | | | | | 6.3 | 11796 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | 17 |
| 18 | | | | | | | | | | 6.3 | 8592 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | 18 |
| 19 | | | | | | | | | | 6.3 | 6433 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | Added | 19 |
| 20 | | | | | | | | | | 6.3 | 7775 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | Added Rain | 20 |
| 21 | | | | | | | | | | 6.3 | 10192 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | Added Rain | 21 |
| 22 | | | | | | | | | | 6.3 | 13597 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | Rain | 22 |
| 23 | | | | | | | | | | 6.3 | 14341 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | Rain | 23 |
| 24 | | | | | | | | | | 6.4 | 11770 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | 24 |
| 25 | | | | | | | | | | 6.4 | 19924 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | Added Rain | 25 |
| 26 | | | | | | | | | | 6.4 | 19445 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | Added Rain | 26 |
| 27 | | | | | | | | | | 6.4 | 22532 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | Added | 27 |
| 28 | | | | | | | | | | 6.3 | 12775 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | 28 |
| 29 | | | | | | | | | | 6.3 | 9078 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | 29 |
| 30 | | | | | | | | | | 6.3 | 9190 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | Added | 30 |
| 31 | | | | | | | | | | 6.3 | 6419 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| WKLY AVG MAX | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

Attachment V
August 18-19, 2010 EQC meeting
Page 170 of 272

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Rainier Wood | Phone Number: (503) 226-1565 | Month/Year: Jan 2007
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR 0031647-3
Plant Type: RGSW - GRAVEL | County: COLUMBIA | Population Served: ~100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x _____ Authorized Signature | Date: FEB 26 2007

Name (Print): Roger E Mayer

DEPT OF ENVIRONMENTAL QUALITY RECEIVED NORTHWEST REGION

**Operator Certification**

Collection Sys. Class: ____ Principal Operator Name (print): MAYER ROGER E Certification No. & Grade: 10662
Treatment Sys. Class: ____ Principal Operator Name (print): ____ Certification No. & Grade: ____

**INFLUENT**

| Date | Temperature °C/°F | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
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| DAILY MAXIMUM | | | | | | | | |
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| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number – e.g. 001, 002, 003):

| Date | Temperature °C/°F | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Transmittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °C/°F | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.3 | 6770 | | 21 | | | | | | 2 | | | | | | | | .8 | | | | | | | | | | | |
| 2 | | 6.3 | 7953 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | Rain |
| 3 | | 6.3 | 38631 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Addl Rain |
| 4 | | 6.3 | 24456 | | 6 | 95% | | | | | 2 | 94% | | | | | | | .6 | | | | | | | | | | | |
| 5 | | 6.3 | 16002 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Addl Rain |
| 6 | | 6.4 | 31157 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Addl Rain |
| 7 | | 6.4 | 30270 | | | | | | | | | | | | | | | | .3 | | | | | | | | | | | Addl Rain |
| 8 | | 6.4 | 29113 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Addl |
| 9 | | 6.3 | 13555 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | |
| 10 | | 6.4 | 16718 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | Rain - Slow |
| 11 | | 6.4 | 13687 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Addl |
| 12 | | 6.3 | 11283 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | |
| 13 | | 6.3 | 819 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | |
| 14 | | 6.3 | 9456 | | | | | | | | | | | | | | | | .6 | | | | | 7 | | | | | | | |
| 15 | | 6.3 | 10861 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Addl Rain |
| 16 | | 6.4 | 7606 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Slow |
| 17 | | 6.3 | 8956 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | |
| 18 | | 6.3 | 9273 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | |
| 19 | | 6.4 | 8434 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Addl Rain |
| 20 | | 6.4 | 8849 | | | | | | | | | | | | | | | | 6.3 | | | | | | | | | | | |
| 21 | | 6.4 | 9179 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | |
| 22 | | 6.3 | 7420 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | |
| 23 | | 6.3 | 7405 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | |
| 24 | | 6.3 | 8571 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Addl |
| 25 | | 6.3 | 8007 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | |
| 26 | | 6.3 | 6333 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | |
| 27 | | 6.3 | 7698 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | |
| 28 | | 6.3 | 7362 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Addl |
| 29 | | 6.3 | 7391 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | |
| 30 | | 6.3 | 8223 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | |
| 31 | | 6.9 | 7604 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Attachment V
August 18-19, 2010 EQC meeting
Page 180 of 370

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: [illegible]WOOD  Phone Number: 503 226 19[illegible]  Month/Year: FEB 07
DEQ Permit No.: 102 50  DEQ File No./Facility ID: 75541  EPA Reference No.: OR 000031[illegible]
Plant Type: RECIR CHMCL  County: COLUMBIA  Population Served: ~100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x [signature]  Authorized Signature  Date: 3/24/07
Magar Magar  Name (Print)

DEPT OF ENVIRONMENTAL QUALITY RECEIVED
APR 02 2007
NORTHWEST REGION

LWC

**Operator Certification**

Collection Sys. Class: ____  Principal Operator Name (print): ____  Certification No. & Grade: ____
Treatment Sys. Class: ____  Principal Operator Name (print): ____  Certification No. & Grade: ____

**INFLUENT**

| Date | Temperature °C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | 160 | | | 100 | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM E.coli MPN/MF CFU/100 ml | COLIFORM Fecal MPN/MF CFU/100 ml | COLIFORM Total MPN/MF CFU/100 ml | RECEIVING STREAM Amnonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.2 | 8058 | | <2 | | | | | | <2 | | | | | | | .6 | | | | 7 | | | | | | | | | 1 |
| 2 | | 6.3 | 7971 | | | | | | | | | | | | | | | .5 | | | | | | | | | | | | Add ch | 2 |
| 3 | | 6.4 | 8624 | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | Rain | 3 |
| 4 | | 6.3 | 10339 | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | | 4 |
| 5 | | 6.3 | 8687 | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | | 5 |
| 6 | | 6.3 | 5589 | | | | | | | | | | | | | | | .5 | | | | | | | | | | | | Add ch | 6 |
| 7 | | 6.3 | 7182 | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | | 7 |
| 8 | | 6.3 | 7112 | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | | 8 |
| 9 | | 6.3 | 7613 | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | | 9 |
| 10 | | 6.3 | 6548 | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | | 10 |
| 11 | | 6.3 | 7449 | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | Add ch | 11 |
| 12 | | 6.2 | 6913 | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | | 12 |
| 13 | | 6.3 | 7143 | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | | 13 |
| 14 | | 6.3 | 7416 | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | Rain | 14 |
| 15 | | 6.4 | 15856 | | | | | | | | | | | | | | | .3 | | | | | | | | | | | | Add ch Rain | 15 |
| 16 | | 6.4 | 16272 | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | Rain | 16 |
| 17 | | 6.3 | 11971 | | | | | | | | | | | | | | | .5 | | | | | | | | | | | | Add ch | 17 |
| 18 | | 6.3 | 9785 | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | | 18 |
| 19 | | 6.3 | 10645 | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | Rain | 19 |
| 20 | | 6.3 | 3857 | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | Add ch Rain | 20 |
| 21 | | 6.3 | 23862 | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | | 21 |
| 22 | | 6.3 | 12785 | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | | 22 |
| 23 | | 6.3 | 10149 | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | Add ch Rain | 23 |
| 24 | | 6.3 | 13984 | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | | 24 |
| 25 | | 6.3 | 15250 | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | Rain | 25 |
| 26 | | 6.2 | 14076 | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | Add ch | 26 |
| 27 | | 6.2 | 12403 | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | Rain | 27 |
| 28 | | 6.2 | 27809 | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | Rain Storms | 28 |
| 29 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 29 |
| 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 30 |
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| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Mollwood — Phone Number: 503 226 1915 — Month/Year: March 07
DEQ Permit No.: 102520 — DEQ File No./Facility ID: 75541 — EPA Reference No.: OR 00314
Plant Type: NCSM Lagoon Plate — County: Columbia — Population Served: ~100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature — Date: MAY 17 2007

MAGAR MAGAR Name (Print)

DEPT OF ENVIRONMENTAL QUALITY RECEIVED — NORTHWEST REGION

Operator Certification

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

## INFLUENT

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
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| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

## EFFLUENT (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH — | Flow — MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM E.coli MPN/MF CFU/100 ml | COLIFORM Fecal MPN/MF CFU/100 ml | COLIFORM Total MPN/MF CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.3 | 17607 | | 62 | | | | 92% | | 23 | | 96 | | | | | | .3 | | | 46 | | | | | | | | | Addcn Rain | 1 |
| 2 | | 6.2 | 14932 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 2 |
| 3 | | 6.2 | 14266 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Addcn | 3 |
| 4 | | 6.3 | 10794 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 4 |
| 5 | | 6.3 | 10331 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | | 5 |
| 6 | | 6.1 | 9018 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | 6 |
| 7 | | 6.2 | 7920 | | | | | | | | | | | | | | | | .3 | | | | | | | | | | | Addcn Rain | 7 |
| 8 | | 6.2 | 8080 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 8 |
| 9 | | 6.3 | 8275 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | Rain | 9 |
| 10 | | 6.3 | 8534 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 10 |
| 11 | | 6.2 | 11334 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | Rain | 11 |
| 12 | | 6.3 | 7334 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Addcn | 12 |
| 13 | | 6.3 | 8370 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 13 |
| 14 | | 6.3 | 8319 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 14 |
| 15 | | 6.2 | 7226 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 15 |
| 16 | | 6.3 | 7554 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 16 |
| 17 | | 6.3 | 6928 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | | 17 |
| 18 | | 6.2 | 7775 | | | | | | | | | | | | | | | | .3 | | | | | | | | | | | Addcn | 18 |
| 19 | | 6.2 | 7792 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | 19 |
| 20 | | 6.3 | 8248 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 20 |
| 21 | | 6.3 | 8180 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 21 |
| 22 | | 6.3 | 8666 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Addcn | 22 |
| 23 | | 6.3 | 6925 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | & | 23 |
| 24 | | 6.2 | 8175 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | Rain | 24 |
| 25 | | 6.3 | 11944 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Addcn | 25 |
| 26 | | 6.2 | 9320 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | Rain | 26 |
| 27 | | 6.2 | 7441 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 27 |
| 28 | | 6.3 | 7269 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 28 |
| 29 | | 6.3 | 7081 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | Addcn | 29 |
| 30 | | 6.3 | 8038 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 30 |
| 31 | | 6.3 | 4613 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WKLY AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Attachment V
August 18-19, 2010 EQC meeting
Page 182 of 320

# Discharge Monitoring Report - Oregon Department of Environmental Quality

**Facility Name** GRAHAM **Phone Number** 503 226 1613 **Month/Year** APRIL 2007
**DEQ Permit No.** 105 20 **DEQ File No./Facility ID** 75541 **EPA Reference No.** OR 0031X3
**Plant Type** RECIR. FILTER **County** COLUMBIA **Population Served** ~ 100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

RECEIVED
MAY 17 2007

x _____ Authorized Signature Date

MAGAR C MAGAR Name (Print)

## Operator Certification

Collection Sys. Class ____ Principal Operator Name (print) MAGAR Certification No. & Grade 10621
Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
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| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Composite Total Phosphorous mg/L | Total Kjeldahl Nitrogen mg/L | Ammonia Nitrogen mg/L | Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | CHLORINE Total Residual mg/L | UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.3 | 7277 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 1 |
| 2 | | 6.3 | 6709 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | addcl | 2 |
| 3 | | 6.3 | 5403 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 3 |
| 4 | | 6.3 | 5450 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 4 |
| 5 | | 6.3 | 5847 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 5 |
| 6 | | 6.3 | 6294 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | addcl | 6 |
| 7 | | 6.3 | 6940 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | Lau | 7 |
| 8 | | 6.2 | 7689 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | Lau | 8 |
| 9 | | 6.3 | 7846 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | Lau | 9 |
| 10 | | 6.3 | 8083 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 10 |
| 11 | | 6.3 | 7080 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | addcl Lau | 11 |
| 12 | | 6.3 | 9000 | | 2 | .99 | | | | 3 | .97 | | | | | | | | .8 | | nd | | | | | | | | | Lau | 12 |
| 13 | | 6.2 | 8063 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | Lau | 13 |
| 14 | | 6.3 | 8508 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | addcl | 14 |
| 15 | | 6.3 | 8352 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 15 |
| 16 | | 6.3 | 8881 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 16 |
| 17 | | 6.2 | 7542 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | addcl Lau | 17 |
| 18 | | 6.2 | 9827 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | Lau | 18 |
| 19 | | 6.3 | 8487 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 19 |
| 20 | | 6.3 | 7286 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | Lau cl | 20 |
| 21 | | 6.3 | 6209 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | Lau | 21 |
| 22 | | 6.2 | 9072 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 22 |
| 23 | | 6.3 | 8306 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 23 |
| 24 | | 6.3 | 6764 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | Lau | 24 |
| 25 | | 6.3 | 6659 | | | | | | | | | | | | | | | | .5 | | | | | | | | | | | addcl | 25 |
| 26 | | 6.3 | 6506 | | | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 26 |
| 27 | | 6.3 | 6919 | | | | | | | | | | | | | | | | .6 | | | | | | | | | | | | 27 |
| 28 | | 6.3 | 7278 | | | | | | | | | | | | | | | | .4 | | | | | | | | | | | addcl | 28 |
| 29 | | 6.3 | 7307 | | | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 29 |
| 30 | | 6.3 | 7230 | | | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
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| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
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# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Riverwood MHP | Phone Number: 503 226-1913 | Month/Year: 5/2007
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: ORL 314
Plant Type: Recir. Gravel | County: Columbia | Population Served: ~100

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print): MAGAN Certification No. & Grade: 10622
Treatment Sys. Class ____ Principal Operator Name (print): ____ Certification No. & Grade: ____

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

VLWC 6/20/07
Authorized Signature Date

DEPT OF ENVIRONMENTAL QUALITY RECEIVED JUN 22 2007 NORTHWEST REGION

MAGAN MAGAN
Name (Print)

## INFLUENT

| Date | Temperature °F | Temperature °C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
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Meter problems (Battery)

## EFFLUENT (identify outfall number – e.g. 001, 002, 003):

| Date | Temperature °F | Temperature °C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F | RECEIVING STREAM Temperature °C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | 6.3 | 6149 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | | |
| 2 | | | 6.3 | 5059 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | | 1 |
| 3 | | | 6.2 | 8286 | | <2 | 99% | | | | | <2 | 99% | | | | | | | 0.9 | | | Nil | | | | | | | | | Add Cl2 / Rain | 2 |
| 4 | | | 6.2 | 7082 | | | 99 | | | | | | 99 | | | | | | | 0.7 | | | | | | | | | | | | Rain | 3 |
| 5 | | | 6.3 | 7330 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | Rain | 4 |
| 6 | | | 6.3 | 5664 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | | 5 |
| 7 | | | 6.3 | 9917 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | Add Cl2 | 6 |
| 8 | | | 6.3 | 5850 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | | 7 |
| 9 | | | 6.3 | 9731 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | | 8 |
| 10 | | | 6.3 | 8758 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | | 9 |
| 11 | | | 6.3 | 7259 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | | 10 |
| 12 | | | 6.3 | 6052 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | Add Cl2 | 11 |
| 13 | | | 6.3 | 7334 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | | 12 |
| 14 | | | 6.3 | 6523 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | | 13 |
| 15 | | | 6.2 | 5208 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | | 14 |
| 16 | | | 6.3 | 7012 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | | 15 |
| 17 | | | 6.3 | 5801 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | Add Cl2 | 16 |
| 18 | | | 4.6 | 5872 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | | 17 |
| 19 | | | 6.3 | 5128 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | | 18 |
| 20 | | | 6.3 | 5445 | | | | | | | | | | | | | | | | 0.1 | | | | | | | | | | | | | 19 |
| 21 | | | 4.6 | 6937 | | | | | | | | | | | | | | | | 0.0 | | | | | | | | | | | | Add Cl2 | 20 |
| 22 | | | 4.6 | 5789 | | | | | | | | | | | | | | | | 4.6 | | | | | | | | | | | | Add Cl2 | 21 |
| 23 | | | 4.6 | 4033 | | | | | | | | | | | | | | | | 0.0 | | | | | | | | | | | | | 22 |
| 24 | | | 6.3 | 7180 | | | | | | | | | | | | | | | | 2.1 | | | | | | | | | | | | Clean Filters | 23 |
| 25 | | | 6.3 | 5504 | | | | | | | | | | | | | | | | 2.2 | | | | | | | | | | | | Clean Filters | 24 |
| 26 | | | 6.2 | 5012 | | | | | | | | | | | | | | | | 3.5 | | | | | | | | | | | | clean & Flush Pipes | 25 |
| 27 | | | 6.3 | 7238 | | | | | | | | | | | | | | | | 2.4 | | | | | | | | | | | | clean & Flush Pipes | 26 |
| 28 | | | 6.2 | 4504 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | clean & Flush Pipes | 27 |
| 29 | | | 6.2 | 5682 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | Add Cl2 | 28 |
| 30 | | | 6.2 | 5313 | | | | | | | | | | | | | | | | 2.3 | | | | | | | | | | | | | 29 |
| 31 | | | 6.3 | 5159 | | | | | | | | | | | | | | | | 2.2 | | | | | | | | | | | | | 30 |
| TOTAL | | | | 198411 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| DAILY MINIMUM | | | | 4033 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | 9917 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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Chlorine Meter problem Battery

# Discharge Monitori..g Report - Oregon Department of Environmental Quality

Facility Name: Riverwood Mobile Park | Phone Number: 503-226-1913 | Month/Year: June 2007
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR 003143
Plant Type: Sewer Plant Recir. Gravel | County: Columbia | Population Served: 1100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X

RECEIVED
JUL 19 2007
DEPT OF ENVIRONMENTAL QUALITY
NW REGION WATER QUALITY
Authorized Signature

7/16/07
Date

MAGAR G. MACAW
Name (Print)

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print): Magar G. Macaw — Certification No. & Grade: 10621
Treatment Sys. Class ____ Principal Operator Name (print): ____ — Certification No. & Grade: ____

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
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| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U. | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.2 | 4,844 | | | | | | | | | | | | | | | * | 1.8 | | | | | | | | | | | | 1 |
| 2 | | 6.1 | 4,563 | | | | | | | | | | | | | | | * | 1.2 | | | | | | | | | | | | 2 |
| 3 | | 6.2 | 5,183 | | | | | | | | | | | | | | | * | 1.8 | | | | | | | | | | | | 3 |
| 4 | | 6.2 | 5,033 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | Cl2 Meter/New Batt. - Rain | 4 |
| 5 | | 6.4 | 5,446 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | - Rain | 5 |
| 6 | | 6.3 | 3,355 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add Cl2 - Rain | 6 |
| 7 | | 6.3 | 5,900 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 7 |
| 8 | | 6.2 | 5,042 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 8 |
| 9 | | 6.3 | 4,594 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | - Rain | 9 |
| 10 | | 6.2 | 6,579 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add Cl2 - Rain | 10 |
| 11 | | 6.2 | 6,621 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | - Rain | 11 |
| 12 | | 6.2 | 4,933 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 12 |
| 13 | | 6.2 | 5,572 | | | 798 | | | | | 797 | | | | | | | | 0.6 | | | | | | | | | | | | 13 |
| 14 | | 6.3 | 5,150 | | | | | | | | | | | | | | | | 0.6 | | 13/100 Volts | | | | | | | | | - Rain | 14 |
| 15 | | 6.3 | 6,691 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | - Rain | 15 |
| 16 | | 6.3 | 7,987 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add Cl2 | 16 |
| 17 | | 6.2 | 5,307 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | - Rain | 17 |
| 18 | | 6.2 | 5,618 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 18 |
| 19 | | 6.2 | 6,217 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add Cl2 | 19 |
| 20 | | 6.2 | 5,082 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | 20 |
| 21 | | 6.2 | 4,473 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 21 |
| 22 | | 6.3 | 7,453 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 22 |
| 23 | | 6.2 | 5,605 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 23 |
| 24 | | 6.3 | 6,737 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | Add Cl2 - Rain | 24 |
| 25 | | 6.3 | 6,174 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | - Rain | 25 |
| 26 | | 6.3 | 6,438 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | - Rain | 26 |
| 27 | | 6.3 | 5,921 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | - Rain | 27 |
| 28 | | 6.3 | 6,293 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | - Rain | 28 |
| 29 | | 6.3 | 6,730 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | - Rain | 29 |
| 30 | | 6.3 | 5,724 | | | | | | | | | | | | | | | | 0.1 | | | | | | | | | | | Add Cl2 | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

* Chlorine meter bad batteries

# Discharge Monitoring Report - Oregon Department of Environmental Quality

VLWC

Facility Name: River Wood M.H.P. | Phone Number: 503-226-4913 | Month/Year: 7/07
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR 0003143
Plant Type: Recir. Gravel | County: Columbia | Population Served: 1100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] Authorized Signature — 8/14/07 Date

MAGYAR MAGYAR Name (Print)

**Operator Certification**

Collection Sys. Class: ____ Principal Operator Name (print): MAGYAR MAGYAR Certification No. & Grade: ____
Treatment Sys. Class: ____ Principal Operator Name (print): ____ Certification No. & Grade: ____

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | 6.4 | 7457 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 1 |
| 2 | | | | | | | | | | 6.3 | 6926 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 2 |
| 3 | | | | | | | | | | 6.3 | 6351 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | 3 |
| 4 | | | | | | | | | | 6.3 | 4331 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | Add Cl2 | 4 |
| 5 | | | | 150 | | | 73 | | | 6.3 | 5745 | | <2 | 99 | | <2 | 99 | | | | | | | | | | 1.1 | | | <1 | | | | | | | 5 |
| 6 | | | | | | | | | | 6.2 | 5500 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 6 |
| 7 | | | | | | | | | | 6.2 | 4029 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 7 |
| 8 | | | | | | | | | | 6.2 | 5159 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | 8 |
| 9 | | | | | | | | | | 6.2 | 5034 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | Add Cl2 | 9 |
| 10 | | | | | | | | | | 6.2 | 5879 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | change Bats Cl2 Tester | 10 |
| 11 | | | | | | | | | | 6.2 | 6188 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | 11 |
| 12 | | | | | | | | | | 6.3 | 5172 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | 12 |
| 13 | | | | | | | | | | 6.3 | 5669 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Rain | 13 |
| 14 | | | | | | | | | | 6.3 | 3963 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | 14 |
| 15 | | | | | | | | | | 6.3 | 4604 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | 15 |
| 16 | | | | | | | | | | 6.3 | 4763 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | Add Cl2 | 16 |
| 17 | | | | | | | | | | 6.3 | 5529 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | Rain | 17 |
| 18 | | | | | | | | | | 6.4 | 4978 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Rain | 18 |
| 19 | | | | | | | | | | 6.4 | 5370 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | Rain | 19 |
| 20 | | | | | | | | | | 6.4 | 5765 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Rain | 20 |
| 21 | | | | | | | | | | 6.4 | 4918 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | Add Cl2 / Rain | 21 |
| 22 | | | | | | | | | | 6.4 | 8304 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | Rain | 22 |
| 23 | | | | | | | | | | 6.3 | 6384 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | Rain | 23 |
| 24 | | | | | | | | | | 6.3 | 4934 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 24 |
| 25 | | | | | | | | | | 6.3 | 5795 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 25 |
| 26 | | | | | | | | | | 6.3 | 4528 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 26 |
| 27 | | | | | | | | | | 6.3 | 5006 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | 27 |
| 28 | | | | | | | | | | 6.3 | 4025 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | Add Cl2 | 28 |
| 29 | | | | | | | | | | 6.3 | 5342 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | 29 |
| 30 | | | | | | | | | | 6.3 | 4986 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | 30 |
| 31 | | | | | | | | | | 6.3 | 4622 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

~~503-226-1917~~

Facility Name: RIVERWOOD — Phone Number: ~~503 556 9235~~ — Month/Year: August 2007
DEQ Permit No.: 102520 — DEQ File No./Facility ID: 75541 — EPA Reference No.: OR 000317
Plant Type: RECIR. GRAVEL — County: CLACKAMAS — Population Served: 1604

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature

MAGAR E MAGAR Name (Print)

RECEIVED
SEP 26 2007
DEPT OF ENVIRONMENTAL QUALITY
N.W. REGION WATER QUALITY

**Operator Certification**

Collection Sys. Class: 10622 — Principal Operator Name (print): MAGAR — Certification No. & Grade: 10622
Treatment Sys. Class: ____ — Principal Operator Name (print): ____ — Certification No. & Grade: ____

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | | | 220 | | | 75 | |
| 3 | | | | | | | | |
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| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.2 | 4339 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 1 |
| 2 | | 6.3 | 4366 | | <2 | 99 | | | | | <2 | 99 | | | | | | | 0.5 | | | <1 | | | | | | | | | 2 |
| 3 | | 6.3 | 4517 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 3 |
| 4 | | 6.2 | 7124 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add Cl2/Rain | 4 |
| 5 | | 6.3 | 5218 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 5 |
| 6 | | 6.3 | 5031 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 6 |
| 7 | | 6.3 | 5132 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Rain | 7 |
| 8 | | 6.3 | 4321 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 8 |
| 9 | | 6.3 | 3812 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add Cl2 | 9 |
| 10 | | 6.3 | 5556 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 10 |
| 11 | | 6.2 | 4621 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 11 |
| 12 | | 6.3 | 5981 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add Cl2/Rain | 12 |
| 13 | | 6.2 | 5651 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | 13 |
| 14 | | 6.3 | 5663 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 14 |
| 15 | | 6.3 | 4833 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | Rain | 15 |
| 16 | | 6.3 | 4503 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 16 |
| 17 | | 6.3 | 4738 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 17 |
| 18 | | 6.3 | 5458 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 18 |
| 19 | | 6.3 | 4971 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Rain | 19 |
| 20 | | 6.3 | 5317 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Rain | 20 |
| 21 | | 6.2 | 7708 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | Add Cl2/Rain | 21 |
| 22 | | 6.2 | 6812 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 22 |
| 23 | | 6.3 | 5947 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 23 |
| 24 | | 6.3 | 5715 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 24 |
| 25 | | 6.3 | 6178 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add Cl2 | 25 |
| 26 | | 6.3 | 5757 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 26 |
| 27 | | 6.1 | 4018 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 27 |
| 28 | | 6.2 | 4877 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 28 |
| 29 | | 6.2 | 5389 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 29 |
| 30 | | 6.3 | 4030 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add Cl2 | 30 |
| 31 | | 6.3 | 7414 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Riverwood | Phone Number: 503 929 1094 | Month/Year: Sept. 2007
DEQ Permit No.: 102,520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR 002314
Plant Type: Aer. Biological Filter | County: Columbia | Population Served: N/A

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature

M Agar MDEN Name (Print)

RECEIVED
OCT 30 2007
DEPT OF ENVIRONMENTAL QUALITY
N.W. REGION WATER QUALITY
10/23 Date

Operator Certification

Collection Sys. Class: ____ Principal Operator Name (print): 10641 MAGrath Certification No. & Grade: 10641

Treatment Sys. Class: ____ Principal Operator Name (print): ____ Certification No. & Grade: ____

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U. | COLIFORM E.coli MPN/MF CFU/100 ml | COLIFORM Fecal MPN/MF CFU/100 ml | COLIFORM Total MPN/MF CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | 6.3 | 4579 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | Filter Plugged | 1 |
| 2 | | | | | | | | | | 6.3 | 2394 | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | AddCl2 / pH Meter calibration & Cal | 2 |
| 3 | | | | | | | | | | 6.1 | 5511 | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Rain | 3 |
| 4 | | | | | | | | | | 6.2 | 5185 | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | & | 4 |
| 5 | | | | | | | | | | 6.1 | 4233 | | <2 | 99% | | | | | <2 | 98% | | | | | | 0.5 | | | | | | | | | | | Rain | 5 |
| 6 | | | | 110 | | | 128 | | | 5.9 | 4966 | | <2 | 99% | | | | | <2 | 97% | | | | | | 0.9 | | | | | | | | | | | | 6 |
| 7 | | | | | | | | | | 6.2 | 4412 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 7 |
| 8 | | | | | | | | | | 6.0 | 4544 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | AddCl2 | 8 |
| 9 | | | | | | | | | | 6.0 | 5179 | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | 9 |
| 10 | | | | | | | | | | 6.0 | 4173 | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 10 |
| 11 | | | | | | | | | | 6.0 | 4122 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 11 |
| 12 | | | | | | | | | | 6.0 | 3891 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 12 |
| 13 | | | | | | | | | | 5.9 | 3652 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | AddCl2 / Rain | 13 |
| 14 | | | | | | | | | | 6.0 | 3906 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Rain | 14 |
| 15 | | | | | | | | | | 6.0 | 3894 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Rain | 15 |
| 16 | | | | | | | | | | 6.0 | 4166 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Rain | 16 |
| 17 | | | | | | | | | | 6.0 | 4211 | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | AddCl2 / Rain | 17 |
| 18 | | | | | | | | | | 6.0 | 6936 | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 18 |
| 19 | | | | | | | | | | 6.0 | 4682 | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 19 |
| 20 | | | | | | | | | | 6.0 | 5420 | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 20 |
| 21 | | | | | | | | | | 5.9 | 4934 | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 21 |
| 22 | | | | | | | | | | 5.9 | 4873 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 22 |
| 23 | | | | | | | | | | 5.9 | 3659 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 23 |
| 24 | | | | | | | | | | 5.9 | 3577 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 24 |
| 25 | | | | | | | | | | 6.0 | 4478 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 25 |
| 26 | | | | | | | | | | 5.9 | 4070 | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | AddCl2 | 26 |
| 27 | | | | | | | | | | 6.1 | 7171 | | | | | | | | | | | | | | | 1.7 | | | | | | | | | | | | 27 |
| 28 | | | | | | | | | | 6.2 | 4673 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Rain | 28 |
| 29 | | | | | | | | | | 6.2 | 4169 | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | 29 |
| 30 | | | | | | | | | | 6.2 | 6019 | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | AddCl2 / Rain | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

pH calibration & Cal
pH calibration
pH calib. Low
pH Calib Fail

New pH Module

# Discharge Monitoring Report - Oregon Department of Environmental Quality

VLWC

Facility Name RIVERVIEW Phone Number 503 226 1963 Month/Year OCT 07
DEQ Permit No. 102520 DEQ File No./Facility ID 75541 EPA Reference No. OR 314
Plant Type RECIR. GRAVEL County COLUMBIA Population Served ~100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

DEPT OF ENVIRONMENTAL QUALITY RECEIVED
DEC 0 3 2007
NORTHWEST REGION

X _____ Authorized Signature

11/27/07 Date

MAGAN MACK Name (Print)

## Operator Certification

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____
Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U. | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | 6.2 | 6361 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Rain | 1 |
| 2 | | | | | | | | | | 6.3 | 7786 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Rain | 2 |
| 3 | | | | | | | | | | 6.3 | 8388 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | Add $Cl_2$ / Rain | 3 |
| 4 | | | | | | | | | | 6.3 | 7201 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Rain | 4 |
| 5 | | | | | | | | | | 6.3 | 6788 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Rain | 5 |
| 6 | | | | | | | | | | 6.3 | 6291 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add $Cl_2$ / Rain | 6 |
| 7 | | | | | | | | | | 6.3 | 6329 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | 7 |
| 8 | | | | | | | | | | 6.3 | 7255 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | 8 |
| 9 | | | | | | | | | | 6.4 | 6886 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | Add $Cl_2$ / Rain | 9 |
| 10 | | | | | | | | | | 6.4 | 6606 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Add $Cl_2$ / Rain | 10 |
| 11 | | | | | 141 | | 73 | | | 6.3 | 6297 | | <2 | 97.6 | | | | | <2 | 97.2 | | | | | | 0.9 | | | | C | | | | | | | 11 |
| 12 | | | | | | | | | | 6.3 | 6084 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | 12 |
| 13 | | | | | | | | | | 6.3 | 6642 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | Add $Cl_2$ | 13 |
| 14 | | | | | | | | | | 6.3 | 6712 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | Rain | 14 |
| 15 | | | | | | | | | | 6.3 | 6552 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add $Cl_2$ | 15 |
| 16 | | | | | | | | | | 6.3 | 6987 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | Rain | 16 |
| 17 | | | | | | | | | | 6.3 | 7193 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | Rain | 17 |
| 18 | | | | | | | | | | 6.3 | 7247 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 18 |
| 19 | | | | | | | | | | 6.4 | 9971 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | Add $Cl_2$ / Rain | 19 |
| 20 | | | | | | | | | | 6.4 | 10376 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | Rain | 20 |
| 21 | | | | | | | | | | 6.4 | 13140 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | Rain | 21 |
| 22 | | | | | | | | | | 6.4 | 8287 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add $Cl_2$ / | 22 |
| 23 | | | | | | | | | | 6.4 | 6975 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | 23 |
| 24 | | | | | | | | | | 6.4 | 6091 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | Rain | 24 |
| 25 | | | | | | | | | | 6.3 | 7605 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add $Cl_2$ | 25 |
| 26 | | | | | | | | | | 6.3 | 6573 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | 26 |
| 27 | | | | | | | | | | 6.3 | 6806 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add $Cl_2$ | 27 |
| 28 | | | | | | | | | | 6.3 | 5865 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 28 |
| 29 | | | | | | | | | | 6.3 | 6123 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 29 |
| 30 | | | | | | | | | | 6.3 | 6566 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | 30 |
| 31 | | | | | | | | | | 6.3 | 5897 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG/ MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

VLWC

Facility Name: Riverwood M.H.P. | Phone Number: 503-226-7913 | Month/Year: Nov. 2007
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR. 00314
Plant Type: Recir. gravel | County: Columbia | Population Served: 100+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature

RECEIVED JAN 08 2008 DEPARTMENT OF ENVIRONMENTAL QUALITY NORTHWEST REGION WATER QUALITY

1/4/2008 Date

Mayer E-Mayer Name (Print)

1/20/2007

## Operator Certification

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM E.coli MPN/MF CFU/100 ml | COLIFORM Fecal MPN/MF | COLIFORM Total MPN/MF | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | 6.3 | 5649 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | Add Cl2 | 1 |
| 2 | | | | | | | | | | 6.3 | 9450 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | | 2 |
| 3 | | | | | | | | | | 6.3 | 6169 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | | 3 |
| 4 | | | | | | | | | | 6.3 | 5765 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | | 4 |
| 5 | | | | | | | | | | 6.3 | 2330 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | | 5 |
| 6 | | | | | | | | | | 6.3 | 4496 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | Add Cl2 | 6 |
| 7 | | | | | | | | | | 6.3 | 7512 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | | 7 |
| 8 | | | | | | | | | | 6.3 | 5576 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | | 8 |
| 9 | | | | | | | | | | 6.4 | 5300 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | | 9 |
| 10 | | | | | | | | | | 6.3 | 5568 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | Rain | 10 |
| 11 | | | 141 | | 73 | | | | | 6.3 | 5793 | 2 | 99 | | | | 2 | 97 | | | | | | | | | 0.5 | | | 1 | | | | | | | | Rain | 11 |
| 12 | | | | | | | | | | 6.4 | 6247 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | Add Cl2 Rain | 12 |
| 13 | | | | | | | | | | 6.4 | 7169 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | | 13 |
| 14 | | | | | | | | | | 6.4 | 5957 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | Rain | 14 |
| 15 | | | | | | | | | | 6.4 | 5720 | | | | | | | | | | | | | | | | 6.3 | | | | | | | | | | | | Add Cl2 Rain | 15 |
| 16 | | | | | | | | | | 6.4 | 9749 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | Rain | 16 |
| 17 | | | | | | | | | | 6.4 | 10691 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | Add Cl2 Rain | 17 |
| 18 | | | | | | | | | | 6.4 | 17371 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | Rain | 18 |
| 19 | | | | | | | | | | 6.5 | 33025 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | Add Cl2 Rain | 19 |
| 20 | | | | | | | | | | 6.5 | 20771 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | | 20 |
| 21 | | | | | | | | | | 6.6 | 33152 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | Add Cl2 | 21 |
| 22 | | | | | | | | | | 6.6 | 22764 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | Add Cl2 | 22 |
| 23 | | | | | | | | | | 6.6 | 23677 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | | 23 |
| 24 | | | | | | | | | | 6.6 | 5198 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | | 24 |
| 25 | | | | | | | | | | 6.6 | 8276 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | | 25 |
| 26 | | | | | | | | | | 6.6 | 7991 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | Rain | 26 |
| 27 | | | | | | | | | | 6.3 | 9259 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | Add Cl2 Rain | 27 |
| 28 | | | | | | | | | | 6.3 | 1417 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | Rain | 28 |
| 29 | | | | | | | | | | 6.4 | 15696 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | | Add Cl2 Rain | 29 |
| 30 | | | | | | | | | | 6.4 | 10139 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | Add Cl2 Rain | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

Closed 5 Filters

WL 08-0019 Sent 2/28

Attachment V
August 18-19, 2010 EQC meeting

# Discharge Monitoring Report - Oregon Department of Environmental Quality

DEC 2007

Facility Name: Port of Vernonia MHP — Phone Number: 503-2261913 — Month/Year: DEC-2007

DEQ Permit No.: 102520 — DEQ File No./Facility ID: 75541 — EPA Reference No.:

Plant Type: DECIN - GRAVEL FILTER — County: COLUMBIA — Population Served:

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature

MAGAR MAGAR Name (Print)

2/10/08 Date

DEPT OF ENVIRONMENTAL QUALITY RECEIVED
FEB 15 2008
NORTHWEST REGION

## Operator Certification

Collection Sys. Class: ____ Principal Operator Name (print): ____ Certification No. & Grade: ____

Treatment Sys. Class: ____ Principal Operator Name (print): ____ Certification No. & Grade: ____

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
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| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM E.coli MPN/MF CFU/100 ml | COLIFORM Fecal MPN/MF CFU/100 ml | COLIFORM Total MPN/MF CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.3 | 9695 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | 1 |
| 2 | | 6.3 | 26606 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | 2 |
| 3 | | 6.3 | 60495 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | | 3 |
| 4 | | 6.3 | 20120 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 4 |
| 5 | | 6.4 | 30120 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 5 |
| 6 | | 6.4 | 34823 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 6 |
| 7 | | 6.4 | 14164 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 7 |
| 8 | | 6.4 | 10071 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 8 |
| 9 | | 6.3 | 9053 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 9 |
| 10 | | 6.3 | 8026 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 10 |
| 11 | | 6.3 | 7989 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | 11 |
| 12 | | 6.3 | 6016 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 12 |
| 13 | | 6.3 | 6570 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 13 |
| 14 | | 6.2 | 5244 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | 14 |
| 15 | | 6.3 | 7186 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 15 |
| 16 | | 6.3 | 7495 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 16 |
| 17 | | 6.3 | 1283 | 2 | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 17 |
| 18 | | 6.3 | 10879 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 18 |
| 19 | | 6.4 | 13484 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 19 |
| 20 | | 6.4 | 21762 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 20 |
| 21 | | 6.3 | 12873 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 21 |
| 22 | | 6.4 | 10171 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 22 |
| 23 | | 6.4 | 11462 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 23 |
| 24 | | 6.4 | 22634 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 24 |
| 25 | | 6.4 | 14316 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 25 |
| 26 | | 6.3 | 21374 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 26 |
| 27 | | 6.3 | 27615 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | | 27 |
| 28 | | 6.4 | 20820 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 28 |
| 29 | | 6.4 | 28376 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 29 |
| 30 | | 6.4 | 45274 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 30 |
| 31 | | 6.4 | 40853 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

EXCESS RAIN THRU OUT MONTH EXTERNAL WATER COMING IN SYSTEM SEWER PIPES NEED REPAIR

WL#00019 - sent 2/29

Attachment V
August 18-19, 2010 EQC meeting
Page 191 of 370

# Discharge Monitori..g Report - Oregon Department of Environmental Quality

JUNE

| | | | | | |
|---|---|---|---|---|---|
| Facility Name | Liverwood MHP | Phone Number | 503-226-1913 | Month/Year | JAN 2008 |
| DEQ Permit No. | 102520 | DEQ File No./Facility ID | 75541 | EPA Reference No. | OR00314 |
| Plant Type | Recirc. Gravel | County | Columbia | Population Served | 100+ |

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature

DEPT OF ENVIRONMENTAL QUALITY RECEIVED FEB 15 2008 NWR NORTHWEST REGION

2/12/08 Date

MAGAN MAGAN Name (Print)

JAN 2008

Manual O/R=PI23M

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print) _____ Certification No. & Grade _____

Treatment Sys. Class ____ Principal Operator Name (print) _____ Certification No. & Grade _____

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Amnonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | 6.5 | 8304 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | PI23M check Filters | 1 |
| 2 | | | | | | | | | | 6.5 | 8344 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add Cl2 / Rain | 2 |
| 3 | | | | | | | | | | 6.5 | 11264 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Rain | 3 |
| 4 | | | | | | | | | | 6.5 | 13328 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add Cl2 / Rain | 4 |
| 5 | | | | | | | | | | 6.6 | 13370 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Rain | 5 |
| 6 | | | | | | | | | | 6.6 | 20174 | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | Add Cl2 / Rain | 6 |
| 7 | | | | | | | | | | 6.6 | 15622 | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | Rain | 7 |
| 8 | | | | | | | | | | 6.6 | 20741 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add Cl2 / Rain | 8 |
| 9 | | | | | | | | | | 6.6 | 19994 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | Rain | 9 |
| 10 | | | 50 | | | 74 | | | | 6.6 | 18928 | | 62 | 96 | | | | | 12 | 97 | | | | | | | 0.4 | | | | | | | | | | Add Cl2 / Rain | 10 |
| 11 | | | | | | | | | | 6.6 | 23309 | | | | | | | | | | | | | | | 0.7 | | | | 600 | | | | | | Shut Down ~~Rain~~ | 11 |
| 12 | | | | | | | | | | 6.1 | 12776 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Add Cl2 / Rain | 12 |
| 13 | | | | | | | | | | 6.1 | 12903 | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | Reset System | 13 |
| 14 | | | | | | | | | | 6.1 | 9580 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add Cl2 / Rain | 14 |
| 15 | | | | | | | | | | 6.1 | 14091 | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | 15 |
| 16 | | | | | | | | | | 6.1 | 8429 | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 16 |
| 17 | | | | | | | | | | 6.0 | 7300 | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 17 |
| 18 | | | | | | | | | | 6.1 | 7450 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | 18 |
| 19 | | | | | | | | | | 6.1 | 7839 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add Cl2 / Rain | 19 |
| 20 | | | | | | | | | | 6.1 | 8875 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Add Cl2 / Rain | 20 |
| 21 | | | | | | | | | | 6.1 | 8169 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | 21 |
| 22 | | | | | | | | | | 6.2 | 8234 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | 22 |
| 23 | | | | | | | | | | 6.1 | 8307 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | 23 |
| 24 | | | | | | | | | | SECONDARY OPERATOR QUIT. | | | | | | | | | | | | | | | | | | | | | | | | | | | | 24 |
| 25 | | | | | | | | | | 6.1 | 16049 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add Cl2 | 25 |
| 26 | | | | | | | | | | 6.1 | 16915 | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | 26 |
| 27 | | | | | | | | | | 6.0 | 9446 | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | Add Cl2 | 27 |
| 28 | | | | | | | | | | 6.2 | 9137 | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | 28 |
| 29 | | | | | | | | | | 6.3 | 8836 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | 29 |
| 30 | | | | | | | | | | 6.0 | 10327 | | | | | | | | | | | | | | | .05 | | | | | | | | | | Add Cl2 | 30 |
| 31 | | | | | | | | | | 6.1 | 30016 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

PUMPED RECIRC. TANK TOOK 3,200 gal sewage. PUMPING SEPTIC TANK

FEBRUARY 2008.

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Riverside M H P | Phone Number: 503- | Month/Year: Feb 2008
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR 00314
Plant Type: Rotor Gravel | County: Columbia | Population Served: 100 T

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x _____ Authorized Signature

Name (Print): Magen E Magen

VLWC
DEPT OF ENVIRONMENTAL QUALITY
Date RECEIVED
APR 01 2008
NORTHWEST REGION

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____
Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.1 | 3.3333 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | ADD Cl2 | 1 |
| 2 | | 6.2 | 2.5884 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 2 |
| 3 | | 6.2 | 2.6500 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 3 |
| 4 | | 6.2 | 1.3419 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 4 |
| 5 | | 6.1 | 1.0344 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add Cl2 | 5 |
| 6 | | 6.1 | 1.3541 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 6 |
| 7 | | 6.1 | 3.3267 | <2 | 70 | | | | | 5 | | | | | | | | | 0.5 | | | Clmg | | | | | | | | | 7 |
| 8 | | 6.2 | 3.1007 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add Cl2 | 8 |
| 9 | | 6.2 | 3.4726 | | | | | | | | | | | | | | | | 0.05 | | | | | | | | | | | | 9 |
| 10 | | 6.1 | 1.6165 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 10 |
| 11 | | 6.1 | 0.8510 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 11 |
| 12 | | 6.1 | 0.6765 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 12 |
| 13 | | 6.1 | 0.7496 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | pumped 801.05 | 13 |
| 14 | | 6.1 | 0.3671 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | 4000 gal. | 14 |
| 15 | | 6.1 | 0.5875 | | | | | | | | | | | | | | | | 0.29 | | | | | | | | | | | ADD Cl2 | 15 |
| 16 | | 6.1 | 0.7055 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 16 |
| 17 | | 6.1 | 0.6895 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 17 |
| 18 | | 6.0 | 0.5736 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 18 |
| 19 | | 5.8 | 0.6173 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 19 |
| 20 | | 5.9 | 0.5885 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 20 |
| 21 | | 6.0 | 0.4567 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 21 |
| 22 | | 6.0 | 0.5972 | | | | | | | | | | | | | | | | 2.0 | | | | | | | | | | | | 22 |
| 23 | | 6.0 | 0.5253 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 23 |
| 24 | | 6.0 | 0.6827 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | ADD Cl2 | 24 |
| 25 | | 6.0 | 0.4993 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | | 25 |
| 26 | | 6.0 | 0.5903 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 26 |
| 27 | | 6.0 | 0.5950 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | add Cl2 | 27 |
| 28 | | 6.1 | 0.5619 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 28 |
| 29 | | 6.1 | 0.5612 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 29 |
| 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

Samples taken from wrong hole
Clift made mistake in reading operator - mistake corrected March Chows over 99% removal

BOD 1st 110 eff. nd
TSS 91% 90 eff. no det.

pH meter not properly calibrated part of the month

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: RIVERHEAD MHP | Phone Number: 360-2547331 | Month/Year: MAR 2008
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR 0034
Plant Type: RICHER GRAVEL | County: COLUMBIA | Population Served: 100+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature — Date: 4/17/08

MAGAR E. MAGAR Name (Print)

## Operator Certification

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____
Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | 100 | | | 90 | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Removal % | BOD Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab: Total Phosphorous mg/L | NUTRIENTS Grab: Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite: Ammonia Nitrogen mg/L | NUTRIENTS Composite: Nitrate Nitrogen mg/L | DISINFECTION CHLORINE: Used lbs. | DISINFECTION CHLORINE: Total Residual mg/L | DISINFECTION UV: Trans-mittance % | Turbidity N.T.U | COLIFORM E.coli MPN/MF CFU/100 ml | COLIFORM Fecal MPN/MF CFU/100 ml | COLIFORM Total MPN/MF CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.2 | 5991 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | |
| 2 | | 6.1 | 6413 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | |
| 3 | | 6.1 | 6687 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | |
| 4 | | 6.1 | 6564 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | ADD CL2 |
| 5 | | 6.1 | 5975 | | <2 | 79% | | | | | 4 | 79% | | | | | | | 1.9 | | | | | | | | | | | |
| 6 | | 6.0 | 6197 | | | | | | | | | | | | | | | | 0.6 | | | | | <1 | | | | | | |
| 7 | | 6.1 | 5976 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | |
| 8 | | 6.0 | 5241 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | ADD CL2 |
| 9 | | 6.1 | 6169 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | |
| 10 | | 6.0 | 6325 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | |
| 11 | | 6.1 | 5779 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | |
| 12 | | 6.0 | 6154 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | |
| 13 | | 6.1 | 7378 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | ADD CL2 |
| 14 | | 6.1 | 11313 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | |
| 15 | | 6.2 | 10668 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | |
| 16 | | 6.2 | 8337 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | |
| 17 | | 6.2 | 8399 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | |
| 18 | | 6.1 | 8680 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | ADD CL2 |
| 19 | | 6.2 | 7796 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | |
| 20 | | 6.2 | 7724 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | |
| 21 | | 6.3 | 8343 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | |
| 22 | | 6.1 | 7913 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | ADD CL2 |
| 23 | | 6.2 | 7290 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | |
| 24 | | 6.2 | 9162 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | |
| 25 | | 6.1 | 7766 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | |
| 26 | | 6.1 | 8940 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | |
| 27 | | 6.2 | 11118 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | |
| 28 | | 6.1 | 12447 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | ADD CL2 |
| 29 | | 6.2 | 14502 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | |
| 30 | | 6.3 | 15230 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | |
| 31 | | 6.1 | 9607 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

SAMPLING WAS DONE 3/6/08

VLNC

APR 15 2008

DEQ-NWR

Item M 000324

# Discharge Monitoring Report - Oregon Department of Environmental Quality

VLWC

Facility Name: RIVERWOOD | Phone Number: 3602547173 | Month/Year: APRIL 2007
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR 0031143
Plant Type: CIR - GRAVEL | County: COLUMBIA | Population Served: ~ 100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature — 5/28/08 Date

MARTIN MURPHY — Name (Print) — COUNTY-OPERATOR

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____
Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | 6.0 | 6154 | | | | | |
| 2 | | 6.1 | 6671 | | | | | |
| 3 | | 6.1 | 6428 | ~~##~~ 68 | | | 64 | ~~#34~~ |
| 4 | | ~~6.0~~ | 6011 | | | | | |
| 5 | | 6.0 | 6977 | | | | | |
| 6 | | 6.1 | 7886 | | | | | |
| 7 | | 6.0 | 6346 | | | | | |
| 8 | | 6.1 | 6860 | | | | | |
| 9 | | 6.2 | 7063 | | | | | |
| 10 | | 6.2 | 8091 | | | | | |
| 11 | | 6.1 | 5216 | | | | | |
| 12 | | 6.0 | 6778 | | | | | |
| 13 | | 6.0 | 5403 | | | | | |
| 14 | | 6.1 | 8641 | | | | | |
| 15 | | 6.0 | 4936 | | | | | |
| 16 | | 6.1 | 6553 | | | | | |
| 17 | | 6.2 | 6389 | | | | | |
| 18 | | 6.1 | 6126 | | | | | |
| 19 | | 6.1 | 6718 | | | | | |
| 20 | | 6.1 | 7759 | | | | | |
| 21 | | 6.0 | 7610 | | | | | |
| 22 | | 6.1 | ~~8773~~ | | | | | |
| 23 | | 6.1 | 8713 | | | | | |
| 24 | | 6.0 | 2501 | | | | | |
| 25 | | | FLOW METER MALFUNCTION | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number – e.g. 001, 002, 003):

| Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab: Total Phosphorous mg/L | NUTRIENTS Grab: Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite: Ammonia Nitrogen mg/L | NUTRIENTS Composite: Nitrate Nitrogen mg/L | DISINFECTION CHLORINE: Used lbs. | DISINFECTION CHLORINE: Total Residual mg/L | DISINFECTION UV: Trans-mittance % | Turbidity N.T.U. | COLIFORM MPN/MF: E.coli CFU/100 ml | COLIFORM MPN/MF: Fecal CFU/100 ml | COLIFORM MPN/MF: Total CFU/100 ml | RECEIVING STREAM: Ammonia | RECEIVING STREAM: Dilution | RECEIVING STREAM: Stream Flow CFS | RECEIVING STREAM: Temperature °F/°C | RECEIVING STREAM: pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 1 |
| | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 2 |
| | | | | nd | 99 | .21 | | | | 6 | 90 | .634 | | | | | | 0.3 | | | 1 | | | | | | | | Add Cl. | 3 |
| | | | | | | | | | | | | | | | | | | 1.05 | ? | | # | | | | | | | | | 4 |
| | | | | | | | | | | | | | | | | | | 1.04 | ? | | | | | | | | | | | 5 |
| | | | | | | | | | | | | | | | | | | 1.03 | ? | | | | | | | | | | | 6 |
| | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | 7 |
| | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | Add Cl. | 8 |
| | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 9 |
| | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 10 |
| | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 11 |
| | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 12 |
| | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 13 |
| | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add Cl. | 14 |
| | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 15 |
| | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 16 |
| | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 17 |
| | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 18 |
| | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 19 |
| | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 20 |
| | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 21 |
| | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | Add Cl | 22 |
| | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 23 |
| | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 24 |
| | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 25 |
| | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Flow Meter Malfunction | 26 |
| | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | 27 |
| | | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 28 |
| | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 29 |
| | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 30 |
| | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 31 |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

RECEIVED JUN 06 2008 DEPT OF ENVIRONMENTAL QUALITY NORTHWEST REGION

FLOW METER MALFUNCT. WORKING.

# Discharge Monitori. g Report - Oregon Department of Environmental Quality

RECEIVED
JUL 07 2008
DEPT OF ENVIRONMENTAL QUALITY
NORTHWEST REGION

Facility Name: River Wood MHP | Phone Number: 360-254-7131 | Month/Year: May 2008
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR-00314
Plant Type: Recirc. Gravel | County: Columbia | Population Served: 160 +

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature | 6/8/08 Date

Megan Mayo Name (Print)

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____
Treatment Sys. Class ____ Principal Operator Name (print) ____ Certification No. & Grade ____

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | 6.3 | .20 | | | | | |
| 2 | | 6.4 | Meter | | | | | |
| 3 | | 6.4 | | | | | | |
| 4 | | 6.3 | | | | | | |
| 5 | | 6.2 | | | | | | |
| 6 | | 6.2 | | | | | | |
| 7 | | 6.2 | | | | | | |
| 8 | | 6.2 | | | | | | |
| 9 | | 6.2 | | | | | | |
| 10 | | 6.3 | | | | | | |
| 11 | | 6.4 | | | | | | |
| 12 | | 6.4 | | | | | | |
| 13 | | 6.3 | | | | | | |
| 14 | | 6.3 | | | | | | |
| 15 | | 6.3 | | | | | | |
| 16 | | 6.2 | | | | | | |
| 17 | | 6.3 | | | | | | |
| 18 | | 6.2 | | | | | | |
| 19 | | 6.2 | | | | | | |
| 20 | | 6.2 | | | | | | |
| 21 | | 6.2 | | | | | | |
| 22 | | 6.4 | .70 | ~~.33~~ | | 75 | ~~.328~~ | |
| 23 | | 6.2 | | | | | | |
| 24 | | 6.2 | | | | | | |
| 25 | | 6.4 | | | | | | |
| 26 | | 6.2 | | | | | | |
| 27 | | 6.2 | | | | | | |
| 28 | | 6.2 | | | | | | |
| 29 | | 6.2 | | | | | | |
| 30 | | 6.2 | | | | | | |
| 31 | | 6.2 | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | | | | | | | | | | | | | 0.6 | | | <1 | | | | | | | | | 1 |
| 2 | | | | | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 2 |
| 3 | | | | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 3 |
| 4 | | | | | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 4 |
| 5 | | | | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | +Cl2 | 5 |
| 6 | | | | | | | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | Add | 6 |
| 7 | | | | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 7 |
| 8 | | | | | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 8 |
| 9 | | | | | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | +Cl2 | 9 |
| 10 | | | | | | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 10 |
| 11 | | | | | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 11 |
| 12 | | | | | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 12 |
| 13 | | | | | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 13 |
| 14 | | | | | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | +Cl2 | 14 |
| 15 | | | | | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 15 |
| 16 | | | | | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 16 |
| 17 | | | | | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 17 |
| 18 | | | | | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | +Cl2 | 18 |
| 19 | | | | | | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 19 |
| 20 | | | | | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 20 |
| 21 | | | | | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 21 |
| 22 | | | | | | | | | | | | | | | | | nd | .33 | 7.94 | nd | 7.94 | .328 | | | | | | | | | | | | 22 |
| 23 | | | | | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 23 |
| 24 | | | | | | | | | | | | | | | | | | | | | | ~~0.8~~ 0.3 | | | | | | | | | | | Add Cl2 | 24 |
| 25 | | | | | | | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | | 25 |
| 26 | | | | | | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 26 |
| 27 | | | | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 27 |
| 28 | | | | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 28 |
| 29 | | | | | | | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 29 |
| 30 | | | | | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add Cl2 | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

May meter not working sent to Factory Putting in spare turbo meter

Flow Meter "Not Work"

# Discharge Monitori g Report - Oregon Department of Environmental Quality

Facility Name: Riverwood MHP | Phone Number: 360-254-2131 | Month/Year: June, 2008
DEQ Permit No.: 10250 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR. 00314
Plant Type: Rec&C. gravel | County: Columbia | Population Served: 100 +

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature — Date: 7/22/08/MC

MAGAN E. MAGAN — Name (Print)

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print): MPAGAN — Certification No. & Grade: 10022
Treatment Sys. Class ____ Principal Operator Name (print): M Magan — Certification No. & Grade: 10675

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | no | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | 130 | | | 115 | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | ↓ | | | | | |
| 13 | | | 5,700 | | | | | |
| 14 | | | 5,700 | | | | | |
| 15 | | | 5,200 | | | | | |
| 16 | | | 4,500 | | | | | |
| 17 | | | 4,500 | | | | | |
| 18 | | | 6,700 | | | | | |
| 19 | | | 4,800 | | | | | |
| 20 | | | 3,500 | | | | | |
| 21 | | | 5,700 | | | | | |
| 22 | | | 5,700 | | | | | |
| 23 | | | 5,800 | | | | | |
| 24 | | | 4,500 | | | | | |
| 25 | | | 5,800 | | | | | |
| 26 | | | 5,700 | | | | | |
| 27 | | | 4,500 | | | | | |
| 28 | | | 3,500 | | | | | |
| 29 | | | 3,500 | | | | | |
| 30 | | | 2,500 | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 6.2 | | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | 1 |
| | 6.1 | | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | 2 |
| | 6.2 | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | Flow meter IN for Repair | 3 |
| | 6.2 | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | add Cl / rain | 4 |
| | 6.2 | | | <2 | 99 | .15 | | | | <2 | 78 | .15 | | | 0.3 | | | 0.9 | | <1 | | | | | | | | add Cl / rain | 5 |
| | 6.2 | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | ~~add Cl / rain~~ | 6 |
| | 6.2 | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | 7 |
| | 6.2 | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | 8 |
| | 6.1 | | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | 9 |
| | 6.1 | | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | 10 |
| | 6.2 | | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | 11 |
| | 6.2 | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 12 |
| | 6.1 | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | 13 |
| | 6.1 | | | | | | | | | | | | | | | | | 0.27 | | | | | | | | | | | 14 |
| | 6.08 | | | | | | | | | | | | | | | | | 0.38 | | | | | | | | | | add Cl | 15 |
| | 6.10 | | | | | | | | | | | | | | | | | 0.16 | | | | | | | | | | ~~add Cl~~ | 16 |
| | 6.17 | | | | | | | | | | | | | | | | | 0.93 | | | | | | | | | | | 17 |
| | 6.13 | | | | | | | | | | | | | | | | | 0.53 | | | | | | | | | | | 18 |
| | 6.18 | | | | | | | | | | | | | | | | | 0.27 | | | | | | | | | | | 19 |
| | 6.19 | | | | | | | | | | | | | | | | | 0.35 | | | | | | | | | | | 20 |
| | 6.17 | | | | | | | | | | | | | | | | | 0.56 | | | | | | | | | | | 21 |
| | 6.11 | | | | | | | | | | | | | | | | | 1.07 | | | | | | | | | | | 22 |
| | 6.10 | | | | | | | | | | | | | | | | | .86 | | | | | | | | | | | 23 |
| | 6.11 | | | | | | | | | | | | | | | | | 0.52 | | | | | | | | | | | 24 |
| | 6.08 | | | | | | | | | | | | | | | | | 2.52 | | | | | | | | | | add Cl ✓ | 25 |
| | 6.15 | | | | | | | | | | | | | | | | | 2.01 | | | | | | | | | | | 26 |
| | 6.12 | | | | | | | | | | | | | | | | | 1.8 | | | | | | | | | | | 27 |
| | 6.2 | | | | | | | | | | | | | | | | | 1.7 | | | | | | | | | | | 28 |
| | 6.2 | | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | 29 |
| | 6.2 | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | 30 |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

Flow meter malfunction

Rain — out of Reagent for Cl on 3rd, 4th, 5th

JUL 25 2008

NORTHWEST REGION
JUL 25 2008
DEPT OF ENVIRONMENTAL QUALITY

RECEIVED
AUG 28 2008
DEPT OF ENVIRONMENTAL QUALITY
N.W. REGION WATER QUALITY
8/27/08

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Riverwood MHP | Phone Number: 360 254 7131 | Month/Year: July 2008
DEQ Permit No.: 102320 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR0031474
Plant Type: Recir. Gravel | County: Columbia | Population Served: 100+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature | Date

Name (Print): Maria Magan

**Operator Certification**

Collection Sys. Class: ____ | Principal Operator Name (print): Maria Magan | Certification No. & Grade: 10622
Treatment Sys. Class: ____ | Principal Operator Name (print): Maria Magan | Certification No. & Grade: WP93

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | 99 | | 100 | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | 25 | 6.7 | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | 6.8 | | | | | | |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM E.coli MPN/MF CFU/100 ml | COLIFORM Fecal MPN/MF CFU/100 ml | COLIFORM Total MPN/MF CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.2 | ~ | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 1 |
| 2 | | 6.2 | ~ | | | | | | | | | | | | | | | | .64 | | | | | | | | | | | | 2 |
| 3 | | 6.0 | ~ | | <2 | 748 | .21 | | | | <3 | 997 | 7.3 | | | | | | 3.6 | | | <1 | | | | | | | | | 3 |
| 4 | | 6.1 | ~ | | | | | | | | | | | | | | | | 0.52 | | | | | | | | | | | | 4 |
| 5 | | 6.2 | ~ | | | | | | | | | | | | | | | | 0.16 | | | | | | | | | | | | 5 |
| 6 | | 6.2 | ~ | | | | | | | | | | | | | | | | 0.56 | | | | | | | | | | | | 6 |
| 7 | | 6.2 | 0.100 | | | | | | | | | | | | | | | | 0.21 | | | | | | | | | | | | 7 |
| 8 | | 6.2 | P.002 | | | | | | | | | | | | | | | | 0.56 | | | | | | | | | | | | 8 |
| 9 | | 6.2 | 3.50 | | | | | | | | | | | | | | | | 0.58 | | | | | | | | | | | | 9 |
| 10 | | 6.1 | .25 | | | | | | | | | | | | | | | | 0.52 | | | | | | | | | | | | 10 |
| 11 | | 6.2 | 4.28 | | | | | | | | | | | | | | | | 0.33 | | | | | | | | | | | | 11 |
| 12 | | 6.2 | 2.31 | | | | | | | | | | | | | | | | 0.50 | | | | | | | | | | | | 12 |
| 13 | | 6.0 | 6.20 | | | | | | | | | | | | | | | | 0.46 | | | | | | | | | | | | 13 |
| 14 | | 6.1 | 6.53 | | | | | | | | | | | | | | | | 0.47 | | | | | | | | | | | add Cl2 | 14 |
| 15 | | 6.2 | 7.39 | | | | | | | | | | | | | | | | 1.12 | | | | | | | | | | | | 15 |
| 16 | | 6.4 | 13.44 | | | | | | | | | | | | | | | | 0.41 | | | | | | | | | | | | 16 |
| 17 | | 6.3 | 10.50 | | | | | | | | | | | | | | | | 8.73 | | | | | | | | | | | add Cl2 | 17 |
| 18 | | 6.0 | 7.56 | | | | | | | | | | | | | | | | 0.57 | | | | | | | | | | | | 18 |
| 19 | | | — | | | | | | | | | | | | | | | | X | | | | | | | | | | | | 19 |
| 20 | | | — | | | | | | | | | | | | | | | | X | | | | | | | | | | | | 20 |
| 21 | | | 5.46 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | add Cl2 | 21 |
| 22 | | 6.1 | 3.30 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 22 |
| 23 | | 6.0 | 4.22 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 23 |
| 24 | | 6.0 | 7.16 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | add Cl2 | 24 |
| 25 | | 5.9 | 7.59 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 25 |
| 26 | | 6.0 | 7.35 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 26 |
| 27 | | 6.0 | 9.51 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | | 27 |
| 28 | | 6.0 | 8.53 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | add Cl2 | 28 |
| 29 | | 6.0 | 8.74 | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | | 29 |
| 30 | | 6.0 | 9.36 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 30 |
| 31 | | 6.1 | 9.85 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: RIVERWOOD | Phone Number: 360 254 7131 | Month/Year: August 08
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR 00314
Plant Type: RECIR. GRAVEL | County: Columbia | Population Served: ~100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature — 9/15/08 Date

MAGAR MAGAR Name (Print)

DEPT OF ENVIRONMENTAL QUALITY RECEIVED SEP 17 2008 NORTHWEST REGION

Collection Sys. Class: _____ Principal Operator Name (print): MAGAR Certification No. & Grade: 10622
Treatment Sys. Class: _____ Principal Operator Name (print): MAGAR Certification No. & Grade: 10622

**Operator Certification**

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD Concentration mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
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| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

CUMMULATIVE

**EFFLUENT** (identify outfall number – e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U. | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | 6.1 | 102 | 62 | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | 1 |
| 2 | | | 6.1 | 106 | 55 | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 2 |
| 3 | | | 6.2 | 111 | 105 | | | | | | | | | | | | | | .3 | | | | | | | | | | | Added 2CL2 | 3 |
| 4 | | | 6.1 | 118 | 97 | | | | | | | | | | | | | | 2.3 | | | | | | | | | | | | 4 |
| 5 | | | 5.94 | 122 | 00 | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | 5 |
| 6 | | | 6.1 | 127 | 37 | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | 6 |
| 7 | | | 6.1 | 132 | 30 | <2 | 79% | .2 | | | <2 | 79% | .173 | | | | | | .9 | | | Est | | | | | | | | | 7 |
| 8 | | | 6.1 | 137 | 81 | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 8 |
| 9 | | | 6.1 | 142 | 93 | | | | | | | | | | | | | | .3 | | | | | | | | | | | Added 2CL2 | 9 |
| 10 | | | 6.1 | 148 | 90 | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | 10 |
| 11 | | | 6.1 | 154 | 47 | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 11 |
| 12 | | | 6.1 | 159 | 88 | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 12 |
| 13 | | | 6.1 | 165 | 60 | | | | | | | | | | | | | | .5 | | | | | | | | | | | | 13 |
| 14 | | | 6.1 | 171 | 68 | | | | | | | | | | | | | | .4 | | | | | | | | | | | | 14 |
| 15 | | | 6.1 | 177 | 12 | | | | | | | | | | | | | | .3 | | | | | | | | | | | Added 2CL2 | 15 |
| 16 | | | 6.0 | 181 | 40 | | | | | | | | | | | | | | 2.0 | | | | | | | | | | | | 16 |
| 17 | | | 6.1 | 187 | 43 | | | | | | | | | | | | | | 1.7 | | | | | | | | | | | | 17 |
| 18 | | | 6.3 | 192 | 10 | | | | | | | | | | | | | | .9 | | | | | | | | | | | | 18 |
| 19 | | | 6.2 | 199 | 50 | | | | | | | | | | | | | | .2 | | | | | | | | | | | Added 2CL2 | 19 |
| 20 | | | 6.2 | 206 | 90 | | | | | | | | | | | | | | 2.2 | | | | | | | | | | | | 20 |
| 21 | | | 6.1 | 213 | 76 | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 21 |
| 22 | | | 6.1 | 219 | 93 | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 22 |
| 23 | | | 6.1 | 224 | 11 | | | | | | | | | | | | | | .7 | | | | | | | | | | | | 23 |
| 24 | | | 6.1 | 227 | 65 | | | | | | | | | | | | | | .4 | | | | | | | | | | | | 24 |
| 25 | | | 6.1 | 234 | 18 | | | | | | | | | | | | | | .09 | | | | | | | | | | | Added 2CL2 | 25 |
| 26 | | | 6.2 | 239 | 75 | | | | | | | | | | | | | | 1.9 | | | | | | | | | | | | 26 |
| 27 | | | 6.1 | 244 | 65 | | | | | | | | | | | | | | .8 | | | | | | | | | | | | 27 |
| 28 | | | 6.1 | 249 | 36 | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 28 |
| 29 | | | 6.2 | 253 | 75 | | | | | | | | | | | | | | .5 | | | | | | | | | | | | 29 |
| 30 | | | 6.2 | 258 | 84 | | | | | | | | | | | | | | .3 | | | | | | | | | | | Added 2CL2 | 30 |
| 31 | | | 6.2 | 261 | 91 | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | Mowed | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

# Discharge Monitoring Report - Oregon Department of Environmental Quality

EQC

Facility Name: Riverwood MHP
DEQ Permit No.: 102520
Plant Type: Recir. Gravel
Phone Number: 360 2547131
DEQ File No./Facility ID: 75541
County: Columbia
Month/Year: Sept. 2008
EPA Reference No.:
Population Served: 100+

DEPT OF ENVIRONMENTAL QUALITY RECEIVED OCT 28 2008

**Operator Certification**

Collection Sys. Class: II — Principal Operator Name (print): M A GAR — Certification No. & Grade: 10621
Treatment Sys. Class: II — Principal Operator Name (print): MAGAR — Certification No. & Grade: 10622

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature — 10/25/2008 Date

MAGAR MAGAR Name (Print)

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | 6.9 | | 68 | | | 67 | |
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| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U. | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.2 | 4994 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 1 |
| 2 | | 6.2 | 4756 | | <2 | 97 | .105 | | | | <2 | 97 | .105 | | | | | | 0.2 | | | | | | | | | | | Add Cl2 | 2 |
| 3 | | 6.2 | 3870 | | | | | | | | | | | | | | | | 2.8 | | | | | | | | | | | | 3 |
| 4 | | 6.1 | 4239 | | | | | | | | | | | | | | | | 1.2 | | | <1 | | | | | | | | | 4 |
| 5 | | 6.1 | 1485 | | | | | | | | | | | | | | | | 2.0 | | | | | | | | | | | | 5 |
| 6 | | 6.2 | 3934 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | 6 |
| 7 | | 6.2 | 3680 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 7 |
| 8 | | 6.2 | 3726 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add Cl2 | 8 |
| 9 | | 6.3 | 3324 | | | | | | | | | | | | | | | | 2.4 | | | | | | | | | | | | 9 |
| 10 | | 6.2 | 2934 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | 10 |
| 11 | | 6.2 | 2937 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | 11 |
| 12 | | 6.3 | 3015 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 12 |
| 13 | | 6.3 | 2470 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 13 |
| 14 | | 6.2 | 3526 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add Cl2 | 14 |
| 15 | | 6.2 | 2924 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | 15 |
| 16 | | 6.1 | 3360 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | 16 |
| 17 | | 6.3 | 3080 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 17 |
| 18 | | 6.2 | 2067 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 18 |
| 19 | | 6.3 | 3479 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 19 |
| 20 | | 6.1 | 3374 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 20 |
| 21 | | 6.1 | 1290 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add Cl2 | 21 |
| 22 | | 6.2 | 2390 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 22 |
| 23 | | 6.2 | 2473 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 23 |
| 24 | | 6.1 | 1940 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 24 |
| 25 | | 6.2 | 2249 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 25 |
| 26 | | 6.3 | 1864 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 26 |
| 27 | | 6.2 | 10312 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Flush Line @ sp3 | 27 |
| 28 | | 6.2 | 3397 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 28 |
| 29 | | 6.2 | 1228 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 29 |
| 30 | | 6.2 | 1322 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add Cl2 / Rain | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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Attachment V
August 18-19, 2010 EQC meeting
Page 200 of 370

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Kapowsin MHP | Phone Number: 360-254 7131 | Month/Year: Oct. 2008
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.:
Plant Type: Rectec. gravel | County: Columbia | Population Served: 150 +

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature — Date: 10/15/2008

MAGDA MAGAN Name (Print)

RECEIVED NOV 17 2008 DEPT OF ENVIRONMENTAL QUALITY NW REGION WATER QUALITY

## Operator Certification

Collection Sys. Class: 1 — Principal Operator Name (print): Magan Magan — Certification No. & Grade: 10621 W
Treatment Sys. Class: 1 — Principal Operator Name (print): Magan Magan — Certification No. & Grade: 10621 W

## INFLUENT

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
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| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

## EFFLUENT (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Removal % | BOD Loading lbs. | CBOD Grab Concentration mg/L | CBOD Removal % | CBOD Loading lbs. | TSS Grab Concentration mg/L | TSS Removal % | TSS Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 6.2 | 2757 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | |
| 2 | | 6.1 | 3105 | | <2 | 99% | .08 | | | | <2 | 99% | .08 | | | | | | 0.9 | | | | | | | | | | | Rain |
| 3 | | 6.2 | 2234 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Rain |
| 4 | | 6.2 | 3416 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add / Rain |
| 5 | | 6.2 | 2678 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | |
| 6 | | 6.2 | 3211 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | |
| 7 | | 6.2 | 3088 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add |
| 8 | | 6.1 | 3114 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | |
| 9 | | 6.2 | 3311 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | |
| 10 | | 6.3 | 2149 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add |
| 11 | | 6.3 | 3317 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | |
| 12 | | 6.2 | 2856 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | |
| 13 | | 6.3 | 3154 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Rain |
| 14 | | 6.3 | 3258 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | |
| 15 | | 6.3 | 3191 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add / Rain |
| 16 | | 6.3 | 2548 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | |
| 17 | | 6.3 | 2781 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | |
| 18 | | 6.3 | 2341 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | Rain |
| 19 | | 6.3 | 2178 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | clean filter #1 |
| 20 | | 6.2 | 2780 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | |
| 21 | | 6.3 | 2550 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Rain |
| 22 | | 6.3 | 2499 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Add / Rain |
| 23 | | 6.3 | 2830 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add |
| 24 | | 6.3 | 2738 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | clean filter #1 |
| 25 | 12.5°C | 6.2 | 2814 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | |
| 26 | 12.4°C | 6.2 | 2638 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add |
| 27 | 12.2°C | 6.2 | 2848 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | clean filter #1 |
| 28 | 12.9°C | 6.7 | 2484 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | |
| 29 | 11.9°C | 6.2 | 2135 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | |
| 30 | 12.4°C | 6.2 | 2404 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | Shut Down Recirc. clean Filter #2 |
| 31 | 12.8°C | 6.1 | 1823 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Rain Add / Rain |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

10 min (Rain)

The influent pH was recorded as 6.7.
I do not recall the day.

Attachment V
August 18-19, 2010 EQC meeting
Page 20 of 270

# Discharge Monitori g Report - Oregon Department of Environmental Quality

Facility Name: Rivergrove (001) MHC | Phone Number: 360 254 7131 | Month/Year: NOV 2008
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.:
Plant Type: Recir. gravel | County: | Population Served: ~100

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] Authorized Signature — 12/20/08 Date

MAGAN Name (Print)

## Operator Certification

Collection Sys. Class ____ Principal Operator Name (print): MAGAN MAGAN Certification No. & Grade: 10622
Treatment Sys. Class ____ Principal Operator Name (print): MAGAN Certification No. & Grade: 10622

| Date | INFLUENT Temperature °C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT Temperature °C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN MF E.coli CFU/100 ml | COLIFORM MPN MF Fecal CFU/100 ml | COLIFORM MPN MF Total CFU/100 ml | RECEIVING STREAM Amnonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | 13.2 | Ø | 2134 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | PH Electrode Bad | 1 |
| 2 | | | | | | | | | 14.0 | Ø | 1384 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | Float Bad / Add | 2 |
| 3 | | | | | | | | | 13.0 | Ø | 2338 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | Elect Bad | 3 |
| 4 | | | | | | | | | 11.5 | Ø | 2057 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | Elect. Bad | 4 |
| 5 | | | | | | | | | 11.8 | Ø | 1930 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Elect Bad / Add | 5 |
| 6 | | | | 82 | | | 84 | | 13.1 | Ø | 1938 | | <2 | 98% | .21 | | | | 3 | 96% | .31 | | | | | | 0.7 | | | | | | | | | | Elect Bad / System | 6 |
| 7 | | | | | | | | | 14.7 | Ø | 1942 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | Elect Rode Bad / Flood | 7 |
| 8 | | | | | | | | | 14.0 | Ø | 1860 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add / Rain / PH Elect | 8 |
| 9 | | | | | | | | | 13.6 | Ø | 2000 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | Rain / Elect. Bad | 9 |
| 10 | | | | | | | | | 12.5 | Ø | 1965 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add / Rain / Elect | 10 |
| 11 | | | | | | | | | 12.5 | Ø | 1920 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | Add / Rain / Flood gate #1 | 11 |
| 12 | | | | | | | | | 14.4 | 6.0 | 887 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | Add ② TABS / Rain | 12 |
| 13 | | | | | | | | | 12.5 | 5.9 | 1048 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | Recalibrate New | 13 |
| 14 | | | | | | | | | 12.2 | 6.0 | 1270 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | over flow gate | 14 |
| 15 | | | | | | | | | 12.2 | 6.1 | 1554 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add / over flow / | 15 |
| 16 | | | | | | | | | 12.5 | 6.1 | 797 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | clean Filter #1 / Flush | 16 |
| 17 | | | | | | | | | 12.3 | 6.2 | 864 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add / Rain / Flush | 17 |
| 18 | | | | | | | | | 12.4 | 6.2 | 984 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | Rain / Flush Meter | 18 |
| 19 | | | | | | | | | 10.9 | 6.2 | 1361 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add | 19 |
| 20 | | | | | | | | | 10.5 | 6.2 | 1120 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | Rain 5/10" / clean Filter #1 | 20 |
| 21 | | | | | | | | | 11.2 | 6.2 | 1040 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | Add ② TABS / over flow | 21 |
| 22 | 6.7 | | | | | | | | 10.7 | 6.2 | 976 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | R=1/20" / over Flow | 22 |
| 23 | | | | | | | | | 10.0 | 6.2 | 947 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | over flow gate | 23 |
| 24 | | | | | | | | | 10.0 | 6.2 | 1080 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add / over flow gate | 24 |
| 25 | | | | | | | | | 9.5 | 6.2 | 989 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | R=1/20" / over flow gate | 25 |
| 26 | 6.8 | | | | | | | | 9.3 | 6.3 | 976 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | Add ② TABS / overgate | 26 |
| 27 | | | | | | | | | 10.1 | 6.3 | 723 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | overflow gate | 27 |
| 28 | | | | | | | | | 10.3 | 6.3 | 1052 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | overflow gate | 28 |
| 29 | | | | | | | | | 11.8 | 6.2 | 791 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | R=3/20" / overgate | 29 |
| 30 | | | | | | | | | 12.2 | 6.3 | 738 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Add / overgate | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

Flow readings are not Accurate - Meter Failing - flooding over gate = ~~80%~~ (Estimated) meter = less than ~~80%~~.

80% RGS ESTIMATE
20%

METER BASE Item M 000332
+ CIRCUIT BOARD + WIRE

Attachment V
August 18-19, 2010 EQC meeting


# Discharge Monitori g Report - Oregon Department of Environmental Quality

VWC

Facility Name: Ilwaco | Phone Number: 360-254-7121 | Month/Year: Dec 2008
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.:
Plant Type: recir. Grand Inlet | County: COLUMBIA | Population Served: 1504

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] JAN 23 2009 — Authorized Signature — Date: 1/20/09

Name (Print): Magan Magn

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print): MAGAN — Certification No. & Grade: 10622
Treatment Sys. Class ____ Principal Operator Name (print): MAGAN — Certification No. & Grade: 10622

ofg = overflow gate
R = Rain

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD Concentration mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | 11.7 | 6.3 | 776 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | Rain 1/20 | 1 |
| 2 | | | | | | | | | 12.1 | 6.3 | 800 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Add Cl2 / Rain 2/10 | 2 |
| 3 | | | | | | | | | 10.1 | 6.7 | 1014 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | R | 3 |
| 4 | | | | | | | | | 9.9 | 6.4 | 987 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | R | 4 |
| 5 | 10.8 | 6.2 | | 27 | | | 8 | | 9.1 | 6.5 | 875 | | <2 | 85% | .43 | | | | 22 | 91% | 6.43 | | | n.d. | | | 0.6 | | | 92 | | | | | | | R | 5 |
| 6 | | | | | | | | | 9.7 | 6.5 | 1019 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | R | 6 |
| 7 | | | | | | | | | 9.9 | 6.4 | 887 | | | | | | | | | | | | | | | | 0,3 | | | | | | | | | | Add Cl2 / R 7/20 | 7 |
| 8 | | | | | | | | | 10.0 | 6.4 | 983 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add Cl2 / R | 8 |
| 9 | | | | | | | | | 9.9 | 6.3 | 1119 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | R | 9 |
| 10 | | | | | | | | | 10.9 | 6.4 | 749 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | R | 10 |
| 11 | | | | | | | | | 10.0 | 6.5 | 824 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add 2 Cl2 / R | 11 |
| 12 | | | | | | | | | 9.2 | 6.7 | 1135 | | | | | | | | | | | | | | | | 1.8 | | | | | | | | | | R 15/20 | 12 |
| 13 | | | | | | | | | 8.5 | 6.8 | 781 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | R 1/10 | 13 |
| 14 | 7.1 | | | | | | | | 6.8 | 6.8 | 782 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | R | 14 |
| 15 | | | | | | | | | 5.6 | 6.8 | 874 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | Add 2 Cl2 / R | 15 |
| 16 | | | | | | | | | 6.2 | 6.8 | 983 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | R | 16 |
| 17 | | | | | | | | | 6.9 | 6.9 | 898 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | R | 17 |
| 18 | | | | | | | | | 6.8 | 6.9 | 1971 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | R | 18 |
| 19 | | | | | | | | | 6.2 | 6.8 | 2028 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Add Cl2 / R | 19 |
| 20 | | | | | | | | | 5.4 | 6.8 | 938 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | R | 20 |
| 21 | | | | | | | | | 5.4 | 6.9 | 1090 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Add 2 Cl2 / R | 21 |
| 22 | | | | | | | | | 5.4 | 6.9 | 984 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | R | 22 |
| 23 | | | | | | | | | 5.9 | 6.9 | 1204 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | R | 23 |
| 24 | | | | | | | | | 6.9 | 6.9 | 1103 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Add Cl2 / R | 24 |
| 25 | | | | | | | | | 7.1 | 6.9 | 485 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Add 2 Cl2 / R 1/2 | 25 |
| 26 | | | | | | | | | 8.2 | 6.8 | 774 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Add 2 Cl2 / R 1/2 | 26 |
| 27 | 6.9 | | | | | | | | 10.9 | 6.8 | 244 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add 2 Cl2 / R 1/4 | 27 |
| 28 | | | | | | | | | 7.0 | 6.2 | 100 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add 2 Cl2 / R 4/20 | 28 |
| 29 | | | | | | | | | 7.0 | 6.3 | 0 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | R 3/20 | 29 |
| 30 | | | | | | | | | 7.0 | 6.1 | 0 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | R 1/20 | 30 |
| 31 | | | | | | | | | 7.0 | 6.4 | 1 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add 2 Cl2 / R 1/2 | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

DAILY LOG
31 overflow gate
Flush flow meter
overflow gate
ofg
Flush meter
ofg
ofg
ofg / Flush meter
ofg / SNOW
ofg / SNOW
ofg / ICE
ofg / ICE
ofg / Flush meter SNOW
ofg / SNOW
ofg / SNOW
ofg / SNOW
ofg / SNOW
ofg / SNOW melt
ofg / SNOW melt
ofg / SNOW melt
ofg / of broke cibs
ofg
ofg / meter failed
ofg / clean filts 2&3
ofg / Peltzer
Remove 3,000 gal clean pumps
#3 pump broke pipe
#2 pump weak

# Discharge Monitori g Report - Oregon Department of Environmental Quality

VLWC

Facility Name: RIVERWOOD | Phone Number: 360-2547121 | Month/Year: Dec 2008
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.:
Plant Type: RECIR. Grand Inlet | County: COLUMBIA | Population Served: 150+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] JAN 23 2009 — Authorized Signature — Date: 1/20/09

Name (Print): Magan Magan

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print): MAGAN — Certification No. & Grade: 10627
Treatment Sys. Class ____ Principal Operator Name (print): MAGAN — Certification No. & Grade: 10627

ofg = overflow gate
R = rain

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U. | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | 11.7 | 6.3 | 776 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Rain 1/20 | 1 |
| 2 | | | | | | | | | 12.1 | 6.3 | 800 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add Cl2 / Rain 2/10 | 2 |
| 3 | | | | | | | | | 10.1 | 6.7 | 1014 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | RO | 3 |
| 4 | | | | | | | | | 9.9 | 6.4 | 987 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | RO | 4 |
| 5 | 10.5 | 6.2 | | 21 | | 8 | | | 9.1 | 6.5 | 875 | | <2 | 85% | .43 | | | | 2.2 | 85% | .43 | | | n.d. | | | 0.6 | | | 92 | | | | | | | RO | 5 |
| 6 | | | | | | | | | 9.7 | 6.5 | 1019 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | RO | 6 |
| 7 | | | | | | | | | 9.9 | 6.4 | 887 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | ofg | 7 |
| 8 | | | | | | | | | 10.0 | 6.4 | 983 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add Cl2 / R 7/20 | 8 |
| 9 | | | | | | | | | 9.9 | 6.3 | 1119 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | ofg / Flush meter | 9 |
| 10 | | | | | | | | | 10.9 | 6.4 | 749 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | RO | 10 |
| 11 | | | | | | | | | 10.0 | 6.5 | 824 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | RO | 11 |
| 12 | | | | | | | | | 9.2 | 6.7 | 1135 | | | | | | | | | | | | | | | | 1.8 | | | | | | | | | | | Add Cl2 / RO | 12 |
| 13 | | | | | | | | | 8.5 | 6.8 | 781 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 15/20 | 13 |
| 14 | 7.1 | | | | | | | | 6.8 | 6.8 | 782 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | ofg / SNOW R 1/10 | 14 |
| 15 | | | | | | | | | 5.6 | 6.8 | 874 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | RO | 15 |
| 16 | | | | | | | | | 6.2 | 6.8 | 983 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | ofg / ICE Add Cl2 / RO | 16 |
| 17 | | | | | | | | | 6.9 | 6.9 | 898 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | RO | 17 |
| 18 | | | | | | | | | 6.8 | 6.9 | 1971 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | RO | 18 |
| 19 | | | | | | | | | 6.2 | 6.8 | 2028 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | RO | 19 |
| 20 | | | | | | | | | 5.4 | 6.8 | 938 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Add Cl2 / RO | 20 |
| 21 | | | | | | | | | 5.4 | 6.9 | 1050 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | RO | 21 |
| 22 | | | | | | | | | 5.4 | 6.9 | 984 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | Add Cl2 / RO | 22 |
| 23 | | | | | | | | | 5.9 | 6.9 | 1204 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | RO | 23 |
| 24 | | | | | | | | | 6.9 | 6.9 | 1103 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | RO | 24 |
| 25 | | | | | | | | | 7.1 | 6.9 | 485 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add Cl2 / R 1/2 | 25 |
| 26 | | | | | | | | | 8.2 | 6.8 | 774 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add Cl2 / R 1/2 | 26 |
| 27 | 6.9 | | | | | | | | 10.4 | 6.8 | 244 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add Cl2 / R 1 3/4 | 27 |
| 28 | | | | | | | | | 7.0 | 6.2 | 100 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add Cl2 / R 4/10 | 28 |
| 29 | | | | | | | | | 7.0 | 6.3 | 0 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | R 3/20 | 29 |
| 30 | | | | | | | | | 7.0 | 6.1 | 0 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 1/20 | 30 |
| 31 | | | | | | | | | 7.0 | 6.4 | 1 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add Cl2 / R 1/2 | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

TOTAL
DAILY MINIMUM
DAILY MAXIMUM
WEEKLY AVERAGE MAX.
MONTHLY AVERAGE
DAILY LIMITS
WEEKLY LIMITS
MONTHLY LIMITS

#3 pump broken pipe
#2 pump weak
Remove 3000 gal
clean pumps
2&3
Peltzer

# Discharge Monitoring Report - Oregon Department of Environmental Quality

RECEIVED
FEB 19 2009
DEPT OF ENVIRONMENTAL QUALITY
N.W. REGION WATER QUALITY

Facility Name Riverwood MHP | Phone Number 360-254-7151 | Month/Year January 2009
DEQ Permit No. 102520 | DEQ File No./Facility ID 75541 | EPA Reference No. OR 0031477
Plant Type Recirc. Gravel | County Columbia | Population Served 150±

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ 2/16/09
Authorized Signature Date

MAGAR C. MAGAR
Name (Print)

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print) MAGAR | Certification No. & Grade 10628
Treatment Sys. Class ____ Principal Operator Name (print) MAGAR | Certification No. & Grade 10628

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | 5.6 | 2.6 | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | 68 | | 140 | | | 110 | | |
| 17 | | | | | | | | |
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| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

Recirculated

**EFFLUENT** (identify outfall number – e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Transmittance % | Turbidity N.T.U. | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date | System Weather Flow Gate | System Overflow Flow Recirc. Tank |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | 7.6 | 5.8 | — | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Add(2) / R 1½" | 1 | X | X |
| 2 | | 5.7 | 6.0 | — | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 1/20" | 2 | X | X |
| 3 | | 5.5 | 6.3 | — | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add(2) / | 3 | X | X |
| 4 | | 6.3 | 6.2 | — | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 1" | 4 | X | X |
| 5 | | 6.5 | 6.1 | — | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add(2) / R 3/4" | 5 | X | X |
| 6 | | 10.4 | 5.6 | — | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Add(1) / R 9/10" | 6 | X | X |
| 7 | | 10.3 | 5.8 | — | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | Add(2) / R 2/10" | 7 | X | X |
| 8 | | 8.4 | 5.8 | — | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 1" | 8 | X | X |
| 9 | | 7.4 | 5.5 | — | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 1/20" | 9 | X | X |
| 10 | | 6.7 | 5.4 | — | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add(2) / R 1/20" | 10 | X | X |
| 11 | | 8.4 | 5.5 | 905 | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add(2) / R 5/20" | 11 | X | X |
| 12 | | 10.2 | 6.2 | 1666 | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | Add(3) / R 1/20" | 12 | X | X | Recirculate |
| 13 | | 9.3 | 6.2 | 1569 | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 13 | X | | |
| 14 | | 7.2 | 6.2 | 1770 | | | | | | | | | | | | | | | 6.5 | | | | | | | | | | | Add(1) | 14 | X | | |
| 15 | | 6.9 | 6.3 | 1029 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add(2) | 15 | | | |
| 16 | | 6.3 | 6.3 | 2570 | <2 | 99% | .22 | | | | <2 | 99% | .22 | | | | | | 0.5 | | | 2 | | | | | | | | Add(3) | 16 | | | |
| 17 | | 6.2 | 6.3 | 1680 | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add(2) | 17 | | | |
| 18 | | 7.4 | 6.3 | 2055 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 18 | | | |
| 19 | | 6.7 | 6.3 | 2004 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 19 | | | |
| 20 | | 6.9 | 6.3 | 2271 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 20 | | | |
| 21 | | 5.9 | 6.3 | 2401 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add(1) | 21 | | | |
| 22 | | 5.8 | 6.3 | 1561 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 22 | | | |
| 23 | | 5.8 | 6.4 | 741 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add(2) | 23 | | | |
| 24 | | 5.7 | 6.3 | 5492 | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 24 | | | |
| 25 | | 5.7 | 6.4 | 2008 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 1/10" | 25 | X | | |
| 26 | | 4.8 | 6.4 | 2218 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 26 | | | |
| 27 | | 4.5 | 6.5 | 2687 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | R 3/10" | 27 | X | | |
| 28 | | 6.5 | 6.4 | 2473 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add(1) / R 1/10" | 28 | X | | |
| 29 | | 6.4 | 6.4 | 2126 | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add(2) | 29 | | | |
| 30 | | 6.2 | 6.4 | 2404 | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 1/20" | 30 | X | | |
| 31 | | 5.9 | 6.4 | 2195 | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 31 | | | |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | | | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | | | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | | | |

Calibrate pH Tester

The readings for pH on from 6 – 11 January were done prior to the operator realized that the pH meter was to be recalibrated

# Discharge Monitoring Report - Oregon Department of Environmental Quality

V LWC

Facility Name: Riverwood MHP | Phone Number: 360-254-7131 | Month/Year: Feb 2009
DEQ Permit No.: 75541 - file # | DEQ File No./Facility ID: 102520 - Permit # | EPA Reference No.: OR 003114-3
Plant Type: Recirculating Gravel | County: Columbia | Population Served: 150+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature — 3/16/09 Date

MAGDA C MAGRAN Name (Print)

**Operator Certification**

Collection Sys. Class: ____ Principal Operator Name (print): MAGRAN — Certification No. & Grade: 10622
Treatment Sys. Class: ____ Principal Operator Name (print): MAGRAN — Certification No. & Grade: 10622

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | 0.8 | 89 | | | 70 | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
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| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | 6.9 | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
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| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number – e.g. 001, 002, 003): ☒

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 6.1 | 6.4 | 1280 | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Add ② | 1 |
| 2 | 7.9 | 6.3 | 1766 | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 2 |
| 3 | 8.6 | 6.3 | 1056 | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 3 |
| 4 | 8.6 | 6.3 | 1907 | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 4 |
| 5 | 7.3 | 6.3 | 1625 | | <2 | 98 | .23 | | | | <2 | 97 | .23 | | | 0.8 | | | | | | | | | | | | 5 Infl PH 6.9 |
| 6 | 8.1 | 6.3 | 1470 | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Rain 1/10" | 6 |
| 7 | 6.8 | 6.3 | 1702 | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 7 |
| 8 | 6.6 | 6.3 | 1531 | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 8 |
| 9 | 6.7 | 6.4 | 973 | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add ②/Rain 3/20" | 9 |
| 10 | 5.5 | 6.4 | 731 | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Rain 3/10" | 10 |
| 11 | 7.4 | 6.3 | 1342 | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add ① | 11 |
| 12 | 6.3 | 6.3 | 782 | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 12 |
| 13 | 6.2 | 6.3 | 1275 | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 13 |
| 14 | 6.6 | 6.2 | 840 | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add ① | 14 |
| 15 | 5.9 | 6.3 | 807 | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add ② / Rain 1/20" | 15 |
| 16 | 6.8 | 6.3 | 726 | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add ③ | 16 |
| 17 | 6.6 | 6.2 | 737 | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add ③ | 17 |
| 18 | 9.2 | 6.1 | 459 | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 18 Infl PH 6.9 |
| 19 | 8.4 | 6.2 | 448 | | | | | | | | | | | | | 1.1 | | 83 | | | | | | | | | | 19 |
| 20 | 7.6 | 6.2 | 335 | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 20 |
| 21 | 8.7 | 6.2 | 579 | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 21 |
| 22 | 8.5 | 6.2 | 572 | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 22 |
| 23 | 8.0 | 6.2 | 423 | | | | | | | | | | | | | 0.8 | | | | | | | | | | | Rain 2/10" | 23 |
| 24 | 9.4 | 6.2 | 376 | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add ① / Rain 1/2" | 24 New Clz meter |
| 25 | 8.3 | 6.2 | 542 | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add ③ / Rain 7/10" | 25 |
| 26 | 7.5 | 6.2 | 378 | | | | | | | | | | | | | 2.2 | | | | | | | | | | | Rain 5/20" | 26 |
| 27 | 7.9 | 6.2 | 362 | | | | | | | | | | | | | 1.7 | | | | | | | | | | | Rain 1/20" | 27 |
| 28 | 8.8 | 6.2 | 340 | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | 28 |
| 29 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 29 |
| 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

Attachment V
August 18-19, 2010 EQC meeting

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Page 2 of 3

Facility Name: Cedarwood MHP | Phone Number: 360-254-7131 | Month/Year: 3/2009
DEQ Permit No.: 75541 - file# | DEQ File No./Facility ID: 102520 | EPA Reference No.: OR0031143
Plant Type: Recirc. gravel | County: Columbia | Population Served: 150+

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print): M Dalton | Certification No. & Grade: 10621
Treatment Sys. Class ____ Principal Operator Name (print): M Dalton | Certification No. & Grade: 10621

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X Authorized Signature | Name (Print) | Date: 4/18/09

RECEIVED APR 20 2009 DEPT OF ENVIRONMENTAL QUALITY NW REGIONAL QUALITY

hello LWC

## INFLUENT

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD Concentration mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | 6.9 | | 110 | | | 116 | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | 6.9 | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | | 6.8 | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

## EFFLUENT (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM E.coli MPN/MF CFU/100 ml | COLIFORM Fecal MPN/MF CFU/100 ml | COLIFORM Total MPN/MF CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | 9.1 | 6.2 | 522 | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | Rain 1/20" | 1 |
| 2 | | | | 9.7 | 6.2 | 409 | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | R 2/10" | 2 |
| 3 | | | | 9.1 | 6.2 | 258 | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | R 3/10" | 3 |
| 4 | | | | 10.0 | 6.2 | 46 | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | Flush Meter | 4 |
| 5 | | 6.9 | | 8.7 | 6.2 | 554 | 12 | 798 | .24 | | | 7 | 98 | .23 | | | 2 | | 0.5 | | | | | | | | | | | | Add ① / R 3/20" | 5 |
| 6 | | | | 8.8 | 6.2 | 342 | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | | 6 |
| 7 | | | | 7.3 | 6.2 | 51 | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | R 2/10" | 7 |
| 8 | | | | 6.8 | 6.2 | 193 | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | R 3/10" | 8 |
| 9 | | | | 6.6 | 6.3 | 212 | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | Add ② / R 1/2" | 9 |
| 10 | | | | 7.3 | 6.2 | 63 | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | R 1/10" | 10 |
| 11 | | | | 7.9 | 6.2 | 55 | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | | 11 |
| 12 | | 6.9 | | 8.0 | 6.2 | 49 | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | | 12 |
| 13 | | | | 9.2 | 6.3 | 176 | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | Add ② / | 13 |
| 14 | | | | 7.9 | 6.2 | 2 | | | | | | | | | | | | | 1.4 | | | <1 | | | | | | | | | R 3/10" | 14 |
| 15 | | | | 8.6 | 6.4 | 34 | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | R 1" | 15 |
| 16 | | | | 8.4 | 6.2 | 167 | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | R 3/10" | 16 |
| 17 | | | | 9.2 | 6.3 | 97 | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | Add ① / R 3/10" | 17 |
| 18 | | | | 11.2 | 6.2 | 77 | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | Flush Meter | 18 |
| 19 | | | | 11.1 | 6.2 | 38 | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | R 1/10" | 19 |
| 20 | | | | 10.5 | 6.3 | 52 | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | Add ① / R 1/20" | 20 |
| 21 | | | | 9.8 | 6.3 | 139 | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | | 21 |
| 22 | | | | 8.9 | 6.3 | 6 | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | Flush Meter | 22 |
| 23 | | | | 7.5 | 6.3 | 29 | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | Add ① / R 3/10" | 23 |
| 24 | | | | 9.6 | 6.3 | 127 | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | R 1/10" | 24 |
| 25 | | | | 9.4 | 6.3 | 396 | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | Add ① / R 2/10" | 25 |
| 26 | | 6.8 | | 10.8 | 6.3 | 431 | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | | 26 |
| 27 | | | | 9.9 | 6.4 | 287 | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | R 1/20 | 27 |
| 28 | | | | 9.0 | 6.3 | 416 | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | R 1/2" | 28 |
| 29 | | | | 10.1 | 6.3 | 367 | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | R 1/10" | 29 |
| 30 | | | | 9.8 | 6.4 | 498 | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | | 30 |
| 31 | | | | 9.0 | 6.3 | 412 | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | Add ② / R 3/10" | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

Meter plugged

Flush meter

Flush meter

Attachment V
August 18-19, 2010 EQC meeting


# Discharge Monitoring Report - Oregon Department of Environmental Quality

RECEIVED
MAY 18 2009
DEPT OF ENVIRONMENTAL QUALITY
N.W. REGION WATER QUALITY

Facility Name: River Wood MHP | Phone Number: 360-254-7181 | Month/Year: April 2009
DEQ Permit No.: 75541 ← File # | DEQ File No./Facility ID: 102520 ← permit | EPA Reference No.: OR0033114-3
Plant Type: Re-Circulating Gravel | County: Columbia | Population Served: 150+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X ✓ Authorized Signature — 5/16/09 Date — ✓LWC Name (Print)

## Operator Certification

Collection Sys. Class ____ Principal Operator Name (print): MAdam — Certification No. & Grade: 10621
Treatment Sys. Class ____ Principal Operator Name (print): MAdam — Certification No. & Grade: 10622

| Date | INFLUENT °F/°C Temperature | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT °F/°C Temperature | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM °F/°C Temperature | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | 8.5 | 6.4 | 260 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | R 4/10" | 1 |
| 2 | | 6.8 | | 115 | | | 120 | | 9.9 | 6.4 | 248 | | 3 | 97.3 | 3.82 | | | | 4 | 96.7 | 1.5 | | | | | | 1.1 | | | | | | | | 0.41 | | | R 1/2" | 2 |
| 3 | | | | | | | | | 10.1 | 6.4 | 266 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | Add ① | 3 |
| 4 | | | | | | | | | 11.4 | 6.3 | 258 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | 4 |
| 5 | | | | | | | | | 13.3 | 6.3 | 68 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | 5 |
| 6 | | | | | | | | | 14.6 | 6.3 | 241 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | Add ① | 6 |
| 7 | | | | | | | | | 14.7 | 6.3 | 191 | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | 7 |
| 8 | | | | | | | | | 12.6 | 6.3 | 58 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | 8 |
| 9 | | 6.9 | | | | | | | 12.1 | 6.3 | 140 | | | | | | | | | | | | | | | | 0.7 | | | | <1 | | | | | | R 7/10" | 9 |
| 10 | | | | | | | | | 12.4 | 6.3 | 0 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add ① / R 3/10" | 10 |
| 11 | | | | | | | | | 12.2 | 6.3 | — | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | R 1/10" | 11 |
| 12 | | | | | | | | | 11.5 | 6.3 | 4 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | R 1/2" | 12 |
| 13 | | | | | | | | | 10.7 | 6.3 | 20 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | R 1/2" | 13 |
| 14 | | | | | | | | | 11.1 | 6.3 | 0 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | R 1/20" | 14 |
| 15 | | | | | | | | | 11.6 | 6.3 | 1 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 15 |
| 16 | | | | | | | | | 12.8 | 6.3 | 52 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add ② | 16 |
| 17 | | | | | | | | | 12.4 | 6.3 | 1445 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | R 1/2" | 17 |
| 18 | | | | | | | | | 12.5 | 6.3 | 605 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | 18 |
| 19 | | | | | | | | | 14.7 | 6.3 | 667 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | 19 |
| 20 | | | | | | | | | 16.3 | 6.3 | 716 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | 20 |
| 21 | | | | | | | | | 16.7 | 6.2 | 696 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 21 |
| 22 | | 6.8 | | | | | | | 13.3 | 6.2 | 499 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 22 |
| 23 | | | | | | | | | 13.4 | 6.2 | 324 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Add ② | 23 |
| 24 | | | | | | | | | 13.2 | 6.2 | 958 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 24 |
| 25 | | | | | | | | | 12.4 | 6.2 | 549 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add ② | 25 |
| 26 | | | | | | | | | 13.4 | 6.2 | 961 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Add ② | 26 |
| 27 | | | | | | | | | 14.8 | 6.3 | 1038 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | R 1/20" | 27 |
| 28 | | | | | | | | | 14.3 | 6.3 | 1611 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | 28 |
| 29 | | | | | | | | | 13.9 | 6.3 | 919 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | R 3/10" | 29 |
| 30 | | | | | | | | | 14.2 | 6.3 | 902 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

Dead Cat IN Cl2 Reservoir
Infl. PH 6.9
Flush Meter
Flush meter
Flush meter
Flush meter
Flush meter
Infl. PH 6.8

PUMPED 2000 gallons from recirculation tank 5/14/09 to expose clogged pump & pump working OK now.

Item M000338

# Discharge Monitoring Report - Oregon Department of Environmental Quality

RECEIVED
JUN 22 2009
DEPT OF ENVIRONMENTAL QUALITY
N.W. REGION WATER QUALITY

| | | | | | |
|---|---|---|---|---|---|
| Facility Name | Riverwood MHP | Phone Number | 360-254-7131 | Month/Year | May 2009 |
| DEQ Permit No. | 75541 | DEQ File No./Facility ID | 102520 | EPA Reference No. | OR0031147 |
| Plant Type | Rec/Rec. Gravel | County | Columbia | Population Served | 150+ |

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

x _____ Authorized Signature — 6/21/09 Date

Megan E. Morgan Name (Print)

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print) Megan — Certification No. & Grade 10621

Treatment Sys. Class ____ Principal Operator Name (print) Megan — Certification No. & Grade 10621

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | 7.5 | | | | | | |
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| 20 | | | | | | | | |
| 21 | | 130 | | | | 52 | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
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| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number – e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Amnonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 15.8 | 6.4 | 1829 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | Rain 1/2" | 1 |
| 2 | 14.5 | 6.4 | 1355 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | Rain 1/2" | 2 |
| 3 | 13.8 | 6.5 | 1510 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Rain 1/10" | 3 |
| 4 | 13.0 | 6.5 | 1188 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add(2)/Rain 1/2" | 4 |
| 5 | 14.7 | 6.5 | 957 | | | | | | | | | | | | | | | | 6.3 | | | | | | | | | | | Rain 4/10" | 5 |
| 6 | 14.5 | 6.6 | 1808 | | | | | | | | | | | | | | | | — | | | | | | | | | | | Flooded Rain 7/10" | 6 |
| 7 | 14.3 | 6.6 | 1580 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | Rain 3/10" | 7 |
| 8 | 15.7 | 6.5 | 1217 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | Add(3) | 8 |
| 9 | 15.7 | 6.5 | 990 | | | | | | | | | | | | | | | | 5.4 | | | | | | | | | | | Add(3) | 9 |
| 10 | 15.8 | 6.4 | 1577 | | | | | | | | | | | | | | | | 2.7 | | | | | | | | | | | | 10 |
| 11 | 13.1 | 6.6 | 1108 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | Rain 1/10" | 11 |
| 12 | 14.6 | 6.7 | 820 | | | | | | | | | | | | | | | | — | | | | | | | | | | | Add(2) R = 1/2" | 12 |
| 13 | 12.4 | 6.7 | 643 | | | | | | | | | | | | | | | | — | | | | | | | | | | | Add(3) R = 3/10" | 13 |
| 14 | 14.2 | 6.7 | 181 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Remove 2,000 gal / R = 6/10" | 14 |
| 15 | 15.1 | 6.4 | 1017 | | | | | | | | | | | | | | | | 0.1 | | | | | | | | | | | Grey cloudiness | 15 |
| 16 | 19.1 | 5.9 | 3 | | | | | | | | | | | | | | | | 3.4 | | | | | | | | | | | | 16 |
| 17 | 17.4 | 6.0 | 2 | | | | | | | | | | | | | | | | 2.6 | | | | | | | | | | | | 17 |
| 18 | 15.9 | 6.0 | 1 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | Blue Light - No Flow | 18 |
| 19 | 14.0 | 6.1 | — | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | R = 6/10" | 19 |
| 20 | 15.4 | 6.1 | 1 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | Blue light/R=1/20" | 20 |
| 21 | 17.5 | 6.0 | — | | | | <25 | 48 | | | 790 | | | | | | | | 0.3 | | | <1 | | | | | | | | Add(1)/Blue light | 21 |
| 22 | 17.1 | 6.0 | 5 | | | | | | | | | | | | | | | | 1.7 | | | | | | | | | | | | 22 |
| 23 | 16.6 | 6.0 | 10 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | Flush meter | 23 |
| 24 | 16.2 | 6.0 | — | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | Flush meter | 24 |
| 25 | 16.5 | 6.0 | — | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Blue Light | 25 |
| 26 | 15.7 | 6.0 | — | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add(1)/Flush meter | 26 |
| 27 | 17.7 | 6.0 | — | | | | | | | | | | | | | | | | 2.1 | | | | | | | | | | | | 27 |
| 28 | 19.9 | 6.0 | — | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 28 |
| 29 | 19.8 | 6.1 | 192 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | Add(1) | 29 |
| 30 | 20.1 | 6.0 | 570 | | | | | | | | | | | | | | | | 1.9 | | | | | | | | | | | | 30 |
| 31 | 18.7 | 6.0 | 625 | | | | | | | | | | | | | | | | 1.7 | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

May 6 Infl. ph 7.1 @5pm
May 22 Infl PH 6.9 @ 6pm

Flooding PH meter Test w/7.00 buffer

clz Reservoir Flooded x 2 feet

clz Reservoir Flooded and has been Cloudy

Grey cloudiness clean filters #3 clean ④ Pumps

Flush meter

Flush meter

Recirculate. Filter only

PUMPED 2,000 gallons from Recirc. tank to May 14, 2009

PUMPED 2000 gallons from

IN STATISTICAL ANALYSIS, DO NOT USE ANY pH readings of 0.75 are fill in numbers.

Attachment V
August 18-19, 2010 EQC meeting
Page 2 of 3

# Discharge Monitoring Report - Oregon Department of Environmental Quality

√ LWC

Facility Name: Rock Rc. Gravel MHP | Phone Number: 360-254-7131 | Month/Year: June 2009
DEQ Permit No.: 75541 | DEQ File No./Facility ID: 102520 | EPA Reference No.: OR0031143
Plant Type: Rock Rc. Gravel | County: Columbia | Population Served: 150+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature

7/18/09 Date

MAGAR MAGAN Name (Print)

## Operator Certification

Collection Sys. Class: I | Principal Operator Name (print): Magar √ | Certification No. & Grade: 10621
Treatment Sys. Class: I | Principal Operator Name (print): Magar √ | Certification No. & Grade: 10621

RC=Recirc. Only Blue Lagoon

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD Concentration mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN MF E.coli CFU/100 ml | COLIFORM MPN MF Fecal | COLIFORM MPN MF Total | RECEIVING STREAM Amnonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | 20.7 | 6.0 | 22 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | Recirculating only | 1 |
| 2 | | | | | | | | | 18.5 | 6.0 | 6 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | RC | 2 |
| 3 | | | | | | | | | 20.3 | 6.0 | 4 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | RC | 3 |
| 4 | | | | 7.4 | | | 30 | | 19.5 | 6.0 | 30 | | <2 | 92% | | <2 | 94% | | | | | | | | | | 0.5 | | | <1 | | | | 0.6 | | | | | 1120①/RC/R=3/10" | 4 |
| 5 | | | | | | | | | 18.4 | 6.0 | 426 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | R=3/10" | 5 |
| 6 | | | | | | | | | 17.5 | 6.0 | 1092 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | R=1/10" | 6 |
| 7 | | | | | | | | | 16.7 | 6.0 | 1543 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | R=1/10" | 7 |
| 8 | | | | | | | | | 17.9 | 6.0 | 508 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 8 |
| 9 | | | | | | | | | 20.1 | 6.1 | 892 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | 9 |
| 10 | | | | | | | | | 19.1 | 6.1 | 1213 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | 10 |
| 11 | | | | | | | | | 18.6 | 6.0 | 1361 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | Add① | 11 |
| 12 | | | | | | | | | 18.4 | 6.0 | 1825 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | Add① | 12 |
| 13 | | | | | | | | | 17.9 | 6.0 | 1185 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | 13 |
| 14 | 6.9 | | | | | | | | 18.3 | 6.0 | 1976 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add① | 14 |
| 15 | ~~6.9~~ | | | | | | | | 18.2 | 6.0 | 3343 | | | | | | | | | | | | | | | | 2.0 | | | | | | | | | | | 15 |
| 16 | | | | | | | | | 19.1 | 6.0 | 1281 | | | | | | | | | | | | | | | | 2.0 | | | | | | | | | | | 16 |
| 17 | | | | | | | | | 19.1 | 6.0 | 2453 | | | | | | | | | | | | | | | | 1.8 | | | | | | | | | | | 17 |
| 18 | | | | | | | | | 18.8 | 6.0 | 2502 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | 18 |
| 19 | | | | | | | | | 18.9 | 6.1 | 2969 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | R=6/10 | 19 |
| 20 | | | | | | | | | 16.6 | 6.0 | 3200 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | RC=1/10" | 20 |
| 21 | | | | | | | | | 17.3 | 6.1 | 2270 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | Add① | 21 |
| 22 | | | | | | | | | 17.9 | 6.1 | 2207 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | 22 |
| 23 | TV | | | | | | | | 20.5 | 6.1 | 1350 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | 23 |
| 24 | | | | | | | | | 19.2 | 6.1 | 3367 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 24 |
| 25 | | | | | | | | | 17.9 | 6.1 | 2731 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | Add① | 25 |
| 26 | | | | | | | | | 18.5 | 6.1 | 3121 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | 26 |
| 27 | | | | | | | | | 18.9 | 6.1 | 2390 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | 27 |
| 28 | | | | | | | | | 19.4 | 6.1 | 2726 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 28 |
| 29 | | | | | | | | | 18.7 | 6.1 | 3415 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | 29 |
| 30 | | | | | | | | | 18.5 | 6.1 | 2983 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Add① | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

Inf1 PH 6.9 @ 6pm

Inf1 PH 7.0 @ 7:45pm

RECEIVED
JUL 20 2009
DEQ OF ENVIRONMENTAL QUALITY
NORTHWEST REGION WATER QUALITY

The numbers for BOD & TSS in flow are low
But in July BOD was 100 & TSS was 50

# Discharge Monitoring Report - Oregon Department of Environmental Quality

VLWC

cility Name: Riverwood MHP | Phone Number: 360-254-7131 | Month/Year: July 2009
EQ Permit No.: 75541 | DEQ File No./Facility ID: 102520 | EPA Reference No.: OR0031147-3
ant Type: Recirc gravel | County: Columbia | Population Served: 150+

Operator Certification
llection Sys. Class ____ Principal Operator Name (print): MAGAR | Certification No. & Grade: 10612
eatment Sys. Class ____ Principal Operator Name (print): | Certification No. & Grade: 10612

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature

Magar Mager Name (Print)

AUG 21 2009

BL = BLMR light on

## INFLUENT

| Date | Temperature °F | pH S.U. | Flow MGD | CBOD BOD Grab Concentration mg/L | CBOD BOD Grab Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Grab Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | 6.8 | | 100 | | | 50 | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | 6.9 | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | 6.9 | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | 6.9 | | | | | | |
| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | 6.9 | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| ILY MINIMUM | | | | | | | | |
| Y MAXIMUM | | | | | | | | |
| Y. AVG. MAX. | | | | | | | | |
| THLY AVG. | | | | | | | | |
| AILY LIMITS | | | | | | | | |
| KLY LIMITS | | | | | | | | |
| THLY LIMITS | | | | | | | | |

## EFFLUENT (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Grab Removal % | BOD Grab Loading lbs. | CBOD Grab Concentration mg/L | CBOD Grab Removal % | CBOD Grab Loading lbs. | TSS Grab Concentration mg/L | TSS Grab Removal % | TSS Grab Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM E.coli MPN/MF CFU/100 ml | COLIFORM Fecal MPN/MF CFU/100 ml | COLIFORM Total MPN/MF CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °C/°F | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 19.9 | 6.0 | 2394 | | | | | | | | | | | | | | | | 1.7 | | | | | | | | | | | |
| 2 | 21.3 | 6.1 | 2619 | | <7 | 98% | | | | | <7 | 98% | | | | | | | 1.6 | | # | <1 | | | | | | | | Infl PH6.8@ 2197A |
| 3 | 21.3 | 6.1 | 1944 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | |
| 4 | 20.6 | 6.1 | 2312 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | |
| 5 | 18.7 | 6.1 | 2483 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | |
| 6 | 17.4 | 6.2 | 1127 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add① |
| 7 | 17.5 | 6.2 | 2022 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | |
| 8 | 18.2 | 6.2 | 1793 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | |
| 9 | 20.6 | 6.2 | 1836 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Infl PH6.8@ 7:18P |
| 10 | 22.0 | 6.2 | 1961 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add① |
| 11 | 18.8 | 6.2 | 2171 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | |
| 12 | 18.2 | 6.2 | 2222 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | R=1/10" |
| 13 | 17.6 | 6.3 | 1345 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | |
| 14 | 20.1 | 6.2 | 1849 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | |
| 15 | 21.9 | 6.2 | 2129 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add① |
| 16 | 22.1 | 6.3 | 2207 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | Infl. PH6.9@ 7:57P |
| 17 | 21.6 | 6.3 | 1984 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | |
| 18 | 22.2 | 6.3 | 2704 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | |
| 19 | 21.5 | 6.2 | 1462 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Blue Light |
| 20 | 23.4 | 6.2 | 2090 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add① |
| 21 | 20.5 | 6.2 | 1994 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | |
| 22 | 21.4 | 6.2 | 1961 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | |
| 23 | 20.2 | 6.2 | 2239 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | BL/Infl PH6.9@9:54A |
| 24 | 22.2 | 6.2 | 1427 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | BL |
| 25 | 23.2 | 6.2 | 1915 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | BL |
| 26 | 24.5 | 6.2 | 1650 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | BL |
| 27 | 25.3 | 6.3 | 1907 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add① BL |
| 28 | 25.7 | 6.3 | 1330 | | | | | | | | | | | | | | | | 1.8 | | | | | | | | | | | |
| 29 | 24.6 | 6.3 | 1489 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | |
| 30 | 23.6 | 6.3 | 3112 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | BL/Infl PH6.9@ 7:40P |
| 31 | 23.1 | 6.3 | 723 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | BL |
| TOTAL | | | 60900 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVERAGE | | | 1065 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Attachment V
August 18-19, 2010 EQC meeting
Page 2 of 3

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Blueswood MHP — Phone Number: 360-254-7131 — Month/Year: Aug. 2009
75541 — DEQ File No./Facility ID: 102520 — EPA Reference No.: OR0031143
Recirculating Gravel — County: Columbia — Population Served: 150 +

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] — Authorized Signature — SEP 23 2009 NORTHWEST REGION — Date: 9/20/09

MAGAR MAGAR — Name (Print)

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print): MAGAR — Certification No. & Grade: 10621
Treatment Sys. Class ____ Principal Operator Name (print): MAGAR — Certification No. & Grade: 10621

BL = Blue light Recirculation only
R = Rain

| Date | INFLUENT Temperature °F | Temperature °C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT (identify outfall number -- e.g. 001, 002, 003): Temperature °F | Temperature °C | X | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Removal % | BOD Loading lbs. | CBOD Grab Concentration mg/L | CBOD Removal % | CBOD Loading lbs. | TSS Grab Concentration mg/L | TSS Removal % | TSS Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | 22.8 | | | 6.3 | .799 | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 1 BL |
| 2 | | | | | | | | | | 21.7 | | | 6.3 | 1506 | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add① | 2 |
| 3 | | | | | | | | | | 21.5 | | | 6.4 | 1436 | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add① | 3 clean filter #1 |
| 4 | | | | | | | | | | 21.5 | | | 6.3 | 1358 | | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | 4 clean filters 2&3 |
| 5 | | | | | | | | | | 21.3 | | | 6.3 | 1893 | | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 5 |
| 6 | | 6-A | | | 100 | | | 44 | | 19.7 | | | 6.3 | 834 | | <2 | 79% | | <2 | 79% | | | | | | | | | | 1.1 | | | <1 | | | | | | | | | 6 Infl PH 6.9 @ 3:30 pm |
| 7 | | | | | | | | | | 18.2 | | | 6.3 | 1817 | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add① | 7 |
| 8 | | | | | ~~100~~ | | | ~~44~~ | | 19.7 | | | 6.3 | 1743 | | <2 | | | <2 | | | | | | | | | | | | 1.6 | | | | | | | | | | | | 8 |
| 9 | | | | | | | | | | 20.1 | | | 6.3 | 1376 | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 9 |
| 10 | | | | | | | | | | 21.4 | | | 6.4 | 2180 | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 10 |
| 11 | | | | | | | | | | 19.6 | | | 6.4 | 1017 | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 3/10" | 11 |
| 12 | | | | | | | | | | 20.6 | | | 6.3 | 1602 | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | R 1" | 12 |
| 13 | | 6-A | | | | | | | | 18.5 | | | 6.3 | 1808 | | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | R 3/10" | 13 Infl PH 6.7 @ 9:30 pm |
| 14 | | | | | | | | | | 18.7 | | | 6.3 | 1670 | | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | R 1/10" | 14 |
| 15 | | | | | | | | | | 19.4 | | | 6.3 | 1654 | | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 15 |
| 16 | | | | | | | | | | 19.5 | | | 6.3 | 2186 | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 16 |
| 17 | | | | | | | | | | 22.2 | | | 6.4 | 1236 | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 17 |
| 18 | | | | | | | | | | 22.9 | | | 6.4 | 1965 | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 18 |
| 19 | | | | | | | | | | 24.3 | | | 6.4 | 2381 | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | 19 |
| 20 | | 7.1-B | | | | | | | | 20.9 | | | 6.4 | 1617 | | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | Add① | 20 Infl PH 7.0 @ 7:45 |
| 21 | | | | | | | | | | 20.5 | | | 6.4 | 2414 | | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 21 |
| 22 | | | | | | | | | | 20.9 | | | 6.4 | 1419 | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 22 |
| 23 | | | | | | | | | | 19.8 | | | 6.4 | 1159 | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 23 |
| 24 | | | | | | | | | | 21.3 | | | 6.4 | 2981 | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add① | 24 |
| 25 | | | | | | | | | | 19.6 | | | 6.5 | 2585 | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 25 |
| 26 | | | | | | | | | | 20.4 | | | 6.4 | 1502 | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 26 |
| 27 | | 6-A | | | | | | | | 22.6 | | | 6.4 | 2401 | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 27 Infl PH 6.9 @ 6:45 pm |
| 28 | | | | | | | | | | 19.6 | | | 6.4 | 1890 | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | | 28 |
| 29 | | | | | | | | | | 20.2 | | | 6.4 | 1602 | | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | Add① | 29 |
| 30 | | | | | | | | | | 21.5 | | | 6.4 | 2838 | | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 30 |
| 31 | | | | | | | | | | 20.0 | | | 6.4 | 1949 | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

√ LWC

OCT 19 2009

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Riverwood MHP | Phone Number: 360-254-7131 | Month/Year: Sept. 09
DEQ Permit No.: 75541 | DEQ File No./Facility ID: 102520 | EPA Reference No.: OR0031149-3
Plant Type: Recirc. Gravel | County: Columbia | Population Served: 150+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature — 10/18/09 Date

MAGAN MAGAN Name (Print)

Operator Certification

Collection Sys. Class ____ Principal Operator Name (print): MAGAN — Certification No. & Grade: 10621
Treatment Sys. Class ____ Principal Operator Name (print): MAGAN — Certification No. & Grade: 10621

INFLUENT

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | 6.7 | | 140 | | | 60 | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | 6.8 | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | 6.9 | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | 6.7 | | | | | | |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

EFFLUENT (identify outfall number – e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorus mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U. | COLIFORM E.coli MPN/MF CFU/100 ml | COLIFORM Fecal MPN/MF CFU/100 ml | COLIFORM Total MPN/MF CFU/100 ml | RECEIVING STREAM Amnonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 18.5 | 6.5 | 3473 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 1 |
| 2 | 20.9 | 6.5 | 2774 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add① | 2 |
| 3 | 19.7 | 6.5 | 2956 | | <2.798 | | | | | | <2.791 | | | | | | | | 0.9 | | | | <1 | | | | | | | | 3 |
| 4 | 17.6 | 6.5 | 2753 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 4 |
| 5 | 19.0 | 6.5 | 2331 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R ½" | 5 |
| 6 | 18.7 | 6.5 | 3112 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | Add① / R ⅝" | 6 |
| 7 | 18.9 | 6.5 | 6221 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R ⅜" | 7 |
| 8 | 19.0 | 6.5 | 428 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add① | 8 |
| 9 | 19.4 | 6.5 | 3068 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 9 |
| 10 | 20.6 | 6.5 | 3216 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 10 |
| 11 | 21.5 | 6.5 | 2693 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 11 |
| 12 | 20.4 | 6.5 | 2776 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 12 |
| 13 | 19.3 | 6.5 | 2785 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 13 |
| 14 | 20.1 | 6.5 | 2308 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add① | 14 |
| 15 | 21.4 | 6.5 | 2009 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Add① | 15 |
| 16 | 22.4 | 6.4 | 2123 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | R ⅜" | 16 |
| 17 | 18.6 | 6.5 | 2231 | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | | 17 |
| 18 | 17.1 | 6.5 | 4134 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | R ⅓" | 18 |
| 19 | 18.9 | 6.6 | 1051 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | R ½" | 19 |
| 20 | 18.7 | 6.5 | 2797 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add① / R ½" | 20 |
| 21 | 18.3 | 6.5 | 2666 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | | 21 |
| 22 | 18.7 | 6.5 | 3648 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add① | 22 |
| 23 | 19.3 | 6.5 | 2541 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | | 23 |
| 24 | 18.6 | 6.5 | 1692 | | | | | | | | | | | | | | | | 1.3 | | | | | | | 0.6* | | | | | | 24 |
| 25 | 18.6 | 6.5 | 3057 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 25 |
| 26 | 18.9 | 6.5 | 2318 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 26 |
| 27 | 18.5 | 6.5 | 1619 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 27 |
| 28 | 17.6 | 6.5 | 2781 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R ⅘" | 28 |
| 29 | 16.1 | 6.5 | 2686 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add② / R ½" | 29 |
| 30 | 15.5 | 6.5 | 3098 | | | | | | | | | | | | | | | | 1.8 | | | | | | | | | | | R 1/10" | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

2 Dead Rats in/INFL PH 6.7

INFL PH 6.8

INFL PH 6.9

INFL PH 6.7

Rain PH 6.3

* It may be our samples are not being properly preserved before they go to lab.

VLWC

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Riverwood MHP | Phone Number: 360-254-7131 | Month/Year: Oct/2009
DEQ Permit No.: 75541 | DEQ File No./Facility ID: 102520 | EPA Reference No.: OR0031147-3
Plant Type: Recirc. Gravel | County: Columbia | Population Served: 150+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature — NOV 17 2009 Date

MACAR MAGAÑA Name (Print)

**Operator Certification**

Collection Sys. Class: ____ Principal Operator Name (print): MACAR MAGAÑA Certification No. & Grade: 10622
Treatment Sys. Class: ____ Principal Operator Name (print): _____ Certification No. & Grade: 10623

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | 62 | 6.7 | | 110 | | | 90 | |
| 8 | | 6.9 | | | | | | |
| 15 | | 6.8 | | | | | | |
| 22 | | 6.8 | | | | | | |
| 29 | | 6.9 | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Amnonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | <2 | 98% | | | | | <2 | 97.8% | | | | | | | 0.9 | | | | | | | | | | | R 1/20" | 1 |
| 2 | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 2 |
| 3 | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 1/10" | 3 |
| 4 | | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add① | 4 |
| 5 | | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 5 |
| 6 | | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add① | 6 |
| 7 | | | | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | | 7 |
| 8 | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 8 |
| 9 | | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 9 |
| 10 | | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 10 |
| 11 | | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add① | 11 |
| 12 | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 12 |
| 13 | | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 1/20" | 13 |
| 14 | | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add② R 1/10" | 14 |
| 15 | | | | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | R 1/10" | 15 |
| 16 | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | R 2/10" | 16 |
| 17 | | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | R 1/10" | 17 |
| 18 | | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add② R 1/10" | 18 |
| 19 | | | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | | 19 |
| 20 | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 2/10" | 20 |
| 21 | | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add① R 1/10" | 21 |
| 22 | | | | | | | | | | | | | | | | | | | 1.0 | | | | 1.6 K 1.7 Tot | | | | | | | R 3/10" | 22 |
| 23 | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 4/10" | 23 |
| 24 | | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add① | 24 |
| 25 | | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | R 3/10" | 25 |
| 26 | | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add② R 4/10" | 26 |
| 27 | | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 5/20" | 27 |
| 28 | | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add① R 1/20" | 28 |
| 29 | | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 4/10" | 29 |
| 30 | | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | R 1/10" | 30 |
| 31 | | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add① R 3/10" | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

INFL PH 6.8 (row 1)
INFL PH 6.9 (row 8)
INFL PH 6.8 (row 15)
INFL PH 6.8 (row 22)
INFL PH 6.9 (row 29)

# Discharge Monitori. g Report - Oregon Department of Environmental Quality

VLnk

DEC/2009

Facility Name: Riverwood MHP, Rainier | Phone Number: 360-314-4444 | Month/Year: DEC/2009
DEQ Permit No.: 75541 | DEQ File No./Facility ID: 102 520 | EPA Reference No.: OR0031147-3
Plant Type: Recirculating Gravel | County: Columbia | Population Served: 150 +

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X JAN 15 2010 — Authorized Signature — Date 1/14/10

MAGAN — Name (Print)

**Operator Certification**

Collection Sys. Class 1 — Principal Operator Name (print): MAGAN — Certification No. & Grade: 10621
Treatment Sys. Class 1 — Principal Operator Name (print): MAGAN — Certification No. & Grade: 10622

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | 6.9 | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | 130 | | | 160 | |
| 4 | | | | | | | | |
| 5 | | 6.9 | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | 6.9 | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | 6.8 | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | 6.9 | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | 6.9 | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | | 6.9 | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | 6.5 | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003): °F / °C X

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Amnonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 10.1 | 6.4 | 2494 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 1 |
| 2 | 8.7 | 6.8 | 2662 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 2 |
| 3 | 8.7 | 6.8 | 2275 | | <2 | 98.4 | | | | | 3 | 98.1 | | | | | | | 0.6 | | | <1 | | | | | | | | | 3 |
| 4 | 8.3 | 6.7 | 2660 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 4 |
| 5 | 7.4 | 6.7 | 2836 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add ② | 5 |
| 6 | 6.3 | 6.6 | 2144 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 6 |
| 7 | 5.1 | 6.8 | 2875 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 7 Recirc. High/Ice |
| 8 | 4.0 | 6.8 | 2027 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 8 Recirc. High/Ice |
| 9 | 3.7 | 6.8 | 2469 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 9 Recirc. High/Ice |
| 10 | 4.4 | 6.8 | 2008 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add ② | 10 Recirc. High/Ice |
| 11 | 5.4 | 6.8 | 2809 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 11 Recirc. High/Ice |
| 12 | 11.4 | 6.7 | 2072 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 12 Recirc. High |
| 13 | 8.9 | 6.8 | 2474 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 13 Recirc. High |
| 14 | 8.4 | 6.5 | 2587 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add ② / R 4/10" | 14 Recirc. High |
| 15 | 8.9 | 6.5 | 2862 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 1 3/10" | 15 Recirc. High |
| 16 | 9.4 | 6.8 | 2115 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add ② / R 5/10" | 16 |
| 17 | 9.5 | 6.8 | 224 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 17 |
| 18 | 9.7 | 6.8 | 148 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add ① | 18 |
| 19 | 9.6 | 6.8 | 865 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | R 1/10" | 19 |
| 20 | 10.6 | 6.8 | 1150 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | R 5/20" | 20 |
| 21 | 8.9 | 6.8 | 976 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add ② / R 1/2" | 21 |
| 22 | 7.7 | 6.8 | 1154 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 1/20" | 22 |
| 23 | 8.1 | 6.8 | 1087 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 23 |
| 24 | 8.3 | 6.7 | 1022 | | | | | | | | | | | | | | | | 0.2 | | | | | | | | | | | Add ② | 24 |
| 25 | 8.7 | 6.7 | 2140 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 25 |
| 26 | 9.0 | 6.8 | 13 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add ① | 26 |
| 27 | 9.1 | 7.0 | 817 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 27 |
| 28 | 8.7 | 6.9 | 554 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 28 |
| 29 | 7.6 | 6.7 | 491 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add ② / SNOW | 29 |
| 30 | 9.0 | 6.8 | 489 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 3/10" | 30 Recirc. |
| 31 | 9.1 | 6.9 | 534 | | | | | | | | | | | | | | | | 0.1 | | | | | | | | | | | Add ③ / R 4/10" | 31 Recirc. |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

VERY HIGH PUMPED 1,700 gallons

No nitrogen ammonia
Item M 000345
SW 1/6/2010

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Riverwood MHP | Phone Number: 360-314-4444 | Month/Year: Nov/2009
DEQ Permit No.: 75541 | DEQ File No./Facility ID: 102520 | EPA Reference No.: OR0031143
Plant Type: Recirc. Gravel | County: Columbia | Population Served: 150+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X _____ Authorized Signature

DEC 15 2009

12/11/09 Date

MAGAN MACRAE Name (Print)

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print): MAGAN MACRAE Certification No. & Grade: 10623

Treatment Sys. Class ____ Principal Operator Name (print): _____ Certification No. & Grade: _____

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | 6.9 | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | 6.9 | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | 6.9 | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | 6.9 | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | 6.9 | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | 6.9 | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | 6.9 | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM E.coli MPN/MF CFU/100 ml | COLIFORM Fecal MPN/MF CFU/100 ml | COLIFORM Total MPN/MF CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 1 |
| 11.6 | 6.5 | 2183 | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | Rain 1/10" | 2 |
| 11.5 | 6.5 | 2448 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 3 |
| 11.9 | 6.5 | 3063 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 4 |
| 12.3 | 6.5 | 2153 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add ③ / Rain 3/10" | 5 |
| 12.5 | 6.5 | 2447 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | R = 1/2" | 6 |
| 11.7 | 6.5 | 2305 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | Add ② / R = 1" | 7 |
| 10.9 | 6.5 | 2864 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | R = 4/10" | 8 |
| 11.1 | 6.5 | 1885 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | Add ① / R = 2/10" | 9 |
| 11.3 | 6.5 | 2946 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | R = 3/10" | 10 |
| 11.6 | 6.5 | 2514 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | R = 4/10" | 11 |
| 11.1 | 6.5 | 2467 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Add ② / R = 3/10" | 12 |
| 10.9 | 6.5 | 2479 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | R = 5/10" | 13 |
| 9.9 | 6.6 | 2895 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R = 1/20" | 14 |
| 10.4 | 6.2 | 2354 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | Add ① / R = 3/10" | 15 |
| 10.7 | 6.3 | 2393 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | R = 3/10" | 16 |
| 12.1 | 6.3 | 2508 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Add ② / R = 1 1/20" | 17 |
| 10.9 | 6.4 | 2293 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | R = 3/10" | 18 |
| 10.5 | 6.4 | 2180 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | R = 1/2" | 19 |
| 11.7 | 6.4 | 2500 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R = 1/2" | 20 |
| 11.2 | 6.4 | 1875 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 21 |
| 11.1 | 6.4 | 30 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add ① / R = 1/2" | 22 |
| 10.7 | 6.4 | 3478 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | R = 6/10" | 23 |
| 10.3 | 6.4 | 4667 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 24 |
| 11.3 | 6.4 | 2618 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R = 1/20" | 25 |
| 11.1 | 6.4 | 2132 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add ① / R = 1/2" | 26 |
| 10.9 | 6.4 | 2882 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | R = 1/2" | 27 |
| 10.4 | 6.4 | 2540 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add ② / R = 1/2" | 28 |
| 11.0 | 6.4 | 2406 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R = 1/20" | 29 |
| 11.2 | 6.4 | 2536 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 30 |
| 10.4 | 6.4 | 2558 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 31 |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

syst. level High
syst. level High
R = 1" Syst Flood
Syst Flood
syst. High
Level High
Flooding
Flooding
Level High
Level High
Level High

# Discharge Monitoring Report - Oregon Department of Environmental Quality

VLWC

Facility Name: Riverwood MHP | Phone Number: 360-314-4444 | Month/Year: JAN/2010
DEQ Permit No.: 75541 | DEQ File No./Facility ID: 102520 | EPA Reference No.: OR0031143
Plant Type: Recirc Gravel | County: Columbia | Population Served: 150+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X [signature] — Authorized Signature — 4/9/2010 Date

MAGAR MAGAR — Name (Print)

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print): MAGAR MAGAR — Certification No. & Grade: 10633
Treatment Sys. Class ____ Principal Operator Name (print): MAGAR MAGAR — Certification No. & Grade: 10622

**INFLUENT**

| Date | Temperature °F | Temperature °C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|---|
| 1 | | | 6.9 | | | | | | |
| 2 | | | | | | | | | |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |
| 5 | | | 6.9 | | | | | | |
| 6 | | | | | | | | | |
| 7 | | | | | | | | | |
| 8 | | | | | | | | | |
| 9 | | | | | | | | | |
| 10 | | | 6.8 | | | | | | |
| 11 | | | | | | | | | |
| 12 | | | | | | | | | |
| 13 | | | | | | | | | |
| 14 | | | 6.9 | | | | | | |
| 15 | | | | | | | | | |
| 16 | | | | | | | | | |
| 17 | | | | | | | | | |
| 18 | | | 7.0 | | | | | | |
| 19 | | | | | | | | | |
| 20 | | | | | | | | | |
| 21 | | | | | 97.5 | | 136 | | |
| 22 | | | | | | | | | |
| 23 | | | 6.9 | | | | | | |
| 24 | | | | | | | | | |
| 25 | | | | | | | | | |
| 26 | | | | | | | | | |
| 27 | | | | | | | | | |
| 28 | | | 6.9 | | | | | | |
| 29 | | | | | | | | | |
| 30 | | | | | | | | | |
| 31 | | | | | | | | | |
| TOTAL | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | | |
| MONTHLY AVG. | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Temperature °F | Temperature °C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 9.4 | | 6.7 | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 7/10" | 1 |
| 9.3 | | 6.7 | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 3/10" | 2 |
| 9.4 | | 6.7 | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 3 |
| 9.1 | | 6.8 | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add(2) R 7/10" | 4 |
| 7.3 | | 6.6 | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | R 6/10" | 5 |
| 9.1 | | 6.5 | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 6 |
| 8.3 | | 6.4 | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 7 |
| 7.8 | | 6.5 | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 3/10" | 8 |
| 8.3 | | 6.5 | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 1/10" | 9 |
| 8.1 | | 6.4 | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add(1) | 10 |
| 8.7 | | 6.4 | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 3/10" | 11 |
| 9.1 | | 6.5 | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add(2) R 4/10" | 12 |
| 9.2 | | 6.4 | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add(2) R 1/2" | 13 |
| 9.1 | | 6.4 | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 3/10" | 14 |
| 9.3 | | 6.5 | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 3/10" | 15 |
| 8.8 | | 6.5 | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add(2) R 3/10" | 16 |
| 9.1 | | 6.4 | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 4/10" | 17 |
| 10.2 | | 6.5 | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 3/10" | 18 |
| 9.4 | | 6.5 | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | Add(1) R 1/10" | 19 |
| 9.0 | | 6.5 | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 20 |
| 9.7 | | 6.5 | | | <2 | 97.8 | | <2 | 98.3 | | | | | | | | | | 0.3 | | | less than 1 | | | | | | | | Add(2) | 21 |
| 9.7 | | 6.5 | | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | R 1/20" | 22 |
| 9.3 | | 6.7 | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | R 2/10" | 23 |
| 9.9 | | 6.8 | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | R 3/10" | 24 |
| 10.2 | | 6.8 | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 2/10" | 25 |
| 9.3 | | 6.9 | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 1/20" | 26 |
| 10.3 | | 6.9 | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add(2) | 27 |
| 10.6 | | 6.6 | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 28 |
| 10.0 | | 6.6 | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 29 |
| 10.3 | | 6.6 | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add(2) R 3/10" | 30 |
| 10.1 | | 6.7 | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

APR 12 2010

WL-10 0061
Sent 4/15

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Riverwood MHP | Phone Number: 360-314-4444 | Month/Year: Feb. 2010
DEQ Permit No.: 75541 | DEQ File No./Facility ID: 102520 | EPA Reference No.: OR0031114-3
Plant Type: Recirculating Gravel | County: Columbia | Population Served: 150+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X ✓LWL
Authorized Signature — Date: 4/10/2010

MEGAN MAGAN
Name (Print)

**Operator Certification**

Collection Sys. Class: ____ Principal Operator Name (print): MAGAN MAGAN Certification No. & Grade: 10672 WW
Treatment Sys. Class: ____ Principal Operator Name (print): MAGAN MAGAN Certification No. & Grade: 10672 T

**INFLUENT**

| Date | Temperature °C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | 6.9 | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | 170 | | | 24 | |
| 5 | | | | | | | | |
| 6 | | 6.8 | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | 6.9 | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | 6.9 | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | 6.8 | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | 6.8 | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | 6.8 | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | 6.8 | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | 6.9 | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003): [X]

| Date | Temperature °C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Composite Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN E.coli CFU/100 ml | COLIFORM MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ambonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 9.8 | 6.7 | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | | 1 |
| 2 | 10.2 | 6.8 | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | R 1/10" | 2 |
| 3 | 9.9 | 6.8 | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add ② / R 3/10" | 3 |
| 4 | 10.0 | 6.8 | | | 18 | | | | 80% | | 8 | 90% | | | | | | | 0.7 | | | 40% | | | | | | | | R 3/10" | 4 |
| 5 | 9.9 | 6.8 | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 5 |
| 6 | 9.7 | 6.8 | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | R 3/10" | 6 |
| 7 | 10.1 | 6.7 | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add 2 | 7 |
| 8 | 9.4 | 6.7 | 11159 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Add 1 | 8 |
| 9 | 9.3 | 6.7 | 5805 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | | 9 |
| 10 | 10.1 | 7.0 | 6250 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | R 3/10" | 10 |
| 11 | 10.6 | 7.0 | 6404 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | R 1/10" | 11 |
| 12 | 10.4 | 7.0 | 7961 | | | | | | | | | | | | | | | | 1 | | | | | | | | | | | R 3/10" | 12 |
| 13 | 10.4 | 7.0 | 8929 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 3/10" | 13 |
| 14 | 11.0 | 7.0 | 9411 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add 2 / R 3/10" | 14 |
| 15 | 10.3 | 6.7 | 9173 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | R 3/10" | 15 |
| 16 | 11.0 | 6.7 | 9781 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | R 4/10" | 16 |
| 17 | 11.2 | 6.7 | 6951 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 1/20" | 17 |
| 18 | 11.1 | 6.7 | 6475 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | | 18 |
| 19 | 9.8 | 6.8 | 8223 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add 2 | 19 |
| 20 | 9.8 | 6.8 | 6197 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 20 |
| 21 | 9.7 | 6.8 | 6623 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 21 |
| 22 | 9.8 | 6.8 | 6878 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add 2 | 22 |
| 23 | 9.1 | 6.8 | 6245 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | R 3/10" | 23 |
| 24 | 9.7 | 6.8 | 4317 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add 2 | 24 |
| 25 | 10.8 | 6.8 | 4099 | | | | | | | | | | | | | | | | 1.6 | | | | | | | | | | | | 25 |
| 26 | 10.6 | 6.8 | 1716 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | R 3/10" | 26 |
| 27 | 11.1 | 6.8 | 1344 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | R 3/10" | 27 |
| 28 | 10.8 | 6.9 | 1732 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | R 1/10" | 28 |
| 29 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 29 |
| 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

APR 12 2010

√LWC

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Riverwood MHP | Phone Number: 360-314-4444 | Month/Year: 3/2010
DEQ Permit No.: 75541 | DEQ File No./Facility ID: 102520 | EPA Reference No.: OR0003114-3
Plant Type: Recirc. Gravel | County: Columbia | Population Served: 150 +

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X MAY 11 2010 — Authorized Signature. Date: 5/11/2010

Name (Print): Megan Mahon

## Operator Certification

Collection Sys. Class: ____ Principal Operator Name (print): Megan Mahon Certification No. & Grade: 10624
Treatment Sys. Class: ____ Principal Operator Name (print): Megan Mahon Certification No. & Grade: 10623

| Date | INFLUENT Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT (identify outfall number -- e.g. 001, 002, 003): Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | 10.9 | 6.8 | 1261 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | 1 |
| 2 | | | | | | | | | 10.6 | 6.8 | 825 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | R 3/10" | 2 |
| 3 | | 6.9 | | | | | | | 10.7 | 6.8 | 1454 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | 3 |
| 4 | | | | 130 | | | 105 | | 10.8 | 6.8 | 649 | | 62 | 98 | | | | | 3 | 97 | | | | | | | 0.3 | | | | 1 | | | | | | $Cl_2$(2) / R 3/10" | 4 |
| 5 | | | | | | | | | 10.8 | 6.9 | 1676 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 5 |
| 6 | | | | | | | | | 11.6 | 6.8 | 1293 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | 6 |
| 7 | | 6.9 | | | | | | | 10.7 | 6.8 | 1738 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | R 1/10" | 7 |
| 8 | | | | | | | | | 10.1 | 6.8 | 1650 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 8 |
| 9 | | | | | | | | | 9.1 | 6.9 | 1982 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | R 1/10" | 9 |
| 10 | | | | | | | | | 9.0 | 6.9 | 1713 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | $Cl_2$(2) / R 5/10" | 10 |
| 11 | | 6.9 | | | | | | | 9.1 | 6.8 | 1888 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | R 5/10" | 11 |
| 12 | | | | | | | | | 9.3 | 6.8 | 1757 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | $Cl_2$(2) / R 4/10" | 12 |
| 13 | | | | | | | | | 9.3 | 6.8 | 1622 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | R 3/10" | 13 |
| 14 | | | | | | | | | 9.7 | 6.8 | 1610 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | R 1/20" | 14 |
| 15 | | 7.0 | | | | | | | 10.1 | 6.8 | 1592 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | 15 |
| 16 | | | | | | | | | 10.7 | 6.8 | 1485 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | R 1/20" | 16 |
| 17 | | | | | | | | | 10.6 | 6.8 | 1554 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | $Cl_2$(2) | 17 |
| 18 | | | | | | | | | 11.4 | 6.8 | 816 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | 18 |
| 19 | | | | | | | | | 12.1 | 6.8 | 882 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | | 19 |
| 20 | | 7.0 | | | | | | | 13.1 | 6.8 | 624 | | | | | | | | | | | | | | | | 1.3 | | | | | | | | | | Flush Meter | 20 |
| 21 | | | | | | | | | 12.7 | 6.8 | 3469 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | R 3/10" | 21 |
| 22 | | | | | | | | | 11.9 | 6.8 | 3523 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | 22 |
| 23 | | 6.9 | | | | | | | 12.2 | 6.9 | 3651 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 23 |
| 24 | | | | | | | | | 13.8 | 6.9 | 3180 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | $Cl_2$(2) | 24 |
| 25 | | | | | | | | | 11.3 | 6.9 | 2898 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | R 3/10" | 25 |
| 26 | | | | | | | | | 10.9 | 6.9 | 2717 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | R 3/10" | 26 |
| 27 | | 6.9 | | | | | | | 11.1 | 6.9 | 2747 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | R 3/10" | 27 |
| 28 | | | | | | | | | 10.7 | 6.9 | 2735 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | $Cl_2$(2) R 4/10" | 28 |
| 29 | | | | | | | | | 10.4 | 6.9 | 2860 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | $Cl_2$(2) R 1 1/10" | 29 |
| 30 | | | | | | | | | 10.9 | 6.9 | 2927 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | R 3/10" | 30 |
| 31 | | 6.9 | | | | | | | 10.4 | 6.9 | 1602 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | R 3/10" | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

APH 2010 2010 √CWC

# Discharge Monitoring Report - Oregon Department of Environmental Quality

Facility Name: Riverwood MHP Rainier | Phone Number: 360-314-4444 | Month/Year: 4-2010
DEQ Permit No.: #75541 | DEQ File No./Facility ID: #102520 | EPA Reference No.: #OR0031143
Plant Type: Recirculating Gravel | County: Columbia | Population Served: 150+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

MAY 11 2010

X _____ Authorized Signature — 5/11/2010 Date

MAGAN C MAGAN Name (Print)

## Operator Certification

Collection Sys. Class: ____ Principal Operator Name (print): MAGAN C MAGAN — Certification No. & Grade: 10628

Treatment Sys. Class: ____ Principal Operator Name (print): MAGAN C MAGAN — Certification No. & Grade: 10628

**INFLUENT**

| Date | Temperature °F/°C | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | 6.9 | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | 6.9 | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | 6.9 | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | 6.9 | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | 6.9 | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | 6.9 | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | 6.9 | | | | | | |
| 30 | | | | 100 | 80 | | | |
| 31 | 38 | | | 110 | 75 | | | |
| TOTAL | | | | | | | | |
| DAILY MINIMUM | | | | | | | | |
| DAILY MAXIMUM | | | | | | | | |
| WKLY. AVG. MAX. | | | | | | | | |
| MONTHLY AVG. | | | | | | | | |
| DAILY LIMITS | | | | | | | | |
| WEEKLY LIMITS | | | | | | | | |
| MONTHLY LIMITS | | | | | | | | |

**EFFLUENT** (identify outfall number -- e.g. 001, 002, 003):

| Date | Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ammonia | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM Temperature °F/°C | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | | | | | | | | | 0.4 | 0.4 | | | | | | | | | | | Add① / R 1/10" | 1 |
| 2 | | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | R 1/10" | 2 |
| 3 | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 1/10" | 3 |
| 4 | | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | R 3/10" | 4 |
| 5 | | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add② / R 4/10" | 5 |
| 6 | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | R 3/10" | 6 |
| 7 | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 3/10" | 7 |
| 8 | | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | R 1/10" | 8 |
| 9 | | | | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | | Add② / R 3/10" | 9 |
| 10 | | | | | | | | | | | | | | | | | | | 1.7 | | | | | | | | | | | | 10 |
| 11 | | | | | | | | | | | | | | | | | | | 1.4 | | | | | | | | | | | R 1/10" | 11 |
| 12 | | | | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | R 1/10" | 12 |
| 13 | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 13 |
| 14 | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 14 |
| 15 | | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | | 15 |
| 16 | | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add② | 16 |
| 17 | | | | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | | 17 |
| 18 | | | | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | R 1/10" | 18 |
| 19 | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 19 |
| 20 | | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | R 4/10" | 20 |
| 21 | | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add② | 21 |
| 22 | | | | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | | 22 |
| 23 | | | | | | | | | | | | | | | | | | | 1.0 | | | | | | | | | | | R 1/10" | 23 |
| 24 | | | | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | | 24 |
| 25 | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | | 25 |
| 26 | | | | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | R 1/10" | 26 |
| 27 | | | | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | R 5/10" | 27 |
| 28 | | | | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | | Add② / R 4/10" | 28 |
| 29 | | | | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | Add① / R 3/10" | 29 |
| 30 | | | | | | | | | | | | | | | | | | | 1.5 | | | <1 | <1 | | | | | | | R 1/10" | 30 |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL | |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM | |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM | |
| WEEKLY AVERAGE MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. | |
| MONTHLY AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE | |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS | |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS | |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS | |

| Temperature °F/°C | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 10.1 | 6.9 | 2050 | | | | | | | | | | |
| 9.2 | 6.9 | 4136 | | | | | | | | | | |
| 9.9 | 6.9 | 1263 | | | | | | | | | | |
| 9.8 | 6.9 | 5567 | | | | | | | | | | |
| 9.4 | 6.9 | 384 | | | | | | | | | | |
| 9.8 | 6.5 | 116 | | | | | | | | | | |
| 10.7 | 6.9 | 1462 | | | | | | | | | | |
| 10.4 | 6.9 | 2271 | | | | | | | | | | |
| 11.4 | 6.9 | 2013 | | | | | | | | | | |
| 11.9 | 6.8 | 1564 | | | | | | | | | | |
| 13.4 | 6.8 | 2119 | | | | | | | | | | |
| 13.7 | 6.8 | 428 | | | | | | | | | | |
| 14.1 | 6.8 | 4871 | | | | | | | | | | |
| 13.2 | 6.8 | 5672 | | | | | | | | | | |
| 13.9 | 6.8 | 1206 | | | | | | | | | | |
| 14.5 | 6.8 | 321 | | | | | | | | | | |
| 14.7 | 6.8 | 729 | | | | | | | | | | |
| 14.1 | 6.9 | 1674 | | | | | | | | | | |
| 14.9 | 6.9 | 1272 | | | | | | | | | | |
| 15.1 | 6.9 | 1531 | | | | | | | | | | |
| 13.2 | 6.9 | 1345 | | | | | | | | | | |
| 13.7 | 6.9 | 1339 | | | | | | | | | | |
| 13.1 | 6.9 | 1368 | | | | | | | | | | |
| 14.2 | 6.8 | 1557 | | | | | | | | | | |
| 14.7 | 6.8 | 1276 | | | | | | | | | | |
| 13.8 | 6.9 | 1636 | | | | | | | | | | |
| 13.1 | 6.9 | 575 | | | | | | | | | | |
| 12.5 | 6.9 | 1638 | | | | | | | | | | |
| 14.4 | 6.9 | 201 | | | | | | | | | | |
| 14.8 | 7.0 | 2016 | | <2 | >98 | | | | 2 | 97% | | |
| | | | | <2 | 98 | | | | 3 | 96% | | |

There were 2 SAMPLES DRAWN ON APRIL 30 2010
SO THERE WERE 2 INFLUENT, 2 EFFLUENT & 2 E.COLI

# Discharge Monitoring Report - Oregon Department of Environmental Quality

/LWC

Facility Name: Riverwood MHP | Phone Number: 360-314-4444 | Month/Year: May 2010
DEQ Permit No.: 102520 | DEQ File No./Facility ID: 75541 | EPA Reference No.: OR-00314-3
Plant Type: Recirc. Gravel | County: Columbia | Population Served: 150+

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

X JUL 14 2010 — Authorized Signature — Date: 7/14/2010

MAGAN MAGAN — Name (Print)

**Operator Certification**

Collection Sys. Class ____ Principal Operator Name (print): MAGAN MAGAN — Certification No. & Grade: 10622
Treatment Sys. Class ____ Principal Operator Name (print): ____ — Certification No. & Grade: 10621

| Date | INFLUENT °F/°C Temperature | pH S.U. | Flow MGD | BOD Grab Concentration mg/L | BOD Comp. Loading lbs. | CBOD mg/L | TSS Grab Concentration mg/L | TSS Comp. Loading lbs. | EFFLUENT °F/°C Temperature | pH S.U. | Flow MGD | DO mg/L | BOD Grab Concentration mg/L | BOD Comp. Removal % | BOD Comp. Loading lbs. | CBOD Grab Concentration mg/L | CBOD Comp. Removal % | CBOD Comp. Loading lbs. | TSS Grab Concentration mg/L | TSS Comp. Removal % | TSS Comp. Loading lbs. | NUTRIENTS Grab Total Phosphorous mg/L | NUTRIENTS Grab Total Kjeldahl Nitrogen mg/L | NUTRIENTS Composite Ammonia Nitrogen mg/L | NUTRIENTS Composite Nitrate Nitrogen mg/L | DISINFECTION CHLORINE Used lbs. | DISINFECTION CHLORINE Total Residual mg/L | DISINFECTION UV Trans-mittance % | Turbidity N.T.U | COLIFORM MPN/MF E.coli CFU/100 ml | COLIFORM MPN/MF Fecal CFU/100 ml | COLIFORM MPN/MF Total CFU/100 ml | RECEIVING STREAM Ambnonia mg/L | RECEIVING STREAM Dilution | RECEIVING STREAM Stream Flow CFS | RECEIVING STREAM °F/°C Temperature | RECEIVING STREAM pH S.U. | DAILY LOG Regarding breakdowns, bypassing, odors, complaints, etc. | Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | 12.7 | 7.0 | 1871 | | | | | | | | | | | | | | | | 1.5 | | | | | | | | | | | 1 |
| 2 | | | | | | | | | 13.7 | 7.0 | 1311 | | | | | | | | | | | | | | | | 1.1 | | | | | | | | | | | 2 |
| 3 | | 7.0 | | | | | | | 12.8 | 7.0 | 1401 | | | | | | | | | | | | | | | | 1 | | | | | | | | | | | 3 |
| 4 | | | | | | | | | 12.2 | 7.0 | 1355 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 4 |
| 5 | | | | | | | | | 13.5 | 7.0 | 1391 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Added (2) | 5 |
| 6 | | | | | | | | | 13.7 | 7.0 | 1459 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | 6 |
| 7 | | 6.9 | | | | | | | 15.1 | 6.9 | 1417 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 7 |
| 8 | | | | | | | | | 14.9 | 6.9 | 1463 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | 8 |
| 9 | | | | | | | | | 14.4 | 6.9 | 2714 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | 9 |
| 10 | | | | | | | | | 14.9 | 6.9 | 77 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Added (2) | 10 |
| 11 | | 6.9 | | 100 | | | 80 | | 14.7 | 6.9 | 2143 | | <2 | 98% | 0.27 | | | | 5 | 94% | 0.17 | | | | | | 1.2 | | | <1 | | | | | | | | 11 |
| 12 | | | | | | | | | 15.8 | 6.9 | 44 | | | | | | | | | | | | | | | | 1.2 | | | | | | | | | | | 12 |
| 13 | | | | | | | | | 15.7 | 6.9 | 1403 | | | | | | | | | | | | | | | | 1 | | | | | | | | | | | 13 |
| 14 | | | | | | | | | 16.1 | 6.9 | 1369 | | | | | | | | | | | | | | | | 0.9 | | | | | | | | | | | 14 |
| 15 | | 6.8 | | | | | | | 16.1 | 6.9 | 1454 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Added (2) | 15 |
| 16 | | | | | | | | | 16.9 | 7.0 | 1721 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | 16 |
| 17 | | | | | | | | | 16.3 | 7.0 | 1756 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Added (2) | 17 |
| 18 | | | | | | | | | 15.1 | 6.9 | 1171 | | | | | | | | | | | | | | | | 1 | | | | | | | | | | | 18 |
| 19 | | | | | | | | | 15.3 | 6.9 | 1102 | | | | | | | | | | | | | | | | 0.8 | | | | | | | | | | | 19 |
| 20 | | 6.9 | | | | | | | 12.9 | 6.9 | 2296 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Added (2) | 20 |
| 21 | | | | | | | | | 13.6 | 6.9 | 2364 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | 21 |
| 22 | | | | | | | | | 14.2 | 7.0 | 2298 | | | | | | | | | | | | | | | | 0.3 | | | | | | | | | | Added (2) | 22 |
| 23 | | | | | | | | | 14.1 | 6.9 | 1969 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | 23 |
| 24 | | 6.9 | | | | | | | 14.8 | 6.9 | 1813 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Added (2) | 24 |
| 25 | | | | | | | | | 15.0 | 6.9 | 717 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | 25 |
| 26 | | | | | | | | | 15.1 | 6.9 | 0 | | | | | | | | | | | | | | | | 0.5 | | | | | | | | | | | 26 |
| 27 | | 6.9 | | | | | | | 15.7 | 6.9 | 2 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Added (2) | 27 |
| 28 | | | | | | | | | 14.8 | 6.9 | 1 | | | | | | | | | | | | | | | | 0.6 | | | | | | | | | | | 28 |
| 29 | | | | | | | | | 15.2 | 6.9 | 1 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Added (2) | 29 |
| 30 | | | | | | | | | 15.1 | 6.9 | 167 | | | | | | | | | | | | | | | | 0.4 | | | | | | | | | | Added (2) | 30 |
| 31 | | 6.9 | | | | | | | 14.9 | 6.9 | 97 | | | | | | | | | | | | | | | | 0.7 | | | | | | | | | | | 31 |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | TOTAL |
| DAILY MINIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MINIMUM |
| DAILY MAXIMUM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY MAXIMUM |
| WKLY. AVG. MAX. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY AVERAGE MAX. |
| MONTHLY AVG. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY AVERAGE |
| DAILY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DAILY LIMITS |
| WEEKLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | WEEKLY LIMITS |
| MONTHLY LIMITS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MONTHLY LIMITS |

# FACT SHEET
# And
# NPDES WASTEWATER DISCHARGE PERMIT EVALUATION

Department of Environmental Quality
Northwest Region – Portland Office
2020 SW 4th Ave., Suite 400, Portland, OR 97201
Telephone: (503) 229-5263

**PERMITTEE:** Estate of Magar E. Magar, Debtor

File Number: 75541

**SOURCE LOCATION:** 2 miles south of Rainier off Highway 30 in Columbia County

**SOURCE CONTACT:**

Kenneth S. Eiler, Trustee — Telephone Number: 5032926020
or
Allen Marshall — Telephone Number: 5032976713

**PERMIT WRITER:**

Lyle Christensen — Telephone Number: 5032295295

**PROPOSED ACTION:** Renewal of a National Pollutant Discharge Elimination System (NPDES) wastewater discharge permit

**SOURCE CATEGORY:** Minor Domestic
**TREATMENT SYSTEM CLASS:** Level I

**COLLECTION SYSTEM CLASS:** N/A

**PERMIT APPLICATION DATE:** 7-27-1999

**PERMIT APPLICATION NUMBER:** 990076

## BACKGROUND

### Introduction

Riverwood Mobile Home Park has a wastewater treatment facility located near Rainier, Oregon. Wastewater is treated and discharged to Columbia River in accordance with National Pollutant Discharge Elimination System (NPDES) Permit number 101247. The Permit for the facility was issued on 11/28/1994 and expired on 11/30/1999. The permit for this facility was issued to Magar E. Magar. In 2001, Mr. Magar filed for bankruptcy and the bankruptcy court turned the responsibility for this asset over to a trustee. On December 17, 2001, the permit for this facility was transferred to the trustee

EXHIBIT # R6

The Department received a renewal application on 7-27-1999 from Mr. Magar. A renewal permit is necessary to discharge to state waters pursuant to provisions of Oregon Revised Statutes (ORS) 468B.050 and the Federal Clean Water Act. The Department proposes to renew the permit and issue the renewal to the bankruptcy trustee.

**Facility Description**

The wastewater treatment facility was originally placed into operation in 1983. There have been no major plant expansions.

The major treatment process used is the Recirculating Gravel Filter. The average design dry weather flow was determined by the engineer who designed the facility. It is the estimated maximum flow during May 1 to October 31 (expressed as a daily average flow), at which the design engineer expects the treatment facility can still consistently meet all effluent limits.

The dry weather flows do not include the high levels of infiltration and inflow that are associated with the winter in Oregon. Therefore, the design dry weather flows are used mostly to estimate how much treatment capacity there is for organic loads. For this facility, the average design dry weather flow is 0.013 million gallons/day (MGD). The current actual dry weather flow for May 1 to October 31, for the past two years, is 0.006 MGD. Based on the current flows, this facility is at about 45% of organic treatment capacity. Based on the current low flows compared to the design flows, and the lack of recurring effluent violations, no expansion of the facility is needed at this time. This recirculating gravel filter was one of the first to be constructed in the state. It includes some features that have never worked well and some that appear to be at the end of their functional life. The Department recognizes that this facility has worked well in the past but recent events indicate that some changes to the facility may be warranted.

The current actual average wet weather flow (November 1 through April 30), for the past two years, is 0.0095 MGD. The peak day flow over the past two years was reported to be about 0.015 MGD, however the plant operator reports that peak flows are not reliably calculated due to the limitation of the existing flow meter. The inherent design of the facility leads to rain related flow increases that push flows up dramatically. Under heavy rain events, the plant flow related to the rain alone could easily reach the observed peaks reported for this gravel filter and its open recirculation basin. See the section on Inflow and Infiltration for a further discussion of winter flows and hydraulic capacity issues.

**Biosolids Management and Utilization**

This facility does not produce biosolids. This facility consists of septic tanks and a recirculating gravel filter. The only solids removed from the facility are those pumped from the septic tanks and the solids that accumulate in the recirculation pond. The permit requires that the minimum frequency for inspection and removal of solids be every two years for the septic tanks and every five years for the recirculation tank. The solids removal must be reported on the monitoring reports.

P3

## Inflow and Infiltration (I/I)

The collection system was constructed with the treatment plant in 1983 and carries the waste from Riverwood Mobile Home Park to two serial septic tanks at the treatment plant site. Little inflow or infiltration should occur in this small collection system. However, the treatment plant captures a substantial amount of inflow as rain is collected in the recirculating gravel filter and the recirculation basin. The filter bed surface area is approximately 4000 square feet and the recirculation basin 800 square feet. With this area collecting the water, one inch of rain in a day would add about 3000 gallons of flow through the plant.

## Pretreatment

The permittee does not have a formal pretreatment program, nor is one required for this source.

## Pollutants Discharged

The current permit allows Riverwood MHP to discharge treated effluent from the wastewater treatment plant year round to the Columbia River. The current permit sets limits on the following pollutants: Five day biochemical oxygen demand ($BOD_5$) total suspended solids (TSS), fecal coliform, pH and pollutant removal efficiency.

## Outfalls

Treated wastewater is discharged to Columbia River. The effluent actually enters a small unnamed seasonal creek just before it cascades over a 50 foot cliff. At the base of the cliff is a railroad grade about 50 feet above the Columbia River. The effluent stream disappears into the gravel along the railroad track and no visible stream is observed entering the river.

## Receiving Streams/Impact

The water quality standards for the North Coast Basin (Oregon Administrative Rules 340-41-0205 are intended to be protective of the beneficial uses for the basin. Treated wastewater is discharged to Columbia River at river mile 70.6. At this location, the Columbia River is water quality limited for a number of parameters including: temperature during the summer months; bacteria during the fall, winter and spring; dissolved oxygen in the summer; pH during the spring; total dissolved gas year round; and a number of toxics have been identified as year round concerns.

Because this is such a small discharge and it is difficult to even determine where it enters the river, it is difficult to accept that any of these parameters are influenced by the discharge from Riverwood Mobile Home Park. The Department is not aware of any water quality violations that may be attributable to this source.

## Temperature

No temperature impacts are anticipated from this source. The discharge from this source is expected to have no measurable effect on the Columbia River.

**Groundwater**

Based on the Department's current information, this facility has a low potential for adversely impacting groundwater quality. Therefore, the Schedule D of the proposed permit states that no groundwater evaluations will be required during this permit cycle. The permit also includes a condition in Schedule A prohibiting any adverse impact on groundwater quality.

**Stormwater**

There are no discharges of stormwater from the plant site to surface waters; most of the plant site is unpaved and stormwater seeps into the ground.

**Permit History**

No major changes are proposed for this permit. The permittee is required to monitor E. coli for indications of disinfection in place of fecal coliform. This is necessary because of the recent change in the bacteria standard. See OAR 340-41-0205(2)(e).

**Compliance History**

This facility was last inspected on January 30, 2001, and was found to be in compliance with the permit effluent limits at that time. The inspection did cite a number of ongoing concerns including: solids concerns, facility maintenance, septic tank condition and overall operation.

The monitoring reports for this facility were reviewed for the period since the current permit was issued, including any actions taken relating to effluent violations. The permit compliance conditions were reviewed and all inspection reports for the same period were reviewed. Based on this review, the following violations have been documented at this facility during the term of the current permit.

| Date of Violation | Type of Enforcement Action | Description of Violation |
|---|---|---|
| 5/16/1995 | Notice of noncompliance | Failure to comply with permit compliance conditions. |
| 3/12/1996 | Notice of noncompliance | Failure to pay fees in a timely fashion. |
| 10/3/1996 | Notice of noncompliance | Same as previously noted |
| 12/5/1996 | Notice of permit violation | Did not complete permit required improvements |
| 6/23/1998 | Notice of noncompliance | Failed to comply with monitoring requirements. |
| 9/24/1998 | Notice of noncompliance | Failed to comply with monitoring requirements. |

| | | |
|---|---|---|
| 5/18/1999 | Notice of noncompliance | Permit limit violations. |
| 1/12/2000 | Notice of noncompliance | Not meeting operator certification requirements. |
| 7/18/2000 | Notice of noncompliance | Not meeting operator certification requirements. |
| 10/12/2000 | Notice of permit violation | Failure to comply with op certification requirements. |
| 4/13/2001 | Notice of noncompliance | Discharge of raw sewage |
| 7/11/2001 | Notice of assessment of civil penalty | Discharge of raw sewage |

This facility has had a pattern of compliance problems. Ultimately, a civil penalty assessment was necessary. As a result of the civil penalty and change in ownership, it is believed that the facility will correct the conditions that led to the violations. The Department intends to closely monitor the facility for future violations. Any further violations will be subject to additional enforcement action.

## PERMIT DISCUSSION

### Face Page

The permittee is authorized to construct, install, modify, or operate a wastewater collection, treatment, control and disposal system. Permits discharge of treated effluent to the Columbia River within limits set by Schedule A and the following schedules. All other discharges are prohibited.

### Schedule A - Waste Discharge limitations

BOD and TSS concentration and mass limits

Based on the North Coast Basin minimum design criteria, wastewater treatment resulting in a monthly average effluent concentration of 20 mg/L for $BOD_5$ and TSS must be provided from May 1 - October 31. From November 1 - April 30, a minimum of secondary treatment or equivalent control is required. Secondary treatment for this facility is defined as monthly average concentration limit of 30 mg/L for $BOD_5$ and 30 mg/L for TSS.

The Department is proposing concentration limits at least as stringent as the basin minimum design criteria. The proposed monthly average summer $BOD_5$ concentration limit is 20 mg/L. The proposed monthly average summer TSS concentration limit is 20 mg/L.

The proposed monthly average winter $BOD_5$ concentration limit is 30 mg/L. The proposed monthly average winter TSS concentration limit is 30 mg/L.

The summer mass limits for biochemical oxygen demand ($BOD_5$) and suspended solids (TSS) are based on the design average dry weather flow (ADWF) of 0.013 MGD and the monthly average $BOD_5$ and TSS concentration limits of 20 mg/L and 20 mg/L, respectively.

The winter mass load limits for the facility are based on the design ADWF of .013 MGD and the monthly average $BOD_5$ or TSS concentration limits of 30 mg/L and 30 mg/L, respectively. The

limits are in accordance with OAR 340-41-120(9)(e). All mass load limitations are rounded to two significant figures. Daily maximums for mass are twice the monthly average.

$BOD_5$ and TSS

The limits are:

(1) May 1 - October 31:

| Parameter | Average Effluent Concentrations Monthly | Monthly Average lb/day | Daily Maximum Lbs |
|---|---|---|---|
| $BOD_5$ | 20 mg/L | 2.2 | 4.4 |
| TSS | 20 mg/L | 2.2 | 4.4 |

(2) November 1 - April 30:

| Parameter | Average Effluent Concentrations Monthly | Monthly Average lb/day | Daily Maximum Lbs |
|---|---|---|---|
| $BOD_5$ | 30 mg/L | 3.3 | 6.6 |
| TSS | 30 mg/L | 3.3 | 6.6 |

Calculations:

(1) Summer $BOD_5$

(a) 0.013 MGD x 8.34 #/gal x 20 mg/L monthly avg. = 2.2 lbs/day
(b) 2.2 lbs/day monthly avg. x 2.0 = 4.4 lbs/day daily max.

(2) Summer TSS

(a) 0.013 MGD x 8.34 #/gal x 20 mg/L monthly avg. = 2.2 lbs/day
(b) 2.2 lbs/day monthly avg. x 2.0 = 4.4 lbs/day daily max.

(3) Winter $BOD_5$

(a) 0.013 MGD x 8.34 #/gal x 30 mg/L monthly avg. = 3.3 lbs/day
(b) 3.3 lbs/day monthly avg. x 2.0 = 6.6 lbs/day daily max.

(4) Winter TSS

(a) 0.013 MGD x 8.34 #/gal x 30 mg/L monthly avg. = 3.3 lbs/day
(b) 3.3 lbs/day monthly avg. x 2.0 = 6.6 lbs/day daily max.

A review of recent monitoring data indicates the permittee can comply with the permit limits.

No changes from the previous permit are proposed.

BOD and TSS Percent Removal Efficiency

A minimum level of percent removal for $BOD_5$ and TSS for municipal dischargers is required by the Code of Federal Regulations (CFR) secondary treatment standards (40 CFR, Part 133). An 85 percent removal efficiency limit is included in the proposed permit to comply with federal requirements. An examination of the DMR data indicates the permittee will have little difficulty meeting the limit with the current facilities.

pH

The North Coast Basin Water Quality Standard for pH is found in OAR 340-41-0205(2)(d). The allowed range is 6.5 to 8.5. The proposed permit limits pH to the range 6.0 to 9.0. This limit is based on Federal wastewater treatment guidelines for sewage treatment facilities, and is applied to the majority of NPDES permittees in the state. Within the permittee's mixing zone, the water quality standard for pH does not have to be met. It is the Department's belief that mixing with ambient water within the mixing zone will ensure that the pH at the edge of the mixing zone meets the standard, and the Department considers the proposed permit limits to be protective of the water quality standard.

Fecal Bacteria

The proposed permit limits are based on an E. coli standard approved in January 1996. The proposed limits are a monthly geometric mean of 126 E. coli per 100 mL, with no single sample exceeding 406 E. coli per 100 mL. The new bacteria standard allows that if a single sample exceeds 406 E coli per 100 mL, then the permittee may take five consecutive re-samples. If the log mean of the five re-samples is less than or equal to 126, a violation is not triggered. The re-sampling must be taken at four-hour intervals beginning within 28 hours after the original sample was taken.

The proposed effluent limits are achievable through proper operation and maintenance.

Chlorine Residual

Because of extreme high levels of dilution available in the Columbia River, chlorine toxicity is not an issue with this discharge. No beneficial use of the unnamed stream is impacted by the chlorine residual. The Department has not proposed a chlorine limit in this permit.

Temperature

Because the discharge from this facility is not expected to have a measurable temperature impact on the receiving stream, the Department has no reason to believe that temperature issues exist from this discharge. The permit does require the permittee to monitor effluent temperature at the same frequency as pH monitoring. This monitoring will allow a more thorough evaluation of this parameter in the future.

Mixing Zone and Zone of Immediate Dilution

Though it would be difficult to find this facilities effluent in the Columbia River, a mixing zone is defined for this discharge. The effluent is dispersed through gravels and seepage to the Columbia River.

The allowable mixing zone is that portion of the Columbia River contained within a band extending out twenty (20) feet from the west bank of the river and extending from a point twenty (20) feet upstream of the outfall to a point twenty (20) feet downstream from the outfall.

The Department believes there will be no environmental impact from such a mixing zone and that the defined mixing zone meets the criteria in the rule.

Emergency Overflows

All flow to the treatment plant is by gravity and no emergency overflows have been defined for this facility.

**Schedule B - Minimum Monitoring and Reporting Requirements**

In 1988, the Department developed a monitoring matrix for commonly monitored parameters. Proposed monitoring frequencies for all parameters are based on this matrix and, in some cases, may have changed from the current permit. The proposed monitoring frequencies for all parameters correspond to those of facilities of similar size and complexity in the state.

The permittee is required to have a laboratory Quality Assurance/Quality Control program. The Department recognizes that some tests do not accurately reflect the performance of a treatment facility due to quality assurance/quality control problems. These tests should not be considered when evaluating the compliance of the facility with the permit limitations. Thus, the Department is also proposing to include in the opening paragraph of Schedule B a statement recognizing that some test results may be inaccurate, invalid, do not adequately represent the facility's performance and should not be used in calculations required by the permit.

Effluent flow monitoring is required daily.

The permit includes monitoring requirements for conventional pollutants such as $BOD_5$, TSS, pH and bacteria. Bacteria monitoring using *E. coli* must be performed in accordance with one of the methods approved by the Department.

Total chlorine residual and chlorine used must be monitored daily.

Recirculating gravel filters are expected to remove ammonia. The permit requires quarterly ammonia monitoring to verify that the filter bed is functioning.

Discharge monitoring reports must be submitted to the Department monthly by the 15th day of the following month. The monitoring reports need to identify the principal operators designated by the City to supervise the treatment and collection systems. The reports must also include records concerning application of biosolids and all applicable equipment breakdowns and bypassing.

Schedule B of the permit includes the requirement for the submittal of annual reports. The conditions are standard language requirements concerning:

Annual report on transporting sludge to another facility

**Schedule C - Compliance Conditions**

The proposed permit includes 3 compliance conditions with compliance deadlines. The requirements include:

The most recent enforcement action regarding this facility required the permittee to provide the Department with a report on the status of facilities, including any necessary upgrades or improvements. A condition is proposed for this permit that requires that the status of these recommended improvements be reported to the Department within one year of permit issuance.

A condition specifies the frequency of solids removal for this facility.

A condition that the permittee is expected to meet the compliance dates established in this schedule or notify the Department within 14 days following any lapsed compliance date.

**Schedule D - Special Conditions**

The proposed permit includes 4 special conditions. The requirements include:

That a contingency plan be in place for handling spills and unplanned discharges from this facility.

A condition is included which may require the permittee to perform hydrogeolgic characterization or groundwater monitoring. These requirements are avoided provided the permit is complied with and no groundwater concerns are raised.

That the permittee must have the facilities supervised by personnel certified by the Department in the operation of treatment and/or collection systems.

Notification to the Department is required for any malfunction of the permitted facility to allow the Department to coordinate a response.

**Schedule F – General Conditions**

The General conditions include sections containing permit language specified as Standard Conditions, Operation and Maintenance of Pollution Controls, Monitoring and Records, Reporting Requirements and Definitions.

Oregon
John A. Kitzhaber, M.D., Governor

Department of Environmental Quality
Northwest Region Portland Office
2020 SW 4th Avenue, Suite 400
Portland, OR 97201-4987
(503) 229-5263
FAX (503) 229-6945
TTY (503) 229-5471

April 2, 2002

KENNETH S EILER
TRUSTEE
PMB 810; 515 NW SALTZMAN
PORTLAND OR 97229

Final Date for Submission of
Written Comments: **April 17, 2002**

Re: Waste Disposal 75541
Columbia County

Your application for a National Pollutant Discharge Elimination System (NPDES) permit has been reviewed by the Department of Environmental Quality and a proposed NPDES permit has been drafted. You are invited to review the attached copy and submit any comments you may have in writing prior to the date indicated above. A copy of the permit evaluation report is also enclosed.

Other information, which will be distributed to the public, is enclosed for your review. Your comments on the content of this information will also be appreciated. It is recognized in this permit draft that some changes to this facility may be necessary. The continued operation of this facility requires that long term improvements be considered and completed as necessary.

After your comments, if any have been received, a public notice regarding your application will be circulated to interested individuals and organizations. The proposed permit will also be made available to those persons requesting it. After the public review and participation period is over, final action will be taken on your application.

If you have any comments or questions, please contact me at (503) 229-5295.

Sincerely,

Lyle W. Christensen
Water Quality Source Control

Enclosures
cc: Allen Marshall, POB 25721, Portland, OR 97298

R-7

# FACT SHEET
# And
# NPDES WASTEWATER DISCHARGE PERMIT EVALUATION

Department of Environmental Quality
Northwest Region – Portland Office
2020 SW 4th Ave., Suite 400, Portland, OR 97201
Telephone: (503) 229-5263

**PERMITTEE:** Magar E. Magar
1616 NW Northrup
Portland OR 97209
File Number: 75541

**SOURCE LOCATION:** Along State Highway 30, about 2 miles south of the City of Rainier

**SOURCE CONTACT:** Magar Edward Magar Telephone Number: 503-226-1913

**PERMIT WRITER:** Lyle Christensen Telephone Number: 503-229-5295

**PROPOSED ACTION:** Renewal of a National Pollutant Discharge Elimination System (NPDES) wastewater discharge permit

**SOURCE CATEGORY:** Minor Domestic

**TREATMENT SYSTEM CLASS:** Level I

**COLLECTION SYSTEM CLASS:** N/A

**PERMIT APPLICATION DATE:** 3/12/2007

**PERMIT APPLICATION NUMBER:** 975424

## BACKGROUND

### Introduction

Magar Magar operates a wastewater treatment facility serving the Riverwood Mobile Home Park located in Columbia County near Rainier, Oregon. Wastewater is treated and discharged to Columbia River in accordance with National Pollutant Discharge Elimination System (NPDES) Permit number 102520. The Permit for the facility was issued on 6/10/2002 to a court appointed trustee for Mr. Magar's estate as Magar was under the court's oversight while going through bankruptcy proceedings. On September 1, 2005, the permit was transferred back into Mr. Magar's name and will expire on 5/31/2007.

The Department received a renewal application on 3/12/2007. A renewal permit is necessary to discharge to state waters pursuant to provisions of Oregon Revised Statutes (ORS) 468B.050 and the Federal Clean Water Act. The Department proposes to renew the permit.

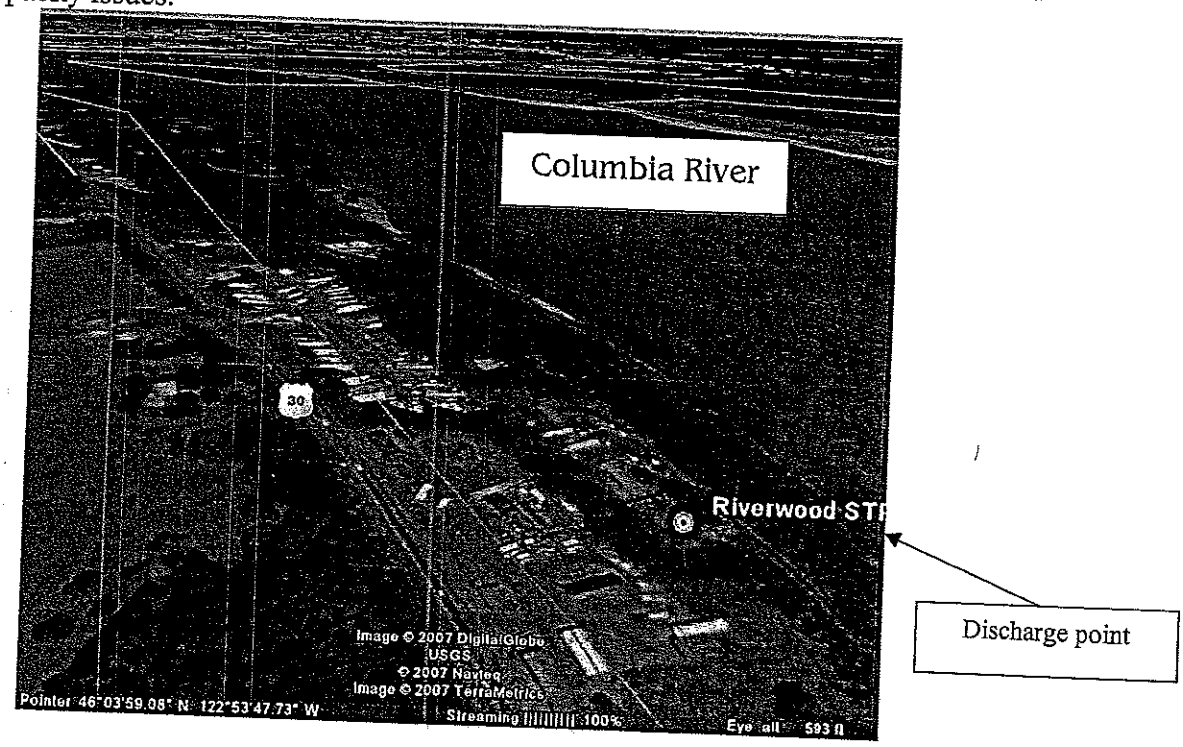
EXHIBIT # R7

**Facility Description**

The wastewater treatment facility was originally placed into operation in 1983. The last major modification to the facilities occurred in 2004 when the two-5000-gallon steel septic tanks were replaced with a 15000-gallon fiberglass septic/surge tank, the open recirculation pond was replaced by an 8000-gallon underground fiberglass mix/recirculation tank and the distribution piping system on the gravel filter was replaced. The major treatment process used is a septic/surge tank followed by a recirculating gravel filter (RGF). The engineer who designed the facility determined the average design dry weather flow. It is the estimated maximum flow during May 1 to October 31 (expressed as a daily average flow), at which the design engineer expects the treatment facility can still consistently meet all effluent limits.

The dry weather flows do not include the high levels of infiltration and inflow that are associated with the winter in Oregon. Therefore, the design dry weather flows are used mostly to estimate how much treatment capacity there is for organic loads. For this facility, the average design dry weather flow is 13,000 gallons per day. The current actual dry weather flow for May 1 to October 31, for the past two years, was 6000 gallons per day. Based on the current flows, this facility is at <50% of organic treatment capacity. Based on the current low flows compared to the design flows, and the lack of recurring effluent violations, no expansion of the facility is needed at this time.

The current actual average wet weather flow (November 1 through April 30), for the past two years, was 11000 gallons per day. The peak day flow over the past two years was over 50000 gallons. See the section on Inflow and Infiltration for a further discussion of winter flows and hydraulic capacity issues.



**Biosolids Management and Utilization**

Riverwood STP does not have a biosolids management plan. Most sludge will collect in the septic tank that precedes the treatment plant and some solids will accumulate in the recirculation/mix tank where the septic tank effluent and flow from the gravel filter that is not discharged come together. Waste sludge accumulations need to be regularly pumped out and transported to a different treatment facility for further treatment and beneficial use as biosolids. The permittee has stated that the septic tank and recirculation tank have shown minimal accumulation of solids since the plant improvements were completed in 2004.

The receiving treatment facility is responsible for ensuring compliance with the federal biosolids regulations (40 CFR Part 503) and the permit for that facility is the governing authority. This permit requires reporting of the transportation of biosolids to other facilities and the submittal of an annual summary when solids are removed.

**Inflow and Infiltration (I/I)**

Flow observations indicate that about twice as much daily flow is recorded during the winter months as is observed in the summer. Peak daily observations indicate that during heavier rain events the highest daily flows are observed. Some of this rainfall is captured in the gravel filter which has approximately 4200 square feet of surface area. This adds some of the observed inflow to the treatment system. One inch of rainfall should add just over 2600 gallons of water to the plant from the gravel filter. Flow monitoring records indicate increases have been observed of over 30000 gallons from one day to the next day (i.e. January 29-30, 2006 & January 2-3, 2007). Associated rainfall records for these two dates as reported in City of Rainier showed 2 inches of rain on the January 2, 2007, and 2.2 inches on January 29, 2006. If the flow monitoring records are accurate, these increases would indicate that some additional source of extraneous flow enters the collection system. A compliance condition was added to the permit to require the evaluation of the collection system to try to determine where the observed peak flows originate.

**Pretreatment**

The permittee does not have a formal pretreatment program, nor is one required for this source.

**Pollutants Discharged**

The current permit allows Magar Magar to discharge treated effluent from the wastewater treatment plant year round. The current permit sets limits on the following pollutants: Five-day Biochemical Oxygen Demand ($BOD_5$), Total Suspended Solids (TSS), and bacteria (E.coli). The discharge also has limits for pH and $BOD_5$ and TSS removal efficiency.

The proposed permit will regulate the same pollutants.

**Outfalls**

Treated wastewater is discharged to Columbia River. A pipeline carries the wastewater from the plant to the edge of a cliff that is at least 100 feet above the Columbia River. In the summer months effluent is the only water running down the rocky cliff face and little makes it directly to the river. In the winter the flow mixes with storm water draining from the mobile home park and roadside ditch water as it cascades down to the railroad grade below. Year round the water soaks through under the rail-line gravel track bed and enters at about river mile 70.6 of the Columbia River which is about fifty feet from the base of the cliff. No defined stream course was observed at the outfall location

**Receiving Streams/Impact**

The designated beneficial uses of the receiving stream: public and private domestic water supply, industrial water supply, irrigation, livestock watering, anadromous fish passage, spawning and rearing, salmonid passage, spawning and rearing, resident fish and aquatic life, wildlife and hunting, fishing, boating, water contact recreation, aesthetic quality, and commercial navigation and transportation.

The water quality standards (Oregon Administrative Rules 340-041) were developed to protect the beneficial uses of waters of the state including those waters of the Lower Columbia Basin. Treated wastewater is discharged to Columbia River at river mile 70.6. At this location, the Columbia River is water quality limited for arsenic, DDT-metabolite, dioxin, PCB and temperature according to the Department's 303(d) list.

Treated domestic wastewater is not known to be a contributory source of any of these identified pollutants of concern except for temperature. This facility discharges such a small amount of wastewater that even temperature will not be a concern from this site. The Department is not aware of any water quality violations that may be attributable to this source.

**Temperature**

This discharge is very small in relationship to the Columbia River, temperature impacts will not be observed. As this discharge is difficult to locate in the river, thermal impact from this discharge would not be measurable in the Columbia River.

**Groundwater**

Based on the Department's current information, this facility has a low potential for adversely impacting groundwater quality. Therefore, Schedule D of the proposed permit states that no groundwater evaluations will be required during this permit cycle. The permit also includes a condition in Schedule A that prohibits any adverse impact on groundwater quality.

**Storm water**

Storm water is not addressed in this permit. General NPDES permits for storm water are not required for facilities with a design flow of less than 1 MGD.

**Permit History**

The NPDES permit for this facility was initiated in 1982 when a recirculating gravel filter treatment plant with a surface water discharge was constructed to replace an unsatisfactory (failing) septic system serving the Riverwood Mobile Home Park. In about 1985 Mr. Magar purchased the mobile home park and took over responsibility for this permit. The permit was renewed in 1989 and 1994. Numerous compliance issues have arisen with this permittee over the years. In 2001, the department assessed a fairly large civil penalty for a number of ongoing concerns at this facility. Shortly thereafter, Mr. Magar filed for bankruptcy and a bankruptcy court eventually turned the permit over to trustee to address the compliance concerns under the present permit issued in 2002.

**Compliance History**

This facility was last inspected on October 2, 2006, and was found to be out of compliance. Operation of the recirculating gravel filter was not as it was intended. Uneven distribution and ponding of treated effluent was observed on the recirculating gravel filter. Required reporting on sludge accumulation in septic tanks had not occurred. The cause or causes of the above violations have not been determined, and the Department intends to closely monitor the facility for future violations. Any further violations will be subject to additional enforcement action.

The monitoring reports for this facility were reviewed for the period since the current permit was issued, including any actions taken relating to effluent violations. The permit compliance conditions were reviewed and all inspection reports for the same period were reviewed. Most violations of the permit that were documented during the period when the current permit was in effect have been addressed through enforcement actions.

**PERMIT DISCUSSION**

**Face Page**

The permittee is authorized to construct, install, modify, or operate a wastewater collection, treatment, control and disposal system. Permits discharge of treated effluent to the Columbia River[xx this should only be added if there is a reclaimed water use outfall] within limits set by Schedule A and the following schedules. All other discharges are prohibited.

**Schedule A - Waste Discharge limitations**

$BOD_5$ and TSS concentration and mass limits

Based on the Main Stem Columbia River basin-specific minimum design criteria, during periods of low stream flow, treatment resulting in a monthly average concentration of no less than 20 mg/L for $BOD_5$ and TSS is required. During the rest of the year, wastewater treatment resulting in a

minimum of secondary treatment or equivalent control is required. Secondary treatment for this facility is defined as monthly average concentration limit of 30 mg/L for $BOD_5$ (or 25 mg/L for $CBOD_5$) and 30 mg/L for TSS.

The Department is proposing concentration limits at the basin minimum design criteria. The proposed monthly average summer $BOD_5$ concentration limit is 20 mg/L. The proposed monthly average summer TSS concentration limit is 20 mg/L.

The proposed monthly average winter $BOD_5$ concentration limit is 30 mg/L. The proposed monthly average winter TSS concentration limit is 30 mg/L.

The summer mass limits for biochemical oxygen demand ($BOD_5$) and suspended solids (TSS) are based on the design average dry weather flow (ADWF) of .013 MGD and the monthly average $BOD_5$ and TSS concentration limits of 20 mg/L and 20 mg/L, respectively.

The winter mass load limits for the facility are based on the design ADWF of .013 MGD and the monthly average $BOD_5$ or TSS concentration limits of 30 mg/L and 30 mg/L, respectively. The limits are in accordance with OAR 340-041-0061(10)(e). All mass load limitations are rounded to two significant figures.

$BOD_5$ and TSS

The limits are:

(1) May 1 - October 31:

| Parameter | Average Effluent Concentrations Monthly | Monthly Average lb/day | Daily Maximum Lbs |
|---|---|---|---|
| $BOD_5$ | 20 mg/L | 2.2 | 4.4 |
| TSS | 20 mg/L | 2.2 | 4.4 |

(2) November 1 - April 30:

| Parameter | Average Effluent Concentrations Monthly | Monthly Average lb/day | Daily Maximum Lbs |
|---|---|---|---|
| $BOD_5$ | 30 mg/L | 3.3 | 6.6 |
| TSS | 30 mg/L | 3.3 | 6.6 |

Calculations:

(1) Summer $BOD_5$

(a) 0.013 MGD x 8.34 #/gal x 20 mg/L monthly avg. = 2.2 lbs/day
(b) 2.2 lbs/day monthly avg. x 2.0 = 4.4 lbs/day daily max.

(2) Summer TSS

(a) 0.013 MGD x 8.34 #/gal x 20 mg/L monthly avg. = 2.2 lbs/day

(b) 2.2 lbs/day monthly avg. x 2.0 = 4.4 lbs/day daily max.

(3) Winter $BOD_5$

(a) MGD x 8.34 #/gal x 30 mg/L monthly avg. = 3.3 lbs/day
(b) 3.3 lbs/day monthly avg. x 2.0 = 6.6 lbs/day daily max.

(4) Winter TSS

(a) MGD x 8.34 #/gal x 30 mg/L monthly avg. = 3.3 lbs/day
(b) 3.3 lbs/day monthly avg. x 2.0 = 6.6 lbs/day daily max.

A review of recent monitoring data (see Attachment #A) indicates the City should generally be able to comply with the permit limits.

No changes from the previous permit are proposed.

BOD and TSS Percent Removal Efficiency

A minimum level of percent removal for $BOD_5$ and TSS for municipal dischargers is required by the Code of Federal Regulations (CFR) secondary treatment standards (40 CFR, Part 133). An 85 percent removal efficiency limit is included in the proposed permit to comply with federal requirements.

pH

The Lower Columbia Basin Water Quality Standard for pH is found in OAR 340-041-0104(1). The allowed range is 7.0 to 8.5. The proposed permit limits pH to the range 6.0 to 9.0. This limit is based on Federal wastewater treatment guidelines for sewage treatment facilities, and is applied to the majority of NPDES permittees in the state. Within the permittee's mixing zone, the water quality standard for pH does not have to be met. It is the Department's belief that mixing with ambient water within the mixing zone will ensure that the pH at the edge of the mixing zone meets the standard, and the Department considers the proposed permit limits to be protective of the water quality standard.

Bacteria

The proposed permit limits are based on an *E. coli* standard approved in January 1996. The proposed limits are a monthly geometric mean of 126 *E. coli* per 100 mL, with no single sample exceeding 406 *E. coli* per 100 mL. The new bacteria standard allows that if a single sample exceeds 406 *E. coli* per 100 mL, then the permittee may take five consecutive re-samples. If the log mean of the five re-samples is less than or equal to 126, a violation is not triggered. The re-sampling must be taken at four hour intervals beginning within 28 hours after the original sample was taken.

The proposed effluent limits are achievable through proper operation and maintenance.

Total Chlorine Residual

Because of the discharge location on a rocky cliff and through a gravel railway bed before reaching the receiving water, chlorine toxicity in the Columbia River is not an issue with this discharge. The Department has not proposed a chlorine limit in this permit.

Temperature

The discharge from this facility occurs after septic tank treatment and is 20% of the flow split off of the recirculating gravel filter. Chlorine is added entering a concrete underground contact chamber. Effluent leaves the plant via gravity to pipe that drops over a rocky 100 foot cliff to an undefined passage through gravels on the railway track bed. Thermal impacts from this facility are not an issue and no limitations are proposed for this facility

Mixing Zone and Zone of Immediate Dilution

The allowable mixing zone is that portion of the Columbia River contained within a radius extending out twenty (20) feet from the East bank of the river.

The Department believes that the beneficial uses of the receiving stream will not be affected by the discharge and this mixing zone and that the defined mixing zone meets the criteria in the rule.

**Schedule B - Minimum Monitoring and Reporting Requirements**

In 1988, the Department developed a monitoring matrix for commonly monitored parameters. Proposed monitoring frequencies for all parameters are based on this matrix and, in some cases, may have changed from the current permit. The proposed monitoring frequencies for all parameters correspond to those of facilities of similar size and complexity in the state.

Monitoring for *E. coli* must be performed in accordance with one of the methods approved by the Department.

Total chlorine residual and chlorine used must be monitored daily.

Daily monitoring of effluent flow is required in this permit. In addition, calibration of the flow meter is required on a regular basis.

Because recirculating gravel filters offer an aerobic fixed growth treatment process, ammonia is routinely nitrified and should be observed typically at less than 5 mg/L in the final effluent. If ammonia levels increase it may represent a problem with the gravel filter. In order to characterize the treatment facility's operation, ammonia monitoring is required quarterly on the effluent.

Discharge monitoring reports must be submitted to the Department monthly by the 15th day of the following month. The monitoring reports need to identify the principal operators designated by the

Permittee to supervise the treatment and collection systems. The reports must also include records concerning application of biosolids and all applicable equipment breakdowns and bypassing.

Schedule B of the permit includes the requirement for the submittal of an annual report on the transporting of sludge to another facility for any year when solids are removed.

**Schedule C - Compliance Conditions**

The proposed permit includes 3 compliance conditions with compliance deadlines. The requirements include:

1. Within 180 days of permit issuance the permittee shall have the existing disposal system evaluated by a qualified consultant experienced in the operation of recirculating gravel filters and submit the results of the evaluation to the Department. The evaluation should be comprehensive and, address any issues with the recirculating gravel filter to alleviate surface ponding and unequal distribution.

2. If the Department or Permittee determines that repair, upgrade or modification is needed, Permittee shall develop and submit plans and specifications within 90 days of Department notification. If such plans and specifications cannot be reasonably developed and submitted within such period, Permittee shall immediately notify the Department and shall provide a written time schedule that is acceptable to the Department for submission of plans and specifications. Unless otherwise authorized by the Department, the Permittee shall complete all required upgrades within 90 days of plan approval.

3. The final condition requires the permittee to meet the compliance dates established in this schedule or notify the Department within 14 days following any lapsed compliance date.

**Schedule D - Special Conditions**

The proposed permit includes four special conditions. The requirements include:

1) That the permittee must have the facilities supervised by personnel certified by the Department in the operation of treatment and/or collection systems.

2) Schedule D includes a condition requiring the development and implementation of a contingency plan for the prevention and handling of spills and unplanned discharges.

3) The proposed permit includes a condition in Schedule D that prohibits any adverse impact on groundwater quality.

4) A condition that requires notification to the Department of facility malfunctions.

**Schedule F - General Conditions**

These include Standard Conditions applicable to domestic treatment facilities along with conditions related to Operation and Maintenance of Pollution Controls, Monitoring and Records, and Reporting Requirements along with Definitions applicable to this permit.

# Attachment A

## Riverwood STP

| Month | Influent | | Effluent | | | | | |
|---|---|---|---|---|---|---|---|---|
| | $BOD_5$(mg/L) | TSS (mg/L) | Flow (million gallons) daily average | Flow (million gallons) max day | $BOD_5$ | TSS | E. coli | $NH_3$-N |
| Feb-07 | 160 | 108 | 0.0119 | 0.0395 | <2 | <2 | 7 | |
| Jan-07 | 21 | 23 | 0.0128 | 0.0386 | 0 | 2 | 7 | |
| Dec-06 | 87 | 67 | 0.0129 | 0.0321 | <2 | <3 | <1 | |
| Nov-06 | 310 | 177 | 0.0162 | 0.0482 | <2 | 8 | 2 | |
| Oct-06 | 250 | 160 | 0.0052 | 0.0068 | <2 | <2 | nd | |
| Sep-06 | 280 | 143 | 0.0053 | 0.0086 | <3 | <2 | nd | |
| Aug-06 | 230 | 65 | 0.0049 | 0.0076 | <4 | <4 | nd | |
| Jul-06 | 220 | 105 | 0.0047 | 0.0079 | <3 | 4 | | |
| Jun-06 | 200 | 225 | 0.0065 | 0.0129 | <3 | <3 | | |
| May-06 | 200 | 125 | 0.0075 | 0.0125 | <3 | <2 | nd | |
| Apr-06 | 148 | 48 | 0.009 | 0.0121 | <3 | <3 | <1 | |
| Mar-06 | 112 | 46 | 0.0094 | 0.0193 | <3 | <3 | <2 | |
| Feb-06 | 140 | 133 | 0.0103 | 0.0235 | <3 | <3 | <1 | |
| Jan-06 | <18 | 11 | 0.0172 | 0.051 | <3 | 3 | 1 | |
| Dec-05 | 62 | 34 | 0.0126 | 0.0255 | <3 | <3 | 36 | |
| Nov-05 | 124 | 47 | 0.0071 | 0.0177 | <3 | <3 | <1 | |
| Oct-05 | 205 | 172 | 0.0078 | 0.0151 | <3 | <3 | <1 | |
| Sep-05 | 276 | 177 | 0.0065 | 0.0079 | <3 | <3 | <1 | |
| Aug-05 | 121 | 50 | 0.0052 | 0.0076 | <3 | <3 | <1 | |
| Jul-05 | <6 | 7 | 0.0035 | 0.0099 | <3 | 3 | <1 | |
| Jun-05 | | | 0.0043 | 0.0069 | | | | |
| May-05 | 107 | 37 | 0.0068 | 0.0178 | 3 | 5 | nd | |
| Apr-05 | 120 | 43 | 0.0073 | 0.0160 | 4 | 3 | nd | |
| Mar-05 | 220 | 57 | 0.0078 | 0.0422 | 4 | 2 | nd | |
| Feb-05 | 150 | 67 | 0.0066 | 0.0092 | 4 | 2 | nd | |
| Jan-05 | 91 | 50 | 0.0077 | 0.0149 | 4 | 3 | nd | |
| Dec-04 | 83 | 35 | 0.0083 | 0.0169 | 4 | 2 | nd | |
| Nov-04 | 58 | 43 | 0.0077 | 0.0155 | 4 | 2 | nd | |
| Oct-04 | 200 | 120 | 0.0034 | 0.0134 | 4 | 2 | nd | |
| Sep-04 | 190 | 50 | 0.0055 | 0.012 | 4 | 2 | nd | |
| Aug-04 | 220 | 210 | 0.0051 | 0.0121 | 4 | 2 | nd | |
| Jul-04 | 160 | 380 | 0.0025 | 0.0039 | 4 | 6 | nd | 6.6 |
| Jun-04 | 170 | 142 | 0.0037 | 0.0054 | 4 | 3 | nd | |
| May-04 | 270 | 230 | 0.0039 | 0.0070 | 6 | 7 | 10 | |
| Apr-04 | 150 | 200 | 0.0045 | 0.0045 | 6 | 3 | nd | 6.6 |
| Mar-04 | 130 | 190 | 0.0067 | 0.0089 | 6 | 3 | 6 | |
| Feb-04 | 130 | 160 | 0.006 | 0.0088 | 14 | 4 | <1 | |
| Jan-04 | 280 | 200 | 0.0062 | 0.0123 | 38 | 12 | 2419 | 7.2 |

R.9
P1

**SMITH Bryan**

**From:** SMITH Bryan
**Sent:** Monday, December 28, 2009 1:27 PM
**To:** CHRISTENSEN Lyle
**Cc:** SMITH Bryan
**Subject:** FW: magar: completed DMRs?

Hi again Lyle.

Did he come back and complete the DMRs by adding the operator certification information?

---

**From:** SMITH Bryan
**Sent:** Monday, December 28, 2009 1:16 PM
**To:** CHRISTENSEN Lyle
**Cc:** SMITH Bryan
**Subject:** magar: e.coli data

Lyle, he sent me some data, I think related to violations 3 and 4, showing he did sample for effluent bacteria (e. coli) during the 6 months we claimed he didn't.

I'll route you a copy. When you get it, can you tell me what it means to you?

Thanks, bryan.



EXHIBIT # R9
Item M 000374

22

**SMITH Bryan**

**From:** SMITH Bryan
**Sent:** Monday, December 28, 2009 1:16 PM
**To:** CHRISTENSEN Lyle
**Cc:** SMITH Bryan
**Subject:** magar: e.coli data

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Thanks, bryan.

12.9

R3

**SMITH Bryan**

**From:** CHRISTENSEN Lyle
**Sent:** Monday, December 28, 2009 1:37 PM
**To:** SMITH Bryan
**Subject:** RE: magar: completed DMRs?

No

---

**From:** SMITH Bryan
**Sent:** Monday, December 28, 2009 1:27 PM
**To:** CHRISTENSEN Lyle
**Cc:** SMITH Bryan
**Subject:** FW: magar: completed DMRs?

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**To:** CHRISTENSEN Lyle
**Cc:** SMITH Bryan
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I'll route you a copy. When you get it, can you tell me what it means to you?

Thanks, bryan.

R. 9

P4

**SMITH Bryan**

**From:** CHRISTENSEN Lyle
**Sent:** Monday, January 04, 2010 4:09 PM
**To:** SMITH Bryan
**Subject:** RE: magar: e.coli data

You are correct, I just looked back at the PEN I had written dated July 7, 2009. In that PEN I only cited the May violation as one example of the issues that DEQ had concerns about. I guess we added the others when we worked through the actual enforcement action. My personal belief is that he has the opportunity to correct his omissions by revising his DMRs, but at some point that opportunity has to be lost. If we choose to reduce his penalty some because we believe he is just lazy in filling out his legally required report forms that is our prerogative but not requirement. I suspect that he has done all of the required bacteria sampling and just not reported it to us or he gave it to us in a form where we really cannot accept it. When he sends data on a piece of paper and does not certify and sign that paper then we do not accept it. Those Alexin Analytical reports constitute support for data recorded on his submitted DMR. If we accept that data without a revised DMR, next thing you know he'll just mail us a pile of data. Obviously I am looking forward to our next discussion with him.

---

**From:** SMITH Bryan
**Sent:** Monday, January 04, 2010 2:59 PM
**To:** CHRISTENSEN Lyle
**Subject:** RE: magar: e.coli data

I think this relates to Violation Three. Check out section II, Paragraph 12 of the Notice. We actually said he missed 6 months (not just May 2009), and now he has shown that in fact he didn't miss all 6 of them, but only missed 2 of them: May 2008 and September 2008.

However, it's all moot when it comes to the penalty amount because he still committed the violation twice(just not six times), and the O Factor should stay at 2 because the violation still occurred on two or more moths.

Does that sound about right to you?

(the other issues are bigger picture items we eventually need to address when discussing termination and future penalties, because we can't be allowing him to be so sloppy)

---

**From:** CHRISTENSEN Lyle
**Sent:** Monday, January 04, 2010 11:30 AM
**To:** SMITH Bryan
**Subject:** RE: magar: e.coli data

Bryan, yes, I saw the data. These are the reports he should be getting from his contract laboratory. If he does not include the information he receives from his lab on the monthly discharge monitoring report submitted to DEQ then DEQ has no information to evaluate compliance from. These four analysis reports show that he did sample bacteria in June of 2008 and in January , May and June of 2009. I think the DEQ enforcement action only cited him for the missing data on the May 2009 DMR. He just needs to be certain that his monitoring reports are complete when they are submitted or he is subject to further action. Magar has so many other things that are less than satisfactory these seem to be a low priority to question at this time. If I were doing an audit at his plant site and looked at these sheets I would probably raise the following questions ...

Looking at the reports I do see some interesting (puzzling) items.

P 5

**SMITH Bryan**

**From:** CHRISTENSEN Lyle
**Sent:** Monday, January 04, 2010 11:30 AM
**To:** SMITH Bryan
**Subject:** RE: magar: e.coli data

Bryan, yes, I saw the data. These are the reports he should be getting from his contract laboratory. If he does not include the information he receives from his lab on the monthly discharge monitoring report submitted to DEQ then DEQ has no information to evaluate compliance from. These four analysis reports show that he did sample bacteria in June of 2008 and in January , May and June of 2009. I think the DEQ enforcement action only cited him for the missing data on the May 2009 DMR. He just needs to be certain that his monitoring reports are complete when they are submitted or he is subject to further action. Magar has so many other things that are less than satisfactory these seem to be a low priority to question at this time. If I were doing an audit at his plant site and looked at these sheets I would probably raise the following questions ...

Looking at the reports I do see some interesting (puzzling) items.

- Many of the reports (6/5/08, 5/21/09,6/14/09) indicate the samples are taken at 3:00 a.m. which seems a little unusual.
- Though most of the reports indicate the data reported in the same month as the sample, for some reason the May 2008 sample was not reported until December 2009.
- Even though bacteria samples typically need to be evaluated within 6 hours for meeting holding time requirements, only the May 2008 sample indicates that the holding time was exceeded.
- Some of the sample sheets (the 2009 samples) indicate a "temperature on receipt" which I assume is when the samples are picked up at the plant site. Yet these temperatures readings vary as to what is reported (5,9 & 12 degrees C). He also reports effluent temperature on the DMR and these temperatures would indicate the samples have been cooled prior to receipt. We cannot know what the sample "receipt" time is for certain, but I assume samples are taken and put on ice. Unless they are received at various times I would expect that the temperatures would be less varied for a chilled sample.

Lyle 503 -229-5295

---

**From:** SMITH Bryan
**Sent:** Monday, January 04, 2010 8:49 AM
**To:** SMITH Bryan; CHRISTENSEN Lyle
**Subject:** RE: magar: e.coli data

Hi Lyle. Did you receive and review the fax I sent you last week from Magar?
(see below)
Thanks, Bryan

---

**From:** SMITH Bryan
**Sent:** Monday, December 28, 2009 1:16 PM
**To:** CHRISTENSEN Lyle
**Cc:** SMITH Bryan
**Subject:** magar: e.coli data

Lyle, he sent me some data, I think related to violations 3 and 4, showing he did sample for effluent bacteria (e. coli) during the 6 months we claimed he didn't.

**SMITH Bryan**

**From:** CHRISTENSEN Lyle
**Sent:** Monday, January 04, 2010 4:31 PM
**To:** SMITH Bryan
**Subject:** RE: Magar memo

Looks good. Regarding the pH meter, I think the issue was that he believed the meter wasn't properly "calibrated". pH meters are subject to "drift" on the instruments themselves due to fluctuating temperature and other circumstances and should be calibrated each time you use them. I have never done this but I have seen other operators do it. The basic premise is that you have two standards (samples having known pH values) that you put your meter in and adjust the meter to those standards. One standard should be above the expected sample value and one standard below. Once adjusted you do your actual test on your wastewater. You do not test your wastewater and then check your meter against the standards. I got the impression from Mr. Magar he likes to keep using the meter without calibrating it until he gets a bad test result and then attribute it to a "calibration" error or the meter being out of calibration.

---

**From:** SMITH Bryan
**Sent:** Monday, January 04, 2010 3:05 PM
**To:** CHRISTENSEN Lyle
**Subject:** Magar memo

This is what I'll be giving Ieah.

R-11 1 page

Note nd=nt detected limits less 2 less 1 e.coli
for bod &TSS

| DATE | bod inf. | bod eff | tss inf. | tss eff. | e.coli eff | ammonia |
|---|---|---|---|---|---|---|
| 4/3/2008 | 68 | 0 | 64 | 6 less 1 | | |
| 5/22/2008 | 70 | 0 | 75 | 0 less 1 | | |
| 6/5/2008 | 130 nd | | 115 | 2 less 1 | | .42mg/L |
| 7/3/2008 | 99 nd | | 100 | 3 less 1 | | |
| 8/7/2008 | 100 nd | | 84 | 2 less 1 | | |
| 9/4/2008 | 68 nd | | 67 | 2 less 1 | | nd |
| 10/2/2008 | 100 nd | | 120 | 3 no samp | | |
| 10/28/2008 | | | | | 10 | |
| 11/6/2008 | 82 nd | | 84 | 3 | 1 | |
| 12/5/2008 | 27 nd | | 8 | 2 | 92 | nd |
| | | | | less 1 | | |
| 1/16/2009 | 140 nd | | 110 nd | | 2 | |
| 2/5/2009 | 89 nd | | 70 nd | | | |
| 19-Feb | | | | | 83 | |
| | | | | | | |
| 3/13/2009 | | | | LESS 1 | | |
| 3/5/2009 | 110 nd | | 116 | 2 | | |
| 4/2/2009 | 115 | 3 | 120 | 4 | | |
| 4/9/2009 | | | | LESS 1 | | |
| 5/21/2003 | 130 | 2 | 53 | 5 ***LESS 1*** | | |
| 6/4/2009 | 24 less 2 | | 38 less2 | LESS 1 | | 0.6mg/L |
| 7/2/2009 | 100 less 2 | | 50 less2 | LESS 1 | | |
| 8/6/2009 | 100 less 2 | | 44 less2 | LESS 1 | | |
| 9/3/2009 | 140 less2 | | 60 less2 | LESS 1 | | |
| 9/25/2009 | | | | | | 0.6mg/L |
| 10/1/2009 | 110 less2 | | 95 less2 | LESS 1 | | |
| 11/18/2009 | 52 less2 | | 32 less2 | LESS 1 | | 2 readings |
| 12/3/2009 | 130 less2 | | 160 | 3 LESS 1 | | |
| 1/21/2010 | 93 less2 | | 136 less2 | LESS 1 | | |
| 2/4/2010 | 170 | 18 | 84 | 8 | 402 | |
| 2/18/2010 | | | | | 8 | |
| | | | | | | |
| 3/18/2010 | | | | ammonia | | 2.5mg/l |
| 3/4/2010 | 130 nd | | 105 | 3 | 1 | |
| 4/30/2010 | 100 nd | | 80 | 2 less1 | | |
| 4/30/2010 | 110 nd | | 75 | 3 less1 | | |
| 5/6/2010 | 100 nd | | 80 | 5 less1 | | |

EXHIBIT #R11

R.12 p. 1

| | 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|---|
| month | bod mg/ml | tss mg/ml | | av.daily effluent gallons | av daily eff x 2 |
| | Apr-08 | 2 | 6 | 6321 | 12642 |
| | May-08 | 2 | 2 | 10000 | 20000 |
| | Jun-08 | 2 | 2 | 4644 | 9288 |
| | Jul-08 | 2 | 2 | 6500 | 13000 |
| | Aug-08 | 2 | 2 | 5278 | 10556 |
| | Sep-08 | 2 | 2 | 3188 | 6376 |
| | Oct-08 | 2 | 2 | 2647 | 5294 |
| | Nov-08 | 2 | 3 | 6344 | 12688 |
| | Dec-08 | 2 | 2 | 12998 | 25976 |
| | Jan-09 | 2 | 2 | 6698 | 13396 |
| | Feb-09 | 2 | 2 | 6963 | 13926 |
| | Mar-09 | 2 | 2 | 7095 | 14190 |
| | Apr-09 | 3 | 4 | 7668 | 15336 |

EXHIBIT #R12

R. 12 P. 2

| 6 | 7 | 8 | 9 | 10 |
|---|---|---|---|---|
| daily eff in liters liters | bod mass in GRAMS daily | tss mass in GRAMS daily | bod mass in ozs daily | tss mass in ozs, daily |
| 47849.97 | 95.69994 | 287.09982 | 3.381623322 | 10.14486996 |
| 75700 | 151.4 | 151.4 | 5.312280702 | 5.256944444 |
| 35155.08 | 70.31016 | 70.31016 | 2.467023158 | 2.441325 |
| 49205 | 98.41 | 984.1 | 3.452982456 | 34.17013889 |
| 39954.46 | 79.90892 | 79.90892 | 2.803821754 | 2.774615278 |
| 24133.16 | 48.26632 | 48.26632 | 1.693555088 | 1.675913889 |
| 20037.79 | 40.07558 | 40.07558 | 1.406160702 | 1.391513194 |
| 48024.08 | 96.04816 | 144.07224 | 3.370110877 | 5.002508333 |
| 98319.16 | 196.63832 | 196.63832 | 6.899590175 | 6.827719444 |
| 50703.86 | 101.40772 | 101.40772 | 3.558165614 | 3.521101389 |
| 52709.91 | 105.41982 | 105.41982 | 3.698941053 | 3.660410417 |
| 53709.15 | 107.4183 | 107.4183 | 3.769063158 | 3.729802083 |
| 58046.76 | 1741.4028 | 232.18704 | 61.10185263 | 8.06205 |

R. 13 p 1.

## Notes on Mass Calculations and the values inserted in the monitoring reports.

The first column is the month in question. This column has no number.

The second column (1) is the measured BOD in mg/ L on the day it was measured and as reported in the DMR.

The next column column (2) is the measured TTS in mg/L on the day it was measured and as report in the DMR.

The next column (3) is the flow as measured by the water output at the pump house.

The next column (4) is the flow doubled. The flow is double to avoid the criticism that the water output at the pump house does not reflect the actual output. Or that the actual output of BOD and the TSS may be higher than what the water meters recoded is probably more than what is recorded. Making this assumption has the effect of doubling the end result of any mass calculation. This precaution is taken because respondent wants to demonstrate that the facility is operating well below the permissible limits set forth in the permit. The permissible limits are the most important parameters that should be heeded and those are in Schedule A of the permit. Exceeding the permisible limits are violations and that is pollution.

The next column (5) is the flow in gallons converted to flow in liters. This is done by multiplying the previous column by 3.785. There are 3.785 liters to the gallon.

The next column (6) is the bod measured in **grams** which is obtained by dividing multiplying column (1) by column (5) to obtain to obtain the weight put out in milligrams and dividing by 1000 to obtain the mass in grams instead of milligrams which is what is reported. The ALJ should note the units which the lab DMR asks for the BOD and the TSS **in metric units.**

The next column (7) is obtained by multiplying column (5) column (2) is TTS measured in milligrams which number is then divided by 1000 to obtain the TSS grams. Again the DMR, s asks for records in metric units.

To convert the grams to ounces column (6) and column (7) are divided y 28.35. The factor is actually 28.349 and rounded off to 38.35 Therefore column (8) is the daily output of BOD in **ounces** and column (9) is the daily output of TSS in **ounces.**

Some remarks are now in order before we put in the final mass numbers in the DMR that are asked for by the permit;

1- The BOD and TSS are only reported for the day or more precisely the instant they were measured. Not the **entire day.**
2- The monthly computation is obviously taking the day, or more precisely the instant the sample is collected as typical of the **entire month.**



EXHIBIT # R13

R. 13 p. 2

3- To report the monthly mass calculations for both TSS and BOD each daily quantity is multiplied by the number of days in the particular month, that is 31 for Jan., 28 or 29 in February, 31 in March and so on. 30 days have September, April, June and November All the rest have 31 except February which has 28 but 29 on every leap year and every leap century.

4- The numbers given in the above tables are ounces per day. The reporting requiems of the permit are that the masses be reported in pounds discharged monthly. To obtain the number of pounds the ounces are converted in to pounds. 16 ounces to each pound.

5- The number of pounds are multiplied by the number of days in the particular month correcting for leap years.

General interest.

A leap year is a year whose number is divisible by 4. However a leap century has to be divided by 400 years in order to find a Februay 29 in that year. That is 1600 and 2000 are leap centuries; 1700.1800 and 1900 are not leap centuries. Therefore the dates February 29, 1600 and February 29, 2000 are valid days but February 29, 1700 and 1800 and 1900 are not. Next time this mistake will be commonly made could be when one says February 29, 2100. Just think of the poor kids born on February 29, in a leap century. **One birthday every 400 years.**

R. 14 p 1

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| *Column1* | |
|---|---|
| Mean | 6.881053 |
| Standard Error | 0.008505 |
| Median | 6.9 |
| Mode | 6.9 |
| Standard Deviation | 0.082893 |
| Sample Variance | 0.006871 |
| Kurtosis | 2.585282 |
| Skewness | 0.369379 |
| Range | 0.5 |
| Minimum | 6.7 |
| Maximum | 7.2 |
| Sum | 653.7 |
| Count | 95 |
| Confidence Level(95.0%) | 0.016886 |

EXHIBIT # R14

R.14 p. 2

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R-14 p-3

2.16 p.1

Form **1040** Department of the Treasury – Internal Revenue Service **U.S. Individual Income Tax Return** **2008** (99) IRS Use Only – Do not write or staple in this space.

OMB No. 1545-0074

For the year Jan. 1-Dec. 31, 2008, or other tax year beginning , 2008, ending , 20

Label — Use the IRS label. Otherwise, please print or type.

MAGAR EDWARD MAGAR
14102 NE 40TH
VANCOUVER WA 98682

Your social security number [redacted]

Spouse's social security no.

▲ You must enter your SSN(s) above. ▲

Checking a box below will not change your tax or refund.

**Presidential Election Campaign** Check here if you, or your spouse if filing jointly, want $3 to go to this fund (see instructions) ▶ ☐ You ☐ Spouse

**Filing Status** Check only one box.

1 ☐ Single
2 ☐ Married filing jointly (even if only one had income)
3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶
4 ☒ Head of household (with qualifying person). (See inst.) If qualifying person is a child but not your dependent, enter child's name here. ▶
5 ☐ Qualifying widow(er) with dependent child (see inst.)

**Exemptions** If more than four dependents, see instructions.

6a ☒ **Yourself.** If someone can claim you as a dependent, **do not** check box 6a — Boxes checked on 6a and 6b: 1
b ☐ **Spouse**
c **Dependents:**

| (1) First name | Last name | (2) Dependent's social security number | (3) Dependent's relationship to you | (4) ✓ if qualifying child for child tax credit (see inst.) |
|---|---|---|---|---|
| SHELLEY | MAGAR | [redacted] | DAUGHTER | |
| YASMEEN | MAGAR | [redacted] | DAUGHTER | X |

No. of children on 6c who: lived with you: 2; did not live with you due to divorce or separation (see inst.):
Dependents on 6c not entered above:
Add numbers on lines above ▶ 3

d Total number of exemptions claimed

**Income** Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see instructions.

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

| | | | |
|---|---|---|---|
| 7 | Wages, salaries, tips, etc. Attach Form(s) W-2 | 7 | 0 |
| 8a | **Taxable** interest. Attach Schedule B if required | 8a | 4,060 |
| b | **Tax-exempt** interest. **Do not** include on line 8a — 8b | | |
| 9a | Ordinary dividends. Attach Schedule B if required | 9a | |
| b | Qualified dividends (see instructions) — 9b | | |
| 10 | Taxable refunds, credits, or offsets of state and local income taxes (see instructions) | 10 | |
| 11 | Alimony received | 11 | |
| 12 | Business income or (loss). Attach Schedule C or C-EZ | 12 | |
| 13 | Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐ | 13 | |
| 14 | Other gains or (losses). Attach Form 4797 | 14 | |
| 15a | IRA distributions — 15a — b Taxable amount | 15b | |
| 16a | Pensions and annuities — 16a — b Taxable amount | 16b | |
| 17 | Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E | 17 | 47,801 |
| 18 | Farm income or (loss). Attach Schedule F | 18 | |
| 19 | Unemployment compensation | 19 | |
| 20a | Social security benefits — 20a — 8,316 — b Taxable amount (see inst.) | 20b | 7,069 |
| 21 | Other income. | 21 | |
| 22 | Add the amounts in the far right column for lines 7 through 21. This is your **total income** ▶ | 22 | 58,930 |

**Adjusted Gross Income**

| | | | |
|---|---|---|---|
| 23 | Educator expenses (see instructions) | 23 | |
| 24 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106/2106-EZ | 24 | |
| 25 | Health savings account deduction. Attach Form 8889 | 25 | |
| 26 | Moving expenses. Attach Form 3903 | 26 | |
| 27 | One-half of self-employment tax. Attach Schedule SE | 27 | |
| 28 | Self-employed SEP, SIMPLE, and qualified plans | 28 | |
| 29 | Self-employed health insurance deduction (see instructions) | 29 | |
| 30 | Penalty on early withdrawal of savings | 30 | |
| 31a | Alimony paid b Recipient's SSN ▶ | 31a | |
| 32 | IRA deduction (see instructions) | 32 | |
| 33 | Student loan interest deduction (see instructions) | 33 | |
| 34 | Tuition and fees deduction. Attach Form 8917 | 34 | |
| 35 | Domestic production activities ded. Attach Form 8903 | 35 | |
| 36 | Add lines 23 through 31a and 32 through 35 | 36 | 0 |
| 37 | Subtract line 36 from line 22. This is your **adjusted gross income** ▶ | 37 | 58,930 |



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JVA 08 10401 TWF 27304 Copyright Forms (Software Only) - 2008 TW

Form 1040 (2008) MAGAR [redacted] Page 2

| | | | | | |
|---|---|---|---|---|---|
| Tax and Credits | 38 | Amount from line 37 (adjusted gross income) | | 38 | 58,930 |
| | 39a | Check [X] You were born before January 2, 1944, [ ] Blind. [redacted] [ ] Spouse was born before January 2, 1944, [ ] Blind. Total boxes checked ▶ 39a | 1 | | |
| Standard Deduction for -- | b | If your spouse itemizes on a separate return or you were a dual-status alien, see inst. and check here ▶ 39b [ ] | | | |
| | c | Check if standard deduction includes real estate taxes or disaster loss (see inst.) ▶ 39c [ ] | | | |
| • People who checked any box on line 39a, 39b, or 39c or who can be claimed as a dep., see inst. | 40 | Itemized deductions (from Schedule A) or your standard deduction (see left margin) | | 40 | 22,914 |
| | 41 | Subtract line 40 from line 38 | | 41 | 36,016 |
| | 42 | If line 38 is over $119,975, or you provided housing to a Midwestern displaced individual, see instructions. Otherwise, multiply $3,500 by the total number of exemptions claimed on line 6d. | | 42 | 10,500 |
| | 43 | Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- | | 43 | 25,516 |
| | 44 | Tax (see inst.). Check if any tax is from: a [ ] Form(s) 8814 b [ ] Form 4972 | | 44 | 3,256 |
| | 45 | Alternative minimum tax (see instructions). Attach Form 6251 | | 45 | |
| • All others: Single or Married filing separately, $5,450 Married filing jointly or Qualifying widow(er), $10,900 Head of household, $8,000 | 46 | Add lines 44 and 45 ▶ | | 46 | 3,256 |
| | 47 | Foreign tax credit. Attach Form 1116 if required | 47 | | |
| | 48 | Credit for child & dependent care expenses. Attach Form 2441 | 48 | | |
| | 49 | Credit for the elderly or the disabled. Attach Schedule R | 49 | | |
| | 50 | Education credits. Attach Form 8863 | 50 | | |
| | 51 | Retirement savings contributions credit. Attach Form [redacted] | 51 | | |
| | 52 | Child tax credit (see instructions). Attach Form [redacted] if required | 52 | 1,000 | |
| | 53 | Credits from Form: a [ ] 8396 b [ ] 8839 c [ ] 5695 | 53 | | |
| | 54 | Other credits from Form: a [ ] 3800 b [ ] 8801 c [ ] | 54 | | |
| | 55 | Add lines 47 through 54. These are your total credits | | 55 | 1,000 |
| | 56 | Subtract line 55 from line 46. If line 55 is more than line 46, enter -0- ▶ | | 56 | 2,256 |
| Other Taxes | 57 | Self-employment tax. Attach Schedule SE | | 57 | |
| | 58 | Unreported social security and Medicare tax from Form: a [ ] 4137 b [ ] 8919 | | 58 | |
| | 59 | Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required | | 59 | |
| | 60 | Additional taxes: a [ ] AEIC payments b [ ] Household employment taxes. Attach Schedule H | | 60 | |
| | 61 | Add lines 56 through 60. This is your total tax ▶ | | 61 | 2,256 |
| Payments | 62 | Federal income tax withheld from Forms W-2 and 1099 | 62 | | |
| If you have a qualifying child, attach Schedule EIC. | 63 | 2008 estimated tax payments & amt. applied from 2007 return | 63 | | |
| | 64a | Earned income credit (EIC) | 64a | | |
| | b | Nontaxable combat pay election 64b | | | |
| | 65 | Excess social security and tier 1 RRTA tax withheld (see inst.) | 65 | | |
| | 66 | Additional child tax credit. Attach Form 8812 | 66 | | |
| | 67 | Amount paid with request for extension to file (see instructions) | 67 | 1,000 | |
| | 68 | Credits from Form: a [ ] 2439 b [ ] 4136 c [ ] 8801 d [ ] 8885 | 68 | | |
| | 69 | First-time homebuyer credit. Attach Form 5405 | 69 | | |
| | 70 | Recovery rebate credit (see instructions) RRC | 70 | | |
| | 71 | Add lines 62 through 70. These are your total payments ▶ | | 71 | 1,000 |
| Refund | 72 | If line 71 is more than line 61, subtract line 61 from line 71. This is the amount you overpaid | | 72 | |
| Direct deposit? See inst. and fill in 73b, 73c, and 73d, or Form 8888. | 73a | Amount of line 72 you want refunded to you. If Form 8888 is attached, check here ▶ [ ] | | 73a | 0 |
| | b | Routing no. [redacted] c Type: [ ] Checking [ ] Savings | | | |
| | d | Account no. [redacted] | | | |
| | 74 | Amt. of line 72 you want applied to your 2009 estimated tax ▶ | 74 | | |
| Amount You Owe | 75 | Amount you owe. Subtract line 71 from line 61. For details on how to pay, see instructions ▶ | | 75 | 1,279 |
| | 76 | Estimated tax penalty (see instructions) | 76 | 23 | |

**Third Party Designee** Do you want to allow another person to discuss this return with the IRS (see instructions)? [X] Yes. Complete the following. [ ] No

Designee's name ▶ PREPARER Phone no. ▶ Personal identification number (PIN) ▶

**Sign Here** Joint return? See instructions. Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

| Your signature | Date | Your occupation | Daytime phone number |
|---|---|---|---|
| Spouse's signature. If a joint return, both must sign. | Date | Spouse's occupation | |

**Paid Preparer's Use Only**

| Preparer's signature | Date | Check if self-employed [ ] | Preparer's SSN or PTIN [redacted] |
|---|---|---|---|
| Firm's name (or yours if self-employed), address, & ZIP code | REILLY ACCOUNTING<br>2301 STOUT RD<br>UNIONTOWN, WA 99179 | EIN 82-0486412<br>Phone no. (509) 229-3799 | |

Item M 000403

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SCHEDULES A&B (Form 1040)

Department of the Treasury Internal Revenue Service (99)

# Schedule A -- Itemized Deductions

▶ Attach to Form 1040. ▶ See Instructions for Schedules A&B (Form 1040).

OMB No. 1545-0074

**2008**

Attachment Sequence No. 07

Name(s) shown on Form 1040: MAGAR EDWARD MAGAR

Your social security no.: [redacted]

**Medical and Dental Expenses**

Caution. Do not include expenses reimbursed or paid by others.

1 Medical and dental expenses (see instructions): SEE DEDUCTION ATTACHMENT — 1: 4,431

2 Enter amount from Form 1040, line 38 . . | 2 | 58,930

3 Multiply line 2 by 7.5% (.075) . . . . . 3: 4,420

4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- . . . . . 4: 11

**Taxes You Paid** (See instructions.)

5 State and local (check only one box):
- a [X] Income taxes, or ▶ . . . . . 5: 4,824
- b [ ] General sales taxes

6 Real estate taxes (see instructions) . . . . . 6: 2,570

7 Personal property taxes . . . . . 7: 1,325

8 Other taxes. ▶ 8:

9 Add lines 5 through 8 . . . . . 9: 8,719

**Interest You Paid** (See instructions.)

Note. Personal interest is not deductible.

10 Home mortgage interest and points reported to you on Form 1098 . . 10: 14,184

11 Home mortg. int. not reported to you on Form 1098. If paid to seller, show that person's name, ID no., & addr. ▶ 11: 0

12 Points not reported to you on Fm. 1098. See inst. for special rules . . 12:

13 Qualified mortgage insurance premiums (see instructions) . . . . . 13:

14 Investment interest. Attach Form 4952 if required. (See instructions.) 14:

15 Add lines 10 through 14 . . . . . 15: 14,184

**Gifts to Charity**

If you made a gift and got a benefit for it, see instructions.

16 Gifts by cash or check. If you made any gift of $250 or more, see instructions 16:

17 Other than by cash or check. If any gift of $250 or more, see instructions. You must attach Form 8283 if over $500 . . . . . 17:

18 Carryover from prior year . . . . . 18:

19 Add lines 16 through 18 . . . . . 19: 0

**Casualty and Theft Losses**

20 Casualty or theft loss(es). Attach Form 4684. (See instructions.) . . . . . 20: 0

**Job Expenses and Certain Miscellaneous Deductions** (See instructions.)

21 Unreimbursed empl. exp. You must attach Form 2106 or 2106-EZ if required ▶ 21:

22 Tax preparation fees . . . . . 22: 900

23 Other expenses ▶ 23:

24 Add lines 21 through 23 . . . . . 24: 900

25 Enter amount from Form 1040, line 38 . . | 25 | 58,930

26 Multiply line 25 by 2% (.02) . . . . . 26: 1,179

27 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0- . . . . . 27: 0

**Other Miscellaneous Deductions**

28 Other -- from list in instructions. List type and amount ▶ 28:

**Total Itemized Deductions**

29 Is Form 1040, line 38, over $159,950 (over $79,975 if married filing separately)?
- [X] No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40. ▶ . . . . . ▶ 29: 22,914
- [ ] Yes. Your deduction may be limited. See instructions for the amount to enter.

30 If you elect to itemize deductions even though they are less than your standard deduction, check here ▶ [ ]



For Paperwork Reduction Act Notice, see Form 1040 instructions. Schedule A (Form 1040) 2008

JVA 08 AB12 TWF 27042 Copyright Forms (Software Only) - 2008 TW

Schedule A&B (Form 1040) 2008 OMB No. 1545-0074 Page 2

Name(s) shown on Form 1040. Do not enter name and social security number if shown on other side.
MAGAR EDWARD MAGAR

Your social security no. [redacted]

## Schedule B -- Interest and Ordinary Dividends

Attachment Sequence No. 08

### Part I Interest

(See the instructions for Form 1040, line 8a.)

Note. If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

| | | | Amount |
|---|---|---|---|
| 1 | List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see instructions and list this interest first. Also, show that buyer's social security number and address ▶ | | |
| | VARIOUS | | 236 |
| | ZIONS FIRST NATIONAL BANK | | 3,824 |
| | | 1 | |
| 2 | Add the amounts on line 1 | 2 | 4,060 |
| 3 | Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815 | 3 | |
| 4 | Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a ▶ | 4 | 4,060 |

Note. If line 4 is over $1,500, you must complete Part III.

### Part II Ordinary Dividends

(See the instructions for Form 1040, line 9a.)

Note. If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

| | | | Amount |
|---|---|---|---|
| 5 | List name of payer ▶ | 5 | |
| 6 | Add the amounts on line 5. Enter the total here and on Form 1040, line 9a ▶ | 6 | 0 |

Note. If line 6 is over $1,500, you must complete Part III.

### Part III Foreign Accounts and Trusts

(See instructions.)

You must complete this part if you (a) had over $1,500 of taxable interest or ordinary dividends; or (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

| | | Yes | No |
|---|---|---|---|
| 7a | At any time during 2008, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See instructions for exceptions and filing requirements for Form TD F 90-22.1 | | X |
| b | If "Yes," enter the name of the foreign country ▶ | | |
| 8 | During 2008, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions | | X |

# 1

SCHEDULE E
(Form 1040)
Department of the Treasury
Internal Revenue Service (99)

## Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

▶ Attach to Form 1040, 1040NR, or Form 1041. ▶ See Instructions for Schedule E (Form 1040).

OMB No. 1545-0074
2008
Attachment Sequence No. 13

Name(s) shown on return
MAGAR EDWARD MAGAR

Your social security no. [redacted]

**Part I** Income or Loss From Rental Real Estate and Royalties **Note.** If you are in the business of renting personal property, use Schedule C or C-EZ (see instructions). If you are an individual, report farm rental income or loss from Form 4835 on pg. 2, line 40.

1 List the type and address of each rental real estate property:

A RIVERWOOD TRAILER COURT
RAINIER, OR

B SYRINGA & LONEY TRAILER COURTS
MOSCOW, ID

C PORTLAND PROPERTIES
PORTLAND, OR

2 For each rental real estate prop. listed on line 1, did you or your family use it during the tax year for personal purposes for more than the greater of:
- 14 days or
- 10% of the total days rented at fair rental value?
(See instructions)

| | Yes | No |
|---|---|---|
| A | | X |
| B | | X |
| C | | X |

| | | Properties A | Properties B | Properties C | | Totals (Add columns A, B, and C.) |
|---|---|---|---|---|---|---|
| **Income:** | | | | | | |
| 3 Rents received | 3 | 136,195 | 288,206 | 54,230 | 3 | 478,631 |
| 4 Royalties received | 4 | | | | 4 | |
| **Expenses:** | | | | | | |
| 5 Advertising | 5 | 225 | | | | |
| 6 Auto and travel (see instructions) | 6 | 2,644 | 1,146 | 2,797 | | |
| 7 Cleaning and maintenance | 7 | 6,661 | 467 | | | |
| 8 Commissions | 8 | | | | | |
| 9 Insurance | 9 | 3,397 | 6,008 | 2,300 | | |
| 10 Legal and other professional fees | 10 | | 1,180 | 1,205 | | |
| 11 Management fees | 11 | | 25,938 | | | |
| 12 Mortgage interest paid to banks, etc. (see instructions) | 12 | 9,250 | 78,988 | 26,837 | 12 | 115,075 |
| 13 Other interest | 13 | | | | | |
| 14 Repairs | 14 | 14,253 | 13,662 | 10,290 | | |
| 15 Supplies | 15 | 2,229 | 695 | | | |
| 16 Taxes | 16 | 9,204 | 21,865 | 9,100 | | |
| 17 Utilities | 17 | 11,324 | 34,855 | 8,716 | | |
| 18 Other (list) ▶ SEE ATTACHMENT | 18 | 20,931 | 30,189 | 12,619 | | |
| 19 Add lines 5 through 18 | 19 | 80,118 | 214,993 | 73,864 | 19 | 368,975 |
| 20 Depreciation expense or depletion (see instructions) | 20 | 34,487 | 8,857 | 18,511 | 20 | 61,855 |
| 21 Total expenses. Add lines 19 and 20 | 21 | 114,605 | 223,850 | 92,375 | | |
| 22 Income or (loss) from rental real estate or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see instructions to find out if you must file Form 6198 | 22 | 21,590 | 64,356 | -38,145 | | |
| 23 Deductible rental real estate loss. **Caution.** Your rental real estate loss on line 22 may be limited. See instructions to find out if you must file Form 8582. Real estate professionals must complete line 43 on page 2 | 23 | ( ) | ( ) | ( 38,145 ) | | |
| 24 **Income.** Add positive amounts shown on line 22. Do not include any losses | | | | | 24 | 85,946 |
| 25 **Losses.** Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here | | | | | 25 | ( 38,145 ) |
| 26 **Total rental real estate and royalty income or (loss).** Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2 | | | | | 26 | 47,801 |

For Paperwork Reduction Act Notice, see instructions.



JVA 08 E1 TWF 27036 Copyright Forms (Software Only) - 2008 TW

# 2008 Federal Depreciation Schedule

MAGAR, MAGAR EDWARD [redacted]

06-21-2010

| Description | Date | Method | Year | Cost | Land/ Other | §179 | Spec Allow | Basis | Prior | Current |
|---|---|---|---|---|---|---|---|---|---|---|
| **Schedule E, Multiple #1** | | | | | | | | | | |
| LAND | 01-01-87 | S/L | 0 | 80,000 | 80,000 | 0 | 0 | 0 | 0 | 0 |
| RIVERWOOD PUMP | 01-01-87 | A S/L | 10 | 1,900 | 0 | 0 | 0 | 1,900 | 1,900 | 0 |
| RIVERWOOD #39 | 01-01-87 | A S/LHY | 10 | 1,800 | 0 | 0 | 0 | 1,800 | 1,800 | 0 |
| RIVERWOOD CT | 01-01-87 | S/LMM | 27.5 | 380,016 | 0 | 0 | 0 | 380,016 | 380,016 | 0 |
| RIVERWOOD #29 | 01-01-87 | A S/LHY | 10 | 2,000 | 0 | 0 | 0 | 2,000 | 2,000 | 0 |
| RIVERWOOD #33 | 01-01-90 | A S/LHY | 10 | 3,000 | 0 | 3,000 | 0 | 0 | 0 | 0 |
| RIVERWOOD #4 | 01-01-91 | A S/LHY | 10 | 3,000 | 0 | 0 | 0 | 3,000 | 3,000 | 0 |
| RIVERWOOD #28 | 01-01-91 | A S/L | 10 | 2,000 | 0 | 0 | 0 | 2,000 | 2,000 | 0 |
| RIVERWOOD #46 | 01-01-92 | A S/L | 10 | 4,000 | 0 | 0 | 0 | 4,000 | 4,000 | 0 |
| RIVERWOOD #32 | 01-01-92 | A S/L | 10 | 3,000 | 0 | 0 | 0 | 3,000 | 3,000 | 0 |
| RIVERWOOD #3 | 07-01-93 | A S/L | 10 | 5,000 | 0 | 0 | 0 | 5,000 | 4,500 | 0 |
| RIVERWOOD #15 | 01-01-94 | A S/L | 10 | 6,792 | 0 | 0 | 0 | 6,792 | 6,792 | 0 |
| RIVERWOOD #10 | 01-01-94 | A S/L | 10 | 2,000 | 0 | 0 | 0 | 2,000 | 2,000 | 0 |
| RIVERWOOD #13 | 01-01-94 | A S/L | 10 | 3,000 | 0 | 0 | 0 | 3,000 | 3,000 | 0 |
| RIVERWOOD #11 | 01-01-97 | A S/L | 10 | 1,600 | 0 | 0 | 0 | 1,600 | 1,600 | 0 |
| RIVERWOOD WATER SYS | 01-01-98 | A S/L | 5 | 5,250 | 0 | 0 | 0 | 5,250 | 5,250 | 0 |
| RIVERWOOD #5 IMPROV | 01-01-98 | A S/L | 10 | 2,000 | 0 | 0 | 0 | 2,000 | 2,000 | 0 |
| RIVERWOOD WELL #2 | 01-01-98 | A S/LHY | 5 | 12,393 | 0 | 0 | 0 | 12,393 | 12,393 | 0 |
| CHLOR SYS - ENGINR | 06-30-03 | 150DBHY | 15 | 11,635 | 0 | 0 | 0 | 11,635 | 4,384 | 725 |
| RIVERWOOD CHLOR SYS | 06-30-03 | 150DBHY | 15 | 18,450 | 0 | 0 | 0 | 18,450 | 6,953 | 1,149 |
| CHLOR SYS - DEQ | 09-12-03 | 150DBHY | 15 | 5,520 | 0 | 0 | 0 | 5,520 | 2,080 | 344 |
| SEWER PUMP & EQ | 07-14-04 | 200DBHY | 7 | 55,000 | 0 | 0 | 0 | 55,000 | 37,818 | 4,912 |
| SEWER PROJECT | 07-14-04 | 150DBHY | 15 | 67,572 | 0 | 0 | 0 | 67,572 | 20,778 | 4,683 |
| HALF B-26 TRACTOR | 08-02-08 | 200DBMQ | 7 | 15,000 | 0 | 0 | 7,500 | 7,500 | 0 | 803 |
| HALF 18' TRAILER | 08-08-08 | 200DBMQ | 7 | 1,000 | 0 | 0 | 500 | 500 | 0 | 54 |
| SEWER IMPROV | 11-12-08 | 150DBMQ | 15 | 27,293 | 0 | 0 | 13,646 | 13,647 | 0 | 171 |
| 26 Assets | | Totals: | | 720,221 | 80,000 | 3,000 | 21,646 | 615,575 | 507,264 | 12,841 |
| **Schedule E, Multiple #2** | | | | | | | | | | |
| 9 WEST | 07-01-93 | S/L | 10 | 5,000 | 0 | 0 | 0 | 5,000 | 5,000 | 0 |
| WELL #10 | 11-19-98 | S/L | 10 | 7,549 | 0 | 0 | 0 | 7,549 | 7,549 | 0 |
| WATER SYSTEM IMPROV | 11-19-98 | S/LHY | 7 | 39,000 | 0 | 0 | 0 | 39,000 | 39,000 | 0 |
| SYRINGA FINANCE | 02-26-03 | S/L | 3 | 45,200 | 0 | 0 | 0 | 45,200 | 45,200 | 0 |
| POINTS | 02-07-06 | AMORT | 15 | 18,200 | 0 | 0 | 0 | 18,200 | 2,325 | 1,213 |
| HALF B-26 TRACTOR | 08-02-08 | 200DBMQ | 7 | 15,000 | 0 | 0 | 7,500 | 7,500 | 0 | 803 |
| HALF 18' TRAILER | 08-08-08 | 200DBMQ | 7 | 1,000 | 0 | 0 | 500 | 500 | 0 | 54 |
| 7 Assets | | Totals: | | 130,949 | 0 | 0 | 8,000 | 122,949 | 99,074 | 2,070 |
| **Schedule E, Multiple #3** | | | | | | | | | | |
| 1033 NW 15TH | 01-01-95 | S/LMM | 27.5 | 364,000 | 0 | 0 | 0 | 364,000 | 145,594 | 13,239 |
| 1015 NW 15TH | 01-01-96 | S/LMM | 27.5 | 145,000 | 0 | 0 | 0 | 145,000 | 53,624 | 5,272 |
| 2 Assets | | Totals: | | 509,000 | 0 | 0 | 0 | 509,000 | 199,218 | 18,511 |
| 35 Assets | | Grand Totals: | | 1,360,170 | 80,000 | 3,000 | 29,646 | 1,247,524 | 805,556 | 33,422 |

* Asset disposed this year
~C Carryover basis in like-kind exchange transaction
~B Excess basis in like-kind exchange transaction

Bank of America

Online Banking

R. 15

## Account Name : Bank of America Visa - [redacted]

### Balance Summary 06/08/2010

| $668.78 | $15,324.68 | $16,000.00 | $0.00 |
|---|---|---|---|
| Current Balance | Available Credit | Credit Limit | Amount Over the Limit |

* Available Credit includes purchases that have been authorized but have not yet posted to your account.

### Payment Summary

| | | | |
|---|---|---|---|
| **Payment Due Date** | 07/01/2010 | **Last Payment Amount** | $500.00 |
| **Current Payment Due** | $15.00 | **Date of Last Payment** | 06/02/2010 |
| **Past Due Amount** | $0.00 | **Previous Balance** | $651.41 |
| **Total Minimum Payment Due*** | **$15.00** | **Closing Date** | 07/02/2010 |

* As of your last statement

**View:** All Transactions **Statement:**06/08/2010

Posted Transactions

| Posted | Transaction Date | Transaction | Amount | Balance |
|---|---|---|---|---|
| 01/04/2010 | 01/04/2010 | Finance Charge | $1.50 | $58.93 |
| 01/04/2010 | 01/02/2010 | STARBUCKS USA 00004465 | $3.90 | $57.43 |
| 01/04/2010 | 01/01/2010 | PIZZA HUT 00029025 - 325012902 | $31.41 | $53.53 |
| 01/04/2010 | 01/01/2010 | STARBUCKS USA 00139170 | $2.99 | $22.12 |
| 01/01/2010 | 12/30/2009 | SEARS ROEBUCK 1049 | $632.99 | $19.13 |
| 01/01/2010 | 12/31/2009 | 000012310000769 S0 12100035SYRINGA CC | -$2,000.00 | -$613.86 |
| 12/30/2009 | 12/28/2009 | OFFICE MAX | $3.29 | $1,386.14 |
| 12/30/2009 | 12/29/2009 | 000012290000516 S0 12100035SYRINGA CC | -$1,500.00 | $1,382.85 |
| 12/29/2009 | 12/27/2009 | REGAL CINEMAS CASCADE | $25.50 | $2,882.85 |
| 12/25/2009 | 12/24/2009 | OMEGA ENGINEERING - CM122309 | $1,009.15 | $2,857.35 |
| 12/25/2009 | 12/24/2009 | STARBUCKS USA 00139170 | $7.26 | $1,848.20 |
| 12/25/2009 | 12/23/2009 | CENTURY 1002 Q36 | $13.50 | $1,840.94 |
| 12/24/2009 | 12/23/2009 | BOB'S AUTO GAS | $38.25 | $1,827.44 |
| 12/24/2009 | 12/22/2009 | YA HALA LEBANESE CUISI | $37.00 | $1,789.19 |

| | | | | |
|---|---|---|---|---|
| 12/24/2009 | 12/22/2009 | THE HOME DEPOT 4004 | $35.58 | $1,752.19 |
| 12/24/2009 | 12/23/2009 | 000012230000600 S0 12100035SYRINGA CC | -$2,000.00 | $1,716.61 |
| 12/23/2009 | 12/22/2009 | COLUMBIA RIVER PUD - 123456789 | $7.47 | $3,716.61 |
| 12/23/2009 | 12/22/2009 | COLUMBIA RIVER PUD - 123456789 | $44.59 | $3,709.14 |
| 12/23/2009 | 12/22/2009 | COLUMBIA RIVER PUD - 123456789 | $167.94 | $3,664.55 |
| 12/23/2009 | 12/22/2009 | COLUMBIA RIVER PUD - 123456789 | $27.10 | $3,496.61 |
| 12/23/2009 | 12/22/2009 | COLUMBIA RIVER PUD - 123456789 | $70.69 | $3,469.51 |
| 12/23/2009 | 12/22/2009 | COLUMBIA RIVER PUD - 123456789 | $3.04 | $3,398.82 |
| 12/22/2009 | 12/21/2009 | AMAZON MKTPLACE PMTS - V0QMJIOEC5W | $100.52 | $3,395.78 |
| 12/21/2009 | 12/20/2009 | AMAZON MKTPLACE PMTS - VVDKHBWMJOQ | $33.99 | $3,295.26 |
| 12/21/2009 | 12/19/2009 | AMAZON MKTPLACE PMTS - Q5PCSE97327 | $739.29 | $3,261.27 |
| 12/21/2009 | 12/19/2009 | AMAZON MKTPLACE PMTS - CZOKDX2DKX0 | $26.49 | $2,521.98 |
| 12/21/2009 | 12/19/2009 | AMAZON MKTPLACE PMTS - DU9YFX632WR | $69.95 | $2,495.49 |
| 12/21/2009 | 12/19/2009 | COLUMBIA ART & DRAFTIN | $25.99 | $2,425.54 |
| 12/21/2009 | 12/18/2009 | THE STEAK ESCAPE | $5.94 | $2,399.55 |
| 12/21/2009 | 12/18/2009 | T-MOBILE #420 - 420x33x22630x1 | $183.62 | $2,393.61 |
| 12/19/2009 | 12/18/2009 | FERGUSON ENT #1708 | $314.69 | $2,209.99 |
| 12/19/2009 | 12/18/2009 | OVERDRAFT PROTECTION TRANSACTION FEE | $10.00 | $1,895.30 |
| 12/19/2009 | 12/18/2009 | OVERDRAFT PROTECTION T | $100.00 | $1,885.30 |
| 12/18/2009 | 12/17/2009 | INFO.EXPERIANDIRECT.CO - 258732811 | $14.95 | $1,785.30 |
| 12/18/2009 | 12/16/2009 | MCCOY PLUMBING AND HEA - 1 | $1,511.79 | $1,770.35 |
| 12/18/2009 | 12/16/2009 | STARBUCKS USA 00101782 | $4.17 | $258.56 |
| 12/17/2009 | 12/16/2009 | 000012160000910 S0 12100035SYRINGA CC | -$1,000.00 | $254.39 |
| 12/15/2009 | 12/14/2009 | OREGON PUBLIC | $90.00 | $1,254.39 |

| | | | | |
|---|---|---|---|---|
| | | BROADCAS - IDCE94OMI3 | | |
| 12/15/2009 | 12/14/2009 | INSTANTCAST - 34376347648009613379 | $14.95 | $1,164.39 |
| 12/15/2009 | 12/13/2009 | ARBYS 6608 00066084 | $7.99 | $1,149.44 |
| 12/15/2009 | 12/13/2009 | BARNES & NOBLE #2262 | $4.23 | $1,141.45 |
| 12/15/2009 | 12/13/2009 | BARNES & NOBLE #2262 | $20.68 | $1,137.22 |
| 12/14/2009 | 12/13/2009 | FRY'S ELECTRONICS #16 | $28.98 | $1,116.54 |
| 12/12/2009 | 12/10/2009 | BARNES & NOBLE #2077 | $2.65 | $1,087.56 |
| 12/11/2009 | 12/10/2009 | LES SCHWAB TIRES #0243 | $313.37 | $1,084.91 |
| 12/10/2009 | 12/08/2009 | BARNES & NOBLE #2754 | $6.29 | $771.54 |
| 12/09/2009 | 12/08/2009 | AMERICAN BACKFLOW SERV | $60.00 | $765.25 |
| 12/08/2009 | 12/07/2009 | PSU PARKING 4TH AVE | $4.50 | $705.25 |
| 12/08/2009 | 12/07/2009 | PSU PARKING 4TH AVE | $6.00 | $700.75 |
| 12/08/2009 | 12/07/2009 | SUNNY'S ESPRESSO ANQ66 | $3.50 | $694.75 |
| 12/07/2009 | 12/04/2009 | AMAZON.COM - OP5RK91GA2X | $219.99 | $691.25 |
| 12/04/2009 | 12/02/2009 | SAFEWAY STORE 00027904 - 089336758128231 | $3.74 | $471.26 |
| 12/04/2009 | 12/02/2009 | SAFEWAY STORE 00027904 - 009336751318805 | $3.99 | $467.52 |
| 12/02/2009 | 11/30/2009 | SAFEWAY STORE 00027904 - 089334738233005 | $2.99 | $463.53 |
| 12/02/2009 | 11/30/2009 | SAFEWAY STORE 00027904 - 009334747197819 | $7.98 | $460.54 |
| 12/02/2009 | 11/30/2009 | SAFEWAY STORE 00027904 - 009334655644316 | $3.75 | $452.56 |
| | | Beginning Balance as of 12/02/2009 | | $448.81 |

Bank of America Online Banking

## Account Name : Bank of America Visa - [redacted]

### Balance Summary 06/08/2010

| $668.78 | $15,324.68 | $16,000.00 | $0.00 |
|---|---|---|---|
| Current Balance | Available Credit | Credit Limit | Amount Over the Limit |

* Available Credit includes purchases that have been authorized but have not yet posted to your account.

### Payment Summary

| | | | |
|---|---|---|---|
| **Payment Due Date** | 07/01/2010 | **Last Payment Amount** | $500.00 |
| **Current Payment Due** | $15.00 | **Date of Last Payment** | 06/02/2010 |
| **Past Due Amount** | $0.00 | **Previous Balance** | $651.41 |
| **Total Minimum Payment Due*** | **$15.00** | **Closing Date** | 07/02/2010 |

* As of your last statement

**View:** All Transactions **Statement:**06/08/2010

Posted Transactions

| Posted | Transaction Date | Transaction | Amount | Balance |
|---|---|---|---|---|
| 02/02/2010 | 02/02/2010 | Finance Charge | $5.98 | $3,138.64 |
| 01/30/2010 | 01/29/2010 | TIME LIFE *U.S. - 01L54029104 | $24.99 | $3,132.66 |
| 01/30/2010 | 01/29/2010 | OHSU PARKING & TRANSPO | $6.30 | $3,107.67 |
| 01/29/2010 | 01/27/2010 | SUBWAY 00235812 - 130315720008462082 | $5.41 | $3,101.37 |
| 01/29/2010 | 01/27/2010 | THE HOME DEPOT 4007 | $114.53 | $3,095.96 |
| 01/28/2010 | 01/27/2010 | TARGET 00014332 | $8.27 | $2,981.43 |
| 01/28/2010 | 01/27/2010 | LES SCHWAB TIRES #0243 | $104.50 | $2,973.16 |
| 01/28/2010 | 01/26/2010 | MCCOY PLUMBING AND HEA - 1 | $37.94 | $2,868.66 |
| 01/28/2010 | 01/26/2010 | THE HOME DEPOT 4007 | $253.46 | $2,830.72 |
| 01/28/2010 | 01/26/2010 | PROJECT HOPE | $70.00 | $2,577.26 |
| 01/28/2010 | 01/26/2010 | NW GAS - 02500130001MV2YC000013499 | $20.00 | $2,507.26 |
| 01/28/2010 | 01/27/2010 | 000001270000446 S0 12100035SYRINGA CC | -$1,000.00 | $2,487.26 |
| 01/27/2010 | 01/25/2010 | TACO BELL #19886 | $6.46 | $3,487.26 |
| 01/27/2010 | 01/25/2010 | PROJECT HOPE | $35.00 | $3,480.80 |

Jan - Feb 2010

| | | | | |
|---|---|---|---|---|
| 01/27/2010 | 01/25/2010 | NW GAS - 02500130001MV2YC000012655 | $20.00 | $3,445.80 |
| 01/26/2010 | 01/25/2010 | OVERDRAFT PROTECTION TRANSACTION FEE | $10.00 | $3,425.80 |
| 01/26/2010 | 01/25/2010 | OVERDRAFT PROTECTION T | $200.00 | $3,415.80 |
| 01/26/2010 | 01/25/2010 | 000001250000653 S0 12100035SYRINGA CC | -$3,000.00 | $3,215.80 |
| 01/25/2010 | 01/23/2010 | THE HOME DEPOT 4007 | $29.63 | $6,215.80 |
| 01/25/2010 | 01/23/2010 | TARGET 00014332 | $5.20 | $6,186.17 |
| 01/25/2010 | 01/23/2010 | STARBUCKS USA 00116665 | $4.15 | $6,180.97 |
| 01/25/2010 | 01/23/2010 | WATKINS TRACTOR N SUPP | $633.45 | $6,176.82 |
| 01/25/2010 | 01/22/2010 | BURGER KING #5259 | $3.24 | $5,543.37 |
| 01/25/2010 | 01/22/2010 | STARBUCKS USA 00003798 | $2.06 | $5,540.13 |
| 01/23/2010 | 01/22/2010 | WAL-MART #2550 - 08515952550VS1YW000639591 | $14.76 | $5,538.07 |
| 01/23/2010 | 01/22/2010 | COLUMBIA RIVER PUD - 123456789 | $428.10 | $5,523.31 |
| 01/22/2010 | 01/20/2010 | LEGACY CAFE EH HEARTBE | $2.00 | $5,095.21 |
| 01/21/2010 | 01/20/2010 | WAL-MART #2550 - 08515952550VS1YW000634918 | $7.45 | $5,093.21 |
| 01/21/2010 | 01/20/2010 | CKT CRICKETCOMM - 000001 | $118.08 | $5,085.76 |
| 01/20/2010 | 01/19/2010 | BOB'S AUTO GAS | $45.00 | $4,967.68 |
| 01/20/2010 | 01/19/2010 | STARBUCKS USA 00139170 | $5.81 | $4,922.68 |
| 01/20/2010 | 01/19/2010 | NW SUNDANCE SERVICES | $500.00 | $4,916.87 |
| 01/20/2010 | 01/18/2010 | LEGACY CAFE EH HEARTBE | $1.89 | $4,416.87 |
| 01/20/2010 | 01/18/2010 | DENNY'S #7541 - 01974647541V17Y7000000186 | $58.00 | $4,414.98 |
| 01/19/2010 | 01/17/2010 | DAIRY QUEEN #17772 | $4.32 | $4,356.98 |
| 01/19/2010 | 01/17/2010 | VJ'S BARGAIN BARN, I | $603.00 | $4,352.66 |
| 01/19/2010 | 01/17/2010 | YUR'S RESTAURANT & LOU | $4.00 | $3,749.66 |
| 01/19/2010 | 01/17/2010 | YUR'S RESTAURANT & LOU | $5.00 | $3,745.66 |
| 01/19/2010 | 01/17/2010 | TACO BELL #46400046441 | $0.89 | $3,740.66 |
| 01/19/2010 | 01/17/2010 | STARBUCKS USA 00139170 | $3.50 | $3,739.77 |
| 01/19/2010 | 01/16/2010 | SMART PARK AMNO CHARGE | $4.50 | $3,736.27 |
| 01/19/2010 | 01/15/2010 | BURGER KING #12114 | $6.29 | $3,731.77 |
| 01/19/2010 | 01/15/2010 | BARNES & NOBLE #2262 | $2.50 | $3,725.48 |
| 01/16/2010 | 01/15/2010 | OMEGA ENGINEERING INC - | $1,181.55 | $3,722.98 |

Jan - Feb

| | | | | |
|---|---|---|---|---|
| | | 001930336400203359166O | | |
| 01/16/2010 | 01/15/2010 | BOB'S AUTO GAS | $43.00 | $2,541.43 |
| 01/16/2010 | 01/15/2010 | CITY COFFEE-4TH/SALMON | $1.75 | $2,498.43 |
| 01/16/2010 | 01/14/2010 | BURGER KING #8647 | $2.99 | $2,496.68 |
| 01/15/2010 | 01/14/2010 | OMEGA ENGINEERING INC - 001930344933203359166O | $1,140.85 | $2,493.69 |
| 01/15/2010 | 01/14/2010 | INSTANTCAST - 35280163608009613379 | $14.95 | $1,352.84 |
| 01/13/2010 | 01/11/2010 | SAFEWAY STORE 00027904 - 080012010805906 | $2.99 | $1,337.89 |
| 01/13/2010 | 01/11/2010 | SAFEWAY STORE 00027904 - 080011858449631 | $2.99 | $1,334.90 |
| 01/13/2010 | 01/11/2010 | STARBUCKS USA 00004754 | $3.85 | $1,331.91 |
| 01/12/2010 | 01/10/2010 | BARNES & NOBLE #2262 | $2.65 | $1,328.06 |
| 01/12/2010 | 01/11/2010 | OVERDRAFT PROTECTION TRANSACTION FEE | $10.00 | $1,325.41 |
| 01/12/2010 | 01/11/2010 | OVERDRAFT PROTECTION T | $100.00 | $1,315.41 |
| 01/12/2010 | 01/11/2010 | 000001110001573 S0 12100035SYRINGA CC | -$2,000.00 | $1,215.41 |
| 01/11/2010 | 01/10/2010 | WAL-MART #2550 - 08515952550VS1YW000539566 | $37.05 | $3,215.41 |
| 01/11/2010 | 01/09/2010 | BOB'S AUTO GAS | $43.02 | $3,178.36 |
| 01/11/2010 | 01/09/2010 | SAFEWAY STORE 00027904 - 160010114406845 | $3.99 | $3,135.34 |
| 01/11/2010 | 01/08/2010 | THE HOME DEPOT 1808 | $495.44 | $3,131.35 |
| 01/11/2010 | 01/08/2010 | THE HOME DEPOT 4007 | $45.60 | $2,635.91 |
| 01/09/2010 | 01/08/2010 | TIME LIFE *U.S. - 01E05008104 | $36.98 | $2,590.31 |
| 01/09/2010 | 01/08/2010 | LES SCHWAB TIRES #0243 | $209.42 | $2,553.33 |
| 01/09/2010 | 01/07/2010 | COUNTRY MEDIA INC- - 092602-00002 | $212.60 | $2,343.91 |
| 01/08/2010 | 01/07/2010 | COMMUNITY BUILDERS | $1,400.00 | $2,131.31 |
| 01/08/2010 | 01/06/2010 | SUBWAY 00449108 - 130315720004385746 | $5.39 | $731.31 |
| 01/07/2010 | 01/05/2010 | CK NAILS & HAIR | $15.00 | $725.92 |
| 01/05/2010 | 01/03/2010 | THE HOME DEPOT 4718 | $219.00 | $710.92 |
| 01/05/2010 | 01/02/2010 | BURGER KING #4670 | $2.99 | $491.92 |
| 01/05/2010 | 01/02/2010 | KAADY APPL INC | $220.00 | $488.93 |
| 01/05/2010 | 01/04/2010 | OVERDRAFT PROTECTION TRANSACTION FEE | $10.00 | $268.93 |

| | | | | |
|---|---|---|---|---|
| 01/05/2010 | 01/04/2010 | OVERDRAFT PROTECTION T | $200.00 | $258.93 |
| | | Beginning Balance as of 01/05/2010 | | $58.93 |

Bank of America

Online Banking

## Account Name : Bank of America Visa -

[redacted]

### Balance Summary 06/08/2010

| $668.78 | $15,324.68 | $16,000.00 | $0.00 |
|---|---|---|---|
| Current Balance | Available Credit | Credit Limit | Amount Over the Limit |

* Available Credit includes purchases that have been authorized but have not yet posted to your account.

### Payment Summary

| | | | |
|---|---|---|---|
| **Payment Due Date** | 07/01/2010 | **Last Payment Amount** | $500.00 |
| **Current Payment Due** | $15.00 | **Date of Last Payment** | 06/02/2010 |
| **Past Due Amount** | $0.00 | **Previous Balance** | $651.41 |
| **Total Minimum Payment Due*** | **$15.00** | **Closing Date** | 07/02/2010 |

* As of your last statement

**View:** All Transactions **Statement:**06/08/2010

Posted Transactions

| Posted | Transaction Date | Transaction | Amount | Balance |
|---|---|---|---|---|
| 03/02/2010 | | Interest Charged on Purchases | $0.00 | $335.14 |
| 03/02/2010 | 03/02/2010 | Interest Charged on Cash Advances | $2.10 | $335.14 |
| 03/02/2010 | | Interest Charged on Balance Transfers | $0.00 | $333.04 |
| 03/02/2010 | 03/01/2010 | OVERDRAFT PROTECTION - | $10.00 | $333.04 |
| 03/02/2010 | 02/28/2010 | STARBUCKS USA 00101782 | $6.17 | $323.04 |
| 03/02/2010 | 02/28/2010 | STARBUCKS USA 00101782 | $10.72 | $316.87 |
| 03/02/2010 | 02/28/2010 | BASKIN AND ROBBINS | $4.70 | $306.15 |
| 03/02/2010 | 02/28/2010 | THE HOME DEPOT 4004 | $2,156.12 | $301.45 |
| 03/02/2010 | 02/28/2010 | T-MOBILE #420 - 420x34x21107x1 | $55.18 | -$1,854.67 |
| 03/02/2010 | 03/01/2010 | OVERDRAFT PROTECTION T | $100.00 | -$1,909.85 |
| 03/02/2010 | 03/01/2010 | 000003010003262 S0 12100035SYRINGA CC | -$2,000.00 | -$2,009.85 |
| 02/27/2010 | 02/26/2010 | KUB-AVISTA CORP WEBPAY - 00614218022510 | $141.00 | -$9.85 |
| 02/27/2010 | 02/26/2010 | 000002260001743 S0 12100035SYRINGA CC | -$400.00 | -$150.85 |

Feb March

| | | | | |
|---|---|---|---|---|
| 02/26/2010 | 02/25/2010 | KUBRA-AVISTA WEB PAY - 04692083022510 | $4.25 | $249.15 |
| 02/26/2010 | 02/25/2010 | AMAZON.COM - OJDNKJ2BBT2 - SALES TAX AMT 0.01 | $13.21 | $244.90 |
| 02/26/2010 | 02/24/2010 | SUBWAY 00249508 - 140516120004268629 | $5.41 | $231.69 |
| 02/26/2010 | 02/25/2010 | 000002250001203 S0 12100035SYRINGA CC | -$380.00 | $226.28 |
| 02/25/2010 | 02/24/2010 | COLUMBIA RIVER PUD - 123456789 | $207.98 | $606.28 |
| 02/24/2010 | 02/23/2010 | COLUMBIA RIVER PUD - 123456789 | $201.35 | $398.30 |
| 02/22/2010 | 02/21/2010 | WAL-MART #2550 - 08515952550VS1YW000111669 | $41.55 | $196.95 |
| 02/22/2010 | 02/20/2010 | TIME LIFE *U.S. - 00HME051104 | $24.99 | $155.40 |
| 02/15/2010 | 02/14/2010 | INSTANTCAST - 36274171388009613379 | $14.95 | $130.41 |
| 02/15/2010 | 02/13/2010 | QUIZNOS GEG 31004724 - 4934 | $4.88 | $115.46 |
| 02/15/2010 | 02/13/2010 | ZIP TRIP 16 07039738 | $3.91 | $110.58 |
| 02/15/2010 | 02/12/2010 | ROYAL MOTOR INN - 241 - ARRIVAL DATE 2/11/10 | $92.88 | $106.67 |
| 02/15/2010 | 02/12/2010 | THE BREAKFAST CLUB | $5.00 | $13.79 |
| 02/15/2010 | 02/12/2010 | TACO BELL # 2111611472 | $12.80 | $8.79 |
| 02/15/2010 | 02/12/2010 | HODGINS DRUG STORE | $5.85 | -$4.01 |
| 02/13/2010 | 02/12/2010 | ONE WORLD CAFE LLC | $3.43 | -$9.86 |
| 02/13/2010 | 02/11/2010 | TACO TIME MOSCOW | $4.07 | -$13.29 |
| 02/12/2010 | 02/11/2010 | ONE WORLD CAFE LLC | $4.00 | -$17.36 |
| 02/11/2010 | 02/11/2010 | PAYMENT - THANK YOU | -$400.00 | -$21.36 |
| 02/11/2010 | 02/10/2010 | 000002100000691 S0 12100035SYRINGA CC | -$2,000.00 | $378.64 |
| 02/06/2010 | 02/06/2010 | OMEGA ENGINEERING INC - 8953 | -$760.00 | $2,378.64 |
| | | Beginning Balance as of 02/03/2010 | | $3,138.64 |

Feb - March 2010

Bank of America Online Banking

## Account Name : Bank of America Visa - [redacted]

### Balance Summary 06/09/2010

| $668.78 | $15,324.68 | $16,000.00 | $0.00 |
|---|---|---|---|
| Current Balance | Available Credit | Credit Limit | Amount Over the Limit |

* Available Credit includes purchases that have been authorized but have not yet posted to your account.

### Payment Summary

| | | | |
|---|---|---|---|
| **Payment Due Date** | 07/01/2010 | **Last Payment Amount** | $500.00 |
| **Current Payment Due** | $15.00 | **Date of Last Payment** | 06/02/2010 |
| **Past Due Amount** | $0.00 | **Previous Balance** | $651.41 |
| **Total Minimum Payment Due*** | **$15.00** | **Closing Date** | 07/02/2010 |

* As of your last statement

**View:** All Transactions **Statement:**06/09/2010

**Posted Transactions**

| Posted | Transaction Date | Transaction | Amount | Balance |
|---|---|---|---|---|
| 04/02/2010 | | Interest Charged on Purchases | $0.00 | -$222.24 |
| 04/02/2010 | | Interest Charged on Cash Advances | $0.00 | -$222.24 |
| 04/02/2010 | | Interest Charged on Balance Transfers | $0.00 | -$222.24 |
| 04/02/2010 | 04/02/2010 | MINIMUM INTEREST CHARGE | $1.50 | -$222.24 |
| 04/02/2010 | 04/01/2010 | OVERDRAFT PROTECTION - | $10.00 | -$223.74 |
| 04/02/2010 | 03/31/2010 | SAFEWAY STORE 00027904 - 280090672290762 | $2.99 | -$233.74 |
| 04/02/2010 | 03/31/2010 | SAFEWAY STORE 00027904 - 080090680103290 | $3.63 | -$236.73 |
| 04/02/2010 | 03/31/2010 | SLABTOWN | $5.00 | -$240.36 |
| 04/02/2010 | 04/01/2010 | OVERDRAFT PROTECTION T | $100.00 | -$245.36 |
| 04/02/2010 | | + TRANS FROM 4313512102398953 156 | $0.00 | -$345.36 |
| 04/01/2010 | 03/30/2010 | 000003310001512 S0 12100035SYRINGA CC | -$1,500.00 | -$345.36 |
| 03/31/2010 | 03/30/2010 | AMAZON MKTPLACE PMTS - LMDIO54L0LF | $9.87 | $1,154.64 |



March - Apr 2010

| | | | | |
|---|---|---|---|---|
| 03/31/2010 | 03/30/2010 | AMAZON MKTPLACE PMTS - LMSEBU5OAS3 | $49.43 | $1,144.77 |
| 03/31/2010 | 03/29/2010 | 000003300001312 S0 12100035SYRINGA CC | -$1,500.00 | $1,095.34 |
| 03/30/2010 | 03/29/2010 | AMAZON MKTPLACE PMTS - C4UK18YWSFI | $15.74 | $2,595.34 |
| 03/27/2010 | 03/26/2010 | OVERDRAFT PROTECTION - | $10.00 | $2,579.60 |
| 03/27/2010 | 03/26/2010 | AMAZON MKTPLACE PMTS - GDCC08YQ82U | $23.28 | $2,569.60 |
| 03/27/2010 | 03/26/2010 | OVERDRAFT PROTECTION T | $100.00 | $2,546.32 |
| 03/26/2010 | 03/26/2010 | AMAZON MKTPLACE PMTS - O8C05NZUQYY | $87.99 | $2,446.32 |
| 03/26/2010 | 03/24/2010 | LEGACY CAFE GS LOVEJOY | $1.80 | $2,358.33 |
| 03/24/2010 | 03/23/2010 | AMAZON MKTPLACE PMTS - EPS68LX46OP | $29.15 | $2,356.53 |
| 03/24/2010 | 03/22/2010 | THE HOME DEPOT 1808 | $480.97 | $2,327.38 |
| 03/24/2010 | 03/22/2010 | T-MOBILE #420 - 420x33x25118x1 | $69.99 | $1,846.41 |
| 03/24/2010 | 03/22/2010 | BARNES & NOBLE #2077 | $2.65 | $1,776.42 |
| 03/24/2010 | 03/23/2010 | 000003230000779 S0 12100035SYRINGA CC | -$1,000.00 | $1,773.77 |
| 03/23/2010 | 03/21/2010 | SAFEWAY STORE 00027904 - 080080817625626 | $2.99 | $2,773.77 |
| 03/22/2010 | 03/20/2010 | BURGER KING #8647 | $4.79 | $2,770.78 |
| 03/22/2010 | 03/20/2010 | STARBUCKS USA 00139170 | $5.86 | $2,765.99 |
| 03/22/2010 | 03/19/2010 | YA HALA LEBANESE CUISI | $46.00 | $2,760.13 |
| 03/22/2010 | 03/19/2010 | STARBUCKS USA 00004465 | $2.90 | $2,714.13 |
| 03/20/2010 | 03/19/2010 | WAL-MART #2550 - 08515952550VS1YW000326531 | $13.83 | $2,711.23 |
| 03/19/2010 | 03/17/2010 | OMEGA ENGINEERING INC | $416.40 | $2,697.40 |
| 03/18/2010 | 03/16/2010 | FERGUSON ENT#3002 | $474.61 | $2,281.00 |
| 03/18/2010 | 03/15/2010 | STARBUCKS USA 00139170 | $10.17 | $1,806.39 |
| 03/17/2010 | 03/15/2010 | THE HOME DEPOT 1808 | $488.07 | $1,796.22 |
| 03/17/2010 | 03/15/2010 | INSTANTCAST | $14.95 | $1,308.15 |
| 03/16/2010 | 03/13/2010 | TIME LIFE *U.S. | $24.99 | $1,293.20 |
| 03/13/2010 | 03/10/2010 | THE HOME DEPOT 1808 | $331.42 | $1,268.21 |
| 03/13/2010 | 03/10/2010 | THE HOME DEPOT 1808 | $409.69 | $936.79 |
| 03/13/2010 | 03/10/2010 | STARBUCKS USA 00004465 | $3.25 | $527.10 |

| | | | | |
|---|---|---|---|---|
| 03/12/2010 | 03/10/2010 | COLUMBIA RIVER PUD | $14.00 | $523.85 |
| 03/12/2010 | 03/10/2010 | COLUMBIA RIVER PUD | $173.60 | $509.85 |
| 03/12/2010 | 03/10/2010 | COLUMBIA RIVER PUD | $14.47 | $336.25 |
| 03/12/2010 | 03/10/2010 | COLUMBIA RIVER PUD | $99.41 | $321.78 |
| 03/12/2010 | 03/10/2010 | COLUMBIA RIVER PUD | $14.00 | $222.37 |
| 03/12/2010 | 03/10/2010 | COLUMBIA RIVER PUD | $75.23 | $208.37 |
| 03/12/2010 | 03/10/2010 | COLUMBIA RIVER PUD | $43.99 | $133.14 |
| 03/09/2010 | 03/06/2010 | SUBWAY 00449108 | $7.16 | $89.15 |
| 03/09/2010 | 03/06/2010 | THE HOME DEPOT 4725 | $218.84 | $81.99 |
| 03/09/2010 | 03/05/2010 | THE HOME DEPOT 4007 | $19.56 | -$136.85 |
| 03/06/2010 | 03/06/2010 | OMEGA ENGINEERING INC - 8953 | -$1,126.00 | -$156.41 |
| 03/05/2010 | 03/03/2010 | LEGACY GOOD SAM BILLIN - 030310 | $300.00 | $969.59 |
| 03/04/2010 | 03/03/2010 | BUDGET WATER INTERNATI - 8953 | $329.00 | $669.59 |
| 03/03/2010 | 03/02/2010 | KFC # JO 27007 | $5.45 | $340.59 |
| | | Beginning Balance as of 03/03/2010 | | $335.14 |

Bank of America Online Banking

## Account Name : Bank of America Visa - [redacted]

### Balance Summary 06/08/2010

| $668.78 | $15,324.68 | $16,000.00 | $0.00 |
|---|---|---|---|
| Current Balance | Available Credit | Credit Limit | Amount Over the Limit |

* Available Credit includes purchases that have been authorized but have not yet posted to your account.

### Payment Summary

| | | | |
|---|---|---|---|
| **Payment Due Date** | 07/01/2010 | **Last Payment Amount** | $500.00 |
| **Current Payment Due** | $15.00 | **Date of Last Payment** | 06/02/2010 |
| **Past Due Amount** | $0.00 | **Previous Balance** | $651.41 |
| **Total Minimum Payment Due*** | **$15.00** | **Closing Date** | 07/02/2010 |

* As of your last statement

**View:** All Transactions **Statement:**06/08/2010

**Posted Transactions**

| Posted | Transaction Date | Transaction | Amount | Balance |
|---|---|---|---|---|
| 04/02/2010 | | Interest Charged on Purchases | $0.00 | -$222.24 |
| 04/02/2010 | | Interest Charged on Cash Advances | $0.00 | -$222.24 |
| 04/02/2010 | | Interest Charged on Balance Transfers | $0.00 | -$222.24 |
| 04/02/2010 | 04/02/2010 | MINIMUM INTEREST CHARGE | $1.50 | -$222.24 |
| 04/02/2010 | 04/01/2010 | OVERDRAFT PROTECTION - | $10.00 | -$223.74 |
| 04/02/2010 | 03/31/2010 | SAFEWAY STORE 00027904 - 280090672290762 | $2.99 | -$233.74 |
| 04/02/2010 | 03/31/2010 | SAFEWAY STORE 00027904 - 080090680103290 | $3.63 | -$236.73 |
| 04/02/2010 | 03/31/2010 | SLABTOWN | $5.00 | -$240.36 |
| 04/02/2010 | 04/01/2010 | OVERDRAFT PROTECTION T | $100.00 | -$245.36 |
| 04/02/2010 | | + TRANS FROM 4313512102398953 156 | $0.00 | -$345.36 |
| 04/01/2010 | 03/30/2010 | 000003310001512 S0 12100035SYRINGA CC | -$1,500.00 | -$345.36 |
| 03/31/2010 | 03/30/2010 | AMAZON MKTPLACE PMTS - LMDIO54L0LF | $9.87 | $1,154.64 |

through April
April - May
2010

| | | | | |
|---|---|---|---|---|
| 03/31/2010 | 03/30/2010 | AMAZON MKTPLACE PMTS - LMSEBU5OAS3 | $49.43 | $1,144.77 |
| 03/31/2010 | 03/29/2010 | 000003300001312 S0 12100035SYRINGA CC | -$1,500.00 | $1,095.34 |
| 03/30/2010 | 03/29/2010 | AMAZON MKTPLACE PMTS - C4UK18YWSFI | $15.74 | $2,595.34 |
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| 03/27/2010 | 03/26/2010 | AMAZON MKTPLACE PMTS - GDCC08YQ82U | $23.28 | $2,569.60 |
| 03/27/2010 | 03/26/2010 | OVERDRAFT PROTECTION T | $100.00 | $2,546.32 |
| 03/26/2010 | 03/26/2010 | AMAZON MKTPLACE PMTS - O8C05NZUQYY | $87.99 | $2,446.32 |
| 03/26/2010 | 03/24/2010 | LEGACY CAFE GS LOVEJOY | $1.80 | $2,358.33 |
| 03/24/2010 | 03/23/2010 | AMAZON MKTPLACE PMTS - EPS68LX46OP | $29.15 | $2,356.53 |
| 03/24/2010 | 03/22/2010 | THE HOME DEPOT 1808 | $480.97 | $2,327.38 |
| 03/24/2010 | 03/22/2010 | T-MOBILE #420 - 420x33x25118x1 | $69.99 | $1,846.41 |
| 03/24/2010 | 03/22/2010 | BARNES & NOBLE #2077 | $2.65 | $1,776.42 |
| 03/24/2010 | 03/23/2010 | 000003230000779 S0 12100035SYRINGA CC | -$1,000.00 | $1,773.77 |
| 03/23/2010 | 03/21/2010 | SAFEWAY STORE 00027904 - 080080817625626 | $2.99 | $2,773.77 |
| 03/22/2010 | 03/20/2010 | BURGER KING #8647 | $4.79 | $2,770.78 |
| 03/22/2010 | 03/20/2010 | STARBUCKS USA 00139170 | $5.86 | $2,765.99 |
| 03/22/2010 | 03/19/2010 | YA HALA LEBANESE CUISI | $46.00 | $2,760.13 |
| 03/22/2010 | 03/19/2010 | STARBUCKS USA 00004465 | $2.90 | $2,714.13 |
| 03/20/2010 | 03/19/2010 | WAL-MART #2550 - 08515952550VS1YW000326531 | $13.83 | $2,711.23 |
| 03/19/2010 | 03/17/2010 | OMEGA ENGINEERING INC | $416.40 | $2,697.40 |
| 03/18/2010 | 03/16/2010 | FERGUSON ENT#3002 | $474.61 | $2,281.00 |
| 03/18/2010 | 03/15/2010 | STARBUCKS USA 00139170 | $10.17 | $1,806.39 |
| 03/17/2010 | 03/15/2010 | THE HOME DEPOT 1808 | $488.07 | $1,796.22 |
| 03/17/2010 | 03/15/2010 | INSTANTCAST | $14.95 | $1,308.15 |
| 03/16/2010 | 03/13/2010 | TIME LIFE *U.S. | $24.99 | $1,293.20 |
| 03/13/2010 | 03/10/2010 | THE HOME DEPOT 1808 | $331.42 | $1,268.21 |
| 03/13/2010 | 03/10/2010 | THE HOME DEPOT 1808 | $409.69 | $936.79 |
| 03/13/2010 | 03/10/2010 | STARBUCKS USA 00004465 | $3.25 | $527.10 |

| | | | | |
|---|---|---|---|---|
| 03/12/2010 | 03/10/2010 | COLUMBIA RIVER PUD | $14.00 | $523.85 |
| 03/12/2010 | 03/10/2010 | COLUMBIA RIVER PUD | $173.60 | $509.85 |
| 03/12/2010 | 03/10/2010 | COLUMBIA RIVER PUD | $14.47 | $336.25 |
| 03/12/2010 | 03/10/2010 | COLUMBIA RIVER PUD | $99.41 | $321.78 |
| 03/12/2010 | 03/10/2010 | COLUMBIA RIVER PUD | $14.00 | $222.37 |
| 03/12/2010 | 03/10/2010 | COLUMBIA RIVER PUD | $75.23 | $208.37 |
| 03/12/2010 | 03/10/2010 | COLUMBIA RIVER PUD | $43.99 | $133.14 |
| 03/09/2010 | 03/06/2010 | SUBWAY 00449108 | $7.16 | $89.15 |
| 03/09/2010 | 03/06/2010 | THE HOME DEPOT 4725 | $218.84 | $81.99 |
| 03/09/2010 | 03/05/2010 | THE HOME DEPOT 4007 | $19.56 | -$136.85 |
| 03/06/2010 | 03/06/2010 | OMEGA ENGINEERING INC - 8953 | -$1,126.00 | -$156.41 |
| 03/05/2010 | 03/03/2010 | LEGACY GOOD SAM BILLIN - 030310 | $300.00 | $969.59 |
| 03/04/2010 | 03/03/2010 | BUDGET WATER INTERNATI - 8953 | $329.00 | $669.59 |
| 03/03/2010 | 03/02/2010 | KFC # JO 27007 | $5.45 | $340.59 |
| | | Beginning Balance as of 03/03/2010 | | $335.14 |

R-17

Table 2
WPCF and NPDES Domestic Treatment Facilities
Lagoon Treatment Facility Monitoring Requirements
(effluent monitoring for WPCF and NPDES permittees unless otherwise indicated)

| ITEM OR PARAMETER | DESIGN CAPACITY, MGD | | | | | | |
|---|---|---|---|---|---|---|---|
| | ≤0.05 | 0.05 - 0.10 | 0.11 - 0.50 | 0.51 - 1.00 | 1.01 - 5.00 | 5.01 - 10.00 | >10.00 |
| Total Flow[1] (influent & effluent) | Daily, Measurement | Daily, Measurement | Daily, Measurement | Daily, Measurement | Daily, Measurement by totalizing meter | Daily, Measurement by totalizing meter | Daily, Measurement by totalizing meter |
| Flow Meter Calibration | Annual, Verification | Annual, Verification | Annual, Verification | Annual, Verification | Semi-annual, Verification | Semi-annual, Verification | Quarterly, Verification |
| BOD[2] & TSS (influent & effluent) | 1/month, 24-hr composite | 1/month, 24-hr composite | Once every 2 weeks, 24-hr composite | 1/week, 24-hr composite | 2/week, 24-hr composite | 3/week, 24-hr composite | 3/week, 24-hr composite |
| Pounds Discharged BOD[2] & TSS (NDPES) | 1/month, Calculation | 1/month, Calculation | Once every 2 weeks, Calculation | 1/week, Calculation | 2/week, Calculation | 3/week, Calculation | 3/week, Calculation |
| pH (influent & effluent) | 2/week, Grab | 2/week, Grab | 2/week, Grab | 3/week, Grab | 3/week, Grab | Daily, Grab | Daily, Continous |
| Temperature[3] (NPDES) | 2/week, Grab | 2/week, Grab | 2/week, Grab | 3/week, Grab | 3/week, Grab | Daily, Grab | Daily, Continous |
| *E. coli* bacteria-or *fecal coliform* if permit requires (NPDES) | 1/month, Grab | once every 2 weeks, Grab | 1/week, Grab | 1/week, Grab | 2/week, Grab | 3/week, Grab | 3/week, Grab |
| Chlorine Residual or Ultraviolet Radiation Intensity (NPDES) | Daily, Grab | Daily, Grab | Daily, Grab | Daily, Grab | Daily, Grab | Daily, Grab | Daily, Continuous recording |
| BOD & TSS Average % Removal Efficiency (NPDES) | Monthly, Calculation | Monthly, Calculation | Monthly, Calculation | Monthly, Calculation | Monthly, Calculation | Monthly, Calculation | Monthly, Calculation |

Exhibit B, Item M, 06/04/24

Total flow reported is to be representative of flow(s) received, treated and discharged from the facility and may be influent, effluent or both depending upon the type and configuration of the treatment system and final discharge point(s).

In evaluating the appropriateness of the flow measurement location to characterize the wastewater flows, the permit writer should take into consideration: 1) recirculation flows and bypasses which may occur upstream of the flow measurement device, 2) waste streams which may enter the treatment process after the flow measurement device, 3) bypasses of the treatment process which occur after the influent measurement device, 4) discharges of effluent to irrigation or other uses which may not be recorded, and 5) systems where flow measurement does not account for evaporation and rainfall (lagoons and other storage systems).

It may be necessary to have the permittee submit to the Department a plan and schedule for implementing the changes necessary to provide accurate flow characterization or evaluate methods and procedures to provide the flow information requested. The permit writer should consider including a compliance schedule in the permit.

Frequency of analysis for BOD also applies for CBOD if one or both are reported.

Frequency of temperature analysis should be the same as pH, except should be continuous sampling when receiving water body is under a Total Daily Maximum Load, or when the site has water quality based effluent limit based on an excess thermal load calculation.

## T[illegible] 2
## WPCF and NPDES Do[illegible]stic Treatment Facilities
## Lagoon Treatment Facility Monitoring Requirements
## (effluent monitoring unless otherwise indicated)

| ITEM OR PARAMETER | DESIGN CAPACITY, MGD | | | | | | |
|---|---|---|---|---|---|---|---|
| | < 0.05 | 0.05 - 0.10 | 0.11 - 0.50 | 0.51 - 1.00 | 1.01 - 5.00 | 5.01 - 10.00 | > 10.00 |
| Priority Pollutant Monitoring – Pretreatment Program[4] (NPDES) (influent & effluent) | Semi-annual, using 3 consecutive days, 24-hour composite | Semi-annual, using 3 consecutive days, 24-hour composite | Semi-annual, using 3 consecutive days, 24-hour composite | Semi-annual, using 3 consecutive days, 24-hour composite | Semi-annual, using 3 consecutive days, 24-hour composite | Semi-annual, using 3 consecutive days, 24-hour composite | Quarterly, using 3 consecutive days, 24-hour composite |
| Effluent Priority Pollutant Monitoring[5] (NPDES) | N/A | N/A | N/A | N/A | Three scans 24-hour composite | Three scans 24-hour composite | Three scans 24-hour composite |
| Nutrients (NPDES)[6]: $NH_3$-N, $NO_2$+$NO_3$-N, TKN, Total Phosphorus | 1/month, 24-hr composite | 1/month, 24-hr composite | One every two weeks, 24-hr composite | One every two weeks, 24-hr composite | 1/week, 24-hr composite | 1/week, 24-hr composite | 1/week, 24-hr composite |
| $NH_3$-N[7] | 1/month, 24-hr composite | 1/month, 24-hr composite | Once every 2 weeks, 24-hr composite | Once every 2 weeks, 24-hr composite | 1/week, 24-hr composite | 1/week, 24-hr composite | 1/week, 24-hr composite |
| Total Coliform, Turbidity[8] | | | | | | | |
| Whole Effluent Toxicity[9] (NPDES) | N/A | N/A | N/A | N/A | Annually, or Quarterly within final year of permit | Annually, or Quarterly within final year of permit | Annually, or Quarterly within final year of permit |

[4] Required only when permittee is under a formal pretreatment program. Generally, pretreatment priority pollutant monitoring includes Ag, As, Cd, Cr, Cu, Hg, Mo, Ni, Pb, Se, Zn, and CN . However, program pretreatment coordinator should be consulted to determine toxics of concern.

[5] Sampling required as part of new EPA Form 2A guidance, August 1999. All treatment plants with a pretreatment program or a design capacity greater than 1million gallons per day (MGD) required to monitor for a list of parameters in Part D of EPA application (metals-total recoverable, cyanide, phenols, hardness, and 85, volatile organic compounds, acid-extractable, and base-neutral compounds). Three scans required after permit issuance. Two of the three samples must be taken no fewer than 4 months and no more than 8 months apart. Data from pretreatment priority pollutant monitoring may be used toward satisfying this requirement. Refer to Priority Pollutant Monitoring Guidance on intranet WQ permit corner for more information, http://deq05/wq/wqpermits/PCGuidance.htm.

[6] Required when permittee discharges to water quality limited segment or other sensitive receiving stream. Effluent only to be monitored at this time. Influent may be monitored at a future time to determine removal efficiency of system. Monitoring to occur during periods of low flow only (during summer low flow period if permit differentiates summer and winter limits), or other time of year if water quality concerns exist.

[7] Ammonia-Nitrogen monitoring to be reported at same frequency as CBOD to determine nitrogenous portion of oxygen demand. If nutrient monitoring is required, which includes $NH_3$-N, the more frequent analysis for $NH_3$-N must be included in the permit (i.e., below 0.10 MGD 1/week analysis required, above 0.51 MGD monitoring frequency is to coincide with CBOD monitoring frequency).

[8] If a facility disposes of treated effluent through reuse under Division 55, "The Regulations Pertaining to the Use of Reclaimed Water (Treated Effluent) from Sewage Treatment Plants", the permittee will be required to monitor for parameters in accordance with OAR 340, Division 55, Table I.

[9] Sampling required as part of new EPA Form 2A guidance, August 1999. Refer to Whole Effluent Toxicity Guidance on intranet WQ permit corner for more information, http://deq05/wq/wqpermits/PCGuidance.htm.

For: Judge Whitaker

Fax number: 503 612 4340

From: Magar Magar

Fax number:360-314 4781

Date: June 18, 2010

Regarding: informal request and renewed motion.

Number of pages: cover + 4. Also faxed to Bryan Smith and DEQ. All communications to you are also communicated to opposite party.



Received Time Jun. 18. 2010 12:55PM No. 7098

***Magar E. Magar***

**14102 NE 40th Street**
**Vancouver WA. 98682**

***Tel 360 314 4444, cell 503 929 1094 fax 360 314 4781***

**e-mail : calsport@msn.com**

***June 18, 2010***

***RE case number OAH Case Number 901410***

***Administrative Law Judge Monica Whitaker.***

Judge Whitaker
Office of Administrative Hearings
7995 SW Mohawk St.
Tualatin, Or. 97062.

Dear Judge Whitaker;

I enclose a copy of a letter I sent to Bryan Smith. In that letter I requested informally the following:

R.4 Original DMR's from mid-June 2002 to mid June 2007 (to be supplied) and

R.5 Original DMR's from mid June 2007 to date (to be supplied).

Those are exhibits in my case in chief.

It is my anticipation that Bryan Smith or the custodian of the records or some person at DEQ will informally comply.

If DEQ does not intend to honor this informal request then please take this letter as ***a renewed motion*** for the production of the records at the hearing.

The Exhibits are vital to my case .They are not in my custody. They are in the custody of the DEQ. I cannot present my case without them.

As I indicated to Bryan Smith, at your direction and at my expense I will provide acceptable substitutes as you instruct. I do quite understand that those documents are permanent records of the DEQ which will require substitution.

At present June 22 and June 23, 2010 are good dates. I see no reason why cannot proceed as scheduled.





Received Time Jun. 18. 2010 12:55PM,No. 7098

I do not anticipate speech difficulties but if they arise I will write what I intend to convey. It is much easier to understand me when I am face to face.

Very truly yours,

Magar E. Magar
Cc. Bryan Smith.
By fax. to Bryan





Received Time Jun. 18. 2010 12:55PM No. 7098

***Magar E. Magar***

**14102 NE 40th Street**
**Vancouver WA. 98682**

***Tel 360 314 4444, cell 503 929 1094 fax 360 314 4781***

***June 18, 2010***

***Bryan Smith***

***Environmental Law Specialist***

***811 SW 6th Avenue***

***Portland , Or 97204.***

***Re: OAH Case No. 901410.***

***Dear Bryan,***

**In light of Judge Monica Whitaker's Ruling on my motion for a subpoena that I seek to obtain the information informally I am asking the DEQ to bring to the hearing the original DMR which as you know have been amended.**

**Those DMR's I have designated as my exhibits R.4 and R.5 as follows on my Exhibit list**

R.4 Original DMR's from mid-June 2002 to mid June 2007 (to be supplied) and

R.5 Original DMR's from mid June 2007 to date (to be supplied).

I intend to offer those records into evidence in my case in chief .

**In your letter of June 9, 2010 you indicate that I am seeking discovery. Judge Whitaker has also got the same impression. I am not seeking discovery I know exactly what is on those documents and they are my exhibits R.4 and R.5 . I would like the custodian of the record to bring them to the hearing or you could bring them to the hearing or Lyle Christensen bring them to the hearing.**

**I took the precaution of paying the fee of $75 to have the older records brought from the archives. The records are now at the Northwest Regional office and therefore available for**



Received Time Jun. 18. 2010 12:55PM No. 7098

use at the hearing. After those Exhibits are inspected I shall at my expense and on the instructions of Judge Whitaker provide acceptable substitutes .

I have in the past month filled out the DEQ form for viewing those records. I have done that more than once. If it is necessary for me to do it again to have the records I will obviously do so. If it is necessary for me to supply a witness fee I will do so.

Following transmittal of this letter by fax and e-mail I shall call you. Sorry can not do that DEQ is closed today.

I am sending a copy of this letter to Judge Whitaker. If you are able to comply with my request then I shall so inform Judge Whitaker. If not then pursuant to Judge Whitakers that I ask informally which I am doing now I will ask for the subpoena.

*Very truly yours,*

*Magar E. Magar*

*cc. Judge Whitaker by fax.*



Received Time Jun. 18. 2010 12:55PM No. 7098

Oregon
Theodore R. Kulongoski, Governor

**Office of Administrative Hearings**
7995 SW Mohawk St.
Tualatin, OR 97062
(503) 612-4300
FAX (503) 612-4340

June 9, 2010

Magar E. Magar
14102 NE 40th St.
Vancouver, WA 98682

Re: Motion for Subpoena
OAH Case No. 901410
DEQ Case No. WQ/D-NWR-09-118

Dear Mr. Magar:

I am in receipt of your motion for subpoena, which you submitted via facsimile on June 7, 2010. In your motion, you ask that I issue a subpoena to the "agency or the custodian of the records in the northwest region office who have custody of the original DMR's submitted by Magar E. Magar on behalf of Riverwood from June 2002 to date June 2010."

OAR 137-003-0585 authorizes the issuance of subpoenas for the attendance of witnesses or the production of documents at the hearing. You have requested a subpoena from DEQ, a party to this proceeding. Therefore, it would be more appropriate for you to file a motion for discovery. OAR 340-003-0585 provides:

> (1) Motions for discovery will only be granted if the motion establishes that:
>
> (a) the participant seeking the information attempted to obtain the information through an informal process. If the participant is seeking information from a public agency, the participant must make a public record request prior to petitioning for discovery; and
>
> (b) the discovery request is reasonably likely to produce information that is generally relevant and necessary to the matters alleged in the formal enforcement action and the request for hearing or is likely to facilitate resolution of the case.
>
> (2) An administrative law judge is not authorized to order depositions or site visits unless the department authorizes the same in writing in the specific case.

You have not demonstrated that you have attempted to obtain the information you seek through an informal process. Therefore, I cannot grant a motion for discovery at this time.

This matter remains scheduled for a hearing on June 22 and 23, 2010.

Sincerely,

Monica Whitaker
Senior Administrative Law Judge
Office of Administrative Hearings

cc: Bryan Smith, DEQ

Oregon
Theodore R. Kulongoski, Governor

**Department of Environmental Quality**
Headquarters
811 SW Sixth Avenue
Portland, OR 97204-1390
(503) 229-5696
FAX (503) 229-6124
TTY (503) 229-6993

June 9, 2010

RECEIVED
JUN 14 2010
Office of Admin. Hearings

Judge Whitaker
Administrative Law Judge
Office of Administrative Hearings
P.O. Box 14020
Salem, OR 97309-4020

Re: Magar Edward Magar
OAH Case No. 901410
Notice of Civil Penalty Assessment and Order
Case No. WQ/D-NWR-09-118
Columbia County

Dear Judge Whitaker:

I am writing in response to Mr. Magar's June 7, 2010, Motion For Subpoena. OAR 137-003-0570(1) states "(B)efore requesting a discovery order, a party or the agency must seek the discovery through an informal exchange of information." DEQ has previously granted Mr. Magar permission to review the DMRs in question, but Mr. Magar has apparently not taken advantage of this opportunity. In the absence of a showing that Mr. Magar has made a public records request and had it denied by DEQ, his Motion For Subpoena should be denied.

Furthermore, OAR 137-003-0570(6) states "(A)ny discovery request must be reasonably likely to produce information that is generally relevant and necessary to the case, or is likely to facilitate resolution of the case." It is DEQ's position that only the DMRs for the months of violation in question, which span June 2008 through June 2009, are relevant.

Additionally, DEQ requests that, in the event to Mr. Magar's Motion For Subpoena is granted in whole or in part, your Order will provide clarity as to where and when the documents must be provided to Mr. Magar.

Finally, DEQ remains willing to grant Mr. Magar access to the documents in question, as evidenced by his statement that he has paid $75 to avail himself of this opportunity.

Sincerely,

Bryan Smith
Environmental Law Specialist

cc: Magar Edward Magar, 14102 N.E. 40th Vancouver, WA 98682

For: Judge Whitaker

Fax number: 503 612 4340

From: Magar Magar

Fax number:360-314 4781

Date: June 7, 2010

Regarding: motion for subpoena.

Number of pages: cover + 3. Also faxed to Bryan Smith and DEQ. All communications to you are also communicated to opposite party.

***Magar E. Magar***

**14102 NE 40th Street**
**Vancouver WA. 98682**

***Tel 360 314 4444, cell 503 929 1094 fax 360 314 4781***

***June 7, 2010***

***RE case number OAH Case Number 901410***

***Administrative Law Judge Monica Whitaker.***

Judge Whitaker
Office of Administrative Hearings
7995 SW Mohawk St.
Tualatin, Or. 97062.

Enclosed is a motion for subpoena for DEQ records from the Northwest Regional Office. I have paid the fees to have all the record at the Northwest Office. It does not matter who brings them as long as they are there and it would be nice if the records were there on the first day of the hearing.

I am finishing up my exhibits and hope to get them to you later to-day or tomorrow morning.

To update you on my medical status I completed chemo therapy in early April and was started on Radiation therapy. Today and tomorrow are the last two session of radiation. It has slowed me down bringing back the old asthma and more difficulty swallowing. Asthma is not a known side effect but swallowing is, worse. I am on steroids to check the swelling resulting from radiation. Nevertheless I am quite optimistic that all will proceed timely on the dates that you have set.

The lymphoma is gone as far as can be detected by the most sensitive (for lymphoma) technique which is the PET scan. But because this technique has a resolution of about 3 cms anything smaller cannot be detected hence radiation. Hopefully I will not suffer any further or more damaging after effects of radiation

Very truly yours,

Magar E. Magar.
cc. Bryan Smith By fax to 503 229 6124





Received Time Jun. 7. 2010 8:07PM No. 6591

Magar E. Magar
Pro Se.
14102 NE 40th St.
Vancouver, WA 98682
Phone # 360 314 4444
Fax # 360 314 4781
Cell # 503 929 1094
E: Mail: calsport@msn.com

Before the Department of Environmental Quality Commission
Of the State of Oregon

| | |
|---|---|
| In the Matter of Magar E. Magar,<br><br>Respondent | Case No.: No. WQ/D-NWR-09-118<br><br>Motion To For Subpoena For attendance of witness and Production of Original DMR's in Agency Custody spanning mid 2002 to date. |

Pursuant to OAR 137-003-0585 Respondent request the administrative Law Judge to issue a subpoena to the agency or the custodians of the records in the northwest region office who have custody of the original DMR's submitted by Magar E. Magar on behalf of Riverwood from June 2002 to date June 2010.

The general relevance of this request is the agency has selected only a portion of those records to introduce into evidence. The original records are the most reliable evidence some of which have been amended. Some or all the amendments are based on previously and timely gathered data which the agency knows whose full well that respondent has gathered and sent to the agency in another form.

There in no administrative rule imposing a time limit on making amendments as admitted by the agency and the matter was discussed in pre-hearing. Respondent was invited to complete the forms.

The older data is relevant it shows that although the 2002 permit and the 2007 permits have virtually identical requirement on BOD,TSS and bacteria no there were never any notice of violations issued on them. In fact for about six and half years no notices of violations of





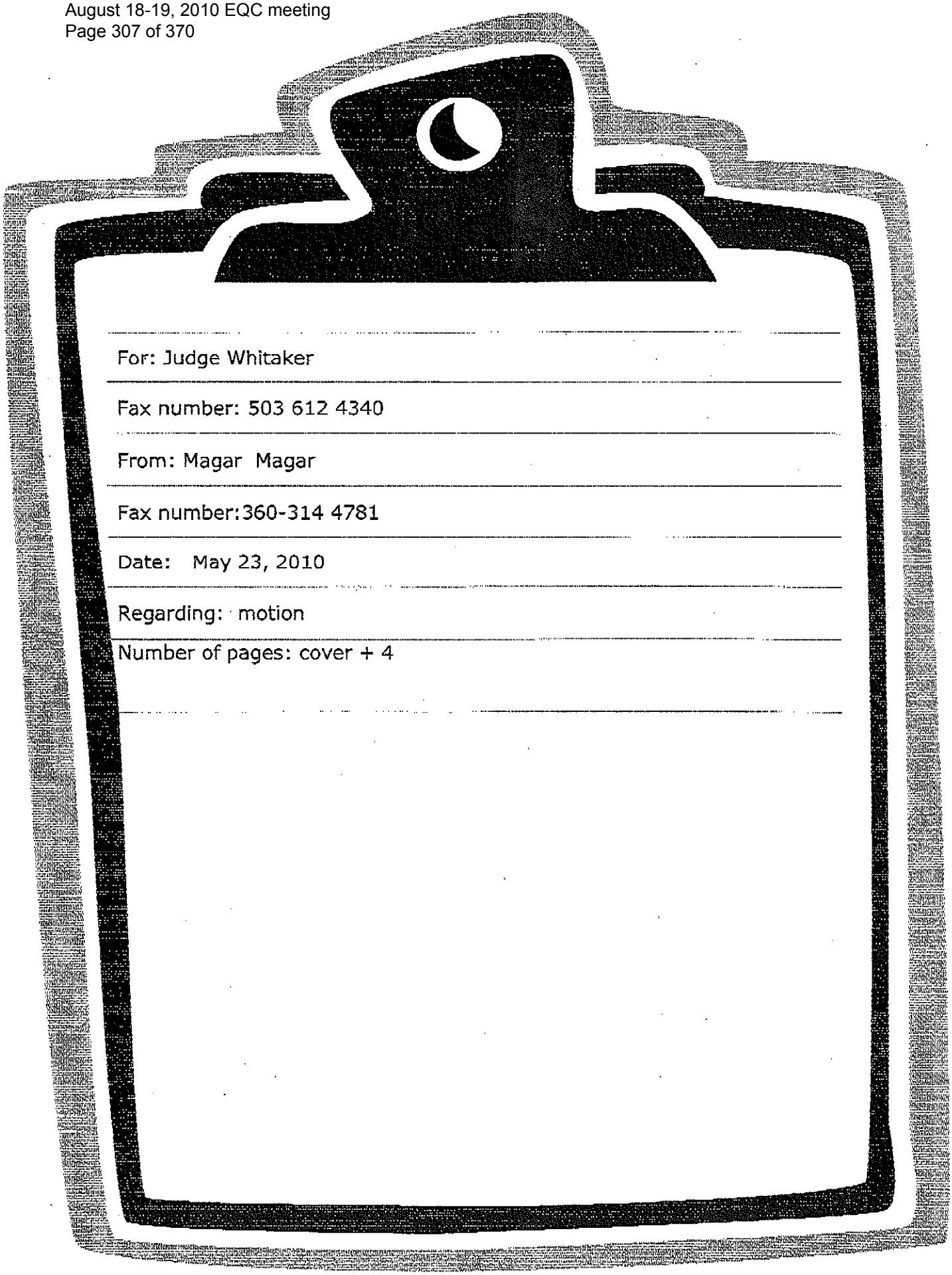
Received Time Jun. 7. 2010 8:07PM No. 6591

this sort were issued. This raises the issues of arbitrariness, capricious, abuse of discretion and estoppels.

To facilitate matter in obtaining the records Respondent paid the $75 fees to have the records available at the Northwest Regional Office.

Respectfully submitted by.

Magar E. Magar.
Respondent. Pro Se.
Served by mail and fax on June 7, 2010 on Deborah Nesbit fax #503 229 5100 and on Administrative Law Judge Monica Whitaker by faxing it to 503 612 4340 and on Bryan Smith by mail and fax.



For: Judge Whitaker

Fax number: 503 612 4340

From: Magar Magar

Fax number:360-314 4781

Date: May 23, 2010

Regarding: motion

Number of pages: cover + 4



Received Time May. 24. 2010 12:08PM No. 5956

**From:** "SMITH Bryan" <bryan.smith@state.or.us>
**To:** "MAGAR EDWARD MAGAR" <calsport@msn.com>, "WHITAKER Monica.A" <monica.a.w...
**Date:** 3/4/2010 11:44 AM
**Subject:** RE: FW: Admissions deadline

**CC:** "OAHREFERRAL EMP" <emp.oahreferral@state.or.us>
Thank you.

-----Original Message-----
From: WHITAKER Monica.A
Sent: Thursday, March 04, 2010 9:00 AM
To: SMITH Bryan; MAGAR EDWARD MAGAR
Cc: OAHREFERRAL EMP
Subject: Re: FW: Admissions deadline

Mr Smith and Mr. Magar:

You are correct, the deadline for DEQ's response to Mr. Magar's request for admissions and interrogatories is March 15, not March 5. I will send a corrected scheduling order in the mail as soon as possible.

Sincerely,

Monica Whitaker
Senior Administrative Law Judge
Office of Administrative Hearings

*****CONFIDENTIALITY NOTICE****
This e-mail may contain information that is confidential, or otherwise exempt from disclosure under applicable law. If you are not the addressee or it appears from the context or otherwise that you have received this e-mail in error, please advise me immediately by reply e-mail, keep the contents confidential, and immediately delete the message and any attachments from your system.
**********

>>> "SMITH Bryan" <bryan.smith@state.or.us> 3/4/2010 8:53 AM >>>
(for some reason this email was returned to me as undeliverable to ALJ Whitaker so I am re-sending it to all)

From: SMITH Bryan
Sent: Thursday, March 04, 2010 8:52 AM
To: 'WHITAKER Monica A'; 'MAGAR EDWARD MAGAR'; SMITH Bryan
Subject: Admissions deadline

Good morning.

ALJ Whitaker, I just received your Scheduling Order and it requires DEQ to answer the Request For Admissions by March 5.

However, I believe that date is a typo as we agreed that March 15, or two weeks from March 1 (the date of our last pre-hearing conference), was the deadline.

Can you please confirm this, and send a revised Order with the correct date?

Thanks, Bryan

**From:** MAGAR EDWARD MAGAR <calsport@msn.com>
**To:** <monica.a.whitaker@state.or.us>
**Date:** 3/22/2010 8:14 AM
**Subject:** Discovery

Magar E. Magar
14102 NE 40th Street
Vancouver WA. 98682
Tel 360 314 4444, cell 503 929 1094 fax 360 314 4781
March 22, 2010
RE case number OAH Case Number 901410
Administrative Law Judge Monica Whitaker.
Judge Whitaker
Office of Administrative Hearings
7995 SW Mohawk St.
Tualatin, Or. 97062

By fax to 503 612 4340 and e-mail. Copies by e-mail and regular mail to Bryan Smith.

Dear Judge Whitaker.

Unless I am very much mistaken, as of the writing of this letter I have not received any responses to the requests for admission or the interrogatories.

The remedy for the lack of response to the requests for admissions, as you pointed out in one of our conferences, is pursuant to the rule reproduced below, self executing..

OAR 137-003-0570 (12) Failure to respond to a request for admissions required by a discovery order shall be deemed an admission of matters that are the subject of the request for admissions, unless the party or agency failing to respond offers a satisfactory reason for having failed to do so, or unless excluding additional evidence on the subject of the request for admissions would violate the duty to conduct a full and fair inquiry under ORS 183.417(8). If the administrative law judge does not treat failure to respond to the request for admissions as admissions, the administrative law judge may grant a continuance to enable the parties and the agency to develop the record as needed.

Accordingly if I am correct and DEQ has failed to respond to my requests for admission there is no action required by the ALJ.

However, as to the lack of response to the interrogatories, I need another 7 days from this date, March 22, 2010 to submit, if necessary any other interrogatories or requests for admission I may have. While I do not anticipate any further requests for admissions, the whole idea of the submitting interrogatories in two steps was to try to pin point and make more precise the initial responses. Not having any I have to rethink my discovery.

So please consider my request for that brief extension a motion.

Very truly yours,

Magar E. Magar.
cc. Bryan Smith By fax to 503 229 6124

Attachment V
August 18-19, 2010 EQC meeting
Page 311 of 370

**From:** "SMITH Bryan" <bryan.smith@state.or.us>
**To:** "MAGAR EDWARD MAGAR" <calsport@msn.com>
**Date:** 3/22/2010 8:37 AM
**Subject:** RE: Discovery
**Attachments:** Magar.09.admissions.doc

**CC:** "WHITAKER Monica.A" <monica.a.whitaker@state.or.us>
DEQ responded back on March 3. We mailed it to the only address I have for you. Here it is again, attached.

From: MAGAR EDWARD MAGAR [mailto:calsport@msn.com]
Sent: Monday, March 22, 2010 8:15 AM
To: SMITH Bryan
Subject: FW: Discovery

---

From: calsport@msn.com
To: monica.a.whitaker@state.or.us
Subject: Discovery
Date: Mon, 22 Mar 2010 08:13:38 -0700

Magar E. Magar

14102 NE 40th Street

Vancouver WA. 98682

Tel 360 314 4444, cell 503 929 1094 fax 360 314 4781

March 22, 2010

RE case number OAH Case Number 901410

Administrative Law Judge Monica Whitaker.

Judge Whitaker
Office of Administrative Hearings

7995 SW Mohawk St.

Tualatin, Or. 97062

By fax to 503 612 4340 and e-mail. Copies by e-mail and regular mail to Bryan Smith.

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Very truly yours,

Magar E. Magar.

cc. Bryan Smith By fax to 503 229 6124

Attachment V
August 18-19, 2010 EQC meeting
Page 314 of 370

**From:** MAGAR EDWARD MAGAR <calsport@msn.com>
**To:** <monica.a.whitaker@state.or.us>
**Date:** 3/22/2010 8:49 AM
**Subject:** FW: Discovery
**Attachments:** Magar.09.admissions.doc

Apparently Mr. Smith has responded. DEQ request to you that the deadlines be moved back has confused me. You wil recall Mr. Smith asked your re-do the order.
I mean why bother to ask you to put the deadline back if in fact he has already responded. Now based on the responses for the request for admissions I am submitting one more either today or tomorrow. Thank you fior your attention.

Subject: RE: Discovery
Date: Mon, 22 Mar 2010 08:37:18 -0700
From: SMITH.Bryan@deq.state.or.us
To: calsport@msn.com
CC: Monica.A.WHITAKER@state.or.us

DEQ responded back on March 3. We mailed it to the only address I have for you. Here it is again, attached.

From: MAGAR EDWARD MAGAR [mailto:calsport@msn.com]
Sent: Monday, March 22, 2010 8:15 AM
To: SMITH Bryan
Subject: FW: Discovery

From: calsport@msn.com
To: monica.a.whitaker@state.or.us
Subject: Discovery
Date: Mon, 22 Mar 2010 08:13:38 -0700
Magar E. Magar
14102 NE 40th Street
Vancouver WA. 98682
Tel 360 314 4444, cell 503 929 1094 fax 360 314 4781
March 22, 2010
RE case number OAH Case Number 901410
Administrative Law Judge Monica Whitaker.
Judge Whitaker
Office of Administrative Hearings
7995 SW Mohawk St.

Tualatin, Or. 97062

By fax to 503 612 4340 and e-mail. Copies by e-mail and regular mail to Bryan Smith.

Dear Judge Whitaker.

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So please consider my request for that brief extension a motion.

Very truly yours,

Magar E. Magar.
cc. Bryan Smith By fax to 503 229 6124

**From:** "SMITH Bryan" <bryan.smith@state.or.us>
**To:** <bryan.smith@state.or.us>, "MAGAR EDWARD MAGAR" <calsport@msn.com>, "WHI...
**Date:** 3/29/2010 4:24 PM
**Subject:** RE: FW: Discovery

Good morning.

I have not received a response from Mr. Magar in response to DEQ's answer to his admissions and interrogatories, and his March 22 deadline has expired.

Does this mean that the April 5 deadline for DEQ to respond to any "remaining requests" from Mr. Magar is moot, as Mr. Magar has not made any "remaining requests."

In plain English: are we done with the admissions/interrogatories, or is DEQ facing a deadline in relation to this issue?

Thank you, Bryan.

-----Original Message-----
From: WHITAKER Monica.A
Sent: Thursday, March 25, 2010 9:40 AM
To: bryan.smith@state.or.us; MAGAR EDWARD MAGAR
Cc: OAHREFERRAL EMP
Subject: Re: FW: Discovery

Dear Mr. Smith and Mr. Magar:

I am writing in response to the various e-mails I received earlier this week from both of you. I request that neither of you e-mail me directly without copying the other side.

The Amended Scheduling Order, issued on March 5, 2010, remains undisturbed. I am not granting any extensions of time for the submission of additional requests for admissions or interrogatories.

Sincerely,

Monica Whitaker
Senior Administrative Law Judge
Office of Administrative Hearings

*****CONFIDENTIALITY NOTICE****
This e-mail may contain information that is confidential, or otherwise exempt from disclosure under applicable law. If you are not the addressee or it appears from the context or otherwise that you have received this e-mail in error, please advise me immediately by reply e-mail, keep the contents confidential, and immediately delete the message and any attachments from your system.

**********

**From:** MAGAR EDWARD MAGAR <calsport@msn.com>
**To:** <monica.a.whitaker@state.or.us>
**Date:** 3/30/2010 10:06 AM
**Subject:** RE: Discovery

precisely i am uncetain why the question was posed.

> Date: Tue, 30 Mar 2010 06:20:05 -0700
> From: monica.a.whitaker@state.or.us
> To: bryan.smith@state.or.us; calsport@msn.com
> Subject: RE: FW: Discovery
>
> Dear Mr. Smith and Mr. Magar:
>
> The deadlines, as set forth in the March 5, 2010 Amended Scheduling Order, are unchanged. To date, I have not received a copy of additional requests for admissions and/or interrogatories from Mr. Magar. Because the deadline for him to file the additional requests and/or interrogatories has passed, and because no additional requests and/or interrogatories were filed, DEQ's deadline to respond, of April 5, 2010, is moot.
>
> Sincerely,
>
>
>
> Monica Whitaker
> Senior Administrative Law Judge
> Office of Administrative Hearings
>
>
> *****CONFIDENTIALITY NOTICE****
> This e-mail may contain information that is confidential, or otherwise exempt from disclosure under applicable law. If you are not the addressee or it appears from the context or otherwise that you have received this e-mail in error, please advise me immediately by reply e-mail, keep the contents confidential, and immediately delete the message and any attachments from your system.
> **********
>
> >>> "SMITH Bryan" <bryan.smith@state.or.us> 3/29/2010 11:03 AM >>>
> Good morning.
>
> I have not received a response from Mr. Magar in response to DEQ's
> answer to his admissions and interrogatories, and his March 22 deadline
> has expired.
>
> Does this mean that the April 5 deadline for DEQ to respond to any
> "remaining requests" from Mr. Magar is moot, as Mr. Magar has not made
> any "remaining requests."
>
> In plain English: are we done with the admissions/interrogatories, or is
> DEQ facing a deadline in relation to this issue?
>
> Thank you, Bryan.
>
>
>
> -----Original Message-----

> From: WHITAKER Monica.A
> Sent: Thursday, March 25, 2010 9:40 AM
> To: bryan.smith@state.or.us; MAGAR EDWARD MAGAR
> Cc: OAHREFERRAL EMP
> Subject: Re: FW: Discovery
>
> Dear Mr. Smith and Mr. Magar:
>
> I am writing in response to the various e-mails I received earlier this
> week from both of you. I request that neither of you e-mail me directly
> without copying the other side.
>
> The Amended Scheduling Order, issued on March 5, 2010, remains
> undisturbed. I am not granting any extensions of time for the
> submission of additional requests for admissions or interrogatories.
>
> Sincerely,
>
>
>
> Monica Whitaker
> Senior Administrative Law Judge
> Office of Administrative Hearings
>
>
> *****CONFIDENTIALITY NOTICE****
> This e-mail may contain information that is confidential, or otherwise
> exempt from disclosure under applicable law. If you are not the
> addressee or it appears from the context or otherwise that you have
> received this e-mail in error, please advise me immediately by reply
> e-mail, keep the contents confidential, and immediately delete the
> message and any attachments from your system.
> **********
>
>

**From:** "SMITH Bryan" <bryan.smith@state.or.us>
**To:** <bryan.smith@state.or.us>, "MAGAR EDWARD MAGAR" <calsport@msn.com>, "WHI...
**Date:** 3/29/2010 4:24 PM
**Subject:** RE: FW: Discovery

Good morning.

I have not received a response from Mr. Magar in response to DEQ's answer to his admissions and interrogatories, and his March 22 deadline has expired.

Does this mean that the April 5 deadline for DEQ to respond to any "remaining requests" from Mr. Magar is moot, as Mr. Magar has not made any "remaining requests."

In plain English: are we done with the admissions/interrogatories, or is DEQ facing a deadline in relation to this issue?

Thank you, Bryan.

-----Original Message-----
From: WHITAKER Monica.A
Sent: Thursday, March 25, 2010 9:40 AM
To: bryan.smith@state.or.us; MAGAR EDWARD MAGAR
Cc: OAHREFERRAL EMP
Subject: Re: FW: Discovery

Dear Mr. Smith and Mr. Magar:

I am writing in response to the various e-mails I received earlier this week from both of you. I request that neither of you e-mail me directly without copying the other side.

The Amended Scheduling Order, issued on March 5, 2010, remains undisturbed. I am not granting any extensions of time for the submission of additional requests for admissions or interrogatories.

Sincerely,

Monica Whitaker
Senior Administrative Law Judge
Office of Administrative Hearings

*****CONFIDENTIALITY NOTICE****
This e-mail may contain information that is confidential, or otherwise exempt from disclosure under applicable law. If you are not the addressee or it appears from the context or otherwise that you have received this e-mail in error, please advise me immediately by reply e-mail, keep the contents confidential, and immediately delete the message and any attachments from your system.

**********

**From:** "SMITH Bryan" <bryan.smith@state.or.us>
**To:** "MAGAR EDWARD MAGAR" <calsport@msn.com>
**Date:** 3/22/2010 8:37 AM
**Subject:** RE: Discovery
**Attachments:** Magar.09.admissions.doc

**CC:** "WHITAKER Monica.A" <monica.a.whitaker@state.or.us>
DEQ responded back on March 3. We mailed it to the only address I have for you. Here it is again, attached.

From: MAGAR EDWARD MAGAR [mailto:calsport@msn.com]
Sent: Monday, March 22, 2010 8:15 AM
To: SMITH Bryan
Subject: FW: Discovery

---

From: calsport@msn.com
To: monica.a.whitaker@state.or.us
Subject: Discovery
Date: Mon, 22 Mar 2010 08:13:38 -0700

Magar E. Magar

14102 NE 40th Street

Vancouver WA. 98682

Tel 360 314 4444, cell 503 929 1094 fax 360 314 4781

March 22, 2010

RE case number OAH Case Number 901410

Administrative Law Judge Monica Whitaker.

Judge Whitaker
Office of Administrative Hearings

7995 SW Mohawk St.

Tualatin, Or. 97062

By fax to 503 612 4340 and e-mail. Copies by e-mail and regular mail to Bryan Smith.

Dear Judge Whitaker.

Unless I am very much mistaken, as of the writing of this letter I have not received any responses to the requests for admission or the interrogatories.

The remedy for the lack of response to the requests for admissions, as you pointed out in one of our conferences, is pursuant to the rule reproduced below, self executing..

OAR 137-003-0570 (12) Failure to respond to a request for admissions required by a discovery order shall be deemed an admission of matters that are the subject of the request for admissions, unless the party or agency failing to respond offers a satisfactory reason for having failed to do so, or unless excluding additional evidence on the subject of the request for admissions would violate the duty to conduct a full and fair inquiry under ORS 183.417(8). If the administrative law judge does not treat failure to respond to the request for admissions as admissions, the administrative law judge may grant a continuance to enable the parties and the agency to develop the record as needed.

Accordingly if I am correct and DEQ has failed to respond to my requests for admission there is no action required by the ALJ.

However, as to the lack of response to the interrogatories, I need another 7 days from this date, March 22, 2010 to submit, if necessary any other interrogatories or requests for admission I may have. While I do not anticipate any further requests for admissions, the whole idea of the submitting interrogatories in two steps was to try to pin point and make more precise the initial responses. Not having any I have to rethink my discovery.

So please consider my request for that brief extension a motion.

Very truly yours,

Magar E. Magar.

cc. Bryan Smith By fax to 503 229 6124

For: Judge Whitaker

Fax number: 503 612 4340

From: Magar Magar

Fax number:360-314 4781

Date: March 22, 2010

Regarding: motion

Number of pages: cover + 2



Received Time Mar. 22. 2010 8:24AM No. 2534

**Magar E. Magar**

**14102 NE 40th Street**
**Vancouver WA. 98682**

***Tel 360 314 4444, cell 503 929 1094 fax 360 314 4781***

***March 22, 2010***

***RE case number OAH Case Number 901410***

***Administrative Law Judge Monica Whitaker.***

Judge Whitaker
Office of Administrative Hearings
7995 SW Mohawk St.
Tualatin, Or. 97062

By fax to 503 612 4340 and e-mail. Copies by e-mail and regular mail to Bryan Smith.

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So please consider my request for that brief extension a motion.

Very truly yours,



Received Time Mar. 22. 2010 8:24AM No. 2534

Magar E. Magar.
cc. Bryan Smith By fax to 503 229 6124



Received Time Mar. 22. 2010 8:24AM No. 2534

**From:** MAGAR EDWARD MAGAR <calsport@msn.com>
**To:** <monica.a.whitaker@state.or.us>
**Date:** 3/22/2010 8:14 AM
**Subject:** Discovery

Magar E. Magar
14102 NE 40th Street
Vancouver WA. 98682
Tel 360 314 4444, cell 503 929 1094 fax 360 314 4781
March 22, 2010
RE case number OAH Case Number 901410
Administrative Law Judge Monica Whitaker.
Judge Whitaker
Office of Administrative Hearings
7995 SW Mohawk St.
Tualatin, Or. 97062

By fax to 503 612 4340 and e-mail. Copies by e-mail and regular mail to Bryan Smith.

Dear Judge Whitaker.

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Accordingly if I am correct and DEQ has failed to respond to my requests for admission there is no action required by the ALJ.

However, as to the lack of response to the interrogatories, I need another 7 days from this date, March 22, 2010 to submit, if necessary any other interrogatories or requests for admission I may have. While I do not anticipate any further requests for admissions, the whole idea of the submitting interrogatories in two steps was to try to pin point and make more precise the initial responses. Not having any I have to rethink my discovery.

So please consider my request for that brief extension a motion.

Very truly yours,

Magar E. Magar.
cc. Bryan Smith By fax to 503 229 6124

March 3, 2010

Monica Whitaker
Administrative Law Judge
Office of Administrative Hearings
7995 SW Mohawk St.
Tualatin, OR 97062

Re: Magar Edward Magar
OAH Case No. 901410
Notice of Civil Penalty Assessment and Order
Case No. WQ/D-NWR-09-118
Columbia County

Dear Judge Whitaker:

The following is DEQ's response to Respondent's Request for Admissions and Interrogatories.

**Admissions:**

#1 I admit to my personal knowledge there is no administrative rule in Chapter 340 forbidding amendments to discharge monitoring reports (DMRs).

#2 Though I may be able to assume that from mid-July 2005 on that it was Respondent who submitted DMRs - based on the observed document being in form and content similar to something I have seen before - I cannot admit that anyone else at DEQ would be able to make that same assumption as to the identity or certificate number of the person submitting the DMRs.

#3 I cannot admit what the maximum record flow for the Riverwood facility is. I can only admit what the reported values on the DMR have been.

#4 I cannot admit that I have seen the chronological record referred to as Exhibit A as no such exhibit accompanied or was attached to respondent's Request for Admission.

#5 I cannot admit that. In fact if I note an unusually high or low influent pH value I would contact the source reporting that value to find out the cause.

**Interrogatories:**

#1 I am unclear what is meant by the term "maximum number" as this term is not defined by either respondent's Permit or the relevant OARs or ORSs. Without knowledge of what this term refers to, I am unable to answer this question as it is written.

#2 See the answer to #1.

#3 See the answer to #1.

#4 See the answer to #1.

#5 Respondent is correct that OAR 340-041-0007(16)(a)(A)(ii) is inapplicable to Violation Seven of the Notice of Civil Penalty Assessment and Order and the Department apologizes for this typographical error. However, even conceding that Respondent did not violate OAR 340-041-0007(16)(a)(A)(ii), the allegation represented by Violation 7 is correctly noted as a violation of Schedule F, Section B, Condition (1) of the Permit, which is therefore a violation of ORS 468B.025(2). Therefore Respondent was given adequate notice of Violation 7 as the specific condition in Respondent's permit was referred to in this part of the Notice.

Sincerely,

Lyle Christensen
Natural Resource Specialist

cc: Bryan Smith, HQ, OCE, DEQ
Magar Edward Magar, 14102 N.E. 40th Vancouver, WA 98682

**BEFORE THE OFFICE OF ADMINISTRATIVE HEARINGS**
**STATE OF OREGON**
**for the**
**ENVIRONMENTAL QUALITY COMMISSION**

| | | |
|---|---|---|
| IN THE MATTER OF | ) | **AMENDED SCHEDULING ORDER** |
| | ) | |
| **MAGAR EDWARD MAGAR,** | ) | OAH Case No.: 901410 |
| an individual, | ) | Agency Case No.: WQ/D-NWR-09-118 |
| Respondent. | ) | |

At the prehearing conference, held on March 1, 2010, the participants agreed to the following:

1. **March 15, 2010** – Deadline for the Department of Environmental Quality (DEQ) to respond to Mr. Magar's request for admissions and interrogatories.

2. **March 22, 2010** – Deadline for Mr. Magar to submit any remaining request for admissions and/or interrogatories to DEQ.

3. **April 5, 2010** – Deadline for DEQ to respond to Mr. Magar's additional request for admissions and/or interrogatories.

4. **June 8, 2010** – Participants intending to present documentary evidence will produce copies of all documents to the Administrative Law Judge and to the other participant. DEQ shall identify its exhibits with the letter "A" followed by a number, *e.g.*, "A1." Mr. Magar shall identify his exhibits with the letter "R" followed by a number, *e.g.*, "R1." If the document has more than one page, each page will be numbered, *e.g.*, "R1 page 1." DEQ and Mr. Magar shall prepare and serve upon the Administrative Law Judge and upon each other an exhibit list, identifying the exhibits by number and describing the exhibit.

5. **June 8, 2010** – If DEQ or Mr. Magar choose to have witnesses testify at the hearing, the witness(es) must be identified by name to the Administrative Law Judge and to the other participant.

6. **June 22 and 23, 2010** – The contested case will be held at DEQ's office, located at 811 SW 6th St. Portland, OR 97204.

**IT IS HEREBY ORDERED.**

Monica A. Whitaker
Senior Administrative Law Judge
Office of Administrative Hearings

## CERTIFICATE OF MAILING

On March 5, 2010, I mailed the foregoing Amended Scheduling Order in OAH Case No. 901410.

By: First Class Mail

Magar E Magar
14102 NE 40th
Vancouver WA 98682

Bryan Smith
Dept. of Environmental Quality
811 SW 6th St
Portland OR 97204

Lucy Garcia
Administrative Specialist
Hearing Coordinator

**BEFORE THE OFFICE OF ADMINISTRATIVE HEARINGS**
**STATE OF OREGON**
**for the**
**ENVIRONMENTAL QUALITY COMMISSION**

| | | |
|---|---|---|
| IN THE MATTER OF | ) | **SCHEDULING ORDER** |
| | ) | |
| **MAGAR EDWARD MAGAR,** | ) | OAH Case No.: 901410 |
| an individual, | ) | Agency Case No.: WQ/D-NWR-09-118 |
| Respondent. | ) | |

At the prehearing conference, held on March 1, 2010, the participants agreed to the following:

1. **March 5, 2010** – Deadline for the Department of Environmental Quality (DEQ) to respond to Mr. Magar's request for admissions and interrogatories.

2. **March 22, 2010** – Deadline for Mr. Magar to submit any remaining request for admissions and/or interrogatories to DEQ.

3. **April 5, 2010** – Deadline for DEQ to respond to Mr. Magar's additional request for admissions and/or interrogatories.

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6. **June 22 and 23, 2010** – The contested case will be held at DEQ's office, located at 811 SW 6th St. Portland, OR 97204.

**IT IS HEREBY ORDERED.**

Monica A. Whitaker
Senior Administrative Law Judge
Office of Administrative Hearings

## CERTIFICATE OF MAILING

On March 2, 2010, I mailed the foregoing Scheduling Order in OAH Case No. 901410.

By: First Class Mail

Magar E Magar
14102 NE 40th
Vancouver WA 98682

Bryan Smith
Dept. of Environmental Quality
811 SW 6th St
Portland OR 97204

Lucy Garcia
Administrative Specialist
Hearing Coordinator

**From:** MAGAR EDWARD MAGAR <calsport@msn.com>
**To:** <monica.a.whitaker@state.or.us>
**Date:** 3/4/2010 9:08 AM
**Subject:** RE: Admissions deadline

thank you for corresponding by e-mail

> Date: Thu, 4 Mar 2010 09:00:17 -0800
> From: monica.a.whitaker@state.or.us
> To: bryan.smith@state.or.us; calsport@msn.com
> CC: emp.oahreferral@state.or.us
> Subject: Re: FW: Admissions deadline
>
> Mr Smith and Mr. Magar:
>
> You are correct, the deadline for DEQ's response to Mr. Magar's request for admissions and interrogatories is March 15, not March 5. I will send a corrected scheduling order in the mail as soon as possible.
>
> Sincerely,
>
>
>
> Monica Whitaker
> Senior Administrative Law Judge
> Office of Administrative Hearings
>
>
> *****CONFIDENTIALITY NOTICE****
> This e-mail may contain information that is confidential, or otherwise exempt from disclosure under applicable law. If you are not the addressee or it appears from the context or otherwise that you have received this e-mail in error, please advise me immediately by reply e-mail, keep the contents confidential, and immediately delete the message and any attachments from your system.
> **********
>
> >>> "SMITH Bryan" <bryan.smith@state.or.us> 3/4/2010 8:53 AM >>>
> (for some reason this email was returned to me as undeliverable to ALJ
> Whitaker so I am re-sending it to all)
>
>
>
> From: SMITH Bryan
> Sent: Thursday, March 04, 2010 8:52 AM
> To: 'WHITAKER Monica A'; 'MAGAR EDWARD MAGAR'; SMITH Bryan
> Subject: Admissions deadline
>
>
>
> Good morning.
>
>
>
> ALJ Whitaker, I just received your Scheduling Order and it requires DEQ
> to answer the Request For Admissions by March 5.
>

> However, I believe that date is a typo as we agreed that March 15, or
> two weeks from March 1 (the date of our last pre-hearing conference),
> was the deadline.
>
>
>
> Can you please confirm this, and send a revised Order with the correct
> date?
>
> Thanks, Bryan
>
>

# FAX

For: Monica Whitaker

Fax number: (503) 612-4340

From: Magar Magar

Fax number: (360) 314-4781

Date: 2/23/2010

Regarding: Magar Magar's 3/1/2010 Phone Conference

Number of pages: cover + 2

Comments: copy to Bryan Smith



Received Time Feb. 23. 2010 2:08PM No. 1239

***Magar E. Magar***

**14102 NE 40th Street**
**Vancouver WA. 98682**

***Tel 360 314 4444, cell 503 929 1094 fax 360 314 4781***

***February 23, 2010***

***RE case number OAH Case Number 901410***

***Administrative Law Judge Monica Whitaker.***

Judge Whitaker
Office of Administrative Hearings
7995 SW Mohawk St.
Tualatin, Or. 97062

By fax to 503 612 4340.

Dear Judge Whitaker.

I am sorry about the hearing of February 18, 2010; my daughter wrongly noted the date as February 19, 2010. I suppose it is just as well that I could not participate as I had no voice that day. It was only a little better when I spoke to your assistant the next day. She informed of the change of date to March 1, 2010.

I am writing this letter to try to cover as much as possible of the issues due to come up on March 1, 2010 in case I become inaudible again. The problem is the lymphoma is affecting my left vocal cord. The doctors say it will recover in due course. The sooner the better. It is not the first time this has happened.

**Medical Condition.**

I am scheduled to start the second of three cycles of chemo therapy on February 24, 2010 for diffuse B-cell cell lymphoma to be followed by the third and last cycle on March 17, 2010. I have some idea of what is to follow but that has not been definitively decided

**First Motion: Respondent Direct Testimony in affidavit form.**
My first motion is that I submit my direct examination in affidavit form which affidavit to be handed to opposing counsel on the morning of the hearing prior to the commencement of the hearing. I am assuming that will be acceptable even if my vocal chords were fully functional.

**Second motion: Deadlines for interrogatories.**
My second motion is to require a deadline for DEQ to answer my interrogatories. Then another deadline for me to submit another set of interrogatories up to the maximum allowed by the





Received Time Feb. 23. 2010 2:08PM No. 1239

OAR's 137 -003-0570 (5) (f) and for DEQ to answer them. The interrogatories were faxed to Mr. Smith on January 26, 2010. I will be happy to send him another set if he has not received them.

**Third motion: Deadlines for requests for admissions.**
My third motion is to require a deadline for DEQ to answer my request for admission. Then another deadline for me to submit another request for admissions up to the maximum required by the OAR.'s OAR's 137 -003-0570 (5) (e) and a deadline for responses. . The requests for admission were faxed to Mr. Smith on January 26, 2010. I will be happy to send him another set if he has not received them.

**Fourth Motion. Claims of privilege.** My fourth motion is for DEQ to respond to following question. When DEQ provided me with discovery did they withhold any material that they claimed was privileged? If some material was withheld then DEQ should state the nature of the claim.

**Fifth Motion. Report Completion.** Fifth motion has to do with completing the reports. A number of violations have to do with failing to complete monitoring reports. Respondent has and has always had the values and what respondent proposes to do is to go down to DEQ and complete the reports. The motion is to require a contact person from DEQ to be there when respondent goes to complete the reports. Unless otherwise ordered by the ALJ Respondent plans to use red ink to complete the reports.

Very truly yours,



Magar E. Magar.
cc. Bryan Smith By fax to 503 229 6124

**From:** "SMITH Bryan" <bryan.smith@state.or.us>
**To:** "SMITH Bryan" <bryan.smith@state.or.us>, "OAHREFERRAL Emp" <emp.oahrefer...
**Date:** 2/2/2010 8:52 AM
**Subject:** RE: RE: Magar E Magar (OAH #901410) PrehearingConferenceNotice for2/2/10 at 3pm

**CC:** "MAGAR EDWARD MAGAR" <calsport@msn.com>

Great idea. Thank you.

-----Original Message-----
From: WHITAKER Monica A
Sent: Tuesday, February 02, 2010 8:50 AM
To: SMITH Bryan; OAHREFERRAL Emp; WHITAKER Monica A
Cc: MAGAR EDWARD MAGAR
Subject: RE: RE: Magar E Magar (OAH #901410) PrehearingConferenceNotice for2/2/10 at 3pm

Mr. Smith and Mr. Magar,

In light of having to postpone the prehearing conference scheduled for today, I am converting the hearing date of February 18, 2010 into a telephone prehearing conference, during which time we will discuss the issues in this case and select a new hearing date and time. My office will send out instructions for calling into the telephone prehearing conference on February 18, 2010.

Sincerely,

Monica Whitaker
Senior Administrative Law Judge
Office of Administrative Hearings

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**********

>>> "SMITH Bryan" <bryan.smith@state.or.us> 2/2/2010 8:41 AM >>>
Thank you for the update.

Are we going to keep the hearing on February 18?

I am Ok with postponing it, and I am cc'ing Mr. Magar on this email.

If we are going to change the hearing date it would be very helpful to have some advance notice as I have several upcoming hearings to prepare for.

Thank you, Bryan.

PS - Mr. Magar, I hope you get better soon.

From: OAHREFERRAL Emp
Sent: Tuesday, February 02, 2010 8:34 AM
To: Bryan SMITH; WHITAKER Monica A
Subject: Fwd: RE: Magar E Magar (OAH #901410) Prehearing ConferenceNotice for2/2/10 at 3pm
Importance: High

For your review. Thanks, Lucy

>>> On 02/01/2010 at 4:16 PM, in message <COL122-W71F7A9A2B5CE8819F2920C1570@phx.gbl>, MAGAR EDWARD MAGAR <calsport@msn.com> wrote:

To Lucy or to whom it may concern,
My name is Shelley Magar, Magar Magar's daughter. You will receive a separate communication from my dad's doctor discussing his inability to attend the phone conference on the 2nd. When my dad is released from the hospital, which should be Wednesday morning, he will contact you either that day (2/3/10) or the next (2/4/10) to discuss plans for rescheduling the phone conference. Thank you for your patience.

---

Date: Thu, 28 Jan 2010 17:03:59 -0800
From: emp.oahreferral@state.or.us
To: bryan.smith@state.or.us; calsport@msn.com; monica.a.whitaker@state.or.us
Subject: Magar E Magar (OAH #901410) Prehearing Conference Notice for 2/2/10 at 3pm

Attached is a copy of the Notice of Prehearing Conference. Hard copy will not follow, please note that the prehearing time is 3:00p not 10:30a.

Thanks,

Lucy

**From:** "SMITH Bryan" <bryan.smith@state.or.us>
**To:** "Bryan SMITH" <bryan.smith@state.or.us>, "OAHREFERRAL Emp" <emp.oahrefer...
**Date:** 2/2/2010 8:41 AM
**Subject:** RE: RE: Magar E Magar (OAH #901410) Prehearing ConferenceNotice for2/2/10 at 3pm

**CC:** "MAGAR EDWARD MAGAR" <calsport@msn.com>

Thank you for the update.

Are we going to keep the hearing on February 18?

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Thank you, Bryan.

PS - Mr. Magar, I hope you get better soon.

From: OAHREFERRAL Emp
Sent: Tuesday, February 02, 2010 8:34 AM
To: Bryan SMITH; WHITAKER Monica A
Subject: Fwd: RE: Magar E Magar (OAH #901410) Prehearing ConferenceNotice for2/2/10 at 3pm
Importance: High

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From: emp.oahreferral@state.or.us
To: bryan.smith@state.or.us; calsport@msn.com; monica.a.whitaker@state.or.us
Subject: Magar E Magar (OAH #901410) Prehearing Conference Notice for 2/2/10 at 3pm

Attached is a copy of the Notice of Prehearing Conference. Hard copy will not follow, please note that the prehearing time is 3:00p not 10:30a.

Thanks,

Lucy

**From:** Monica A WHITAKER
**To:** SMITH, Bryan
**Date:** 2/2/2010 8:39 AM
**Subject:** Fwd: RE: Magar E Magar (OAH #901410) Prehearing Conference Notice for2/2/10 at 3pm

**CC:** calsport@msn.com; Monica A WHITAKER; OAHREFERRAL, EMP

Dear Mr. Smith:

I am in receipt of a request to postpone the prehearing conference, currently scheduled for today, February 2, 2010 at 3:00 p.m. Mr. Magar's medical doctor submitted a letter to my office late yesterday, explaining that Mr. Magar was admitted for chemotherapy administration on January 30, 2010 and that he is not in any condition to participate in the prehearing. In light of this information, I am postponing the prehearing conference.

My office will be in contact with you to select a date for a new prehearing conference.

Sincerely,

Monica Whitaker
Senior Administrative Law Judge
Office of Administrative Hearings

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**********

>>> EMP OAHREFERRAL 2/2/2010 8:34 AM >>>
For your review. Thanks, Lucy

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From: emp.oahreferral@state.or.us
To: bryan.smith@state.or.us; calsport@msn.com; monica.a.whitaker@state.or.us
Subject: Magar E Magar (OAH #901410) Prehearing Conference Notice for 2/2/10 at 3pm

Attached is a copy of the Notice of Prehearing Conference. Hard copy will not follow, please note that the prehearing time is 3:00p not 10:30a.

Thanks,

Lucy

# FAX

For: Monica Whitaker

Fax number: (503) 612-4340

From: Magar Magar

Fax number: (360) 314-4781

Date: 2/1/10

Regarding: Magar Magar's 2/2/10 Phone Conference

Number of pages: 1

Comments:

Print Close

# RE: Magar E Magar (OAH #901410) Prehearing Conference Notice for 2/2/10 at 3pm

From: **MAGAR EDWARD MAGAR** (calsport@msn.com)
Sent: Mon 2/01/10 4:16 PM
To: emp.oahreferral@state.or.us

To Lucy or to whom it may concern,

My name is Shelley Magar, Magar Magar's daughter. You will receive a separate communication from my dad's doctor discussing his inability to attend the phone conference on the 2nd. When my dad is released from the hospital, which should be Wednesday morning, he will contact you either that day (2/3/10) or the next (2/4/10) to discuss plans for rescheduling the phone conference. Thank you for your patience.

---

Date: Thu, 28 Jan 2010 17:03:59 -0800
From: emp.oahreferral@state.or.us
To: bryan.smith@state.or.us; calsport@msn.com; monica.a.whitaker@state.or.us
Subject: Magar E Magar (OAH #901410) Prehearing Conference Notice for 2/2/10 at 3pm

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Thanks,

Lucy

SOUTHWEST
Washington Medical Center

# Facsimile Message

**Date:**

| TO | | FROM | |
|---|---|---|---|
| NAME | Judge Monica Whitaker | NAME | |
| COMPANY | Office of Administrative Hearings | COMPANY | Southwest Washington Medical Center |
| DEPARTMENT | | DEPARTMENT | 3 North |
| PHONE # | | PHONE # | 360-514-2140 |
| FAX # | 503-612-4340 | FAX # | 360-514-2531 |

**COMMENTS**

Number of pages transmitting (including this cover sheet): 2

♦ PO Box 1600 ♦ Vancouver, WA 98668 ♦

The information contained in this facsimile is privileged and confidential, intended only for the use of the addressee listed above. If you are neither the intended recipient nor the person responsible for delivering this information, you are hereby notified that any disclosure, copying, distribution, or taking of any action in reliance on the content of this information is strictly prohibited.

If you receive this transmission in error, please notify us immediately by telephone and return the original communication to us at the address above via the U. S. Postal Service. We will reimburse you for the mailing costs. Thank you.



Received Time Feb. 1. 2010 4:20PM No. 0336

Attachment A
9, 2010 EQC meeting
370

Northwest Cancer Specialists

**Vancouver Cancer Center**
210 SE 136th Avenue
Vancouver, WA 98684
360.944.9889
Toll Free: 800.558.6989
Fax: 360.944.9686

**Salmon Creek**
2501 NE 134th St., Ste. 100
Vancouver, WA 98686
360.573.0471
Fax: 360.573.0697

***Medical Oncology & Hematology***
Marcus Braun, M.D.
Matthew Brouns, M.D.
Kathryn Kolibaba, M.D.
Miklos Simon, M.D.
David Smith, M.D.
Magdolna Solti, M.D.

Paula Kuiper, P.A.-C

***Gynecologic Oncology/ Pelvic Surgery***
R. Scott Rushing, M.D.
William Winter III, M.D.

***Radiation Oncology***
Carrie Gotkowitz, M.D.
Scott Schneider, M.D.

February 1, 2010

To Whom It May Concern:

Re: Magar, Magar E.
DOB: 01/01/1939

The above patient is under my medical care. Due to his underlying condition, he needed urgent admission to Southwest Washington Medical Center on 01/30/10 for chemotherapy administration. Because of side effects and toxicity of the treatment, he is not in any condition to carry out legal conferences.

For any further questions, please feel free to contact me at 360-944-9889.

Sincerely,

Magdolna Solti

Magdolna Solti, MD

SOUTHWEST
Washington Medical Center

# Facsimile Message

**Date:**

| TO | | FROM | |
|---|---|---|---|
| NAME | Judge Monica Whitaker | NAME | |
| COMPANY | Office of Administrative Hearings | COMPANY | Southwest Washington Medical Center |
| DEPARTMENT | | DEPARTMENT | 3 North |
| PHONE # | | PHONE # | 360-514-2140 |
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**COMMENTS**

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Sincerely,

Magdolna Solti

Magdolna Solti, MD

**From:** "SMITH Bryan" <bryan.smith@state.or.us>
**To:** "SMITH Bryan" <bryan.smith@state.or.us>, <calsport@msn.com>, "OAHREFERRA...
**Date:** 1/29/2010 8:41 AM
**Subject:** RE: Magar E Magar (OAH #901410) Prehearing Conference Notice for2/2/10 at 3pm

I am available for this conference call.
Thanks, Bryan.

-----Original Message-----
From: OAHREFERRAL Emp
Sent: Thu 1/28/2010 5:03 PM
To: SMITH Bryan; calsport@msn.com; WHITAKER Monica A
Cc:
Subject: Magar E Magar (OAH #901410) Prehearing Conference Notice for2/2/10 at 3pm

Attached is a copy of the Notice of Prehearing Conference. Hard copy will not follow, please note that the prehearing time is 3:00p not 10:30a.

Thanks,

Lucy

**From:** "SMITH Bryan" <bryan.smith@state.or.us>
**To:** "MAGAR EDWARD MAGAR" <calsport@msn.com>, "WHITAKER Monica A" <monica.a.w...
**Date:** 1/25/2010 9:13 AM
**Subject:** RE: completing reports and claims of privilege

**CC:** "SMITH Bryan" <bryan.smith@state.or.us>

Good morning ALJ Whitaker and Mr. Magar.

Mr. Magar has requested that I respond to this email, and I presume that he means I should respond to both of you

This is the first time I have seen Mr. Magar's attached letter. I am also unaware of the three pleadings he says he in the midst of drafting.

First, I have no objection to a pre-hearing conference, even if that means that the February 18 hearing date must be postponed.

Secondly, I am not aware that Mr. Magar has requested me or anyone else to come in and complete his DMR forms. He is well aware that only one person at DEQ - Lyle Christensen - is in possession of his file, and there should be no confusion on this issue as Mr. Magar may arrange to complete the DMRs at any time of his choosing during regular business hours. There neither is nor will be a "summons" to complete the forms. Rather, simply contact Mr. Christensen (and not myself) to arrange to complete the forms.

Third, the only document withheld from Mr. Magar was a confidential memo from myself to my manager that DEQ labels a "settlement memo." This memo was withheld pursuant to ORS 192.502(1):

192.502 Other public records exempt from disclosure. The following public records are exempt from disclosure under ORS 192.410 to 192.505:

(1) Communications within a public body or between public bodies of an advisory nature to the extent that they cover other than purely factual materials and are preliminary to any final agency determination of policy or action. This exemption shall not apply unless the public body shows that in the particular instance the public interest in encouraging frank communication between officials and employees of public bodies clearly outweighs the public interest in disclosure.

If Mr. Magar would like to challenge DEQ's determination to withhold this document, the relevant statute provides a means for him to appeal

this decision of DEQ's.

Perhaps at a pre-hearing conference we can further discuss the issues Mr. Magar has raised.

Sincerely,

Bryan Smith

From: MAGAR EDWARD MAGAR [mailto:calsport@msn.com]
Sent: Sunday, January 24, 2010 8:32 PM
To: SMITH Bryan
Subject: completing reports and claims of privilege

please respond.

Magar E. Magar

14102 NE 40th Street

Vancouver WA. 98682

Tel 360 314 4444, cell 503 929 1094 fax 360 314 4781

Bryan Smith
DEQ

811 SW Sixth Ave.

Portland, Or 97204

By fax and e-mail attachment.

Dear Mr. Smith.

I have offered to complete the DMRs but you have not responded.

The DMR's are in the custody of the DEQ and are located at the DEQ. While I assume they are at the Northwest Region I am not 100 per sure. Because they are in your custody and because they presumably require DEQ

personnel to retrieve them I cannot simply barge in and say I want to amend the DMR. Some person has to tell me where exactly to go and who to contact and in what manner you wish me to record the amendments.

I await the summons to make the corrections that is time and place and the person or persons who will be present. Unless forbidden I will make the corrections in red ink.

Now this offer has been extended by me earlier and I received no response from the DEQ. It seems that the DEQ is content to let the matter remain in order to maximize the penalties. This is unacceptable and I expect to hear from you in the near future on this matter.

Next if you have not already received it I have sent the Administrative Law Judge a letter. I enclose a copy. In that letter I had requested a prehearing conference as my discovery is far from complete.

In that letter I appreciated the discovery you gave me and asked you to tell me if any discoverable matters were withheld under claim of privilege and the nature of the privilege. Please comply with my requests.

First on the amendments and next on the claims of privilege.

I had intended to submit my requests of admission and the Interrogatories by Friday but unfortunately health did not permit. I was out of the hospital by Wednesday but was to weak to do any work. I may do this by tonight if I can..

The reason for my hospital stay was to obtain a tissue sample for diagnosis. They did get approximately 250 cubic millimeters from the left side of my neck. It seems I have B-cell lymphoma. This will require more testing and staging before I begin treatment. I expect we will start the testing sometime next week with treatment to follow soon thereafter.

Very truly yours,

Magar E. Magar

cc. Administrative Law Judge Whitaker by fax.

Magar E. Magar

14102 NE 40th Street

Vancouver WA. 98682

Tel 360 314 4444, cell 503 929 1094 fax 360 314 4781

January 18, 2010

RE case number OAH Case Number 901410

Administrative Law Judge Monica Whitaker.

Judge Whitaker
Office of Administrative Hearings

7995 SW Mohawk St.

Tualatin, Or. 97062

By fax to 503

Dear Judge Whitaker.

I am faxing an amended response in these proceedings.

I am going to Emmanuel Hospital tomorrow for surgery. The purpose of the surgery is to investigate the nature of the tumor around my esophagus. I anticipate they will release me on Wednesday.

I have prepared a number of pleadings which I will submit to you for approval.

Last week I have had significant discovery for which I thank the environmental Law Specialist. However I am preparing three pleadings to

further discovery matters.

One is a request of the DEQ to identify any documents held back, from the original discovery because of claim of privilege and to articulate the nature of the privilege.

Two, a set of Requests for Admissions.

Three, a set of interrogatories.

Those discovery requests are in rough draft and as soon as I get out of the hospital I will mail them to you. I was unable to complete them because of family matters and the time taken for preoperative medical procedure.

Finally this matter is set for hearing on February 18, 2010 without a prehearing conference. This is unlike other matters with the DEQ where a prehearing conference has been scheduled. A pre-hearing conference is requested in this case pursuant to 137-003-0570 for all the reasons stated in the rule not least of which a prehearing it is a discovery see subparagraph (g).

Very truly yours,

Magar E. Magar.

cc. Bryan Smith By fax to 503 229 6124

**From:** "SMITH Bryan" <bryan.smith@state.or.us>
**To:** "MAGAR EDWARD MAGAR" <calsport@msn.com>, "WHITAKER Monica A" <monica.a.w...
**Date:** 1/25/2010 9:13 AM
**Subject:** RE: completing reports and claims of privilege

**CC:** "SMITH Bryan" <bryan.smith@state.or.us>

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cc. Administrative Law Judge Whitaker by fax.

Magar E. Magar

14102 NE 40th Street

Vancouver WA. 98682

Tel 360 314 4444, cell 503 929 1094 fax 360 314 4781

January 18, 2010

RE case number OAH Case Number 901410

Administrative Law Judge Monica Whitaker.

Judge Whitaker
Office of Administrative Hearings

7995 SW Mohawk St.

Tualatin, Or. 97062

By fax to 503

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Very truly yours,

Magar E. Magar.

cc. Bryan Smith By fax to 503 229 6124

For: Judge Whitaker

Fax number: 503 612 4340

From: Magar Magar

Fax number:360-314 4781

Date: January 26, 2010

Regarding: Request for admission and Interrogatories

Number of pages: cover + 5

**Magar E. Magar**

**14102 NE 40th Street**
**Vancouver WA. 98682**

***Tel 360 314 4444, cell 503 929 1094 fax 360 314 4781***

***January 26, 2010***

***RE case number OAH Case Number 901410***

***Administrative Law Judge Monica Whitaker.***

Judge Whitaker
Office of Administrative Hearings
7995 SW Mohawk St.
Tualatin, Or. 97062

By fax to 503 612 4340

Dear Judge Whitaker.

I am faxing my First Request for Admissions as well as My First Interrogatories. I am also faxing the same documents to Bryan Smith on the same date as well as a copy of this letter.

Very truly yours,

Magar E. Magar.
cc. Bryan Smith By fax to 503 229 6124

Magar E. Magar
Pro Se.
14102 NE 40th St.
Vancouver, WA 98682
Phone # 360 314 4444
Fax # 360 314 4781
Cell # 503 929 1094
E: Mail: calsport@msn.com

Before the Department of Environmental Quality Commission
Of the State of Oregon

| | |
|---|---|
| In the Matter of Magar E. Magar, Respondent | Case No.: No. WQ/D-NWR-09-118<br>Request for Admissions. |

**Request for Admission #1.**

**Admit that there is no administrative rule in chapter 340. that forbids amendments to the DMRS Daily Monitoring Reports**

**Request for Admission #2.**

**Admit that from mid July 2005 DEQ knew the identity of the person submitting the DMRS and his certificate number is a matter of public Record.**

**Request for Admission #3.**

**Admit that the maximum record flow for one day at the facility at Riverwood did not exceed 51,000 gallons.**

**Request for Admission #4.**
**Admit that the chronological record represented by exhibit A has been seen by the permit writer Lyle Christensen at least once during its construction.**





Received Time Jan. 26. 2010 4:53AM No. 0029

**Request for Admission #5.**
**Admit that at no time in the past twenty years has the DEQ utilized the influent pH parameter for any reason.**

Magar E. Magar.
Pro Se.
14102 NE 40th St.
Vancouver, WA 98682
Phone # 360 314 4444
Fax # 360 314 4781
Cell # 503 929 1094
E: Mail: calsport@msn.com

Before the Department of Environmental Quality Commission
Of the State of Oregon

| | |
|---|---|
| In the Matter of Magar E. Magar,<br>Respondent | Case No.: No. WQ/D-NWR-09-118<br>Interrogatories. |

**Interrogatory #1**
**If a permit holder reports a maximum number for BOD and such maximum is less than what is allowed by the permit would DEQ still consider such report a violation.**

**Interrogatory #2.**
**If the answer to Interrogatory #1 is yes give all the reasons why DEQ would consider such a report a violation.**

**Interrogatory #3.**
**If a permit holder reports a maximum number for TSS and such maximum is less than what is allowed by the permit would DEQ still consider such report a violation.**





Received Time Jan. 26. 2010 4:53AM No. 0029

Interrogatory #4.
If the answer to Interrogatory #3 is yes give all the reasons why DEQ would consider such a report a violation.

Interrogatory #5.
In page 4 of the notice of violation lines 18 and 19 the DEQ states that Respondent violated OAR 340-041-0007(16)(a)(A) (ii). Explain in as much detail as possible by referring to the rule how Respondent violated the rule.

For: Judge Whitaker

Fax number: 503 612 4340

From: Magar Magar

Fax number: 360-314 4444

Date: January 18, 2010

Regarding: letter to bryan snith,

Number of pages: cover + 2

***Magar E. Magar***

**14102 NE 40th Street**
**Vancouver WA. 98682**

***Tel 360 314 4444, cell 503 929 1094 fax 360 314 4781***

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DEQ
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