TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION DIVISION OF WATER POLLUTION CONTROL

MONTHLY OPERATION REPORT FOR PACKAGE TREATMENT PLANTS

FACILITY	The Villages	NPDES PERM	IIT NO	SOP 10051
PERMITTEE	CJ Utilities	MONTH	July-Sep	t 2023
CITY Ja	cksboro	COUNTY	Campbe	II .

																	COMMENTS ABOUT OPERATION AND COMPLIANCE		
	July	тме	FLOW ave. Daily flow	BOD mg//	AMMONIA as N mg/l	E.COLI /100ml	August	TIME	FLOW ave. Daily flow	BOD mg/l	AMMONIA as N mg/l	E.COLI /100ml	September	TIME	FLOW ave, Daily flow	BOD mg/l	AMMONIA as N mg/l	E.COLI /100ml	Please document important events such as discharges of untreated wastewater, down equipment or plant upsets which may impact effluent quality. Also state method of studge disposal.
	2	2	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	
	7	200	1286				4	215	571				9	950	800				BOD ran previous Qtr
	14	725	1143				11	130	1143				15	710	333				
	21	250	857				15	720	1250		24.9	1	22	755	286				
	28	730	1143				25	725	300				28	720	333				
	_						29	745	500										
TOTAL					0	0	1	*					100	1					certify that the submitted information is accurate and complete. I futher certify that all sampling was performed with approved
Permit Ave	e Limit		THE RES	. 01	TO BE		1000			150						46.5	0 1 10	TEV.	procedures and all analysis were performed in accordance with 40CFR Part 140.
Average D	ii Daily Flo	w	1107	MNR	MNR	MNR	100		753	MNR	24.9	1			438	MNR	MNR	MNR	SIGNATURE OF OPERATOR
Permit Ma		1		45.0	Report	941				45.0	Report	941				45.0	Report	941	- I MANY (ADUNE)
Actual Mag	x Limit			MNR	MNR	MNR				MNR	24.9	1				MNR	MNR	MNR	
Permit Fre	equency		1\7	1/vr	1/qtr	1/gtr			1\7	1/yr	1/gtr	1/gtr			1\7	1/yr	1/qtr	1/qt:	
Actual Fre	antecource.		1\7	7.4		-			1\7		_	1/qtr			1\7				ANALYSIS PERFORMED BY OUTSIDE LABORATORY NO LABORATORY USED EMG
Permit Sa	mple Ty	me	Meter	GRAB	GRAB	GRAB			Meter	GRAB	GRAB	GRAB	-		Meter	GRAB	GRAB	GRAB	
Actual Sar			Meter				ESC.		Meter		GRAB	GRAB			Meter				SIGNATURE OF PRINCIPAL TO
No of Viola				0	0	0			No.	0	0	0	100		TYLE	0	0	0	EXECUTIVE OFFICIAL DATE 0-13-2003
				Part To		S 1 1 8				1000		Jan Jan				100	DIST	L 3	
C	Condition of treatment facility Cond					Condit	ion of tr	eatment	facility		OK	Condition of treatment facility Of							
C	Condition of drip area Condition				ion of d	rip area			OK	Condit	ion of d	rip area			OK				
C	Condition of signage Condition of s				ion of s	ignage			OK	Condit	ion of s	ignage			OK				
St	Status of mechanical parts Status of mechanical parts						parts		OK	Status	nanical p	parts		OK					
C	onditi	on of U	V bulbs				Condit	ion of U	V bulbs			OK	Condit	ion of U	V bulbs			OK	

TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION DIVISION OF WATER POLLUTION CONTROL

MONTHLY OPERATION REPORT FOR PACKAGE TREATMENT PLANTS

FACILITY The Peninsula NPDES PERMIT NO SOP-06059
PERMITTEE CJ Utilities MONTH July-Sept 2023
CITY Jacksboro COUNTY Campbell

					1														COMMENTS ABOUT OPERATION AND COMPLIANCE
	July	TIME	FLOW ave. Daily flow	BOD mg/l	AMMONIA as N mg/l	E_COLI /100ml	August	TIME	FLOW ave. Daily flow	BOD mg/l	AMMONIA as N mg/l	E,COL! /100ml	September	TIME	FLOW ave, Daily flow	BOD mg/l	AMMONIA as N mg/l	E.COLI /100ml	Please document important events such as discharges of untreated wastewater, down equipment or plant upsets which may impact effluent quality. Also state method of sludge disposal,
	2	2	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	
	15	800	640				15	800	640		3.12	1	15	825	640				BOD ran previous Qtr
	28	730	640				29	815	640				28	755	640				Flows calculated by occupancy rate and state design criteria
																			8*2*40
TOTAL		124	1280				5 15						Î DE	-11-					I certify that the submitted information is accurate and complete. I futher certify that all sampling was performed with approved
Permit.	Ave Limit		111 = 5	S S L	SV TO	231			4 5 5	5/48	La North	7	20.00			314		AST IN	procedures and all analysis were performed in accordance with 40CFR Part 140.
Averag	e Daily Flo	w	640	MNR	MNR	MNR			640	MNR	3.12	1			640	MNR	MNR	MNR	SIGNATURE OF OPERATOR
	Max Limit		10.58	45	Report	941			17.17	45	Report	941			5.8 B	45	Report	941	TIME (ADVINE)
Actual	Vlax Limit			MNR	MNR	MNR				MNR	3.12	1	De la			MNR	MNR	MNR	
Permit	Frequenc		1\14	1/yr	1/qtr	1/qtr	R.A.		1\14	1/yr	1/qtr	1/qtr			1\14	1/yr	1/qtr	1/qtı	
Actual	requency		1\14						1\14			1/qtr	-		1\14				ANALYSIS PERFORMED BY OUTSIDE LABORATORY NO LABORATORY USED EMG
Permit	Sample T	/pe	Est.	GRAB	GRAB	GRAB	1.4.		Est.	GRAB	GRAB	GRAB			Est.	GRAB	GRAB	GRAB	
Actual	Sample Ty	pes	Est.						Est.		GRAB	GRAB			Est.				SIGNATURE OF PRINCIPAL () SO
1000000	iolations			0	0	0			14 5	0	0	0				0	0	0	EXECUTIVE OFFICIAL DATE OF DATE OF 13 2003
	No.			Sylvinia	THE PERSON	200	A PLAN			110-30	N III S	SEE SEE				Tion I	Ser I Service	THE REAL PROPERTY.	
	Condition of treatment facility C						Condit	ion of tr	eatment	facility		OK	Conditi	on of tr	eatment	facility		OK	
	Condition of drip area					OK	Condit	ion of d	rip area			OK	Conditi	on of d	rip area			OK	
	Condition of signage OK Condition of					ion of si	ignage			OK	Conditi	on of si	ignage			OK			
	Status of mechanical parts OK Status of m						of mech	nanical p	arts		OK Status of mechanical parts						OK		
	Condition of UV bulbs					OK	Condit	ion of U	V bulbs			OK	Conditi	Condition of UV bulbs				OK	

TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION DIVISION OF WATER POLLUTION CONTROL

MONTHLY OPERATION REPORT FOR PACKAGE TREATMENT PLANTS

FACILITY Rae Alan Properties NPDES PERMIT NO SOP02043
PERMITTEE CJ Utilities MONTH July-Sept 2023
CITY Jacksboro COUNTY Campbell

																		COMMENTS ABOUT OPERATION AND COMPLIANCE			
	July	TIME	FLOW ave, Daily flow	BOD mg/l	AMMONIA as N mg/l	E.COLI /100ml	August	TIME	FLOW ave, Daily flow	BOD mg/l	AMMONIA as N mg/l	E.COLI /100ml	September	TIME	FLOW ave, Daily flow	BOD mg/l	AMMONIA as N mg/l	E.COLI /100ml	Please document important events such as discharges of untreated wastewater, down equipment or plant upsets which may impact effluent quality. Also state method of sludge disposal.		
	2	2	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19			
	15	840	3360				15	830	3360		48.6		15	745	3360				BOD ran previous Qtr		
	28	830	3360				29	840	3360				28	820	3360				Flows calculated by occupancy rate and state design criteria		
																			42*2*40		
								1											* New control box installed		
\Box								1						ĺ							
\Box								1													
TOTAL			6720				TERE!	1 11/4					774 5						I certify that the submitted information is accurate and complete. I futher certify that all sampling was performed with approved		
Permit	Ave Limit		= 177	10.00	FYLM				1134	1	130				1811		30 14 20		procedures and all analysis were performed in accordance with 40CFR Part 140.		
Averag	Daily Flo	w	3360	MNR	MNR				3360	MNR	48.6				3360	MNR	MNR		SIGNATURE OF OPERATOR Robert Course		
	Max Limit			45	Report	li serie			1	45	Report					45	Report		DATE 10/1/23		
Actual N	/lax Limit			MNR	MNR	AND AS				MNR	48.6	20				MNR	MNR	121	Operator: Robert Young PHONE NC 7052726		
Permit	Frequenc	n ieu	1\14	1/yr	1/qtr	45 L =			1\14	1/yr	1/qtr				1\14	1/yr	1/qtr				
Actual i	requency		1\14			Sile te			1\14		1/qtr				1\14			100	ANALYSIS PERFORMED BY OUTSIDE LABORATORY NO LABORATORY USED EMG		
Permit	Sample T	VD6	Est.	GRAB	GRAB				Est.	GRAB	GRAB				Est.	GRAB	GRAB		A STATE OF THE STA		
Actual S	Sample T	pes	Est.						Est.		GRAB				Est.				SIGNATURE OF PRINCIPAL DATE 0-13-203		
100	lolations		0-15	0	0	The sale				0	0					0	0		EXECUTIVE OFFICIAL DATE DATE		
	JA III			STATE OF THE PARTY.	U.S.					100	II JISC.					10 18	10 TO 10				
	Condition of treatment facility Condition of tr						reatment facility OK Condition of tre							facility		OK					
	Condition of drip area Condition					ion of d	of drip area OK					ion of d	rip area			OK					
	Condition of signage Condition of					ion of s	ignage			OK	Condit	ion of s	ignage			OK					
	Status	of mecl	nanical p	parts	**		Status	of mecl	nanical p	parts		*	Status	of meci	hanical p	parts		OK			
	Condition of UV bulbs				Condit	Condition of UV bulbs				OK	Condit	ion of U	V bulbs			OK					