

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Compliance Evaluation Section, 13051 North Telecom Parkway, Temple Terrace, FL 33637-0926

PERMITTEE NAME: Manatee County Utility Operations
 MAILING ADDRESS: 4410 - 66th Street West
 Bradenton, FL 34210

PERMIT NUMBER: FLA012619

LIMIT: Final
 CLASS SIZE: N/A

REPORT: Monthly
 GROUP: Domestic

FACILITY: Manatee County Southwest WRF
 LOCATION: 5101 - 65th Street West
 Bradenton, FL 34210

MONITORING GROUP NUMBER: R-001
 MONITORING GROUP DESC: Public Access Reuse, including Influent
 RE-SUBMITTED DMR:
 NO DISCHARGE TO R-001:
 MONITORING PERIOD From: _____ To: _____

COUNTY: Manatee
 OFFICE: Southwest District

Parameter	Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow to R-001 (Public Access Reuse System)	Sample Permit Requirement						
PARAM Code 50050 Y Mon.Site No. FLW-05	15.0 (AADF)	MGD				Monthly	Flow Meters and Totalizers
Flow to R-001 (Public Access Reuse System)	Sample Permit Requirement						
PARAM Code 50050 1 Mon.Site No. FLW-05	Report (Mo.Avg.)	MGD				Continuous	Flow Meters and Totalizers
Flow (from R-001 to storage ponds or storage tanks)	Sample Permit Requirement						
PARAM Code 50050 1 Mon.Site No. FLW-10	Report (Mo.Avg.)	MGD				Continuous	Flow Meter and Totalizer
BOD, Carbonaceous 5 day, 20C	Sample Measurement						
PARAM Code 80082 Y Mon.Site No. EFA-01	Permit Requirement		20.0 (An.Avg.)			Monthly	Calculation
BOD, Carbonaceous 5 day, 20C (January - December)	Sample Measurement						
PARAM Code 80082 P Mon.Site No. EFA-01	Permit Requirement		30.0 (Mo.Avg.) 45.0 (Wk.Avg.) 60.0 (Max.)			7 Days/Week	24-hr. FPC
Solids, Total Suspended	Sample Measurement						
PARAM Code 00530 B Mon.Site No. EFB-01	Permit Requirement		5.0 (Max.)			7 Days/Week	Grab
pH	Sample Measurement						
PARAM Code 00400 A Mon.Site No. EFA-01	Permit Requirement		6.0 (Min.) 8.5 (Max.)			Continuous	Meter

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 fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Public Access Reuse
 DEP Discharge Month Report - Part A

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Manatee County Southwest WRF
 COUNTY: Manatee

MONITORING GROUP NUMBER: R-001
 MONITORING PERIOD From: _____ To _____

PERMIT NUMBER: FLA012619

Parameter	Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	Sample Measurement						
PARM Code 74055 A Mon.Site No. EFA-01	Permit Requirement		25 (Max.)			7 Days/Week	Grab
Coliform, Fecal, % less than detection	Sample Measurement						
PARM Code 51005 A Mon.Site No. EFA-01	Permit Requirement		75 (Min.)			Monthly	Calculation
Total Residual Chlorine (For Disinfection)	Sample Measurement						
PARM Code 50060 A Mon.Site No. EFA-01	Permit Requirement		1.0 (Min.)			Continuous	Meter
Turbidity	Sample Measurement						
PARM Code 00070 B Mon.Site No. EFB-01	Permit Requirement		Report (Max.)			Continuous	Meter
Nitrogen, Total (as N)	Sample Measurement						
PARM Code 00600 A Mon.Site No. EFA-01	Permit Requirement		Report			Monthly	24-hr. FPC
Phosphorus, Total (as P)	Sample Measurement						
PARM Code 00665 A Mon.Site No. EFA-01	Permit Requirement		Report			Monthly	24-hr. FPC
Flow, Total Plant	Sample Measurement						
PARM Code 50050 P Mon.Site No. FLW-01	Permit Requirement	15.0 (AADF)	Report (Mo.Avg.)	MGD		Continuous	Flow Meter and Totalizer
Flow, Total Plant	Sample Measurement						
PARM Code 50050 Q Mon.Site No. FLW-01	Permit Requirement	Report (3MRADF)		MGD		Monthly	Calculation
Percent Capacity, (3MRADF/Permitted Capacity) x 100	Sample Measurement						
PARM Code 00180 I Mon.Site No. FLW-01	Permit Requirement		Report			Monthly	Calculation
BOD, Carbonaceous 5 day, 20C	Sample Measurement						
PARM Code 80082 G Mon.Site No. INF-01	Permit Requirement		Report (Mo.Avg.)			Weekly	24-hr. FPC
Solids, Total Suspended	Sample Measurement						
PARM Code 00530 G Mon.Site No. INF-01	Permit Requirement		Report (Mo.Avg.)			Weekly	24-hr. FPC

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Manatee County Southwest WRF
 COUNTY: Manatee

MONITORING GROUP NUMBER: R-001
 MONITORING PERIOD From: _____ To: _____

PERMIT NUMBER: FLA012619

Parameter	Sample Measurement Permit Requirement	Quantity or Loading		Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Transferred to BTF)	Sample Measurement Permit Requirement									
PARM Code B0007 + Mon. Site No. RMP-01	Sample Measurement Permit Requirement		Report (Mo. Total)	dry tons					Monthly	Calculation
Biosolids Quantity (Landfilled)	Sample Measurement Permit Requirement									
PARM Code B0008 + Mon. Site No. RMP-02	Sample Measurement Permit Requirement		Report (Mo. Total)	dry tons					Monthly	Calculation

DAILY SAMPLE RESULTS - PART B, R-001 (part 1 of 2)

Permit Number: FLA012619

Facility: Manatee County Southwest WRF

Monitoring Period From: _____ To: _____

	Flow (MGD), Public Access Reuse System	Flow (MGD), from R-001 to storage ponds & storage tanks	Flow (MGD), Total Plant Flow	Flow (MGD), For plant water	Liquid biosolids transported offsite (Gallons)		
Code	50050	50050	50050	50050			
Mon. Site	FLW-05	FLW-10	FLW-01	FLW-04			
1							
2							
3							
4							
5							
6							
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							
Mo. Avg.							

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____

Evening Shift Operator Class: _____ Certificate No: _____ Name: _____

Night Shift Operator Class: _____ Certificate No: _____ Name: _____

Lead Operator Class: _____ Certificate No: _____ Name: _____

DAILY SAMPLE RESULTS - PART B, R-001 (part 2 of 2)

Permit Number: FLA012619
 Monitoring Period From: _____ To: _____

Facility: Manatee County Southwest WRF

	CBOD5 (MG/L)	TSS (MG/L)	pH Minimum (SU)	pH Maximum (SU)	Fecal Coliform Bacteria (#/100ML)	Total Chlorine Residual (For Disinfect.) (MG/L)	Turbidity (NTU)	Nitrogen, Total (as N) (mg/L)	Phosphorus, Total (as P) (mg/L)
Code	80082	00530	00400	00400	74055	50060	00070	00600	00665
Mon.	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01	EFA-01
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
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21									
22									
23									
24									
25									
26									
27									
28									
29									
30									
31									
Total									
Mo.									

PLANT STAFFING:

Day Shift Operator Class: _____ Certificate No: _____ Name: _____

Evening Shift Operator Class: _____ Certificate No: _____ Name: _____

Night Shift Operator Class: _____ Certificate No: _____ Name: _____

Lead Operator Class: _____ Certificate No: _____ Name: _____

INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT

Read these instructions as well as the SUPPLEMENTAL INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT before completing the DMR. Hard copies and/or electronic copies of the required parts of the DMR were provided with the permit. All required information shall be completed in full and typed or printed in ink. A signed, original DMR shall be mailed to the address printed on the DMR by the 28th of the month following the monitoring period. The DMR shall not be submitted before the end of the monitoring period.

The DMR consists of three parts--A, B, and D--all of which may or may not be applicable to every facility. Facilities may have one or more Part A's for reporting effluent or reclaimed water data. All domestic wastewater facilities will have a Part B for reporting daily sample results. Part D is used for reporting ground water monitoring well data. When results are not available, the following codes should be used on parts A and D of the DMR and an explanation provided where appropriate. Note: Codes used on Part B for raw data are different.

CODE	DESCRIPTION/INSTRUCTIONS	CODE	DESCRIPTION/INSTRUCTIONS
ANC	Analysis not conducted.	NOD	No discharge from/to site.
DRY	Dry Well	OPS	Operations were shutdown so no sample could be taken.
FLD	Flood disaster.	OTH	Other. Please enter an explanation of why monitoring data were not available.
IFS	Insufficient flow for sampling.	SEF	Sampling equipment failure.
LS	Lost sample.		
MNR	Monitoring not required this period.		

When reporting analytical results that fall below a laboratory's reported method detection limits or practical quantification limits, the following instructions should be used:

1. Results greater than or equal to the PQL shall be reported as the measured quantity.
2. Results less than the PQL and greater than or equal to the MDL shall be reported as the laboratory's MDL value. These values shall be deemed equal to the MDL when necessary to calculate an average for that parameter and when determining compliance with permit limits.
3. Results less than the MDL shall be reported by entering a less than sign (" $<$ ") followed by the laboratory's MDL value, e.g. < 0.001 . A value of one-half the MDL or one-half the effluent limit, whichever is lower, shall be used for that sample when necessary to calculate an average for that parameter. Values less than the MDL are considered to demonstrate compliance with an effluent limitation.

PART A -DISCHARGE MONITORING REPORT (DMR)

Part A of the DMR is comprised of one or more sections, each having its own header information. Facility information is preprinted in the header as well as the monitoring group number, whether the limits and monitoring requirements are interim or final, and the required submittal frequency (e.g. monthly, annually, quarterly, etc.). Submit Part A based on the required reporting frequency in the header and the instructions shown in the permit. The following should be completed by the permittee or authorized representative:

No Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data or codes to be entered for all of the parameters on the DMR for the entire monitoring group number; however, if the monitoring group includes other monitoring locations (e.g., influent sampling), the "NOD" code should be used to individually denote those parameters for which there was no discharge.

Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

Sample Measurement: Before filling in sample measurements in the table, check to see that the data collected correspond to the limit indicated on the DMR (i.e. interim or final) and that the data correspond to the monitoring group number in the header. Enter the data or calculated results for each parameter on this row in the non-shaded area above the limit. Be sure the result being entered corresponds to the appropriate statistical base code (e.g. annual average, monthly average, single sample maximum, etc.) and units.

No. Ex.: Enter the number of sample measurements during the monitoring period that exceeded the permit limit for each parameter in the non-shaded area. If none, enter zero.

Frequency of Analysis: The shaded areas in this column contain the minimum number of times the measurement is required to be made according to the permit. Enter the actual number of times the measurement was made in the space above the shaded area.

Sample Type: The shaded areas in this column contain the type of sample (e.g. grab, composite, continuous) required by the permit. Enter the actual sample type that was taken in the space above the shaded area.

Signature: This report must be signed in accordance with Rule 62-620.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

Comment and Explanation of Any Violations: Use this area to explain any exceedances, any upset or by-pass events, or other items which require explanation. If more space is needed, reference all attachments in this area.

PART B - DAILY SAMPLE RESULTS

Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.
Daily Monitoring Results: Transfer all analytical data from your facility's laboratory or a contract laboratory's data sheets for all day(s) that samples were collected. Record the data in the units indicated. Table 1 in Chapter 62-160, F.A.C., contains a complete list of all the data qualifier codes that your laboratory may use when reporting analytical results. However, when transferring numerical results onto Part B of the DMR, only the following data qualifier codes should be used and an explanation provided where appropriate.

CODE	DESCRIPTION/INSTRUCTIONS
<	The compound was analyzed for but not detected.
A	Value reported is the mean (average) of two or more determinations.
J	Estimated value, value not accurate.
Q	Sample held beyond the actual holding time.
Y	Laboratory analysis was from an unpreserved or improperly preserved sample.

Add the results to get the Total and divide by the number of days in the month to get the Monthly Average.

Plant Staffing: List the name, certificate number, and class of all state certified operators operating the facility during the monitoring period. Use additional sheets as necessary.

PART D - GROUND WATER MONITORING REPORT

Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

Date Sample Obtained: Enter the date the sample was taken. Also, check whether or not the well was purged before sampling.

Time Sample Obtained: Enter the time the sample was taken.

Sample Measurement: Record the results of the analysis. If the result was below the minimum detection limit, indicate that.

Detection Limits: Record the detection limits of the analytical methods used.

Analysis Method: Indicate the analytical method used. Record the method number from Chapter 62-160 or Chapter 62-601, F.A.C., or from other sources.

Sampling Equipment Used: Indicate the procedure used to collect the sample (e.g. airlift, bucket/bailer, centrifugal pump, etc.)

Samples Filtered: Indicate whether the sample obtained was filtered by laboratory (L), filtered in field (F), or unfiltered (N).

Signature: This report must be signed in accordance with Rule 62-620.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

Comments and Explanations: Use this space to make any comments on or explanations of results that are unexpected. If more space is needed, reference all attachments in this area.

SPECIAL INSTRUCTIONS FOR LIMITED WET WEATHER DISCHARGES

Flow (Limited Wet Weather Discharge): Enter the measured average flow rate during the period of discharge or divide gallons discharged by duration of discharge (converted into days). Record in million gallons per day (MGD).

Flow (Upstream): Enter the average flow rate in the receiving stream upstream from the point of discharge for the period of discharge. The average flow rate can be calculated based on two measurements; one made at the start and one made at the end of the discharge period. Measurements are to be made at the upstream gauging station described in the permit.

Actual Stream Dilution Ratio: To calculate the Actual Stream Dilution Ratio, divide the average upstream flow rate by the average discharge flow rate. Enter the Actual Stream Dilution Ratio accurate to the nearest 0.1.

No. of Days the SDF > Stream Dilution Ratio: For each day of discharge, compare the minimum Stream Dilution Factor (SDF) from the permit to the calculated Stream Dilution Ratio. On Part B of the DMR, enter an asterisk (*) if the SDF is greater than the Stream Dilution Ratio on any day of discharge. On Part A of the DMR, add up the days with an "*" and record the total number of days the Stream Dilution Factor was greater than the Stream Dilution Ratio.

CBOD₅: Enter the average CBOD₅ of the reclaimed water discharged during the period shown in duration of discharge.

TKN: Enter the average TKN of the reclaimed water discharged during the period shown in duration of discharge.

Actual Rainfall: Enter the actual rainfall for each day on Part B. Enter the actual cumulative rainfall to date for this calendar year and the actual total monthly rainfall to date for this calendar year is the total amount of rain, in inches, that has been recorded since January 1 of the current year through the month for which this DMR contains data.

Rainfall During Average Rainfall Year: On Part A, enter the total monthly rainfall during the average rainfall year and the cumulative rainfall for the average rainfall year. The cumulative rainfall for the average rainfall year is the amount of rain, in inches, which fell during the average rainfall year from January through the month for which this DMR contains data.

No. of Days LWWB Activated During Calendar Year: Enter the cumulative number of days that the limited wet weather discharge was activated since January 1 of the current year.

Reason for Discharge: Attach to the DMR a brief explanation of the factors contributing to the need to activate the limited wet weather discharge.

2 of 2 pages

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Compliance Evaluation Section, 13051 North Telecom Parkway, Temple Terrace, FL 33637-0926

PERMITTEE NAME: Manatee County Utility Operations
MAILING ADDRESS: 4410 - 66th Street West
Bradenton, FL 34210

PERMIT NUMBER: FLA012619

REPORT: Annually
GROUP: Domestic

FACILITY: Manatee County Southwest WRF
LOCATION: 5101 - 65th Street West
Bradenton, FL 34210

LIMIT: Final
CLASS SIZE: N/A

MONITORING GROUP NUMBER: PRT-J
MONITORING GROUP DESC: Influent Pretreatment

NO DISCHARGE FROM From: _____ To: _____
SITE: _____
MONITORING PERIOD: _____

COUNTY: Manatee

Parameter	Quantity or Loading		Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
	Sample Measurement	Permit Requirement	Report (Min.)	Report (Max.)				
pH								
PARM Code 00400 Mon. Site No. PRT-1			Report (Min.)	Report (Max.)	SU		Annually	Grab
Oil and Grease, hexane extr method								
PARM Code 00552 Mon. Site No. PRT-1			Report (An. Avg.)	Report (Max.)	MG/L		Annually	Grab
Benzene								
PARM Code 34030 Mon. Site No. PRT-1			Report (An. Avg.)	Report (Max.)	UG/L		Annually	4 grabs/24 hr. period
Bromoform								
PARM Code 32104 Mon. Site No. PRT-1			Report (An. Avg.)	Report (Max.)	UG/L		Annually	4 grabs/24 hr. period
Carbon tetrachloride								
PARM Code 32102 Mon. Site No. PRT-1			Report (An. Avg.)	Report (Max.)	UG/L		Annually	4 grabs/24 hr. period
Chlorobenzene								
PARM Code 34301 Mon. Site No. PRT-1			Report (An. Avg.)	Report (Max.)	UG/L		Annually	4 grabs/24 hr. period

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 fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEP Discharge Maint
Quant - PART A
Influent Pretreatment

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Manatee County Southwest WRF
 COUNTY: Manatee

MONITORING GROUP NUMBER: PRT-1
 MONITORING PERIOD From: _____ To _____

PERMIT NUMBER: FLA012619

Parameter	Quantity or Loading	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
		Units	Report (An.Avg.)				
Chlorodibromomethane	Sample Measurement						
PARM Code 34306 G Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	UG/L		Annually	4 grabs/24 hr.period
Chloroethane, Total Weight	Sample Measurement						
PARM Code 34311 G Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	UG/L		Annually	4 grabs/24 hr.period
2-chloroethyl vinyl ether (mixed)	Sample Measurement						
PARM Code 34576 G Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	UG/L		Annually	4 grabs/24 hr.period
Chloroform	Sample Measurement						
PARM Code 32106 G Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	UG/L		Annually	4 grabs/24 hr.period
Dichlorobromomethane	Sample Measurement						
PARM Code 32101 G Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	UG/L		Annually	4 grabs/24 hr.period
1,1-dichloroethane	Sample Measurement						
PARM Code 34496 G Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	UG/L		Annually	4 grabs/24 hr.period
1,2-dichloroethane	Sample Measurement						
PARM Code 32103 G Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	UG/L		Annually	4 grabs/24 hr.period
1,1-dichloroethylene	Sample Measurement						
PARM Code 34501 G Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	UG/L		Annually	4 grabs/24 hr.period
1,2-dichloropropane	Sample Measurement						
PARM Code 34541 G Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	UG/L		Annually	4 grabs/24 hr.period
1,3-dichloropropene	Sample Measurement						
PARM Code 77163 G Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	UG/L		Annually	4 grabs/24 hr.period

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Manatee County Southwest WRF
 COUNTY: Manatee

MONITORING GROUP NUMBER: PRT-1
 MONITORING PERIOD From: _____ To: _____

PERMIT NUMBER: FLA012619

Parameter	Sample Measurement	Quantity or Loading		Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
		Sample	Permit Requirement	Report (An.Avg.)	Report (Max.)				
Ethylbenzene	Sample Measurement								
PARM Code 34371 Mon.Site No. PRT-1	Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	4 grabs/24 hr.period
Methyl bromide	Sample Measurement								
PARM Code 34413 Mon.Site No. PRT-1	Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	4 grabs/24 hr.period
Methyl chloride	Sample Measurement								
PARM Code 34418 Mon.Site No. PRT-1	Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	4 grabs/24 hr.period
Methylene chloride	Sample Measurement								
PARM Code 34423 Mon.Site No. PRT-1	Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	4 grabs/24 hr.period
1,1,2,2-tetrachloroethane	Sample Measurement								
PARM Code 34516 Mon.Site No. PRT-1	Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	4 grabs/24 hr.period
Tetrachloroethylene	Sample Measurement								
PARM Code 34475 Mon.Site No. PRT-1	Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	4 grabs/24 hr.period
Toluene	Sample Measurement								
PARM Code 34010 Mon.Site No. PRT-1	Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	4 grabs/24 hr.period
1,2-trans-dichloroethylene	Sample Measurement								
PARM Code 34546 Mon.Site No. PRT-1	Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	4 grabs/24 hr.period
1,1,1-trichloroethane	Sample Measurement								
PARM Code 34506 Mon.Site No. PRT-1	Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	4 grabs/24 hr.period
1,1,2-trichloroethane	Sample Measurement								
PARM Code 34511 Mon.Site No. PRT-1	Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	4 grabs/24 hr.period

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Manatee County Southwest WRF
 COUNTY: Manatee

MONITORING GROUP NUMBER: PRT-1
 MONITORING PERIOD From: _____ To: _____

PERMIT NUMBER: FLA012619

Parameter	Sample	Quantity or Loading		Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
		Measurement	Permit Requirement	(An.Avg.)	(Max.)				
Trichloroethylene	Sample								
PARM Code 39180 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)		UG/L		Annually	4 grabs/24 hr.period
Vinyl chloride	Sample								
PARM Code 39175 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)		UG/L		Annually	4 grabs/24 hr.period
2-chlorophenol	Sample								
PARM Code 34586 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)		UG/L		Annually	24-hr. FPC
2,4-dichlorophenol	Sample								
PARM Code 34601 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)		UG/L		Annually	24-hr. FPC
2,4-dimethylphenol	Sample								
PARM Code 34606 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)		UG/L		Annually	24-hr. FPC
4,6-dinitro-o-cresol	Sample								
PARM Code 34657 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)		UG/L		Annually	24-hr. FPC
2,4-dinitrophenol	Sample								
PARM Code 34616 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)		UG/L		Annually	24-hr. FPC
2-nitrophenol	Sample								
PARM Code 34591 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)		UG/L		Annually	24-hr. FPC
4-nitrophenol	Sample								
PARM Code 34646 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)		UG/L		Annually	24-hr. FPC
p-chloro-m-cresol	Sample								
PARM Code 82627 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)		UG/L		Annually	24-hr. FPC

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Manatee County Southwest WRF
 COUNTY: Manatee

MONITORING GROUP NUMBER: PRT-1
 MONITORING PERIOD From: _____ To: _____

PERMIT NUMBER: FLA012619

Parameter	Sample Measurement Permit Requirement	Quantity or Loading		Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
		Sample Measurement Permit Requirement	Permit Requirement	Report (An.Avg.)	Report (Max.)				
Pentachlorophenol	Sample Measurement Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
PARM Code 39032 Mon.Site No. PRT-1 Phenol, Single Compound	Sample Measurement Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
PARM Code 34694 Mon.Site No. PRT-1 2,4,6-trichlorophenol	Sample Measurement Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
PARM Code 34621 Mon.Site No. PRT-1 Acenaphthene	Sample Measurement Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
PARM Code 34205 Mon.Site No. PRT-1 Acenaphthylene	Sample Measurement Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
PARM Code 34200 Mon.Site No. PRT-1 Anthracene	Sample Measurement Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
PARM Code 34220 Mon.Site No. PRT-1 Benzidine	Sample Measurement Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
PARM Code 39120 Mon.Site No. PRT-1 Benzo(a)anthracene	Sample Measurement Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
PARM Code 34526 Mon.Site No. PRT-1 Benzo(a)pyrene	Sample Measurement Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
PARM Code 34247 Mon.Site No. PRT-1 Benzo(b)fluoranthene (3,4-benzo)	Sample Measurement Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
PARM Code 79531 Mon.Site No. PRT-1	Sample Measurement Permit Requirement			Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Manatee County Southwest WRF
 COUNTY: Manatee

MONITORING GROUP NUMBER: PRT-I
 MONITORING PERIOD From: _____ To: _____

PERMIT NUMBER: FLA012619

Parameter	Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
			Report (An.Avg.)	Report (Max.)				
Benzo(g,h,i)perylene	Sample Measurement							
PARM Code 34521 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Benzo(k)fluoranthene	Sample Measurement							
PARM Code 34242 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Bis (2-chloroethoxy) methane	Sample Measurement							
PARM Code 34278 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Bis (2-chloroethyl) ether	Sample Measurement							
PARM Code 34273 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Bis (2-chloroisopropyl) ether	Sample Measurement							
PARM Code 34283 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Bis (2-ethylhexyl) phthalate	Sample Measurement							
PARM Code 39100 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
4-bromophenyl phenyl ether	Sample Measurement							
PARM Code 34636 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Butyl benzyl phthalate	Sample Measurement							
PARM Code 34292 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
2-chloronaphthalene	Sample Measurement							
PARM Code 34581 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
4-chlorophenyl phenyl ether	Sample Measurement							
PARM Code 34641 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Manatee County Southwest WRF
 COUNTY: Manatee

MONITORING GROUP NUMBER: PRT-I
 MONITORING PERIOD From: _____ To _____

PERMIT NUMBER: FLA012619

Parameter	Quantity of Loading	Units	Quality of Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
			Report (An.Avg.)	Report (Max.)				
Chrysene	Sample Measurement							
PARM Code 34320 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Dibenzo (a,h) anthracene	Sample Measurement							
PARM Code 34556 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
1,2-dichlorobenzene	Sample Measurement							
PARM Code 34536 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
1,3-dichlorobenzene	Sample Measurement							
PARM Code 34566 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
1,4-dichlorobenzene	Sample Measurement							
PARM Code 34571 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
3,3'-dichlorobenzidine	Sample Measurement							
PARM Code 34631 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Diethyl phthalate	Sample Measurement							
PARM Code 34336 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Dimethyl phthalate	Sample Measurement							
PARM Code 34341 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Di-n-butyl phthalate	Sample Measurement							
PARM Code 39110 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
2,4-dinitrotoluene	Sample Measurement							
PARM Code 34611 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Manatee County Southwest WRF
 COUNTY: Manatee

MONITORING GROUP NUMBER: PRT-I
 MONITORING PERIOD From: _____ To _____

PERMIT NUMBER: FLA012619

Parameter	Quantity or Loading	Units	Quality of Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
			Report (An.Avg.)	Report (Max.)				
2,6-dinitrotoluene	Sample Measurement							
PARM Code 34626 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Di-n-octyl phthalate	Sample Measurement							
PARM Code 34596 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
1,2-diphenylhydrazine	Sample Measurement							
PARM Code 34346 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Fluoranthene	Sample Measurement							
PARM Code 34376 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Fluorene	Sample Measurement							
PARM Code 34381 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Hexachlorobenzene	Sample Measurement							
PARM Code 39700 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Hexachlorobutadiene	Sample Measurement							
PARM Code 39702 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Hexachlorocyclopentadiene	Sample Measurement							
PARM Code 34386 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Hexachloroethane	Sample Measurement							
PARM Code 34396 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Indeno (1,2,3-Cd) pyrene	Sample Measurement							
PARM Code 34403 Mon.Site No. PRT-I	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY: Manatee County Southwest WRF
 COUNTY: Manatee

MONITORING GROUP NUMBER: PRT-1
 MONITORING PERIOD From: _____ To _____

PERMIT NUMBER: FLA012619

Parameter	Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
			Report (An.Avg.)	Report (Max.)				
Isophorone	Sample Measurement							
PARM Code 34408 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Naphthalene	Sample Measurement							
PARM Code 34696 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Nitrobenzene	Sample Measurement							
PARM Code 34447 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
N-nitrosodimethylamine	Sample Measurement							
PARM Code 34438 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
N-nitrosodi-n-propylamine	Sample Measurement							
PARM Code 34428 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
N-nitrosodiphenylamine	Sample Measurement							
PARM Code 34433 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Phenanthrene	Sample Measurement							
PARM Code 34461 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Pyrene	Sample Measurement							
PARM Code 34469 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
1,2,4-trichlorobenzene	Sample Measurement							
PARM Code 34551 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC
Aldrin	Sample Measurement							
PARM Code 39330 Mon.Site No. PRT-1	Permit Requirement		Report (An.Avg.)	Report (Max.)	UG/L		Annually	24-hr. FPC