PERMITTEE NAME AND ADDRESS

(Include Facility Name/Locaton if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form Approvad

OMB No. 2040-0004

NAME City of Lyons

ADDRESS 161 NE Broad Street

Lyons, GA 30436

FACILITY Lyons North Plant

LOCATION

Lyons, GA 30436

GA0033391	000-1
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD			
	MM/DD/YYYY		MM/DD/YYYY
FROM	9/1/2016	TO	9/30/2016

DMR MAILING ZIP CODE: 30436

MINOR

(SUBR MM)

ACTIVE

External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX.	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen, dissolved (DO)	SAMPLE MEASUREMENT	***	***	***	**6.78**	***	***	mg/l		5 Days Every Week	GRAB
00300 1 0 Effluent Gross	PERMIT REQUIREMENT	***	***	***	2.0 FEB-MAR 5.0 APR-JUN 6.0 JUL-SEP **5.0 OCT-JAN**	***	***	mg/l		5 Days Every Week	GRAB
BOD, 5-day, 20 deg. C	SAMPLE MEASUREMENT	**6.7**	**8.5**	kg/day	***	**2.8**	**3.4**	mg/l		2 Days Every Week	Composite
00310 1 0 Effluent Gross	PERMIT REQUIREMENT	13 JUN-SEP **19 OCT-NOV** 25-Dec	16 JUN-SEP **24 OCT-NOV** 32 DEC	kg/day	***	5 JUN-SEP **7.5 OCT-NOV** 10-Dec	7.5 JUN-SEP **11.3 OCT-NOV** 15-Dec	mg/l		2 Days Every Week	Composite
BOD, 5-day, 20 deg. C	SAMPLE MEASUREMENT	**177**	**186**	kg/day	***	**81**	**105**	mg/l		2 Days Every Week	Composite
00310 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	**Req. Mon. MO AVG**	**Req. Mon. WKLY AVG**	kg/day	***	**Req. Mon. MO AVG**	**Req. Mon. WKLY AVG**	mg/l		2 Days Every Week	Composite
Total Suspended Solids	SAMPLE MEASUREMENT	**7**	**8**	kg/day	***	**3**	**4**	mg/l		2 Days Every Week	Composite
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	**72 MO AVG**	**90 WKLY AVG**	kg/day	***	**20 MO AVG**	**30 WKLY AVG**	mg/l		2 Days Every Week	Composite
Total Suspended Solids	SAMPLE MEASUREMENT	**152**	**343**	kg/day	***	**72**	**199**	mg/l		2 Days Every Week	Composite
00530 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	**Req. Mon. MO AVG**	**Req. Mon. WKLY AVG**	kg/day	***	**Req. Mon. MO AVG**	**Req. Mon. WKLY AVG**	mg/l		2 Days Every Week	Composite
Nitrogen, Ammonia Total (asN)	SAMPLE MEASUREMENT	**0.06**	**0.12**	kg/day	***	**0.02**	**0.06**	mg/l		2 Days Every Week	Composite
Effluent 00610 1 0	PERMIT REQUIREMENT	2.5 JUN-SEP **4-Oct** 6-Nov 13-Dec	3.2 JUN-SEP **5-Oct** 8-Nov 16-Dec	kg/day	***	1 JUN-SEP **1.5 OCT** 2.5 NOV 5-Dec	1.5 JUN-SEP **2.3 OCT** 3.8 NOV 7.5 DEC	mg/l		2 Days Every Week	Composite

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
LARRY DOUGLAS **OPERATOR**	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 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.	**Trey Pearson** **FOR Larry Douglas**	912-449-0999	**10/10/2016**
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE / NUMBER	MM/DD/YYYY

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

EPA Form 3320-1 (Rev.01/06) Previous editions May be used

PERMITTEE NAME AND ADDRESS
(Include Facility Name/Locaton if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form Approvad
OMB No. 2040-0004

NAME City of Lyons
ADDRESS 161 NE Broad Street
Lyons, GA 30436
FACILITY Lyons North Plant
LOCATION
Lyons, GA 30436

GA0033391	000-1
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD		
MM/DD/YYYY		MM/DD/YYYY
9/1/2016	TO	9/30/2016

DMR MAILING ZIP CODE: 30436
MINOR
(SUBR MM)
ACTIVE
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO.	FREQUENCY	SAMPLE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	EX.	OF ANALYSIS	TYPE
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	**0.55**	**0.594**	mgd	***	***	***	***		5 Days Every Week	Continuous
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	**0.67 MO AVG**	**0.838 WKLY AVG**	mgd	***	***	***	***		5 Days Every Week	Continuous
Chlorine, total residual	SAMPLE MEASUREMENT	***	***	***	***	***	**0.000**	mg/l		2 Days Every Week	GRAB
50060 1 0 CWL Effluent Gross	PERMIT REQUIREMENT	***	***	***	***	***	**0.022 DAILY MAX**	mg/l		2 Days Every Week	GRAB
Coliform, Fecal General	SAMPLE MEASUREMENT	***	***	***	***	**1**	**1**	mpn/100 ml		1 Day Every Week	GRAB
74055 1 0 Effluent Gross	PERMIT REQUIREMENT	***	***	***	***	**200 MO GEO**	**400 WKLY GEO**	mpn/100 ml		1 Day Every Week	GRAB
Solids, sludge, tot, dry weight	SAMPLE MEASUREMENT	**0.00**	***	Dry Ton	***	***	***	***		MONTHLY	CALCTD
78477 S 0 See Comments	PERMIT REQUIREMENT	**Opt. Mon. MO TOTAL**	***	Dry Ton	***	***	***	***		MONTHLY	CALCTD
BOD, 5-Day, Percent Removal	SAMPLE MEASUREMENT	***	***	***	**96**	***	***	%		MONTHLY	CALCTD
Removal 81010 K 0	PERMIT REQUIREMENT	***	***	***	**85 MN % RMV**	***	***	%		MONTHLY	CALCTD
Solids, Suspended Percent Removal	SAMPLE MEASUREMENT	***	***	***	**96**	***	***	%		MONTHLY	CALCTD
Removal 81011 K 0	PERMIT REQUIREMENT	***	***	***	**85 MN % RMV**	***	***	%		MONTHLY	CALCTD
pH	SAMPLE MEASUREMENT	***	***	***	**6.6**	***	**7.5**	su		5 Days Every Week	GRAB
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	***	***	***	**6 MINIMUM**	***	**8.5 MAXIMUM**	su		5 Days Every Week	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
LARRY DOUGLAS OPERATOR	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 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.	**Trey Pearson FOR Larry Douglas**	912-449-0999	**10/10/2016**
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE / NUMBER	MM/DD/YYYY

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

NOTE: FECAL COLIFORM OF <1 mpn/100 ml is indicated by "1"

FACILITY

Lyons North Plant

PERMIT NUMBER	MONITORING PERIOD		
GA0033391	MM/DD/YYYY	TO	MM/DD/YYYY
	9/1/2016		9/30/2016

	METER READINGS		EFF FLOW Daily Effluent	EFF FLOW Avg Wkly Effluent	DO Monthly Effluent	BOD INFLUENT Monthly Influent	BOD INFLUENT Avg Wkly Influent	BOD INFLUENT Monthly Influent	BOD INFLUENT Avg Wkly Influent	BOD EFFLUENT Monthly Effluent	BOD EFFLUENT Avg Wkly Effluent	BOD EFFLUENT Monthly Effluent	BOD EFFLUENT Avg Wkly Effluent
			mgd	mgd	CONC	CONC	CONC	LOADING	LOADING	CONC	CONC	LOADING	LOADING
8/28/2016	270662	270927	0.265										
8/29/2016	270927	271080	0.153		6.22								
8/30/2016	271080	271512	0.432		7.19	106		174.01		2.88		4.73	
8/31/2016	271512	272013	0.501		6.73	88.0		167.53		3.82		7.27	
9/1/2016	272013	272499	0.486		7.07								
9/2/2016	272499	273037	0.538		7.21								
9/3/2016	273037	273913	0.876	**0.4644**			**97.00**		**170.77**		**3.35**		**6.00**
9/4/2016	273913	274589	0.676										
9/5/2016	274589	275231	0.642		8.11								
9/6/2016	275231	275734	0.503		7.11	96.2		183.88		1.00		1.91	
9/7/2016	275734	276367	0.633		7.21	62.3		149.86		1.00		2.41	
9/8/2016	276367	276754	0.387		7.3								
9/9/2016	276754	277117	0.363		7.31								
9/10/2016	277117	277523	0.406	**0.5157**			**79.25**		**166.87**		**1.00**		**2.16**
9/11/2016	277523	277831	0.308										
9/12/2016	277831	278213	0.382		7.68								
9/13/2016	278213	278946	0.733		7.37	58.9		164.06		3.54		9.86	
9/14/2016	278946	279692	0.746		7.56	57.4		162.72		2.51		7.12	
9/15/2016	279692	280404	0.712		7.44								
9/16/2016	280404	281053	0.649		7.46								
9/17/2016	281053	281681	0.628	**0.5940**			**58.15**		**163.39**		**3.03**		**8.49**
9/18/2016	281681	282235	0.554										
9/19/2016	282235	282628	0.393		7.22	95.3		142.32		2.04		3.05	
9/20/2016	282628	283154	0.526		7.34	115		229.86		4.16		8.32	
9/21/2016	283154	283793	0.639		6.78								
9/22/2016	283793	284291	0.498		6.78								
9/23/2016	284291	284833	0.542		7.14								
9/24/2016	284833	285264	0.431	**0.5119**			**105.15**		**186.09**		**3.10**		**5.68**
9/25/2016	285264	285730	0.466										
9/26/2016	285730	285973	0.243		7.12								
9/27/2016	285973	286578	0.605		7.91	72.7		167.14		2.02		4.64	
9/28/2016	286578	287228	0.65		7.21	86.9		214.64		6.46		15.96	
9/29/2016	287228	287846	0.618		7.11								
9/30/2016	287846	288412	0.566		7.34								

			EFF FLOW Monthly	EFF FLOW Weekly		INF Concentration MO.INF	INF Concentration WKLY	INF LOADING MO.	INF LOADING WKLY	EFF Concentration MO.EFF	EFF Concentration WKLY	EFF LOADING MO.	EFF LOADING WKLY
			MGD	MGD	D.O.	BOD	BOD	BOD	BOD	BOD	BOD	BOD	BOD
For calculati	**Average**		**0.547**	**0.5215**	**7.31**	**81**	**85**	**177**	**172**	**3**	**3**	**6.7**	**5.6**
purposes:	**Maximum**		**0.876**	**0.5940**	**8.11**	**115**	**105**	**230**	**186**	**6**	**3**	**16.0**	**8.5**
<2 = 1	**Minimum**		**0.243**	**0.4644**	**6.78**	**57**	**58**	**142**	**163**	**1**	**1**	**1.9**	**2.2**
VIOLATION	**Average**		**>**	**0.9**	**2**					**30**	**45**	**108**	**135**
	Maximum		**>**	**1.19**	**min.**								
MAJOR	**Average**		**≥**							**45**	**67.5**	**162**	**202.5**
SPILL	**Maximum**		**≥**										

FACILITY

Lyons North Plant

PERMIT NUMBER	MONITORING PERIOD		
GA0033391	MM/DD/YYYY	TO	MM/DD/YYYY
	9/1/2016		9/30/2016

pH	TSS INFLUENT				TSS EFFLUENT				CHLORINE	FECAL COLIFORM	
Monthly Effluent	Monthly Influent	Avg. Wkly. Influent	Monthly Influent	Avg. Wkly. Influent	Monthly Effluent	Avg. Wkly. Effluent	Monthly Effluent	Avg. Wkly. Effluent	Monthly Effluent	Monthly Effluent	Avg. Wkly. Effluent
CONC	CONC	CONC	LOADING	LOADING	CONC	CONC	LOADING	LOADING	CONC	CONC	CONC
6.83									0.00		
6.81	274		449.80		2.60		4.27		0.00	1.0	
6.93	124		236.07		2.50		4.76		0.00		
7.09									0.00		
7.00									0.00		
		199.00		**342.93**		**2.55**		**4.51**			**1**
7.48									0.00		
6.71	102		194.96		2.20		4.21		0.00	1.0	
7.13	44.0		105.84		2.10		5.05		0.00		
6.81									0.00		
6.67									0.00		
		73.00		**150.40**		**2.15**		**4.63**			**1**
6.77									0.00		
6.74	43.6		121.44		2.70		7.52		0.00	1.0	
6.7	26.0		73.70		3.00		8.50		0.00		
6.67									0.00		
6.78									0.00		
		34.80		**97.57**		**2.85**		**8.01**			**1**
7.26	103		153.82		3.50		5.23		0.00	1.0	
6.92	109		217.87		3.60		7.20		0.00		
6.61									0.00		
6.98									0.00		
6.72									0.00		
		106.00		**185.84**		**3.55**		**6.21**			**1**
6.96									0.00		
6.63	85.0		195.42		3.30		7.59		0.00		
6.68	63.0		155.61		3.40		8.40		0.00	1.0	
6.78									0.00		
6.71									0.00		

	INF Concentration		INF LOADING		EFF Concentration		EFF LOADING			EFF Concentration	
	MO.INF	WKLY	MO.	WKLY	MO.EFF	WKLY	MO.	WKLY	EFF	MO.	Wkly
pH	TSS	TSS	TSS	TSS	TSS	TSS	TSS	TSS	Chlorine	Fecal	Fecal
***	72	103	152	194	3	3	7	5.8	0.00	1	
7.48	109	199	218	343	4	4	9	8	0.00		1
6.61	26	35	74	98	2	2	4	4.5	0.00	1	
6					20	30	72	90	0.5	200	
9									max	400	
					30	45	108	135		(1 = <2)	

FACILITY

Lyons North Plant

PERMIT NUMBER	MONITORING PERIOD		
	MM/DD/YYYY	TO	MM/DD/YYYY
GA0033391	**9/1/2016**		**9/30/2016**

FECAL COLIFORM		BOD REMOVAL		TSS REMOVAL		AMMONIA EFFLUENT				SLUDGE	
Monthly Effluent	Avg. Wkly. Effluent	Monthly Effluent	Avg. Wkly. Effluent	Monthly Effluent	Avg. Wkly. Effluent	Monthly Effluent	Avg. Wkly. Effluent	Monthly Effluent	Avg. Wkly. Effluent		
LOG	LOG	%	%	%	%	CONC	CONC	LOADING	LOADING	Sludge	
											8/28/2016
											8/29/2016
0.0000		97		99		0.032		0.05			8/30/2016
		96		98		0.095		0.18			8/31/2016
											9/1/2016
											9/2/2016
	0.00		**96**		**99**		**0.06**		**0.12**		9/3/2016
											9/4/2016
											9/5/2016
0.0000		99		98		0.0102		0.02			9/6/2016
		98		95		0.0344		0.08			9/7/2016
											9/8/2016
											9/9/2016
	0.00		**99**		**97**		**0.02**		**0.05**		9/10/2016
											9/11/2016
											9/12/2016
0.0000		94		94		0.054		0.15			9/13/2016
		96		88		0.026		0.07			9/14/2016
											9/15/2016
											9/16/2016
	0.00		**95**		**91**		**0.04**		**0.11**		9/17/2016
											9/18/2016
0.0000		98		97		0.016		0.02			9/19/2016
		96		97		0.005		0.01			9/20/2016
											9/21/2016
											9/22/2016
											9/23/2016
	0.00		**97**		**97**		**0.01**		**0.02**		9/24/2016
											9/25/2016
											9/26/2016
		97		96		0.031		0.07			9/27/2016
0.0000		93		95		0.017		0.04			9/28/2016
											9/29/2016
											9/30/2016
										0.00	
		BOD Removal		**TSS Removal**		**EFF Concentration**		**EFF LOADING**			
Fecal	**Fecal**	**MO.**	**Wkly**	**MO.**	**Wkly**	**MO.**	**WKLY**	**MO.**	**WKLY**		
LOG	**LOG**	**BOD**	**BOD**	**TSS**	**TSS**	**NH3**	**NH3**	**NH3**	**NH3**	**Sludge**	
0.0000	0.0000	**96**	**97**	**96**	**96**	**0.02**	**0.03**	**0.06**	**0.07**	**0.00**	
0.0000	0.0000	**94**	**99**	**97**	**99**	**0.05**	**0.06**	**0.15**	**0.12**	**0.00**	
0.0000		**98**	**95**	92	**91**	**0.01**	**0.01**	**0.01**	**0.02**	**0.00**	
		85		**85**		**17.4**		**62.7**			
						26.1		**78.3**			