METRO

Waste Discharge Self Monitoring Report

Mail to: Metro, Industrial Waste
130 Nickerson St., Suite 200,
Seattle, WA 98109-1658

Company Name Alaskan Copper Works Month November 19 94 No. of Employees (per day) Average _____ Maximum _____

Permit No. 7238 Station No. _____ Site No. _____ All units mg/l unless otherwise noted Industry Type _____

Sample Dates (circle)	Sample Type C (composite) or G (grab)	pH Min	pH Max	Cadmium, Cd	Chromium, Cr	Copper, Cu	Lead, Pb	Mercury, Hg	Nickel, Ni	Silver, Ag	Zinc, Zn	Cyanide, CN,A	Cyanide, CN,T	Fats, Oils and Grease (FOG)	Total Toxic Organics (TTO)	Other Parameters			Flow (GPD) Total	Flow (GPD) Industrial	Flow (GPD) Specify	Notes
1		10.5	10.6																20,998	1628		
2		10.2	10.5																21,265	1895		
3		10.0	10.5																21,086	1716		
4		10.2	11.0																21,301	1931		
5		9.3	10.9																21,020	1650		
6																				—		
7		9.9	10.5																20,535	1185		
8		9.9	10.0																21,509	2139		
9	C	9.6	11.5		.69	.44			.47		.06								20,693	1323		
10		9.6	9.8																21,356	1986		
11		9.5	10.5																21,449	2079		
12		10.1	11.4																20,686	1316		
13																				—		
14		10.5	12.5																21,771	2401		
15		8.6	11.0																21,089	1719		
16		11.0	11.4																21,602	2232		
17		10.4	12.0																20,823	1453		
18		11.2	12.0																21,115	1745		
19		11.2	11.2																20,563	1193		
20																				—		
21		11.2	12.0																20,838	1468		
22		11.8	12.0																21,035	1665		
23		10.0	11.4																21,199	1829		
24																				—		
25																				—		THANKSGIVING WEEK-END
26																				—		
27																				—		
28		7.75	11.0																22,110	2740		
29		11.1	12.2																21,916	2546		
30	C	10.7	11.7		1.7	1.3			1.2		.15								21,214	1844		
31																						
Min.																						
Max.																						
Average																						

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.

Signature of Principal Executive or Authorized Agent _____ Date _____

Please circle all permit violations

Additional Comments _____

1330 (Rev. 8/92)

AKC-0013090

METRO

Waste Discharge Self Monitoring Report

Mail to: Metro, Industrial Waste
130 Nickerson St., Suite 200,
Seattle, WA 98109-1658

Company Name Alaskan Copper Works Month November 19 94 No. of Employees (per day) Average _____ Maximum _____

Permit No. 7201 Station No. _____ Site No. _____ All units mg/l unless otherwise noted Industry Type _____

Sample Dates (circle)	Sample Type C (composite) or G (grab)	pH Min	pH Max	Cadmium, Cd	Chromium, Cr	Copper, Cu	Lead, Pb	Mercury, Hg	Nickel, Ni	Silver, Ag	Zinc, Zn	Cyanide, CN,A	Cyanide, CN,T	Fats, Oils and Grease (FOG)	Total Toxic Organics (TTO)	Other Parameters				Flow (GPD) Total	Flow (GPD) Industrial	Flow (GPD) Specify	Notes
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Average																							

Not IN USE This month

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.

Signature of Principal Executive or Authorized Agent _____ Date _____

Please circle all permit violations

Additional Comments _____

1330 (Rev. 8/92)

AKC-0013091