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 August 19 94 No. of Employees (per day) Average _____ Maximum _____

Permit No. 7258 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	10.5																	20,864	1494		
2		10.9	12.4																	21,090	1720		
3		11.3	12.1																	20,740	1370		
4		10.9	12.4																	20,606	1236		
5		10.6	11.8																	21,025	1655		
6																					—		
7																					—		
8		9.8	11.3																	20,685	1315		
9		10.9	11.5																	21,080	1710		
10		11.0	11.5																	21,001	1631		
11		10.7	12.0																	20,810	1440		
12	C	10.7	12.0		1.5	1.5			1.9		.15									20,399	1029		
13		11.4	11.6																	20,934	1564		
14																					—		
15		11.4	11.7																	20,489	1119		
16		10.9	11.9																	21,513	2143		
17		9.9	11.6																	20,820	1450		
18		10.3	11.7																	20,651	1281		
19		10.1	10.2																	20,674	1304		
20		10.3	11.3																	20,695	1325		
21																					—		
22		10.4	11.2																	20,852	1482		
23		10.4	11.3																	20,682	1312		
24	C	9.8	10.2		1.0	1.6			1.1		.09									20,645	1275		
25		9.7	11.8																	20,841	1471		
26		10.2	11.2																	20,813	1443		
27																					—		
28																					—		
29		9.7	11.0																	21,337	1967		
30		9.9	10.4																	21,012	1642		
31		9.4	11.5																	20802	1432		
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-0013157

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 August 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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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 _____

AKC-0013158