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 December 19 93 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
1																							
2																							
3																							
4																							
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28																							
29																							
30																							
31																							
Min.																							
Max.																							
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-0013384

AKC-0013385

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 December 19 93 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		10.2	10.7																		2762		
2		10.2	11.0																		3145		
3		10.6	10.8																		2451		
4																					—		
5																					—		
6		10.2	10.5																		2448		
7		10.5	10.4																		2462		
8		10.2	10.3																		1925		
9		10.2	10.2																		3158		
10		10.1	10.1																		2665		
11																					—		
12																					—		
13		9.9	10.0																		2743		
14		9.9	9.9																		2995		
15		9.9	10.3		0.3	1.2			1.8		0.1										2116		
16		10.2	10.3																		3272		
17		9.4	11.5																		2896		
18																					—		
19																					—		
20		10.6	11.4																		3064		
21		10.7	10.9																		3091		
22		10.2	10.9																		3119		
23		9.6	10.2																		1853		
24																					—		
25																					—		
26																					—		
27		9.7	10.0																		1966		
28		10.5	12.2																		2291		
29		10.0	11.1																		3152		
30		9.9	10.6		0.35	0.17			0.16		0.05										3198		
31																					—		
Min.																							
Max.																							
Average																							

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Signature of Principal Executive or Authorized Agent Date

Please circle all permit violations

Additional Comments _____

1330 (Rev. 8/92)