

NPDES PERMIT NO.: NC0024252
 FACILITY NAME: Northeast WWTP
 OWNER NAME: City of Conover
 GRADE: WW-4
 eDMR PERIOD: 07-2012 (July 2012)
 COMPLIANCE: Compliant

PERMIT VERSION: 3.0
 CLASS: WW-3
 ORC: Michael Lee Fox
 ORC HAS CHANGED: No
 VERSION: 1.0
 CONTACT PHONE #: 8284652279

PERMIT STATUS: Active
 COUNTY: Catawba
 ORC CERT NUMBER: 10941
 STATUS: Processed
 SUBMISSION DATE: 08/27/2012

SAMPLING LOCATION: INFLUENT DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO310 | CO610 | CO530 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|------------|--------------|------------|
| | | | | | | | 3 X week | 3 X week | 3 X week |
| | | | | | | | Composite | Calculated | Composite |
| | | | | | | | BOD - Conc | NH3-N - Conc | TSS - Conc |
| | | | | | | | mg/l | mg/l | mg/l |
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| 3 | 0830 | | | | | | 316 | 29.75 | 153 |
| 4 | | | | | | | | | |
| 5 | 0825 | | | | | | 312 | 29.75 | 143 |
| 6 | 0835 | | | | | | 252 | 34.5 | 257 |
| 7 | | | | | | | | | |
| 8 | | | | | | | | | |
| 9 | | | | | | | | | |
| 10 | 0830 | | | | | | 365 | 25 | 220 |
| 11 | 0835 | | | | | | 297 | 24.75 | 367 |
| 12 | 0835 | | | | | | 255 | 27 | 140 |
| 13 | | | | | | | | | |
| 14 | | | | | | | | | |
| 15 | | | | | | | | | |
| 16 | | | | | | | | | |
| 17 | 0835 | | | | | | 238 | 29.75 | 227 |
| 18 | 0835 | | | | | | 228 | 29.5 | 123 |
| 19 | 0840 | | | | | | 207 | 31 | 140 |
| 20 | | | | | | | | | |
| 21 | | | | | | | | | |
| 22 | | | | | | | | | |
| 23 | | | | | | | | | |
| 24 | 0835 | | | | | | 269 | 33.75 | 240 |
| 25 | 0840 | | | | | | 273 | 26 | 303 |
| 26 | 0845 | | | | | | 238 | 24.25 | 154 |
| 27 | | | | | | | | | |
| 28 | | | | | | | | | |
| 29 | | | | | | | | | |
| 30 | | | | | | | | | |
| 31 | 0830 | | | | | | 265 | 35.75 | 243 |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | 270.3846 | 29.2885 | 208.4615 |
| Daily Maximum: | | | | | | | 365 | 35.75 | 367 |
| Daily Minimum: | | | | | | | 207 | 24.25 | 123 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

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 GRADE: WW-4
 eDMR PERIOD: 07-2012 (July 2012)
 COMPLIANCE: Compliant

PERMIT VERSION: 3.0
 CLASS: WW-3
 ORC: Michael Lee Fox
 ORC HAS CHANGED: No
 VERSION: 1.0
 CONTACT PHONE #: 8284652279

PERMIT STATUS: Active
 COUNTY: Catawba
 ORC CERT NUMBER: 10941
 STATUS: Processed
 SUBMISSION DATE: 08/27/2012

SAMPLING LOCATION: UPSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------|----------|
| | | | | | | | 3 X week | 3 X week |
| | | | | | | | Grab | Grab |
| | | | | | | | TEMP-C | DO |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | deg c | mg/l |
| 1 | | | | | | | | |
| 2 | 1112 | | | | | | 22.5 | 7.6 |
| 3 | 1055 | | | | | | 23 | 7.8 |
| 4 | 1430 | | | | | | 23.8 | 7.6 |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | 1049 | | | | | | 24.2 | 7.2 |
| 10 | 1035 | | | | | | 23.1 | 7.6 |
| 11 | 1118 | | | | | | 22.7 | 7.9 |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | 1103 | | | | | | 22.7 | 7.7 |
| 17 | 1053 | | | | | | 23.4 | 8.2 |
| 18 | 1430 | | | | | | 24.4 | 7.9 |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | 1051 | | | | | | 23.3 | 7.4 |
| 24 | 1020 | | | | | | 23.8 | 7.3 |
| 25 | | | | | | | | |
| 26 | 1136 | | | | | | 24.1 | 7.5 |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | 1455 | | | | | | 24.5 | 7.6 |
| 31 | 1043 | | | | | | 22.5 | 8.2 |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 23.4286 | 7.6786 |
| Daily Maximum: | | | | | | | 24.5 | 8.2 |
| Daily Minimum: | | | | | | | 22.5 | 7.2 |
| Monthly Avg % Removal (85%): | | | | | | | | |

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CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 07-2012 (July 2012)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 08/27/2012

SAMPLING LOCATION: EFFLUENT DISCHARGE NO.: 001 NO DISCHARGE*: NO (Continue)

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO600 | CO665 | 01092 | TGP3B | 01042 | THP3B | NC01 | |
|------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------------|----------------|-----------|-----------|-----------|--------------------|--------------|--|
| | | | | | | | Monthly | Monthly | 2 X month | Quarterly | 2 X month | Once per discharge | Annually | |
| | | | | | | | Composite | Composite | Composite | Composite | Composite | Composite | Grab | |
| | | | | | | | TOTAL N - Conc | TOTAL P - Conc | ZINC | CER17DPF | COPPER | CER17DCHV | ANN POL SCAN | |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | mg/l | mg/l | mg/l | pass/fail | mg/l | percent | yes=1 no=0 | |
| 1 | | | | | | | | | | | | | | |
| 2 | | | 0730 | 8 | Y | | | | | | | | | |
| 3 | 0830 | | 0700 | 8 | Y | | | | | | | | | |
| 4 | Holiday | | | | | | | | | | | | | |
| 5 | 0825 | | 0700 | 8 | Y | | | | | | | | | |
| 6 | 0835 | | 0720 | 8 | Y | | | | | | | | | |
| 7 | | | | | | | | | | | | | | |
| 8 | | | | | | | | | | | | | | |
| 9 | | | 0710 | 8 | Y | | | | | | | | | |
| 10 | 0830 | | 0720 | 8 | Y | | 5.14 | 3.23 | 0.118 | | 0.005 | | | |
| 11 | 0835 | | 0710 | 8 | Y | | | | | | | | | |
| 12 | 0835 | | 0718 | 8 | Y | | | | | | | | | |
| 13 | | | 0700 | 8 | B | | | | | | | | | |
| 14 | | | | | | | | | | | | | | |
| 15 | | | | | | | | | | | | | | |
| 16 | | | 0712 | 8 | Y | | | | | | | | | |
| 17 | 0835 | | 0720 | 8 | Y | | | | | | | | | |
| 18 | 0835 | | 0718 | 8 | Y | | | | | | | | | |
| 19 | 0840 | | 0720 | 8 | Y | | | | | | | | | |
| 20 | | | 0718 | 8 | Y | | | | | | | | | |
| 21 | | | | | | | | | | | | | | |
| 22 | | | | | | | | | | | | | | |
| 23 | | | 0710 | 8 | Y | | | | | | | | | |
| 24 | 0835 | | 0708 | 8 | Y | | | | | | | | | |
| 25 | 0840 | | 0730 | 8 | Y | | | | 0.109 | | 0.007 | | | |
| 26 | 0845 | | 0714 | 8 | Y | | | | | | | | | |
| 27 | | | 0706 | 8 | Y | | | | | | | | | |
| 28 | | | | | | | | | | | | | | |
| 29 | | | | | | | | | | | | | | |
| 30 | | | 0725 | 8 | Y | | | | | | | | | |
| 31 | 0830 | | 0715 | 8 | Y | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | | | |
| Monthly Average: | | | | | | | 5.14 | 3.23 | 0.1135 | | 0.006 | | | |
| Daily Maximum: | | | | | | | 5.14 | 3.23 | 0.118 | | 0.007 | | | |
| Daily Minimum: | | | | | | | 5.14 | 3.23 | 0.109 | | 0.005 | | | |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | | | |

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FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 07-2012 (July 2012)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 08/27/2012

SAMPLING LOCATION: DOWNSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------|----------|
| | | | | | | | 3 X week | 3 X week |
| | | | | | | | Grab | Grab |
| | | | | | | | TEMP-C | DO |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | deg c | mg/l |
| 1 | | | | | | | | |
| 2 | 1055 | | | | | | 22.3 | 7.4 |
| 3 | 1035 | | | | | | 22.9 | 7.7 |
| 4 | 1405 | | | | | | 23.4 | 7.9 |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | 1028 | | | | | | 24 | 7.2 |
| 10 | 1015 | | | | | | 23.3 | 7.5 |
| 11 | 1101 | | | | | | 22.6 | 7.8 |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | 1047 | | | | | | 22.6 | 7.6 |
| 17 | 1030 | | | | | | 23.8 | 7.9 |
| 18 | 1113 | | | | | | 24.6 | 7.8 |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | 1056 | | | | | | 23.1 | 7.4 |
| 24 | 1002 | | | | | | 23.6 | 7.4 |
| 25 | | | | | | | | |
| 26 | 1115 | | | | | | 24.2 | 7.6 |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | 1438 | | | | | | 24.3 | 7.5 |
| 31 | 1009 | | | | | | 22.7 | 8.2 |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 23.3857 | 7.6357 |
| Daily Maximum: | | | | | | | 24.6 | 8.2 |
| Daily Minimum: | | | | | | | 22.3 | 7.2 |
| Monthly Avg % Removal (85%): | | | | | | | | |

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eDMR PERIOD: 07-2012 (July 2012)
COMPLIANCE: Compliant

PERMIT VERSION: 3.0
CLASS: WW-3
ORC: Michael Lee Fox
ORC HAS CHANGED: No
VERSION: 1.0
CONTACT PHONE #: 8284652279

PERMIT STATUS: Active
COUNTY: Catawba
ORC CERT NUMBER: 10941
STATUS: Processed
SUBMISSION DATE: 08/27/2012

08/27/2012

ORC/Certifier Signature: Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

By this signature, I certify that this report is accurate and complete to the best of my knowledge.

The permittee shall report to the Director or the appropriate Regional Office any noncompliance that potentially threatens public health or the environment. Any information shall be provided orally within 24 hours from the time the permittee became aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances.

If the facility is noncompliant, please attach a list of corrective actions being taken and a time-table for improvements to be made as required by part II.E.6 of the NPDES permit.

COMMENTS: BOD Monthly Avg % Removal 100%

TSS Monthly Avg % Removal 99%

NH3 Monthly Avg % Removal 98%

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 managed 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 fines and imprisonment for knowing violations.

08/27/2012

Permittee/Submitter Signature:*** Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

Permittee Address: 3680 Hillview Dr Conover NC 28613 Permit Expiration Date: 04/30/2015

CERTIFIED LABORATORIES

LAB NAME: Water Tech Lab, Reseach and Analytical

CERTIFIED LAB #: 50, 34

PERSON(S) COLLECTING SAMPLES: Evan Rubins, Michael Fox

PARAMETER CODES

Parameter Codes assistance may be obtained by calling the NPDES Unit (919) 807-6300 or by visiting the Surface Water Protection Section's web site at <http://portal.ncdenr.org/web/wq/swp> and linking to the unit's information pages.

FOOTNOTES

Use only units of measurement designated in the reporting facility's NPDES permit for reporting data.

* No Flow/Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data to be entered for all of the parameters on the DMR for entire monitoring period.

** ORC on Site?: ORC must visit facility and document visitation of facility as required per 15A NCAC 8G .0204.

*** Signature of Permittee: If signed by other than the permittee, then delegation of the signatory authority must be on file with the state per 15A NCAC 2B .0506(b)(2)(D).

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ORC: Michael Lee Fox
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FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 08-2012 (August 2012)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 09/20/2012

SAMPLING LOCATION: UPSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------|----------|
| | | | | | | | 3 X week | 3 X week |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | TEMP-C | DO |
| | | | | | | | deg c | mg/l |
| 1 | | | 1117 | | | | 22.8 | 8.4 |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | 1045 | | | | 23.2 | |
| 7 | | | 1115 | | | | 22.7 | 8.1 |
| 8 | | | 1425 | | | | 24.7 | 8.4 |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | 1017 | | | | 21.2 | 7.9 |
| 14 | | | 1516 | | | | 23.6 | 8.4 |
| 15 | | | 1110 | | | | 22.3 | 8.6 |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | 1110 | | | | 21.8 | 8.4 |
| 21 | | | 1055 | | | | 22.4 | 8.8 |
| 22 | | | 1115 | | | | 22.6 | 8.6 |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | | | 1031 | | | | 20.8 | 10.1 |
| 28 | | | 1055 | | | | 21.6 | 9.4 |
| 29 | | | 1146 | | | | 22.6 | 8.8 |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 22.4846 | 8.5462 |
| Daily Maximum: | | | | | | | 24.7 | 10.1 |
| Daily Minimum: | | | | | | | 20.8 | 7.2 |
| Monthly Avg % Removal (85%): | | | | | | | | |

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CONTACT PHONE #: 8284652279

SUBMISSION DATE: 09/20/2012

SAMPLING LOCATION: DOWNSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------|----------|
| | | | | | | | 3 X week | 3 X week |
| | | | | | | | Grab | Grab |
| | | | | | | | TEMP-C | DO |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | deg c | mg/l |
| 1 | 1102 | | | | | | 22.7 | 8.3 |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | 1002 | | | | | | 23.4 | |
| 7 | 1055 | | | | | | 23 | 8 |
| 8 | 1410 | | | | | | 24.5 | 8.4 |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | 1022 | | | | | | 20.6 | 7.7 |
| 14 | 1455 | | | | | | 23.1 | 8.5 |
| 15 | 1055 | | | | | | 22.5 | 8.7 |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | 1059 | | | | | | 21.6 | 8.1 |
| 21 | 1038 | | | | | | 22.2 | 8.6 |
| 22 | 1100 | | | | | | 22.4 | 8.4 |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | 1017 | | | | | | 20.1 | 10.2 |
| 28 | 1114 | | | | | | 21.9 | 9.3 |
| 29 | 1130 | | | | | | 22.4 | 8.3 |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 22.3385 | 8.4385 |
| Daily Maximum: | | | | | | | 24.5 | 10.2 |
| Daily Minimum: | | | | | | | 20.1 | 7.2 |
| Monthly Avg % Removal (85%): | | | | | | | | |

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CONTACT PHONE #: 8284652279

SUBMISSION DATE: 09/20/2012

SAMPLING LOCATION: EFFLUENT DISCHARGE NO.: 001 NO DISCHARGE*: NO (Continue)

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO600 | CO665 | 01092 | TGP3B | 01042 | THP3B | NC01 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------------|----------------|-----------|-----------|-----------|--------------------|--------------|
| | | | | | | | Monthly | Monthly | 2 X month | Quarterly | 2 X month | Once per discharge | Annually |
| | | | | | | | Composite | Composite | Composite | Composite | Composite | Composite | Grab |
| | | | | | | | TOTAL N - Conc | TOTAL P - Conc | ZINC | CER17DPF | COPPER | CER7DCHV | ANN POL SCAN |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | mg/l | mg/l | mg/l | pass/fail | mg/l | percent | yes=1 no=0 | |
| 1 | 0835 | 24 | 0715 | 8 | Y | | | | | | | | |
| 2 | 0840 | 24 | 0708 | 8 | Y | | | | | | | | |
| 3 | | | 1335 | 8 | Y | | | | | | | | |
| 4 | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | |
| 6 | | | 0715 | 8 | Y | | | | | | | | |
| 7 | 0835 | 24 | 0835 | 8 | Y | | | | | | | | |
| 8 | 0840 | 24 | 0825 | 8 | Y | | 8.12 | 5.28 | 0.08 | | 0.005 | | |
| 9 | 0840 | 24 | 0720 | 8 | Y | | | | | | | | |
| 10 | | | 0700 | 8 | B | | | | | | | | |
| 11 | | | | | | | | | | | | | |
| 12 | | | | | | | | | | | | | |
| 13 | | | 0730 | 8 | Y | | | | | | | | |
| 14 | 0835 | 24 | 0710 | 8 | Y | | | | | | | | |
| 15 | 0850 | 24 | 0730 | 8 | Y | | | | | | | | |
| 16 | 0845 | 24 | 1330 | 8 | Y | | | | | | | | |
| 17 | | | 1330 | 8 | Y | | | | | | | | |
| 18 | | | | | | | | | | | | | |
| 19 | | | | | | | | | | | | | |
| 20 | | | 0730 | 8 | Y | | | | | | | | |
| 21 | 0840 | 24 | 0714 | 8 | Y | | | | | | | | |
| 22 | 0845 | 24 | 0709 | 8 | Y | | | | 0.119 | | 0.007 | | |
| 23 | 0850 | 24 | 0700 | 8 | Y | | | | | | | | |
| 24 | | | 0700 | 8 | B | | | | | | | | |
| 25 | | | | | | | | | | | | | |
| 26 | | | | | | | | | | | | | |
| 27 | | | 0708 | 8 | Y | | | | | | | | |
| 28 | 0840 | 24 | 0715 | 8 | Y | | | | | | | | |
| 29 | 0855 | 24 | 0700 | 8 | Y | | | | | | | | |
| 30 | 0905 | 24 | 0705 | 8 | Y | | | | | | | | |
| 31 | | | 0748 | 8 | Y | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | | |
| Monthly Average: | | | | | | | 8.12 | 5.28 | 0.0995 | | 0.006 | | |
| Daily Maximum: | | | | | | | 8.12 | 5.28 | 0.119 | | 0.007 | | |
| Daily Minimum: | | | | | | | 8.12 | 5.28 | 0.08 | | 0.005 | | |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 08-2012 (August 2012)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 09/20/2012

SAMPLING LOCATION: INFLUENT DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO310 | CO610 | CO530 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|------------|--------------|------------|
| | | | | | | | 3 X week | 3 X week | 3 X week |
| | | | | | | | Composite | Calculated | Composite |
| | | | | | | | BOD - Conc | NH3-N - Conc | TSS - Conc |
| | | | | | | | mg/l | mg/l | mg/l |
| 1 | 0835 | 24 | | | | | 246 | 35.25 | 220 |
| 2 | 0840 | 24 | | | | | 259 | 18.75 | 217 |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | |
| 7 | 0835 | 24 | | | | | 248 | 29.25 | 320 |
| 8 | 0840 | 24 | | | | | 228 | 23.75 | 183 |
| 9 | 0840 | 24 | | | | | 262 | 30.25 | 160 |
| 10 | | | | | | | | | |
| 11 | | | | | | | | | |
| 12 | | | | | | | | | |
| 13 | | | | | | | | | |
| 14 | 0835 | 24 | | | | | 258 | 26.5 | 243 |
| 15 | 0850 | 24 | | | | | 226 | 24.25 | 143 |
| 16 | 0845 | 24 | | | | | 187 | 34.25 | 103 |
| 17 | | | | | | | | | |
| 18 | | | | | | | | | |
| 19 | | | | | | | | | |
| 20 | | | | | | | | | |
| 21 | 0840 | 24 | | | | | 470 | 35.25 | 209 |
| 22 | 0845 | 24 | | | | | 204 | 30.75 | 187 |
| 23 | 0850 | 42 | | | | | 201 | 19.75 | 120 |
| 24 | | | | | | | | | |
| 25 | | | | | | | | | |
| 26 | | | | | | | | | |
| 27 | | | | | | | | | |
| 28 | 0840 | 24 | | | | | 220 | 27.25 | 297 |
| 29 | 0855 | 24 | | | | | 228 | 23 | 207 |
| 30 | 0905 | 24 | | | | | 181 | 23.75 | 127 |
| 31 | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | 244.1429 | 27.2857 | 195.4286 |
| Daily Maximum: | | | | | | | 470 | 35.25 | 320 |
| Daily Minimum: | | | | | | | 181 | 18.75 | 103 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 08-2012 (August 2012)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 09/20/2012

09/20/2012

ORC/Certifier Signature: Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

By this signature, I certify that this report is accurate and complete to the best of my knowledge.

The permittee shall report to the Director or the appropriate Regional Office any noncompliance that potentially threatens public health or the environment. Any information shall be provided orally within 24 hours from the time the permittee became aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances.

If the facility is noncompliant, please attach a list of corrective actions being taken and a time-table for improvements to be made as required by part II.E.6 of the NPDES permit.

COMMENTS: BOD Monthly Avg % Removal 100%

TSS Monthly Avg % Removal 99%

NH3 Monthly Avg % Removal 97%

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 managed 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 fines and imprisonment for knowing violations.

09/20/2012

Permittee/Submitter Signature:*** Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

Permittee Address: 3680 Hillview Dr Conover NC 28613 Permit Expiration Date: 04/30/2015

PDFfill PDF Editor with Free Writer and Tools

CERTIFIED LABORATORIES

LAB NAME: Water tech Lab, Research and Analytical

CERTIFIED LAB #: 50, 34

PERSON(S) COLLECTING SAMPLES: Evan Rubins Michael Fox

PARAMETER CODES

Parameter Codes assistance may be obtained by calling the NPDES Unit (919) 807-6300 or by visiting the Surface Water Protection Section's web site at <http://portal.ncdenr.org/web/wq/swp> and linking to the unit's information pages.

FOOTNOTES

Use only units of measurement designated in the reporting facility's NPDES permit for reporting data.

* No Flow/Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data to be entered for all of the parameters on the DMR for entire monitoring period.

** ORC on Site?: ORC must visit facility and document visitation of facility as required per 15A NCAC 8G .0204.

*** Signature of Permittee: If signed by other than the permittee, then delegation of the signatory authority must be on file with the state per 15A NCAC 2B .0506(b)(2)(D).

NPDES PERMIT NO.: NC0024252

FACILITY NAME: Northeast WWTP

OWNER NAME: City of Conover

GRADE: WW-4.

eDMR PERIOD: 08-2012 (August 2012)

COMPLIANCE: Compliant

PERMIT VERSION: 3.0

CLASS: WW-3.

ORC: Michael Lee Fox

ORC HAS CHANGED: No

VERSION: 1.0

CONTACT PHONE #: 8284652279

PERMIT STATUS: Active

COUNTY: Catawba

ORC CERT NUMBER: 10941

STATUS: Processed

SUBMISSION DATE: 09/20/2012

PDFill PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 09-2012 (September 2012)

VERSION: 1.0

STATUS: Processed & Revised

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 10/19/2012

SAMPLING LOCATION: INFLUENT DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO310 | CO610 | CO530 | CO600 | |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|------------|--------------|------------|----------------|--|
| | | | | | | | 3 X week | Calculated | 3 X week | Calculated | |
| | | | | | | | BOD - Conc | NH3-N - Conc | TSS - Conc | TOTAL N - Conc | |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | mg/l | mg/l | mg/l | mg/l | |
| 1 | | | | | | | | | | | |
| 2 | | | | | | | | | | | |
| 3 | | | | | | | | | | | |
| 4 | 0840 | 24 | | | | | 277 | 34.5 | 230 | | |
| 5 | 0845 | 24 | | | | | 210 | 25.5 | 240 | | |
| 6 | 0850 | 24 | | | | | 183 | 23 | 160 | | |
| 7 | | | | | | | | | | | |
| 8 | | | | | | | | | | | |
| 9 | | | | | | | | | | | |
| 10 | | | | | | | | | | | |
| 11 | 0830 | 24 | | | | | 265 | 34.75 | 210 | | |
| 12 | 0850 | 24 | | | | | 252 | 27.5 | 160 | | |
| 13 | 0855 | 24 | | | | | 201 | 32.75 | 147 | | |
| 14 | | | | | | | | | | | |
| 15 | | | | | | | | | | | |
| 16 | | | | | | | | | | | |
| 17 | | | | | | | | | | | |
| 18 | 0840 | 24 | | | | | 287 | 35.25 | 380 | | |
| 19 | 0840 | 24 | | | | | 203 | 16 | 223 | | |
| 20 | 0845 | 24 | | | | | 187 | 22 | 103 | | |
| 21 | | | | | | | | | | | |
| 22 | | | | | | | | | | | |
| 23 | | | | | | | | | | | |
| 24 | | | | | | | | | | | |
| 25 | 0835 | 24 | | | | | 212 | 33.5 | 217 | | |
| 26 | 0840 | 24 | | | | | 252 | 26.75 | 263 | | |
| 27 | 0845 | 24 | | | | | 238 | 45.5 | 160 | | |
| 28 | | | | | | | | | | | |
| 29 | | | | | | | | | | | |
| 30 | | | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | |
| Monthly Average: | | | | | | | 230.5833 | 29.75 | 205.8333 | | |
| Daily Maximum: | | | | | | | 287 | 45.5 | 380 | | |
| Daily Minimum: | | | | | | | 183 | 16 | 103 | | |
| Monthly Avg % Removal (85%): | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 09-2012 (September 2012)

VERSION: 1.0

STATUS: Processed & Revised

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 10/19/2012

SAMPLING LOCATION: UPSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------|----------|
| | | | | | | | 3 X week | 3 X week |
| | | | | | | | Grab | Grab |
| | | | | | | | TEMP-C | DO |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | deg c | mg/l |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | 1037 | | | | | | 22.8 | 7.4 |
| 5 | 1031 | | | | | | 22.6 | 7.5 |
| 6 | 1125 | | | | | | 23.1 | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | 1038 | | | | | | 18.8 | 8.4 |
| 11 | 1120 | | | | | | 18.4 | 8.5 |
| 12 | 1435 | | | | | | 18.6 | 8.3 |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | 1109 | | | | | | 18.8 | 8.3 |
| 18 | 1058 | | | | | | 20.7 | 9.2 |
| 19 | 1141 | | | | | | 18.9 | 10.5 |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | 1126 | | | | | | 14.8 | 9.5 |
| 26 | 1108 | | | | | | 16.2 | 9.4 |
| 27 | 1438 | | | | | | 18.2 | 9 |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 19.325 | 8.6083 |
| Daily Maximum: | | | | | | | 23.1 | 10.5 |
| Daily Minimum: | | | | | | | 14.8 | 7.3 |
| Monthly Avg % Removal (85%): | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 09-2012 (September 2012)

VERSION: 1.0

STATUS: Processed & Revised

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 10/19/2012

SAMPLING LOCATION: DOWNSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------|----------|
| | | | | | | | 3 X week | 3 X week |
| | | | | | | | Grab | Grab |
| | | | | | | | TEMP-C | DO |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | deg c | mg/l |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | 1013 | | | | | | 22.5 | 7.5 |
| 5 | 1011 | | | | | | 22.2 | 7.3 |
| 6 | 1112 | | | | | | 23 | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | 1021 | | | | | | 18.2 | 8.4 |
| 11 | 1101 | | | | | | 18 | 8.4 |
| 12 | 1415 | | | | | | 18.2 | 8.4 |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | 1049 | | | | | | 19 | 8.2 |
| 18 | 1035 | | | | | | 20.4 | 9.1 |
| 19 | 1120 | | | | | | 18.7 | 10.6 |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | 1115 | | | | | | 14.3 | 9.5 |
| 26 | 1051 | | | | | | 16 | 9.6 |
| 27 | 1415 | | | | | | 18.4 | 9.1 |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 19.075 | 8.625 |
| Daily Maximum: | | | | | | | 23 | 10.6 |
| Daily Minimum: | | | | | | | 14.3 | 7.3 |
| Monthly Avg % Removal (85%): | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 09-2012 (September 2012)

VERSION: 1.0

STATUS: Processed & Revised

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 10/19/2012

SAMPLING LOCATION: EFFLUENT DISCHARGE NO.: 001 NO DISCHARGE*: NO (Continue)

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO600 | CO665 | TGP3B | 01042 | 01092 | THP3B | NC01 | |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------------|----------------|-----------|-----------|-----------|--------------------|--------------|--|
| | | | | | | | Monthly | Monthly | Quarterly | 2 X month | 2 X month | Once per discharge | Annually | |
| | | | | | | | Composite | Composite | Composite | Composite | Composite | Composite | Grab | |
| | | | | | | | TOTAL N - Conc | TOTAL P - Conc | CERI7DPF | COPPER | ZINC | CER7DCHV | ANN POL SCAN | |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | mg/l | mg/l | pass/fail | mg/l | mg/l | percent | yes=1 no=0 | |
| 1 | | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | |
| 3 | Holiday | | | | | | | | | | | | | |
| 4 | 0840 | 24 | 0720 | 8 | Y | | | | | | | | | |
| 5 | 0845 | 24 | 0718 | 8 | Y | | | | | | | | | |
| 6 | 0850 | 24 | 0708 | 8 | Y | | | | | | | | | |
| 7 | | | 0720 | 8 | Y | | | | | | | | | |
| 8 | | | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | | | |
| 10 | | | 0708 | 8 | Y | | | | | | | | | |
| 11 | 0830 | 24 | 0710 | 8 | Y | | 6.46 | 3.85 | | 0.006 | 0.11 | | | |
| 12 | 0835 | 24 | 0712 | 8 | Y | | | | | | | | | |
| 13 | 0855 | 24 | 0700 | 8 | B | | | | | | | | | |
| 14 | | | 0715 | 8 | Y | | | | | | | | | |
| 15 | | | | | | | | | | | | | | |
| 16 | | | | | | | | | | | | | | |
| 17 | | | 0715 | 8 | Y | | | | | | | | | |
| 18 | 0840 | 24 | 0730 | 8 | Y | | | | | | | | | |
| 19 | 0840 | 24 | 0708 | 8 | Y | | | | 0.008 | 0.086 | | | | |
| 20 | 0845 | 24 | 0800 | 8 | Y | | | | | | | | | |
| 21 | | | 0805 | 8 | Y | | | | | | | | | |
| 22 | | | | | | | | | | | | | | |
| 23 | | | | | | | | | | | | | | |
| 24 | | | 0720 | 8 | Y | | | | | | | | | |
| 25 | 0835 | 24 | 0708 | 8 | Y | | | | | | | | | |
| 26 | 0840 | 24 | 0718 | 8 | Y | | | | | | | | | |
| 27 | 0845 | 24 | 0730 | 8 | Y | | | | | | | | | |
| 28 | | | 0800 | 8 | B | | | | | | | | | |
| 29 | | | | | | | | | | | | | | |
| 30 | | | | | | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | | | |
| Monthly Average: | | | | | | | 6.46 | 3.85 | | 0.007 | 0.098 | | | |
| Daily Maximum: | | | | | | | 6.46 | 3.85 | | 0.008 | 0.11 | | | |
| Daily Minimum: | | | | | | | 6.46 | 3.85 | | 0.006 | 0.086 | | | |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 09-2012 (September 2012)

VERSION: 1.0

STATUS: Processed & Revised

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 10/19/2012

10/19/2012

ORC/Certifier Signature: Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

By this signature, I certify that this report is accurate and complete to the best of my knowledge.

The permittee shall report to the Director or the appropriate Regional Office any noncompliance that potentially threatens public health or the environment. Any information shall be provided orally within 24 hours from the time the permittee became aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances.

If the facility is noncompliant, please attach a list of corrective actions being taken and a time-table for improvements to be made as required by part II.E.6 of the NPDES permit.

COMMENTS: BOD Monthly Avg % Removal 99%

TSS Monthly Avg % Removal 98%

NH3 Monthly Avg % Removal 97%

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 managed 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 fines and imprisonment for knowing violations.

10/19/2012

Permittee/Submitter Signature:*** Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

Permittee Address: 3680 Hillview Dr Conover NC 28613 Permit Expiration Date: 04/30/2015

PDFfill PDF Editor with Free Writer and Tools

CERTIFIED LABORATORIES

LAB NAME: Water Tech Lab, Research and Analytical

CERTIFIED LAB #: 50, 34

PERSON(S) COLLECTING SAMPLES: Evan Rubins, Michael Fox

PARAMETER CODES

Parameter Codes assistance may be obtained by calling the NPDES Unit (919) 807-6300 or by visiting the Surface Water Protection Section's web site at <http://portal.ncdenr.org/web/wq/swp> and linking to the unit's information pages.

FOOTNOTES

Use only units of measurement designated in the reporting facility's NPDES permit for reporting data.

* No Flow/Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data to be entered for all of the parameters on the DMR for entire monitoring period.

** ORC on Site?: ORC must visit facility and document visitation of facility as required per 15A NCAC 8G .0204.

*** Signature of Permittee: If signed by other than the permittee, then delegation of the signatory authority must be on file with the state per 15A NCAC 2B .0506(b)(2)(D).

NPDES PERMIT NO.: NC0024252

FACILITY NAME: Northeast WWTP

OWNER NAME: City of Conover

GRADE: WW-4.

eDMR PERIOD: 09-2012 (September 2012)

COMPLIANCE: Compliant

PERMIT VERSION: 3.0

CLASS: WW-3.

ORC: Michael Lee Fox

ORC HAS CHANGED: No

VERSION: 1.0

CONTACT PHONE #: 8284652279

PERMIT STATUS: Active

COUNTY: Catawba

ORC CERT NUMBER: 10941

STATUS: Processed & Revised

SUBMISSION DATE: 10/19/2012

PDFill PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 10-2012 (October 2012)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 11/16/2012

SAMPLING LOCATION: UPSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|--------|--------|
| | | | | | | | Weekly | Weekly |
| | | | | | | | Grab | Grab |
| | | | | | | | TEMP-C | DO |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | deg c | mg/l |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | 1116 | | | | | | 19.1 | 8.9 |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | 1107 | | | | | | 12.8 | 9.5 |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | 1532 | | | | | | 15.1 | 8.8 |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | 1130 | | | | | | 14.1 | 9.4 |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | 1137 | | | | | | | |
| 30 | | | | | | | 14.4 | 9.3 |
| 31 | | | | | | | | |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 15.1 | 9.18 |
| Daily Maximum: | | | | | | | 19.1 | 9.5 |
| Daily Minimum: | | | | | | | 12.8 | 8.8 |
| Monthly Avg % Removal (85%): | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 10-2012 (October 2012)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 11/16/2012

SAMPLING LOCATION: DOWNSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|--------|--------|
| | | | | | | | Weekly | Weekly |
| | | | | | | | Grab | Grab |
| | | | | | | | TEMP-C | DO |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | deg c | mg/l |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | 1105 | | | | | | 18.9 | 8.9 |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | 1051 | | | | | | 13.2 | 9.3 |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | 1520 | | | | | | 15.6 | 8.6 |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | 1115 | | | | | | 13.6 | 9.5 |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | 1120 | | | | | | 14.6 | 9.2 |
| 31 | | | | | | | | |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 15.18 | 9.1 |
| Daily Maximum: | | | | | | | 18.9 | 9.5 |
| Daily Minimum: | | | | | | | 13.2 | 8.6 |
| Monthly Avg % Removal (85%): | | | | | | | | |

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NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 10-2012 (October 2012)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 11/16/2012

SAMPLING LOCATION: EFFLUENT DISCHARGE NO.: 001 NO DISCHARGE*: NO (Continue)

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO600 | CO665 | TGP3B | NC01 | THP3B | 01092 | 01042 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------------|----------------|-----------|--------------|--------------------|-----------|-----------|
| | | | | | | | Monthly | Monthly | Quarterly | Annually | Once per discharge | 2 X month | 2 X month |
| | | | | | | | Composite | Composite | Composite | Grab | Composite | Composite | Composite |
| | | | | | | | TOTAL N - Conc | TOTAL P - Conc | CERI7DPF | ANN POL SCAN | CER7DCHV | ZINC | COPPER |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | mg/l | mg/l | pass/fail | yes=1 no=0 | percent | mg/l | mg/l |
| 1 | | | 0700 | 8 | Y | | | | | | | | |
| 2 | 0845 | 24 | 0700 | 8 | Y | | | | | | | | |
| 3 | 0845 | 24 | 0705 | 8 | Y | | 5.4 | 3.49 | | | | 0.121 | 0.007 |
| 4 | 0840 | 24 | 0700 | 8 | B | | | | | | | | |
| 5 | | | 0725 | 8 | Y | | | | | | | | |
| 6 | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | |
| 8 | | | 0710 | 8 | Y | | | | | | | | |
| 9 | 0835 | 24 | 0708 | 8 | Y | | | | | | | | |
| 10 | 0845 | 24 | 0700 | 8 | B | | | | | | | | |
| 11 | 0845 | 24 | 0700 | 8 | B | | | | | | | | |
| 12 | | | 0700 | 8 | B | | | | | | | | |
| 13 | | | | | | | | | | | | | |
| 14 | | | | | | | | | | | | | |
| 15 | | | 0708 | 8 | Y | | | | | | | | |
| 16 | 0840 | 24 | 0700 | 8 | B | | | | | | | | |
| 17 | 0845 | 24 | 0710 | 8 | Y | | | | | | | | |
| 18 | 0845 | 24 | 0707 | 8 | Y | | | | | | | 0.099 | < 0.005 |
| 19 | | | 0705 | 8 | Y | | | | | | | | |
| 20 | | | | | | | | | | | | | |
| 21 | | | | | | | | | | | | | |
| 22 | | | 0710 | 8 | Y | | | | | | | | |
| 23 | | | 0700 | 8 | B | | | | | | | | |
| 24 | 0855 | 24 | 0708 | 8 | Y | | | | | | | | |
| 25 | 0850 | 24 | 0706 | 8 | Y | | | | | | | | |
| 26 | 0920 | 24 | 0708 | 8 | Y | | | | | | | | |
| 27 | | | | | | | | | | | | | |
| 28 | | | | | | | | | | | | | |
| 29 | | | 0708 | 8 | Y | | | | | | | | |
| 30 | 0845 | 24 | 0712 | 8 | Y | | | | | | | | |
| 31 | 0845 | 24 | 0705 | 8 | Y | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | | |
| Monthly Average: | | | | | | | 5.4 | 3.49 | | | | 0.11 | 0.0035 |
| Daily Maximum: | | | | | | | 5.4 | 3.49 | | | | 0.121 | 0.007 |
| Daily Minimum: | | | | | | | 5.4 | 3.49 | | | | 0.099 | 0 |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 10-2012 (October 2012)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 11/16/2012

SAMPLING LOCATION: INFLUENT DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO310 | CO610 | CO530 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|------------|--------------|------------|
| | | | | | | | 3 X week | 3 X week | 3 X week |
| | | | | | | | Composite | Calculated | Composite |
| | | | | | | | BOD - Conc | NH3-N - Conc | TSS - Conc |
| | | | | | | | mg/l | mg/l | mg/l |
| 1 | | | | | | | | | |
| 2 | 0845 | 24 | | | | | 252 | 19.75 | 197 |
| 3 | 0845 | 24 | | | | | 231 | 23.5 | 217 |
| 4 | 0840 | 24 | | | | | 314 | 25.5 | 140 |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | |
| 7 | | | | | | | | | |
| 8 | | | | | | | | | |
| 9 | 0835 | 24 | | | | | 272 | 33.1 | 210 |
| 10 | 0845 | 24 | | | | | 242 | 24.5 | 160 |
| 11 | 0845 | 24 | | | | | 227 | 28 | 147 |
| 12 | | | | | | | | | |
| 13 | | | | | | | | | |
| 14 | | | | | | | | | |
| 15 | | | | | | | | | |
| 16 | 0840 | 24 | | | | | 355 | 17.25 | 160 |
| 17 | 0845 | 24 | | | | | 115 | 23.5 | 133 |
| 18 | 0845 | 24 | | | | | 202 | 22.5 | 127 |
| 19 | | | | | | | | | |
| 20 | | | | | | | | | |
| 21 | | | | | | | | | |
| 22 | | | | | | | | | |
| 23 | | | | | | | | | |
| 24 | 0855 | 24 | | | | | 164 | 23.5 | 96.7 |
| 25 | 0850 | 24 | | | | | 167 | 21 | 93.3 |
| 26 | 0920 | 24 | | | | | 960 | 36 | 623 |
| 27 | | | | | | | | | |
| 28 | | | | | | | | | |
| 29 | | | | | | | | | |
| 30 | 0845 | 24 | | | | | 407 | 32.25 | 263 |
| 31 | 0845 | 24 | | | | | 119 | 25 | 350 |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | 287.6429 | 25.3821 | 208.3571 |
| Daily Maximum: | | | | | | | 960 | 36 | 623 |
| Daily Minimum: | | | | | | | 115 | 17.25 | 93.3 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 10-2012 (October 2012)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 11/16/2012

11/16/2012

ORC/Certifier Signature: Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

By this signature, I certify that this report is accurate and complete to the best of my knowledge.

The permittee shall report to the Director or the appropriate Regional Office any noncompliance that potentially threatens public health or the environment. Any information shall be provided orally within 24 hours from the time the permittee became aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances.

If the facility is noncompliant, please attach a list of corrective actions being taken and a time-table for improvements to be made as required by part II.E.6 of the NPDES permit.

COMMENTS: BOD Monthly Avg % Removal 100%

TSS Monthly Avg % Removal 99%

NH3 Monthly Avg % Removal 95%

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 managed 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 fines and imprisonment for knowing violations.

11/16/2012

Permittee/Submitter Signature:*** Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

Permittee Address: 3680 Hillview Dr Conover NC 28613 Permit Expiration Date: 04/30/2015

CERTIFIED LABORATORIES

LAB NAME: Water tech Lab, Research and Analytical

CERTIFIED LAB #: 50, 34

PERSON(s) COLLECTING SAMPLES: Evan Rubins, Michael Fox

PARAMETER CODES

Parameter Codes assistance may be obtained by calling the NPDES Unit (919) 807-6300 or by visiting the Surface Water Protection Section's web site at <http://portal.ncdenr.org/web/wq/swp> and linking to the unit's information pages.

FOOTNOTES

Use only units of measurement designated in the reporting facility's NPDES permit for reporting data.

* No Flow/Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data to be entered for all of the parameters on the DMR for entire monitoring period.

** ORC on Site?: ORC must visit facility and document visitation of facility as required per 15A NCAC 8G .0204.

*** Signature of Permittee: If signed by other than the permittee, then delegation of the signatory authority must be on file with the state per 15A NCAC 2B .0506(b)(2)(D).

NPDES PERMIT NO.: NC0024252

FACILITY NAME: Northeast WWTP

OWNER NAME: City of Conover

GRADE: WW-4.

eDMR PERIOD: 10-2012 (October 2012)

COMPLIANCE: Compliant

PERMIT VERSION: 3.0

CLASS: WW-3.

ORC: Michael Lee Fox

ORC HAS CHANGED: No

VERSION: 1.0

CONTACT PHONE #: 8284652279

PERMIT STATUS: Active

COUNTY: Catawba

ORC CERT NUMBER: 10941

STATUS: Processed

SUBMISSION DATE: 11/16/2012

PDFill PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 11-2012 (November 2012)

VERSION: 2.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 03/13/2013

SAMPLING LOCATION: UPSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|--------|--------|
| | | | | | | | Weekly | Weekly |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | TEMP-C | DO |
| | | | | | | | deg c | mg/l |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | 1055 | | | | | | 10.2 | 10.4 |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | 1436 | | | | | | 13.8 | 9.7 |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | 1408 | | | | | | 11.7 | 11 |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | 1057 | | | | | | 5.9 | 11.6 |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 10.4 | 10.675 |
| Daily Maximum: | | | | | | | 13.8 | 11.6 |
| Daily Minimum: | | | | | | | 5.9 | 9.7 |
| Monthly Avg % Removal (85%): | | | | | | | | |

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PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 11-2012 (November 2012)

VERSION: 2.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 03/13/2013

SAMPLING LOCATION: DOWNSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|--------|--------|
| | | | | | | | Weekly | Weekly |
| | | | | | | | Grab | Grab |
| | | | | | | | TEMP-C | DO |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | deg c | mg/l |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | 1031 | | | | | | 9.9 | 10.3 |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | 1417 | | | | | | 14.6 | 9.6 |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | 1421 | | | | | | 12.1 | 10.7 |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | 1037 | | | | | | 5.3 | 11.6 |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 10.475 | 10.55 |
| Daily Maximum: | | | | | | | 14.6 | 11.6 |
| Daily Minimum: | | | | | | | 5.3 | 9.6 |
| Monthly Avg % Removal (85%): | | | | | | | | |

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FACILITY NAME: Northeast WWTP

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COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 11-2012 (November 2012)

VERSION: 2.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 03/13/2013

SAMPLING LOCATION: INFLUENT DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO310 | CO610 | CO530 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|------------|--------------|------------|
| | | | | | | | 3 X week | 3 X week | 3 X week |
| | | | | | | | Composite | Calculated | Composite |
| | | | | | | | BOD - Conc | NH3-N - Conc | TSS - Conc |
| | | | | | | | mg/l | mg/l | mg/l |
| 1 | 0850 | 24 | | | | | 212 | 23.5 | 137 |
| 2 | | | | | | | | | |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |
| 5 | | | | | | | | | |
| 6 | 0850 | 24 | | | | | 92 | 33.75 | 327 |
| 7 | 0850 | 24 | | | | | 361 | 27.5 | 163 |
| 8 | 0850 | 24 | | | | | 384 | 29.75 | 197 |
| 9 | | | | | | | | | |
| 10 | | | | | | | | | |
| 11 | | | | | | | | | |
| 12 | | | | | | | | | |
| 13 | 0845 | 24 | | | | | 220 | 26.5 | 130 |
| 14 | 0845 | 24 | | | | | 309 | 22.5 | 240 |
| 15 | 0855 | 24 | | | | | 284 | 23 | 193 |
| 16 | | | | | | | | | |
| 17 | | | | | | | | | |
| 18 | | | | | | | | | |
| 19 | 0820 | 24 | | | | | 556 | 27 | 540 |
| 20 | 0820 | 24 | | | | | 192 | 26.75 | 103 |
| 21 | 0830 | 24 | | | | | 304 | 30.25 | 51.7 |
| 22 | | | | | | | | | |
| 23 | | | | | | | | | |
| 24 | | | | | | | | | |
| 25 | | | | | | | | | |
| 26 | | | | | | | | | |
| 27 | 0835 | 24 | | | | | 214 | | 320 |
| 28 | 0840 | 24 | | | | | 290 | | 180 |
| 29 | 0850 | 24 | | | | | 224 | | 187 |
| 30 | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | 280.1538 | 26.325 | 212.9769 |
| Daily Maximum: | | | | | | | 556 | 33.75 | 540 |
| Daily Minimum: | | | | | | | 92 | 19.25 | 51.7 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

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NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 11-2012 (November 2012)

VERSION: 2.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 03/13/2013

SAMPLING LOCATION: EFFLUENT DISCHARGE NO.: 001 NO DISCHARGE*: NO

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 50050 | 00010 | 00400 | 50060 | CO310 | CO610 | CO530 | 31616 | 00300 | | | | |
|------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|------------|----------|----------|------------|--------------|------------|-----------|----------|----------|----------|----------|----------|----------|
| | | | | | | | Continuous | 5 X week | 3 X week | 3 X week | 3 X week | 3 X week | 3 X week | 3 X week | 3 X week | 3 X week | 3 X week | 3 X week | 3 X week |
| | | | | | | | Recorder | Grab | Grab | Grab | Composite | Composite | Composite | Grab | Grab | | | | |
| | | | | | | FLOW | TEMP-C | PH | CHLORINE | BOD - Conc | NH3-N - Conc | TSS - Conc | FEC COLI | DO | | | | | |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | mgd | deg c | su | ug/l | mg/l | mg/l | mg/l | #/100ml | mg/l | | | | |
| 1 | 0850 | 24 | 1330 | 8 | Y | | 0.55 | 18.4 | | | < 2 | 0.9 | < 2.5 | < 1 | | | | | |
| 2 | | | 0706 | 8 | Y | | 0.566 | 18.6 | | | | | | | | | | | |
| 3 | | | | | | | 0.53 | | | | | | | | | | | | |
| 4 | | | | | | | 0.547 | | | | | | | | | | | | |
| 5 | | | 0720 | 8 | Y | | 0.539 | 17.9 | 7 | < 20 | | | | | 7.3 | | | | |
| 6 | 0850 | 24 | 0708 | 8 | Y | | 0.522 | 16.8 | 7 | < 20 | < 2 | 0.94 | < 2.5 | < 1 | 7.4 | | | | |
| 7 | 0850 | 24 | 0707 | 8 | Y | | 0.542 | 16.9 | 7 | < 20 | < 2 | 0.34 | < 2.5 | < 1 | 7.6 | | | | |
| 8 | 0850 | 24 | 0709 | 8 | Y | | 0.549 | 17.1 | | | 2 | 0.32 | < 2.5 | < 1 | | | | | |
| 9 | | | 0720 | 8 | Y | | 0.548 | 16.7 | | | | | | | | | | | |
| 10 | | | | | | | 0.531 | | | | | | | | | | | | |
| 11 | | | | | | | 0.537 | | | | | | | | | | | | |
| 12 | | | 0708 | 8 | Y | | 0.512 | 17.6 | 7 | < 20 | | | | | 8.1 | | | | |
| 13 | 0845 | 24 | 0712 | 8 | Y | | 0.604 | 18 | 7 | < 20 | < 2 | 0.66 | < 2.5 | < 1 | 8.6 | | | | |
| 14 | 0845 | 24 | 0715 | 8 | Y | | 0.555 | 17.5 | 6.6 | < 20 | < 2 | 0.5 | 3.7 | < 1 | 8.8 | | | | |
| 15 | 0855 | 24 | 0725 | 8 | Y | | 0.515 | 17.1 | | | < 2 | 0.65 | < 2.5 | < 1 | | | | | |
| 16 | | | 0706 | 8 | Y | | 0.51 | 16.9 | | | | | | | | | | | |
| 17 | | | | | | | 0.517 | | | | | | | | | | | | |
| 18 | | | | | | | 0.526 | | | | | | | | | | | | |
| 19 | 0820 | 24 | 0710 | 8 | Y | | 0.526 | 16.3 | 6.8 | < 20 | 2.2 | 0.56 | 9.7 | < 1 | 7.2 | | | | |
| 20 | 0820 | 24 | 0708 | 8 | Y | | 0.529 | 16 | 7 | < 20 | < 2 | 0.46 | < 2.5 | < 1 | 8 | | | | |
| 21 | 0830 | 24 | 0725 | 8 | Y | | 0.522 | 15.8 | 6.9 | < 20 | < 2 | 0.4 | < 2.5 | < 1 | 7.7 | | | | |
| 22 | Holiday | | | | | | | | | | | | | | | | | | |
| 23 | Holiday | | | | | | | | | | | | | | | | | | |
| 24 | | | | | | | 0.479 | | | | | | | | | | | | |
| 25 | | | | | | | 0.494 | | | | | | | | | | | | |
| 26 | | | 0710 | 8 | Y | | 0.493 | 15.4 | 7 | < 20 | | | | | 8.4 | | | | |
| 27 | 0835 | 24 | 0708 | 8 | Y | | 0.513 | 15.6 | 7.1 | < 20 | < 2 | 0.63 | 10.7 | < 1 | 8.1 | | | | |
| 28 | 0840 | 24 | 0725 | 8 | Y | | 0.51 | 15.4 | 7 | < 20 | < 2 | 1.17 | 4.1 | < 1 | 8.1 | | | | |
| 29 | 0850 | 24 | 0708 | 8 | Y | | 0.514 | 15.3 | | | < 2 | 0.52 | 5.8 | < 1 | | | | | |
| 30 | | | 0715 | 8 | Y | | 0.504 | 15.4 | | | | | | | | | | | |
| Monthly Average Limit: | | | | | | | 1.5 | | | | 16 | 4 | 30 | 200 | | | | | |
| Monthly Average: | | | | | | | 0.528 | 16.735 | 6.95 | 0 | 0.37 | 0.62 | 2.62 | 1 | 7.9417 | | | | |
| Daily Maximum: | | | | | | | 0.604 | 18.6 | 7.1 | 0 | 2.6 | 1.17 | 10.7 | 0 | 8.8 | | | | |
| Daily Minimum: | | | | | | | 0.479 | 15.3 | 6.6 | 0 | 0 | 0.32 | 0 | 0 | 7.2 | | | | |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 11-2012 (November 2012)

VERSION: 2.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 03/13/2013

SAMPLING LOCATION: EFFLUENT DISCHARGE NO.: 001 NO DISCHARGE*: NO (Continue)

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO600 | CO665 | NC01 | THP3B | 01092 | 01042 | TGP3B | |
|------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------------|----------------|--------------|--------------------|-----------|-----------|-----------|--|
| | | | | | | | Monthly | Monthly | Annually | Once per discharge | 2 X month | 2 X month | Quarterly | |
| | | | | | | | Composite | Composite | Grab | Composite | Composite | Composite | Composite | |
| | | | | | | | TOTAL N - Conc | TOTAL P - Conc | ANN POL SCAN | CER7DCHV | ZINC | COPPER | CER17DPF | |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | mg/l | mg/l | yes=1 no=0 | percent | mg/l | mg/l | pass/fail | |
| 1 | 0850 | 24 | 1330 | 8 | Y | | | | | | | | | |
| 2 | | | 0706 | 8 | Y | | | | | | | | | |
| 3 | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | |
| 5 | | | 0720 | 8 | Y | | | | | | | | | |
| 6 | 0850 | 24 | 0708 | 8 | Y | | | | | | | | | |
| 7 | 0850 | 24 | 0707 | 8 | Y | | | | | | | | | |
| 8 | 0850 | 24 | 0709 | 8 | Y | | 7.76 | 3.49 | | | 0.12 | 0.007 | | |
| 9 | | | 0720 | 8 | Y | | | | | | | | | |
| 10 | | | | | | | | | | | | | | |
| 11 | | | | | | | | | | | | | | |
| 12 | | | 0708 | 8 | Y | | | | | | | | | |
| 13 | 0845 | 24 | 0712 | 8 | Y | | | | | | | | | |
| 14 | 0845 | 24 | 0715 | 8 | Y | | | | 1 | | | | | |
| 15 | 0855 | 24 | 0725 | 8 | Y | | | | | | | | | |
| 16 | | | 0706 | 8 | Y | | | | | | | | | |
| 17 | | | | | | | | | | | | | | |
| 18 | | | | | | | | | | | | | | |
| 19 | 0820 | 24 | 0710 | 8 | Y | | | | | | | | | |
| 20 | 0820 | 24 | 0708 | 8 | Y | | | | | | 0.131 | 0.007 | | |
| 21 | 0830 | 24 | 0725 | 8 | Y | | | | | | | | | |
| 22 | Holiday | | | | | | | | | | | | | |
| 23 | Holiday | | | | | | | | | | | | | |
| 24 | | | | | | | | | | | | | | |
| 25 | | | | | | | | | | | | | | |
| 26 | | | 0710 | 8 | Y | | | | | | | | | |
| 27 | 0835 | 24 | 0708 | 8 | Y | | | | | | | | | |
| 28 | 0840 | 24 | 0725 | 8 | Y | | | | | | | | | |
| 29 | 0850 | 24 | 0708 | 8 | Y | | | | | | | | | |
| 30 | | | 0715 | 8 | Y | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | | | |
| Monthly Average: | | | | | | | 7.76 | 3.49 | 1 | | 0.1255 | 0.007 | | |
| Daily Maximum: | | | | | | | 7.76 | 3.49 | 1 | | 0.131 | 0.007 | | |
| Daily Minimum: | | | | | | | 7.76 | 3.49 | 1 | | 0.12 | 0.007 | | |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 11-2012 (November 2012)

VERSION: 2.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 03/13/2013

03/13/2013

ORC/Certifier Signature: Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

By this signature, I certify that this report is accurate and complete to the best of my knowledge.

The permittee shall report to the Director or the appropriate Regional Office any noncompliance that potentially threatens public health or the environment. Any information shall be provided orally within 24 hours from the time the permittee became aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances.

If the facility is noncompliant, please attach a list of corrective actions being taken and a time-table for improvements to be made as required by part II.E.6 of the NPDES permit.

COMMENTS: BOD Monthly Avg % Removal 100%

TSS Monthly Avg % Removal 99%

NH3 Monthly Avg % Removal 98%

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 managed 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 fines and imprisonment for knowing violations.

03/13/2013

Permittee/Submitter Signature:*** Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

Permittee Address: 3680 Hillview Dr Conover NC 28613 Permit Expiration Date: 04/30/2015

CERTIFIED LABORATORIES

LAB NAME: Water Tech Lab, Reseach and Analytical

CERTIFIED LAB #: 50, 34

PERSON(S) COLLECTING SAMPLES: Evan Rubins, Michael Fox

PARAMETER CODES

Parameter Codes assistance may be obtained by calling the NPDES Unit (919) 807-6300 or by visiting the Surface Water Protection Section's web site at <http://portal.ncdenr.org/web/wq/swp> and linking to the unit's information pages.

FOOTNOTES

Use only units of measurement designated in the reporting facility's NPDES permit for reporting data.

* No Flow/Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data to be entered for all of the parameters on the DMR for entire monitoring period.

** ORC on Site?: ORC must visit facility and document visitation of facility as required per 15A NCAC 8G .0204.

*** Signature of Permittee: If signed by other than the permittee, then delegation of the signatory authority must be on file with the state per 15A NCAC 2B .0506(b)(2)(D).

NPDES PERMIT NO.: NC0024252

FACILITY NAME: Northeast WWTP

OWNER NAME: City of Conover

GRADE: WW-4.

eDMR PERIOD: 11-2012 (November 2012)

COMPLIANCE: Compliant

PERMIT VERSION: 3.0

CLASS: WW-3.

ORC: Michael Lee Fox

ORC HAS CHANGED: No

VERSION: 2.0

CONTACT PHONE #: 8284652279

PERMIT STATUS: Active

COUNTY: Catawba

ORC CERT NUMBER: 10941

STATUS: Processed

SUBMISSION DATE: 03/13/2013

PDFill PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 12-2012 (December 2012)

VERSION: 2.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 03/07/2013

SAMPLING LOCATION: DOWNSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:*** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|-----------------|----------------|--------|--------|
| | | | | | | | Weekly | Weekly |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | TEMP-C | DO |
| | | | | | | | deg c | mg/l |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | 1119 | | | | 11 | 10.4 |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | 1505 | | | | 10.4 | 10.7 |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | 1344 | | | | 8.2 | 10.2 |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | 1055 | | | | 7.8 | 10.8 |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 9.35 | 10.525 |
| Daily Maximum: | | | | | | | 11 | 10.8 |
| Daily Minimum: | | | | | | | 7.8 | 10.2 |
| Monthly Avg % Removal (85%): | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 12-2012 (December 2012)

VERSION: 2.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 03/07/2013

SAMPLING LOCATION: EFFLUENT DISCHARGE NO.: 001 NO DISCHARGE*: NO (Continue)

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO600 | CO665 | 01042 | NC01 | 01092 | TGP3B | THP3B |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------------|----------------|-----------|--------------|-----------|-----------|--------------------|
| | | | | | | | Monthly | Monthly | 2 X month | Annually | 2 X month | Quarterly | Once per discharge |
| | | | | | | | Composite | Composite | Composite | Grab | Composite | Composite | Composite |
| | | | | | | | TOTAL N - Conc | TOTAL P - Conc | COPPER | ANN POL SCAN | ZINC | CER17DPF | CER7DCHV |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | mg/l | mg/l | mg/l | yes=1 no=0 | mg/l | pass/fail | percent |
| 1 | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | |
| 3 | | | 0709 | 8 | Y | | | | | | | | |
| 4 | 0840 | 24 | 0718 | 8 | Y | | | | | | | | |
| 5 | 0850 | 24 | 0730 | 8 | Y | | | | | | | | |
| 6 | 0850 | 24 | 0730 | 8 | Y | | | | | | | | |
| 7 | | | 0700 | 8 | B | | | | | | | | |
| 8 | | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | | |
| 10 | | | 0720 | 8 | Y | | | | | | | | |
| 11 | 0835 | 24 | 0710 | 8 | Y | | | | | | | | |
| 12 | 0840 | 24 | 0708 | 8 | Y | | 5.46 | 4.43 | < 0.005 | | 0.13 | 1 | |
| 13 | 0840 | 24 | 0705 | 8 | Y | | | | | | | | |
| 14 | | | 0708 | 8 | Y | | | | | | | | |
| 15 | | | | | | | | | | | | | |
| 16 | | | | | | | | | | | | | |
| 17 | | | 0708 | 8 | Y | | | | | | | | |
| 18 | 0840 | 24 | 0705 | 8 | Y | | | | | | | | |
| 19 | 0845 | 24 | 0710 | 8 | Y | | | | 0.006 | | 0.172 | | |
| 20 | 0845 | 24 | 0712 | 8 | Y | | | | | | | | |
| 21 | | | 0700 | 8 | B | | | | | | | | |
| 22 | | | | | | | | | | | | | |
| 23 | | | | | | | | | | | | | |
| 24 | | | 0700 | 8 | B | | | | | | | | |
| 25 | | | | | | | | | | | | | |
| 26 | 0845 | 24 | 0700 | 8 | Y | | | | | | | | |
| 27 | 0845 | 24 | 0730 | 8 | Y | | | | | | | | |
| 28 | 0850 | 24 | 0728 | 8 | Y | | | | | | | | |
| 29 | | | | | | | | | | | | | |
| 30 | | | | | | | | | | | | | |
| 31 | | | 0700 | 8 | Y | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | | |
| Monthly Average: | | | | | | | 5.46 | 4.43 | 0.003 | | 0.151 | 1 | |
| Daily Maximum: | | | | | | | 5.46 | 4.43 | 0.006 | | 0.172 | 1 | |
| Daily Minimum: | | | | | | | 5.46 | 4.43 | 0 | | 0.13 | 1 | |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 12-2012 (December 2012)

VERSION: 2.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 03/07/2013

SAMPLING LOCATION: UPSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | | Total Composite Time | | Operator Arrival Time | | Operator Time On Site | | ORC On Site:*** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|-----|----------------------|------|-----------------------|--|-----------------------|--------|-----------------|----------------|--------|--------|
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | | Weekly | | | Weekly | |
| | | | | | | | | | | | TEMP-C | DO |
| | | | | | | | | | | | deg c | mg/l |
| 1 | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | |
| 3 | | | | 1135 | | | | | | | 11.7 | 10.3 |
| 4 | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | |
| 8 | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | |
| 11 | | | | | | | | | | | | |
| 12 | | | | | | | | | | | | |
| 13 | | | | 1456 | | | | | | | 10 | 11.2 |
| 14 | | | | | | | | | | | | |
| 15 | | | | | | | | | | | | |
| 16 | | | | | | | | | | | | |
| 17 | | | | | | | | | | | | |
| 18 | | | | | | | | | | | | |
| 19 | | | | | | | | | | | | |
| 20 | | | | | | | | | | | | |
| 21 | | | | 1331 | | | | | | | 8.1 | 10.4 |
| 22 | | | | | | | | | | | | |
| 23 | | | | | | | | | | | | |
| 24 | | | | 1112 | | | | | | | 8 | 11 |
| 25 | | | | | | | | | | | | |
| 26 | | | | | | | | | | | | |
| 27 | | | | | | | | | | | | |
| 28 | | | | | | | | | | | | |
| 29 | | | | | | | | | | | | |
| 30 | | | | | | | | | | | | |
| 31 | | | | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | |
| Monthly Average: | | | | | | | | | | | 9.45 | 10.725 |
| Daily Maximum: | | | | | | | | | | | 11.7 | 11.2 |
| Daily Minimum: | | | | | | | | | | | 8 | 10.3 |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 12-2012 (December 2012)

VERSION: 2.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 03/07/2013

SAMPLING LOCATION: INFLUENT DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO310 | CO610 | CO530 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|------------|--------------|------------|
| | | | | | | | 3 X week | 3 X week | 3 X week |
| | | | | | | | Composite | Calculated | Composite |
| | | | | | | | BOD - Conc | NH3-N - Conc | TSS - Conc |
| | | | | | | | mg/l | mg/l | mg/l |
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| 3 | | | | | | | | | |
| 4 | 0840 | 24 | | | | | 338 | 42.25 | 243 |
| 5 | 0850 | 24 | | | | | 114 | 30 | 157 |
| 6 | 0850 | 24 | | | | | 365 | 26.75 | 85 |
| 7 | | | | | | | | | |
| 8 | | | | | | | | | |
| 9 | | | | | | | | | |
| 10 | | | | | | | | | |
| 11 | 0835 | 24 | | | | | 494 | 32.75 | 253 |
| 12 | 0840 | 24 | | | | | 688 | 31.5 | 273 |
| 13 | 0840 | 24 | | | | | 256 | 23 | 203 |
| 14 | | | | | | | | | |
| 15 | | | | | | | | | |
| 16 | | | | | | | | | |
| 17 | | | | | | | | | |
| 18 | 0840 | 24 | | | | | 581 | 37.75 | 440 |
| 19 | 0845 | 24 | | | | | 485 | 40 | 250 |
| 20 | 0845 | 24 | | | | | 415 | 40.75 | 270 |
| 21 | | | | | | | | | |
| 22 | | | | | | | | | |
| 23 | | | | | | | | | |
| 24 | | | | | | | | | |
| 25 | | | | | | | | | |
| 26 | 0845 | 24 | | | | | 252 | 26.5 | 177 |
| 27 | 0845 | 24 | | | | | 126 | 15.25 | 110 |
| 28 | 0850 | 24 | | | | | 110 | 18.25 | 153 |
| 29 | | | | | | | | | |
| 30 | | | | | | | | | |
| 31 | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | 352 | 30.9167 | 217.8333 |
| Daily Maximum: | | | | | | | 688 | 42.25 | 440 |
| Daily Minimum: | | | | | | | 110 | 15.25 | 85 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 12-2012 (December 2012)

VERSION: 2.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 03/07/2013

03/07/2013

ORC/Certifier Signature: Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

By this signature, I certify that this report is accurate and complete to the best of my knowledge.

The permittee shall report to the Director or the appropriate Regional Office any noncompliance that potentially threatens public health or the environment. Any information shall be provided orally within 24 hours from the time the permittee became aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances.

If the facility is noncompliant, please attach a list of corrective actions being taken and a time-table for improvements to be made as required by part II.E.6 of the NPDES permit.

COMMENTS: BOD Monthly Avg % Removal 99%

TSS Monthly Avg % Removal 98%

NH3 Monthly Avg % Removal 98%

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 managed 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 fines and imprisonment for knowing violations.

03/07/2013

Permittee/Submitter Signature:*** Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

Permittee Address: 3680 Hillview Dr Conover NC 28613 Permit Expiration Date: 04/30/2015

CERTIFIED LABORATORIES

LAB NAME: Water Tech Labs, Research and Analytical

CERTIFIED LAB #: 50, 34

PERSON(S) COLLECTING SAMPLES: Evan Rubins, Michael Fox

PARAMETER CODES

Parameter Codes assistance may be obtained by calling the NPDES Unit (919) 807-6300 or by visiting the Surface Water Protection Section's web site at <http://portal.ncdenr.org/web/wq/swp> and linking to the unit's information pages.

FOOTNOTES

Use only units of measurement designated in the reporting facility's NPDES permit for reporting data.

* No Flow/Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data to be entered for all of the parameters on the DMR for entire monitoring period.

** ORC on Site?: ORC must visit facility and document visitation of facility as required per 15A NCAC 8G .0204.

*** Signature of Permittee: If signed by other than the permittee, then delegation of the signatory authority must be on file with the state per 15A NCAC 2B .0506(b)(2)(D).

NPDES PERMIT NO.: NC0024252

FACILITY NAME: Northeast WWTP

OWNER NAME: City of Conover

GRADE: WW-4.

eDMR PERIOD: 12-2012 (December 2012)

COMPLIANCE: Compliant

PERMIT VERSION: 3.0

CLASS: WW-3.

ORC: Michael Lee Fox

ORC HAS CHANGED: No

VERSION: 2.0

CONTACT PHONE #: 8284652279

PERMIT STATUS: Active

COUNTY: Catawba

ORC CERT NUMBER: 10941

STATUS: Processed

SUBMISSION DATE: 03/07/2013

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NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 01-2013 (January 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 02/22/2013

SAMPLING LOCATION: UPSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | | Operator Arrival Time | | Operator Time On Site | | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|-----|-----------------------|-----|-----------------------|--------|----------------|--------|-------|
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | Weekly | | Weekly | |
| | | | | | | | | Grab | Grab |
| | | | | | | | | TEMP-C | DO |
| | | | | | | | | deg c | mg/l |
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| 3 | | | 1103 | | | | 9.1 | 9.4 | |
| 4 | | | | | | | | | |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | |
| 7 | | | 1147 | | | | 6 | 10.7 | |
| 8 | | | | | | | | | |
| 9 | | | | | | | | | |
| 10 | | | | | | | | | |
| 11 | | | | | | | | | |
| 12 | | | | | | | | | |
| 13 | | | | | | | | | |
| 14 | | | | | | | | | |
| 15 | | | | | | | | | |
| 16 | | | | | | | | | |
| 17 | | | | | | | | | |
| 18 | | | 1150 | | | | 8.4 | 10.9 | |
| 19 | | | | | | | | | |
| 20 | | | | | | | | | |
| 21 | | | | | | | | | |
| 22 | | | | | | | | | |
| 23 | | | 1100 | | | | 4.1 | 11.1 | |
| 24 | | | | | | | | | |
| 25 | | | | | | | | | |
| 26 | | | | | | | | | |
| 27 | | | | | | | | | |
| 28 | | | 1111 | | | | 6.8 | 11 | |
| 29 | | | | | | | | | |
| 30 | | | | | | | | | |
| 31 | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | | 6.88 | 10.62 |
| Daily Maximum: | | | | | | | | 9.1 | 11.1 |
| Daily Minimum: | | | | | | | | 4.1 | 9.4 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

STATUS: Processed

eDMR PERIOD: 01-2013 (January 2013)

VERSION: 1.0

SUBMISSION DATE: 02/22/2013

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SAMPLING LOCATION: DOWNSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | | Operator Arrival Time | | Operator Time On Site | | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|-----|-----------------------|-----|-----------------------|--------|----------------|--------|-------|
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | Weekly | | Weekly | |
| | | | | | | | | Grab | Grab |
| | | | | | | | | TEMP-C | DO |
| | | | | | | | | deg c | mg/l |
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| 3 | | | 1016 | | | | 9.2 | 9.1 | |
| 4 | | | | | | | | | |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | |
| 7 | | | 1135 | | | | 6.5 | 10.1 | |
| 8 | | | | | | | | | |
| 9 | | | | | | | | | |
| 10 | | | | | | | | | |
| 11 | | | | | | | | | |
| 12 | | | | | | | | | |
| 13 | | | | | | | | | |
| 14 | | | | | | | | | |
| 15 | | | | | | | | | |
| 16 | | | | | | | | | |
| 17 | | | | | | | | | |
| 18 | | | 1135 | | | | 8.5 | 10.8 | |
| 19 | | | | | | | | | |
| 20 | | | | | | | | | |
| 21 | | | | | | | | | |
| 22 | | | | | | | | | |
| 23 | | | 1047 | | | | 5.1 | 10.9 | |
| 24 | | | | | | | | | |
| 25 | | | | | | | | | |
| 26 | | | | | | | | | |
| 27 | | | | | | | | | |
| 28 | | | 1057 | | | | 7 | 11.1 | |
| 29 | | | | | | | | | |
| 30 | | | | | | | | | |
| 31 | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | | 7.26 | 10.4 |
| Daily Maximum: | | | | | | | | 9.2 | 11.1 |
| Daily Minimum: | | | | | | | | 5.1 | 9.1 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 01-2013 (January 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 02/22/2013

SAMPLING LOCATION: EFFLUENT DISCHARGE NO.: 001 NO DISCHARGE*: NO (Continue)

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO600 | CO665 | TGP3B | NC01 | THP3B | 01092 | 01042 | |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|-----------------------|-----------------------|-----------------|---------------------|--------------------|-------------|---------------|--|
| | | | | | | | Monthly | Monthly | Quarterly | Annually | Once per discharge | 2 X month | 2 X month | |
| | | | | | | | Composite | Composite | Composite | Grab | Composite | Composite | Composite | |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | TOTAL N - Conc | TOTAL P - Conc | CERI7DPF | ANN POL SCAN | CER7DCHV | ZINC | COPPER | |
| | | | | | | | mg/l | mg/l | pass/fail | yes=1 no=0 | percent | mg/l | mg/l | |
| 1 | | | 0850 | 8 | Y | | | | | | | | | |
| 2 | 0840 | 24 | 0700 | 8 | Y | | | | | | | | | |
| 3 | 0845 | 24 | 0730 | 8 | Y | | 42.96 | 1.76 | | | | 0.108 | < 0.005 | |
| 4 | 0845 | 24 | 0700 | 8 | B | | | | | | | | | |
| 5 | | | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | | |
| 7 | | | 0708 | 8 | Y | | | | | | | | | |
| 8 | 0840 | 24 | 0710 | 8 | Y | | | | | | | | | |
| 9 | 0845 | 24 | 0730 | 8 | Y | | | | | | | | | |
| 10 | 0850 | 24 | 0712 | 8 | Y | | | | | | | | | |
| 11 | | | 0715 | 8 | Y | | | | | | | | | |
| 12 | | | | | | | | | | | | | | |
| 13 | | | | | | | | | | | | | | |
| 14 | | | 0710 | 8 | Y | | | | | | | | | |
| 15 | 0845 | 24 | 0720 | 8 | Y | | | | | | | | | |
| 16 | 0845 | 24 | 0708 | 8 | Y | | | | | | | 0.133 | 0.005 | |
| 17 | 0850 | 24 | 0706 | 8 | Y | | | | | | | | | |
| 18 | | | 0724 | 8 | Y | | | | | | | | | |
| 19 | | | | | | | | | | | | | | |
| 20 | | | | | | | | | | | | | | |
| 21 | Holiday | | | | | | | | | | | | | |
| 22 | 0920 | 24 | 0715 | 8 | Y | | | | | | | | | |
| 23 | 0915 | 24 | 0700 | 8 | B | | | | | | | | | |
| 24 | 0915 | 24 | 0710 | 8 | Y | | | | | | | | | |
| 25 | | | 0700 | 8 | Y | | | | | | | | | |
| 26 | | | | | | | | | | | | | | |
| 27 | | | | | | | | | | | | | | |
| 28 | | | 0710 | 8 | Y | | | | | | | | | |
| 29 | 0840 | 24 | 0720 | 8 | Y | | | | | | | | | |
| 30 | 0830 | 24 | 0715 | 8 | Y | | | | | | | | | |
| 31 | 0835 | 24 | 0712 | 8 | Y | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | | | |
| Monthly Average: | | | | | | | 42.96 | 1.76 | | | | 0.1205 | 0.0025 | |
| Daily Maximum: | | | | | | | 42.96 | 1.76 | | | | 0.133 | 0.005 | |
| Daily Minimum: | | | | | | | 42.96 | 1.76 | | | | 0.108 | 0 | |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | | | |

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NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 01-2013 (January 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 02/22/2013

SAMPLING LOCATION: INFLUENT DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO310 | 00610 | CO530 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|------------|------------|------------|
| | | | | | | | 3 X week | | 3 X week |
| | | | | | | | Composite | Calculated | Composite |
| | | | | | | | BOD - Conc | NH3-N | TSS - Conc |
| | | | | | | | mg/l | mg/l | mg/l |
| 1 | | | | | | | | | |
| 2 | 0840 | 24 | | | | | 408 | 18.5 | 62 |
| 3 | 0845 | 24 | | | | | 115 | 20.25 | 173 |
| 4 | 0845 | 24 | | | | | 367 | 23.75 | 147 |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | |
| 7 | | | | | | | | | |
| 8 | 0840 | 24 | | | | | 208 | 21.25 | 210 |
| 9 | 0845 | 24 | | | | | 432 | 25.25 | 190 |
| 10 | 0840 | 24 | | | | | 172 | 24.5 | 143 |
| 11 | | | | | | | | | |
| 12 | | | | | | | | | |
| 13 | | | | | | | | | |
| 14 | | | | | | | | | |
| 15 | 0845 | 24 | | | | | 80.3 | 43 | 183 |
| 16 | 0845 | 24 | | | | | 142 | 18 | 167 |
| 17 | 0850 | 24 | | | | | 401 | 12.5 | 183 |
| 18 | | | | | | | | | |
| 19 | | | | | | | | | |
| 20 | | | | | | | | | |
| 21 | | | | | | | | | |
| 22 | 0920 | 24 | | | | | 414 | 18.5 | 157 |
| 23 | 0915 | 24 | | | | | 127 | 18.25 | 290 |
| 24 | 0915 | 24 | | | | | 135 | 16 | 103 |
| 25 | | | | | | | | | |
| 26 | | | | | | | | | |
| 27 | | | | | | | | | |
| 28 | | | | | | | | | |
| 29 | 0840 | 24 | | | | | 574 | 24.25 | 203 |
| 30 | 0830 | 24 | | | | | 362 | 26.5 | 177 |
| 31 | 0835 | 24 | | | | | 162 | 21 | 260 |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | 273.2867 | 22.1 | 176.5333 |
| Daily Maximum: | | | | | | | 574 | 43 | 290 |
| Daily Minimum: | | | | | | | 80.3 | 12.5 | 62 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

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NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 01-2013 (January 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 02/22/2013

02/22/2013

ORC/Certifier Signature: Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

By this signature, I certify that this report is accurate and complete to the best of my knowledge.

The permittee shall report to the Director or the appropriate Regional Office any noncompliance that potentially threatens public health or the environment. Any information shall be provided orally within 24 hours from the time the permittee became aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances.

If the facility is noncompliant, please attach a list of corrective actions being taken and a time-table for improvements to be made as required by part II.E.6 of the NPDES permit.

COMMENTS: BOD Monthly Avg % Removal 99%

TSS Monthly Avg % Removal 97%

NH3 Monthly Avg % Removal 97%

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 managed 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 fines and imprisonment for knowing violations.

02/22/2013

Permittee/Submitter Signature:*** Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

Permittee Address: 3680 Hillview Dr Conover NC 28613 Permit Expiration Date: 04/30/2015

CERTIFIED LABORATORIES

LAB NAME: Water Tech Labs, Research and Analytical

CERTIFIED LAB #: 50, 34

PERSON(S) COLLECTING SAMPLES: Evan Rubins, Michael Fox

PARAMETER CODES

Parameter Codes assistance may be obtained by calling the NPDES Unit (919) 807-6300 or by visiting the Surface Water Protection Section's web site at <http://portal.ncdenr.org/web/wq/swp> and linking to the unit's information pages.

FOOTNOTES

Use only units of measurement designated in the reporting facility's NPDES permit for reporting data.

* No Flow/Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data to be entered for all of the parameters on the DMR for entire monitoring period.

** ORC on Site?: ORC must visit facility and document visitation of facility as required per 15A NCAC 8G .0204.

*** Signature of Permittee: If signed by other than the permittee, then delegation of the signatory authority must be on file with the state per 15A NCAC 2B .0506(b)(2)(D).

NPDES PERMIT NO.: NC0024252

FACILITY NAME: Northeast WWTP

OWNER NAME: City of Conover

GRADE: WW-4.

eDMR PERIOD: 01-2013 (January 2013)

COMPLIANCE: Compliant

PERMIT VERSION: 3.0

CLASS: WW-3.

ORC: Michael Lee Fox

ORC HAS CHANGED: No

VERSION: 1.0

CONTACT PHONE #: 8284652279

PERMIT STATUS: Active

COUNTY: Catawba

ORC CERT NUMBER: 10941

STATUS: Processed

SUBMISSION DATE: 02/22/2013

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NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 02-2013 (February 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 03/26/2013

SAMPLING LOCATION: INFLUENT DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:*** | No Flow Reason | CO310 | CO610 | CO530 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|-----------------|----------------|------------|--------------|------------|
| | | | | | | | 3 X week | 3 X week | 3 X week |
| | | | | | | | Composite | Calculated | Composite |
| | | | | | | | BOD - Conc | NH3-N - Conc | TSS - Conc |
| | | | | | | | mg/l | mg/l | mg/l |
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |
| 5 | 0840 | | | | | | 463 | 26.25 | 413 |
| 6 | 0840 | | | | | | 247 | 23 | 217 |
| 7 | 0850 | | | | | | 186 | 20.5 | 50 |
| 8 | | | | | | | | | |
| 9 | | | | | | | | | |
| 10 | | | | | | | | | |
| 11 | | | | | | | | | |
| 12 | 0840 | | | | | | 754 | 23 | 170 |
| 13 | 0815 | | | | | | 253 | 23 | 167 |
| 14 | 0835 | | | | | | 172 | 24.75 | 157 |
| 15 | | | | | | | | | |
| 16 | | | | | | | | | |
| 17 | | | | | | | | | |
| 18 | | | | | | | | | |
| 19 | 0840 | | | | | | 212 | 23 | 307 |
| 20 | 0845 | | | | | | 321 | 30.5 | 367 |
| 21 | 0850 | | | | | | 204 | 37.75 | 133 |
| 22 | | | | | | | | | |
| 23 | | | | | | | | | |
| 24 | | | | | | | | | |
| 25 | | | | | | | | | |
| 26 | 0840 | | | | | | 206 | 27.25 | 197 |
| 27 | 0845 | | | | | | 85 | 13 | 110 |
| 28 | 0845 | | | | | | 177 | 15 | 337 |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | 273.3333 | 23.9375 | 218.75 |
| Daily Maximum: | | | | | | | 754 | 37.75 | 413 |
| Daily Minimum: | | | | | | | 85 | 13 | 50 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 02-2013 (February 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 03/26/2013

SAMPLING LOCATION: DOWNSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|--------|--------|
| | | | | | | | Weekly | Weekly |
| | | | | | | | Grab | Grab |
| | | | | | | | TEMP-C | DO |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | deg c | mg/l |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | 1111 | | | | | | 5.9 | 10.7 |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | 1125 | | | | | | 10 | 9.2 |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | 1416 | | | | | | 8.4 | 10.3 |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | 1043 | | | | | | 6.7 | 11 |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 7.75 | 10.3 |
| Daily Maximum: | | | | | | | 10 | 11 |
| Daily Minimum: | | | | | | | 5.9 | 9.2 |
| Monthly Avg % Removal (85%): | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 02-2013 (February 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 03/26/2013

SAMPLING LOCATION: EFFLUENT DISCHARGE NO.: 001 NO DISCHARGE*: NO (Continue)

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO600 | CO665 | TGP3B | NC01 | THP3B | 01092 | 01042 | |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|-----------------------|-----------------------|-----------------|---------------------|--------------------|-------------|---------------|---|
| | | | | | | | Monthly | Monthly | Quarterly | Annually | Once per discharge | 2 X month | 2 X month | |
| | | | | | | | Composite | Composite | Composite | Grab | Composite | Composite | Composite | |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | TOTAL N - Conc | TOTAL P - Conc | CERI7DPF | ANN POL SCAN | CER7DCHV | ZINC | COPPER | |
| | | | 0710 | 8 | Y | | mg/l | mg/l | pass/fail | yes=1 no=0 | percent | mg/l | mg/l | |
| 1 | | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | |
| 4 | | | 0705 | 8 | Y | | | | | | | | | |
| 5 | 0840 | 24 | 0708 | 8 | Y | | | | | | | | | |
| 6 | 0840 | 24 | 0710 | 8 | Y | | 3.43 | 1.09 | | | | 0.112 | < 0.005 | |
| 7 | 0850 | 24 | 0712 | 8 | Y | | | | | | | | | |
| 8 | | | 0710 | 8 | Y | | | | | | | | | |
| 9 | | | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | | | |
| 11 | | | 0706 | 8 | Y | | | | | | | | | |
| 12 | 0840 | 24 | 0706 | 8 | Y | | | | | | | | | |
| 13 | 0815 | 24 | 0708 | 8 | Y | | | | | | | | | |
| 14 | 0835 | 24 | 1000 | 8 | Y | | | | | | | 0.117 | < 0.005 | |
| 15 | | | 0700 | 8 | Y | | | | | | | | | |
| 16 | | | | | | | | | | | | | | |
| 17 | | | | | | | | | | | | | | |
| 18 | | | 0708 | 8 | Y | | | | | | | | | |
| 19 | 0840 | 24 | 0705 | 8 | Y | | | | | | | | | |
| 20 | 0845 | 24 | 0710 | 8 | Y | | | | | | | | | |
| 21 | 0850 | 24 | 0700 | 8 | Y | | | | | | | | | |
| 22 | | | 0720 | 8 | Y | | | | | | | | | |
| 23 | | | | | | | | | | | | | | |
| 24 | | | | | | | | | | | | | | |
| 25 | | | 0710 | 8 | Y | | | | | | | | | |
| 26 | 0840 | 24 | 0708 | 8 | Y | | | | | | | | | |
| 27 | 0845 | 24 | 0700 | 8 | Y | | | | | | | | | |
| 28 | 0845 | 24 | 0718 | 8 | Y | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | | | |
| Monthly Average: | | | | | | | 3.43 | 1.09 | | | | | 0.1145 | 0 |
| Daily Maximum: | | | | | | | 3.43 | 1.09 | | | | | 0.117 | 0 |
| Daily Minimum: | | | | | | | 3.43 | 1.09 | | | | | 0.112 | 0 |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 02-2013 (February 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 03/26/2013

SAMPLING LOCATION: UPSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|--------|--------|
| | | | | | | | Weekly | Weekly |
| | | | | | | | Grab | Grab |
| | | | | | | | TEMP-C | DO |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | deg c | mg/l |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | 1125 | | | | | | 5.8 | 10.6 |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | 1140 | | | | | | 9.8 | 9.3 |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | 1430 | | | | | | 7.3 | 10.7 |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | 1050 | | | | | | 6.8 | 10.8 |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 7.425 | 10.35 |
| Daily Maximum: | | | | | | | 9.8 | 10.8 |
| Daily Minimum: | | | | | | | 5.8 | 9.3 |
| Monthly Avg % Removal (85%): | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 02-2013 (February 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 03/26/2013

03/26/2013

ORC/Certifier Signature: Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

By this signature, I certify that this report is accurate and complete to the best of my knowledge.

The permittee shall report to the Director or the appropriate Regional Office any noncompliance that potentially threatens public health or the environment. Any information shall be provided orally within 24 hours from the time the permittee became aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances.

If the facility is noncompliant, please attach a list of corrective actions being taken and a time-table for improvements to be made as required by part II.E.6 of the NPDES permit.

COMMENTS: BOD Monthly Avg % Removal 98%

TSS Monthly Avg % Removal 94%

NH3 Monthly Avg % Removal 97%

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 managed 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 fines and imprisonment for knowing violations.

03/26/2013

Permittee/Submitter Signature:*** Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

Permittee Address: 3680 Hillview Dr Conover NC 28613 Permit Expiration Date: 04/30/2015

PDFfill PDF Editor with Free Writer and Tools

CERTIFIED LABORATORIES

LAB NAME: Water Tech Labs, Research and Analytical

CERTIFIED LAB #: 50, 34

PERSON(S) COLLECTING SAMPLES: Evan Rubins, Michael Fox

PARAMETER CODES

Parameter Codes assistance may be obtained by calling the NPDES Unit (919) 807-6300 or by visiting the Surface Water Protection Section's web site at <http://portal.ncdenr.org/web/wq/swp> and linking to the unit's information pages.

FOOTNOTES

Use only units of measurement designated in the reporting facility's NPDES permit for reporting data.

* No Flow/Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data to be entered for all of the parameters on the DMR for entire monitoring period.

** ORC on Site?: ORC must visit facility and document visitation of facility as required per 15A NCAC 8G .0204.

*** Signature of Permittee: If signed by other than the permittee, then delegation of the signatory authority must be on file with the state per 15A NCAC 2B .0506(b)(2)(D).

NPDES PERMIT NO.: NC0024252

FACILITY NAME: Northeast WWTP

OWNER NAME: City of Conover

GRADE: WW-4.

eDMR PERIOD: 02-2013 (February 2013)

COMPLIANCE: Compliant

PERMIT VERSION: 3.0

CLASS: WW-3.

ORC: Michael Lee Fox

ORC HAS CHANGED: No

VERSION: 1.0

CONTACT PHONE #: 8284652279

PERMIT STATUS: Active

COUNTY: Catawba

ORC CERT NUMBER: 10941

STATUS: Processed

SUBMISSION DATE: 03/26/2013

PDFill PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Tony R Parker

ORC CERT NUMBER: 996778

GRADE: WW-3

ORC HAS CHANGED: No

eDMR PERIOD: 03-2013 (March 2013)

VERSION: 2.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 04/29/2013

SAMPLING LOCATION: EFFLUENT DISCHARGE NO.: 001 NO DISCHARGE*: NO (Continue)

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO600 | CO665 | 01092 | THP3B | TGP3B | NC01 | 01042 | |
|------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------------|----------------|-----------|--------------------|------------|--------------|-----------|--|
| | | | | | | | Monthly | Monthly | 2 X month | Once per discharge | Quarterly | Annually | 2 X month | |
| | | | | | | | Composite | Composite | Composite | Composite | Composite | Grab | Composite | |
| | | | | | | | TOTAL N - Conc | TOTAL P - Conc | ZINC | CER7DCHV | CERI7DPF | ANN POL SCAN | COPPER | |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | mg/l | mg/l | mg/l | percent | pass/fail | yes=1 no=0 | mg/l | | |
| 1 | 0850 | 24 | 0715 | 8 | Y | | | | | | | | | |
| 2 | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | |
| 4 | | | 0710 | 8 | Y | | | | | | | | | |
| 5 | 0820 | 24 | 0700 | 8 | Y | | | | | | | | | |
| 6 | 0835 | 24 | 0712 | 8 | Y | | | | | | | | | |
| 7 | 0850 | 24 | 0715 | 8 | Y | | | | | | | | | |
| 8 | | | 0715 | 8 | Y | | | | | | | | | |
| 9 | | | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | | | |
| 11 | | | 0709 | 8 | Y | | | | | | | | | |
| 12 | 0840 | 24 | 0712 | 8 | Y | | | | | | | | | |
| 13 | 0845 | 24 | 0708 | 8 | Y | | 5.12 | 1.53 | 0.087 | | 1 | | < 0.005 | |
| 14 | 0850 | 24 | 0730 | 8 | Y | | | | | | | | | |
| 15 | | | | 8 | Y | | | | | | | | | |
| 16 | | | | | | | | | | | | | | |
| 17 | | | | | | | | | | | | | | |
| 18 | | | 0705 | 8 | Y | | | | | | | | | |
| 19 | 0840 | 24 | 0708 | 8 | Y | | | | | | | | | |
| 20 | 0845 | 24 | 0714 | 8 | Y | | | | | | | | | |
| 21 | 0850 | 24 | 0714 | 8 | Y | | | | 0.117 | | | | < 0.005 | |
| 22 | | | 0712 | 8 | Y | | | | | | | | | |
| 23 | | | | | | | | | | | | | | |
| 24 | | | | | | | | | | | | | | |
| 25 | | | 0710 | 8 | Y | | | | | | | | | |
| 26 | 0840 | 24 | 0708 | 8 | Y | | | | | | | | | |
| 27 | 0845 | 24 | 0712 | 8 | Y | | | | | | | | | |
| 28 | 0850 | 24 | 0800 | 8 | Y | | | | | | | | | |
| 29 | Holiday | | | | | | | | | | | | | |
| 30 | | | | | | | | | | | | | | |
| 31 | | | | | | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | | | |
| Monthly Average: | | | | | | | 5.12 | 1.53 | 0.102 | | 1 | | 0 | |
| Daily Maximum: | | | | | | | 5.12 | 1.53 | 0.117 | | 1 | | 0 | |
| Daily Minimum: | | | | | | | 5.12 | 1.53 | 0.087 | | 1 | | 0 | |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Tony R Parker

ORC CERT NUMBER: 996778

GRADE: WW-3

ORC HAS CHANGED: No

eDMR PERIOD: 03-2013 (March 2013)

VERSION: 2.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 04/29/2013

SAMPLING LOCATION: UPSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | | Total Composite Time | | Operator Arrival Time | | Operator Time On Site | | ORC On Site:*** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|-----|----------------------|-----|-----------------------|--|-----------------------|--------|-----------------|----------------|--------|--------|
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | | Weekly | | | Weekly | |
| | | | | | | | | | | | TEMP-C | DO |
| | | | | | | | | | | | deg c | mg/l |
| 1 | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | |
| 4 | 1135 | | | | | | | | | | 6.1 | 11.7 |
| 5 | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | |
| 8 | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | |
| 11 | 1124 | | | | | | | | | | 9 | 10.8 |
| 12 | | | | | | | | | | | | |
| 13 | | | | | | | | | | | | |
| 14 | | | | | | | | | | | | |
| 15 | | | | | | | | | | | | |
| 16 | | | | | | | | | | | | |
| 17 | | | | | | | | | | | | |
| 18 | | | | | | | | | | | | |
| 19 | | | | | | | | | | | | |
| 20 | 1541 | | | | | | | | | | 12.5 | 10.5 |
| 21 | | | | | | | | | | | | |
| 22 | | | | | | | | | | | | |
| 23 | | | | | | | | | | | | |
| 24 | | | | | | | | | | | | |
| 25 | | | | | | | | | | | | |
| 26 | | | | | | | | | | | | |
| 27 | 1501 | | | | | | | | | | 11.5 | 10.9 |
| 28 | | | | | | | | | | | | |
| 29 | | | | | | | | | | | | |
| 30 | | | | | | | | | | | | |
| 31 | | | | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | |
| Monthly Average: | | | | | | | | | | | 9.775 | 10.975 |
| Daily Maximum: | | | | | | | | | | | 12.5 | 11.7 |
| Daily Minimum: | | | | | | | | | | | 6.1 | 10.5 |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Tony R Parker

ORC CERT NUMBER: 996778

GRADE: WW-3

ORC HAS CHANGED: No

eDMR PERIOD: 03-2013 (March 2013)

VERSION: 2.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 04/29/2013

SAMPLING LOCATION: INFLUENT DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO310 | CO610 | CO530 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|------------|--------------|------------|
| | | | | | | | 3 X week | 3 X week | 3 X week |
| | | | | | | | Composite | Calculated | Composite |
| | | | | | | | BOD - Conc | NH3-N - Conc | TSS - Conc |
| | | | | | | | mg/l | mg/l | mg/l |
| 1 | 0850 | | | | | | 183 | 17 | 103 |
| 2 | | | | | | | | | |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |
| 5 | 0820 | | | | | | 149 | 19.25 | 173 |
| 6 | 0835 | | | | | | 343 | 26.25 | 390 |
| 7 | 0850 | | | | | | 159 | 17 | 107 |
| 8 | | | | | | | | | |
| 9 | | | | | | | | | |
| 10 | | | | | | | | | |
| 11 | | | | | | | | | |
| 12 | 0840 | | | | | | 453 | 20.75 | 223 |
| 13 | 0845 | | | | | | 109 | | 96.7 |
| 14 | 0850 | | | | | | 144 | 25 | 75 |
| 15 | | | | | | | | | |
| 16 | | | | | | | | | |
| 17 | | | | | | | | | |
| 18 | | | | | | | | | |
| 19 | 0840 | | | | | | 476 | 25.75 | 203 |
| 20 | 0845 | | | | | | 223 | 25.5 | 133 |
| 21 | 0850 | | | | | | 202 | 25.5 | 143 |
| 22 | | | | | | | | | |
| 23 | | | | | | | | | |
| 24 | | | | | | | | | |
| 25 | | | | | | | | | |
| 26 | 0840 | | | | | | 272 | 27.25 | 187 |
| 27 | 0845 | | | | | | 228 | 29.75 | 180 |
| 28 | 0850 | | | | | | 219 | 26.75 | 100 |
| 29 | | | | | | | | | |
| 30 | | | | | | | | | |
| 31 | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | 243.0769 | 23.0577 | 162.5923 |
| Daily Maximum: | | | | | | | 476 | 29.75 | 390 |
| Daily Minimum: | | | | | | | 109 | 14 | 75 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Tony R Parker

ORC CERT NUMBER: 996778

GRADE: WW-3

ORC HAS CHANGED: No

eDMR PERIOD: 03-2013 (March 2013)

VERSION: 2.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 04/29/2013

SAMPLING LOCATION: DOWNSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | | Total Composite Time | | Operator Arrival Time | | Operator Time On Site | | ORC On Site:*** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|-----|----------------------|-----|-----------------------|--|-----------------------|--------|-----------------|----------------|--------|--------|
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | | Weekly | | | Weekly | |
| | | | | | | | | | | | TEMP-C | DO |
| | | | | | | | | | | | deg c | mg/l |
| 1 | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | |
| 4 | 1113 | 24 | | | | | | | | | 5.9 | 12.1 |
| 5 | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | |
| 8 | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | |
| 11 | 1109 | 24 | | | | | | | | | 9.2 | 11.1 |
| 12 | | | | | | | | | | | | |
| 13 | | | | | | | | | | | | |
| 14 | | | | | | | | | | | | |
| 15 | | | | | | | | | | | | |
| 16 | | | | | | | | | | | | |
| 17 | | | | | | | | | | | | |
| 18 | | | | | | | | | | | | |
| 19 | | | | | | | | | | | | |
| 20 | 1525 | 24 | | | | | | | | | 12.9 | 10.3 |
| 21 | | | | | | | | | | | | |
| 22 | | | | | | | | | | | | |
| 23 | | | | | | | | | | | | |
| 24 | | | | | | | | | | | | |
| 25 | | | | | | | | | | | | |
| 26 | | | | | | | | | | | | |
| 27 | 1450 | 24 | | | | | | | | | 11.3 | 10.8 |
| 28 | | | | | | | | | | | | |
| 29 | | | | | | | | | | | | |
| 30 | | | | | | | | | | | | |
| 31 | | | | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | |
| Monthly Average: | | | | | | | | | | | 9.825 | 11.075 |
| Daily Maximum: | | | | | | | | | | | 12.9 | 12.1 |
| Daily Minimum: | | | | | | | | | | | 5.9 | 10.3 |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Tony R Parker

ORC CERT NUMBER: 996778

GRADE: WW-3

ORC HAS CHANGED: No

eDMR PERIOD: 03-2013 (March 2013)

VERSION: 2.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 04/29/2013

04/29/2013

ORC/Certifier Signature: Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

By this signature, I certify that this report is accurate and complete to the best of my knowledge.

The permittee shall report to the Director or the appropriate Regional Office any noncompliance that potentially threatens public health or the environment. Any information shall be provided orally within 24 hours from the time the permittee became aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances.

If the facility is noncompliant, please attach a list of corrective actions being taken and a time-table for improvements to be made as required by part II.E.6 of the NPDES permit.

COMMENTS: BOD Monthly Avg % Removal 100%

TSS Monthly Avg % Removal 96%

NH3 Monthly Avg % Removal 97%

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 managed 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 fines and imprisonment for knowing violations.

04/29/2013

Permittee/Submitter Signature:*** Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

Permittee Address: 3680 Hillview Dr Conover NC 28613 Permit Expiration Date: 04/30/2015

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CERTIFIED LABORATORIES

LAB NAME: Water Tech Labs, Research and Analytical

CERTIFIED LAB #: 50, 34

PERSON(S) COLLECTING SAMPLES: Evan Rubins, Michael Fox

PARAMETER CODES

Parameter Codes assistance may be obtained by calling the NPDES Unit (919) 807-6300 or by visiting the Surface Water Protection Section's web site at <http://portal.ncdenr.org/web/wq/swp> and linking to the unit's information pages.

FOOTNOTES

Use only units of measurement designated in the reporting facility's NPDES permit for reporting data.

* No Flow/Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data to be entered for all of the parameters on the DMR for entire monitoring period.

** ORC on Site?: ORC must visit facility and document visitation of facility as required per 15A NCAC 8G .0204.

*** Signature of Permittee: If signed by other than the permittee, then delegation of the signatory authority must be on file with the state per 15A NCAC 2B .0506(b)(2)(D).

NPDES PERMIT NO.: NC0024252

FACILITY NAME: Northeast WWTP

OWNER NAME: City of Conover

GRADE: WW-3

eDMR PERIOD: 03-2013 (March 2013)

COMPLIANCE: Compliant

PERMIT VERSION: 3.0

CLASS: WW-3.

ORC: Tony R Parker

ORC HAS CHANGED: No

VERSION: 2.0

CONTACT PHONE #: 8284652279

PERMIT STATUS: Active

COUNTY: Catawba

ORC CERT NUMBER: 996778

STATUS: Processed

SUBMISSION DATE: 04/29/2013

PDFill PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252
 FACILITY NAME: Northeast WWTP
 OWNER NAME: City of Conover
 GRADE: WW-4
 eDMR PERIOD: 04-2013 (April 2013)
 COMPLIANCE: Compliant

PERMIT VERSION: 3.0
 CLASS: WW-3
 ORC: Michael Lee Fox
 ORC HAS CHANGED: No
 VERSION: 1.0
 CONTACT PHONE #: 8284652279

PERMIT STATUS: Active
 COUNTY: Catawba
 ORC CERT NUMBER: 10941
 STATUS: Processed
 SUBMISSION DATE: 05/24/2013

SAMPLING LOCATION: INFLUENT DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO310 | CO610 | CO530 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|------------|--------------|------------|
| | | | | | | | 3 X week | 3 X week | 3 X week |
| | | | | | | | Composite | Calculated | Composite |
| | | | | | | | BOD - Conc | NH3-N - Conc | TSS - Conc |
| | | | | | | | mg/l | mg/l | mg/l |
| 1 | | | | | | | | | |
| 2 | 0845 | 24 | | | | | 178 | 21 | 147 |
| 3 | 0850 | 24 | | | | | 184 | 35.25 | 190 |
| 4 | 0850 | 24 | | | | | 169 | 18.25 | 113 |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | |
| 7 | | | | | | | | | |
| 8 | | | | | | | | | |
| 9 | 0845 | 24 | | | | | 256 | 20.75 | 200 |
| 10 | 0850 | 24 | | | | | 257 | 20 | 170 |
| 11 | 0840 | 24 | | | | | 200 | 20.5 | 233 |
| 12 | | | | | | | | | |
| 13 | | | | | | | | | |
| 14 | | | | | | | | | |
| 15 | | | | | | | | | |
| 16 | | | | | | | | | |
| 17 | 0845 | 24 | | | | | 178 | 21.25 | 177 |
| 18 | 0845 | 24 | | | | | 165 | 22 | 127 |
| 19 | 0900 | 24 | | | | | 354 | 24.75 | 127 |
| 20 | | | | | | | | | |
| 21 | | | | | | | | | |
| 22 | | | | | | | | | |
| 23 | | | | | | | | | |
| 24 | 0940 | 24 | | | | | 514 | 29.25 | 210 |
| 25 | 0940 | 24 | | | | | 189 | 22.25 | 150 |
| 26 | 0945 | 24 | | | | | 284 | 28.25 | 157 |
| 27 | | | | | | | | | |
| 28 | | | | | | | | | |
| 29 | | | | | | | | | |
| 30 | 0845 | 24 | | | | | 387 | 14.25 | 130 |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | 255 | 22.9038 | 163.9231 |
| Daily Maximum: | | | | | | | 514 | 35.25 | 233 |
| Daily Minimum: | | | | | | | 165 | 14.25 | 113 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 04-2013 (April 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 05/24/2013

SAMPLING LOCATION: UPSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|--------|--------|
| | | | | | | | Weekly | Weekly |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | TEMP-C | DO |
| | | | | | | | deg c | mg/l |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | 1430 | | | | 14 | 10.2 |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | 1148 | | | | 16.4 | 10.2 |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | | 1420 | | | | 20 | 9.6 |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | 1125 | | | | 12.3 | 10.3 |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | 1101 | | | | 16.1 | 8.9 |
| 30 | | | | | | | | |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 15.76 | 9.84 |
| Daily Maximum: | | | | | | | 20 | 10.3 |
| Daily Minimum: | | | | | | | 12.3 | 8.9 |
| Monthly Avg % Removal (85%): | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 04-2013 (April 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 05/24/2013

SAMPLING LOCATION: DOWNSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|--------|--------|
| | | | | | | | Weekly | Weekly |
| | | | | | | | Grab | Grab |
| | | | | | | | TEMP-C | DO |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | deg c | mg/l |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | 1409 | | | | 14 | 10.3 |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | 1130 | | | | 15.5 | 10.3 |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | | 1405 | | | | 20.2 | 9.4 |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | 1110 | | | | 12.1 | 10.5 |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | 1115 | | | | 16.3 | 8.4 |
| 30 | | | | | | | | |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 15.62 | 9.78 |
| Daily Maximum: | | | | | | | 20.2 | 10.5 |
| Daily Minimum: | | | | | | | 12.1 | 8.4 |
| Monthly Avg % Removal (85%): | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 04-2013 (April 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 05/24/2013

SAMPLING LOCATION: EFFLUENT DISCHARGE NO.: 001 NO DISCHARGE*: NO (Continue)

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO600 | CO665 | THP3B | 01042 | 01092 | NC01 | TGP3B |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------------|----------------|--------------------|-----------|-----------|--------------|-----------|
| | | | | | | | Monthly | Monthly | Once per discharge | 2 X month | 2 X month | Annually | Quarterly |
| | | | | | | | Composite | Composite | Composite | Composite | Composite | Grab | Composite |
| | | | | | | | TOTAL N - Conc | TOTAL P - Conc | CER7DCHV | COPPER | ZINC | ANN POL SCAN | CER17DPF |
| | | | | | | | mg/l | mg/l | percent | mg/l | mg/l | yes=1 no=0 | pass/fail |
| 1 | | | 0730 | 8 | Y | | | | | | | | |
| 2 | 0845 | 24 | 0715 | 8 | Y | | | | | | | | |
| 3 | 0850 | 24 | | 8 | B | | | | | | | | |
| 4 | 0850 | 24 | 0708 | 8 | Y | | | | | | | | |
| 5 | | | 0715 | 8 | Y | | | | | | | | |
| 6 | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | |
| 8 | | | 0710 | 8 | Y | | | | | | | | |
| 9 | 0845 | 24 | 0704 | 8 | Y | | | | | | | | |
| 10 | 0850 | 24 | 0715 | 8 | Y | | | | | | | | |
| 11 | 0855 | 24 | 0700 | 8 | B | | 5.54 | 2.32 | | < 0.005 | 0.118 | | |
| 12 | | | 0708 | 8 | Y | | | | | | | | |
| 13 | | | | | | | | | | | | | |
| 14 | | | | | | | | | | | | | |
| 15 | | | 0710 | 8 | Y | | | | | | | | |
| 16 | | | 0708 | 8 | Y | | | | | | | | |
| 17 | 0845 | 24 | 0705 | 8 | Y | | | | | | | | |
| 18 | 0845 | 24 | 0710 | 8 | Y | | | | < 0.005 | 0.114 | | | |
| 19 | 0900 | 24 | 0720 | 8 | Y | | | | | | | | |
| 20 | | | | | | | | | | | | | |
| 21 | | | | | | | | | | | | | |
| 22 | | | 0712 | 8 | Y | | | | | | | | |
| 23 | | | 0708 | 8 | Y | | | | | | | | |
| 24 | 0940 | 24 | 0705 | 8 | Y | | | | | | | | |
| 25 | 0945 | 24 | 0700 | 8 | B | | | | | | | | |
| 26 | 0945 | 24 | 0700 | 8 | B | | | | | | | | |
| 27 | | | | | | | | | | | | | |
| 28 | | | | | | | | | | | | | |
| 29 | | | 0700 | 8 | Y | | | | | | | | |
| 30 | 0845 | 24 | 0706 | 8 | Y | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | | |
| Monthly Average: | | | | | | | 5.54 | 2.32 | | 0 | 0.116 | | |
| Daily Maximum: | | | | | | | 5.54 | 2.32 | | 0 | 0.118 | | |
| Daily Minimum: | | | | | | | 5.54 | 2.32 | | 0 | 0.114 | | |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252
FACILITY NAME: Northeast WWTP
OWNER NAME: City of Conover
GRADE: WW-4
eDMR PERIOD: 04-2013 (April 2013)
COMPLIANCE: Compliant

PERMIT VERSION: 3.0
CLASS: WW-3
ORC: Michael Lee Fox
ORC HAS CHANGED: No
VERSION: 1.0
CONTACT PHONE #: 8284652279

PERMIT STATUS: Active
COUNTY: Catawba
ORC CERT NUMBER: 10941
STATUS: Processed
SUBMISSION DATE: 05/24/2013

05/24/2013

ORC/Certifier Signature: Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

By this signature, I certify that this report is accurate and complete to the best of my knowledge.

The permittee shall report to the Director or the appropriate Regional Office any noncompliance that potentially threatens public health or the environment. Any information shall be provided orally within 24 hours from the time the permittee became aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances.

If the facility is noncompliant, please attach a list of corrective actions being taken and a time-table for improvements to be made as required by part II.E.6 of the NPDES permit.

COMMENTS: BOD Monthly Avg % Removal 100%

TSS Monthly Avg % Removal 99%

NH3 Monthly Avg % Removal 97%

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 managed 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 fines and imprisonment for knowing violations.

05/24/2013

Permittee/Submitter Signature:*** Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

Permittee Address: 3680 Hillview Dr Conover NC 28613 Permit Expiration Date: 04/30/2015

CERTIFIED LABORATORIES

LAB NAME: Water Tech Lab, Research and Analytical

CERTIFIED LAB #: 50, 34

PERSON(S) COLLECTING SAMPLES: Evan Rubins, Michael Fox

PARAMETER CODES

Parameter Codes assistance may be obtained by calling the NPDES Unit (919) 807-6300 or by visiting the Surface Water Protection Section's web site at <http://portal.ncdenr.org/web/wq/swp> and linking to the unit's information pages.

FOOTNOTES

Use only units of measurement designated in the reporting facility's NPDES permit for reporting data.

* No Flow/Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data to be entered for all of the parameters on the DMR for entire monitoring period.

** ORC on Site?: ORC must visit facility and document visitation of facility as required per 15A NCAC 8G .0204.

*** Signature of Permittee: If signed by other than the permittee, then delegation of the signatory authority must be on file with the state per 15A NCAC 2B .0506(b)(2)(D).

NPDES PERMIT NO.: NC0024252

FACILITY NAME: Northeast WWTP

OWNER NAME: City of Conover

GRADE: WW-4.

eDMR PERIOD: 04-2013 (April 2013)

COMPLIANCE: Compliant

PERMIT VERSION: 3.0

CLASS: WW-3.

ORC: Michael Lee Fox

ORC HAS CHANGED: No

VERSION: 1.0

CONTACT PHONE #: 8284652279

PERMIT STATUS: Active

COUNTY: Catawba

ORC CERT NUMBER: 10941

STATUS: Processed

SUBMISSION DATE: 05/24/2013

PDFill PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252
 FACILITY NAME: Northeast WWTP
 OWNER NAME: City of Conover
 GRADE: WW-4
 eDMR PERIOD: 07-2013 (July 2013)
 COMPLIANCE: Compliant

PERMIT VERSION: 3.0
 CLASS: WW-3
 ORC: Michael Lee Fox
 ORC HAS CHANGED: No
 VERSION: 1.0
 CONTACT PHONE #: 8284652279

PERMIT STATUS: Active
 COUNTY: Catawba
 ORC CERT NUMBER: 10941
 STATUS: Processed
 SUBMISSION DATE: 08/23/2013

SAMPLING LOCATION: INFLUENT DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO310 | 00610 | CO530 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|------------|------------|------------|
| | | | | | | | 3 X week | 3 X week | 3 X week |
| | | | | | | | Composite | Calculated | Composite |
| | | | | | | | BOD - Conc | NH3-N | TSS - Conc |
| | | | | | | | mg/l | mg/l | mg/l |
| 1 | 0840 | 24 | | | | | 203 | 23 | 223 |
| 2 | 0840 | 24 | | | | | 185 | 22 | 217 |
| 3 | 0845 | 24 | | | | | 173 | 22.75 | 160 |
| 4 | | | | | | | | | |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | |
| 7 | | | | | | | | | |
| 8 | | | | | | | | | |
| 9 | 0815 | 24 | | | | | 237 | 10.5 | 200 |
| 10 | 0840 | 24 | | | | | 169 | 18.75 | 137 |
| 11 | 0830 | 24 | | | | | 214 | 19.25 | 260 |
| 12 | | | | | | | | | |
| 13 | | | | | | | | | |
| 14 | | | | | | | | | |
| 15 | | | | | | | | | |
| 16 | 0835 | 24 | | | | | 290 | 20.5 | 173 |
| 17 | 0840 | 24 | | | | | 172 | 16.75 | 123 |
| 18 | 0845 | 24 | | | | | 153 | 20 | 183 |
| 19 | | | | | | | | | |
| 20 | | | | | | | | | |
| 21 | | | | | | | | | |
| 22 | | | | | | | | | |
| 23 | 0840 | 24 | | | | | 295 | 16.5 | 193 |
| 24 | 0845 | 24 | | | | | 164 | 21 | 207 |
| 25 | 0850 | 24 | | | | | 159 | 20.25 | 177 |
| 26 | | | | | | | | | |
| 27 | | | | | | | | | |
| 28 | | | | | | | | | |
| 29 | | | | | | | | | |
| 30 | 0845 | 24 | | | | | 367 | 11 | 177 |
| 31 | 0845 | 24 | | | | | 84.5 | 16.75 | 103 |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | 204.6786 | 18.5 | 180.9286 |
| Daily Maximum: | | | | | | | 367 | 23 | 260 |
| Daily Minimum: | | | | | | | 84.5 | 10.5 | 103 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252
 FACILITY NAME: Northeast WWTP
 OWNER NAME: City of Conover
 GRADE: WW-4
 eDMR PERIOD: 07-2013 (July 2013)
 COMPLIANCE: Compliant

PERMIT VERSION: 3.0
 CLASS: WW-3
 ORC: Michael Lee Fox
 ORC HAS CHANGED: No
 VERSION: 1.0
 CONTACT PHONE #: 8284652279

PERMIT STATUS: Active
 COUNTY: Catawba
 ORC CERT NUMBER: 10941
 STATUS: Processed
 SUBMISSION DATE: 08/23/2013

SAMPLING LOCATION: UPSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------|----------|
| | | | | | | | 3 X week | 3 X week |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | TEMP-C | DO |
| | | | | | | | deg c | mg/l |
| 1 | | | 1105 | | | | 20.9 | 8.7 |
| 2 | | | 1033 | | | | 20.8 | 7.8 |
| 3 | | | 1529 | | | | 22.5 | 7.7 |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | 1110 | | | | 21.6 | 7.8 |
| 9 | | | | | | | | |
| 10 | | | 1130 | | | | 20.9 | 7.9 |
| 11 | | | 1039 | | | | 20.8 | 8.1 |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | 1051 | | | | 20.7 | 8 |
| 16 | | | 1115 | | | | 21.2 | 8 |
| 17 | | | 1436 | | | | 21.1 | 8.1 |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | 21.4 | 8.2 |
| 23 | | | | | | | 21.6 | 7.7 |
| 24 | | | 1145 | | | | 21.3 | 7.9 |
| 25 | | | 1131 | | | | | |
| 26 | | | 1144 | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | 1415 | | | | 21 | 6.8 |
| 31 | | | 1140 | | | | 21.3 | 6.7 |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 21.2214 | 7.8143 |
| Daily Maximum: | | | | | | | 22.5 | 8.7 |
| Daily Minimum: | | | | | | | 20.7 | 6.7 |
| Monthly Avg % Removal (85%): | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252
 FACILITY NAME: Northeast WWTP
 OWNER NAME: City of Conover
 GRADE: WW-4
 eDMR PERIOD: 07-2013 (July 2013)
 COMPLIANCE: Compliant

PERMIT VERSION: 3.0
 CLASS: WW-3
 ORC: Michael Lee Fox
 ORC HAS CHANGED: No
 VERSION: 1.0
 CONTACT PHONE #: 8284652279

PERMIT STATUS: Active
 COUNTY: Catawba
 ORC CERT NUMBER: 10941
 STATUS: Processed
 SUBMISSION DATE: 08/23/2013

SAMPLING LOCATION: DOWNSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------|----------|
| | | | | | | | 3 X week | 3 X week |
| | | | | | | | Grab | Grab |
| | | | | | | | TEMP-C | DO |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | deg c | mg/l |
| 1 | | | 1121 | | | | 21.1 | 8.1 |
| 2 | | | 1055 | | | | 21.3 | 7.6 |
| 3 | | | 1515 | | | | 22.1 | 7.8 |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | 1055 | | | | 20.9 | 7.8 |
| 9 | | | | | | | | |
| 10 | | | 1116 | | | | 20.7 | 7.9 |
| 11 | | | 1017 | | | | 20.6 | 8.2 |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | 1033 | | | | 20.9 | 8 |
| 16 | | | 1102 | | | | 21.3 | 8.1 |
| 17 | | | 1423 | | | | 21.4 | 7.9 |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | 1130 | | | | 21.4 | 8.1 |
| 23 | | | 1110 | | | | 21.4 | 7.9 |
| 24 | | | 1131 | | | | 21.2 | 8 |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | 1402 | | | | 21.2 | 6.7 |
| 31 | | | 1125 | | | | 21 | 6.8 |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 21.1786 | 7.7786 |
| Daily Maximum: | | | | | | | 22.1 | 8.2 |
| Daily Minimum: | | | | | | | 20.6 | 6.7 |
| Monthly Avg % Removal (85%): | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 07-2013 (July 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 08/23/2013

SAMPLING LOCATION: EFFLUENT DISCHARGE NO.: 001 NO DISCHARGE*: NO (Continue)

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO600 | CO665 | THP3B | 01092 | 01042 | NC01 | TGP3B |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------------|----------------|--------------------|-----------|------------|--------------|-----------|
| | | | | | | | Monthly | Monthly | Once per discharge | 2 X month | 2 X month | Annually | Quarterly |
| | | | | | | | Composite | Composite | Composite | Composite | Composite | Grab | Composite |
| | | | | | | | TOTAL N - Conc | TOTAL P - Conc | CER7DCHV | ZINC | COPPER | ANN POL SCAN | CER17DPF |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | mg/l | mg/l | percent | mg/l | mg/l | yes=1 no=0 | pass/fail | |
| 1 | 0840 | 24 | 0704 | 8 | Y | | | | | | | | |
| 2 | 0840 | 24 | 0705 | 8 | Y | | | | | | | | |
| 3 | 0845 | 24 | 0730 | 8 | Y | | | | | | | | |
| 4 | | | 1000 | 8 | Y | | | | | | | | |
| 5 | | | 0715 | 8 | Y | | | | | | | | |
| 6 | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | |
| 8 | | | 0700 | 8 | Y | | | | | | | | |
| 9 | 0815 | 24 | 0700 | 8 | Y | | 4.66 | 0.99 | | | 0.009 | | |
| 10 | 0840 | 24 | 0700 | 8 | Y | | | | | | | | |
| 11 | 0830 | 24 | 0700 | 8 | Y | | | | | | | | |
| 12 | | | 0700 | 8 | Y | | | | | | | | |
| 13 | | | | | | | | | | | | | |
| 14 | | | | | | | | | | | | | |
| 15 | | | 0705 | 8 | Y | | | | | | | | |
| 16 | 0835 | 24 | 0704 | 8 | Y | | | | | | | | |
| 17 | 0840 | 24 | 0709 | 8 | Y | | | | | | | | |
| 18 | 0845 | 24 | 0700 | 8 | Y | | | | | | | | |
| 19 | | | 0724 | 8 | Y | | | | | | | | |
| 20 | | | | | | | | | | | | | |
| 21 | | | | | | | | | | | | | |
| 22 | | | 0700 | 8 | Y | | | | | | | | |
| 23 | 0840 | 24 | 0720 | 8 | Y | | | | | | | | |
| 24 | 0845 | 24 | 0706 | 8 | Y | | | | | | | | |
| 25 | 0850 | 24 | 0704 | 8 | Y | | | | 0.071 | < 0.005 | | | |
| 26 | | | 0705 | 8 | Y | | | | | | | | |
| 27 | | | | | | | | | | | | | |
| 28 | | | | | | | | | | | | | |
| 29 | | | 0600 | 8 | Y | | | | | | | | |
| 30 | 0845 | 24 | 0600 | 8 | Y | | | | | | | | |
| 31 | 0845 | 24 | 0600 | 8 | Y | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | | |
| Monthly Average: | | | | | | | 4.66 | 0.99 | | 0.059 | 0.0045 | | |
| Daily Maximum: | | | | | | | 4.66 | 0.99 | | 0.071 | 0.009 | | |
| Daily Minimum: | | | | | | | 4.66 | 0.99 | | 0.047 | 0 | | |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252
FACILITY NAME: Northeast WWTP
OWNER NAME: City of Conover
GRADE: WW-4
eDMR PERIOD: 07-2013 (July 2013)
COMPLIANCE: Compliant

PERMIT VERSION: 3.0
CLASS: WW-3
ORC: Michael Lee Fox
ORC HAS CHANGED: No
VERSION: 1.0
CONTACT PHONE #: 8284652279

PERMIT STATUS: Active
COUNTY: Catawba
ORC CERT NUMBER: 10941
STATUS: Processed
SUBMISSION DATE: 08/23/2013

08/23/2013

ORC/Certifier Signature: Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

By this signature, I certify that this report is accurate and complete to the best of my knowledge.

The permittee shall report to the Director or the appropriate Regional Office any noncompliance that potentially threatens public health or the environment. Any information shall be provided orally within 24 hours from the time the permittee became aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances.

If the facility is noncompliant, please attach a list of corrective actions being taken and a time-table for improvements to be made as required by part II.E.6 of the NPDES permit.

COMMENTS: BOD Monthly Avg % Removal 98%

TSS Monthly Avg % Removal 98%

NH3 Monthly Avg % Removal 94%

The weekly average for the 5th week for BOD was 10.675 mg/l

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 managed 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 fines and imprisonment for knowing violations.

08/23/2013

Permittee/Submitter Signature:*** Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

Permittee Address: 3680 Hillview Dr Conover NC 28611 Permit Expiration Date: 04/30/2015

CERTIFIED LABORATORIES

LAB NAME: Water Tech Lab, Research and Analytical

CERTIFIED LAB #: 50, 34

PERSON(s) COLLECTING SAMPLES: Evan Rubins, Michael Fox

PARAMETER CODES

Parameter Codes assistance may be obtained by calling the NPDES Unit (919) 807-6300 or by visiting the Surface Water Protection Section's web site at <http://portal.ncdenr.org/web/wq/swp> and linking to the unit's information pages.

FOOTNOTES

Use only units of measurement designated in the reporting facility's NPDES permit for reporting data.

* No Flow/Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data to be entered for all of the parameters on the DMR for entire monitoring period.

** ORC on Site?: ORC must visit facility and document visitation of facility as required per 15A NCAC 8G .0204.

NPDES PERMIT NO.: NC0024252

FACILITY NAME: Northeast WWTP

OWNER NAME: City of Conover

GRADE: WW-4.

eDMR PERIOD: 07-2013 (July 2013)

COMPLIANCE: Compliant

PERMIT VERSION: 3.0

CLASS: WW-3.

ORC: Michael Lee Fox

ORC HAS CHANGED: No

VERSION: 1.0

CONTACT PHONE #: 8284652279

PERMIT STATUS: Active

COUNTY: Catawba

ORC CERT NUMBER: 10941

STATUS: Processed

SUBMISSION DATE: 08/23/2013

*** Signature of Permittee: If signed by other than the permittee, then delegation of the signatory authority must be on file with the state per 15A NCAC 2B .0506(b)(2)(D).

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NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 08-2013 (August 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 09/26/2013

SAMPLING LOCATION: INFLUENT DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO310 | CO610 | CO530 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|------------|--------------|------------|
| | | | | | | | 3 X week | 3 X week | 3 X week |
| | | | | | | | Composite | Calculated | Composite |
| | | | | | | | BOD - Conc | NH3-N - Conc | TSS - Conc |
| | | | | | | | mg/l | mg/l | mg/l |
| 1 | 0845 | 24 | | | | | 101 | 17 | 86.7 |
| 2 | 0845 | 24 | | | | | 114 | 16.5 | 86.7 |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |
| 5 | | | | | | | | | |
| 6 | 0840 | 24 | | | | | 468 | 20.5 | 190 |
| 7 | 0845 | 24 | | | | | 202 | 18 | 167 |
| 8 | 0850 | 24 | | | | | 151 | 17.5 | 83.3 |
| 9 | | | | | | | | | |
| 10 | | | | | | | | | |
| 11 | | | | | | | | | |
| 12 | | | | | | | | | |
| 13 | 0835 | 24 | | | | | 237 | 23.5 | 193 |
| 14 | 0845 | 24 | | | | | 217 | 18.5 | 133 |
| 15 | 0845 | 24 | | | | | 135 | 28.75 | 130 |
| 16 | | | | | | | | | |
| 17 | | | | | | | | | |
| 18 | | | | | | | | | |
| 19 | | | | | | | | | |
| 20 | 0840 | 24 | | | | | 250 | 17.25 | 180 |
| 21 | 0845 | 24 | | | | | 216 | 18.25 | 127 |
| 22 | 0850 | 24 | | | | | 110 | 23.25 | 100 |
| 23 | | | | | | | | | |
| 24 | | | | | | | | | |
| 25 | | | | | | | | | |
| 26 | | | | | | | | | |
| 27 | 0840 | 24 | | | | | 235 | 20.5 | 290 |
| 28 | 0845 | 24 | | | | | 160 | 21.75 | 163 |
| 29 | 0850 | 24 | | | | | 264 | 19 | 96.7 |
| 30 | | | | | | | | | |
| 31 | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | 204.2857 | 19.9643 | 144.7429 |
| Daily Maximum: | | | | | | | 468 | 28.75 | 290 |
| Daily Minimum: | | | | | | | 101 | 16.5 | 83.3 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 08-2013 (August 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 09/26/2013

SAMPLING LOCATION: UPSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------|----------|
| | | | | | | | 3 X week | 3 X week |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | TEMP-C | DO |
| | | | | | | | deg c | mg/l |
| 1 | | | 1415 | | | | 21.2 | 7.6 |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | 1123 | | | | 20.5 | 7.7 |
| 6 | | | 1102 | | | | 20.4 | 8.0 |
| 7 | | | 1105 | | | | 21.5 | 8.1 |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | 1549 | | | | 23.5 | 7.5 |
| 13 | | | 1145 | | | | 21.7 | 7.6 |
| 14 | | | 1541 | | | | 21.8 | 8 |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | 1104 | | | | 22.7 | 8.2 |
| 20 | | | 1050 | | | | 20.2 | 8.1 |
| 21 | | | 1355 | | | | 21.4 | 8 |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | | | 1430 | | | | 19.9 | 8.5 |
| 27 | | | 1147 | | | | 19.9 | 8.6 |
| 28 | | | 1040 | | | | 20.4 | 8.2 |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 21.1615 | 8.0231 |
| Daily Maximum: | | | | | | | 23.5 | 8.6 |
| Daily Minimum: | | | | | | | 19.9 | 7.5 |
| Monthly Avg % Removal (85%): | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 08-2013 (August 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 09/26/2013

SAMPLING LOCATION: DOWNSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------|----------|
| | | | | | | | 3 X week | 3 X week |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | TEMP-C | DO |
| | | | | | | | deg c | mg/l |
| 1 | | | 1400 | | | | 21.4 | 7.4 |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | 1105 | | | | 20.7 | 7.7 |
| 6 | | | 1047 | | | | 20.5 | 8.0 |
| 7 | | | 1052 | | | | 21.2 | 8.2 |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | 1531 | | | | 23.6 | 7.8 |
| 13 | | | 1131 | | | | 21.6 | 7.6 |
| 14 | | | 1521 | | | | 21.7 | 8 |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | 1046 | | | | 22.7 | 8.1 |
| 20 | | | 1031 | | | | 20.6 | 8.2 |
| 21 | | | 1340 | | | | 21.3 | 8 |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | | | 1419 | | | | 19.6 | 8.5 |
| 27 | | | 1135 | | | | 19.4 | 8.5 |
| 28 | | | 1025 | | | | 20.3 | 8.3 |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 21.1231 | 8.0308 |
| Daily Maximum: | | | | | | | 23.6 | 8.5 |
| Daily Minimum: | | | | | | | 19.4 | 7.4 |
| Monthly Avg % Removal (85%): | | | | | | | | |

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NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 08-2013 (August 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 09/26/2013

SAMPLING LOCATION: EFFLUENT DISCHARGE NO.: 001 NO DISCHARGE*: NO (Continue)

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO600 | CO665 | THP3B | 01042 | NC01 | TGP3B | 01092 |
|------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------------|----------------|--------------------|------------|--------------|-----------|-----------|
| | | | | | | | Monthly | Monthly | Once per discharge | 2 X month | Annually | Quarterly | 2 X month |
| | | | | | | | Composite | Composite | Composite | Composite | Grab | Composite | Composite |
| | | | | | | | TOTAL N - Conc | TOTAL P - Conc | CER7DCHV | COPPER | ANN POL SCAN | CER17DPF | ZINC |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | mg/l | mg/l | percent | mg/l | yes=1 no=0 | pass/fail | mg/l | |
| 1 | 0845 | 24 | 0600 | 8 | Y | | | | | | | | |
| 2 | 0845 | 24 | 0600 | 8 | Y | | | | | | | | |
| 3 | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | |
| 5 | | | 0720 | 8 | Y | | | | | | | | |
| 6 | 0840 | 24 | 0708 | 8 | Y | | | | | | | | |
| 7 | 0845 | 24 | 0715 | 8 | Y | | | | | | | | |
| 8 | 0850 | 24 | 0706 | 8 | Y | | | | | | | | |
| 9 | | | 0720 | 8 | Y | | | | | | | | |
| 10 | | | | | | | | | | | | | |
| 11 | | | | | | | | | | | | | |
| 12 | | | 0714 | 8 | Y | | | | | | | | |
| 13 | 0835 | 24 | 0707 | 8 | Y | | | | | | | | |
| 14 | 0845 | 24 | 0711 | 8 | Y | | | | | | | | |
| 15 | 0845 | 24 | 1320 | 8 | Y | | 5.36 | 2.12 | | < 0.005 | | | 0.098 |
| 16 | | | 0700 | 8 | B | | | | | | | | |
| 17 | | | | | | | | | | | | | |
| 18 | | | | | | | | | | | | | |
| 19 | | | 0700 | 8 | Y | | | | | | | | |
| 20 | 0840 | 24 | 0725 | 8 | Y | | | | | | | | |
| 21 | 0845 | 24 | 0700 | 8 | Y | | | | | | | | |
| 22 | 0850 | 24 | 0700 | 8 | Y | | | | | | | | |
| 23 | | | 0700 | 8 | Y | | | | | | | | |
| 24 | | | | | | | | | | | | | |
| 25 | | | | | | | | | | | | | |
| 26 | | | 0700 | 8 | Y | | | | | | | | |
| 27 | 0840 | 24 | 0600 | 8 | Y | | | | | | | | |
| 28 | 0845 | 24 | 0700 | 8 | Y | | | | | 0.007 | | | 0.08 |
| 29 | 0850 | 24 | 0710 | 8 | Y | | | | | | | | |
| 30 | | | 0718 | 8 | Y | | | | | | | | |
| 31 | | | | | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | | |
| Monthly Average: | | | | | | | 5.36 | 2.12 | | 0.0035 | | | 0.089 |
| Daily Maximum: | | | | | | | 5.36 | 2.12 | | 0.007 | | | 0.098 |
| Daily Minimum: | | | | | | | 5.36 | 2.12 | | 0 | | | 0.08 |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 08-2013 (August 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 09/26/2013

09/26/2013

ORC/Certifier Signature: Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

By this signature, I certify that this report is accurate and complete to the best of my knowledge.

The permittee shall report to the Director or the appropriate Regional Office any noncompliance that potentially threatens public health or the environment. Any information shall be provided orally within 24 hours from the time the permittee became aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances.

If the facility is noncompliant, please attach a list of corrective actions being taken and a time-table for improvements to be made as required by part II.E.6 of the NPDES permit.

COMMENTS: BOD Monthly Avg % Removal 99%

TSS Monthly Avg % Removal 96%

NH3 Monthly Avg % Removal 98%

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 managed 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 fines and imprisonment for knowing violations.

09/26/2013

Permittee/Submitter Signature:*** Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

Permittee Address: 3680 Hillview Dr Conover NC 28613 Permit Expiration Date: 04/30/2015

CERTIFIED LABORATORIES

LAB NAME: Water Tech Lab, Research and Analytical

CERTIFIED LAB #: 50, 34

PERSON(S) COLLECTING SAMPLES: Evan Rubins, Michael Fox

PARAMETER CODES

Parameter Codes assistance may be obtained by calling the NPDES Unit (919) 807-6300 or by visiting the Surface Water Protection Section's web site at <http://portal.ncdenr.org/web/wq/swp> and linking to the unit's information pages.

FOOTNOTES

Use only units of measurement designated in the reporting facility's NPDES permit for reporting data.

* No Flow/Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data to be entered for all of the parameters on the DMR for entire monitoring period.

** ORC on Site?: ORC must visit facility and document visitation of facility as required per 15A NCAC 8G .0204.

*** Signature of Permittee: If signed by other than the permittee, then delegation of the signatory authority must be on file with the state per 15A NCAC 2B .0506(b)(2)(D).

NPDES PERMIT NO.: NC0024252

FACILITY NAME: Northeast WWTP

OWNER NAME: City of Conover

GRADE: WW-4.

eDMR PERIOD: 08-2013 (August 2013)

COMPLIANCE: Compliant

PERMIT VERSION: 3.0

CLASS: WW-3.

ORC: Michael Lee Fox

ORC HAS CHANGED: No

VERSION: 1.0

CONTACT PHONE #: 8284652279

PERMIT STATUS: Active

COUNTY: Catawba

ORC CERT NUMBER: 10941

STATUS: Processed

SUBMISSION DATE: 09/26/2013

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NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

STATUS: Processed

eDMR PERIOD: 10-2013 (October 2013)

VERSION: 1.0

SUBMISSION DATE: 10/24/2013

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SAMPLING LOCATION: DOWNSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------|----------|
| | | | | | | | 3 X week | 3 X week |
| | | | | | | | Grab | Grab |
| | | | | | | | TEMP-C | DO |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | deg c | mg/l |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | 1029 | | | | 21.8 | 7.6 |
| 4 | | | 1050 | | | | 20.5 | 7.8 |
| 5 | | | 1047 | | | | 20.9 | 8 |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | 1131 | | | | 20.6 | 7.6 |
| 10 | | | 1038 | | | | 20.7 | 7.8 |
| 11 | | | 1102 | | | | 20.8 | 7.8 |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | 1047 | | | | 18.1 | 8.6 |
| 17 | | | 1127 | | | | 17.7 | 8.6 |
| 18 | | | 1530 | | | | 17.6 | 8.7 |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | 1101 | | | | 17.4 | 8.2 |
| 24 | | | 1455 | | | | 18.3 | 8.6 |
| 25 | | | 1038 | | | | 18 | 8.7 |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | 1036 | | | | 16.2 | 8.6 |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 19.1231 | 8.2 |
| Daily Maximum: | | | | | | | 21.8 | 8.7 |
| Daily Minimum: | | | | | | | 16.2 | 7.6 |
| Monthly Avg % Removal (85%): | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 10-2013 (October 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 10/24/2013

SAMPLING LOCATION: EFFLUENT DISCHARGE NO.: 001 NO DISCHARGE*: NO

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 50050 | 00010 | 00400 | 50060 | CO310 | CO610 | CO530 | 31616 | 00300 | |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|------------|----------|----------|----------|------------|--------------|------------|------------|----------|----------|
| | | | | | | | Continuous | 5 X week | 3 X week | 3 X week | 3 X week | 3 X week | 3 X week | 3 X week | 3 X week | 3 X week |
| | | | | | | | Recorder | Grab | Grab | Grab | Composite | Composite | Composite | Grab | Grab | |
| | | | | | | | FLOW | TEMP-C | PH | CHLORINE | BOD - Conc | NH3-N - Conc | TSS - Conc | FEC COLI | DO | |
| | | | | | | | mgd | deg c | su | ug/l | mg/l | mg/l | mg/l | #/100ml | mg/l | |
| 1 | | 2400 | Hrs | 2400 | Hrs | Y/B/N | 0.691 | | | | | | | | | |
| 2 | Holiday | | | | | | | | | | | | | | | |
| 3 | 0840 | 24 | 0730 | 8 | Y | | 0.739 | 24.1 | 7.2 | <20 | <2 | <0.2 | 3.7 | 2 | 6.7 | |
| 4 | 0845 | 24 | 0715 | 8 | Y | | 0.738 | 23.9 | 7.1 | <20 | <2 | <0.2 | <2.5 | <1 | 6.6 | |
| 5 | 0845 | 24 | 0708 | 8 | Y | | 0.716 | 23.8 | 7.2 | 27 | <2 | <0.2 | 4 | <1 | 7.1 | |
| 6 | | | 0605 | 8 | Y | | 0.717 | 23.6 | | | | | | | | |
| 7 | | | | | | | 0.74 | | | | | | | | | |
| 8 | | | | | | | 0.72 | | | | | | | | | |
| 9 | | | 0700 | 8 | B | | 0.729 | 23.9 | 7.1 | <20 | | | | | 6.3 | |
| 10 | 0845 | 224 | 0700 | 8 | B | | 0.734 | 24.3 | 7.3 | <20 | <2 | <0.2 | <2.5 | <1 | 7 | |
| 11 | 0815 | 24 | 0700 | 8 | B | | 0.728 | 24 | 7.2 | <20 | 2 | <0.2 | <2.5 | <1 | 6.5 | |
| 12 | 0840 | 24 | 0700 | 8 | B | | 0.718 | 23.5 | | | <2 | 0.21 | <2.5 | <1 | | |
| 13 | | | 0700 | 8 | B | | 0.727 | 23.4 | | | | | | | | |
| 14 | | | | | | | 0.712 | | | | | | | | | |
| 15 | | | | | | | 0.693 | | | | | | | | | |
| 16 | | | 0708 | 8 | Y | | 0.697 | 22.6 | 7.3 | <20 | | | | | 7.3 | |
| 17 | 0845 | 24 | 0710 | 8 | Y | | 0.74 | 22.7 | 7.1 | <20 | 2.6 | <0.2 | 4.1 | <1 | 7 | |
| 18 | 0840 | 24 | 0708 | 8 | Y | | 0.714 | 22.7 | 7.1 | <20 | <2 | 0.24 | 5.6 | <1 | 7.1 | |
| 19 | 0845 | 24 | 0730 | 8 | Y | | 0.714 | 22.3 | | | <2 | <0.2 | 4.3 | <1 | | |
| 20 | | | 0708 | 8 | Y | | 0.717 | 22.4 | | | | | | | | |
| 21 | | | | | | | 0.718 | | | | | | | | | |
| 22 | | | | | | | 0.944 | | | | | | | | | |
| 23 | | | 0708 | 8 | Y | | 0.74 | 22.5 | 7.1 | <20 | | | | | 6.8 | |
| 24 | 0840 | 24 | 0700 | 8 | B | | 0.766 | 22.4 | 7.2 | <20 | <2 | 0.22 | 4.8 | <1 | 7.3 | |
| 25 | 0945 | 24 | 0700 | 8 | B | | 0.747 | 22.1 | | | <2 | 0.23 | <2.5 | 2 | | |
| 26 | 0845 | 24 | 0700 | 8 | Y | | 0.739 | 22 | 7.3 | <20 | <2 | 0.28 | 4.3 | <1 | 7.4 | |
| 27 | | | 0700 | 8 | Y | | 0.727 | 22.3 | | | | | | | | |
| 28 | | | | | | | 0.708 | | | | | | | | | |
| 29 | | | | | | | 0.698 | | | | | | | | | |
| 30 | | | 0712 | 8 | Y | | 0.708 | 21.3 | 7.3 | <20 | | | | | 7.4 | |
| Monthly Average Limit: | | | | | | | 1.5 | | | | 8 | 2 | 30 | 200 | | |
| Monthly Average: | | | | | | | 0.73 | 22.99 | 7.1923 | 2.0769 | 0.38 | 0.1 | 2.57 | 1.12 | 6.9615 | |
| Daily Maximum: | | | | | | | 0.944 | 24.3 | 7.3 | 27 | 2.6 | 0.28 | 5.6 | 2 | 7.4 | |
| Daily Minimum: | | | | | | | 0.691 | 21.3 | 7.1 | 0 | 0 | 0 | 0 | 0 | 6.3 | |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 10-2013 (October 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 10/24/2013

SAMPLING LOCATION: EFFLUENT DISCHARGE NO.: 001 NO DISCHARGE*: NO (Continue)

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO600 | CO665 | TGP3B | NC01 | THP3B | 01042 | 01092 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------------|----------------|-----------|--------------|--------------------|-----------|-----------|
| | | | | | | | Monthly | Monthly | Quarterly | Annually | Once per discharge | 2 X month | 2 X month |
| | | | | | | | Composite | Composite | Composite | Grab | Composite | Composite | Composite |
| | | | | | | | TOTAL N - Conc | TOTAL P - Conc | CER17DPF | ANN POL SCAN | CER7DCHV | COPPER | ZINC |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | mg/l | mg/l | pass/fail | yes=1 no=0 | percent | mg/l | mg/l |
| 1 | | | | | | | | | | | | | |
| 2 | Holiday | | | | | | | | | | | | |
| 3 | 0840 | 24 | 0730 | 8 | Y | | | | | | | | |
| 4 | 0845 | 24 | 0715 | 8 | Y | | | | | | | | |
| 5 | 0845 | 24 | 0708 | 8 | Y | | | | | | | | |
| 6 | | | 0605 | 8 | Y | | | | | | | | |
| 7 | | | | | | | | | | | | | |
| 8 | | | | | | | | | | | | | |
| 9 | | | 0700 | 8 | B | | | | | | | | |
| 10 | 0845 | 224 | 0700 | 8 | B | | 5.48 | 3.85 | | | | 0.005 | 0.118 |
| 11 | 0815 | 24 | 0700 | 8 | B | | | | 1 | | | | |
| 12 | 0840 | 24 | 0700 | 8 | B | | | | | | | | |
| 13 | | | 0700 | 8 | B | | | | | | | | |
| 14 | | | | | | | | | | | | | |
| 15 | | | | | | | | | | | | | |
| 16 | | | 0708 | 8 | Y | | | | | | | | |
| 17 | 0845 | 24 | 0710 | 8 | Y | | | | | | | | |
| 18 | 0840 | 24 | 0708 | 8 | Y | | | | | | | | |
| 19 | 0845 | 24 | 0730 | 8 | Y | | | | | | | | |
| 20 | | | 0708 | 8 | Y | | | | | | | | |
| 21 | | | | | | | | | | | | | |
| 22 | | | | | | | | | | | | | |
| 23 | | | 0708 | 8 | Y | | | | | | | | |
| 24 | 0840 | 24 | 0700 | 8 | B | | | | | | | | |
| 25 | 0945 | 24 | 0700 | 8 | B | | | | | | | < 0.005 | 0.103 |
| 26 | 0845 | 24 | 0700 | 8 | Y | | | | | | | | |
| 27 | | | 0700 | 8 | Y | | | | | | | | |
| 28 | | | | | | | | | | | | | |
| 29 | | | | | | | | | | | | | |
| 30 | | | 0712 | 8 | Y | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | | |
| Monthly Average: | | | | | | | 5.48 | 3.85 | 1 | | | 0.0025 | 0.1105 |
| Daily Maximum: | | | | | | | 5.48 | 3.85 | 1 | | | 0.005 | 0.118 |
| Daily Minimum: | | | | | | | 5.48 | 3.85 | 1 | | | 0 | 0.103 |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 10-2013 (October 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 10/24/2013

SAMPLING LOCATION: INFLUENT DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO310 | 00610 | CO530 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|------------|------------|------------|
| | | | | | | | 3 X week | 3 X week | 3 X week |
| | | | | | | | Composite | Calculated | Composite |
| | | | | | | | BOD - Conc | NH3-N | TSS - Conc |
| | | | | | | | mg/l | mg/l | mg/l |
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| 3 | 0840 | 24 | | | | | 472 | 24 | 173 |
| 4 | 0845 | 24 | | | | | 212 | 22.25 | 167 |
| 5 | 0845 | 24 | | | | | 201 | 24.75 | 127 |
| 6 | | | | | | | | | |
| 7 | | | | | | | | | |
| 8 | | | | | | | | | |
| 9 | | | | | | | | | |
| 10 | 0845 | 24 | | | | | 306 | 17.5 | 200 |
| 11 | 0815 | 24 | | | | | 89.5 | 25.75 | 110 |
| 12 | 0840 | 24 | | | | | 237 | 19.25 | 157 |
| 13 | | | | | | | | | |
| 14 | | | | | | | | | |
| 15 | | | | | | | | | |
| 16 | | | | | | | | | |
| 17 | 0845 | 24 | | | | | 344 | 26.75 | 247 |
| 18 | 0840 | 24 | | | | | 189 | 27.25 | 193 |
| 19 | 0845 | 24 | | | | | 172 | 28.5 | 123 |
| 20 | | | | | | | | | |
| 21 | | | | | | | | | |
| 22 | | | | | | | | | |
| 23 | | | | | | | | | |
| 24 | 0840 | 24 | | | | | 212 | 30 | 183 |
| 25 | 0945 | 24 | | | | | 162 | 29.5 | 200 |
| 26 | 0845 | 24 | | | | | 223 | 34.25 | 193 |
| 27 | | | | | | | | | |
| 28 | | | | | | | | | |
| 29 | | | | | | | | | |
| 30 | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | 234.9583 | 25.8125 | 172.75 |
| Daily Maximum: | | | | | | | 472 | 34.25 | 247 |
| Daily Minimum: | | | | | | | 89.5 | 17.5 | 110 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 10-2013 (October 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 10/24/2013

SAMPLING LOCATION: UPSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------|----------|
| | | | | | | | 3 X week | 3 X week |
| | | | | | | | Grab | Grab |
| | | | | | | | TEMP-C | DO |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | deg c | mg/l |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | 1051 | | | | 21.7 | 7.7 |
| 4 | | | 1110 | | | | 20.2 | 7.7 |
| 5 | | | 1114 | | | | 20.7 | 8.1 |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | 1140 | | | | 20.8 | 7.7 |
| 10 | | | 1055 | | | | 20.6 | 7.8 |
| 11 | | | 1123 | | | | 21.1 | 7.9 |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | 1107 | | | | 18.4 | 8.6 |
| 17 | | | 1136 | | | | 17.9 | 8.7 |
| 18 | | | 1543 | | | | 17.7 | 8.5 |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | 1117 | | | | 17.1 | 8.2 |
| 24 | | | 1512 | | | | 18 | 8.7 |
| 25 | | | 1050 | | | | 18.1 | 8.6 |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | 1051 | | | | 16.3 | 8.4 |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 19.1231 | 8.2 |
| Daily Maximum: | | | | | | | 21.7 | 8.7 |
| Daily Minimum: | | | | | | | 16.3 | 7.7 |
| Monthly Avg % Removal (85%): | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 10-2013 (October 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 10/24/2013

10/24/2013

ORC/Certifier Signature: Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

By this signature, I certify that this report is accurate and complete to the best of my knowledge.

The permittee shall report to the Director or the appropriate Regional Office any noncompliance that potentially threatens public health or the environment. Any information shall be provided orally within 24 hours from the time the permittee became aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances.

If the facility is noncompliant, please attach a list of corrective actions being taken and a time-table for improvements to be made as required by part II.E.6 of the NPDES permit.

COMMENTS: BOD Monthly Avg % Removal 100%

TSS Monthly Avg % Removal 99%

NH3 Monthly Avg % Removal 100%

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 managed 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 fines and imprisonment for knowing violations.

10/24/2013

Permittee/Submitter Signature:*** Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

Permittee Address: 3680 Hillview Dr Conover NC 28613 Permit Expiration Date: 04/30/2015

CERTIFIED LABORATORIES

LAB NAME: Water Tech Lab, Research and Analytical

CERTIFIED LAB #: 50, 34

PERSON(S) COLLECTING SAMPLES: Evan Rubin, Michael Fox

PARAMETER CODES

Parameter Codes assistance may be obtained by calling the NPDES Unit (919) 807-6300 or by visiting the Surface Water Protection Section's web site at <http://portal.ncdenr.org/web/wq/swp> and linking to the unit's information pages.

FOOTNOTES

Use only units of measurement designated in the reporting facility's NPDES permit for reporting data.

* No Flow/Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data to be entered for all of the parameters on the DMR for entire monitoring period.

** ORC on Site?: ORC must visit facility and document visitation of facility as required per 15A NCAC 8G .0204.

*** Signature of Permittee: If signed by other than the permittee, then delegation of the signatory authority must be on file with the state per 15A NCAC 2B .0506(b)(2)(D).

NPDES PERMIT NO.: NC0024252

FACILITY NAME: Northeast WWTP

OWNER NAME: City of Conover

GRADE: WW-4.

eDMR PERIOD: 10-2013 (October 2013)

COMPLIANCE: Compliant

PERMIT VERSION: 3.0

CLASS: WW-3.

ORC: Michael Lee Fox

ORC HAS CHANGED: No

VERSION: 1.0

CONTACT PHONE #: 8284652279

PERMIT STATUS: Active

COUNTY: Catawba

ORC CERT NUMBER: 10941

STATUS: Processed

SUBMISSION DATE: 10/24/2013

PDFill PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 10-2013 (October 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 828-465-22

SUBMISSION DATE: 11/14/2013

SAMPLING LOCATION: INFLUENT DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO310 | 00610 | CO530 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|------------|------------|------------|
| | | | | | | | 3 X week | | 3 X week |
| | | | | | | | Composite | Calculated | Composite |
| | | | | | | | BOD - Conc | NH3-N | TSS - Conc |
| | | | | | | | mg/l | mg/l | mg/l |
| 1 | 0845 | 24 | | | | | 270 | 27.75 | 207 |
| 2 | 0845 | 24 | | | | | 269 | 31.25 | 200 |
| 3 | 0850 | 24 | | | | | 172 | 26.75 | 127 |
| 4 | | | | | | | | | |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | |
| 7 | | | | | | | | | |
| 8 | 0840 | 24 | | | | | 222 | 17.75 | 170 |
| 9 | 0845 | 24 | | | | | 168 | 26 | 170 |
| 10 | 0850 | 24 | | | | | 115 | 24.75 | 117 |
| 11 | | | | | | | | | |
| 12 | | | | | | | | | |
| 13 | | | | | | | | | |
| 14 | | | | | | | | | |
| 15 | 0840 | 24 | | | | | 177 | 19.25 | 96.7 |
| 16 | 0845 | 24 | | | | | 223 | 32 | 330 |
| 17 | 0850 | 24 | | | | | 242 | 29.25 | 64 |
| 18 | | | | | | | | | |
| 19 | | | | | | | | | |
| 20 | | | | | | | | | |
| 21 | | | | | | | | | |
| 22 | 0845 | 24 | | | | | 253 | 24 | 203 |
| 23 | 0845 | 24 | | | | | 370 | 26.75 | 223 |
| 24 | 0850 | 24 | | | | | 234 | 29 | 123 |
| 25 | | | | | | | | | |
| 26 | | | | | | | | | |
| 27 | | | | | | | | | |
| 28 | | | | | | | | | |
| 29 | 0840 | 24 | | | | | 215 | 18.25 | 230 |
| 30 | 0845 | 24 | | | | | 149 | 29.75 | 133 |
| 31 | 0850 | 24 | | | | | 242 | 33.75 | 150 |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | 221.4 | 26.4167 | 169.58 |
| Daily Maximum: | | | | | | | 370 | 33.75 | 330 |
| Daily Minimum: | | | | | | | 115 | 17.75 | 64 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 10-2013 (October 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 828-465-22

SUBMISSION DATE: 11/14/2013

SAMPLING LOCATION: UPSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | | Total Composite Time | | Operator Arrival Time | | Operator Time On Site | | ORC On Site?* | No Flow Reason | 00010 | 00300 |
|------------------------------|------------------|-----|----------------------|-----|-----------------------|--|-----------------------|--------|---------------|----------------|---------|-------|
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | | Weekly | | | Weekly | |
| | | | | | | | | | | | TEMP-C | DO |
| | | | | | | | | | | | deg c | mg/l |
| 1 | | | 1101 | | | | | | | | 17.4 | 8.2 |
| 2 | | | 1120 | | | | | | | | 17.6 | 8.3 |
| 3 | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | |
| 8 | | | | | | | | | | | | |
| 9 | | | 1122 | | | | | | | | 15.1 | 8.6 |
| 10 | | | | | | | | | | | | |
| 11 | | | | | | | | | | | | |
| 12 | | | | | | | | | | | | |
| 13 | | | | | | | | | | | | |
| 14 | | | | | | | | | | | | |
| 15 | | | 1435 | | | | | | | | 15.3 | 8.6 |
| 16 | | | | | | | | | | | | |
| 17 | | | | | | | | | | | | |
| 18 | | | | | | | | | | | | |
| 19 | | | | | | | | | | | | |
| 20 | | | | | | | | | | | | |
| 21 | | | 1111 | | | | | | | | 12.3 | 7.7 |
| 22 | | | | | | | | | | | | |
| 23 | | | | | | | | | | | | |
| 24 | | | | | | | | | | | | |
| 25 | | | | | | | | | | | | |
| 26 | | | | | | | | | | | | |
| 27 | | | | | | | | | | | | |
| 28 | | | 1105 | | | | | | | | 11.8 | 7.8 |
| 29 | | | | | | | | | | | | |
| 30 | | | | | | | | | | | | |
| 31 | | | | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | |
| Monthly Average: | | | | | | | | | | | 14.9167 | 8.2 |
| Daily Maximum: | | | | | | | | | | | 17.6 | 8.6 |
| Daily Minimum: | | | | | | | | | | | 11.8 | 7.7 |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 10-2013 (October 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 828-465-22

SUBMISSION DATE: 11/14/2013

SAMPLING LOCATION: DOWNSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | 00010 | 00300 |
|------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|---------|--------|
| | | | | | | | Weekly | Weekly |
| | | | | | | | Grab | Grab |
| | | | | | | | TEMP-C | DO |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | deg c | mg/l |
| 1 | | | 1046 | | | | 17.6 | 8.1 |
| 2 | | | 1102 | | | | 17.8 | 8.3 |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | 1105 | | | | 14.9 | 8.5 |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | 1415 | | | | 15.5 | 8.7 |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | 1056 | | | | 11.8 | 7.9 |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | | | | | | |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | 1047 | | | | 11.9 | 7.9 |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 14.9167 | 8.2333 |
| Daily Maximum: | | | | | | | 17.8 | 8.7 |
| Daily Minimum: | | | | | | | 11.8 | 7.9 |
| Monthly Avg % Removal (85%): | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 10-2013 (October 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 828-465-22

SUBMISSION DATE: 11/14/2013

SAMPLING LOCATION: EFFLUENT DISCHARGE NO.: 001 NO DISCHARGE*: NO (Continue)

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO600 | CO665 | THP3B | 01042 | 01092 | NC01 | TGP3B | |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------------|----------------|--------------------|-----------|------------|--------------|-----------|--|
| | | | | | | | Monthly | Monthly | Once per discharge | 2 X month | 2 X month | Annually | Quarterly | |
| | | | | | | | Composite | Composite | Composite | Composite | Composite | Grab | Composite | |
| | | | | | | | TOTAL N - Conc | TOTAL P - Conc | CER7DCHV | COPPER | ZINC | ANN POL SCAN | CER17DPF | |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | mg/l | mg/l | percent | mg/l | mg/l | yes=1 no=0 | pass/fail | | |
| 1 | 0845 | 24 | 0710 | 8 | Y | | | | | | | | | |
| 2 | 0845 | 24 | 0730 | 8 | Y | | | | | | | | | |
| 3 | 0850 | 24 | 0708 | 8 | Y | | | | | | | | | |
| 4 | | | 0830 | 8 | Y | | | | | | | | | |
| 5 | | | 1115 | 2 | B | | | | | | | | | |
| 6 | | | 1345 | 1.5 | B | | | | | | | | | |
| 7 | | | 0708 | 8 | Y | | | | | | | | | |
| 8 | 0840 | 24 | 0735 | 8 | Y | | | | | | | | | |
| 9 | 0845 | 24 | 0700 | 8 | B | | 4 | 3.1 | | 0.005 | 0.115 | | | |
| 10 | 0850 | 24 | 0700 | 8 | B | | | | | | | | | |
| 11 | | | 0700 | 8 | B | | | | | | | | | |
| 12 | | | 1230 | 8 | B | | | | | | | | | |
| 13 | | | 1245 | 8 | B | | | | | | | | | |
| 14 | | | 0718 | 8 | Y | | | | | | | | | |
| 15 | 0840 | 24 | 0705 | 8 | Y | | | | | | | | | |
| 16 | 0845 | 24 | 0700 | 8 | Y | | | | | | | | | |
| 17 | 0850 | 24 | 1300 | 8 | Y | | | | | | | | | |
| 18 | | | 0705 | 8 | Y | | | | | | | | | |
| 19 | | | | | | | | | | | | | | |
| 20 | | | | | | | | | | | | | | |
| 21 | 0845 | 24 | 0704 | 8 | Y | | | | | | | | | |
| 22 | 0850 | 24 | 0722 | 8 | Y | | | | | | | | | |
| 23 | 0850 | 24 | 0705 | 8 | Y | | | | 0.007 | 0.121 | | | | |
| 24 | | | 0708 | 8 | Y | | | | | | | | | |
| 25 | | | 0730 | 8 | Y | | | | | | | | | |
| 26 | | | 1914 | 1 | Y | | | | | | | | | |
| 27 | | | 1832 | 1 | Y | | | | | | | | | |
| 28 | 0845 | 24 | 0722 | 8 | Y | | | | | | | | | |
| 29 | 0845 | 24 | 0712 | 8 | Y | | | | | | | | | |
| 30 | 0850 | 24 | 0815 | 8 | Y | | | | | | | | | |
| 31 | | | 0706 | 8 | Y | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | | | |
| Monthly Average: | | | | | | | 4 | 3.1 | | 0.0035 | 0.118 | | | |
| Daily Maximum: | | | | | | | 4 | 3.1 | | 0.007 | 0.121 | | | |
| Daily Minimum: | | | | | | | 4 | 3.1 | | 0 | 0.115 | | | |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 10-2013 (October 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 828-465-22

SUBMISSION DATE: 11/14/2013

11/14/2013

ORC/Certifier Signature: Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

By this signature, I certify that this report is accurate and complete to the best of my knowledge.

The permittee shall report to the Director or the appropriate Regional Office any noncompliance that potentially threatens public health or the environment. Any information shall be provided orally within 24 hours from the time the permittee became aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances.

If the facility is noncompliant, please attach a list of corrective actions being taken and a time-table for improvements to be made as required by part II.E.6 of the NPDES permit.

COMMENTS: BOD Monthly Avg % Removal 100%

TSS Monthly Avg % Removal 99%

NH3 Monthly Avg % Removal 100%

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 managed 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 fines and imprisonment for knowing violations.

11/14/2013

Permittee/Submitter Signature:*** Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

Permittee Address: 3680 Hillview Dr Conover NC 28613 Permit Expiration Date: 04/30/2015

CERTIFIED LABORATORIES

LAB NAME: Water Tech Lab, Research and Analytical

CERTIFIED LAB #: 50, 34

PERSON(S) COLLECTING SAMPLES: Evan Rubins, Michael Fox

PARAMETER CODES

Parameter Codes assistance may be obtained by calling the NPDES Unit (919) 807-6300 or by visiting the Surface Water Protection Section's web site at <http://portal.ncdenr.org/web/wq/swp> and linking to the unit's information pages.

FOOTNOTES

Use only units of measurement designated in the reporting facility's NPDES permit for reporting data.

* No Flow/Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data to be entered for all of the parameters on the DMR for entire monitoring period.

** ORC on Site?: ORC must visit facility and document visitation of facility as required per 15A NCAC 8G .0204.

*** Signature of Permittee: If signed by other than the permittee, then delegation of the signatory authority must be on file with the state per 15A NCAC 2B .0506(b)(2)(D).

NPDES PERMIT NO.: NC0024252

FACILITY NAME: Northeast WWTP

OWNER NAME: City of Conover

GRADE: WW-4.

eDMR PERIOD: 10-2013 (October 2013)

COMPLIANCE: Compliant

PERMIT VERSION: 3.0

CLASS: WW-3.

ORC: Michael Lee Fox

ORC HAS CHANGED: No

VERSION: 1.0

CONTACT PHONE #: 828-465-22

PERMIT STATUS: Active

COUNTY: Catawba

ORC CERT NUMBER: 10941

STATUS: Processed

SUBMISSION DATE: 11/14/2013

PDFill PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 12-2013 (December 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 12/16/2013

SAMPLING LOCATION: INFLUENT DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO310 | 00610 | CO530 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|------------|------------|------------|
| | | | | | | | 3 X week | 3 X week | 3 X week |
| | | | | | | | Composite | Calculated | Composite |
| | | | | | | | BOD - Conc | NH3-N | TSS - Conc |
| | | | | | | | mg/l | mg/l | mg/l |
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |
| 5 | 0840 | 24 | | | | | 292 | 21.5 | 227 |
| 6 | 0845 | 24 | | | | | 211 | 28.5 | 227 |
| 7 | 0845 | 24 | | | | | 202 | 29.75 | 223 |
| 8 | | | | | | | | | |
| 9 | | | | | | | | | |
| 10 | | | | | | | | | |
| 11 | | | | | | | | | |
| 12 | 0845 | 24 | | | | | 454 | 28.25 | 140 |
| 13 | 0845 | 24 | | | | | 203 | | 157 |
| 14 | 0850 | 24 | | | | | 207 | 28 | 147 |
| 15 | | | | | | | | | |
| 16 | | | | | | | | | |
| 17 | | | | | | | | | |
| 18 | | | | | | | | | |
| 19 | 0845 | 24 | | | | | 219 | 25.5 | 167 |
| 20 | 0850 | 24 | | | | | 267 | 26 | 197 |
| 21 | 0850 | 24 | | | | | 177 | 27.5 | 147 |
| 22 | | | | | | | | | |
| 23 | | | | | | | | | |
| 24 | | | | | | | | | |
| 25 | | | | | | | 338 | 30 | 313 |
| 26 | 0845 | 24 | | | | | 247 | 23.75 | 257 |
| 27 | 0835 | 24 | | | | | 254 | 8.25 | 177 |
| 28 | 0838 | 24 | | | | | | | |
| 29 | | | | | | | | | |
| 30 | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | 255.9167 | 25.0833 | 198.25 |
| Daily Maximum: | | | | | | | 454 | 30 | 313 |
| Daily Minimum: | | | | | | | 177 | 8.25 | 140 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 12-2013 (December 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 12/16/2013

SAMPLING LOCATION: UPSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | | Operator Arrival Time | | Operator Time On Site | | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|-----|-----------------------|------|-----------------------|--------|----------------|--------|-------|
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | Weekly | | Weekly | |
| | | | | | | | TEMP-C | DO | |
| | | | | | | | deg c | mg/l | |
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | |
| 7 | | | | 1513 | | | 14.2 | 7.1 | |
| 8 | | | | | | | | | |
| 9 | | | | | | | | | |
| 10 | | | | | | | | | |
| 11 | | | | | | | | | |
| 12 | | | | 1145 | | | 9.7 | 7.9 | |
| 13 | | | | | | | | | |
| 14 | | | | | | | | | |
| 15 | | | | | | | | | |
| 16 | | | | | | | | | |
| 17 | | | | | | | | | |
| 18 | | | | | | | | | |
| 19 | | | | 1142 | | | 10.1 | 7.5 | |
| 20 | | | | | | | | | |
| 21 | | | | | | | | | |
| 22 | | | | | | | | | |
| 23 | | | | | | | | | |
| 24 | | | | | | | | | |
| 25 | | | | 1128 | | | 4.9 | 9.1 | |
| 26 | | | | | | | | | |
| 27 | | | | | | | | | |
| 28 | | | | | | | | | |
| 29 | | | | | | | | | |
| 30 | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | | 9.725 | 7.9 |
| Daily Maximum: | | | | | | | | 14.2 | 9.1 |
| Daily Minimum: | | | | | | | | 4.9 | 7.1 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 12-2013 (December 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 12/16/2013

SAMPLING LOCATION: DOWNSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | | Operator Arrival Time | | Operator Time On Site | | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|-----|-----------------------|-----|-----------------------|--------|----------------|--------|-------|
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | Weekly | | Weekly | |
| | | | | | | | | Grab | Grab |
| | | | | | | | | TEMP-C | DO |
| | | | | | | | | deg c | mg/l |
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | |
| 7 | | | 1458 | | | | 14.2 | 7.1 | |
| 8 | | | | | | | | | |
| 9 | | | | | | | | | |
| 10 | | | | | | | | | |
| 11 | | | | | | | | | |
| 12 | | | 1130 | | | | 9.3 | 8.22 | |
| 13 | | | | | | | | | |
| 14 | | | | | | | | | |
| 15 | | | | | | | | | |
| 16 | | | | | | | | | |
| 17 | | | | | | | | | |
| 18 | | | | | | | | | |
| 19 | | | 1126 | | | | 9.7 | 6.7 | |
| 20 | | | | | | | | | |
| 21 | | | | | | | | | |
| 22 | | | | | | | | | |
| 23 | | | | | | | | | |
| 24 | | | | | | | | | |
| 25 | | | 1115 | | | | 5.3 | 8.8 | |
| 26 | | | | | | | | | |
| 27 | | | | | | | | | |
| 28 | | | | | | | | | |
| 29 | | | | | | | | | |
| 30 | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | | 9.625 | 7.705 |
| Daily Maximum: | | | | | | | | 14.2 | 8.8 |
| Daily Minimum: | | | | | | | | 5.3 | 6.7 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 12-2013 (December 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 12/16/2013

SAMPLING LOCATION: EFFLUENT DISCHARGE NO.: 001 NO DISCHARGE*: NO (Continue)

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO600 | CO665 | TGP3B | 01042 | 01092 | THP3B | NC01 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------------|----------------|-----------|-----------|-----------|--------------------|--------------|
| | | | | | | | Monthly | Monthly | Quarterly | 2 X month | 2 X month | Once per discharge | Annually |
| | | | | | | | Composite | Composite | Composite | Composite | Composite | Composite | Grab |
| | | | | | | | TOTAL N - Conc | TOTAL P - Conc | CERI7DPF | COPPER | ZINC | CER7DCHV | ANN POL SCAN |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | mg/l | mg/l | pass/fail | mg/l | mg/l | percent | yes=1 no=0 | |
| 1 | | | 0730 | 8 | Y | | | | | | | | |
| 2 | | | 1110 | 1 | B | | | | | | | | |
| 3 | | | 1150 | 1 | B | | | | | | | | |
| 4 | | | 0706 | 8 | Y | | | | | | | | |
| 5 | 0840 | 24 | 0710 | 8 | Y | | | | | | | | |
| 6 | 0845 | 24 | 0600 | 8 | Y | | | | | | | | |
| 7 | 0845 | 24 | 0708 | 8 | Y | | 4.84 | 2.54 | | 0.008 | 0.152 | | |
| 8 | | | 0710 | 8 | Y | | | | | | | | |
| 9 | | | 1330 | 1.5 | B | | | | | | | | |
| 10 | | | 1245 | 1.25 | B | | | | | | | | |
| 11 | | | 0709 | 8 | Y | | | | | | | | |
| 12 | 0845 | 24 | 0712 | 8 | Y | | | | | | | | |
| 13 | 0845 | 24 | 0714 | 8 | Y | | | | | | | | |
| 14 | 0850 | 24 | 0712 | 8 | Y | | | | | | | | |
| 15 | | | 0730 | 8 | Y | | | | | | | | |
| 16 | | | | | | | | | | | | | |
| 17 | | | | | | | | | | | | | |
| 18 | | | 0708 | 8 | Y | | | | | | | | |
| 19 | 0845 | 24 | 0706 | 8 | Y | | | | | | | | |
| 20 | 0850 | 24 | 0708 | 8 | Y | | | | | | | | |
| 21 | 0850 | 24 | 0712 | 8 | Y | | | | | | | | |
| 22 | | | 0706 | 8 | Y | | | | | | | | |
| 23 | | | 1441 | 1 | Y | | | | | | | | |
| 24 | | | 0835 | 1 | Y | | | | | | | | |
| 25 | | | 0706 | 8 | Y | | | | 0.008 | 0.163 | | | |
| 26 | 0845 | 24 | 0708 | 8 | Y | | | | | | | | |
| 27 | 0835 | 24 | 0706 | 8 | Y | | | | | | | | |
| 28 | 0838 | 24 | | | | | | | | | | | |
| 29 | | | | | | | | | | | | | |
| 30 | | | 1000 | 1 | B | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | | |
| Monthly Average: | | | | | | | 4.84 | 2.54 | | 0.008 | 0.1575 | | |
| Daily Maximum: | | | | | | | 4.84 | 2.54 | | 0.008 | 0.163 | | |
| Daily Minimum: | | | | | | | 4.84 | 2.54 | | 0.008 | 0.152 | | |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | | |

PDFin PDF Editor with Free Writer and Tools

NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 12-2013 (December 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 12/16/2013

12/16/2013

ORC/Certifier Signature: Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

By this signature, I certify that this report is accurate and complete to the best of my knowledge.

The permittee shall report to the Director or the appropriate Regional Office any noncompliance that potentially threatens public health or the environment. Any information shall be provided orally within 24 hours from the time the permittee became aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances.

If the facility is noncompliant, please attach a list of corrective actions being taken and a time-table for improvements to be made as required by part II.E.6 of the NPDES permit.

COMMENTS: BOD Monthly Avg % Removal 100%

TSS Monthly Avg % Removal 99%

NH3 Monthly Avg % Removal 99%

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 managed 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 fines and imprisonment for knowing violations.

12/16/2013

Permittee/Submitter Signature:*** Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

Permittee Address: 3680 Hillview Dr Conover NC 28613 Permit Expiration Date: 04/30/2015

CERTIFIED LABORATORIES

LAB NAME: Water Tech Lab, Research and Analytical

CERTIFIED LAB #: 50, 34

PERSON(S) COLLECTING SAMPLES: Evan Rubins, Michael Fox

PARAMETER CODES

Parameter Codes assistance may be obtained by calling the NPDES Unit (919) 807-6300 or by visiting the Surface Water Protection Section's web site at <http://portal.ncdenr.org/web/wq/swp> and linking to the unit's information pages.

FOOTNOTES

Use only units of measurement designated in the reporting facility's NPDES permit for reporting data.

* No Flow/Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data to be entered for all of the parameters on the DMR for entire monitoring period.

** ORC on Site?: ORC must visit facility and document visitation of facility as required per 15A NCAC 8G .0204.

*** Signature of Permittee: If signed by other than the permittee, then delegation of the signatory authority must be on file with the state per 15A NCAC 2B .0506(b)(2)(D).

NPDES PERMIT NO.: NC0024252

FACILITY NAME: Northeast WWTP

OWNER NAME: City of Conover

GRADE: WW-4.

eDMR PERIOD: 12-2013 (December 2013)

COMPLIANCE: Compliant

PERMIT VERSION: 3.0

CLASS: WW-3.

ORC: Michael Lee Fox

ORC HAS CHANGED: No

VERSION: 1.0

CONTACT PHONE #: 8284652279

PERMIT STATUS: Active

COUNTY: Catawba

ORC CERT NUMBER: 10941

STATUS: Processed

SUBMISSION DATE: 12/16/2013

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NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 12-2013 (December 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 01/17/2014

SAMPLING LOCATION: DOWNSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:*** | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|-----------------|----------------|--------|--------|
| | | | | | | | Weekly | Weekly |
| | | | | | | | Grab | Grab |
| | | | | | | | TEMP-C | DO |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | | deg c | mg/l |
| 1 | | | | | | | | |
| 2 | | | 1127 | | | | 6.5 | 8.3 |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | 1121 | | | | 8.2 | 10.4 |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | 1122 | | | | 6.2 | 11.1 |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| 19 | | | | | | | | |
| 20 | | | | | | | | |
| 21 | | | | | | | | |
| 22 | | | | | | | | |
| 23 | | | | | | | | |
| 24 | | | 1404 | | | | 9.9 | 11.7 |
| 25 | | | | | | | | |
| 26 | | | | | | | | |
| 27 | | | | | | | | |
| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | 1017 | | | | 6.8 | 11.7 |
| Monthly Average Limit: | | | | | | | | |
| Monthly Average: | | | | | | | 7.52 | 10.64 |
| Daily Maximum: | | | | | | | 9.9 | 11.7 |
| Daily Minimum: | | | | | | | 6.2 | 8.3 |
| Monthly Avg % Removal (85%): | | | | | | | | |

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NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 12-2013 (December 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 01/17/2014

SAMPLING LOCATION: INFLUENT DISCHARGE NO.: 001

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO310 | 00610 | CO530 |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|------------|------------|------------|
| | | | | | | | 3 X week | 3 X week | 3 X week |
| | | | | | | | Composite | Calculated | Composite |
| | | | | | | | BOD - Conc | NH3-N | TSS - Conc |
| | | | | | | | mg/l | mg/l | mg/l |
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| 3 | 0845 | 24 | | | | | 255 | 21.25 | 183 |
| 4 | 0845 | 24 | | | | | 380 | 20.5 | 170 |
| 5 | 0850 | 24 | | | | | 213 | 23.25 | 100 |
| 6 | | | | | | | | | |
| 7 | | | | | | | | | |
| 8 | | | | | | | | | |
| 9 | | | | | | | | | |
| 10 | 0845 | 24 | | | | | 179 | 23.75 | 140 |
| 11 | 0845 | 24 | | | | | 213 | 20.75 | 107 |
| 12 | 0845 | 24 | | | | | 181 | 20.25 | 117 |
| 13 | | | | | | | | | |
| 14 | | | | | | | | | |
| 15 | | | | | | | | | |
| 16 | | | | | | | | | |
| 17 | 0840 | 24 | | | | | 404 | 20.75 | 93.3 |
| 18 | 0845 | 24 | | | | | 301 | 21 | 167 |
| 19 | 0925 | 24 | | | | | 178 | 21.75 | 197 |
| 20 | | | | | | | | | |
| 21 | | | | | | | | | |
| 22 | | | | | | | | | |
| 23 | | | | | | | | | |
| 24 | | | | | | | | | |
| 25 | | | | | | | | | |
| 26 | | | | | | | | | |
| 27 | 0825 | 24 | | | | | 193 | 19.25 | 123 |
| 28 | | | | | | | | | |
| 29 | | | | | | | | | |
| 30 | | | | | | | | | |
| 31 | 0845 | 24 | | | | | 156 | 15.75 | 147 |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | 241.1818 | 20.75 | 140.3909 |
| Daily Maximum: | | | | | | | 404 | 23.75 | 197 |
| Daily Minimum: | | | | | | | 156 | 15.75 | 93.3 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

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NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 12-2013 (December 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 01/17/2014

SAMPLING LOCATION: UPSTREAM DISCHARGE NO.: 001

| Date | Composite Sample | | Operator Arrival Time | | Operator Time On Site | | No Flow Reason | 00010 | 00300 |
|-------------------------------------|------------------|-------|-----------------------|-------|-----------------------|----|----------------|-------|-------|
| | Hrs | Y/B/N | Hrs | Y/B/N | TEMP-C | DO | | | |
| | 2400 | | 2400 | | | | deg c | mg/l | |
| 1 | | | | | | | | | |
| 2 | | | 1141 | | | | 6.7 | 8.6 | |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | |
| 7 | | | | | | | | | |
| 8 | | | | | | | | | |
| 9 | | | 1137 | | | | 8.1 | 10.5 | |
| 10 | | | | | | | | | |
| 11 | | | | | | | | | |
| 12 | | | | | | | | | |
| 13 | | | | | | | | | |
| 14 | | | | | | | | | |
| 15 | | | | | | | | | |
| 16 | | | 1135 | | | | 6.1 | 11.3 | |
| 17 | | | | | | | | | |
| 18 | | | | | | | | | |
| 19 | | | | | | | | | |
| 20 | | | | | | | | | |
| 21 | | | | | | | | | |
| 22 | | | | | | | | | |
| 23 | | | | | | | | | |
| 24 | | | 1418 | | | | 10.1 | 11.5 | |
| 25 | | | | | | | | | |
| 26 | | | | | | | | | |
| 27 | | | | | | | | | |
| 28 | | | | | | | | | |
| 29 | | | | | | | | | |
| 30 | | | | | | | | | |
| 31 | | | 1035 | | | | 6.2 | 11.8 | |
| Monthly Average Limit: | | | | | | | | | |
| Monthly Average: | | | | | | | | 7.44 | 10.74 |
| Daily Maximum: | | | | | | | | 10.1 | 11.8 |
| Daily Minimum: | | | | | | | | 6.1 | 8.6 |
| Monthly Avg % Removal (85%): | | | | | | | | | |

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PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

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COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 12-2013 (December 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 01/17/2014

SAMPLING LOCATION: EFFLUENT DISCHARGE NO.: 001 NO DISCHARGE*: NO (Continue)

| Date | Composite Sample | Total Composite Time | Operator Arrival Time | Operator Time On Site | ORC On Site:** | No Flow Reason | CO600 | CO665 | TGP3B | 01042 | 01092 | THP3B | NC01 | |
|-------------------------------------|------------------|----------------------|-----------------------|-----------------------|----------------|----------------|----------------|----------------|-----------|-----------|-----------|--------------------|--------------|---|
| | | | | | | | Monthly | Monthly | Quarterly | 2 X month | 2 X month | Once per discharge | Annually | |
| | | | | | | | Composite | Composite | Composite | Composite | Composite | Composite | Grab | |
| | | | | | | | TOTAL N - Conc | TOTAL P - Conc | CERI7DPF | COPPER | ZINC | CER7DCHV | ANN POL SCAN | |
| | 2400 | Hrs | 2400 | Hrs | Y/B/N | mg/l | mg/l | pass/fail | mg/l | mg/l | percent | yes=1 no=0 | | |
| 1 | | | 1345 | Y | B | | | | | | | | | |
| 2 | | | 0706 | 8 | Y | | | | | | | | | |
| 3 | 0845 | 24 | 0720 | 8 | Y | | | | | | | | | |
| 4 | 0845 | 24 | 0710 | 8 | Y | | | | | | | | | |
| 5 | 0850 | 24 | 0710 | 8 | Y | | | | | | | | | |
| 6 | | | 0706 | 8 | Y | | | | | | | | | |
| 7 | | | 1330 | 1 | B | | | | | | | | | |
| 8 | | | 1300 | 1.5 | B | | | | | | | | | |
| 9 | | | 0714 | 8 | Y | | | | | | | | | |
| 10 | 0845 | 24 | 0720 | 8 | Y | | 4.16 | 1.83 | 1 | < 0.005 | 0.146 | | | |
| 11 | 0845 | 24 | 0708 | 8 | Y | | | | | | | | 1 | |
| 12 | 0845 | 24 | 0706 | 8 | Y | | | | | | | | | |
| 13 | | | 0712 | 8 | Y | | | | | | | | | |
| 14 | | | | | | | | | | | | | | |
| 15 | | | | | | | | | | | | | | |
| 16 | | | 0706 | 8 | Y | | | | | | | | | |
| 17 | 0840 | 24 | 0700 | 8 | B | | | | | | | | | |
| 18 | 0845 | 24 | 0709 | 8 | Y | | | | | | | | | |
| 19 | 0925 | 24 | 0706 | 8 | Y | | | | | | | | | |
| 20 | | | 0708 | 8 | Y | | | | | | | | | |
| 21 | | | 1646 | 1 | Y | | | | | | | | | |
| 22 | | | 1520 | 1 | Y | | | | | | | | | |
| 23 | | | 0700 | 8 | B | | | | | | | | | |
| 24 | | | 0700 | 8 | B | | | | | | | | | |
| 25 | | | 1635 | 1 | Y | | | | | | | | | |
| 26 | | | 0715 | 8 | Y | | | | | | | | | |
| 27 | 0825 | 24 | 0702 | 8 | Y | | | | | < 0.005 | 0.09 | | | |
| 28 | | | 1630 | 1 | B | | | | | | | | | |
| 29 | | | 1335 | 1 | B | | | | | | | | | |
| 30 | | | 0700 | 8 | B | | | | | | | | | |
| 31 | 0845 | 24 | 0700 | 8 | B | | | | | | | | | |
| Monthly Average Limit: | | | | | | | | | | | | | | |
| Monthly Average: | | | | | | | 4.16 | 1.83 | 1 | 0 | 0.118 | | | 1 |
| Daily Maximum: | | | | | | | 4.16 | 1.83 | 1 | 0 | 0.146 | | | 1 |
| Daily Minimum: | | | | | | | 4.16 | 1.83 | 1 | 0 | 0.09 | | | 1 |
| Monthly Avg % Removal (85%): | | | | | | | | | | | | | | |

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NPDES PERMIT NO.: NC0024252

PERMIT VERSION: 3.0

PERMIT STATUS: Active

FACILITY NAME: Northeast WWTP

CLASS: WW-3.

COUNTY: Catawba

OWNER NAME: City of Conover

ORC: Michael Lee Fox

ORC CERT NUMBER: 10941

GRADE: WW-4.

ORC HAS CHANGED: No

eDMR PERIOD: 12-2013 (December 2013)

VERSION: 1.0

STATUS: Processed

COMPLIANCE: Compliant

CONTACT PHONE #: 8284652279

SUBMISSION DATE: 01/17/2014

01/17/2014

ORC/Certifier Signature: Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

By this signature, I certify that this report is accurate and complete to the best of my knowledge.

The permittee shall report to the Director or the appropriate Regional Office any noncompliance that potentially threatens public health or the environment. Any information shall be provided orally within 24 hours from the time the permittee became aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances.

If the facility is noncompliant, please attach a list of corrective actions being taken and a time-table for improvements to be made as required by part II.E.6 of the NPDES permit.

COMMENTS: BOD Monthly Avg % Removal 100%

TSS Monthly Avg % Removal 98%

NH3 Monthly Avg % Removal 100%

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 managed 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 fines and imprisonment for knowing violations.

01/17/2014

Permittee/Submitter Signature:*** Michael Lee Fox E-Mail:mike.fox@conoverncc.gov Phone #:828-465-2279 Date

Permittee Address: 3680 Hillview Dr Conover NC 28613 Permit Expiration Date: 04/30/2015

CERTIFIED LABORATORIES

LAB NAME: Water Tech Lab, Research and Analytical

CERTIFIED LAB #: 50, 34

PERSON(S) COLLECTING SAMPLES: Evan Rubins, Michael Fox

PARAMETER CODES

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FOOTNOTES

Use only units of measurement designated in the reporting facility's NPDES permit for reporting data.

* No Flow/Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data to be entered for all of the parameters on the DMR for entire monitoring period.

** ORC on Site?: ORC must visit facility and document visitation of facility as required per 15A NCAC 8G .0204.

*** Signature of Permittee: If signed by other than the permittee, then delegation of the signatory authority must be on file with the state per 15A NCAC 2B .0506(b)(2)(D).

NPDES PERMIT NO.: NC0024252

FACILITY NAME: Northeast WWTP

OWNER NAME: City of Conover

GRADE: WW-4.

eDMR PERIOD: 12-2013 (December 2013)

COMPLIANCE: Compliant

PERMIT VERSION: 3.0

CLASS: WW-3.

ORC: Michael Lee Fox

ORC HAS CHANGED: No

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CONTACT PHONE #: 8284652279

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COUNTY: Catawba

ORC CERT NUMBER: 10941

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