DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME: SOUTH WWTF
ADDRESS: 255 SOUTH KANSAS AVE
WESLACO, TX 78596
FACILITY: CITY OF WESLACO SOUTH WWTF
LOCATION: 0.2 M W & .6 M N OF CONFLUENCE
GRANDE LAKE, HIDALGO CO, TX 78596
ATTN: MIQUEL D. WISE, MAYOR

TX0116394	SLD-P
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
08/01/2013	07/31/2014

DMR Mailing ZIP CODE: 78596
MAJOR
(SUBR 15)
PRODUCTION AND USE - SLDP
Other

No Discharge ☐

PARAMETER		QUANTITY OR LOADING VALUE	QUANTITY OR LOADING VALUE	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION VALUE	QUALITY OR CONCENTRATION VALUE	QUALITY OR CONCENTRATION VALUE	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
Polychlorinated biphenyls [PCBs]	SAMPLE MEASUREMENT	******	******	******	******	******	<2.0	mg/kg	0	Annual	Batch
39516 SL 0 Sludge	PERMIT REQUIREMENT	******	******	******	******	******	49 ANNL MAX	mg/kg		See Permit	BATCH
Toxicity characteristic leaching procedure	SAMPLE MEASUREMENT	******	******	******	<0.	******	******	0	0	Annual	Batch
46390 SL 0 Sludge	PERMIT REQUIREMENT	******	******	******	Req. Mon. MO AV MN	******	******	pass=0/fail=1		See Permit	BATCH
Ann. amt sludge disposed by other method	SAMPLE MEASUREMENT	******	*	DMT	******	******	******	******	0	Annual	Batch
49017 V 0 See Comments	PERMIT REQUIREMENT	******	Req. Mon. ANNL TOT	DMT/y	******	******	******	******		Annual	ESTIMA
Annual amt of sludge incinerated	SAMPLE MEASUREMENT	******	*	DMT	******	******	******	******	0	Annual	Batch
49018 SL 0 Sludge	PERMIT REQUIREMENT	******	Req. Mon. ANNL TOT	DMT/y	******	******	******	******		Annual	ESTIMA
Annual sludge production, total	SAMPLE MEASUREMENT	******	1,190.11	DMT	******	******	******	******	0	Annual	Batch
49019 SL 0 Sludge	PERMIT REQUIREMENT	******	Req. Mon. ANNL TOT	DMT/y	******	******	******	******		Annual	ESTIMA
Annual amount of sludge land applied	SAMPLE MEASUREMENT	******	*	DMT	******	******	******	******	0	Annual	Batch
49020 SL 0 Sludge	PERMIT REQUIREMENT	******	Req. Mon. ANNL TOT	DMT/y	******	******	******	******		Annual	ESTIMA
Annual amt. sludge disposed surface unit	SAMPLE MEASUREMENT	******	*	DMT	******	******	******	******	0	Annual	Batch
49021 SL 0 Sludge	PERMIT REQUIREMENT	******	Req. Mon. ANNL TOT	DMT/y	******	******	******	******		Annual	ESTIMA

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
David Salinas, Public utilities Director	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	David S. Salinas SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 12/8/2014	(956) 973-3146 AREA Code / NUMBER	8/18/14 MM/DD/YYYY
TYPED OR PRINTED				

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

V= IF ANNUAL SLUDGE DISPOSED BY OTHER METHODS IS APPLICABLE, EXPLAIN METHOD OF DISPOSAL. WQ10619-005

* Parameter/value Not Reported

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

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MAJOR
(SUBR 15)
PRODUCTION AND USE - SLDP
Other

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Annual amt sludge disposed in landfill	SAMPLE MEASUREMENT	******	1,190.11	DMT	******	******	******	******	0	Annual	Batch
49022 SL 0 Sludge	PERMIT REQUIREMENT	******	Req. Mon. ANNL TOT	DMT/y	******	******	******	******		Annual	ESTIMA
Annual amt sludge transported interstate	SAMPLE MEASUREMENT	******	*	DMT	******	******	******	******	0	Annual	Batch
49023 SL 0 Sludge	PERMIT REQUIREMENT	******	Req. Mon. ANNL TOT	DMT/y	******	******	******	******		Annual	ESTIMA

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TYPED OR PRINTED			AREA Code / NUMBER	MM/DD/YYYY

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

V= IF ANNUAL SLUDGE DISPOSED BY OTHER METHODS IS APPLICABLE, EXPLAIN METHOD OF DISPOSAL. WQ10619-005

*- Parameter / Value not reported