

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

PERMITTEE NAME:	Broward County Water and Wastewater Services	PERMIT NUMBER:	FL0031771
ADDRESS:	2555 West Copans Rd Pompano Beach, FL 33069	LIMIT:	FINAL REPORT: Monthly
		FACILITY TYPE:	DW GROUP: Domestic
		MONITORING GROUP:	D-001
FACILITY:	Broward Co North Regional WWTP		
LOCATION:	2401 N Powerline Rd Pompano Beach, FL 33069	DESCRIPTION:	Domestic discharge to ocean
COUNTY:	BROWARD	MONITORING PERIOD:	From: 09/01/2019 To: 09/30/2019

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement		21.9						0	1 Daily; 24 hours	Calculated
PARM Code 50050 Y Add. Desc: Discharged to Ocean Mon. Site: CAL-05	Permit Requirement		66.0 (Annl Avg)	MGD						(1 Daily; 24 hours)	(Calculated)
Flow	Sample Measurement		17.3						0	1 Daily; 24 hours	Calculated
PARM Code 50050 P Add. Desc: Discharged to Ocean Mon. Site: CAL-05	Permit Requirement		Report (Mo Avg)	MGD						(1 Daily; 24 hours)	(Calculated)
Flow	Sample Measurement		20.6						0	1 Continuous	Recording Flow Meter with Totalizer
PARM Code 50050 1 Add. Desc: After BD Chlorine Chamber Mon. Site: FLW-23	Permit Requirement		Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow	Sample Measurement		3.3						0	1 Continuous	Recording Flow Meter with Totalizer
PARM Code 50050 Q Add. Desc: To Pompano Beach Reuse TP Mon. Site: FLW-22	Permit Requirement		Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C	Sample Measurement					3.2			0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
PARM Code 80082 Y Mon. Site: EFA-04	Permit Requirement					25.0 (Annl Avg)		mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
BOD, Carbonaceous 5 day, 20C	Sample Measurement				3.7	2.7	2.4		0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
PARM Code 80082 A Mon. Site: EFA-04	Permit Requirement				60.0 (Maximum)	40.0 (Wkly Avg)	25.0 (Mo Avg)	mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
CBOD, % Removal, 5-day	Sample Measurement				98.5				0	1 Daily; 24 hours	Calculated
PARM Code 80091 K Mon. Site: CAL-06	Permit Requirement				85.0 (Mo Av Mn)			percent		(1 Daily; 24 hours)	(Calculated)
Solids, Total Suspended	Sample Measurement					5.0			0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
PARM Code 00530 Y Mon. Site: EFA-04	Permit Requirement					30.0 (Annl Avg)		mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
Solids, Total Suspended	Sample Measurement				6.4	4.9	4.2		0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
PARM Code 00530 A Mon. Site: EFA-04	Permit Requirement				60.0 (Maximum)	45.0 (Wkly Avg)	30.0 (Mo Avg)	mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended, % Removal PARM Code 81011 K Mon. Site: CAL-07	Sample Measurement				97.6				0	1 Daily; 24 hours	Calculated
	Permit Requirement				85.0 (Mo Av Mn)			percent		(1 Daily; 24 hours)	(Calculated)
Coliform, Fecal PARM Code 74055 Y Mon. Site: EFA-04	Sample Measurement					11			0	1 Daily; 24 hours	Grab
	Permit Requirement					200.0 (Annl Avg)		#/100mL		(1 Daily; 24 hours)	(Grab)
Coliform, Fecal PARM Code 74055 A Mon. Site: EFA-04	Sample Measurement					13	91		0	1 Daily; 24 hours	Grab
	Permit Requirement					200.0 (Mo Geomn)	800.0 (Maximum)	#/100mL		(1 Daily; 24 hours)	(Grab)
pH PARM Code 00400 A Mon. Site: EFA-04	Sample Measurement				6.9		7.3		0	1 Continuous	Meter
	Permit Requirement				6.0 (Minimum)		8.5 (Maximum)	s.u.		(1 Continuous)	(Meter)
Chlorine, Total Residual PARM Code 50060 A Add. Desc: For Disinfection Mon. Site: EFA-04	Sample Measurement				0.7				0	1 Continuous	Meter
	Permit Requirement				0.4 (Minimum)			mg/L		(1 Continuous)	(Meter)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Chlorine, Total Residual  PARM Code 50060 P Add. Desc: For Dechlorination Mon. Site: EFA-04	Sample Measurement					1.11	1.02		0	1 Continuous	Meter
	Permit Requirement					1.5 (Mx1HrAvg)	1.15 (1Da Avg)	mg/L		(1 Continuous)	(Meter)
Oxygen, Dissolved (DO)  PARM Code 00300 A Mon. Site: EFA-04	Sample Measurement				0.0	5.7			0	1 Continuous	Meter
	Permit Requirement				Report (Minimum)	Report (Mo Av Mn)		mg/L		(1 Continuous)	(Meter)
Nitrogen, Total  PARM Code 00600 A Mon. Site: EFA-04	Sample Measurement					26.5	32.0		0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
	Permit Requirement					Report (Mo Avg)	Report (Maximum)	mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
Nitrogen, Total  PARM Code 00600 P Mon. Site: CAL-08	Sample Measurement		115140.9						0	1 Monthly	Calculated
	Permit Requirement		Report (Mo Avg)	lb/mth						(1 Monthly)	(Calculated)
Phosphorus, Total (as P)  PARM Code 00665 A Mon. Site: EFA-04	Sample Measurement					0.9	1.5		0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
	Permit Requirement					Report (Mo Avg)	Report (Maximum)	mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Phosphorus, Total (as P) PARM Code 00665 P Mon. Site: CAL-09	Sample Measurement		3802						0	1 Monthly	Calculated
	Permit Requirement		Report (Mo Avg)	lb/mth						(1 Monthly)	(Calculated)
Enterococci PARM Code 31639 A Mon. Site: EFA-04	Sample Measurement					25	43		0	10 Monthly	Grab
	Permit Requirement					35.0 (Mo Geomn)	130.0 (90th %)	#/100mL		(10 Monthly)	(Grab)
LC50 Statre 96hr Acu Menidia PARM Code TAN6B P Add. Desc: Routine Mon. Site: EFF-01	Sample Measurement				MNR				0	1 Semi-Annually; twice per year	4 grabs/24 hr.period
	Permit Requirement				30.0 (Minimum)			percent		(1 Semi-Annually; twice per year)	(4 grabs/24 hr.period)
LC50 Statre 96hr Acu Menidia PARM Code TAN6B Q Add. Desc: Additional Mon. Site: EFF-01	Sample Measurement				MNR				0	1 See permit	Documents
	Permit Requirement				30.0 (Minimum)			percent		(1 See permit)	(Documents)
LC50 Statre 96hr Acu Menidia PARM Code TAN6B R Add. Desc: Additional Mon. Site: EFF-01	Sample Measurement				MNR				0	1 See permit	Documents
	Permit Requirement				30.0 (Minimum)			percent		(1 See permit)	(Documents)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
LC50 Statre 96hr Acu Mysid Bahia PARM Code TAN3E P Add. Desc: Routine Mon. Site: EFF-01	Sample Measurement				MNR				0	1 Semi-Annually; twice per year	4 grabs/24 hr.period
	Permit Requirement				30.0 (Minimum)			percent		(1 Semi-Annually; twice per year)	(4 grabs/24 hr.period)
LC50 Statre 96hr Acu Mysid Bahia PARM Code TAN3E Q Add. Desc: Additional Mon. Site: EFF-01	Sample Measurement				MNR				0	1 See permit	Documents
	Permit Requirement				30.0 (Minimum)			percent		(1 See permit)	(Documents)
LC50 Statre 96hr Acu Mysid Bahia PARM Code TAN3E R Add. Desc: Additional Mon. Site: EFF-01	Sample Measurement				MNR				0	1 See permit	Documents
	Permit Requirement				30.0 (Minimum)			percent		(1 See permit)	(Documents)
Flow PARM Code 50050 R Add. Desc: Total WWTP Influent Mon. Site: CAL-01	Sample Measurement		70.3						0	1 Continuous	Calculated
	Permit Requirement		95.0 (Annl Avg)	MGD						(1 Continuous)	(Calculated)
Flow PARM Code 50050 S Add. Desc: Total WWTP Influent Mon. Site: CAL-01	Sample Measurement	71.0	76.0						0	1 Continuous	Calculated
	Permit Requirement	Report (Mo Avg)	Report (3MonAvg)	MGD						(1 Continuous)	(Calculated)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow  PARM Code 50050 T Add. Desc: Treatment Train A Mon. Site: FLW-01	Sample Measurement		12.5						0	1 Continuous	Recording Flow Meter with Totalizer
	Permit Requirement		Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow  PARM Code 50050 U Add. Desc: Treatment Train B Mon. Site: FLW-02	Sample Measurement		10.8						0	1 Continuous	Recording Flow Meter with Totalizer
	Permit Requirement		Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow  PARM Code 50050 V Add. Desc: Treatment Train C Mon. Site: FLW-03	Sample Measurement		0.0						0	1 Continuous	Recording Flow Meter with Totalizer
	Permit Requirement		Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow  PARM Code 50050 W Add. Desc: Treatment Train D Mon. Site: FLW-04	Sample Measurement		20.3						0	1 Continuous	Recording Flow Meter with Totalizer
	Permit Requirement		Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow  PARM Code 50050 6 Add. Desc: Treatment Train E Mon. Site: FLW-05	Sample Measurement		27.0						0	1 Continuous	Recording Flow Meter with Totalizer
	Permit Requirement		Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow  PARM Code 50050 5 Add. Desc: Facility Lift Station 1 Mon. Site: FLW-06	Sample Measurement		0.02						0	1 Continuous	Recording Flow Meter with Totalizer
	Permit Requirement		Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow  PARM Code 50050 A Add. Desc: Facility Lift Station 2 Mon. Site: FLW-07	Sample Measurement		0.12						0	1 Continuous	Recording Flow Meter with Totalizer
	Permit Requirement		Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow  PARM Code 50050 B Add. Desc: Facility Lift Station 3 Mon. Site: FLW-08	Sample Measurement		3.2						0	1 Continuous	Recording Flow Meter with Totalizer
	Permit Requirement		Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow  PARM Code 50050 G Add. Desc: Facility Lift Station 4 Mon. Site: FLW-09	Sample Measurement		0.15						0	1 Continuous	Recording Flow Meter with Totalizer
	Permit Requirement		Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow  PARM Code 50050 7 Add. Desc: Facility Lift Station 5 Mon. Site: FLW-10	Sample Measurement		0.2						0	1 Continuous	Recording Flow Meter with Totalizer
	Permit Requirement		Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)



Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement		1.3						0	1 Continuous	Recording Flow Meter with Totalizer
PARM Code 50050 I Add. Desc: Facility Lift Station 6 Mon. Site: FLW-11	Permit Requirement		Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow	Sample Measurement		0.9						0	1 Continuous	Recording Flow Meter with Totalizer
PARM Code 50050 J Add. Desc: Facility Lift Station 7 Mon. Site: FLW-12	Permit Requirement		Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						80.0		0	1 Monthly	Calculated
PARM Code 00180 P Mon. Site: CAL-02	Permit Requirement						Report (3MonAvg)	percent		(1 Monthly)	(Calculated)
Solids, Total Suspended	Sample Measurement						1450		0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
PARM Code 00530 G Add. Desc: Influent Mon. Site: INF-01	Permit Requirement						Report (Maximum)	mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
BOD, Carbonaceous 5 day, 20C	Sample Measurement						785		0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
PARM Code 80082 G Add. Desc: Influent Mon. Site: INF-01	Permit Requirement						Report (Maximum)	mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  Submitted by Data Entry Operator	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 GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE	RECEIVED DATE	SUBMITTED ON
										10/25/2019	11/06/2020

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

PERMITTEE NAME:	Broward County Water and Wastewater Services	PERMIT NUMBER:	FL0031771
ADDRESS:	2555 West Copans Rd Pompano Beach, FL 33069	LIMIT:	FINAL REPORT: Monthly
FACILITY:	Broward Co North Regional WWTP	FACILITY TYPE:	DW GROUP: Domestic
LOCATION:	2401 N Powerline Rd Pompano Beach, FL 33069	MONITORING GROUP:	R-001
COUNTY:	BROWARD	DESCRIPTION:	Part III public access reuse system.
		MONITORING PERIOD:	From: 09/01/2019 To: 09/30/2019

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement		0.1						0	1 Continuous	Recording Flow Meter with Totalizer
PARM Code 50050 Y Mon. Site: FLW-15	Permit Requirement		10.0 (Annl Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow	Sample Measurement		0.1						0	1 Continuous	Recording Flow Meter with Totalizer
PARM Code 50050 1 Mon. Site: FLW-15	Permit Requirement		Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow	Sample Measurement		0.02						0	1 Monthly	Meter
PARM Code 50050 P Add. Desc: administration complex Mon. Site: FLW-24	Permit Requirement		Report (Annl Avg)	MGD						(1 Monthly)	(Meter)
Flow	Sample Measurement		0.02						0	1 Monthly	Meter
PARM Code 50050 Q Add. Desc: administration complex Mon. Site: FLW-24	Permit Requirement		Report (Mo Avg)	MGD						(1 Monthly)	(Meter)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C  PARM Code 80082 Y Mon. Site: EFA-02	Sample Measurement					2.6			0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
	Permit Requirement					20.0 (Annl Avg)		mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
BOD, Carbonaceous 5 day, 20C  PARM Code 80082 A Mon. Site: EFA-02	Sample Measurement				4.0	1.7	1.3		0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
	Permit Requirement				60.0 (Maximum)	45.0 (Wkly Avg)	30.0 (Mo Avg)	mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
Solids, Total Suspended  PARM Code 00530 B Mon. Site: EFB-02	Sample Measurement						4.9		0	1 Daily; 24 hours	Grab
	Permit Requirement						5.0 (Maximum)	mg/L		(1 Daily; 24 hours)	(Grab)
Coliform, Fecal  PARM Code 74055 A Mon. Site: EFA-02	Sample Measurement						1		0	1 Daily; 24 hours	Grab
	Permit Requirement						25.0 (Maximum)	#/100mL		(1 Daily; 24 hours)	(Grab)
Coliform, Fecal, % less than detection  PARM Code 51005 A Mon. Site: EFA-02	Sample Measurement				93.3				0	1 Daily; 24 hours	Calculated
	Permit Requirement				75.0 (MinTotMo)			percent		(1 Daily; 24 hours)	(Calculated)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
pH PARM Code 00400 A Mon. Site: EFA-02	Sample Measurement				7.0		7.3		0	1 Continuous	Meter
	Permit Requirement				6.0 (Minimum)		8.5 (Maximum)	s.u.		(1 Continuous)	(Meter)
Chlorine, Total Residual PARM Code 50060 A Add. Desc: For Disinfection Mon. Site: EFA-02	Sample Measurement				4.4				0	1 Continuous	Meter
	Permit Requirement				1.0 (Minimum)			mg/L		(1 Continuous)	(Meter)
Turbidity PARM Code 00070 B Mon. Site: EFB-02	Sample Measurement						17.8		0	1 Continuous	Meter
	Permit Requirement						Report (Maximum)	NTU		(1 Continuous)	(Meter)
Phosphorus, Total (as P) PARM Code 00665 A Mon. Site: EFA-02	Sample Measurement						1.3		0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
	Permit Requirement						Report (Maximum)	mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
Nitrogen, Total PARM Code 00600 A Mon. Site: EFA-02	Sample Measurement						23.9		0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
	Permit Requirement						Report (Maximum)	mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Kjeldahl, Total (as N)  PARM Code 00625 A Mon. Site: EFA-02	Sample Measurement						22.3		0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
	Permit Requirement						Report (Maximum)	mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
Nitrogen, Nitrite, Total (as N)  PARM Code 00615 A Mon. Site: EFA-02	Sample Measurement						2.4		0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
	Permit Requirement						Report (Maximum)	mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
Nitrogen, Nitrate, Total (as N)  PARM Code 00620 A Mon. Site: EFA-02	Sample Measurement						1.2		0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
	Permit Requirement						Report (Maximum)	mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  Submitted by Data Entry Operator	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 GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE	RECEIVED DATE	SUBMITTED ON
										10/25/2019	11/06/2020

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

PERMITTEE NAME:	Broward County Water and Wastewater Services	PERMIT NUMBER:	FL0031771		
ADDRESS:	2555 West Copans Rd Pompano Beach, FL 33069	LIMIT:	FINAL	REPORT:	Monthly
		FACILITY TYPE:	DW	GROUP:	Domestic
FACILITY:	Broward Co North Regional WWTP	MONITORING GROUP:	R-002		
LOCATION:	2401 N Powerline Rd Pompano Beach, FL 33069	DESCRIPTION:	On-site Restricted Access Irrigation and industrial reuse.		
COUNTY:	BROWARD	MONITORING PERIOD:	From: 09/01/2019 To: 09/30/2019		

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement		3.7						0	1 Continuous	Recording Flow Meter with Totalizer
PARM Code 50050 Y Add. Desc: On-Site Reuse Mon. Site: FLW-14	Permit Requirement		4.2 (Annl Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow	Sample Measurement		3.5						0	1 Continuous	Recording Flow Meter with Totalizer
PARM Code 50050 1 Add. Desc: On-Site Reuse Mon. Site: FLW-14	Permit Requirement		Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow	Sample Measurement		0.02						0	1 Monthly	Meter
PARM Code 50050 P Add. Desc: administration complex Mon. Site: FLW-24	Permit Requirement		Report (Annl Avg)	MGD						(1 Monthly)	(Meter)
Flow	Sample Measurement		0.02						0	1 Monthly	Meter
PARM Code 50050 Q Add. Desc: administration complex Mon. Site: FLW-24	Permit Requirement		Report (Mo Avg)	MGD						(1 Monthly)	(Meter)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C	Sample Measurement					2.6			0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
PARM Code 80082 Y Mon. Site: EFA-02	Permit Requirement					20.0 (Annl Avg)		mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
BOD, Carbonaceous 5 day, 20C	Sample Measurement				4.0	1.7	1.3		0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
PARM Code 80082 A Mon. Site: EFA-02	Permit Requirement				60.0 (Maximum)	45.0 (Wkly Avg)	30.0 (Mo Avg)	mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
Solids, Total Suspended	Sample Measurement					1.9			0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
PARM Code 00530 Y Mon. Site: EFA-02	Permit Requirement					20.0 (Annl Avg)		mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
Solids, Total Suspended	Sample Measurement				2.9	1.9	1.5		0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
PARM Code 00530 A Mon. Site: EFA-02	Permit Requirement				60.0 (Maximum)	45.0 (Wkly Avg)	30.0 (Mo Avg)	mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
Coliform, Fecal	Sample Measurement					1			0	1 Daily; 24 hours	Grab
PARM Code 74055 Y Mon. Site: EFA-02	Permit Requirement					200.0 (Annl Avg)		#/100mL		(1 Daily; 24 hours)	(Grab)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal PARM Code 74055 A Mon. Site: EFA-02	Sample Measurement					1	1		0	1 Daily; 24 hours	Grab
	Permit Requirement					200.0 (Mo Geomn)	800.0 (Maximum)	#/100mL		(1 Daily; 24 hours)	(Grab)
pH PARM Code 00400 A Mon. Site: EFA-02	Sample Measurement				7.0		7.3		0	1 Continuous	Meter
	Permit Requirement				6.0 (Minimum)		8.5 (Maximum)	s.u.		(1 Continuous)	(Meter)
Chlorine, Total Residual PARM Code 50060 A Add. Desc: For Disinfection Mon. Site: EFA-02	Sample Measurement				4.4				0	1 Continuous	Meter
	Permit Requirement				0.5 (Minimum)			mg/L		(1 Continuous)	(Meter)
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  Submitted by Data Entry Operator	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 GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			TELEPHONE	RECEIVED DATE	SUBMITTED ON
										10/25/2019	11/06/2020



**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

PERMITTEE NAME:	Broward County Water and Wastewater Services	PERMIT NUMBER:	FL0031771		
ADDRESS:	2555 West Copans Rd Pompano Beach, FL 33069	LIMIT:	FINAL	REPORT:	Monthly
		FACILITY TYPE:	DW	GROUP:	Domestic
		MONITORING GROUP:	RMP-B		
FACILITY:	Broward Co North Regional WWTP				
LOCATION:	2401 N Powerline Rd Pompano Beach, FL 33069	DESCRIPTION:	Dewatered Class B Biosolids are sampled from the belt press conveyor belt that is prior to the trailers.		
COUNTY:	BROWARD				
		MONITORING PERIOD:	From: 09/01/2019 To: 09/30/2019		

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Sludge, Tot, Dry Wt (as N)	Sample Measurement		6.5						0	1 Monthly	Composite
PARM Code 78470 + Mon. Site: RMP-B	Permit Requirement		Report (Maximum)	percent						(1 Monthly)	(Composite)
Phosphorus, Sludge, Tot, Dry Wt (as P)	Sample Measurement		1.8						0	1 Monthly	Composite
PARM Code 78478 + Mon. Site: RMP-B	Permit Requirement		Report (Maximum)	percent						(1 Monthly)	(Composite)
Potassium, Sludge, Tot, Dry Wt (as K)	Sample Measurement		0.2						0	1 Monthly	Composite
PARM Code 78472 + Mon. Site: RMP-B	Permit Requirement		Report (Maximum)	percent						(1 Monthly)	(Composite)
Arsenic Total, Dry Weight, Sludge	Sample Measurement						4.0		0	1 Monthly	Composite
PARM Code 49565 + Mon. Site: RMP-B	Permit Requirement						75.0 (Maximum)	mg/kg		(1 Monthly)	(Composite)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Cadmium, Sludge, Tot, Dry Weight (as Cd) PARM Code 78476 + Mon. Site: RMP-B	Sample Measurement						1.1		0	1 Monthly	Composite
	Permit Requirement						85.0 (Maximum)	mg/kg		(1 Monthly)	(Composite)
Copper, Sludge, Tot, Dry Wt. (as Cu) PARM Code 78475 + Mon. Site: RMP-B	Sample Measurement						276		0	1 Monthly	Composite
	Permit Requirement						4300.0 (Maximum)	mg/kg		(1 Monthly)	(Composite)
Lead, Dry Weight, Sludge PARM Code 78468 + Mon. Site: RMP-B	Sample Measurement						20.7		0	1 Monthly	Composite
	Permit Requirement						840.0 (Maximum)	mg/kg		(1 Monthly)	(Composite)
Mercury, Dry Weight, Sludge PARM Code 78471 + Mon. Site: RMP-B	Sample Measurement						0.4		0	1 Monthly	Composite
	Permit Requirement						57.0 (Maximum)	mg/kg		(1 Monthly)	(Composite)
Molybdenum, Dry Weight, Sludge PARM Code 78465 + Mon. Site: RMP-B	Sample Measurement						10.2		0	1 Monthly	Composite
	Permit Requirement						75.0 (Maximum)	mg/kg		(1 Monthly)	(Composite)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Nickel, Dry Weight, Sludge PARM Code 78469 + Mon. Site: RMP-B	Sample Measurement						17.8		0	1 Monthly	Composite
	Permit Requirement						420.0 (Maximum)	mg/kg		(1 Monthly)	(Composite)
Selenium Sludge Solid PARM Code 61518 + Mon. Site: RMP-B	Sample Measurement						<0.8		0	1 Monthly	Composite
	Permit Requirement						100.0 (Maximum)	mg/kg		(1 Monthly)	(Composite)
Zinc, Dry Weight, Sludge PARM Code 78467 + Mon. Site: RMP-B	Sample Measurement						961		0	1 Monthly	Composite
	Permit Requirement						7500.0 (Maximum)	mg/kg		(1 Monthly)	(Composite)
pH PARM Code 00400 + Mon. Site: RMP-B	Sample Measurement						8.1		0	1 Monthly	Grab
	Permit Requirement						Report (Maximum)	s.u.		(1 Monthly)	(Grab)
Solids, Total, Sludge, Percent PARM Code 61553 + Mon. Site: RMP-B	Sample Measurement						15.8		0	1 Monthly	Composite
	Permit Requirement						Report (Maximum)	percent		(1 Monthly)	(Composite)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Coliform, Fecal	<b>Sample Measurement</b>		<b>194201</b>						<b>0</b>	<b>1 Monthly</b>	<b>Grab</b>
PARM Code 74055 + Mon. Site: RMP-B	<b>Permit Requirement</b>		<b>2000000.0 (Geo Mean)</b>	<b>MPN/g</b>						<b>(1 Monthly)</b>	<b>(Grab)</b>
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  Submitted by Data Entry Operator	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 GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			TELEPHONE	RECEIVED DATE	SUBMITTED ON	
									10/25/2019	11/06/2020	

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

PERMITTEE NAME: Broward County Water and Wastewater Services ADDRESS: 2555 West Copans Rd Pompano Beach, FL 33069  FACILITY: Broward Co North Regional WWTP LOCATION: 2401 N Powerline Rd Pompano Beach, FL 33069  COUNTY: BROWARD						PERMIT NUMBER: FL0031771 LIMIT: FINAL REPORT: Monthly FACILITY TYPE: DW GROUP: Domestic MONITORING GROUP: RMP-Q  DESCRIPTION: Biosolids Quantity  MONITORING PERIOD: From: 09/01/2019 To: 09/30/2019					
Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type			
Biosolids Quantity (Landfilled)  PARM Code B0008 + Mon. Site: RMP-01	Sample Measurement		435.7					0	1 Monthly	Calculated	
	Permit Requirement		Report (Mo Total)	dry tons					(1 Monthly)	(Calculated)	
Biosolids Quantity (Land-Applied )  PARM Code B0006 + Mon. Site: RMP-02	Sample Measurement		517.0					0	1 Monthly	Calculated	
	Permit Requirement		Report (Mo Total)	dry tons					(1 Monthly)	(Calculated)	
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								10/25/2019	11/06/2020		

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

PERMITTEE NAME:	Broward County Water and Wastewater Services	PERMIT NUMBER:	FL0031771
ADDRESS:	2555 West Copans Rd Pompano Beach, FL 33069	LIMIT:	FINAL REPORT: Monthly
		FACILITY TYPE:	DW GROUP: Domestic
FACILITY:	Broward Co North Regional WWTP	MONITORING GROUP:	U-001
LOCATION:	2401 N Powerline Rd Pompano Beach, FL 33069	DESCRIPTION:	Class I underground injection wells
COUNTY:	BROWARD	MONITORING PERIOD:	From: 09/01/2019 To: 09/30/2019

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	<b>Sample Measurement</b>	<b>82.0</b>	<b>47.1</b>						<b>0</b>	<b>1 Continuous</b>	<b>Calculated</b>
PARM Code 50050 P Add. Desc: Total IW-1 through IW-8 Mon. Site: CAL-04	<b>Permit Requirement</b>	<b>134.6</b> (Mx Hr Rt)	<b>Report</b> (Mo Avg)	<b>MGD</b>						<b>(1 Continuous)</b>	<b>(Calculated)</b>
Flow	<b>Sample Measurement</b>	<b>13.8</b>	<b>7.8</b>						<b>0</b>	<b>1 Continuous</b>	<b>Recording Flow Meter with Totalizer</b>
PARM Code 50050 1 Add. Desc: IW-1 Mon. Site: FLW-16	<b>Permit Requirement</b>	<b>15.0</b> (Mx Hr Rt)	<b>Report</b> (Mo Avg)	<b>MGD</b>						<b>(1 Continuous)</b>	<b>(Recording Flow Meter with Totalizer)</b>
Flow	<b>Sample Measurement</b>	<b>14.5</b>	<b>10.3</b>						<b>0</b>	<b>1 Continuous</b>	<b>Recording Flow Meter with Totalizer</b>
PARM Code 50050 Q Add. Desc: IW-2 Mon. Site: FLW-17	<b>Permit Requirement</b>	<b>15.0</b> (Mx Hr Rt)	<b>Report</b> (Mo Avg)	<b>MGD</b>						<b>(1 Continuous)</b>	<b>(Recording Flow Meter with Totalizer)</b>
Flow	<b>Sample Measurement</b>	<b>13.8</b>	<b>9.2</b>						<b>0</b>	<b>1 Continuous</b>	<b>Recording Flow Meter with Totalizer</b>
PARM Code 50050 R Add. Desc: IW-3 Mon. Site: FLW-18	<b>Permit Requirement</b>	<b>15.0</b> (Mx Hr Rt)	<b>Report</b> (Mo Avg)	<b>MGD</b>						<b>(1 Continuous)</b>	<b>(Recording Flow Meter with Totalizer)</b>

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow  PARM Code 50050 S Add. Desc: IW-4 Mon. Site: FLW-19	Sample Measurement	13.9	7.5						0	1 Continuous	Recording Flow Meter with Totalizer
	Permit Requirement	15.0 (Mx Hr Rt)	Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow  PARM Code 50050 T Add. Desc: IW-5 Mon. Site: FLW-20	Sample Measurement	12.40	4.0						0	1 Continuous	Recording Flow Meter with Totalizer
	Permit Requirement	18.65 (Mx Hr Rt)	Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow  PARM Code 50050 U Add. Desc: IW-6 Mon. Site: FLW-21	Sample Measurement	13.60	8.7						0	1 Continuous	Recording Flow Meter with Totalizer
	Permit Requirement	18.65 (Mx Hr Rt)	Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow  PARM Code 50050 V Add. Desc: IW-7 Mon. Site: FLW-25	Sample Measurement	0.00	0.0						0	1 Continuous	Recording Flow Meter with Totalizer
	Permit Requirement	18.65 (Mx Hr Rt)	Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)
Flow  PARM Code 50050 W Add. Desc: IW-8 Mon. Site: FLW-26	Sample Measurement	0.00	0.0						0	1 Continuous	Recording Flow Meter with Totalizer
	Permit Requirement	18.65 (Mx Hr Rt)	Report (Mo Avg)	MGD						(1 Continuous)	(Recording Flow Meter with Totalizer)

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
BOD, Carbonaceous 5 day, 20C PARM Code 80082 Y Mon. Site: EFB-03	Sample Measurement					3.4			0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
	Permit Requirement					20.0 (Annl Avg)		mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
BOD, Carbonaceous 5 day, 20C PARM Code 80082 B Mon. Site: EFB-03	Sample Measurement				5.8	3.2	3.0		0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
	Permit Requirement				60.0 (Maximum)	45.0 (Wkly Avg)	30.0 (Mo Avg)	mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
Solids, Total Suspended PARM Code 00530 Y Mon. Site: EFB-03	Sample Measurement					4.5			0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
	Permit Requirement					20.0 (Annl Avg)		mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
Solids, Total Suspended PARM Code 00530 B Mon. Site: EFB-03	Sample Measurement				11.2	5.3	4.8		0	1 Daily; 24 hours	24-hr Flow Proportioned Composite
	Permit Requirement				60.0 (Maximum)	45.0 (Wkly Avg)	30.0 (Mo Avg)	mg/L		(1 Daily; 24 hours)	(24-hr Flow Proportioned Composite)
pH PARM Code 00400 B Mon. Site: EFB-03	Sample Measurement				6.7		7.4		0	1 Continuous	Meter
	Permit Requirement				6.0 (Minimum)		8.5 (Maximum)	s.u.		(1 Continuous)	(Meter)
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										10/25/2019	11/06/2020