LENNT RD 4

MANATEE COUNTY GOVERNMENT
Public Works Department

404/C 02025
44795

January 15, 1995

Peter T. McGarry P.E. ,Chief
Florida/Kentucky/South Carolina Permit-Enforcement Section
Water Permits and Enforcement Section-Water Management Division
United States Environmental Protection Agency
345 Courtland Street Northeast
Atlanta, Georgia 30365

Re: Manatee County Solid Waste Management Facility
Permit No. FL-0038881, Fourth Quarter Monitoring Report

Dear Mr. McGarry:

Enclosed for your review is the fourth quarter groundwater monitoring report for 1994 pursuant to the above referenced permit.

There were no stormwater discharges during this period.

If you have any questions, please contact me at (813) 792-8811, Extension 5293.

Sincerely,

Gregory F. Yekaitis
Solid Waste Technical Coordinator

gfy

cc: Chongman Lee, FDEP, Tallahassee
- Lenox E.(Len) Bramble, Director
- John Harllee, Esquire
- Roger Hill, Shroeder-Manatee Ranch
- Leonard Eder, Eder and Associates
- Lisa Perros, USEPA, Region IV, Waste Management District
Daniel T. Gray, Utilities Operations Manager
Gus DiFonzo, Solid Waste Manager

ADMINISTRATION • 4410 - 66th Street West, Bradenton, Florida 34210 • (813) 792-8811 • FAX (813) 795-3490

Printed on Recycled Paper

P.O. Box 25010, Bradenton, Florida 34206

MANATEE COUNTY GOVERNMENT
Public Works Department

January 15, 1995

Peter T. McGarry P.E. ,Chief
Florida/Kentucky/South Carolina Unit-Enforcement Section
Water Permits and Enforcement Section-Water Management Division
United States Environmental Protection Agency
345 Courtland Street Northeast
Atlanta, Georgia 30365

Re: Manatee County Solid Waste Management Facility
Permit No. FL-0038881, Fourth Quarter Monitoring Report

Dear Mr. McGarry:

Enclosed for your review is the fourth quarter groundwater monitoring report for 1994 pursuant to the above referenced permit.

There were no stormwater discharges during this period.

If you have any questions, please contact me at (813) 792-8811, Extension 5293.

Sincerely,

Gregory F. Yekaitis
Solid Waste Technical Coordinator

gfy

cc: Chongman Lee, FDEP, Tallahassee
Lenox E.(Len) Bramble, Director
John Harllee, Esquire
Roger Hill, Shroeder-Manatee Ranch
Leonard Eder, Eder and Associates
Lisa Perros, USEPA, Region IV, Waste Management District
Daniel T. Gray, Utilities Operations Manager
Gus DiFonzo, Solid Waste Manager

ADMINISTRATION • 4410 - 66th Street West, Bradenton, Florida 34210 • (813) 792-8811 • FAX (813) 795-3490

Printed on Recycled Paper

P.O. Box 25010, Bradenton, Florida 34206

MANATEE COUNTY GOVERNMENT
Public Works Department

January 15, 1995

Peter T. McGarry P.E. ,Chief
Florida/Kentucky/South Carolina Unit-Enforcement Section
Water Permits and Enforcement Section-Water Management Division
United States Environmental Protection Agency
345 Courtland Street Northeast
Atlanta, Georgia 30365

Re: Manatee County Solid Waste Management Facility
Permit No. FL-0038881, Fourth Quarter Monitoring Report

Dear Mr. McGarry:

Enclosed for your review is the fourth quarter groundwater monitoring report for 1994 pursuant to the above referenced permit.

There were no stormwater discharges during this period.

If you have any questions, please contact me at (813) 792-8811, Extension 5293.

Sincerely,

Gregory F. Yekaitis
Solid Waste Technical Coordinator

gfy

cc: Chongman Lee, FDEP, Tallahassee
Lenox E.(Len) Bramble, Director
John Harllee, Esquire
Roger Hill, Shroeder-Manatee Ranch
Leonard Eder, Eder and Associates
Lisa Perros, USEPA, Region IV, Waste Management District
Daniel T. Gray, Utilities Operations Manager
Gus DiFonzo, Solid Waste Manager

ADMINISTRATION • 4410 - 66th Street West, Bradenton, Florida 34210 • (813) 792-8811 • FAX (813) 795-3490

P.O. Box 25010, Bradenton, Florida 34206

MANATEE COUNTY GOVERNMENT
Public Works Department

January 15, 1995

Peter T. McGarry P.E. ,Chief
Florida/Kentucky/South Carolina Unit-Enforcement Section
Water Permits and Enforcement Section-Water Management Division
United States Environmental Protection Agency
345 Courtland Street Northeast
Atlanta, Georgia 30365

Re: Manatee County Solid Waste Management Facility
Permit No. FL-0038881, Fourth Quarter Monitoring Report

Dear Mr. McGarry:

Enclosed for your review is the fourth quarter groundwater monitoring report for 1994 pursuant to the above referenced permit.

There were no stormwater discharges during this period.

If you have any questions, please contact me at (813) 792-8811, Extension 5293.

Sincerely,

Gregory F. Yekaitis
Solid Waste Technical Coordinator

gfy

cc: Chongman Lee, FDEP, Tallahassee
Lenox E.(Len) Bramble, Director
John Harllee, Esquire
Roger Hill, Shroeder-Manatee Ranch
Leonard Eder, Eder and Associates
Lisa Perros, USEPA, Region IV, Waste Management District
Daniel T. Gray, Utilities Operations Manager
Gus DiFonzo, Solid Waste Manager

ADMINISTRATION • 4410 - 66th Street West, Bradenton, Florida 34210 • (813) 792-8811 • FAX (813) 795-3490

Printed on Recycled Paper

P.O. Box 25010, Bradenton, Florida 34206

MANATEE COUNTY GOVERNMENT
Public Works Department

January 15, 1995

Peter T. McGarry P.E. ,Chief
Florida/Kentucky/South Carolina Unit-Enforcement Section
Water Permits and Enforcement Section-Water Management Division
United States Environmental Protection Agency
345 Courtland Street Northeast
Atlanta, Georgia 30365

Re: Manatee County Solid Waste Management Facility
Permit No. FL-0038881, Fourth Quarter Monitoring Report

Dear Mr. McGarry:

Enclosed for your review is the fourth quarter groundwater monitoring report for 1994 pursuant to the above referenced permit.

There were no stormwater discharges during this period.

If you have any questions, please contact me at (813) 792-8811, Extension 5293.

Sincerely,

Gregory F. Yekaitis
Solid Waste Technical Coordinator

gfy

cc: Chongman Lee, FDEP, Tallahassee
Lenox E.(Len) Bramble, Director
John Harllee, Esquire
Roger Hill, Shroeder-Manatee Ranch
Leonard Eder, Eder and Associates
Lisa Perros, USEPA, Region IV, Waste Management District
Daniel T. Gray, Utilities Operations Manager
Gus DiFonzo, Solid Waste Manager

MANATEE COUNTY GOVERNMENT
Public Works Department

January 15, 1995

Peter T. McGarry P.E. ,Chief
Florida/Kentucky/South Carolina Unit-Enforcement Section
Water Permits and Enforcement Section-Water Management Division
United States Environmental Protection Agency
345 Courtland Street Northeast
Atlanta, Georgia 30365

Re: Manatee County Solid Waste Management Facility
Permit No. FL-0038881, Fourth Quarter Monitoring Report

Dear Mr. McGarry:

Enclosed for your review is the fourth quarter groundwater monitoring report for 1994 pursuant to the above referenced permit.

There were no stormwater discharges during this period.

If you have any questions, please contact me at (813) 792-8811, Extension 5293.

Sincerely,

Gregory F. Yekaitis
Solid Waste Technical Coordinator

gfy

cc: Chongman Lee, FDEP, Tallahassee
Lenox E.(Len) Bramble, Director
John Harllee, Esquire
Roger Hill, Shroeder-Manatee Ranch
Leonard Eder, Eder and Associates
Lisa Perros, USEPA, Region IV, Waste Management District
Daniel T. Gray, Utilities Operations Manager
Gus DiFonzo, Solid Waste Manager

MANATEE COUNTY GOVERNMENT
Public Works Department

January 15, 1995

Peter T. McGarry P.E. ,Chief
Florida/Kentucky/South Carolina Unit-Enforcement Section
Water Permits and Enforcement Section-Water Management Division
United States Environmental Protection Agency
345 Courtland Street Northeast
Atlanta, Georgia 30365

Re: Manatee County Solid Waste Management Facility
Permit No. FL-0038881, Fourth Quarter Monitoring Report

Dear Mr. McGarry:

Enclosed for your review is the fourth quarter groundwater monitoring report for 1994 pursuant to the above referenced permit.

There were no stormwater discharges during this period.

If you have any questions, please contact me at (813) 792-8811, Extension 5293.

Sincerely,

Gregory F. Yekaitis
Solid Waste Technical Coordinator

gfy

cc: Chongman Lee, FDEP, Tallahassee
Lenox E.(Len) Bramble, Director
John Harllee, Esquire
Roger Hill, Shroeder-Manatee Ranch
Leonard Eder, Eder and Associates
Lisa Perros, USEPA, Region IV, Waste Management District
Daniel T. Gray, Utilities Operations Manager
Gus DiFonzo, Solid Waste Manager

ADMINISTRATION • 4410 - 66th Street West, Bradenton, Florida 34210 • (813) 792-8811 • FAX (813) 795-3490

Printed on Recycled Paper

P.O. Box 25010, Bradenton, Florida 34206

IMAGE QUALITY

AS YOU VIEW THE NEXT PAGE(S), PLEASE NOTE THAT THE ORIGINAL DOCUMENT WAS OF POOR QUALITY

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME MANATEE COUNTY PUBLIC WKS DEPT

ADDRESS CALLER SERVICE 25010 \E

BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL

LOCATION BRADENTON FL 34202

ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0038881 PERMIT NUMBER

(17-19) 004 Q DISCHARGE NUMBER

MINOR

(SUBR TA) Form Approved.

F - FINAL OMB No. 2040-0004

QUARTERLY Approval Expires 10-31-94

EFFLUENT

*** NO DISCHARGE [X] ***

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	10	01	TO	94	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PAGE 1 OF 3

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TURBIDITY	SAMPLE MEASUREMENT	*******	*******		*******	*******		(43)			
00070 3 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	******	*******	*******	29 DAILY MX	NTU		1/MTH	GRAB
TURBIDITY	SAMPLE MEASUREMENT	*******	*******		*******	*******		(43)			
00070 3 0 0 UPSTREAM MONITORING	PERMIT REQUIREMENT	*******	*******	******	*******	*******	REPORT DAILY MX	NTU		1/MTH	GRAB
SPECIFIC CONDUCTANCE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(11)			
00095 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	******	*******	*******	1275 DAILY MX	UMHO/ CM		1/MTH	GRAB
SPECIFIC CONDUCTANCE	SAMPLE MEASUREMENT	*******		(23)	*******	*******	*******				
00095 Q 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	50 DAILY MX	PER-CENT	*******	*******	*******	******		1/MTH	GRAB
SPECIFIC CONDUCTANCE	SAMPLE MEASUREMENT	*******	*******		*******		*******	(11)			
00095 3 0 0 UPSTREAM MONITORING	PERMIT REQUIREMENT	*******	*******	******	*******	REPORT SINGSAMP	*******	UMHO/ CM		SEE PERMIT	GRAB
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*******	*******			*******	*******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	******	5.0 DAILY MN	*******	*******	MG/L		1/MTH	GRAB
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
00310 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	******	*******	*******	REPORT DAILY MX	MG/L		1/MTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Daniel T. Gray
Utilities Operations Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN. AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 813, NUMBER 792-8811

DATE: YEAR 95, MO 01, DAY 17

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

P & Q: USE P IF BACKGROUND <849, OTHERWISE Q. FOR ANY LINE NOT USED, ENTER "NODI=9".

R: REPORT % INCREASE ABOVE BACKGROUND CHLORIDE CONTENT. IGNORE PRINTED UNIT.

~~S: REPORT INCREASE ABOVE BACKGROUND TURBIDITY.~~

MANATEE COUNTY GOVERNMENT
Public Works Department

January 15, 1995

Peter T. McGarry P.E. ,Chief
Florida/Kentucky/South Carolina Unit-Enforcement Section
Water Permits and Enforcement Section-Water Management Division
United States Environmental Protection Agency
345 Courtland Street Northeast
Atlanta, Georgia 30365

Re: Manatee County Solid Waste Management Facility
Permit No. FL-0038881, Fourth Quarter Monitoring Report

Dear Mr. McGarry:

Enclosed for your review is the fourth quarter groundwater monitoring report for 1994 pursuant to the above referenced permit.

There were no stormwater discharges during this period.

If you have any questions, please contact me at (813) 792-8811, Extension 5293.

Sincerely,

Gregory F. Yekaitis
Solid Waste Technical Coordinator

gfy

cc: Chongman Lee, FDEP, Tallahassee
Lenox E.(Len) Bramble, Director
John Harllee, Esquire
Roger Hill, Shroeder-Manatee Ranch
Leonard Eder, Eder and Associates
Lisa Perros, USEPA, Region IV, Waste Management District
Daniel T. Gray, Utilities Operations Manager
Gus DiFonzo, Solid Waste Manager

TEE NAME/ADDRESS (Include Name/Location if different)
MANATEE COUNTY PUBLIC WKS DEPT
CALLER SERVICE 25010 \E
BRADENTON FL 34206

LERA ROAD LANDFILL
BRADENTON FL 34202
N: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: FL0038881

(17-19) DISCHARGE NUMBER: 004 Q

MONITORING PERIOD
FROM YEAR 94 MO 10 DAY 01 (20-21) (22-23) (24-25)
TO YEAR 94 MO 12 DAY 31 (26-27) (28-29) (30-31)

MINOR
(SUBTA) Form Approved.
F - FINAL OMB No. 2040-0004
QUARTERLY Approval expires 10-31-94 E III
EFFLUENT
*** NO DISCHARGE |_X| ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
GEN DEMAND, CHEM. IGH LEVEL) (COD)	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
40 1 0 0 LUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	REPORT DAILY MX	MG/L		01RLY	GRAB
00 1 0 0 LUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******			*******		(12)			
	PERMIT REQUIREMENT	*******	*******	*****	6.0 MINIMUM	*******	8.5 MAXIMUM	SU		01RLY	GRAB
ALINITY, TOTAL (AS CACO3)	SAMPLE MEASUREMENT	*******	*******			*******	*******	(19)			
10 1 0 0 LUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	*****	20.0 MINIMUM	*******	*******	MG/L		01RLY	GRAB
IDS, TOTAL PLINED	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
30 1 0 0 LUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	REPORT DAILY MX	MG/L		01RLY	GRAB
AND GREASE ON EXTR-GRAV METH	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
56 1 0 0 LUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	5.0 DAILY MX	MG/L		01RLY	GRAB
ROGEN, KJELDAHL TAL (AS N)	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
25 1 0 0 FLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	REPORT DAILY MX	MG/L		01RLY	GRAB
RBON, TOT ORGANIC OC)	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
80 1 0 0 FLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	REPORT DAILY MX	MG/L		01RLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Daniel T. Gray Utilities Operations Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	813 AREA CODE	792-8811 NUMBER	95 YEAR	01 MO	17 DAY
TYPED OR PRINTED						

MENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

: USE 1 IF BACKGROUND <849, OTHERWISE 0. FOR ANY LINE NOT USED, ENTER "NODI=9".
REPORT % INCREASE ABOVE BACKGROUND CHLORIDE CONTENT. IGNORE PRINTED UNIT.
~~REPORT % INCREASE ABOVE BACKGROUND TURBIDITY.~~

ITTEE NAME/ADDRESS (Include Name/Location if different)
MANATEE COUNTY PUBLIC WKS DEPT
ESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

LITY LENA ROAD LANDFILL
ATION BRADENTON FL 34202
IN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0038681 — PERMIT NUMBER
(17-19) 004 Q — DISCHARGE NUMBER

MONITORING PERIOD
FROM YEAR 94 MO 10 DAY 01 TO YEAR 94 MO 12 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
QUARTERLY Approval expires 10-31-94 E III
EFFLUENT
*** NO DISCHARGE [X] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
HARDNESS, TOTAL (AS CACO3) 00900 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		WKLY	GRAB
CHLORIDE (AS CL) 00940 1 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	LO DAILY MX	MG/L		WKLY	GRAB
CHLORIDE (AS CL) 00940 1 0 0 STREAM MONITORING	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		WKLY	GRAB
ARSENIC, TOTAL RECOVERABLE 01002 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.05 DAILY MX	MG/L		WKLY	GRAB
IRON TOTAL RECOVERABLE 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	1.0 DAILY MX	MG/L		WKLY	GRAB
LEAD TOTAL RECOVERABLE 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		WKLY	CALCD
SILVER TOTAL RECOVERABLE 01079 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(28)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.07 DAILY MX	UG/L		WKLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Daniel T. Gray
Utilities Operations Manager
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 813 | NUMBER 792-8811

DATE: YEAR 95 | MO 01 | DAY 17

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

Q: USE P IF BACKGROUND <849, OTHERWISE Q. FOR ANY LINE NOT USED, ENTER "NODI=9".
: REPORT % INCREASE ABOVE BACKGROUND CHLORIDE CONTENT. IGNORE PRINTED UNIT.
INCREASE ABOVE BACKGROUND TURBIDITY.

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. (REPLACES EPA FORM T-49 WHICH MAY NOT BE USED.)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLEE SERVICE 25010 \E
BRADENTON FL 34206

FACILITY ELLA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0038881 PERMIT NUMBER
(17-19) 004 Q DISCHARGE NUMBER

MONITORING PERIOD
FROM YEAR 94 MO 10 DAY 01 (20-21) (22-23) (24-25)
TO YEAR 94 MO 12 DAY 31 (26-27) (28-29) (30-31)

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
QUARTERLY Approval Expires 10-31-92
EFFLUENT PAGE III
*** NO DISCHARGE |_X_| ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
ZINC, TOTAL RECOVERABLE 01094 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	CALCT
CADMIUM, TOTAL RECOVERABLE 01113 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(26)			
	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	REPORT DAILY MX	UG/L		QTRLY	CALCT
LEAD, TOTAL RECOVERABLE 01114 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	CALCT
CHROMIUM, TOTAL RECOVERABLE 01118 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	0.0 DAILY MX	MG/L		QTRLY	GRAB
COPPER, TOTAL RECOVERABLE 01119 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	0.03 DAILY MX	MG/L		QTRLY	GRAB
SOLIDS, TOTAL DISSOLVED (TDS) 70296 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB
MERCURY, TOTAL RECOVERABLE 71901 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(28)			
	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	0.012 DAILY MX	UG/L		QTRLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Daniel T. Gray
Utilities Operations Manager
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 813, NUMBER 792-8811

DATE: YEAR 95, MO 01, DA 1

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

[illegible]: USE P IF BACKGROUND <849, OTHERWISE Q. FOR ANY LINE NOT USED, ENTER "NODI=9".
[illegible]: REPORT A INCREASE ABOVE BACKGROUND CHLORIDE CONTENT. IGNORE PRINTED UNIT.
[illegible] INCREASE ABOVE BACKGROUND TURBIDITY.

[illegible] previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

02817/941007-1747

ITTEE NAME/ADDRESS (Include y Name/Location if different)
MANATEE COUNTY PUBLIC WKS DEPT
CALLEN SERVICE 25010 \E
BRADENTON FL 34206

LITY ELNA ROAD LANDFILL
ATION BRADENTON FL 34202
TN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19)

FL0038881 — PERMIT NUMBER
004 1 — DISCHARGE NUMBER

MONITORING PERIOD
FROM YEAR 94 MO 10 DAY 01 (20-21) (22-23) (24-25)
TO YEAR 94 MO 10 DAY 31 (26-27) (28-29) (30-31)

MINOR
(SUBR TA)
F - FINAL
STAGE III
EFFLUENT
*** NO DISCHARGE | X | ***

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
50 STATIC 96HR ACU RIODAPHNIA 350 P 0 1 - COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
50 STATIC 96HR ACU RIODAPHNIA 350 P 0 1 - COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
50 STATIC 96HR ACU IMEPHALES 350 P 0 1 - COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
50 STATIC 96HR ACU IMEPHALES 350 P 0 1 - COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
OW, IN CONDUIT OR NU TREATMENT PLANT 050 1 0 0 FLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******		(03)	*******	*******	*******				
	PERMIT REQUIREMENT	*******	REPORT DAILY MX	MGD	*******	*******	*******	**** ****		CONTINUOUS	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Utilities Operations Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE 813	NUMBER 7928811	YEAR 95	MO 01	DAY 17
TYPED OR PRINTED						

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

NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
FL0038881	004 1

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM	94	11	01	TO	94	11	30

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
STAGE III Approval Expires 10-31-94
EFFLUENT
*** NO DISCHARGE [X] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATRE 96HR ACU CERIODAPHNIA TANBD P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	GK REG*
LC50 STATRE 96HR ACU CERIODAPHNIA TANBD W 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	GK REG
LC50 STATRE 96HR ACU PIMEPHALES TANBD P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	GK REG
LC50 STATRE 96HR ACU PIMEPHALES TANBD W 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	GK REG
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******		(03)	*******	*******	*******				
	PERMIT REQUIREMENT	*******	REPORT DAILY MX	MGD	*******	*******	*******	**** ****		CONTINUOUS	CONTIN UOUS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Daniel T. Gray
Utilities Operations Manager
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 813 | NUMBER 792-8811

DATE: YEAR 95 | MO 01 | DAY 17

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

(2-16) FL0038881 PERMIT NUMBER
(17-19) 004 1 DISCHARGE NUMBER

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
STAGE III Approval expires 10-31-94
EFFLUENT DISCHARGE
*** NO DISCHARGE | X | ***

MONITORING PERIOD
FROM YEAR 94 MO 12 DAY 01 TO YEAR 94 MO 12 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATIC 96HR ACU CERIODAPHNIA TANSO P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATIC 96HR ACU CERIODAPHNIA TANSO W 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATIC 96HR ACU PIMEPHALES TANSO P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATIC 96HR ACU PIMEPHALES TANSO W 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******		(03)	*******	*******	*******				
	PERMIT REQUIREMENT	*******	REPORT DAILY MX	MGD	*******	*******	*******	**** ****		CONTIN UOUS	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Daniel T. Gray
Utilities Operations Manager
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 813, NUMBER 792-8811

DATE: YEAR 95, MO 01, DAY 17

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

PERMITTEE NAME/ADDRESS *(Include*

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME MANATEE COUNTY PUBLIC WKS DEPT

ADDRESS CALLE SERVICE 25010 \E

BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL

LOCATION BRADENTON FL 34202

ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0058881 PERMIT NUMBER

(17-19) 005 W DISCHARGE NUMBER

MINOR

(SUBR TA) Form Approved.

F - FINAL OMB No. 2040-0004

QUARTERLY Approval Expires 10-31-96 GE II

EFFLUENT

*** NO DISCHARGE |X| ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	10	01	TO	94	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TURBIDITY	SAMPLE MEASUREMENT	*******	*******		*******	*******		(43)			
00070 1 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	29 DAILY MX	NTU		1/WK/LY	GRAB
TURBIDITY	SAMPLE MEASUREMENT	*******	*******		*******	*******		(43)			
00070 1 0 0 UPSTREAM MONITORING	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	NTU		1/WK/LY	GRAB
SPECIFIC CONDUCTANCE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(11)			
00095 1 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	1275 DAILY MX	UMHO/ CM		1/WK/LY	GRAB
SPECIFIC CONDUCTANCE	SAMPLE MEASUREMENT	*******		(23)	*******	*******	*******				
00095 1 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	50 DAILY MX	PER-CENT	*******	*******	*******	**** ****		1/WK/LY	GRAB
SPECIFIC CONDUCTANCE	SAMPLE MEASUREMENT	*******	*******		*******		*******	(11)			
00095 1 0 0 UPSTREAM MONITORING	PERMIT REQUIREMENT	*******	*******	**** ****	*******	REPORT SINGSAMP	*******	UMHO/ CM		SEE PERMIT	GRAB
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*******	*******			*******	*******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	**** ****	5.0 DAILY MN	*******	*******	MG/L		1/WK/LY	GRAB
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
00310 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		1/WK/LY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Daniel T. Gray
Utilities Operations Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE 813 NUMBER 792-8811

DATE

YEAR 95 MO 01 DAY 17

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

[illegible]: USE P IF BACKGROUND <849, OTHERWISE Q. FOR ANY LINE NOT USED, ENTER "NODI=9".

[illegible]: REPORT A INCREASE ABOVE BACKGROUND CHLORIDE CONTENT. IGNORE PRINTED UNIT.

[illegible] INCREASE ABOVE BACKGROUND TURBIDITY.

ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

PERMIT NUMBER: FL0038881
DISCHARGE NUMBER: 005 W

MONITORING PERIOD
FROM YEAR 94 MO 10 DAY 01 (20-21) (22-23) (24-25)
TO YEAR 94 MO 12 DAY 31 (26-27) (28-29) (30-31)

(SUBMIT ALL) Form Approved.
F - FINAL OMB No. 2040-0004
QUARTERLY Approval Expires 10-31-96
EFFLUENT
*** NO DISCHARGE |_x| ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	***** *****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******			*******		(12)			
	PERMIT REQUIREMENT	*******	*******	***** *****	6.0 MINIMUM	*******	8.5 MAXIMUM	SU		QTRLY	GRAB
ALKALINITY, TOTAL (AS CACO3) 00410 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******			*******	*******	(19)			
	PERMIT REQUIREMENT	*******	*******	***** *****	20.0 MINIMUM	*******	*******	MG/L		QTRLY	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	***** *****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	***** *****	*******	*******	5.0 DAILY MX	MG/L		QTRLY	GRAB
NITROGEN, KJELDAHL TOTAL (AS N) 00625 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	***** *****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	***** *****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Daniel T. Gray Utilities Operations Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*		AREA CODE 813	NUMBER 792-8811	YEAR 95	MO 01	DA 17
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

P & N: USE P IF BACKGROUND <849, OTHERWISE N. FOR ANY LINE NOT USED, ENTER "NODI=9".
A: REPORT % INCREASE ABOVE BACKGROUND CHLORIDE CONTENT. IGNORE PRINTED UNIT.
T: USE T IF ABOVE BACKGROUND TURBIDITY.

PERMITTEE NAME/ADDRESS *(Include*

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME MANATEE COUNTY PUBLIC WKS DEPT

ADDRESS CALLER SERVICE 25010 \E

SARASOTA FL 34206

FACILITY LENA ROAD LANDFILL

LOCATION BRADENTON FL 34202

ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0038881 PERMIT NUMBER

(17-19) 005 Q. DISCHARGE NUMBER

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM	94	10	01	TO	94	12	31

MINOR

(SUBR TA) Form Approved.

F - FINAL OMB No. 2040-0004

QUARTERLY Approval Expires 10-31-94 GE II

EFFLUENT

*** NO DISCHARGE | X | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
HARDNESS, TOTAL (AS CACO3) 00900 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB
CHLORIDE (AS CL) 00940 1 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	10 DAILY MX	MG/L		QTRLY	GRAB
CHLORIDE (AS CL) 00940 2 0 0 UPSTREAM MONITORING	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB
ARSENIC, TOTAL RECOV GRABLE 01002 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.05 DAILY MX	MG/L		QTRLY	GRAB
IRON TOTAL RECOVERABLE 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	1.0 DAILY MX	MG/L		QTRLY	GRAB
NICKEL TOTAL RECOVERABLE 01074 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	CALCT
CADMIUM TOTAL RECOVERABLE 01113 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(28)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.01 DAILY MX	UG/L		QTRLY	GRAB
LEAD TOTAL RECOVERABLE 01114 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB
CHROMIUM TOTAL RECOVERABLE 01113 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB

TELEPHONE

DATE 95 01 11

Facility Name/Location if different)

NAME MANATEE COUNTY PUBLIC WKS DEPT

ADDRESS CALLER SERVICE 25010 \E

BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL

LOCATION BRADENTON FL 34202

ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)	(17-19)
FL0038881	005 Q
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	~~94~~	~~10~~	~~01~~	TO	~~94~~	~~12~~	~~31~~
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MINOR

(SUBR TA) Form Approved.

F - FINAL OMB No. 2040-0004

QUARTERLY Approval expires 10-31-96 GE II

EFFLUENT

*** NO DISCHARGE | X | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
ZINC, TOTAL RECOVERABLE, 01094, 1 0 0, EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		01/WK	CALCTD
CADMIUM, TOTAL RECOVERABLE, 01113, 1 0 0, EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(28)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	UG/L		01/WK	CALCTD
LEAD, TOTAL RECOVERABLE, 01114, 1 0 0, EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		01/WK	CALCTD
CHROMIUM, TOTAL RECOVERABLE, 01119, 1 0 0, EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	1.0 DAILY MX	MG/L		01/WK	GRAB
COPPER, TOTAL RECOVERABLE, 01119, 1 0 0, EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.03 DAILY MX	MG/L		01/WK	GRAB
SOLIDS, TOTAL DISSOLVED (TDS), 70295, 1 0 0, EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		01/WK	GRAB
MERCURY, TOTAL RECOVERABLE, 71901, 1 0 0, EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(28)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.012 DAILY MX	UG/L		01/WK	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE			DATE		
Daniel T. Gray Utilities Operations	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE 813	NUMBER 792-8811	YEAR 95	MO 01	DAY 17

Facility Name/Location if different)

NAME MANATEE COUNTY PUBLIC WKS DEPT

ADDRESS CALLE SERVICE 25010 \E

BRADENTON FL 34206

FACILITY LA ROAD LANDFILL

LOCATION BRADENTON FL 34202

ATTN: RICHARD A. WILFORD, DIRECTOR

DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0038881 PERMIT NUMBER

(17-19) 005 1 DISCHARGE NUMBER

MINOR

(SUBR TA) Form Approved.

F - FINAL OMB No. 2040-0004

STAGE II S Approval Expires 10-31-94 ARGE

EFFLUENT

*** NO DISCHARGE | X | ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM	94	10	01	TO	94	10	31

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATIC 96HR ACU CERIODAPHNIA TANGE P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	***** *****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATIC 96HR ACU CERIODAPHNIA TANGE P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	***** *****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATIC 96HR ACU PIMEPHALES TANGE P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	***** *****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATIC 96HR ACU PIMEPHALES TANGE P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	***** *****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
FLOW IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******		(03)	*******	*******	*******				
	PERMIT REQUIREMENT	*******	REPORT DAILY MX	MGD	*******	*******	*******	***** *****		CONTINUOUS	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Daniel T. Gray
Utilities Operations Manager

TYPED OR PRINTED

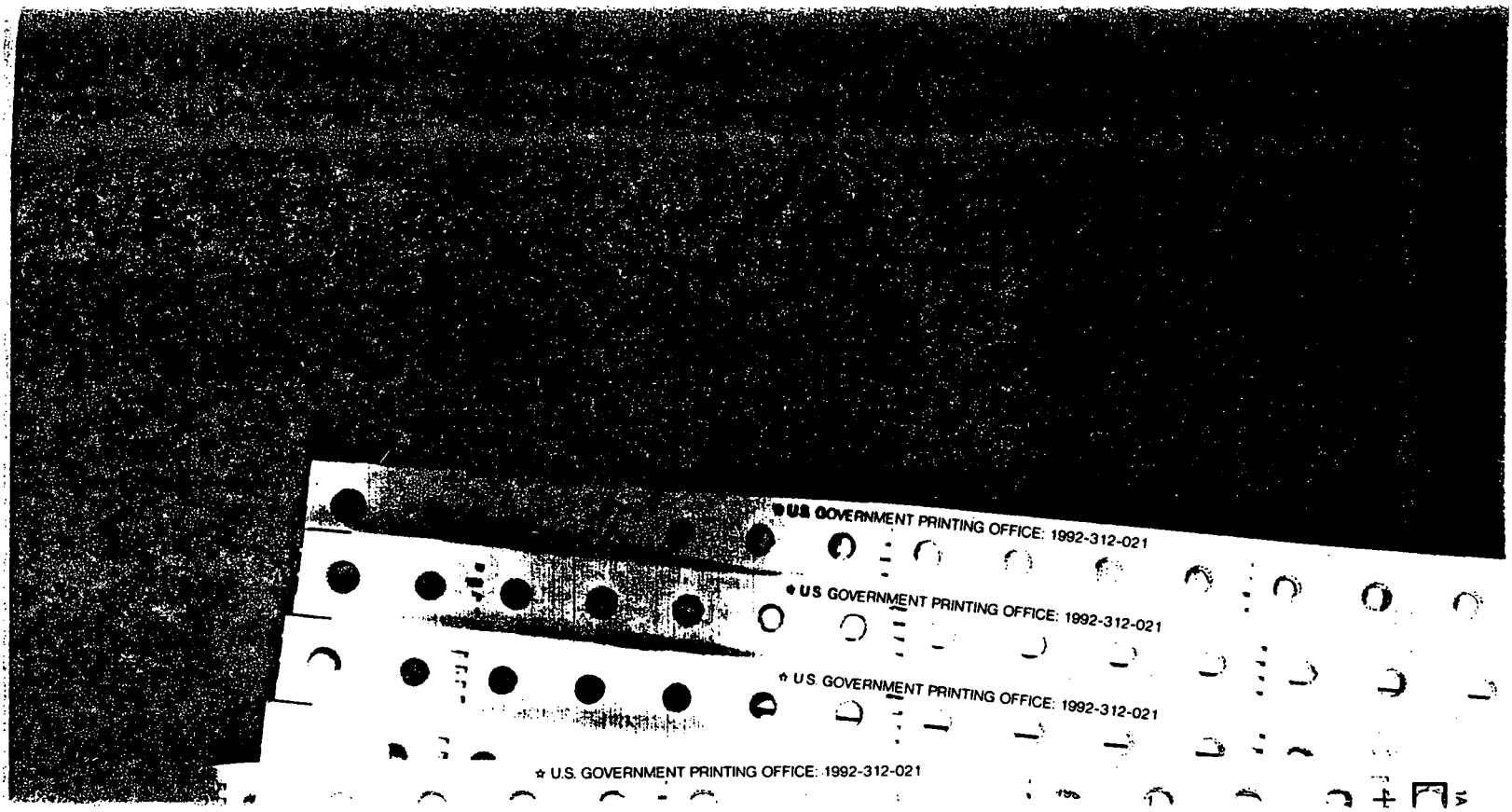
I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 813, NUMBER 797-8811

DATE: YEAR 95, MO 01, DAY 17

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*


U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021
U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021
U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021
U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021

ADDRESS CALLER SERVICE 29010 FL
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

PERMIT NUMBER: FL0036861
DISCHARGE NUMBER: 003 A

MONITORING PERIOD
FROM YEAR 94 MO 11 DAY 01 (20-21) (22-23) (24-25)
TO YEAR 94 MO 11 DAY 30 (26-27) (28-29) (30-31)

(SUBR TAY Form Approved.
F - FINAL OMB No. 2040-0004
STAGE II S[illegible] Approval expires 10-31-94 DISCHARGE
EFFLUENT
*** NO DISCHARGE [X] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATIC 96HR ACU CERIODAPHNIA TANSU P C 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	***** *****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATIC 96HR ACU CERIODAPHNIA TANSU P C 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	***** *****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATIC 96HR ACU PIMEPHALES TANSU P C 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	***** *****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATIC 96HR ACU PIMEPHALES TANSU P C 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	***** *****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
FLOW IN CONDUIT OR THRU TREATMENT PLANT 50050 1 D 3 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******		(03)	*******	*******	*******				
	PERMIT REQUIREMENT	*******	REPORT DAILY MX	MGD	*******	*******	*******	***** *****		CONTINUOUS	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Daniel T. Gray
Utilities Operations Manager
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 813 NUMBER 792-8811

DATE: YEAR 95 MO 01 DAY 17

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME MANATEE COUNTY PUBLIC WKS DEPT

ADDRESS BALLEK SERVICE 25010 \E

BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL

LOCATION BRADENTON FL 34202

ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0038881 PERMIT NUMBER

(17-19) 005 1 DISCHARGE NUMBER

MINOR

(SUBR TA) Form Approved.

F - FINAL OMB No. 2040-0004

STAGE II S[illegible] Approval Expires 10-31-94 ARGE

EFFLUENT

*** NO DISCHARGE [X] ***

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	12	01	TO	94	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATIC 96HR ACU CERIODAPHNIA TAN3C P C 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	******	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATIC 96HR ACU CERIODAPHNIA TAN3C P C 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	******	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATIC 96HR ACU PIMEPHALES TAN3C P C 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	******	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATIC 96HR ACU PIMEPHALES TAN3C P C 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	******	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******		(03)	*******	*******	*******				
	PERMIT REQUIREMENT	*******	REPORT DAILY MX	MGD	*******	*******	*******	******		CONTIN UOUS	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Daniel T. Gray
Utilities Operations Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME MANATEE COUNTY PUBLIC WKS DEPT

ADDRESS CALLE SERVICE 25010 \E

BRADENTA FL 34206

FACILITY LENA ROAD LANDFILL

LOCATION BRADENTON FL 34202

ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0036881 — PERMIT NUMBER

(17-19) 006 Q — DISCHARGE NUMBER

MONITORING PERIOD

FROM YEAR 94 (20-21) MO 10 (22-23) DAY 01 (24-25) TO YEAR 94 (26-27) MO 12 (28-29) DAY 31 (30-31)

MINOR

(SUBR TA) Form Approved.

F - FINAL OMB No. 2040-0004

QUARTERLY Approval Expires 10-31-95

EFFLUENT STAGE II

*** NO DISCHARGE [X] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TURBIDITY	SAMPLE MEASUREMENT	*******	*******		*******	*******		(43)			
00070 3 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	29 DAILY MX	NTU		1/MTHLY	GRAB
TURBIDITY	SAMPLE MEASUREMENT	*******	*******		*******	*******		(43)			
00070 3 0 0 UPSTREAM MONITORING	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	NTU		1/MTHLY	GRAB
SPECIFIC CONDUCTANCE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(11)			
00095 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	1275 DAILY MX	UMHO/ CM		1/MTHLY	GRAB
SPECIFIC CONDUCTANCE	SAMPLE MEASUREMENT	*******		(23)	*******	*******	*******				
00095 R 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	50 DAILY MX	PER-CENT	*******	*******	*******	**** ****		1/MTHLY	GRAB
SPECIFIC CONDUCTANCE	SAMPLE MEASUREMENT	*******	*******		*******		*******	(11)			
00095 U 0 0 UPSTREAM MONITORING	PERMIT REQUIREMENT	*******	*******	**** ****	*******	REPORT SINGSAMP	*******	UMHO/ CM		SEE PERMIT	GRAB
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*******	*******			*******	*******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	**** ****	5.0 DAILY MN	*******	*******	MG/L		1/MTHLY	GRAB
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
00310 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		1/MTHLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Daniel T. Gray
Utilities Operations

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 813, NUMBER 792-8811

DATE: YEAR 95, MO 01, DAY 17

ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

FL0038881 — PERMIT NUMBER
006 Q — DISCHARGE NUMBER

(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
QUARTERLY Approval expires 10-31-96 GE II
EFFLUENT
*** NO DISCHARGE [X] ***

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	~~94~~	~~10~~	~~01~~	TO	~~94~~	~~12~~	~~31~~
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	REPORT DAILY MX	MG/L		01RLY	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******			*******		(12)			
	PERMIT REQUIREMENT	*******	*******	*****	6.0 MINIMUM	*******	8.5 MAXIMUM	SU		01RLY	GRAB
ALKALINITY, TOTAL (AS CACO3) 00410 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******			*******	*******	(19)			
	PERMIT REQUIREMENT	*******	*******	*****	20.0 MINIMUM	*******	*******	MG/L		01RLY	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	REPORT DAILY MX	MG/L		01RLY	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	5.0 DAILY MX	MG/L		01RLY	GRAB
NITROGEN, KJELDAHL TOTAL (AS N) 00625 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	REPORT DAILY MX	MG/L		01RLY	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	REPORT DAILY MX	MG/L		01RLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Daniel T. Gray Utilities Operations Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319 *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*		813	752-8811	95	01	17
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

~~00340~~: USE P IF BACKGROUND <849, OTHERWISE Q. FOR ANY LINE NOT USED, ENTER "NODI=9".
00940: REPORT % INCREASE ABOVE BACKGROUND CHLORIDE CONTENT. IGNORE PRINTED UNIT.
~~00480~~: REPORT % INCREASE ABOVE BACKGROUND TURBIDITY.

PERMITTEE NAME/ADDRESS *(Include*

NATIONAL POLLUTANT DISCHARGE [illegible]

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME MANATEE COUNTY PUBLIC WKS DEPT

ADDRESS CALLER SERVICE 25010 \E...

BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL

LOCATION BRADENTON FL 34202

ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0038881 PERMIT NUMBER

(17-19) 006 Q DISCHARGE NUMBER

MONITORING PERIOD

FROM YEAR 94 MO 10 DAY 01 (20-21) (22-23) (24-25)

TO YEAR 94 MO 12 DAY 31 (26-27) (28-29) (30-31)

MINOR

(SUBR TA) Form Approved.

F - FINAL OMB No. 2040-0004

QUARTERLY MONITORING STAGE II Approval expires 10-31-94

EFFLUENT

*** NO DISCHARGE | x | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
HARDNESS, TOTAL (AS CACO3) 00900 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	***** *****	*******	*******	REPORT DAILY MX	MG/L		1/MTHLY	GRAB
CHLORIDE (AS CL) 00940 K 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	***** *****	*******	*******	10. DAILY MX	MG/L		1/MTHLY	GRAB
CHLORIDE (AS CL) 00940 2 0 0 UPSTREAM MONITORING	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	***** *****	*******	*******	REPORT DAILY MX	MG/L		1/MTHLY	GRAB
ARSENIC, TOTAL RECOV ERABLE 01002 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	***** *****	*******	*******	0.05 DAILY MX	MG/L		1/MTHLY	GRAB
IRON TOTAL RECOVERABLE 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	***** *****	*******	*******	1.0 DAILY MX	MG/L		1/MTHLY	GRAB
NICKEL TOTAL RECOVERABLE 01074 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	***** *****	*******	*******	REPORT DAILY MX	MG/L		1/MTHLY	CALCLD
SILVER TOTAL RECOVERABLE 01079 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(28)			
	PERMIT REQUIREMENT	*******	*******	***** *****	*******	*******	0.01 DAILY MX	UG/L		1/MTHLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE	DATE
Daniel T. Gray Utilities Operations Manager TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	813	

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

...USE IF BACKGROUND <.049, OTHERWISE...

...REPORT = INCREASE ABOVE BACK...

EPA Form 3320-1 (12-90)

PRINTING OFFICE: 1992-312-021
FACILITY
LOCATION
ATTN:
U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021

Facility Name/Location if different)

NAME MANATEE COUNTY PUBLIC WKS DEPT

ADDRESS CALLER SERVICE 25010 \E

BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL

LOCATION BRADENTON FL 34202

ATTN: RICHARD A. WILFORD, DIRECTOR

DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0038881 PERMIT NUMBER

(17-19) 006 Q DISCHARGE NUMBER

MINOR

(SUBR TA) Form Approved.

F - FINAL OMB No. 2040-0004

QUARTERLY Approval expires 10-31-94 GE II

EFFLUENT

*** NO DISCHARGE | X | ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM	94	10	01	TO	94	12	31

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
ZINC, TOTAL RECOVERABLE, 01094 1 0 0, EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	CALCTD
CADMIUM, TOTAL RECOVERABLE, 01113 1 0 0, EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(28)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	UG/L		QTRLY	CALCTD
LEAD, TOTAL RECOVERABLE, 01114 1 0 0, EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	CALCTD
CHROMIUM, TOTAL RECOVERABLE, 01118 1 0 0, EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	1.0 DAILY MX	MG/L		QTRLY	GRAB
COPPER, TOTAL RECOVERABLE, 01119 1 0 0, EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.03 DAILY MX	MG/L		QTRLY	GRAB
SOLIDS, TOTAL DISSOLVED (TDS), 70296 1 0 0, EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB
MERCURY, TOTAL RECOVERABLE, 71901 1 0 0, EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(28)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.012 DAILY MX	UG/L		QTRLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Daniel T. Gray Utilities Operations Manager TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE 813	NUMBER 747-8811	YEAR 95	MO 01	DAY 17

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

[illegible]: USE P IF BACKGROUND <849, OTHERWISE Q. FOR ANY LINE NOT USED, ENTER "NODI=9".

[illegible] REPORT = INCREASE ABOVE BACKGROUND CHLORIDE CONTENT. IGNORE PRINTED UNIT.

[illegible] INCREASE ABOVE BACKGROUND TURBIDITY

DISCHARGE NUMBER

P - FINAL OMB No. 2040-0004

STAGE II STATE/NPDES DISCHARGE
EFFLUENT
*** NO DISCHARGE [X] ***

Approval Expires 10-31-96

NOTE: Read instructions before completing this form.

FACILITY LENA ROAD LANDFILL

LOCATION SARASOTA FL 34202

ATTN: RICHARD A. WILFORD, DIRECTOR

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	10	01	TO	94	10	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATIC 96HR ACU CERIODAPHNIA TANSS P C 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	****** ******	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	GK REG
LC50 STATIC 96HR ACU CERIODAPHNIA TANSS W C 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	****** ******	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	GK REG
LC50 STATIC 96HR ACU PIMEPHALES TANSS P C 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	****** ******	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	GK REG
LC50 STATIC 96HR ACU PIMEPHALES TANSS W C 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	****** ******	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	GK REG
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******		(03)	*******	*******	*******				
	PERMIT REQUIREMENT	*******	REPORT DAILY MX	MGD	*******	*******	*******	****** ******		CONTINUOUS	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Daniel T. Gray
Utilities Operations
Manager

TYPED OR PRINTED

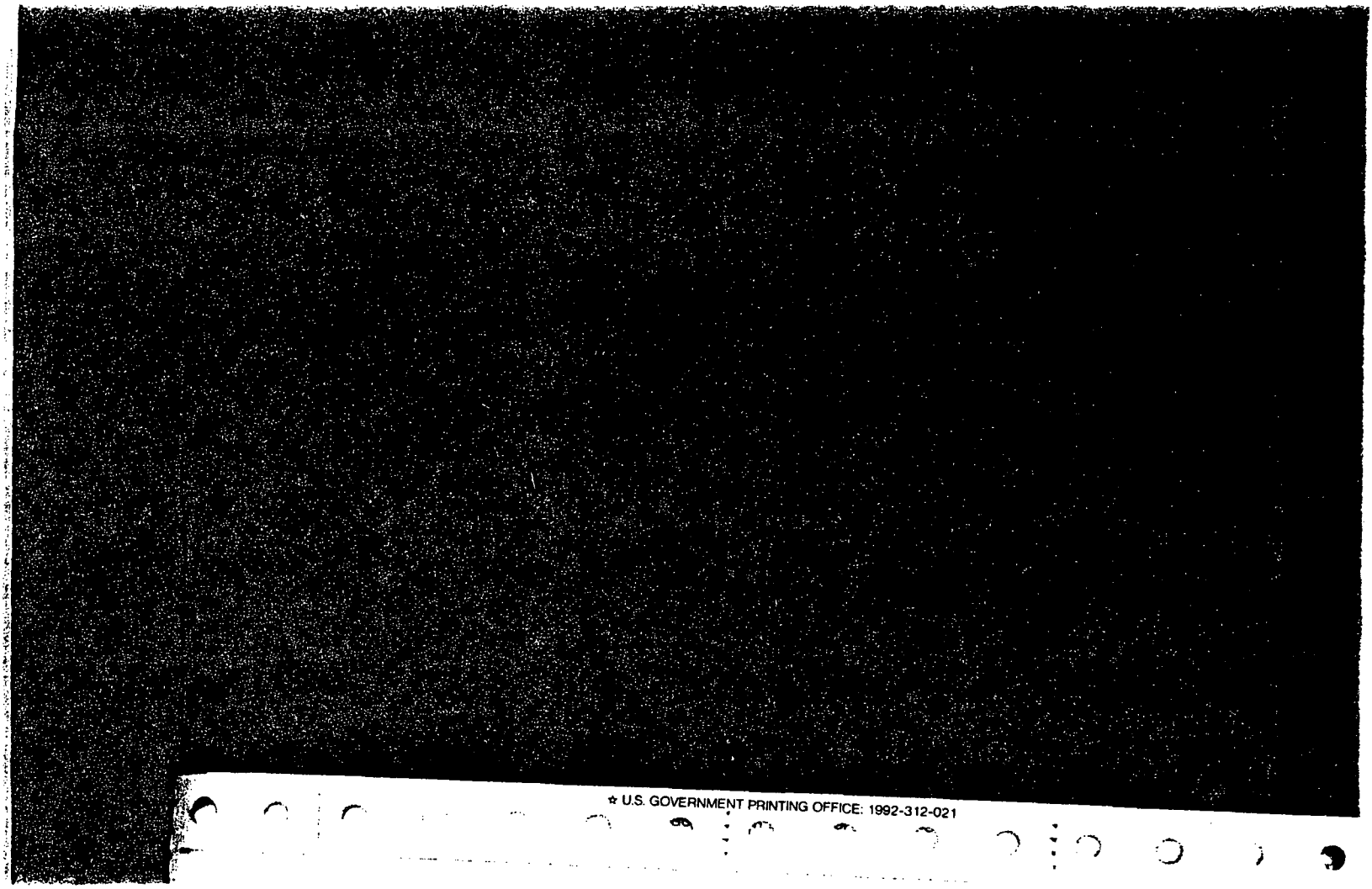
I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 813 | NUMBER 792-8811

DATE: YEAR 95 | MO 01 | DAY 17

STATEMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*



☆ U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021

TTEE NAME/ADDRESS (Include Name/Location if different)
MANATEE COUNTY PUBLIC WKS DEPT
ESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

ITY ELLENTON LANDFILL
TION BRADENTON FL 34202
: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: FL0038881
(17-19) DISCHARGE NUMBER: 006 1

MONITORING PERIOD
FROM YEAR (20-21) 94 MO (22-23) 11 DAY (24-25) 01 TO YEAR (26-27) 94 MO (28-29) 11 DAY (30-31) 30

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
STAGE II S Approval expires 10-31-94 ARGE
EFFLUENT
*** NO DISCHARGE |X| ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
3 STATRE 96HR ACU RIODAPHNIA	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
3B P D 1 COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	******	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	GR REQ
3 STATRE 96HR ACU RIODAPHNIA	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
3B P D 1 COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	******	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	GR REQ
3 STATRE 96HR ACU EPHALES	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
3B P D 1 COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	******	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	GR REQ
3 STATRE 96HR ACU EPHALES	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
3B P D 1 COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	******	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	GR REQ
W IN CONDUIT OR W TREATMENT PLANT	SAMPLE MEASUREMENT	*******		(03)	*******	*******	*******				
50 1 D 0 FLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	REPORT DAILY MX	MGD	*******	*******	*******	******		CONTINUOUS	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

C/TITLE PRINCIPAL EXECUTIVE OFFICER
niel T. Gray
ilities Operations
nager
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 813 | NUMBER 792-8811

DATE: YEAR 95 | MO 01 | DAY 17

ENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

PERMITTEE NAME/ADDRESS (Include facility Name/Location if different)

NAME MANATEE COUNTY PUBLIC WKS DEPT

ADDRESS CALLER SERVICE 25010 \E

BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL

LOCATION BRADENTON FL 34202

ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM

DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0038881 PERMIT NUMBER

(17-19) 006 1 DISCHARGE NUMBER

MONITORING PERIOD

FROM YEAR 94 (20-21) MO 12 (22-23) DAY 01 (24-25) TO YEAR 94 (26-27) MO 12 (28-29) DAY 31 (30-31)

MINOR

(SUBR TA) Form Approved.

F - FINAL OMB No. 2040-0004

STAGE II STORMWATER DISCHARGE Approval expires 10-31-94

EFFLUENT

*** NO DISCHARGE |X| ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATRE 96HR ACU CERIODAPHNIA TANSB P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	****** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	GR REG
LC50 STATRE 96HR ACU CERIODAPHNIA TANSB Q 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	****** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	GR REG
LC50 STATRE 96HR ACU PIMEPHALES TANSC P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	****** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	GR REG
LC50 STATRE 96HR ACU PIMEPHALES TANSC Q 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	****** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	GR REG
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******		(03)	*******	*******	*******				
	PERMIT REQUIREMENT	*******	REPORT DAILY MX	MGD	*******	*******	*******	****** ****		CONTINUOUS	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Daniel T. Gray
Utilities Operations Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 813 | NUMBER 792-8811

DATE: YEAR 95 | MO 01 | DAY 17

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME MANATEE COUNTY PUBLIC WKS DEPT

ADDRESS CALLER SERVICE 25010 \E

BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL

LOCATION BRADENTON FL 34202

ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0038881 PERMIT NUMBER

(17-19) 003 Q DISCHARGE NUMBER

MINOR

(SUBR TA) Form Approved.

F - FINAL OMB No. 2040-0004

QUARTERLY Approval Expires 10-31-96 E I.

EFFLUENT

*** NO DISCHARGE | X | ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
94	10	01	94	12	31

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
ZINC TOTAL RECOVERABLE 01094 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		01/WK	CALCTD
CADMIUM TOTAL RECOVERABLE 01113 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(28)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	UG/L		01/WK	CALCTD
LEAD TOTAL RECOVERABLE 01114 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		01/WK	CALCTD
CHROMIUM TOTAL RECOVERABLE 01118 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	1.0 DAILY MX	MG/L		01/WK	GRAB
COPPER TOTAL RECOVERABLE 01119 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.03 DAILY MX	MG/L		01/WK	GRAB
SOLIDS, TOTAL DISSOLVED (TDS) 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		01/WK	GRAB
MERCURY TOTAL RECOVERABLE 71901 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(28)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.012 DAILY MX	UG/L		01/WK	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Daniel T. Gray Utilities Operations Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE 813	NUMBER 792-8811	YEAR 95	MO. 01	DAY 17
TYPED OR PRINTED						

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

F & S: USE P IF BACKGROUND <849, OTHERWISE Q. FOR ANY LINE NOT USED, ENTER "NOD".

R: REPORT A INCREASE ABOVE BACKGROUND CHLORIDE CONTENT. IGNORE ENTRIES

EPA Form 3320-1 (Rev. 2-85) PREVIOUS EDITIONS ARE OBSOLETE.

☆ U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021

☆ U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021

☆ U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY ELNA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0038881 PERMIT NUMBER
(17-19) 003 1 DISCHARGE NUMBER

MONITORING PERIOD
FROM YEAR 94 MO 11 DAY 01 (20-21) (22-23) (24-25)
TO YEAR 94 MO 11 DAY 30 (26-27) (28-29) (30-31)

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
STAGE I ST (Approval Expires) 10-31-94 RGE
EFFLUENT
*** NO DISCHARGE [x] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATRE 96HR ACU CERIODAPHNIA TAN3B P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATRE 96HR ACU CERIODAPHNIA TAN3B 9 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATRE 96HR ACU PIMEPHALES TAN0C P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATRE 96HR ACU PIMEPHALES TAN0C 9 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******		(03)	*******	*******	*******				
	PERMIT REQUIREMENT	*******	REPORT DAILY MX	MGD	*******	*******	*******	**** ****		CONTIN UOUS	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Daniel T. Gray
Utilities Operations Manager
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years).

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE 813 NUMBER 792-8811

DATE YEAR 95 MO 01 DAY 17

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

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used.

* U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
FL0038881	003 Q

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
QUARTERLY Approval expires 10-31-94 GE I
EFFLUENT
*** NO DISCHARGE |X| ***

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	10	01	TO	94	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
HARDNESS, TOTAL (AS CACO3) 00900 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		1/YR	GRAB
CHLORIDE (AS CL) 00940 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	10 DAILY MX	MG/L		1/YR	GRAB
CHLORIDE (AS CL) 00940 B 0 0 UPSTREAM MONITORING	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		1/YR	GRAB
ARSENIC, TOTAL RECOV GRABLE 01000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.05 DAILY MX	MG/L		1/YR	GRAB
IRON TOTAL RECOVERABLE 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	1.0 DAILY MX	MG/L		1/YR	GRAB
NICKEL TOTAL RECOVERABLE 01074 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		1/YR	CALCT
SILVER TOTAL RECOVERABLE 01079 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(28)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.07 DAILY MX	UG/L		1/YR	GRAB

TYPED OR PRINTED NAME AND OFFICIAL TITLE OF PRINCIPAL EXECUTIVE OFFICER

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE PERSONS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE 813 NUMBER 792-8811

DATE YEAR 95 MO 01 DA 17

NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
FL0036881	003 1

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM	94	10	01	TO	94	10	31

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
STAGE I STA Approval Expires 10-31-94 RGE
EFFLUENT
*** NO DISCHARGE |X| ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATIC 96HR ACU CERIODAPHNIA TANGC P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	***** *****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATIC 96HR ACU CERIODAPHNIA TANGC W 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	***** *****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATIC 96HR ACU PIMEPHALES TANGC P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	***** *****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATIC 96HR ACU PIMEPHALES TANGC W 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	***** *****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 C 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******		(03)	*******	*******	*******				
	PERMIT REQUIREMENT	*******	REPORT DAILY MX	MGD	*******	*******	*******	***** *****		CONTIN UOUS	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Daniel T. Gray Utilities Operations Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE 913	NUMBER 792-8811	YEAR 95	MO 01	DAY 17
TYPED OR PRINTED						

COMMENT AND EXPLANATION OF ANY VIOLATIONS (*Reference all attachments here*)

* U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS LALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16)	(17-19)
FL0038881	003 1
PERMIT NUMBER	DISCHARGE NUMBER

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
STAGE I ST (Approval Expires 10-31-94 RGE
EFFLUENT
*** NO DISCHARGE | x | ***

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	12	01	TO	94	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATRE 96HR ACU CERIODAPHNIA TANSS P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	******	*******	**** *****	100 MINIMUM	******	******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATRE 96HR ACU CERIODAPHNIA TANSD Q 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	******	*******	**** *****	100 MINIMUM	******	******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATRE 96HR ACU PIMEPHALES TANSC P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	******	*******	**** *****	100 MINIMUM	******	******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATRE 96HR ACU PIMEPHALES TANSC Q 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	******	*******	**** *****	100 MINIMUM	******	******	PER-CENT		SEE PERMIT	CK REQ
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******		(03)	*******	*******	*******				
	PERMIT REQUIREMENT	*******	REPORT DAILY MX	MGD	*******	*******	*******	**** *****		CONTINUOUS	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Daniel T. Gray Utilities Operations Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE 813	NUMBER 792-8811	YEAR 95	MO 01	DAY 17
TYPED OR PRINTED						

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

* U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME MANATEE COUNTY PUBLIC WKS DEPT

ADDRESS CALLER SERVICE 25010 \E

BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL

LOCATION BRADENTON FL 34202

ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: FL0038881

(17-19) DISCHARGE NUMBER: 002 1

MINOR

(SUBR TA) Form Approved.

F - FINAL OMB No. 2040-0004

STAGE I STANDARD DISCHARGE Approval Expires 10-31-94

EFFLUENT

*** NO DISCHARGE [X] ***

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	~~94~~	~~10~~	~~01~~	TO	~~94~~	~~10~~	~~31~~
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATRE 96HR ACU CERIODAPHNIA TANSC P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATRE 96HR ACU CERIODAPHNIA TANSC Q 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATRE 96HR ACU PIMEPHALES TANSC P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATRE 96HR ACU PIMEPHALES TANSC Q 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******		(03)	*******	*******	*******				
	PERMIT REQUIREMENT	*******	REPORT DAILY MX	MGD	*******	*******	*******	**** ****		CONTINUOUS	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Daniel T. Gray
Utilities Operations Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 813 | NUMBER 792-8811

DATE: YEAR 95 | MO 01 | DAY 17

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Facility Name/Location if different)
NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206
FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0038881 PERMIT NUMBER

(17-19) 002 1 DISCHARGE NUMBER

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
STAGE I ST Approval Expires 10-31-94
EFFLUENT
*** NO DISCHARGE | | ***

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	11	01	TO	94	11	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATRE 96HR ACU CERIODAPHNIA TANSO P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATRE 96HR ACU CERIODAPHNIA TANSO 0 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATRE 96HR ACU PIMEPHALES TANOC P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATRE 96HR ACU PIMEPHALES TANOC 4 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******		(03)	*******	*******	*******				
	PERMIT REQUIREMENT	*******	REPORT DAILY MX	MGD	*******	*******	*******	**** ****		CONTINUOUS	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Daniel T. Gray
Uitilities Operations Manager
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319 *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
813	792-8811	95	01	17

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
FL0038881	002 Q

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM	94	10	01	TO	94	12	31

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
QUARTERLY Approval expires 10-31-94 GE I.
EFFLUENT
*** NO DISCHARGE | X | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
ZINC TOTAL RECOVERABLE 01094 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		01/MO	CALC TD
CADMIUM TOTAL RECOVERABLE 01113 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(28)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	UG/L		01/MO	CALC TD
LEAD TOTAL RECOVERABLE 01114 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		01/MO	CALC TD
CHROMIUM TOTAL RECOVERABLE 01118 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	1.0 DAILY MX	MG/L		01/MO	GRAB
COPPER TOTAL RECOVERABLE 01119 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.03 DAILY MX	MG/L		01/MO	GRAB
SOLIDS, TOTAL DISSOLVED (TDS) 70296 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		01/MO	GRAB
MERCURY TOTAL RECOVERABLE 71901 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(28)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.012 DAILY MX	UG/L		01/MO	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Daniel T. Gray Utilities Operations Manager TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE 813	NUMBER 792-8811	YEAR 95	MO 01	DAY 17

COMMENT AND EXPLANATION OF ANY VIOLATIONS (*Reference all attachments here*)

P : USE P IF BACKGROUND <849, OTHERWISE 0. FOR ANY LINE NOT USED, ENTER "NODI=9".
N: REPORT = INCREASE ABOVE BACKGROUND CHLORIDE CONTENT. IGNORE PRINTED UNIT.
[illegible] BACKGROUND TURBIDITY.

EPA FORM T-48 WHICH MAY NOT BE USED.)

02803/941007-1747

PAGE 4 OF

* U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021

EPA Form 3320-1 (Rev. 9-88) *Previous editions may be used.* (REPLACES EPA FORM T-48 WHICH MAY NOT BE USED.) 02806/941007-1747 PAGE 1 OF

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if different)*
NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
FL0038881	003 Q

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	~~94~~	~~10~~	~~01~~	TO	~~94~~	~~12~~	~~31~~
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
QUARTERLY Approval Expires 10-31-94 GE I
EFFLUENT
*** NO DISCHARGE [X] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TURBIDITY	SAMPLE MEASUREMENT	*******	*******		*******	*******		(45)			
00070 3 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	29 DAILY MX	NTU		QTRLY	GRAB
TURBIDITY	SAMPLE MEASUREMENT	*******	*******		*******	*******		(45)			
00070 3 0 0 UPSTREAM MONITORING	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	NTU		QTRLY	GRAB
SPECIFIC CONDUCTANCE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(11)			
00095 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	1275 DAILY MX	UMHO/ CM		QTRLY	GRAB
SPECIFIC CONDUCTANCE	SAMPLE MEASUREMENT	*******		(23)	*******	*******	*******				
00095 W 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	50 DAILY MX	PER-CENT	*******	*******	*******	**** ****		QTRLY	GRAB
SPECIFIC CONDUCTANCE	SAMPLE MEASUREMENT	*******	*******		*******		*******	(11)			
00095 9 0 0 UPSTREAM MONITORING	PERMIT REQUIREMENT	*******	*******	**** ****	*******	REPORT SINGSAMP	*******	UMHO/ CM		SEE PERMIT	GRAB
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*******	*******			*******	*******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	**** ****	5.0 DAILY MN	*******	*******	MG/L		QTRLY	GRAB
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
00310 5 0 0	PERMIT REQUIREMENT	*******	*******	****							

* U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021
* U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021
* U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021
* U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0038881 PERMIT NUMBER

(17-19) 003 Q DISCHARGE NUMBER

MONITORING PERIOD
FROM YEAR 94 MO 10 DAY 01 (20-21) (22-23) (24-25)
TO YEAR 94 MO 12 DAY 31 (26-27) (28-29) (30-31)

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
QUARTERLY Approval Expires 10-31-94
EFFLUENT
*** NO DISCHARGE [X] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******			*******		(12)			
	PERMIT REQUIREMENT	*******	*******	**** ****	6.0 MINIMUM	*******	8.5 MAXIMUM	SU		QTRLY	GRAB
ALKALINITY, TOTAL (AS CACO3) 00410 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******			*******	*******	(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	20.0 MINIMUM	*******	*******	MG/L		QTRLY	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	5.0 DAILY MX	MG/L		QTRLY	GRAB
NITROGEN, KJELDAHL TOTAL (AS N) 00625 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Daniel T. Gray
Utilities Operations

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE 813 NUMBER 792-8811

DATE YEAR 95 MO 01 DA 1

* U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFURD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
FL0038881	001 Q

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM	94	10	01	TO	94	12	31

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
QUARTERLY Approval expires 10-31-94 GE I
EFFLUENT
*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	QUALITY OR CONCENTRATION (54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
ZINC TOTAL RECOVERABLE 01094 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	CALCTD
CADMIUM TOTAL RECOVERABLE 01113 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(28)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	UG/L		QTRLY	CALCTD
LEAD TOTAL RECOVERABLE 01114 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	CALCTD
CHROMIUM TOTAL RECOVERABLE 01118 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	I.D. DAILY MX	MG/L		QTRLY	GRAB
COPPER TOTAL RECOVERABLE 01119 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.05 DAILY MX	MG/L		QTRLY	GRAB
SOLIDS, TOTAL DISSOLVED (TDS) 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB
MERCURY TOTAL RECOVERABLE 71901 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(28)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.012 DAILY MX	UG/L		QTRLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Daniel T. Grey
Utilities Operations Manager
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 813, NUMBER 792-8811

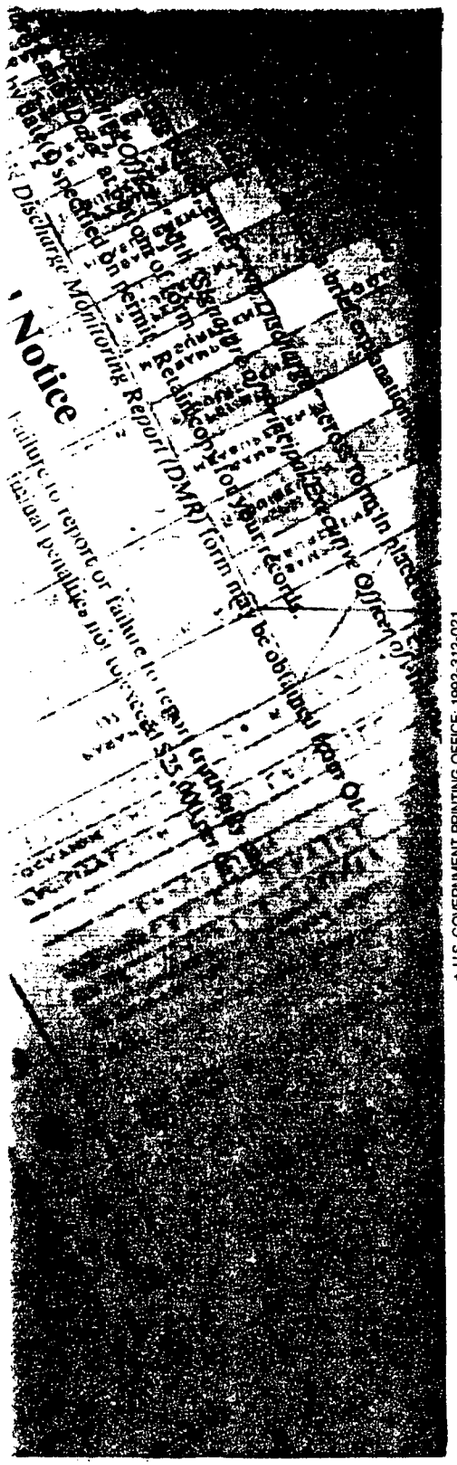
DATE: YEAR 95, MO 01, DAY 17

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

P & Q: USE P IF BACKGROUND <849, OTHERWISE Q. FOR ANY LINE NOT USED, ENTER "NODIES".
R: REPORT % INCREASE ABOVE BACKGROUND CHLORIDE CONTENT. IGNORE PRINTED UNIT.

EPA Form 3320-1 (10-86) Previous editions ~~are obsolete~~ ABOVE BACKGROUND TURBIDITY.

* U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021



1A

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if different)*
NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) FL0038881 PERMIT NUMBER
(17-19) 001 1 DISCHARGE NUMBER

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
STAGE I ST Approval Expires 10-31-94 RGE
EFFLUENT
*** NO DISCHARGE [*] ***

MONITORING PERIOD
FROM YEAR 94 (20-21) MO 10 (22-23) DAY 01 (24-25) TO YEAR 94 (26-27) MO 10 (28-29) DAY 31 (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATIC 96HR ACU CERIODAPHNIA TANBL P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATIC 96HR ACU CERIODAPHNIA TANBL Q 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATIC 96HR ACU PIMEPHALES TANBC P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATIC 96HR ACU PIMEPHALES TANBC Q 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******		(03)	*******	*******	*******				
	PERMIT REQUIREMENT	*******	REPORT DAILY MX	MGD	*******	*******	*******	**** ****		CONTIN UOUS	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Daniel T. Grey
Utilities Operations Manager
TYPED OR PRINTED

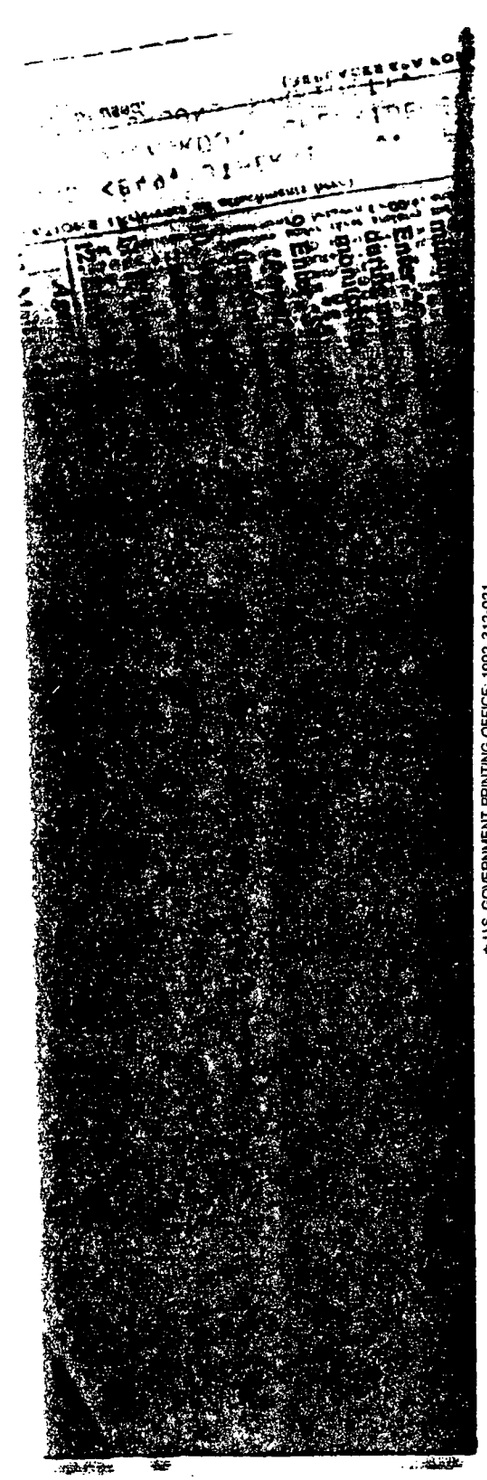
I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319 *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE 813 NUMBER 792-8811

DATE YEAR 95 MO 01 DAY 17

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*



NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0038881 PERMIT NUMBER

(17-19) 001 1 DISCHARGE NUMBER

MINOR
(SUBR TA)
F - FINAL
STAGE I STORMWATER DISCHARGE
EFFLUENT

Form Approved.
OMB No. 2040-0004
Approval Expires 10-31-94

*** NO DISCHARGE [X] ***

NOTE: Read instructions before completing this form.

(Facility Name/Location if different)

NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM	~~94~~	~~11~~	~~01~~	TO	~~94~~	~~11~~	~~30~~

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATRE 96HR ACU CERIODAPHNIA TAN3B P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATRE 96HR ACU CERIODAPHNIA TAN3B 0 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATRE 96HR ACU PIMEPHALES TAN6C P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATRE 96HR ACU PIMEPHALES TAN6C 0 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******		(03)	*******	*******	*******				
	PERMIT REQUIREMENT	*******	REPORT DAILY MX	MGD	*******	*******	*******	**** ****		CONTIN UOUS	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Daniel T. Gray Utilities Operations Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319 *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE 813	NUMBER 792-8811	YEAR 95	MO 01	DAY 17
TYPED OR PRINTED							

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0038881 — PERMIT NUMBER
(17-19) 001 1 — DISCHARGE NUMBER

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
STAGE I ST Approval Expires 10-31-94
EFFLUENT
*** NO DISCHARGE |X| ***

MONITORING PERIOD
FROM YEAR 94 MO 12 DAY 01 (20-21) (22-23) (24-25) TO YEAR 94 MO 12 DAY 31 (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATRE 96HR ACU CERIODAPHNIA TAN3D P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATRE 96HR ACU CERIODAPHNIA TAN3E Q 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATRE 96HR ACU PIMEPHALES TAN0C P 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
LC50 STATRE 96HR ACU PIMEPHALES TAN0C Q 0 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******			*******	*******	(23)			
	PERMIT REQUIREMENT	*******	*******	**** ****	100 MINIMUM	*******	*******	PER-CENT		SEE PERMIT	CK REQ
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******		(03)	*******	*******	*******				
	PERMIT REQUIREMENT	*******	REPORT DAILY MX	MGD	*******	*******	*******	**** ****		CONTINUOUS	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Daniel T. Gray
Utilities Operations Manager
TYPED OR PRINTED

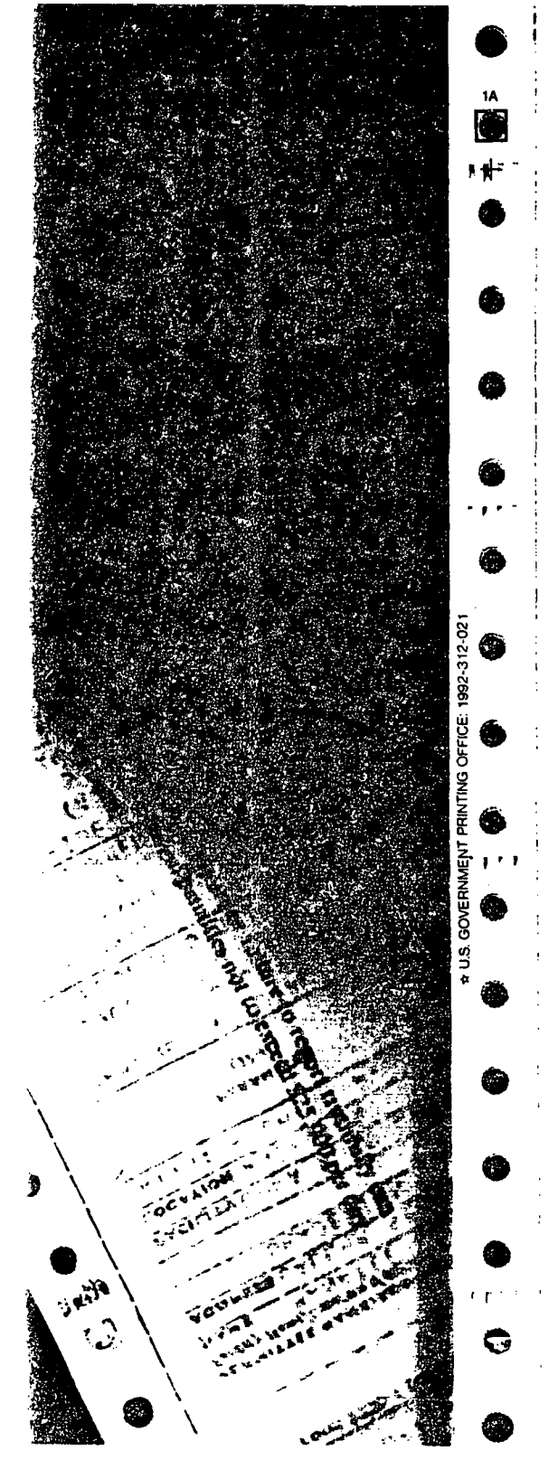
I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 813 NUMBER 792-8811

DATE: YEAR 95 MO 01 DAY 17

COMMENT AND EXPLANATION OF ANY VIOLATIONS (*Reference all attachments here*)



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR) (2-16)

FL0038881 — PERMIT NUMBER (17-19)
002 Q — DISCHARGE NUMBER

MONITORING PERIOD
FROM YEAR 94 (20-21) MO 10 (22-23) DAY 01 (24-25) TO YEAR 94 (26-27) MO 12 (28-29) DAY 31 (30-31)

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
QUARTERLY Approval Expires 10-31-96 AGE I,
EFFLUENT
*** NO DISCHARGE [X] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TURBIDITY	SAMPLE MEASUREMENT	*******	*******		*******	*******		(43)			
00070 S 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	******	*******	*******	29. DAILY MX	NTU		1/MTHLY	GRAB
TURBIDITY	SAMPLE MEASUREMENT	*******	*******		*******	*******		(43)			
00070 5 0 0 UPSTREAM MONITORING	PERMIT REQUIREMENT	*******	*******	******	*******	*******	REPORT DAILY MX	NTU		1/MTHLY	GRAB
SPECIFIC CONDUCTANCE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(11)			
00095 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	******	*******	*******	1275 DAILY MX	UMHO/CM		1/MTHLY	GRAB
SPECIFIC CONDUCTANCE	SAMPLE MEASUREMENT	*******		(23)	*******	*******	*******				
00095 Q 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	50 PER-CENT DAILY MX		*******	*******	*******	******		1/MTHLY	GRAB
SPECIFIC CONDUCTANCE	SAMPLE MEASUREMENT	*******	*******		*******		*******	(11)			
00095 5 0 0 UPSTREAM MONITORING	PERMIT REQUIREMENT	*******	*******	******	*******	REPORT SINGSAMP	*******	UMHO/CM		SEE PERMIT	GRAB
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*******	*******			*******	*******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	******	5.0 DAILY MN	*******	*******	MG/L		1/MTHLY	GRAB
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
00310 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	******	*******	*******	REPORT DAILY MX	MG/L		1/MTHLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Daniel T. Gray
Utilities Operations Manager
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C § 1001 AND 33 USC § 1319 *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

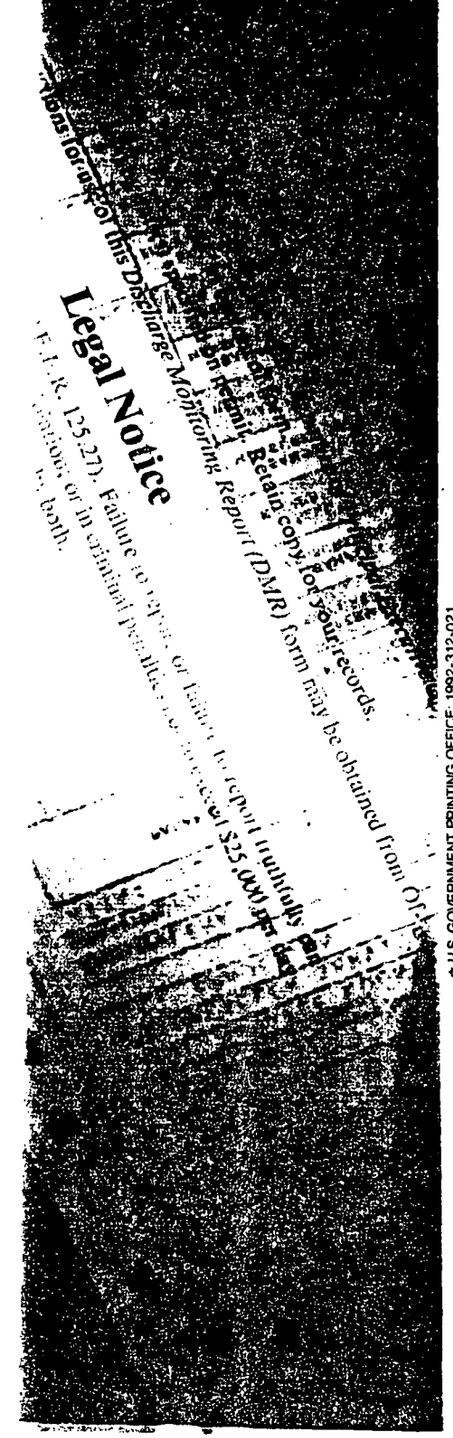
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 813, NUMBER 792-8811

DATE: YEAR 95, MO 01, DAY 17

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

P & Q: USE P IF BACKGROUND <849, OTHERWISE Q. FOR ANY LINE NOT USED, ENTER "NODI=9".
R: REPORT % INCREASE ABOVE BACKGROUND CHLORIDE CONTENT. IGNORE PRINTED UNIT.
S: REPORT % INCREASE ABOVE BACKGROUND TURBIDITY.



PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if different)*
NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
FL0038881	002 Q

MINOR
(SUBR TA)
F - FINAL
QUARTERLY
EFFLUENT
*** NO DISCHARGE [X] ***

Form Approved.
OMB No. 2040-0004
Approval Expires 10-31-94

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM	94	10	01	TO	94	12	31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******			*******		(12)			
	PERMIT REQUIREMENT	*******	*******	**** ****	6.0 MINIMUM	*******	8.5 MAXIMUM	SU		QTRLY	GRAB
ALKALINITY, TOTAL (AS CACO3) 00410 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******			*******	*******	(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	20.0 MINIMUM	*******	*******	MG/L		QTRLY	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	5.0 DAILY MX	MG/L		QTRLY	GRAB
NITROGEN, KJELDAHL TOTAL (AS N) 00625 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Daniel T. Gray Utilities Operations Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE 813	NUMBER 792-8811	YEAR 94	MO 01	DAY 17
TYPED OR PRINTED						

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

F & N: USE F IF BACKGROUND <849, OTHERWISE 0. FOR ANY LINE NOT USED, ENTER "NODI=9".
L: REPORT % INCREASE ABOVE BACKGROUND CHLORIDE CONTENT. IGNORE PRINTED UNIT.
T: REPORT % INCREASE ABOVE BACKGROUND TURBIDITY.

1 JG/DAY INCREASE ABOVE BACKGROUND TURBIDITY.

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.) 02801/941007-1747 PAGE 2 OF

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: FL0038881
(17-19) DISCHARGE NUMBER: 002 Q

MONITORING PERIOD
FROM YEAR 94 MO 10 DAY 01 (20-21) (22-23) (24-25)
TO YEAR 94 MO 12 DAY 31 (26-27) (28-29) (30-31)

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
QUARTERLY Approval Expires 10-31-96
EFFLUENT
*** NO DISCHARGE |_X_| ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
HARDNESS, TOTAL (AS CACO3) 00900 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB
CHLORIDE (AS CL) 00940 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	10 DAILY MX	MG/L		QTRLY	GRAB
CHLORIDE (AS CL) 00940 5 0 0 UPSTREAM MONITORING	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	GRAB
ARSENIC, TOTAL RECOV ERABLE 01002 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.05 DAILY MX	MG/L		QTRLY	GRAB
IRON TOTAL RECOVERABLE 00980 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIRGMENT	*******	*******	**** ****	*******	*******	1.0 DAILY MX	MG/L		QTRLY	GRAB
NICKEL TOTAL RECOVERABLE 01074 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		QTRLY	CALCTD
SILVER TOTAL RECOVERABLE 01079 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(28)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.01 DAILY MX	UG/L		QTRLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Daniel T. Gray
Utilities Operations Manager
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 813 NUMBER 792-8811

DATE: YEAR 95 MO 01 DAY 17

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

...ENTER "0049". OTHERWISE, ... FOR ANY LINE NOT USED, ENTER "NOOI=9".

☆ U.S. GOVERNMENT PRINTING OFFICE: 1992-312-021

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME MANATEE COUNTY PUBLIC WKS DEPT

ADDRESS CALLER SERVICE 25010 \E

BRADENTON FL 34206

FACILITY ENA ROAD LANDFILL

LOCATION BRADENTON FL 34202

ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0038881 PERMIT NUMBER

(17-19) 001 Q DISCHARGE NUMBER

MONITORING PERIOD

FROM YEAR 94 (20-21) MO 10 (22-23) DAY 01 (24-25) TO YEAR 94 (26-27) MO 12 (28-29) DAY 31 (30-31)

MINOR

(SUBR TA) Form Approved.

F - FINAL OMB No. 2040-0004

QUARTERLY Approval Expires 10-31-94 GE I

EFFLUENT

*** NO DISCHARGE | | *** (X)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TURBIDITY	SAMPLE MEASUREMENT	*******	*******		*******	*******		(43)			
00070 S 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	******	*******	*******	29 DAILY MX	NTU		WKLY	GRAB
TURBIDITY	SAMPLE MEASUREMENT	*******	*******		*******	*******		(43)			
00070 D 0 0 UPSTREAM MONITORING	PERMIT REQUIREMENT	*******	*******	******	*******	*******	REPORT DAILY MX	NTU		WKLY	GRAB
SPECIFIC CONDUCTANCE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(11)			
00095 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	******	*******	*******	1275 DAILY MX	UMHO/ CM		WKLY	GRAB
SPECIFIC CONDUCTANCE	SAMPLE MEASUREMENT	*******		(23)	*******	*******	*******				
00095 E 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	50 PER- DAILY MX	CENT	*******	*******	*******	******		WKLY	GRAB
SPECIFIC CONDUCTANCE	SAMPLE MEASUREMENT	*******	*******		*******		*******	(11)			
00095 D 0 0 UPSTREAM MONITORING	PERMIT REQUIREMENT	*******	*******	******	*******	REPORT SINGSAMP	*******	UMHO/ CM		SEE PERMIT	GRAB
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*******	*******			*******	*******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	******	5.0 DAILY MN	*******	*******	MG/L		WKLY	GRAB
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
00310 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	******	*******	*******	REPORT DAILY MX	MG/L		WKLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Daniel T. Gray
Utilities Operations Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 813 | NUMBER 792-8811

DATE: YEAR 95 | MO 01 | DAY 17

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

P 00095: USE P IF BACKGROUND <849, OTHERWISE Q. FOR ANY LINE NOT USED, ENTER "NODI=9".

N: REPORT A INCREASE ABOVE BACKGROUND CHLORIDE CONTENT. IGNORE PRINTED UNIT.

[illegible] ABOVE BACKGROUND TURBIDITY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLER SERVICE 25010 \E
BRADENTON FL 34206

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) FL0038881 PERMIT NUMBER
(17-19) 001 Q DISCHARGE NUMBER

MONITORING PERIOD
FROM YEAR 94 MO 10 DAY 01 TO YEAR 94 MO 12 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MINOR
(SUBR TA) Form Approved.
F - FINAL OMB No. 2040-0004
QUARTERLY Approval Expires 10-31-94
EFFLUENT
*** NO DISCHARGE [X] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
OXYGEN DEMAND, CHEM (HIGH LEVEL) (COD) 00340 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		4/MTHLY	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******			*******		(12)			
	PERMIT REQUIREMENT	*******	*******	**** ****	6.0 MINIMUM	*******	8.5 MAXIMUM	SU		4/MTHLY	GRAB
ALKALINITY, TOTAL (AS CACO3) 00410 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******			*******	*******	(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	20.0 MINIMUM	*******	*******	MG/L		4/MTHLY	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		4/MTHLY	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	510 DAILY MX	MG/L		4/MTHLY	GRAB
NITROGEN, KJELDAHL TOTAL (AS N) 00625 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		4/MTHLY	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		4/MTHLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Daniel T. Gray
Utilities Operations Manager
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 813, NUMBER 792-8811
DATE: YEAR 01, MO 05, DAY 17

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

P & Q: USE P IF BACKGROUND <849, OTHERWISE Q. FOR ANY LINE NOT USED, ENTER "NODI=9".
R: REPORT & INCREASE ABOVE BACKGROUND CHLORIDE CONTENT. IGNORE PRINTED UNIT.
S: REPORT & INCREASE ABOVE BACKGROUND TURBIDITY.

EPA Form 3320-1 (Rev. 9-85) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

02794/941007-1747

FACILITY LENA ROAD LANDFILL
LOCATION BRADENTON FL 34202
ATTN: RICHARD A. WILFORD, DIRECTOR

MONITORING PERIOD — FROM YEAR 94 MO 10 DAY 01 (20-21) (22-23) (24-25) TO YEAR 94 MO 12 DAY 31 (26-27) (28-29) (30-31)

EFFLUENT *** NO DISCHARGE [X] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
HARDNESS, TOTAL (AS CACO3) 00900 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		01RLY	GRAB
CHLORIDE (AS CL) 00940 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	10 DAILY MX	MG/L		01RLY	GRAB
CHLORIDE (AS CL) 00940 5 0 0 UPSTREAM MONITORING	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		01RLY	GRAB
ARSENIC, TOTAL RECOVERABLE 00978 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.05 DAILY MX	MG/L		01RLY	GRAB
IRON TOTAL RECOVERABLE 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	1.0 DAILY MX	MG/L		01RLY	GRAB
NICKEL TOTAL RECOVERABLE 01074 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	REPORT DAILY MX	MG/L		01RLY	CALCTD
SILVER TOTAL RECOVERABLE 01079 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(28)			
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	0.07 DAILY MX	UG/L		01RLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Daniel T. Gray Uitlities Operations Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE 813	NUMBER 792-8811	YEAR 95	MO 01	DAY 17
TYPED OR PRINTED							

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

P & Q: USE P IF BACKGROUND <849, OTHERWISE Q. FOR ANY LINE NOT USED, ENTER "NODI=9".
R: REPORT % INCREASE ABOVE BACKGROUND CHLORIDE CONTENT. IGNORE PRINTED UNIT.
~~5: REPORT TURBIDITY ABOVE BACKGROUND TURBIDITY.~~

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if different)*
NAME MANATEE COUNTY PUBLIC WKS DEPT
ADDRESS CALLER SERVICE 25010

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*
(2-16) FL0038881 (17-19) 001 Q
MINOR
(SUBR TA) F - FINAL

1A

2. The wires shall be composed of individual copper stands formed from annealed, 98 percent conductivity, soft drawn copper.

3. The wires shall be sized as indicated on the Electrical Drawings.

4. The wires shall be coated with a flame-retardant, cross-linked polyethylene type XHHW insulation rated 600 Volts AC. The insulation shall also have a 75 degree C temperature rating and shall be suitable for use in wet locations.

c. Instrumentation Wiring:

1. The instrumentation wiring shall be as manufactured by Belden, Alpha, or approved equal.

2. The instrumentation wiring shall be a 2-conductor, 16-gauge shielded cable conforming to Trade and U.L. Style No. 9951.

END OF SECTION