



Stabilization Ponds

National Pollutant Discharge Elimination System (NPDES) Permit Program

Doc Type: Discharge Monitoring Report

Facility Information

Facility name: _____ Year(s) constructed: _____
 Operator name: _____ Design flow (MGD): _____
 Phone number: _____ Design BOD capacity (mg/L): _____
MGD = million gallons per day mg/L = milligrams per liter

List numbers and types of cells, cell sizes, and operating depths (minimum to maximum):

Aerated cells: _____
 Primary(s): _____
 Secondary(s): _____

Are the ponds operated in: ☐ Series ☐ Parallel When?

Hydraulic Capacity Evaluation (Dates use mm/dd/yyyy)

Date of last flow meter calibration: _____ Dates of previous discharge(s): _____

Volume of previous discharge (million gallons/MG):

Influent flow rates (last six months)

Month	Flow (MGD)
Total average:	

Pond levels after previous discharge (inches)

Primary(s): _____
Secondary(s): _____

City Well(s)

Total volume pumped last six months: _____ MG
Monthly average: _____ MGD

Collection system bypasses

Volumes	Dates (mm/dd/yy)

Precipitation total last six months:

Unusual storms (inches/dates):

Does the collection system have excessive infiltration (groundwater)? ☐ Yes ☐ No

If yes, list sources (sump pumps, deteriorated pipe, etc.):

Does the collection system have excessive inflow (surface water)? ☐ Yes ☐ No

If yes, list sources (storm sewers, tile lines, etc.):

Does the city have a "Sump Pump" Ordinance? ☐ Yes ☐ No If yes, is it enforced? ☐ Yes ☐ No

Provide dates if the collection system has been – Televised date: Smoke tested:

Describe investigation results:

Have problems been corrected – explain:

Organic Capacity Evaluation

Influent samples (last four quarterly sample)

Sample dates (mm/dd/yyyy)				
Influent flow (MGD)				
CBOD ₅ (mg/L)				
TSS (mg/L)				
pH				

CBOD₅ = Five-Day Carbonaceous Biochemical Oxygen Demand
million gallons per day (mgd)

TSS = Total Suspended Solids
pH = potential of Hydrogen

Any significant industrial users of the wastewater facility? ☐ Yes ☐ No

If yes, does the city have Industrial User Agreements with them? ☐ Yes ☐ No

If yes, are the industries in compliance with the agreements? ☐ Yes ☐ No

Discharge evaluation

Date discharge began: _____ Date discharge ended: _____

Volume discharged (MG): _____ Pond discharge rate (CFS): _____

Receiving water ice cover (%): _____ Dilution ratio: _____

Receiving water flow rate (CFS): _____

CFS = Cubic feet per second

Effluent quality

Sample dates (mm/dd/yyyy)					
CBOD ₅ (mg/L)					
TSS (mg/L)					
pH					
Fecal Coliform					
Dissolved Oxygen (mg/L)					
Total Phosphorus (mg/L)					

Receiving water quality (Upstream sampling station) Location: _____

Sample dates (mm/dd/yyyy)					
Dissolved Oxygen (mg/L)					
pH					
Fecal Coliform					
Total Phosphorus (mg/L)					

Receiving water quality (Downstream sampling station) Location: _____

Sample dates (mm/dd/yyyy)					
Dissolved Oxygen (mg/L)					
pH					
Fecal Coliform					
Total Phosphorus (mg/L)					