

Date: January 29, 2014
Division of Water Quality
C/O DMR Processing Center
P.O. Box 100
Sacramento, CA 95812-1000



Facility Name: Carmel Area Wastewater District

Address (mailing): P.O. Box 221428, Carmel, CA 93922

Address (shipping): Highway One & Carmel River, Carmel, CA 93923

Contact Person: James Pinkevich

Job Title: Superintendent

Phone Number: 831-624-1249

WDR/NPDES Order Number: #R3-2008-0007 (NPDES Permit – CA0047996)

WDID Number: 3 270101001

Type of Report (circle one): Monthly Quarterly Semi-Annual Annual

Month(s) (circle applicable): Jan Feb March Apr May Jun

Months*): Jul Aug Sept Oct Nov Dec

* Annual Reports (circle the first month of the reporting period)

Year: 2013

Violation(s): No (there are no violations to report) Yes
If Yes is marked (complete a-g):

a) Parameter(s) in Violation: n/a

b) Section(s) of WDR/NPDES Violated: n/a

c) Reported Value(s): n/a

d) WDR/NPDES Limit Condition: n/a

e) Dates of Violation(s): n/a

f) Explanation of Cause(s): n/a

g) Corrective Action(s): n/a
(attach additional information as needed)

In accordance with the Standard Provisions and Reporting Requirements, I certify under penalty of law that this document and all attachments were prepared under my direction or supervision following a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my knowledge of the person(s) who manage the system or those directly responsible for data gathering, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

If you have any questions or require additional information, please contact me at the number provided above.

Sincerely,



James Pinkevich
Superintendent

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

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

NAME: CARMEL AREA WWD & PEBBLE BEACH
ADDRESS: 26900 STATE ROUTE ONE
CARMEL, CA 93922

CA0047996
PERMIT NUMBER

001-Q
DISCHARGE NUMBER

DMR Mailing ZIP CODE: 93922
MAJOR (SUBR 03)
DISCHARGE 001/QUARTERLY
External Outfall

FROM 10/01/2013 TO 12/31/2013

MONITORING PERIOD
MM/DD/YYYY

No Discharge

ATTN: James Pinkevich

PARAMETER	SAMPLE MEASUREMENT PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	UNITS	VALUE	VALUE	UNITS	VALUE			
Zinc, total recoverable	PERMIT REQUIREMENT	2.4	220 DAILY MX	282	1470 6 MO MED	291	8790 DAILY MX			
01094 1 0 Effluent Gross	SAMPLE PERMIT REQUIREMENT	2.34	31 DAILY MX	41	120 6 MO MED	42	3420 INST MAX	ug/L	Quarterly	GRAB
Copper, total recoverable	PERMIT REQUIREMENT	0.0052	30DA AVG	0.001 (15)	0.02074 30DA AVG	0.001 (15)	0.02074 30DA AVG			
01119 1 0 Effluent Gross	SAMPLE PERMIT REQUIREMENT	0.0052	30DA AVG	0.001 (15)	0.02074 30DA AVG	0.001 (15)	0.02074 30DA AVG			
DDT/DDD/DDE, sum of p,p' & o,p' isomers	PERMIT REQUIREMENT	0.0052	30DA AVG	0.001 (15)	0.02074 30DA AVG	0.001 (15)	0.02074 30DA AVG			
39379 1 0 Effluent Gross	SAMPLE PERMIT REQUIREMENT	0.0052	30DA AVG	0.001 (15)	0.02074 30DA AVG	0.001 (15)	0.02074 30DA AVG			
Solids, total dissolved	PERMIT REQUIREMENT	0.0052	30DA AVG	0.001 (15)	0.02074 30DA AVG	0.001 (15)	0.02074 30DA AVG			
70295 1 0 Effluent Gross	PERMIT REQUIREMENT	0.0052	30DA AVG	0.001 (15)	0.02074 30DA AVG	0.001 (15)	0.02074 30DA AVG			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>BARBARA WIKEMA GENERAL MANAGER</i>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE <i>(831) 628-1289</i>	DATE <i>01/29/2014</i>
TYPED OR PRINTED		AREA Code <i>831</i>	NUMBER <i>628-1289</i>

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