



September 25, 2009

Mr. Ed Abbasi
Washington Department of Ecology
Northwest Regional Office
3190 160th Ave. S.E.
Bellevue, Washington 98008

Re: Industrial Wastewater System Discharge Monitoring Report – August 2009
Seattle-Tacoma International Airport
NPDES Permit WA-002465-1, Part I Special Condition S3.A

Dear Mr. Abbasi:

Enclosed you will find the Industrial Wastewater System Discharge Monitoring Report prepared in compliance with Part I Special Condition S3.A of the NPDES Permit for Seattle-Tacoma International Airport for the month of August 2009.

If you have any questions regarding this letter, please contact Bob Duffner of my staff at (206) 787-5528.

Sincerely,

A handwritten signature in black ink, appearing to read "Leavitt". The signature is fluid and cursive, with a large initial "L".

Elizabeth Leavitt
Director, Aviation Planning and Environmental

Enclosure: IWS Outfall 001 DMR (3 pages)

Permittee Name/Address
 Include Name/Location (if different)

NAME SEA-TAC AIRPORT #681
 ADDRESS PORT OF SEATTLE
 P.O. BOX 68727, SEATTLE 98168
 FACILITY SAME AS ABOVE
 LOCATION SAME AS ABOVE

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT(DMR)

WA-002465-1	Puget Sound - 001 Part I				
PERMIT NUMBER	DISCHARGE NUMBER				
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
2009	08	01	2009	08	31


NOTE: Read instructions before
 completing this form.

001

Discharge Location	
Lat	47° 24' 11" N
Long	122° 20' 13" W
NO DISCHARGE	XXX

Parameter		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				No. of Exceed-ances	Frequency of Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum	Units			
FLOW	Sample Measurement	NA	NA	MGD	*****	*****	*****	***	NA	Daily	CONT.
	Permit Requirement	REPORT	REPORT		*****	*****	*****			Daily	CONT.
pH	Sample Measurement	*****	*****	***	NA	*****	NA	S.U.	NA	Daily	CONT.
	Permit Requirement	*****	*****		6	*****	9			Daily	CONT.
BOD ₅ November - March	Sample Measurement	NA	NA	Lbs/dy	*****	NA	NA	mg/L	NA	01/31	24h comp
	Permit Requirement	500	3115		*****	45	REPORT			01/31	24h comp
BOD ₅ April - October	Sample Measurement	NA	NA	Lbs/dy	*****	NA	NA	mg/L	NA	01/31	24h comp
	Permit Requirement	130	1340		*****	25	REPORT			01/31	24h comp
TSS	Sample Measurement	*****	*****	***	*****	NA	NA	mg/L	NA	01/07	24h comp
	Permit Requirement	*****	*****		*****	21	33			01/07	24h comp
Oil and Grease	Sample Measurement	*****	*****	***	*****	NA	NA	mg/l	NA	01/07	GRAB
	Permit Requirement	*****	*****		*****	8	15			01/07	GRAB
Ethylene Glycol November - March	Sample Measurement	*****	*****	***	*****	NA	NA	mg/L	NA	01/07	24h comp
	Permit Requirement	*****	*****		*****	REPORT	REPORT			01/07	24h comp

NO DISCHARGE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Elizabeth Leavitt Director, Aviation Planning and Environment TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE (206) 787-7203 AREA NUMBER CODE	DATE 09, 09, 25 YEAR MO DAY
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 NA - Not applicable. N/A - Not Analyzed. 0 million gallons were processed in August 2009.

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 Include Name/Location (if different)

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DISCHARGE MONITORING REPORT(DMR)

WA-002465-1	Puget Sound - 001 Part I				
PERMIT NUMBER	DISCHARGE NUMBER				
MONITORING PERIOD					
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Long	122° 20' 13" W
NO DISCHARGE	XXX

Parameter		QUANTITY OR LOADING			QUALITY OR CONCENTRATION			No. of Exceed-ances	Frequency of Analysis	Sample Type	
		Average	Maximum	Units	Minimum	Average	Maximum				Units
Propylene Glycol November - March	Sample Measurement	*****	*****	***	*****	NA	NA	mg/L	NA	01/07	24h comp
	Permit Requirement	*****	*****		*****	REPORT	REPORT			01/07	24h comp
Arsenic	Sample Measurement	*****	*****	***	*****	*****	NA	ug/L	NA	01/Qtr	24h comp
	Permit Requirement	*****	*****		*****	*****	REPORT			01/Qtr	24h comp
Cadmium	Sample Measurement	*****	*****	***	*****	*****	NA	ug/L	NA	01/Qtr	24h comp
	Permit Requirement	*****	*****		*****	*****	REPORT			01/Qtr	24h comp
Total Chromium	Sample Measurement	*****	*****	***	*****	*****	NA	ug/L	NA	01/Qtr	24h comp
	Permit Requirement	*****	*****		*****	*****	REPORT			01/Qtr	24h comp
Copper	Sample Measurement	*****	*****	***	*****	*****	NA	ug/L	NA	01/Qtr	24h comp
	Permit Requirement	*****	*****		*****	*****	REPORT			01/Qtr	24h comp
Cyanide	Sample Measurement	*****	*****	***	*****	*****	NA	ug/L	NA	01/Qtr	24h comp
	Permit Requirement	*****	*****		*****	*****	REPORT			01/Qtr	24h comp

NO DISCHARGE

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	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		

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DISCHARGE MONITORING REPORT(DMR)

WA-002465-1
 Puget Sound -
 001 Part I
 PERMIT NUMBER DISCHARGE NUMBER


NOTE: Read instructions before
 completing this form.
 001

Discharge Location
 Lat 47° 24' 11" N
 Long 122° 20' 13" W
NO DISCHARGE **XXX**

MONITORING PERIOD
 FROM

YEAR	MO	DAY	YEAR	MO	DAY
2009	08	01	2009	08	31

Parameter		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				No. of Exceedances	Frequency of Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum	Units			
Lead	Sample Measurement	*****	*****	***	*****	*****	NA	ug/L	NA	01/Qtr	24h comp
	Permit Requirement	*****	*****		*****	*****	REPORT			01/Qtr	24h comp
Mercury	Sample Measurement	*****	*****	***	*****	*****	NA	ug/L	NA	01/Qtr	24h comp
	Permit Requirement	*****	*****		*****	*****	REPORT			01/Qtr	24h comp
Nickel	Sample Measurement	*****	*****	***	*****	*****	NA	ug/L	NA	01/Qtr	24h comp
	Permit Requirement	*****	*****		*****	*****	REPORT			01/Qtr	24h comp
Selenium	Sample Measurement	*****	*****	***	*****	*****	NA	ug/L	NA	01/Qtr	24h comp
	Permit Requirement	*****	*****		*****	*****	REPORT			01/Qtr	24h comp
Silver	Sample Measurement	*****	*****	***	*****	*****	NA	ug/L	NA	01/Qtr	24h comp
	Permit Requirement	*****	*****		*****	*****	REPORT			01/Qtr	24h comp
Zinc	Sample Measurement	*****	*****	***	*****	*****	NA	ug/L	NA	01/Qtr	24h comp
	Permit Requirement	*****	*****		*****	*****	REPORT			01/Qtr	24h comp

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