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## DMR Copy of Submission

### Permit

<b>Permit ID:</b>	CTP002421	<b>Major:</b>	<input type="checkbox"/>
<b>Permittee:</b>	Tweed-New Haven Airport Authority	<b>Permittee Address:</b>	155 Burr Street New Haven , CT06512
<b>Facility:</b>	TWEED-NEW HAVEN REGIONAL AIRPORT	<b>Facility Location:</b>	155 BURR ST NEW HAVEN , CT06512
<b>Permitted Feature:</b>	201 - External Outfall	<b>Discharge:</b>	201-1 - Aircraft Deicing Fluid

### Report Dates & Status

<b>Monitoring Period:</b>	From 01/01/22 to 01/31/22	<b>DMR Due Date:</b>	02/28/22
<b>Status:</b>	<b>NetDMR Validated</b>		

### Considerations for Form Completion

### Principal Executive Officer

<b>First Name:</b>	Sean	<b>Last Name:</b>	Scanlon
<b>Title:</b>	Executive Director	<b>Telephone:</b>	203-466-8833

### No Data Indicator (NODI)

**Form NODI:** -

Parameter		NODI	Quantity or Loading			Quality or Concentration				# of Ex.	Freq. of Analysis	Smpl. Type
Code	Name		Value 1	Value 2	Units	Value 1	Value 2	Value 3	Units			
00056	<b>Flow rate</b>	Smpl.	=3984.5		07 - gal/d						01/30 - Monthly	TM - TOTALZ
1 - Effluent Gross												
Season: 0												
		Req.	Req Mon MO AVG		07 - gal/d						01/30 - Monthly	TM - TOTALZ
NODI: -		NODI										
00310	<b>BOD, 5-day, 20 deg. C</b>	Smpl.	=2471.65		26 - lb/d		=37833.3	=81000.0	19 - mg/L		01/07 - Weekly	CP - COMPOS
1 - Effluent Gross												



Parameter		NODI	Quantity or Loading			Quality or Concentration			# of Ex.	Freq. of Analysis	Smpl. Type
Code	Name		Value 1	Value 2	Units	Value 1	Value 2	Value 3			
1 - Effluent Gross											
Season: 0		Req.		<=36000.0 DAILY MX	07 - gal/d					01/07 - Weekly	TM - TOTALZ
NODI: -		NODI									
81017	<b>Chemical Oxygen Demand [COD]</b>	Smpl.				=60500.0	=96000.0	19 - mg/L		01/07 - Weekly	CP - COMPOS
1 - Effluent Gross											
Season: 0		Req.				Req Mon MO AVG	Req Mon DAILY MX	19 - mg/L		01/07 - Weekly	CP - COMPOS
NODI: -		NODI									

**Submission Note**

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

**Edit Check Errors**

No errors.

**Comments**

**Attachments**

No attachments.

**Report Last Saved By**

**Tweed-New Haven Airport Authority**

User: FSURIEL@FLYTWEED.COM  
 Name: Felipe Suriel  
 E-Mail: fsuriel@flytweed.com  
 Date/Time: 2022-02-22 16:25 (Time Zone:-05:00)

**Report Last Signed By**

User: FSURIEL@FLYTWEED.COM  
 Name: Felipe Suriel  
 E-Mail: fsuriel@flytweed.com  
 Date/Time: 2022-02-23 12:25 (Time Zone:-05:00)