

DMR Copy of Record

Permit #: CTP002421
Permittee: Tweed-New Haven Airport Authority
Major: No
Facility Location: TWEED-NEW HAVEN REGIONAL AIRPORT
 155 Burr Street
 New Haven, CT 06512
Permitted Feature: 201 External Outfall
Discharge: 201-1 Aircraft Deicing Fluid

Report Dates & Status
Monitoring Period: From 10/01/23 to 10/31/23
DMR Due Date: 11/30/23
Status: NetDMR Validated
Considerations for Form Completion

Principal Executive Officer
First Name: Thomas
Last Name: Rafter
Title: Executive Director
Telephone: 203-466-8833

No Data Indicator (NODI)
Form NODI: --

| Code | Parameter Name | Monitoring Location | Season # | Param. NODI | Quantity or Loading | | | Quality or Concentration | | | # of Ex. | Frequency of Analysis | Sample Type |
|-------|-----------------------------------|---------------------|----------|-------------|------------------------|------------------|--------------|--------------------------|-------------|---------|----------|-----------------------|-------------|
| | | | | | Qualifier 1 | Value 1 | Qualifier 2 | Value 2 | Qualifier 3 | Value 3 | | | |
| 00056 | Flow rate | 1 - Effluent Gross | 0 | -- | Sample = 4500.2 | 07 - gal/d | | | | | | 01/30 - Monthly | TM - TOTAL |
| | | | | | Permit Req. Value NODI | 07 - gal/d | | | | | | 01/30 - Monthly | TM - TOTAL |
| 00310 | BOD, 5-day, 20 deg. C | 1 - Effluent Gross | 0 | -- | Sample = 1.5 | 26 - lb/d | | | | | | 01/07 - Weekly | CP - COMPOS |
| | | | | | Permit Req. Value NODI | 6000.0 DAILY MX | Req Mon MO | | | | | 01/07 - Weekly | CP - COMPOS |
| 00400 | pH | 1 - Effluent Gross | 0 | -- | Sample = 8.0 | | | | | | | 01/07 - Weekly | R4 - RNG-4A |
| | | | | | Permit Req. Value NODI | >= | 6.0 INST MIN | | | | | 01/07 - Weekly | R4 - RNG-4A |
| 00530 | Solids, total suspended | 1 - Effluent Gross | 0 | -- | Sample = 9.5 | | | | | | | 01/30 - Monthly | CP - COMPOS |
| | | | | | Permit Req. Value NODI | Req Mon MO | | | | | | 01/30 - Monthly | CP - COMPOS |
| 50047 | Flow, maximum during 24 hr period | 1 - Effluent Gross | 0 | -- | Sample = 4500.2 | 07 - gal/d | | | | | | 01/30 - Monthly | TM - TOTAL |
| | | | | | Permit Req. Value NODI | 36000.0 DAILY MX | | | | | | 01/30 - Monthly | TM - TOTAL |
| 61163 | Propylene glycol, total | 1 - Effluent Gross | 0 | -- | Sample = 0.0 | | | | | | | 01/07 - Weekly | CP - COMPOS |
| | | | | | Permit Req. Value NODI | Req Mon MO | | | | | | 01/07 - Weekly | CP - COMPOS |
| 61941 | pH, maximum | 1 - Effluent Gross | 0 | -- | Sample = 8.0 | | | | | | | 99/99 - Continuous | CN - CONTIN |
| | | | | | Permit Req. Value NODI | >= | 6.0 INST MIN | | | | | 99/99 - Continuous | CN - CONTIN |
| 61942 | pH, minimum | 1 - Effluent Gross | 0 | -- | Sample = 4500.2 | 07 - gal/d | | | | | | 01/07 - Weekly | TM - TOTAL |
| | | | | | Permit Req. Value NODI | 36000.0 DAILY MX | | | | | | 01/07 - Weekly | TM - TOTAL |

| Code | Parameter Name | Monitoring Location | Season # | Param. NODI | Value NODI | Quantity or Loading | | Quality or Concentration | | # of Ex. | Frequency of Analysis | Sample Type |
|-------|------------------------------|---------------------|----------|-------------|------------------------|---------------------|---------|--------------------------|---------|----------|-----------------------|----------------|
| | | | | | | Qualifier 1 | Value 1 | Qualifier 2 | Value 2 | | | |
| 81017 | Chemical Oxygen Demand [COD] | 1 - Effluent Gross | 0 | -- | | | | | | | 19 • mg/L | CP - COMPOS |
| | | | | | Sample | | | | | | 58.0 | |
| | | | | | Permit Req. Value NODI | | | | | | Req Mon DAILY MX | 01/07 - Weekly |
| | | | | | | | | | | | Req Mon DAILY MX | 01/07 - Weekly |
| | | | | | | | | | | | 19 • mg/L | CP - COMPOS |

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@FLYTWEEED.COM

Name: Felipe Surliel

E-Mail: fsuriel@flytweed.com

Date/Time: 2023-11-14 15:32 (Time Zone: -05:00)

Report Last Signed By

User: FSURIEL@FLYTWEEED.COM

Name: Felipe Surliel

E-Mail: fsuriel@flytweed.com

Date/Time: 2023-11-14 15:33 (Time Zone: -05:00)