

**DMR Copy of Record**

**Permit**  
 Permit #: **CTP002421**  
 Major: No  
 Facility: Tweed-New Haven Regional Airport  
 Facility Location: 155 Burr St, New Haven, CT 06512  
 Permitted Feature: 201 External Outfall  
 Discharge: 201-1 Aircraft Deicing Fluid

**Report Dates & Status**  
 Monitoring Period: From 03/01/24 to 03/31/24  
 DMR Due Date: 04/30/24  
 Status: NetDMR Validated

**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				Units		
00056	Flow rate	1 - Effluent Gross	0	--	Sample = 7734.8	07 - gal/d	=	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units	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 = 354.9	26 - lb/d	=	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units	01/07 - Weekly	CP - COMPOS
					Permit Req. Value NODI	26 - lb/d									01/07 - Weekly	CP - COMPOS
					Sample = 6000.0 DAILY MX	6000.0 DAILY MX	<=									
00400	pH	1 - Effluent Gross	0	--	Sample = 6.3		=	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units	01/07 - Weekly	R4 - RING-4A
					Permit Req. Value NODI										01/07 - Weekly	R4 - RING-4A
					Sample = 6.0 INST MIN		>=									
00530	Solids, total suspended	1 - Effluent Gross	0	--	Sample = 22.5		=	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units	01/30 - Monthly	CP - COMPOS
					Permit Req. Value NODI										01/30 - Monthly	CP - COMPOS
					Sample = 40.0		=									
					Permit Req. Value NODI											
					Sample = 19 - mg/L		=									
					Permit Req. Value NODI											
					Sample = 19 - mg/L		=									
					Permit Req. Value NODI											
50047	Flow, maximum during 24 hr period	1 - Effluent Gross	0	--	Sample = 9000.4	07 - gal/d	=	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units	01/30 - Monthly	TM - TOTAL
					Permit Req. Value NODI	07 - gal/d									01/30 - Monthly	TM - TOTAL
					Sample = 36000.0 DAILY MX	36000.0 DAILY MX	<=									
61163	Propylene glycol, total	1 - Effluent Gross	0	--	Sample = 2837.5		=	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units	01/07 - Weekly	CP - COMPOS
					Permit Req. Value NODI										01/07 - Weekly	CP - COMPOS
					Sample = 7000.0		=									
					Permit Req. Value NODI											
					Sample = 7.4		=									
					Permit Req. Value NODI											
61941	pH, maximum	1 - Effluent Gross	0	--	Sample = 10.0 INST MAX		<=	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units	99/99 - Continuous	CN - CONTIN
					Permit Req. Value NODI										99/99 - Continuous	CN - CONTIN
61942	pH, minimum	1 - Effluent Gross	0	--	Sample = 6.3		=	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units	99/99 - Continuous	CN - CONTIN
					Permit Req. Value NODI										99/99 - Continuous	CN - CONTIN
					Sample = 6.0 INST MIN		>=									
74076	Flow	1 - Effluent Gross	0	--	Sample = 9000.4	07 - gal/d	=	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units	01/07 - Weekly	TM - TOTAL
					Permit Req. Value NODI	07 - gal/d									01/07 - Weekly	TM - TOTAL
					Sample = 36000.0 DAILY MX	36000.0 DAILY MX	<=									

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
81017	Chemical Oxygen Demand [COD]	1 - Effluent Gross	0	--	Value NODI								
					Sample		6387.5	=	16000.0		19 - mg/L	01/07 - Weekly	CP - COMPOS
					Permit Req.		Req Mon MO		Req Mon DAILY		19 - mg/L	01/07 - Weekly	CP - COMPOS
					Value NODI		AVG		PKX				

**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 Surliel

E-Mail: fsuriel@flytweed.com

Date/Time: 2024-04-26 12:22 (Time Zone: -04:00)

**Report Last Signed By**

User: FSURIEL@FLYTWEED.COM

Name: Felipe Surliel

E-Mail: fsuriel@flytweed.com

Date/Time: 2024-04-26 12:32 (Time Zone: -04:00)