

DMR Copy of Record

Form Approved OMB No. 2040-0004 expires on 07/31/2026

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Permit

Permit #:

Major:

Permitted Feature:

Report Dates & Status

Monitoring Period:

Considerations for Form Completion

CTP002421

No

201
External Outfall

From 04/01/25 to 04/30/25

Permittee:

Permittee Address:

Discharge:

DMR Due Date:

Tweed-New Haven Airport Authority

155 Burr Street
New Haven, CT 06512

201-1
Aircraft Deicing Fluid

05/31/25

Facility:

Facility Location:

Status:

NetDMR Validated

TWEED-NEW HAVEN REGIONAL AIRPORT

155 BURR ST
NEW HAVEN, CT 06512

Principal Executive Officer

First Name:

Last Name:

No Data Indicator (NODI)

Form NODI:

Thomas

Rafter

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Title:

Executive Director

Telephone:

203-466-8833

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units	# of Ex.	Frequency of Analysis	Sample Type
00056	Flow rate	1 - Effluent Gross	0	--	Sample Permit Req. Value NODI	Req Mon MO AVG C - No Discharge			07 - gal/d									01/30 - Monthly	TM - Totalizer
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0	--	Sample Permit Req. Value NODI			6000.0 DAILY MX C - No Discharge	26 - lb/d						Req Mon DAILY MX C - No Discharge	19 - mg/L		01/07 - Weekly	CP - Composite
00400	pH	1 - Effluent Gross	0	--	Sample Permit Req. Value NODI						6.0 INST MIN C - No Discharge				10.0 INST MAX C - No Discharge	12 - SU		01/07 - Weekly	R4 - RING-4A
00530	Solids, total suspended	1 - Effluent Gross	0	--	Sample Permit Req. Value NODI										Req Mon MO AVG C - No Discharge	19 - mg/L		01/30 - Monthly	CP - Composite
50047	Flow, maximum during 24 hr period	1 - Effluent Gross	0	--	Sample Permit Req. Value NODI			36000.0 DAILY MX C - No Discharge	07 - gal/d									01/30 - Monthly	TM - Totalizer
61163	Propylene glycol, total	1 - Effluent Gross	0	--	Sample Permit Req. Value NODI										Req Mon MO AVG C - No Discharge	19 - mg/L		01/07 - Weekly	CP - Composite

Code	Parameter Name	Monitoring Location	Season #	Param, NODI	Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units	# of Ex.	Frequency of Analysis	Sample Type
61941	pH, maximum	1 - Effluent Gross	0	--	Sample Permit Req. Value NODI									<=	10.0 INST MAX C - No Discharge	12 - SU		99/99 - Continuous	CN - Continuous
61942	pH, minimum	1 - Effluent Gross	0	--	Sample Permit Req. Value NODI					>=	6.0 INST MIN C - No Discharge					12 - SU		99/99 - Continuous	CN - Continuous
74076	Flow	1 - Effluent Gross	0	--	Sample Permit Req. Value NODI		<=	36000.0 DAILY MX C - No Discharge	07 - gal/d									01/07 - Weekly	TM - Totalizer
81017	Chemical Oxygen Demand [COD]	1 - Effluent Gross	0	--	Sample Permit Req. Value NODI										Req Mon DAILY MX C - No Discharge	19 - mg/L		01/07 - Weekly	CP - Composite

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: 2025-06-04 14:20 (Time Zone: -04:00)

Report Last Signed By

User: FSURIEL@FLYTWEED.COM
 Name: Felipe Suriel
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