MO Dept	of Natura	al Resource	NPDES M	lonitoring	Report for	Wastewa	ter Dischar	ge Mo	onthly Sample	e - Monthly Report
Facility: Service Permit No: 1 Table: A-4	t. Moritz Esta MOGD00229	ates Condomini	ums WWTF		# 14457-	T	wner: <u>Lake Ar</u> erminated Per	ea Wastewat mit No: <u>MO</u>	er Association, In	
		eration/Chlorinat	ion/Dechlorination			ct hauler	ounty: Camder	1	(Las	t permit review: 31 March 2017
THIS REPO	RT COVERS	THE PERIOD	: Place an "X"	in the circle fo	or the Quarter I	being reported				
	1 st Quarter		2	nd Quarter (3)		3rd Quarter)	4	th Quarter
Jan	uary through ?	March	A	pril through Ju	une July through September			nber	Octobe	er through December
Du	ie April 28 th 20_		Du	e July 28th 20 <u></u>	7	Dı	ic October 28th 20_		Due	e Jan 28th 20
No D	ischarge for Qua	arter 🔘	No Dis	scharge for Quar	rter 🚫	No :	Discharge for Quart	cer 🔾	No Dise	charge for Quarter
Outfall # 001	Sample Collect	ed By: Devis		Telephone: 573 346	3810	Analysis Peri		VATER LABOR	ATORIES, LLC.	Telephone: 573-346-3810
	SAMPLE		ONE	E (1)	TW	O (2)				
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 6-27-17 Time: 800	ANALYSIS DATE	Date:	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	ANAI	LYTICAL METHOD
Flow	GPD	Design flow 1,501 - 50K								24 hr. estimate
BOD	mg/L	20						Grab		5210 B
TSS	mg/L	20						Grab		2540 D
рН	Units	6.0 – 9.0						Grab		4500 H + B
E. coli	#100mL	126						Grab		9223 B
CI TRC	μg/L	8.0						Grab		4500 CL - G
Ammonia	mg/L	4.6						Grab		4500 NH - 3
Dissolved O2	mg/L	Monitor & Report						Grab		4500 OG
Signature & Title	In Tec	paring Report:	ector	VF	Date: 7-10-	17	Telephone:	3-346-3810	E-mail: info@tota	alenvironmental.com
Roport Approved	By Owner:	ic. Sheeth	フ		Date: 7/11/2	017	Telephone:		E-mail:	
Report Approved W A Sign & Ret Co Office I	urn Form	[X]MDNR/	SWRO Woodland	[] MDNR 2155 N	/SERO Westwood		R/NERO Prospect Dr	[] MDNR		R & Permit Expire_30Jun2019] MDNR/SLRO 7545 S Lindbergh Blvd
073			eld, MO 65807		Bluff, MO 63901		n, MO 63552		Summit, MO 64086	

515 Old South Highway 5, Camdenton, MO 65020 573-346-3810

Facility: St. Permit No:		es Condominium 9	ns WWTF			The state of the s	ce Area Waster		tion, Inc.	Samples Received in Lab 6-13-19 07:28
Table: A-4	Quarterly - G	rab				3.3 (10.7)	the contract of the contract o	10-0094263		
		Aeration/Chlori	nation/Dechlo	rination/slud	ge disposal is	County: Ca	mden			
by contract h										
		S THE PERIOD	: Place an "X"	in the box be	eneath the qua	ter being repo	rted.			
	r - January th			ter - April thre			er - July through	September	4th Quarter	- October through December
Du	e by April 28.	, 2019	Du	e by July 28,	2019		by October 28.		Due	by January 20, 2020
				\boxtimes						
No Dis	charge For Qua	rter 🔲	No Dis	charge For Quar	ter 🛛	No Di	scharge For Quart	er 🗆	No Di	scharge For Quarter
Outfall # 002	Sample Collec	ted By: Kirk Davis		Telephone: 573-3	46-3810	Analysis Perfor	med By: Total Water La	boratories, LLC		Telephone: 573-346-3810
Parameter	Permitted Final Limits	Sample Type	Sample Date and Time	Final Results	Unit	Analysis Date	Analyst Initials	Data Qualifier	Comments	Analytical Method
4.7		24 Hour							Completed at	
Flow	1501-50000	Estimate	6-12-19 14:23	0	GPD				Sample Site	CN 5210 D
TSS TSS	20	Grab Grab			mg/L mg/L	-	-			SM 5210 B SM 2540 D
E. Coli	126	Grab			#/100mL	-				SM 9233 B
pH	6.0-9.0	Grab			Units				Completed at Sample Site	SM 4500 H + B
Ammonia	4.6	Grab			mg/L					Hach 10205*
CI TRC	<130	Grab			μg/L					SM 4500 CL - G
Dissolved Oxygen	Monitor & Report	Grab			mg/L				Completed at Sample Site	SM 4500 OG
Amy Osborn	5				Date:	20, 2019	Telephone:	46-3810	E-mail:	totalenvironmental.com
Report Approved		ab Director			Date:	20, 2017	Telephone:	10 3010	E-mail:	totalon vii olitioliaanooni
X	1									
										DMR Permit expires: June 30, 2
≥ Electro	nic Form	☐Sign & Ret		Tatal Water I	aboratories, LLC	to a series disease of south	that Madanal Fo		T abanesan	Report Number: 2019-0275

MDNR/SWRO 2040 W Woodland Springfield, MO 65807

Environmental Laboratory Accreditation Program (NH ELAP). Results reported for certified tests meet all requirements of NELAP. A list of certified test methods is available on request. NH ELAP certificate number 2055. Total Water Laboratories reserves the right to subcontract work to other NELAP certified laboratories when appropriate. This report shall not be reproduced except in full, without the written approval of Total Water Laboratories. These results pertain only to the samples indicated by the report.

*Method is not accredited through NH F.I.AP

515 Old South Highway 5, Camdenton, MO 65020 573-346-3810

Facility: St.	Moritz Estat	es Condominiu	ms WWTF			Owner: Lal	ce Area Waste	water Associa	tion, Inc.	arterly Report Samples Received in Lah
	MOGD0022						Permit No: 1			3-1-19 07:30
Table: A-4 (Quarterly - G	<u>rab</u>				The second secon		VIO-0094283		0 1 15 07.50
		Aeration/Chlor	ination/Dechlo	rination/slud	ge disposal is	County: Ca	<u>maen</u>			
by contract l										
THIS REPO	RT COVER	S THE PERIOD	: Place an "X	" in the box b	eneath the qua	rter being repo	rted.		*	
1st Quarte	r – January the e by April 28.	rough March	2nd Qua	rter – April thr ie by July 28,	ough June	3rd Quarte	er - July through by October 28		4th Quarter	October through December by January 20, 2020
						240		Due	Dy January 20, 2020	
	scharge For Qua		No Dis	charge For Quar	ter 🗆	No Di	scharge For Quart	er 🔲	No Dis	charge For Quarter
Outfall # 002	Outfall # Sample Collected By: Teleph 002 Kirk Davis				46-3810	Analysis Perfor	med By: Total Water La	boratories, LLC		Telephone: 573-346-3810
Parameter	Permitted Final Limits	Sample Type	Sample Date and Time	Final Results	Unit	Analysis Date	Analyst Initials	Data Qualifier	Comments	Analytical Method
Flow	1501-50000	24 Hour Estimate	2-28-19 10:30	720	GPD				Completed at Sample Site	
BOD	20	Grab	2-28-19 10:30	3.30	mg/L	3-1-19 07:10 3-6-19 07:52	VF	C, N		SM 5210 B
TSS	20	Grab	2-28-19 10:30	<1.5	mg/L	3-1-19	DG	С		SM 2540 D
E. Coli	126	Grab	NA		#/100mL					SM 9233 B
Н	6.0-9.0	Grab	2-28-19 10:30	8.35	Units				Completed at Sample Site	SM 4500 H + B
Ammonia	4.6	Grab	2-28-19 10:30	<0.60	mg/L	3-13-19	AO			Hach 10205*
CI TRC	<130	Grab	NA		μg/L			Y		SM 4500 CL - G
Dissolved Oxygen	Monitor & Report	Grab	2-28-19 10:30	11.04	mg/L				Completed at Sample Site	SM 4500 OG
Signature & Title of Individual Preparing Report: May MM Amy Osborn, Technical Lab Director					Date: March 20, 2019		Telephone: 573-34	46-3810	E-mail:	otalenvironmental.com
Report Approved By Owner:			Date:	Telephone:			E-mail:			

⊠ Electronic Form Submitted

47026

☐ Sign & Return Form to DNR Office:

MDNR/SWRO 2040 W Woodland Springfield, MO 65807 Total Water Laboratories, LLC. is accredited with the National Environmental Laboratory Accreditation Program (NELAP) through the New Hampshire Environmental Laboratory Accreditation Program (NH ELAP). Results reported for certified tests meet all requirements of NELAP. A list of certified test methods is available on request. NH ELAP certificate number 2055. Total Water Laboratories reserves the right to subcontract work to other NELAP certified laboratories when appropriate. This report shall not be reproduced except in full, without the written approval of Total Water Laboratories. These results pertain only to the samples indicated by the report.

*Method is not accredited through NH ELAP

Laboratory Report Number: 2019-0058

MO Dept	of Natura	al Resource	s NPDES M	lonitoring	Report for	Wastew	ater Dischar	ge Mo	nthly Samı	ole – Monthly Report
Facility: S Permit No: I Table: A-4	t. Moritz Esta MOGD00229 Quarterly - G	ates Condomini rab				T	Owner: <u>Lake Are</u> erminated Pern County: <u>Camden</u>	a Wastewate	r Association, I	
THIS REPO	RT COVERS	THE PERIOD	: Place an "X"	in the circle fo	r the Quarter b	eing reporte	ed.			
	1st Quarter		2	nd Quarter			3rd Quarter)		4th Quarter
Jan	uary through M	larch	Λ	pril through Ju	ne	- 1	uly through Septen	iber	Octo	oher through December
Du	e April 28th 20_		Du	e July 28th 20		I	Oue October 28th 20_		I	Due Jan 28th 20 19
No Di	ischarge for Qua	irter 🔾	No Di	scharge for Quar	ter 🔾	No	Discharge for Quart	er 🔾	No I	Discharge for Quarter
Outfall # 002	Sample Collecte Kirk Da	צוטוז		Telephone: 573 346	3810	Analysis Perfo		TER LABORAT	TORIES, LLC.	Telephone: 573-346-3810
	SAMPLE		ONE	E (1)	TWO	(2)				
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 10-5-18 Time: 1245	ANALYSIS DATE	Date: /2-0/-18 Time: /6:5-2	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	AN	ALYTICAL METHOD
Flow	GPD	Design flow 1,501 - 50K								24 hr. estimate
BOD	mg/L	20						Grab		5210 B
TSS	mg/L	20						Grab		2540 D
pН	Units	6.0 – 9.0						Grab		4500 H + B
E. coli	#100mL	126						Grab		9223 B
Cl TRC	μg/L	8.0						Grab		4500 CL – G
Ammonia	mg/L	4.6						Grab		4500 NH - 3
Dissolved O2	mg/L	Monitor & Report						Grab		4500 OG
Signature & Title	Mr Tech		rector	UF	Date: 1-04.	-19	Telephone:	3-346-3810	E-mail: info@	totalenvironmental.com
eport Approved	By Owner:	R			Date:	2019	Telephone:		E-mail:	
Sign & Ret Office I	urn Form	17327112	SWRO Woodland eld, MO 65807		, ,	[] MD:	NR/NERO Prospect Dr con, MO 63552			MR & Permit Expire_30Jun2019 [] MDNR/SLRO 7545 S Lindbergh Blvd 86 St Louis, MO 63125

MO Dept	of Natural	l Resources	NPDES M	onitoring	Report for	Wastewa	ter Dischar	ge Mo	nthly Samp	le - Monthly Report
Permit No: 1 Table: A-4	MOGD00229 Quarterly - Gra		ums WWTF	on/sludge dispo	osal is by contrac	Te Co	wner: <u>Lake Area</u> erminated Perm ounty: <u>Camden</u>	O the second of the	0094285	nc. ast permit review: 31 March 2017)
THIS REPO	RT COVERS	THE PERIOD	: Place an "X"	in the circle fo	r the Quarter b	eing reported	i.			
	1st Quarter)	2	nd Quarter			3rd Quarter)		4 th Quarter
Jan	uary through M	arch	A	pril through Ju	ne	Ju	ily through Septem	iber	Octo	ber through December
Du	ne April 28th 20_	_	Du	e July 28th 20		Du	ue October 28th 20_/	8	D	ruc Jan 28th 20
No D	ischarge for Quar	ter 🔾	No Dis	scharge for Quar	ter 🔾	No 1	Discharge for Quart	er 🔾	No D	ischarge for Quarter 🔘
Outfall # 002	Sample Collected	By:		Telephone: 571 346		Analysis Perfor		TER LABORAT	ORIES, LLC.	Telephone: 573-346-3810
	SAMPLE		ONE	E (1)	TWO	(2)				
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 7-26-19 Time: /2:37	ANALYSIS DATE	Date: 7-18-18 Time: 10:30	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	AN.	ALYTICAL METHOD
Flow	GPD	Design flow 1,501 - 50K	280							24 hr. estimate
BOD	mg/L	20	10,24-	C				Grab		5210 B
TSS	mg/L	20	6.4					Grab		2540 D
рH	Units	6.0 - 9.0	7.73					Grab		4500 H + B
E. coli	#100mL	126	365.4		<1.0		19.1	Grab		9223 B
CITRC	μg/L	8.0	<130.					Grab		4500 CL – G
Ammonia	mg/L	4.6	<0.60					Grab		4500 NH - 3
Dissolved O2	mg/L	Monitor & Report	5.68					Grab		4500 OG
Signature & Title	of Individual Prepa	aring Report:	6 Analysi	AP AP	Date: 8-15-18		Telephone:	3-346-3810	E-mail: info@t	otalenvironmental.com
Report Approved	By Owner:	R	33869	C. LICEN MILE	Date: 8/16/20	18	Telephone:		E-mail:	
Sign & Res			- AVS LES	[] MDNR 2155 N))	[] MDN 1709	NR/NERO Prospect Dr on, MO 63552			MR & Permit Expire_30Jun2019 [] MDNR/SLRO 7545 S Lindbergh Blvd 86 St Louis, MO 63125



Total Water Laboratories, LLC

515 Old South 5, Camdenton, Missouri 65065 Phone:(673) 346-3810 Fax:(573) 346-4168

Data Qualifiers in the TWL Laboratory Quality Assurance System:

В	present in the method blank at
С	The batch control sample failed to meet the required acceptance criteria.
D	Result obtained through the analysis of a sample dilution.
E	Concentration exceeds the instrument calibration range.
F	Internal Standard area failed to meet the required acceptance criteria in repeat instrumental analyses. Results should be interpreted as estimated concentrations.
G	The Method of Standard Additions (MSA) was used to quantify the concentration.
H	Test performed after maximum allowable hold time.
Ì	Increased imprecision in Laboratory Control Sample (LCS) Duplicate
J	Estimated value.
K	DW sample above 10 C and received more than two hours after collection.
M	Analyte failed to meet the required acceptance criteria for duplicate analysis.
N	Relative difference between the high and low replicates was greater than 30%.
P	Chemical preservation discrepancy noted at the time of analysis.
Q	Analyte failed to meet the required acceptance criteria for spike recovery in the matrix spike (MS) and matrix spike duplicate (MSD).
R	The TRC analysis could not be performed on the sample and no other information was available
Т	Too Numerous to Count and/or Confluent; estimated value.
U	Parameter was analyzed for but not detected above the reporting limit.
NA	Not analyzed.
NE	Not requested.
X	Miscellaneous; note comments section.

S The batch control sample was within 10% of acceptance criteria

Permit No: 1 Table: A-4	MOGD00229 Quarterly - G	-		ion/sludge dispo	osal is by contra	T	Owner: <u>Lake Are</u> Terminated Pern County: <u>Camden</u>		0094285	nc. ast permit review: 31 March 201
THIS REPO	RT COVERS	THE PERIOD	: Place an "X"	in the circle fo	or the Quarter	being report	ed.			
	1 st Quarter			and Quarter (Ď		3rd Quarter)	1	4th Quarter
Jan	uary through N	larch	Δ	pril through Ju	ne		July through Septen	nber	Octo	her through December
Du	ue April 28th 20_		Dt	ie July 28th 20_/	8		Due October 28th 20			Puc Jan 28th 20
No Di	ischarge for Qua	arter 🔾	No Di	scharge for Quar	ter 🔾	No	Discharge for Quart	er O		ischarge for Quarter
Outfall # 002	Sample Collecte	ed By:	5	Telephone: 573 346 38	210	Analysis Perfe		TER LABORAT		Telephone: 573-346-3810
	SAMPLE		ONI	E (1)	TW	O (2)				272 210 2010
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 6-25-18 Time: 9-36	ANALYSIS DATE	Date:	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	AN	ALYTICAL METHOD
Flow	GPD	Design flow 1,501 - 50K	180							24 hr. estimate
BOD	mg/L	20	7-97					Grab		5210 B
TSS	mg/L	20	1.9 -	C				Grab		2540 D
pH	Units	6.0 – 9.0	8.08					Grab		4500 H + B
E. coli	#100mL	126	<1.0					Grab		9223 B
CITRC	μg/L	8.0	<130					Grab		4500 CL - G
Ammonia	mg/L	4.6	10.60					Grab		4500 NH - 3
Dissolved O2	mg/L	Monitor & Report	7.45				14	Grab		4500 OG
Signature & Title	0	paring Report:	ah Anas	Ao	Date: 7-15-18		Telephone:	3-346-3810	E-mail: info@to	otalenvironmental.com
Report Approved	By Owner:	R 131	27431	520 N. J.	Date: 7/19/2	018	Telephone:		E-mail:	
			30-10-	8	111				DN	MR & Permit Expire_30Jun201
Sign & Ret	urn Form ndicated:		SWRO Woodland eld, MO 65807		/SERO Westwood Bluff, MO 6390	1709	NR/NERO Prospect Dr con, MO 63552		/KCRO Colbern Rd Summit, MO 6408	MDNR/SLRO 7545 S Lindbergh Blvd St Louis, MO 63125



Total Water Laboratories, LLC

515 Old South 5, Camdenton, Missouri 55065 Phone:(573) 346-3810 Fax:(573) 346-4168

Data Qualifiers in the TWL Laboratory Quality Assurance System:

В	present in the method blank at
С	The batch control sample failed to meet the required acceptance criteria.
D	Result obtained through the analysis of a sample dilution.
Ε	Concentration exceeds the instrument calibration range.
F	Internal Standard area failed to meet the required acceptance criteria in repeat instrumental analyses. Results should be interpreted as estimated concentrations.
G	The Method of Standard Additions (MSA) was used to quantify the concentration.
H	Test performed after maximum allowable hold time.
I	Increased imprecision in Laboratory Control Sample (LCS) Duplicate
J	Estimated value.
K	DW sample above 10 C and received more than two hours after collection.
M	Analyte failed to meet the required acceptance criteria for duplicate analysis.
N	Relative difference between the high and low replicates was greater than 30%.
P	Chemical preservation discrepancy noted at the time of analysis.
Q	Analyte failed to meet the required acceptance criteria for spike recovery in the matrix spike (MS) and matrix spike duplicate (MSD).
R	The TRC analysis could not be performed on the sample and no other information was available
Т	Too Numerous to Count and/or Confluent; estimated value.
U	Parameter was analyzed for but not detected above the reporting limit.
N	Not analyzed.
NI	R Not requested.
X	Miscellaneous; note comments section.
s	The batch control sample was within 10% of acceptance criteria

MO Dept of Natural Resources NPDES Monitoring Report for Wastewater Discharge --- Monthly Sample - Monthly Report Facility: St. Moritz Estates Condominiums WWTF Owner: Lake Area Wastewater Association, Inc. Permit No: MOGD00229 Terminated Permit No: MO-0094285 Table: A-4 Quarterly - Grab County: Camden Facility Type: Extended Aeration/Chlorination/Dechlorination/sludge disposal is by contract hauler (Last permit review: 31 March 2017) THIS REPORT COVERS THE PERIOD: Place an "X" in the circle for the Quarter being reported. 1st Quarter 4th Quarter 2nd Quarter 3rd Quarter October through December January through March April through June July through September Due April 28th 20 18 Due July 28th 20 Due October 28th 20 Duc Jan 28th 20 No Discharge for Quarter No Discharge for Quarter No Discharge for Quarter No Discharge for Quarter Telephone: Sample Collected By: Telephone: Analysis Performed By: Outfall # TOTAL WATER LABORATORIES, LLC. 573-346-3810 573 346 3810 002 Kirk Davis TWO (2) SAMPLE ONE (1) PERMITTED AVG OF Date: 7-03-18 ANALYSIS Date: ANALYSIS SAMPLE FINAL SAMPLES IF ANALYTICAL METHOD PARAMETER UNIT TYPE DATE DATE 2 TAKEN LIMITS Time: 10:30 Time: Design flow 360 24 hr. estimate GPD 1,501 - 50K Flow 5.54-6 Grab 5210 B BOD mg/L 20 Grab 2540 D 20 me/L TSS 7-83 Grab 4500 H+B Units 6.0 - 9.0pH 9223 B Grab #100mL 126 E. coli Grab 4500 CL - G CITRC 8.0 ue/L 40,60 Grab 4500 NH - 3 4.6 mg/L Ammonia Monitor & 8.91 4500 OG Grab Dissolved 02 Report Signature & Title of Individual Preparing Report: Telephone: E-mail: A0 Date: info@totalenvironmental.com 573-346-3810 Telephone: E-mail: Report Approved By Owner: DMR & Permit Expire 30Jun2019 Sign & Return Form 1 MDNR/NERO MDNR/KCRO MDNR/SLRO MDNR/SERO [X]MDNR/SWRO 1709 Prospect Dr 500 NE Colbern Rd 7545 S Lindbergh Blvd 2155 N Westwood Office Indicated: 2040 W Woodland Macon, MO 63552 Lee's Summit, MO 64086 St Louis, MO 63125 Poplar Bluff, MO 63901 Springfield, MO 65807



Total Water Laboratories, LLC

515 Old South 5, Camdenton, Missouri 5065 Phone:(573) 346-3810 Fax:(573) 346-4168

Data Qualifiers in the TWL Laboratory Quality Assurance System:

- present in the method blank at C The batch control sample failed to meet the required acceptance criteria. D Result obtained through the analysis of a sample dilution. E Concentration exceeds the instrument calibration range. Internal Standard area failed to meet the required acceptance criteria in repeat instrumental analyses. Results should be interpreted as estimated concentrations. G The Method of Standard Additions (MSA) was used to quantify the concentration. H Test performed after maximum allowable hold time. I Increased imprecision in Laboratory Control Sample (LCS) Duplicate J Estimated value. K DW sample above 10 C and received more than two hours after collection. L Batch standard failed; estimated value. M Analyte failed to meet the required acceptance criteria for duplicate analysis. Relative difference between the high and low replicates was greater than 30%. Chemical preservation discrepancy noted at the time of analysis. Q Analyte failed to meet the required acceptance criteria for spike recovery in the matrix spike (MS) and matrix spike duplicate (MSD). T Too Numerous to Count and/or Confluent; estimated value. U Parameter was analyzed for but not detected above the reporting limit. NA Not analyzed. NR Not requested. X Miscellaneous; note comments section.
- S The batch control sample was within 10% of acceptance criteria

Facility: St. Permit No: M. Table: A-4 C.	10GD00229		ıms WWTF			T	Owner: <u>Lake Are</u> Ferminated Pern County: Camden			nc.
		eration/Chlorinat							(L	ast permit review: 31 March 2017)
THIS REPOR	RT COVERS	THE PERIOD	Place an "X"	in the circle fo	r the Quarter b	eing report	ed.	II.		
	1st Quarter)	2	nd Quarter)		3rd Quarter)		4th Quarter 🚫
Janu	iary through N	Iarch	٨	pril through Ju	ne		July through Septen	nber	Octo	ber through December
Duc	April 28th 20_		Du	ie July 28th 20	_	1	Due October 28th 20_		D	Due Jan 28th 20 <u>18</u>
No Dis	scharge for Qua	rter 🔾	No Di	scharge for Quar	ter 🔘	No	o Discharge for Quart	ter O	No D	rischarge for Quarter 🖔
Outfall # 002	Sample Collecte			Telephone: 573 346 3	810	Analysis Perfe		TER LABORAT	ORIES, LLC.	Telephone: 573-346-3810
	SAMPLE		ONI		TWO	(2)				
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 65-17 Time: 1437	ANALYSIS DATE	Date: 12-4-17 Time: 952	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	AN	ALYTICAL METHOD
Flow	GPD	Design flow 1,501 - 50K	11me; 1157		Time: (72					24 hr. estimate
BOD	mg/L	20						Grab		5210 B
TSS	mg/L	20						Grab		2540 D
pН	Units	6.0 – 9.0						Grab		4500 H + B
E. coli	#100mL	126						Grab		9223 B
LCI TRC	µg/L	8.0						Grab		4500 CL – G
Ammonia	mg/L	4.6						Grab		4500 NH - 3
Dissolved O2	mg/L	Monitor & Report						Grab		4500 OG
Signature & Title		paring Report:	chil	V	Date: 12-13-1	7	Telephone:	3-346-3810	E-mail: info@t	otalenvironmental.com
Report Approved	By Owner:	EN.	Luciani	-	Date:		Telephone:		E-mail:	
= ×1	156	2156	3-1-1		J				Di	MR & Permit Expire_30Jun2019
Sign & Ret	urn Form	[X]MDNR/ 2040 W	SWRO Woodland eld, MO 65807	The second second	/SERO Westwood Bluff, MO 63901	170	ONR/NERO 9 Prospect Dr con, MO 63552		/KCRO Colbern Rd Jummit, MO 640	[] MDNR/SLRO 7545 S Lindbergh Blvd 86 St Louis, MO 63125



MO Dept of Natural Resources NPDES Monitoring Report for Wastewater Discharge --- Monthly Sample - Monthly Report Facility: St. Moritz Estates Condominiums WWTF Owner: Lake Area Wastewater Association, Inc. Permit No: MOGD00229 Terminated Permit No: MO-0094285 Table: A-4 Quarterly - Grab County: Camden Facility Type: Extended Aeration/Chlorination/Dechlorination/sludge disposal is by contract hauler (Last permit review: 31 March 2017) THIS REPORT COVERS THE PERIOD: Place an "X" in the circle for the Quarter being reported. 1st Quarter 2nd Quarter 3rd Quarter 4th Quarter January through March April through June July through September October through December Due April 28th 20 Due October 28th 20 17 Due July 28th 20 Due Jan 28th 20 No Discharge for Quarter No Discharge for Quarter No Discharge for Quarter X No Discharge for Quarter Sample Collected By: Outfall # Telephone: Analysis Performed By: Telephone: 002 TOTAL WATER LABORATORIES, LLC. 573-346-3810 SAMPLE ONE (1) TWO (2) PERMITTED Date: 9-14-17 AVGOF ANALYSIS Date: ANALYSIS SAMPLE PARAMETER UNIT FINAL SAMPLES IF ANALYTICAL METHOD DATE TYPE LIMITS 2 TAKEN Time: 1005 Time: Design flow Flow GPD 1,501 - 50K 24 hr. estimate BOD mg/L 20 Grab 5210 B TSS mg/L 20 Grab 2540 D pH Units 6.0 - 9.0Grab 4500 H+B E. coli #100mL 126 Grab 9223 B CITRC µg/L 8.0 Grab 4500 CL - G Ammonia mg/L 4.6 Grab 4500 NH - 3 Monitor & Dissolved O2 mg/L Report Grah 4500 OG Signature & Title of Individual Preparing Report: Telephone: E-mail: any over Technical Lab Director 573-346-3810 info@totalenvironmental.com Sport Approved By Owner: Telephone: E-mail: DMR & Permit Expire 30Jun2019 Sign & Return Form [X]MDNR/SWRO MDNR/SERO MDNR/NERO MDNR/KCRO MDNR/SLRO 60 Office Indicated: 2040 W Woodland 2155 N Westwood 1709 Prospect Dr 500 NE Colbern Rd 7545 S Lindbergh Blvd Springfield, MO 65807 Poplar Bluff, MO 63901 Macon, MO 63552 Lee's Summit, MO 64086 St Louis, MO 63125

Permit No: No: No: No: A-4 (MOGD00229 Quarterly - Gr			# 1ch	1 4 2017 4 25 / 44 osal is by contr	Z9 Te	vner: <u>Lake Area</u> rminated Perm ounty: <u>Camden</u>		094285	ast permit review: 31 March 20	17
THIS REPOR	RT COVERS	THE PERIOD	: Place an "X"	in the circle fo	or the Quarter	being reported	i.				
	1st Quarter			2nd Quarter (0		3rd Quarter).		4th Quarter	
Jan	uary through A	Iarch	A	pril through Ju	ine	Ju	ly through Septem	ber	Oct	ober through December	
Du	e April 28th 20_		Dı	ue July 28th 20_/	7_	Du	e October 28th 20_			Due Jan 28 th 20	
No Di	scharge for Qua	rter 🔘	No Di	scharge for Qua	rter 🛇	No I	Discharge for Quart	er 🔾	No I	Discharge for Quarter O	
Outfall # 002	Sample Collecte といと			Telephone: 573 346		Analysis Perform		TER LABORAT	ORIES, LLC.	Telephone: 573-346-3810	
	SAMPLE		ONI	E (1)	TV	VO (2)					
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 6-27-17 Time: 8/0	ANALYSIS DATE	Date:	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	Al	NALYTICAL METHOD	
Flow	GPD	Design flow 1,501 - 50K								24 hr. estimate	
BOD	mg/L	20						Grab		5210 B	
TSS	mg/L	20						Grab		2540 D	
pН	Units	6.0 - 9.0						Grab		4500 H + B	
E. coli	#100mL	126						Grab		9223 B	
CI TRC	µg/L	8.0						Grab		4500 CL - G	
Ammonia	mg/L	4.6						Grab		4500 NH - 3	
Dissolved O2	mg/L	Monitor & Report						Grab		4500 OG	
Signature & Title	of Individual Prep	paring Report:	ab Director	VF	Date: 7-10	-17	Telephone:	3-346-3810	E-mail: info@	totalenvironmental.com	
Report Approved	By Owner:	2. Now			Date:	2017	Telephone:		E-mail:		
Sign & Red	urn Form	[X]MDNR/ 2040 W	SWRO Woodland eld, MO 65807	2155 N	N/SERO Westwood Bluff, MO 639	[] MDN 1709	IR/NERO Prospect Dr on, MO 63552			OMR & Permit Expire_30Jun20 [] MDNR/SLRO 7545 S Lindbergh Blvd 086 St Louis, MO 63125	

515 Old South Highway 5, Camdenton, MO 65020 573-346-3810

		ondominiums W	WIF			Owner: La	ke Area Waster	water Associa	tion, Inc.	Samples Received in Law
and the second s	MOGD0019	-				Terminate	d Permit No: N	MO-0130974		6-11-19 09:40
	Quarterly - G					County: Ca				
Facility Typ	e: Flow Equa	lization/extended	aeration/sludge	holding basin	seasonal	County. Se	<u> </u>			
		tion/sludge dispos								
HIS REPO	RT COVER	S THE PERIOD	: Place an "X	" in the box be	eneath the qua	rter being repo	rted.			
1st Quarte	r – January thi	rough March	2 nd Quan	rter – April thr	ough June	3rd Quart	er – July through		4th Quarter	- October through December
Du	e by April 28.	, 2019	Du	e by July 28,	2019	Due	by October 28,	, 2019	Due	by January 20, 2020
				\boxtimes						
No Dis	scharge For Qua	rter 🗌	No Die	charge For Quar	ter 🛛	No Di	ischarge For Quart	r 🗆	N. D.	
Outfall #	Sample Collec		110 013	Telephone:	iei za	Analysis Perfor		er 🗀	No Dis	charge For Quarter
001	0	Drew Nielsen			46-3810	Analysis I el loi	Total Water Lal	boratories, LLC	2	Telephone: 573-346-3810
Parameter	Permitted Final Limits	Sample Type	Sample Date and Time	Final Results	Unit	Analysis Date	Analyst Initials	Data Qualifier	Comments	Analytical Method
low	1501-50000	24 Hour Estimate	6 10 10 12:55	0	CDD				Completed at	
DD D	20	Grab	6-10-19 12:55	0	GPD mg/L	-			Sample Site	03.4.5010.0
SS	20	Grab			mg/L					SM 5210 B SM 2540 D
Coli	126	Grab			#/100mL					SM 9233 B
H	6.0-9.0	Grab			Units				Completed at Sample Site	SM 4500 H + B
mmonia	4.6	Grab			mg/L					Hach 10205*
TRC	<130	Grab			µg/L					SM 4500 CL - G
issolved xygen	Monitor & Report	Grab			mg/L				Completed at Sample Site	SM 4500 OG
	of Individual Pre				Date:		Telephone:		E-mail:	5141 4300 00
any oll	M				June 2	24, 2019		6-3810	1 3 3 5	otalenvironmental.com
my Osborn port Approved	, Technical L	ab Director					mil			Acceptance of a control of a property.
C Approved	by Owner.				Date:		Telephone:		E-mail:	
	-				1					DMR Permit expires: June 30,
				and Colombia						
⊠ Electro	nic Form	□Sign & Ret DNR O		Laboratory Ac	creditation Progr	ram (NELAP) thr	h the National Em ough the New Han	pshire	Laboratory	Report Number: 2019-024
TERE!	nic Form itted	6 7019 MDNR/S 2040 W W Springfield,	SWRO oodland	for certified te is available on Laboratories r laboratories w	sts meet all requi a request. NH ELA reserves the right when appropriate.	rements of NELA. AP certificate nun to subcontract we This report shall	m (NH ELAP). Re: P. A list of certified aber 2055. Total W ork to other NELA: not be reproduced oratories. These re:	d test methods Vater P certified I except in full,		Attachments:
1				only to the san	nples indicated by	the report.		- portune		Page

515 Old South Highway 5, Camdenton, MO 65020 573-346-3810

	The State of the State of the State of the	ondominiums W	WTF			Owner: Lal	ce Area Wastev	water Associat	tion, Inc.	Samples Received in Lab	
	MOGD00194	-				Terminated	Permit No: N	10-0130974	1	3-1-19 14:30	
Table: <u>A-4 (</u>	Quarterly - G	<u>rab</u>				County: Ca	mden _				
		ization/extended a			seasonal						
The state of the s		ion/sludge dispos									
		THE PERIOD									
	r – January thi e by April 28,			rter – April three e by July 28,			er – July through by October 28,			- October through December by January 20, 2020	
	\boxtimes										
	charge For Qua		No Dis	charge For Quar	ter 🔲		scharge For Quarte	er 🔲	No Dis	charge For Quarter	
Outfall # 001	Sample Collec	ted By: Kirk Davis		Telephone: 573-3	46-3810	Analysis Perfor	med By: Total Water Lab	ooratories, LLC		Telephone: 573-346-3810	
Parameter	Permitted Final Limits	Sample Type	Sample Date and Time	Final Results	Unit	Analysis Date	Analyst Initials	Data Qualifier	Comments	Analytical Method	
Flow	1501-50000	24 Hour Estimate	3-1-19 14:08	0	GPD				Completed at Sample Site		
BOD	20	Grab			mg/L					SM 5210 B	
TSS	20	Grab			mg/L					SM 2540 D	
E. Coli	126	Grab			#/100mL					SM 9233 B	
pH	6.0-9.0	Grab			Units				Completed at Sample Site	SM 4500 H + B	
Ammonia	4.6	Grab			mg/L					Hach 10205*	
CI TRC	<130	Grab			µg/L					SM 4500 CL - G	
Dissolved Oxygen	Monitor & Report	Grab			mg/L				Completed at Sample Site	SM 4500 OG	
duy by					Date: March	20, 2019	Telephone: 573-34	46-3810	E-mail: info@t	otalenvironmental.com	
Amy Osborn, Technical Lab Director Report Approved By Owner: X					Date: 3/2	Date: Telephone:			E-mail:		

☑ Electronic Form Submitted

42021

☐ Sign & Return Form to DNR Office:

MDNR/SWRO 2040 W Woodland Springfield, MO 65807 Total Water Laboratories, LLC. is accredited with the National Environmental Laboratory Accreditation Program (NELAP) through the New Hampshire Environmental Laboratory Accreditation Program (NH ELAP). Results reported for certified tests meet all requirements of NELAP. A list of certified test methods is available on request. NH ELAP certificate number 2055. Total Water Laboratories reserves the right to subcontract work to other NELAP certified laboratories when appropriate. This report shall not be reproduced except in full, without the written approval of Total Water Laboratories. These results pertain only to the samples indicated by the report.

*Method is not accredited through NH ELAP

Laboratory Report Number: 2019-0059

MO Dept of Natural Resources NPDES Monitoring Report for Wastewater Discharge -Quarterly Sample - Quarterly Report Facility: Summer Hill Condominiums WWTF Owner: Summer Hill Condominiums Permit No: MOGD00194 Facility Type: Flow Equalization/extended aeration/sludge holding basin/chlorination/sludge disposal by contract hauler County: Camden THIS REPORT COVERS THE PERIOD: Place an "X" in the box beneath the quarter being reported. 1st Quarter - January through March 2nd Quarter - April through June 3rd Quarter - July through September 4th Quarter - October through December Due by April 28th 20 Due by July 28th 20 Due by October 28 20 Due by January 28th 20 19 No Discharge For Quarter No Discharge For Quarter No Discharge For Quarter No Discharge For Quarter 🛣 Sample Collected By: Outfall # Telephone: Analysis Performed By: Telephone: 573 346 3810 Nel 1-055 001 TOTAL WATER LABORATORIES, LLC. 573-346-3810 Sample Types: A = grab, B = 24 hr composite, C = modified composite. Note: If SAMPLE ONE (1) TWO (2) exceedance occurs attach explanation of possible cause. PERMITTED Date: Date: AVG OF SAMPLE 12-15-18 PARAMETER UNIT FINAL 10-3-18 ANALYSIS ANALYSIS SAMPLES IF TYPE ANALYTICAL METHOD LIMITS Time: Time: DATE DATE 2 TAKEN A. Bor C MGD Flow <50,000 A 5210 B BOD Mg/L 20 A 2540 D TSS Mg/L 20 A 4500 H+B pH Units 6.0 - 9.0A 4500 NH - 3 NH3 4.6 Mg/L A 9223 (Colilert) E. coli #100mL 126 A 4500 CL - G 8 CI TRC µg/L Monitor & A 4500 OG Dissolved O Mg/L Report Signature & Title of Individual Preparing Report: Date: Telephone: E-mail: VF 573-346-3810 info@totalenvironmental.com Technical Lab Director Report Approved By Owner: Telephone: E-mail: X Permit Expires 6-30-19 LAWWA Sign & Return Form MDNR/SWRO MDNR/SERO MDNR/NERO MDNR/KCRO MDNR/SLRO To Office Indicated: 2040 W Woodland 2155 N Westwood 1709 Prospect Dr 500 NE Colbern Rd 7545 S Lindbergh Blvd Springfield, MO 65807 Poplar Bluff, MO 63901 Macon, MO 63552 Lee's Summit, MO 64086 St Louis, MO 63125

MO Dept of Natural Resources NPDES Monitoring Report for Wastewater Discharge -Quarterly Sample - Quarterly Report Facility: Summer Hill Condominiums WWTF Owner: Summer Hill Condominiums Permit No: MOGD00194 Facility Type: Flow Equalization/extended aeration/sludge holding basin/chlorination/sludge disposal by contract hauler County: Camden THIS REPORT COVERS THE PERIOD: Place an "X" in the box beneath the quarter being reported. 1st Ouarter - January through March 2nd Quarter - April through June 3rd Quarter - July through September 4th Quarter - October through December Due by April 28th 20 Due by July 28th 20 Due by October 28 20 18 Due by January 28th 20 No Discharge For Quarter No Discharge For Quarter No Discharge For Quarter No Discharge For Quarter Sample Collected By: Telephone: Analysis Performed By: Telephone: Outfall # 573 346 3810 Kirk Davis TOTAL WATER LABORATORIES, LLC. 573-346-3810 001 Sample Types: A = grab, B = 24 hr composite, C = modified composite. Note: If SAMPLE ONE (1) TWO (2) exceedance occurs attach explanation of possible cause. Date: 9-17-18 PERMITTED Date: AVG OF SAMPLE ANALYSIS ANALYSIS SAMPLES IF TYPE PARAMETER UNIT FINAL ANALYTICAL METHOD LIMITS DATE Time: DATE 2 TAKEN A. Bor C Time: 1100 <50,000 MGD Flow A 5210 B BOD Mg/L 20 A 2540 D 20 Mg/L TSS A 4500 H + B Units 6.0 - 9.0pH 4500 NH - 3 A NH3 Mg/L 4.6 A 9223 (Colilert) #100mL 126 E. coli 4500 CL - G A CI TRC ug/L Monitor & 4500 OG A Dissolved O Report Mg/L Signature & Title of Individual Preparing Report: Date: Telephone: E-mail: VF 573-346-3810 info@totalenvironmental.com Technical Las Director Report Approved By Owner: Telephone: E-mail: X 36960 Permit Expires 6-30-19 MDNR/SWRO MDNR/SERO MDNR/NERO [] MDNR/KCRO MDNR/SLRO ® Office Indicated: 2040 W Woodland 2155 N Westwood 1709 Prospect Dr 500 NE Colbern Rd 7545 S Lindbergh Blvd Poplar Bluff, MO 63901 Macon, MO 63552 Lee's Summit, MO 64086 St Louis, MO 63125 Springfield, MO 65807

Facility: S	MOGD00194	Condominiums \	WWTF				mmer Hill Cond			e – Quarterly Report	
		/extended aeration/slud				County: Camden					
THIS REPO	RT COVERS	THE PERIOD	Place an "X"	in the box ben	eath the quart						
	er – January three by April 28th			erter – April thro by July 28th 20					4 th Quarter – October through December Due by January 28 th 20		
				X							
	ischarge For Qua		No D	ischarge For Quar	ter 🗵	No D	ischarge For Quarte	er 🗆	No D	ischarge For Quarter 🔲	
Outfall #	Sample Collecte			Telephone:		Analysis Perform		SORVED VI G	Telephone:		
001	SAMPLE	rk Davis				70 (2)		TER LABORAT		573-346-3810 odified composite. Note: If	
	SAMIFLE			E (1)		O (2)	exceedance occur	s attach explana	tion of possible caus	se.	
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 6-30-18 Time: 9:30	ANALYSIS DATE	Date:	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE A, B or C	AN	ALYTICAL METHOD	
Flow	MGD	<50,000									
BOD	Mg/L	20						A		5210 B	
TSS	Mg/L	20						A		2540 D	
pН	Units	6.0 - 9.0						A		4500 H + B	
NH3	Mg/L	4.6					M	A		4500 NH - 3	
E. coli	#100mL	126						A		9223 (Colilert)	
Cl TRC	μg/L	8						A		4500 CL – G	
Dissolved O	Mg/L	Monitor & Report						A		4500 OG	
Signature & Title	of Individual Prep	4 ,	eb Anali	#0	Date: 7-15-18		Telephone: 573-3	346-3810	E-mail: info@	totalenvironmental.com	
X Report Approved	By Owner:	2	32CK	(3	Date: 7/19/2	018	Telephone:		E-mail:		
LAW			10/13	9 78/4	1.7		J.		-	Permit Expires 6-30-19	
W A E Sign & Red		[] MDNR/3		[] MDNR			R/NERO	[] MDNR		[] MDNR/SLRO	
So Office I		2040 W	Woodland eld, MO 65807	2155 N	Westwood Bluff, MO 6390	1709	Prospect Dr n, MO 63552	500 NE	Colbern Rd Summit, MO 640	7545 S Lindbergh Blvd	

TOTAL WATER LABORATORIES, LLC. MO Dept of Natural Resources NPDES Monitoring Report for Wastewater Discharge -Quarterly Sample - Quarterly - Quarter Facility: Summer Hill Condominiums WWTF Owner: Summer Hill Condominiums Permit No: MOGD00194 Facility Type: Flow Equalization/extended aeration/sludge holding basin/chlorination/sludge disposal by contract hauler County: Camden THIS REPORT COVERS THE PERIOD: Place an "X" in the box beneath the quarter being reported. 1st Quarter - January through March 2nd Quarter - April through June 3rd Quarter - July through September 4th Quarter - October through December Due by April 28th 20 /8 Due by July 28th 20 Due by October 28 20 Due by January 28th 20 No Discharge For Quarter No Discharge For Quarter No Discharge For Quarter No Discharge For Quarter Sample Collected By: Telephone: Analysis Performed By: Telephone: Outfall # TOTAL WATER LABORATORIES, LLC. 001 Drein Hiersen 573 346 3516 573-346-3810 Sample Types: A = grab, B = 24 hr composite, C = modified composite. Note: If SAMPLE ONE (1) TWO (2) exceedance occurs attach explanation of possible cause. PERMITTED Date: Date: AVG OF SAMPLE PARAMETER UNIT FINAL 3-05-18 ANALYSIS ANALYSIS SAMPLES IF TYPE ANALYTICAL METHOD LIMITS DATE 2 TAKEN A. Bor C Time: DATE Time: 9:37 MGD <50,000 Flow A 5210 B BOD Mg/L 20 A 2540 D TSS Mg/L 20 4500 H+B A Units 6.0 - 9.0pH 4500 NH - 3 A NH3 Mg/L 4.6 9223 (Colilert) A #100mL E. coli 126 A 4500 CL - G CI TRC ug/L 8 Monitor & 4500 OG A Dissolved O Mg/L Report Signature & Title of Individual Preparing Report: E-mail: Date: Telephone: 573-346-3810 info@totalenvironmental.com Telephone: E-mail: Permit Expires 6-30-19 LAWWA I. Sign & Return Form MDNR/SWRO MDNR/SERO MDNR/NERO MDNR/KCRO MDNR/SLRO o Office Indicated: 2040 W Woodland 2155 N Westwood 1709 Prospect Dr 500 NE Colbern Rd 7545 S Lindbergh Blvd

Poplar Bluff, MO 63901

Macon, MO 63552

Lee's Summit, MO 64086

St Louis, MO 63125

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Springfield, MO 65807

TUTAL WATER LABURATURIES, LLC.

MO Dept of Natural Resources NPDES Monitoring Report for Wastewater Discharge -Quarterly Sample - Quarterly Report Facility: Summer Hill Condominiums WWTF Owner: First National Bank Permit No: MOGD00194 Facility Type: Flow Education/extended aeration/sludge holding basin/chlorination/sludge disposal by contract hauler County: Camden THIS REPORT COVERS THE PERIOD: Place an "X" in the box beneath the quarter being reported. 3rd Quarter - July through September 4th Quarter - October through December 1st Quarter - January through March 2nd Quarter - April through June Due by January 28th 20 / 8 Due by April 28th 20 Due by July 28th 20 Due by October 28 20 X No Discharge For Quarter No Discharge For Quarter No Discharge For Quarter No Discharge For Quarter Sample Collected By: Telephone: Analysis Performed By: Telephone: Outfall # TOTAL WATER LABORATORIES, LLC. Drew Nielsen 573-346-3810 573-346-3810 001 Sample Types: A = grab, B = 24 hr composite, C = modified composite. Note: If SAMPLE TWO (2) ONE (1) exceedance occurs attach explanation of possible cause. SAMPLE PERMITTED Date: 10-2-17 Date: ANALYSIS 12-15-17 ANALYSIS SAMPLES IF TYPE ANALYTICAL METHOD PARAMETER UNIT FINAL LIMITS Time: DATE Time: DATE 2 TAKEN A. Bor C 1322 6:47 MGD 0.0072 Flow 5210 B A BOD Mg/L 20 A 2540 D 20 TSS Mg/L A 4500 H + B Units 6.0 - 9.0pH 4500 NH - 3 A Mg/L 4.6 NH3 A 9223 (Colilert) #100mL 126 E. coli A 4500 CL - G CI TRC µg/L 8 Monitor & A 4500 OG Dissolved O Mg/L Report Signature & Title of Individual Preparing Report: Date: Telephone: E-mail: 573-346-3810 info@totalenvironmental.com Technical Lab Director my odber 1-08-18 Report Approved By Owner: Telephone: E-mail: X HAWWA Permit Expires 6-30-19 Sign & Return Form I MDNR/SERO MDNR/NERO MDNR/SWRO MDNR/KCRO MDNR/SLRO 7-0075 Office Indicated: 2040 W Woodland 2155 N Westwood 1709 Prospect Dr 500 NE Colbern Rd 7545 S Lindbergh Blvd Springfield, MO 65807 Poplar Bluff, MO 63901 Macon, MO 63552 Lee's Summit, MO 64086 St Louis, MO 63125

IUIAL WAIEK LABUKAIUKIES, LLU.

Facility: S	ummer Hill Co MOGD00194	ondominiums \	WWTF				st National Ban			e – Quarterly Repor
			ge holding basin/chlori	nation/sludge disposal	by contract hauler	County: Ca	amden			
			: Place an "X"			er being report	ted.			
	r – January thro by April 28 th 2			ter – April thro by July 28 th 20		3rd Quarter - July through September Due by October 28 20_/7			4th Quarter – October through December Due by January 28th 20	
						×				
	ischarge For Quar		No Di	scharge For Quar	ter 🗆		ischarge For Quarto	er 🗆	No I	ischarge For Quarter 🔲
Outfall # 001	Sample Collected	iBy:		Telephone:	16-3810	Analysis Perform		TER LABORAT	OPIES II C	Telephone:
001	SAMPLE	rew NICA:	ONI	E (1)		O (2)	Sample Types: A	= grab, B = 24 h	r composite, C = m	573-346-3810 odified composite. Note: If
	1	PERMITTED	Date:		Date:		AVG OF	s attach explana SAMPLE	tion of possible cau	se.
PARAMETER	UNIT	FINAL LIMITS	7-25-17 Time: 13:09	ANALYSIS DATE	Time:	ANALYSIS DATE	SAMPLES IF 2 TAKEN	TYPE A, B or C	AN	ALYTICAL METHOD
Flow	MGD	0.0072	2880							
BOD	Mg/L	20	7.15-0					A		5210 B
TSS	Mg/L	20	17-3-0	, M				A		2540 D
pH	Units	6.0 - 9.0	7.99					Α .		4500 H + B
NH3	Mg/L	4.6	2,29					A		4500 NH - 3
E. coli	#100mL	126	4.1-M					Α		9223 (Colilert)
CI TRC	μg/L	8	1,49					Α		4500 CL - G
Dissolved O	Mg/L	Monitor & Report	7-65					A		4500 OG
	e of Individual Prep	4-14-1-14		Ąo	Date: 8-14-		Telephone:	346-3810	E-mail: info@	Dtotalenvironmental.com
Planens Hockhart Lab Analyst Report Approved By Owner: X					Date:	7 1	Telephone:		E-mail:	
A WWW A	•		· ·		1				4	Permit Expires 6-30-19
Sign & Re	turn Form Indicated:		/SWRO / Woodland ield, MO 65807		/SERO Westwood Bluff, MO 6390	1709	R/NERO Prospect Dr n, MO 63552		KCRO Colbern Rd ummit, MO 640	[] MDNR/SLRO 7545 S Lindbergh Blvd 86 St Louis, MO 63125



Total Water Laboratories,

515 Old South 5, Camdenton, Missouri 5065 Phone:(573) 346-3810 Fax:(573) 346-4168

Data Qualifiers in the TWL Laboratory Quality Assurance System:

present in the method blank at C The batch control sample failed to meet the required acceptance criteria. D Result obtained through the analysis of a sample dilution. Concentration exceeds the instrument calibration range. F Internal Standard area failed to meet the required acceptance criteria in repeat instrumental analyses. Results should be interpreted as estimated concentrations. G The Method of Standard Additions (MSA) was used to quantify the concentration. H Test performed after maximum allowable hold time. Increased imprecision in Laboratory Control Sample (LCS) Duplicate J Estimated value. K DW sample above 10 C and received more than two hours after collection. M Analyte failed to meet the required acceptance criteria for duplicate analysis. N Relative difference between the high and low replicates was greater than 30%. P Chemical preservation discrepancy noted at the time of analysis. Q Analyte failed to meet the required acceptance criteria for spike recovery in the matrix spike (MS) and matrix spike duplicate (MSD). R The TRC analysis could not be performed on the sample and no other information was available T Too Numerous to Count and/or Confluent; estimated value. U Parameter was analyzed for but not detected above the reporting limit. NA Not analyzed. NR Not requested. X Miscellaneous; note comments section.

S The batch control sample was within 10% of acceptance criteria

MO Dept of Natural Resources NPDES Monitoring Report for Wastewater Discharge -Quarterly Sample - Quarterly - Quarterly - Quart Facility: Summer Hill Condominiums WWTF Owner: First National Bank Permit No: MOGD00194 Facility Type: Flow Equalization/extended aeration/sludge holding basin/chlorination/sludge disposal by contract hauler County: Camden THIS REPORT COVERS THE PERIOD: Place an "X" in the box beneath the quarter being reported. 2nd Ouarter - April through June 3rd Ouarter - July through September 1st Quarter - January through March 4th Quarter - October through December Due by July 28th 20 17 Due by October 28 20 Due by January 28th 20 Due by April 28th 20 No Discharge For Quarter No Discharge For Quarter No Discharge For Quarter No Discharge For Quarter Sample Collected By: Analysis Performed By: Telephone: Outfall # Telephone: TOTAL WATER LABORATORIES, LLC. Drew Nielsen 573-346-3810 573-346-3810 001 Sample Types: A = grab, B = 24 hr composite, C = modified composite. Note: If TWO (2) ONE (1) SAMPLE exceedance occurs attach explanation of possible cause. PERMITTED Date: AVG OF SAMPLE Date: 6-22-17 ANALYSIS SAMPLES IF TYPE ANALYTICAL METHOD PARAMETER UNIT ANALYSIS FINAL 2 TAKEN LIMITS DATE Time: DATE A. Bor C Time: 6128 0.0072 Flow MGD A 5210 B BOD Mg/L 20 A 2540 D 20 TSS Mg/L 4500 H+B A pH Units 6.0 - 9.0A 4500 NH - 3 4.6 NH3 Mg/L A 9223 (Colilert) E. coli #100mL 126 4500 CL - G A CI TRC ug/L 8 Monitor & A 4500 OG Dissolved O Mg/L Report Signature & Title of Individual Preparing Report: VE Date: Telephone: E-mail: 573-346-3810 info@totalenvironmental.com Muy offer Technical Lab Director 7-10-17 Report Approved By Owner: Date: Telephone: X A W W A Sign & Return Form Permit Expires 6-30-19 MDNR/SWRO I MDNR/SERO MDNR/NERO MDNR/KCRO MDNR/SLRO To Office Indicated: 1709 Prospect Dr 2040 W Woodland 2155 N Westwood 500 NE Colbern Rd 7545 S Lindbergh Blvd Poplar Bluff, MO 63901 Macon, MO 63552 St Louis, MO 63125 Springfield, MO 65807 Lee's Summit, MO 64086

MO Dept	of Natura	l Resources	NPDES M	onitoring	Report fo	r Wastewat	er Discharg	e -Quarte	rly Sampl	e - Quarterly Report
Facility: Su Permit No: N	mmer Hill Co MO0130974	ondominiums V	VWTF			Owner: Firs	t National Bank			
		extended actation study				County: Ca				
						ter being report				
	- January thro by April 28 th 2			ter – April thro by July 28 th 20					4th Quarter - October through December Due by January 28th 20	
			×							
No Dis	scharge For Quar	ter 🗆	No Di	scharge For Quar	ter 🕱	No D	ischarge For Quarte	r 🗆	No I	Discharge For Quarter
Outfall# 001	Sample Collected	I By:		Telephone:		Analysis Perform	TOTAL WA	TER LABORAT		Telephone: 573-346-3810
SAMPLE			ON			VO (2)	exceedence occur	s attach explanat		nodified composite. Note: If
PARAMETER	UNIT	PERMITTED	Date: 4-05-17	ANALYSIS -	Date:	ANALYSIS	AVG OF SAMPLES IF	SAMPLE TYPE	Δ.	NALYTICAL METHOD
TARAMETER	OMI	LIMITS	Time:	DATE	Time:	DATE	2 TAKEN	A, B or C		NACTIONS NOTICES
Flow .	MGD	0.0072								
BOD	Mg/L	20					-	A		5210 B
TSS	Mg/L	20						A		2540 D
рН	Units	6.0 - 9.0						A		4500 H + B
NH3	Mg/L	Monitor & Report						A		4500 NH – 3
Temperature	C	Monitor & Report						A		C°.
Fecal .	#100mL	400		*				A		9222 D
CITRC	Mg/L	1.0						A		4500 CL – G
Total Phosphorus	Mg/L	Monitor & Report						A		EPA 1664
Dissolved O	Mg/L	Monitor & Report	-15-					A		4500 OG
Total Nitrogen	Mg/L	Monitor & Report						A		
Signature & Title of Individual Preparing Report: AD The state of th					Date: 4-26	-17	Telephone: 573-	346-3810	E-mail: info	@totalenvironmental.com
Sign & Return Form [] MDNR/SWRO [] MDNF O Office Indicated: 2040 W Woodland 2155 N Springfield, MO 65807 Poplar					Date:		Telephone:		E-mail:	
- 175ign & Ret	urn Form ndicated:	[] MDNR/ 2040 W Springfi	SWRO Woodland eld, MO 65807	[] MDNF 2155 N	VSERO, I Westwood Bluff, MO 639	1709	NR/NERO Prospect Dr on, MO 63552	500 NE	/KCRO . E Colbern Rd Summit, MO 6	[] MDNR/SLRO 7545 S Lindbergh Blvd 4086 St Louis, MO 63125

515 Old South Highway 5, Camdenton, MO 65020 573-346-3810

MO Dept. of Natural Resources NPDES Monitoring Report for Wastewater Discharge -Quarterly Sample - Quarterly Report Facility: Summer Place on the Lake Condominiums WWTF Owner: Lake Area Wastewater Association, Inc. Samples Received in Lab: Permit No: MOGD00095 4-15-19 12:45 Terminated Permit No: MO-0123234 Table: A-4 Quarterly - Grab County: Camden Facility Type: Flow equalization / extended aeration / aerated sludge holding / secondary clarification / chlorination and Dechlorination / sludge disposal by contract hauler THIS REPORT COVERS THE PERIOD: Place an "X" in the box beneath the quarter being reported. 1st Quarter - January through March 2nd Quarter - April through June 3rd Quarter - July through September 4th Quarter - October through December Due by April 28, 2019 Due by July 28, 2019 Due by October 28, 2019 Due by January 20, 2020 X No Discharge For Quarter No Discharge For Quarter No Discharge For Quarter No Discharge For Quarter Sample Collected By: Telephone: Analysis Performed By: Outfall # Telephone: 573-346-3810 Total Water Laboratories, LLC. Bob Lassiter 573-346-3810 001 Sample Permitted Final Analysis Analyst Data Parameter Final Sample Type Date and Unit Comments Analytical Method Results Date Initials Qualifier Time Limits 24 Hour Completed at Estimate 9466 GPD Flow 1501-50000 4-15-19 11:00 Sample Site 4-16-19 07:35 Grab 5.23 AO BOD 20 4-15-19 11:00 mg/L 4-21-19 10:35 SM 5210 B TSS 20 Grab 4-15-19 11:00 13.5 mg/L 4-17-19 DG SM 2540 D 4-15-19 13:05 E. Coli Grab 4-15-19 11:00 228.2 #/100mL VF SM 9233 B 126 4-16-19 13:10 Completed at pH 6.0-9.0 Grab 4-15-19 11:00 8.67 Units SM 4500 H + B Sample Site 4.6 Grab 4-15-19 11:00 < 0.60 mg/L 4-27-19 AO Hach 10205* Ammonia CITRC <130 Grab 4-15-19 11:00 <130 µg/L SM 4500 CL - G Monitor & Dissolved Completed at 10.19 mg/L SM 4500 OG Oxygen Report Grab 4-15-19 11:00 Sample Site Signature & Title of Individual Preparing Report: Date: Telephone: E-mail: any our May 9, 2019 573-346-3810 info@totalenvironmental.com Amy Osborn, Technical Lab Director Report Approved By Owner: Date: Telephone: E-mail: X

\boxtimes	Electronic Form
	Submitted

Sign & Return Form to DNR Office:

TERED MAY 2 9 2019 MDNR/SWRO 2040 W Woodland 51158

Springfield, MO 65807

Total Water Laboratories, LLC, is accredited with the National Environmental Laboratory Accreditation Program (NELAP) through the New Hampshire Environmental Laboratory Accreditation Program (NH ELAP). Results reported for certified tests meet all requirements of NELAP. A list of certified test methods is available on request. NH ELAP certificate number 2055. Total Water Laboratories reserves the right to subcontract work to other NELAP certified laboratories when appropriate. This report shall not be reproduced except in full. without the written approval of Total Water Laboratories. These results pertain only to the samples indicated by the report.

*Method is not accredited through NH F.I.AP

DMR Permit expires: June 30, 2019

Laboratory Report Number: 2019-0170

515 Old South Highway 5, Camdenton, MO 65020 573-346-3810

MO Dept. of Natural Resources NPDES Monitoring Report for Wastewater Discharge -Quarterly Sample - Quarterly Report

Facility: Sur Permit No: Table: A-4 (Facility Typ secondary clar hauler	nmer Place of MOGD0009 Quarterly - Goe: Flow equal rification / chl	on the Lake Con 5 rab lization / extended orination and Dec	dominiums W l aeration / aerate chlorination / slu	WTF ed sludge hold dge disposal l	ling / oy contract	Owner: Lak Terminated County: Car		Samples Received in Lab: 4-19-19 10:45			
1 st Quarte Du	RT COVER: r – January the e by April 28: charge For Qua	, 2019	2 nd Quart Due	in the box beter – April three by July 28,	ough June 2019	3 rd Quarte Due	ted. r – July through by October 28.	Due	4th Quarter – October through December Due by January 20, 2020 No Discharge For Quarter		
Outfall # 001	Sample Collec	ted By: Bob Lassiter		Telephone:	Telephone: Analysis 573-346-3810		Analysis Performed By: Total Water Laboratories, LLC			Telephone: 573-346-3810	
Parameter	Permitted Final Limits	Sample Type	Sample Date and Time	Final Results	Unit	Analysis Date	Analyst Initials	Data Qualifier	Comments	Analytical Method	
E. Coli	126	Grab	4-19-19 08:00	<1.0	#/100mL	4-19-19 12:26 4-20-19 13:20	VF. AO		Repeat Sample	SM 9233 B	
E. coli Average	126	Calculated		15.1	#/100mL					Geometric Average	
Signature & Title of Individual Preparing Report: Amy Osborn, Technical Lab Director					Date: May 9, 2019		Telephone: 573-34	46-3810	E-mail: info@totalenvironmental.com		
Report Approved By Owner:				Date:		Telephone:		E-mail:			

⊠ Electronic Form Submitted

NTERED MAY 2 9 7019 MDNR/SWRO

50154 2040 W Woodland
Springfield, MO 65807

☐Sign & Return Form to

DNR Office:

Total Water Laboratories, LLC. is accredited with the National Environmental Laboratory Accreditation Program (NELAP) through the New Hampshire Environmental Laboratory Accreditation Program (NH ELAP). Results reported for certified tests meet all requirements of NELAP. A list of certified test methods is available on request. NH ELAP certificate number 2055. Total Water

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only to the samples indicated by the report.

*Method is not accredited through NH FI.AP

Laboratory Report Number: 2019-0170

515 Old South Highway 5, Camdenton, MO 65020 573-346-3810

MO Dept. of Natural Resources NPDES Monitoring Report for Wastewater Discharge -Quarterly Sample - Quarterly Report

Facility: Summer Place on the Lake Condominiums WWTF

Owner: Lake Area Wastewater Association, Inc.

Samples Received

Samples Received in Lab: Permit No: MOGD00095 3-5-19 12:40 Terminated Permit No: MO-0123234 Table: A-4 Quarterly - Grab County: Camden Facility Type: Flow equalization / extended aeration / aerated sludge holding / secondary clarification / chlorination and Dechlorination / sludge disposal by contract hauler THIS REPORT COVERS THE PERIOD: Place an "X" in the box beneath the quarter being reported. 2nd Quarter - April through June 3rd Quarter - July through September 1st Ouarter - January through March 4th Quarter - October through December Due by April 28, 2019 Due by July 28, 2019 Due by October 28, 2019 Due by January 20, 2020 No Discharge For Quarter No Discharge For Quarter No Discharge For Quarter No Discharge For Quarter Sample Collected By: Outfall # Telephone: Analysis Performed By: Telephone: Bob Lassiter 573-346-3810 Total Water Laboratories, LLC. 573-346-3810 001 Sample Permitted Final Analysis Data Analyst Sample Type Date and Unit Parameter Comments Analytical Method Final Initials Results Date Qualifier Time Limits 24 Hour Completed at 1501-50000 Estimate 3-5-19 10:00 1093 GPD Flow Sample Site 3-6-19 08:40 Grab 4.96 AO C. N BOD 20 3-5-19 10:00 mg/L 3-11-19 08:40 SM 5210 B SM 2540 D 3-5-19 10:00 DG TSS 20 Grab 3.9 mg/L 3-6-19 #/100mL SM 9233 B Grab NA E. Coli 126 Completed at 6.0-9.0 Grab 8.34 Units SM 4500 H + B pH 3-5-19 10:00 Sample Site 4.6 Grab 3-5-19 10:00 < 0.60 mg/L 3-25-19 AO Hach 10205* Ammonia SM 4500 CL - G CI TRC <130 Grab NA µg/L Dissolved Monitor & Completed at 3-5-19 10:00 10.55 mg/L SM 4500 OG Grab Oxygen Report Sample Site Signature & Title of Individual Preparing Report: Date: Telephone: E-mail: any after Amy Osborn, Technical Lab Director April 10, 2019 573-346-3810 info@totalenvironmental.com E-mail: Report Approved By Owner: Date: Telephone: X

DMR Permit expires: June 30, 2019

☑ Electronic Form Submitted

☐ Sign & Return Form to DNR Office:

ENTERED APR 2 1 20 MDNR/SWRO
2040 W Woodland
Springfield, MO 65807

Total Water Laboratories, LLC. is accredited with the National Environmental Laboratory Accreditation Program (NELAP) through the New Hampshire Environmental Laboratory Accreditation Program (NH ELAP). Results reported for certified tests meet all requirements of NELAP. A list of certified test methods is available on request, NH ELAP certificate number 2055. Total Water Laboratories reserves the right to subcontract work to other NELAP certified laboratories when appropriate. This report shall not be reproduced except in full, without the written approval of Total Water Laboratories. These results pertain only to the samples indicated by the report.

*Method is not accredited through NH F.I.AP

Laboratory Report Number: 2019-0076

Facility: Si Permit No: Market Table: A-4 (Facility Types)	MOGD00095 Quarterly - Gr e: Flow equa	I Resources on the Lake Co ab lization / extended Dechlorination	ndominiums V	WWTF ated sludge hole	ding/secondary	Owner: Lake Area Wastewater Association. Inc. Terminated Permit No: MO-0123234 County: Camden (Last permit review: 03 April 2					
THIS REPO	RT COVERS	THE PERIOD	: Place an "X"	in the circle fo	or the Quarter	being reported					
	1st Quarter)		2nd Quarter		3rd Quarter				4 th Quarter	
Jan	uary (hrough M	larch	1	April through Ju	ine	- Ju	ly through Septem	iber	Oct	oher through December	
Due April 28th 20 Due July 28th 20				ue July 28th 20	_	Du	e October 28th 20_			Due Jan 28th 20 <u>19</u>	
No Di	ischarge for Qua	rter 🔘	No D	ischarge for Quar	rter 🔘	No I	Discharge for Quart	er O	No I	Discharge for Quarter O	
Outfall # 001	Sample Collecte	Telephone: Analysis Performed By: TOTAL WATER LABO.					TER LABORAT	ORIES, LLC.	Telephone: 573-346-3810		
	SAMPLE			E (1)		O (2)				2.00.000	
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 10-17-18 Time: 13:15	ANALYSIS DATE	Date:	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	AN	ANALYTICAL METHOD	
Flow	GPD	Design flow 1,501 - 50K	720						24 hr. estimate		
BOD	mg/L	20	2.22					Grab	1-	5210 B	
TSS	mg/L	20	6.3 -	C				Grab		2540 D	
pН	Units	6.0 – 9.0	7.48	M				Grab		4500 H + B	
E. coli	#100mL	126	22-6					Grab		9223 B	
CITRC	µg/L	8.0	<130					Grab		4500 CL - G	
Ammonia	mg/L	4.6	40.60					Grab		4500 NH - 3	
Dissolved O2	mg/L	Monitor & Report	9.03					Grab		4500 OG	
Varinge	of Individual Prep		& Analy	5 t	Date: // -/ c	9-18	Telephone:	3-346-3810	E-mail: info@	totalenvironmental.com	
Report Approved	By Owner:	(R		Date: ///2/2	12018	Telephone:		E-mail:		
Sign & Ret		[X]MDNR/ 2040 W	SWRO Woodland eld, MO 65807	[] MDNR 2155 N	392§3 VSERO Westwood Bluff, MO 6390	1709 1	R/NERO Prospect Dr		/KCRO Colbern Rd Summit, MO 640	DMR & Permit Expire_30Jun201 [] MDNR/SLRO 7545 S Lindbergh Blvd 086 St Louis, MO 63125	

MO Dept of Natural Resources NPDES Monitoring Report for Wastewater Discharge --- Monthly Sample - Monthly Report

	MOGD00095	on the Lake Co	ndominiums V	WWTF		Owner: Lake Area Wastewater Association, Inc.				
Table: A-4 (Quarterly - Gr	ab					Permit No: $\underline{\mathbf{M}}$	IO-0123234		
Facility Typ	e: Flow equa	lization / extende	ed aeration / aera	ated sludge hole	ding/secondary	County: Ca	mden			
clarification /	chlorination an	d Dechlorination	/ sludge dispos	al by contract h	auler				Œ	Last permit review: 03 April 2017)
THIS REPO	RT COVERS	THE PERIOD	Place an "X"	in the circle fe	or the Quarter	being reported				-
	1st Quarter)	-	2nd Quarter O			3rd Quarter 🚫			4th Quarter
Jan	uary through M	Iarch		April through June		- Ju	ly through Septen	iber	Octo	her through December
Du	e April 28th 20_		D	Due July 28th 20			e October 28th 20_	18	D	ue Jan 28th 20
No Di	scharge for Quar	rter 🔾	No D	ischarge for Qua	rter 🔾	No I	Discharge for Quart	ет	No D	ischarge for Quarter
Outfall #	Outfall # Sample Collected By: 001 Rob Lassitte			Telephone:	2.01./2	Analysis Perform	ned By:			Telephone:
001	100 5000111			5-73 346 E (1)		O (2)	TOTAL WA	TER LABORAT	TORIES, LLC.	573-346-3810
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 7-16-18 Time:	ANALYSIS DATE	Date:	ANALYSIS DATE	ALYSIS AVG OF SAMPLE SAMPLE TYPE			ALYTICAL METHOD
	No.	Design flow	10:00	DATE	1 2 2 2	2 TAKEN TYPE				
Flow	GPD	1,501 - 50K	1009						24 hr. estimate	
BOD	mg/L	20	< 2.0					Grab		5210 B
TSS	mg/L	20	4.3 -	C				Grab		2540 D
pН	Units	6.0 - 9.0	6.65					Grab		4500 H + B
E. coli	#100mL	126	<1.0					Grab		9223 B
CITRC	μg/L	8.0	4130					Grab		4500 CL - G
Ammonia	mg/L	4.6	< 0.60					Grab		4500 NH - 3
Dissolved O2	mg/L	Monitor & Report	8.18					Grab		4500 OG
Signature & Title	of Individual Prep		1.1.0	Ao	Date: 8-09	-18	Telephone:	3-346-3810	E-mail: info@to	otalenvironmental.com
Report Approved	By Owner:	(F)	PHILATY.	SARD	Date: Colle	1	Telephone:		E-mail:	
X			. A 1100	33875	8/10	116				DMR & Permit Expire_30Jun2019
Sign & Return Form To Office Indicated: [X]MDNR/SWRO 2040 W Woodland Springfield, MO 6580			Woodland	2155 N	VSERO Westwood Bluff, MO 6390	1709 1	R/NERO Prospect Dr n, MO 63552			MDNR/SLRO 7545 S Lindbergh Blvd



Total Water Laboratories,

515 Old South 5, Camdenton, Missouri 65065 Phone:(573) 346-3810 Fax:(573) 346-4168

Data Qualifiers in the TWL Laboratory Quality Assurance System:

В	present in the method blank at
С	The batch control sample failed to meet the required acceptance criteria.
D	Result obtained through the analysis of a sample dilution.
Е	Concentration exceeds the instrument calibration range.
F	Internal Standard area failed to meet the required acceptance criteria in repeat instrumental analyses. Results should be interpreted as estimated concentrations.
G	The Method of Standard Additions (MSA) was used to quantify the concentration.
Н	Test performed after maximum allowable hold time.
I	Increased imprecision in Laboratory Control Sample (LCS) Duplicate
J	Estimated value.
K	DW sample above 10 C and received more than two hours after collection.
M	Analyte failed to meet the required acceptance criteria for duplicate analysis.
N	Relative difference between the high and low replicates was greater than 30%.
P	Chemical preservation discrepancy noted at the time of analysis.
Q	Analyte failed to meet the required acceptance criteria for spike recovery in the matrix spike (MS) and matrix spike duplicate (MSD).
R	The TRC analysis could not be performed on the sample and no other information was available
Т	Too Numerous to Count and/or Confluent; estimated value.
U	Parameter was analyzed for but not detected above the reporting limit.
N	Not analyzed.
NI	R Not requested.
X	Miscellaneous; note comments section.

S The batch control sample was within 10% of acceptance criteria

Facility: St	mmer Place	on the Lake Co			2100011101		ce Area Wastew			ole – Monthly Report	
Permit No: N		•					l Permit No: M		tion, mc.		
Table: A-4 (7		1			County: Ca		0-0123234			
		lization / extende d Dechlorination				County: <u>Ca</u>	<u>andon</u>		((Last permit review: 03 April 2017)	
Trus REPUB	CICOVERS	THE PERIOD				being reported	•				
	1st Quarter).		2nd Quarter 🛇	\Diamond	3rd Quarter				4th Quarter	
Janu	uary through M	Iarch	<i>A</i>	april through Ju	ne	- July through September			Octo	her through December	
Du	e April 28th 20_	_	D	ue July 28th 20_/	8	Du	e October 28th 20_	I	Due Jan 28th 20		
No Di	No Discharge for Quarter No Discharge for Quarter				ter 🔘	No I	Discharge for Quart	er O	No I	Discharge for Quarter O	
Outfall # 001	A 1910년(18 - 1911년 1				1 5010	Analysis Perform		TER LABORAT	ORIES LLC	Telephone: 573-346-3810	
	SAMPLE SAMPLE			E (1)		O (2)				373-340-3810	
PARAMETER	UNIT	PERMITTED FINAL	Date: 6-05-19 Time:	ANALYSIS	Date;	ANALYSIS DATE	AVG OF SAMPLES IF	SAMPLE TYPE	AN	ALYTICAL METHOD	
		LIMITS	8:00	DATE	TANC.	DATE	2 TAKEN	TYPE		and and a state of the sail and	
Flow	GPD	Design flow 1,501 - 50K	1803							24 hr. estimate	
BOD	mg/L	20	6.10 -	C				Grab	-	5210 B	
TSS	mg/L	20	4.8 -	C				Grab		2540 D	
рН	Units	6.0 – 9.0	7.75					Grab		4500 H + B	
E. coli	#100mL	126	1					Grab		9223 B	
CI TRC	µg/L	8.0	<130					Grab		4500 CL - G	
Ammonia	mg/L	4.6	20.60					Grab		4500 NH - 3	
Dissolved O2	mg/L	Monitor & Report	8.08					Grab		4500 OG	
Signature & Title	of Individual Prep		6 Angely	Ao 51	Date: 7-15-18		Telephone:	3-346-3810	E-mail: info@	totalenvironmental.com	
Report Approved	By Owner:	2 1.	27CK(L)	RED	Date: /	2018	Telephone:		E-mail;	J. Report Land	
			30111	12/8						DMR & Permit Expire_30Jun2019	
Sign & Ret To Office I			SWRO Woodland eld, MO 65807		VSERO Westwood Bluff, MO 6390	1709 I	R/NERO Prospect Dr n, MO 63552		/KCRO Colbern Rd Jummit, MO 640	[] MDNR/SLRO 7545 S Lindbergh Blvd 86 St Louis, MO 63125	



Total Water Laboratories, LLC

515 Old South 5, Camdenton, Missouri 85065 Phone:(573) 346-3810 Fax:(673) 346-4168

Data Qualifiers in the TWL Laboratory Quality Assurance System:

_____ present in the method blank at _____. C The batch control sample failed to meet the required acceptance criteria. D Result obtained through the analysis of a sample dilution. E Concentration exceeds the instrument calibration range. F Internal Standard area failed to meet the required acceptance criteria in repeat instrumental analyses. Results should be interpreted as estimated concentrations. G The Method of Standard Additions (MSA) was used to quantify the concentration. H Test performed after maximum allowable hold time. Increased imprecision in Laboratory Control Sample (LCS) Duplicate J Estimated value. K DW sample above 10 C and received more than two hours after collection. M Analyte failed to meet the required acceptance criteria for duplicate analysis. N Relative difference between the high and low replicates was greater than 30%. P Chemical preservation discrepancy noted at the time of analysis. O Analyte failed to meet the required acceptance criteria for spike recovery in the matrix spike (MS) and matrix spike duplicate (MSD). R The TRC analysis could not be performed on the sample and no other information was available T Too Numerous to Count and/or Confluent; estimated value. U Parameter was analyzed for but not detected above the reporting limit. NA Not analyzed. NR Not requested. X Miscellaneous; note comments section.

S The batch control sample was within 10% of acceptance criteria

Facility: Si Permit No: Market Table: A-4 (Facility Types)	immer Place MOGD00095 Quarterly - Gr e: Flow equa		ndominiums V	WWTF ated sludge hole	ding/secondary	Owner: Lake Area Wastewater Association, Inc. Terminated Permit No: MO-0123234 County: Camden (Last permit review: 03 Apr					
THIS REPO	RT COVERS	THE PERIOD	Place an "X"	in the circle f	or the Quarter	being reported	•				
	1st Quarter	Ď.		2nd Quarter			3rd Quarter)		4th Quarter	
Jan	uary through M	larch	<i>A</i>	April through June		July through September			Oct	ober through December	
Du	e April 28th 20_	18	D	ue July 28th 20_		Du	e October 28th 20_		1	Due Jan 28th 20	
No Di	No Discharge for Quarter 🚫 N			ischarge for Qua	rter 🔾	No I	Discharge for Quart	ет	No I	Discharge for Quarter O	
Outfall # 001	Secretary and the second secon			Telephone: 573 34/- 3	810	Analysis Perform		TER LABORAT	ORIES, LLC.	Telephone: 573-346-3810	
	SAMPLE		ON.	E (1)	TW	O (2)					
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 3-07-18 Time: 10:00	ANALYSIS DATE	Date:	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	AN	NALYTICAL METHOD	
Flow	GPD	Design flow 1,501 - 50K	+							24 hr. estimate	
BOD	mg/L	20						Grab		5210 B	
TSS	mg/L	20						Grab		2540 D	
pН	Units	6.0 - 9.0					A	Grab		4500 H + B	
E. coli	#100mL	126						Grab		9223 B	
CITRC	μg/L	8.0						Grab		4500 CL - G	
Ammonia	mg/L	4.6						Grab		4500 NH - 3	
Dissolved O2	mg/L	Monitor & Report						Grab		4500 OG	
1	of Individual Pre	paring Report:	a lust	A	Date:	1-18	Telephone:	3-346-3810	E-mail: info@	totalenvironmental.com	
Report Approved		7	257	I all the short stand	3-14 Date: 3/19/2	018	Telephone:		E-mail:		
	XII ZWU		place.	or Culti	-711/0					DMR & Permit Expire_30Jun2019	
Sign & Re To Office			SWRO Woodland eld, MO 65807	2155 N	R/SERO Westwood Bluff, MO 6390		IR/NERO Prospect Dr on, MO 63552	1.5.5.5 E	/KCRO Colbern Rd Summit, MO 640	[] MDNR/SLRO 7545 S Lindbergh Blvd 86 St Louis, MO 63125	

MO Dept	of Natura	l Resources	NPDES N	Ionitoring	Report fo	r Wastewat	ter Dischar	ge Mo	nthly Sam	ple – Monthly Repor	t
Facility: Street Permit No: 1 Table: A-4 (Facility Type	ummer Place MOGD00095 Quarterly - Gr e: Flow equa	on the Lake Co	ondominiums '	WWTF rated sludge hold	ling/secondary	Owner: Lake Area Wastewater Association, Inc. Terminated Permit No: MO-0123234 County: Camden (Last permit review: 03 April 2017)					
THIS REPO	RT COVERS	THE PERIOD	: Place an "X"	in the circle fo	r the Quarter	being reported					
	1st Quarter)		2nd Quarter			3rd Quarter)		4th Quarter	_
Jan	uary through M	larch		April through Ju	ne	- Jui	ly through Septen	ber	Oct	ober through December	
Due April 28 th 20 Due Jul				ue July 28th 20	_	Du	e October 28th 20_			Due Jan 28th 20 / 8	
No Discharge for Quarter O					ter 🔘	No I	Discharge for Quart	er 🔾	No 1	Discharge for Quarter	
Outfall # 001	Sample Collecte	d By: ob Lassite	~	Telephone: <73 346	3810	Analysis Perform		TER LABORAT	ORIES, LLC.	Telephone: 573-346-3810	
	SAMPLE			E (1)	TW	/O (2)					
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 10-27-17 Time: 9-05-	ANALYSIS DATE	Date: 12-8-17 Time: 905	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	Al	ANALYTICAL METHOD	
Flow	GPD	Design flow 1,501 - 50K							24 hr. estimate		
BOD	mg/L	20						Grab	5210 B		
TSS	mg/L	20						Grab		2540 D	
pН	Units	6.0 – 9.0						Grab		4500 H + B	
E. coli	#100mL	126						Grab		9223 B	
CITRC	μg/L	8.0						Grab		4500 CL – G	
Ammonia	mg/L	4.6						Grab		4500 NH - 3	
Dissolved O2	mg/L	Monitor & Report						Grab		4500 OG	
The state of the s	of Individual Prep	Control of the Contro	Aires use	Ao	Date: 1-08-	-18	Telephone:	3-346-3810	E-mail: info@	totalenvironmental.com	
Report Approved			×968	*7299	Date: ///2	0/8	Telephone:		E-mail:		
		1	AN 21 to 20112		777					DMR & Permit Expire_30Jun20	19
Sign & Return Form [X]MDNR/SWRO [] MDNR/SER To Office Indicated: 2040 W Woodland 2155 N Wes Springfield, MO 65807 Poplar Bluff					1709	R/NERO Prospect Dr on, MO 63552	The state of the s	/KCRO Colbern Rd Summit, MO 64	[] MDNR/SLRO 7545 S Lindbergh Blvd 086 St Louis, MO 63125		

Facility: S Permit No: 1 Table: A-4 Facility Typ clarification /	ummer Place MOGD00095 Quarterly - G e: Flow equa chlorination ar	on the Lake Co rab alization / extendend Dechlorination	ed aeration / aer	WWTF rated sludge holesal by contract h	ding/secondary	Owner: <u>Lal</u> Terminated County: <u>Ca</u>	ke Area Wastew I Permit No: M mden	ater Associa	tion, Inc. OCT 1 & 2017 1 % 3 70 (Last permit review: 03 April 2017)	
THIS REPO	RT COVERS	THE PERIOD	: Place an "X"	in the circle for	or the Quarter	being reported	•			
1 st Quarter				2nd Quarter ()	3rd Quarter 🛇			4 th Quarter	
January through March			April through June			July through September			October through December	
Due April 28th 20			Due July 28 th 20			Due October 28th 20_17			Due Jan 28th 20	
No D	ischarge for Qua	•	No Discharge for Quarter (No Discharge for Quarter 🛞			No Discharge for Quarter	
Outfall # 001	Sample Collecte			Telephone: 573 346	3810	Analysis Performed By: TOTAL WATER LABORAT			TORIES, LLC. Telephone: 573-346-3810	
SAMPLE			ONE (1)			O (2)				
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 9-25-17 Time: 1/19	- ANALYSIS DATE	Date:	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	AN	ALYTICAL METHOD
Flow	GPD	Design flow 1,501 - 50K								24 hr. estimate
BOD	mg/L	20						Grab		5210 B
TSS	mg/L	20						Grab		2540 D
pН	Units	6.0 – 9.0						Grab		4500 H + B
E. coli	#100mL	126						Grab		9223 B
Cl TRC	μg/L	8.0						Grab		4500 CL – G
Ammonia	mg/L	4.6						Grab		4500 NH - 3
Dissolved O2	mg/L	Monitor & Report						Grab		4500 OG
Signature & Title of Individual Preparing Report: My Alm Technical Lab Difactor					Date: 111-17		Telephone: 573-346-3810		E-mail: info@totalenvironmental.com	
Report Approved By Owner:					Date: 16/13/2017		Telephone:		E-mail:	
Sign & Ret OTo Office I	urn Form		SWRO Woodland eld, MO 65807		- / / -	[] MDN	R/NERO Prospect Dr n, MO 63552		KCRO Colbern Rd ummit, MO 6408	DMR & Permit Expire_30Jun2019 [] MDNR/SLRO 7545 S Lindbergh Blvd 86 St Louis, MO 63125

Facility: Summer Place on the Lake Condominiums WWTF Permit No: MOGD00095 Table: A-4 Quarterly - Grab Facility Type: Flow equalization / extended aeration / aerated sludge holding/secondary clarification / chlorination and Dechlorination / sludge disposal by contract hauler							te Area Wastew Permit No: M mden		m to A 2-12 at		
THIS REPO	RT COVERS	THE PERIOD	Place an "X"	in the circle fo	or the Quarter	being reported					
	1st Quarter		2nd Quarter 💢			3rd Quarter			4 th Quarter		
Jan	uary through N	larch	April through June			July through September			October through December		
Du	ne April 28th 20_		Due July 28 th 20_/_7_			Due October 28th 20			Due Jan 28th 20		
No Discharge for Quarter O			No Discharge for Quarter			No Discharge for Quarter			No Discharge for Quarter		
Outfall # 001	Sample Collecte	d By:	Telephone: 573 344 3810			Analysis Perform		TER LABORAT	Telephone: 573-346-3810		
	SAMPLE		ONE (1)			O (2)					
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 5-16-17 Time: 9:00	- ANALYSIS DATE	Date: 5-24-17 Time: 8:24	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	ANALYTICAL METHOD		
Flow	GPD	Design flow 1,501 - 50K	1,185							24 hr. estimate	
BOD	mg/L	20	_		10.51			Grab		5210 B	
TSS	mg/L	20	5.0					Grab		2540 D	
pН	Units	6.0 - 9.0	7.76					Grab		4500 H + B	
E. coli	#100mL	126	410					Grab	9223 B		
CITRC	μg/L	8.0	4/30					Grab		4500 CL - G	
Ammonia	mg/L	4.6	40.60					Grab		4500 NH - 3	
Dissolved O2	mg/L	Monitor & Report	7.08					Grab		4500 OG	
Signature & Title of Individual Preparing Report: Ao Ao Analyst					Date:	-17	Telcphone: 573-346-3810		E-mail: info@totalenvironmental.com		
Seport Approved By Owner:			o no acy st		Date: 6/29/2017		Telephone:		E-mail:		
Sign & Ret Go Office I			SWRO Woodland eld, MO 65807		VSERO Westwood Bluff, MO 6390	17091	R/NERO Prospect Dr m, MO 63552		/KCRO Colbern Rd Summit, MO 640	DMR & Permit Expire_30Jun2019 [] MDNR/SLRO 7545 S Lindbergh Blvd 086 St Louis, MO 63125	

515 Old South Highway 5, Camdenton, MO 65020 573-346-3810

		division WWT	<u>F</u>			Owner: Lak	e Area Waster	water Associa	tion. Inc.	Samples Received in La
The second secon	MOGD0023 Quarterly - G					Terminated County: Car	Permit No: 1	MO-0105481		4-10-19 12:05
Facility Typ	e: Lift Station	ns/Extended Air/	Seasonal Ultra-V	Violet/sludge o	lisposal by	County: Ca	mden			
THIS REPO	RT COVER	S THE PERIOD): Place an "X"	in the box b	eneath the qua	rter being repor	rted.			
1st Quarte	r – January the e by April 28.	rough March	2nd Quar	ter – April three by July 28,	ough June	3rd Quarte	3 rd Quarter – July through September Due by October 28, 2019			October through December by January 20, 2020
				\boxtimes						
No Dis	charge For Qua		No Dis	charge For Quar	ter 🔲	No Dis	scharge For Quart	er 🔲	No Disc	charge For Quarter
Outfall # 001	Outfall # Sample Collected By: Telephone:				Analysis Perform					Telephone: 573-346-3810
Parameter	Permitted Final Limits	Sample Type	Sample Date and Time	Final Results	Unit	Analysis Date	Analyst Initials	Data Qualifier	Comments	Analytical Method
low	1501-50000	24 Hour Estimate	4-10-19 11:20	2250	GPD				Completed at Sample Site	
OD	20	Grab	4-10-19 11:20	<2.0	mg/L	4-11-19 07:05 4-16-19 07:40	VF	C, N		CM 5210 D
SS	20	Grab	4-10-19 11:20	2.1	mg/L	4-11-19	DG	C, N		SM 5210 B SM 2540 D
. Coli	126	Grab	4-10-19 11:20	<1.0	#/100mL	4-10-19 12:44 4-11-19 12:50	VF			SM 9233 B
Н	6.0-9.0	Grab	4-10-19 11:20	7.59	Units				Completed at Sample Site	SM 4500 H + B
mmonia	4.6	Grab	4-10-19 11:20	<0.60	mg/L	4-27-19	AO		1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Hach 10205*
issolved xygen	Monitor & Report	Grab	4-10-19 11:20	8.49	mg/L				Completed at Sample Site	SM 4500 OG
gnature & Title	of Individual Pre				Date:		Telephone:	-	E-mail:	31/1 4300 00
my Osborn	Technical L	ab Director			Mav	9, 2019	573-34	46-3810	info@to	otalenvironmental.com
eport Approved	By Owner:				Date:	-,	Telephone:		E-mail:	outer, nonmentationn
<u> </u>					1					DMR Permit expires: June 30, 2
⊠ Electro Subm		□Sign & Ret		Laboratory Ac Environmenta	creditation Prog Laboratory Acc	. is accredited with ram (NELAP) thro reditation Progran rements of NELAP	ugh the New Han n (NH ELAP). Re	npshire sults reported		Report Number: 2019-0171 Attachments:

without the written approval of Total Water Laboratories. These results pertain

only to the samples indicated by the report. *Method is not accredited through NH F.I.AP

515 Old South Highway 5, Camdenton, MO 65020 573-346-3810

MO Dept. of Natural Resources NPDES Monitoring Report for Wastewater Discharge -Quarterly Sample - Quarterly Report Facility: Sylvan Bay Subdivision WWTF Owner: Lake Area Wastewater Association, Inc. Permit No: MOGD00234 Terminated Permit No: MO-0105481 Table: A-4 Quarterly - Grab County: Camden Facility Type: Lift Stations/Extended Air/ Seasonal Ultra-Violet/sludge disposal by contract hauler THIS REPORT COVERS THE PERIOD: Place an "X" in the box beneath the quarter being reported. 1st Quarter - January through March 2nd Quarter - April through June 3rd Quarter - July through September 4th Quarter - October through December Due by April 28, 2019 Due by July 28, 2019 Due by October 28, 2019 Due by January 20, 2020 X No Discharge For Quarter No Discharge For Quarter No Discharge For Quarter No Discharge For Quarter Sample Collected By: Outfall # Telephone: Analysis Performed By: Telephone: 001 Bob Lassiter 573-346-3810 Total Water Laboratories, LLC. 573-346-3810 Permitted Sample Final Analysis Analyst Data Parameter Sample Type Final Date and Unit Comments Analytical Method Results Date Initials **Oualifier** Limits Time 24 Hour Completed at Sample Site Flow 1501-50000 Estimate 2-6-19 10:40 4138 GPD 2-7-19 07:10 BOD 20 Grab 2-6-19 10:40 4.93 mg/L 2-12-19 08:20 VF C. N SM 5210 B Sec Page 2 TSS 20 Grab 2-6-19 10:40 7.7 mg/L DG 2-7-19 C SM 2540 D See Page 2 E. Coli 126 Grab NA #/100mL SM 9233 B Completed at pH 6.0-9.0 Grab 8.0 2-6-19 10:40 Units SM 4500 H + B Sample Site Ammonia 4.6 Grab 2-6-19 10:40 < 0.60 mg/L 2-19-19 AO Hach 10205* Dissolved Monitor & Completed at Oxygen Report Grab 2-6-19 10:40 9.98 mg/L Sample Site SM 4500 OG Signature & Title of Individual Preparing Report: Date: Telephone: E-mail: February 25, 2019 573-346-3810 info@totalenvironmental.com Amy Osborn, Technical Lab Director Report Approved By Owner: Date: Telephone: E-mail: X

DMR Permit expires: June 30, 2019

⊠ Electronic Form Submitted

45816

LAWWA 1.17-000773

Sign & Return Form to DNR Office:

2040 W Woodland Springfield, MO 65807 Total Water Laboratories, LLC. is accredited with the National Environmental Laboratory Accreditation Program (NELAP) through the New Hampshire Environmental Laboratory Accreditation Program (NH ELAP). Results reported for certified tests meet all requirements of NELAP. A list of certified test methods is available on request. NH ELAP certificate number 2055. Total Water Laboratories reserves the right to subcontract work to other NELAP certified laboratories when appropriate. This report shall not be reproduced except in full, without the written approval of Total Water Laboratories. These results pertain only to the samples indicated by the report. *Method is not accredited through NH F.I.AP

Attachments:

Laboratory Report Number: 2019-0028

MDNR/SWRO

MO Dept	of Natura	l Resources	NPDES M	Ionitoring	Report	for Wastewa	ter Dischar	ge Mo	nthly Samp	ole - Monthly Report
Facility: S	Sylvan Bay Su	ibdivision WW	<u>TF</u>				Area Wastewa			
The second secon	MOGD00234 Quarterly - Gi					Terminated :	Permit No: MC	0-0105481		
		s/Extended Air/	Seasonal Illtra-V	liolet/sludge di	isnosal hy	County: Can	nden	1000		
contract haule		o Datondoo I III /	Joannia Cina-	noice studge di	isposar by				σ	ast permit review: 31 March 2017)
THIS REPO	RT COVERS	THE PERIOD	: Place an "X"	in the circle fo	or the Quart	ter being reported.			(2	ast politic review. 31 March 2017)
e de la companya de l	1 st Quarter)	2n	d Quarter		31	rd Quarter			4th Quarter 🚫
Jan	uary through M	Iarch	Apr	ril through June	e	July	through Septemb	er	Octo	ber through December
Du	ne April 28th 20_		Due	July 28th 20		Due (October 28th 20		T E	rue Jan 28th 20 / 9
No D	ischarge for Quar	rter 🔾	No Disc	harge for Quarte	er O	No Dis	charge for Quarter	0	No D	ischarge for Quarter (
Outfall # 001	Sample Collected	d By:	-	Telephone: 573 346	7610	Analysis Performed B	By: TOTAL WATER	LABORATOR	IES, LLC.	Telephone: 573-346-3810
	SAMPLE	20 1235/13	ONI			WO (2)				373-340-3810
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 10-02-18 Time: 9:40	ANALYSIS DATE	Date: 10-11-18 Time: 9:50	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	AN	ALYTICAL METHOD
Flow	GPD	Design flow 1,501 - 50K			6422					24 hr. estimate
BOD	mg/L	20			< 2.0	1		Grab		5210 B
TSS	mg/L	20			5.0-	c		Grab		2540 D
pH	Units	6.0 - 9.0			8.01	-		Grab		4500 H + B
E. coli	#100mL	126	<1.0	+	_			Grab		9223 B
Ultra-Violet	n/a	n/a	Ultra-violet		_			Grab		4500 CL – G
Ammonia	mg/L	4.6			20.60			Grab		4500 NH - 3
Dissolved O2	mg/L	Monitor & Report			8-78			Grab		4500 OG
Vamense	of Individual Preparation		b Analy	AC	Date:	19-18	Telephone:	3-346-3810	E-mail: info@i	otalenvironmental.com
Report Approved	by Owner:	R			Date: // //	12018	Telephone:		E-mail:	
> Sign & Ret	urn Form	ENTERFO [X]MDNR/S	SWRO	[] MDNR			R/NERO	[] MDNR	/KCRO	IR & Permit Expire_30Jun2019 [] MDNR/SLRO
16 Office I	ndicated:		Woodland eld, MO 65807		Westwood Bluff, MO 63		rospect Dr n, MO 63552		Colbern Rd ummit, MO 6408	7545 S Lindbergh Blvd St Louis, MO 63125

Facility: S Permit No: N Table: A-4 (ylvan Bay Su MOGD00234 Quarterly - Gr	ibdivision WW	<u>TF</u>			Owner: Lake	Area Wastewa Permit No: MC	ter Associati		ple – Monthly Repor	
contract hauler	-	Si Extended 7x117	ocasonar Otta-V	violed studge dis	posar by		-		(Last permit review: 31 March 201	
THIS REPOR	RT COVERS	THE PERIOD	: Place an "X"	in the circle fo	r the Quar	ter being reported.					
	1st Quarter		2n	d Quarter		3r	d Quarter			4 th Quarter	
Jan	uary through M	Iarch	Ap	ril through June		July t	July through September			tober through December	
Du	Due April 28th 20 Due July 28th					Due C	October 28th 20 18	2		Due Jan 28th 20	
No Di	scharge for Quar	rter 🔘	No Discharge for Quarter			No Discharge for Quarter (No	Discharge for Quarter O	
Outfall # 001	Sample Collecte	d By:		Telephone: 573 346	3810	Analysis Performed B	y: TOTAL WATER	LABORATOR	IES, LLC.	Telephone: 573-346-3810	
	SAMPLE			E (1)	The Part of the Pa	TWO (2)				1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 7-16-18 Time: 8:15	ANALYSIS DATE	Date:	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	A	NALYTICAL METHOD	
Flow	GPD	Design flow 1,501 - 50K	1212							24 hr. estimate	
BOD	mg/L	20	420					Grab		5210 B	
TSS	mg/L	20	1,7 -	C				Grab		2540 D	
pН	Units	6.0 – 9.0	7.33	1				Grab		4500 H + B	
E. coli	#100mL	126	×1.0					Grab		9223 B	
Ultra-Violet	n/a	n/a	Ultra-violet					Grab		4500 CL – G	
Ammonia	mg/L	4.6	40.60					Grab		4500 NH - 3	
Dissolved O2	mg/L	Monitor & Report	5-76					Grab		4500 OG	
Marina	of Individual Prep	Contract of the Contract of th	Analyst	Ao	Date:	09.18	Telephone:	3-346-3810	E-mail: info	@totalenvironmental.com	
Report Approved	by Owner:	R	7,3	892	Date:	110/18	Telephone:		E-mail:		
_			AVA 1	172116	· /			¥ 4 2 2 0 0		DMR & Permit Expire_30Jun201	
Sign & Ret To Office I			SWRO Woodland eld, MO 65807		/SERO Westwood Bluff, MO 6	1709 P	R/NERO Prospect Dr n, MO 63552		/KCRO Colbern Rd Summit, MO 64	[] MDNR/SLRO 7545 S Lindbergh Blvd 4086 St Louis, MO 63125	



515 Old South 5, Camdenton, Missouri 65065 Phone:(573) 346-3810 Fax:(573) 346-4168

Data Qualifiers in the TWL Laboratory Quality Assurance System:

В	present in the method blank at
С	The batch control sample failed to meet the required acceptance criteria.
D	Result obtained through the analysis of a sample dilution.
E	Concentration exceeds the instrument calibration range.
F	Internal Standard area failed to meet the required acceptance criteria in repeat instrumental analyses. Results should be interpreted as estimated concentrations.
G	The Method of Standard Additions (MSA) was used to quantify the concentration.
Н	Test performed after maximum allowable hold time.
I	Increased imprecision in Laboratory Control Sample (LCS) Duplicate
J	Estimated value.
K	DW sample above 10 C and received more than two hours after collection.
M	Analyte failed to meet the required acceptance criteria for duplicate analysis.
N	Relative difference between the high and low replicates was greater than 30%.
P	Chemical preservation discrepancy noted at the time of analysis.
Q	Analyte failed to meet the required acceptance criteria for spike recovery in the matrix spike (MS) and matrix spike duplicate (MSD).
R	The TRC analysis could not be performed on the sample and no other information was available
T	Too Numerous to Count and/or Confluent; estimated value.
U	Parameter was analyzed for but not detected above the reporting limit.
NA	Not analyzed.
NF	Not requested.
X	Miscellaneous; note comments section.
0	The hatch control comple was within 100/ of cocentance criterie

		ibdivision WW	TF				Area Wastewa			ole - Monthly Repor
Permit No: M						Terminated l	Permit No: MC	0-0105481		
Table: A-4 C		rab s/Extended Air/ S	Sacramal Yffter V	:-1-+/-1d d:		County: Cam				
contract hauler	LIII Station	s/Extended All/	seasonai Olira-v	iolevsludge di	sposal by	County . <u>Curr</u>			σ	ast permit review: 31 March 2017
	T COVERS	THE PERIOD	Place an "X"	in the circle fo	or the Quar	ter being reported.			(L	ast perime review. 31 March 2017
	gt Quarter		·	l Quarter 🚫			rd Quarter			4th Quarter
Janu	ary through M	Iarch	Apr	il through June	2	July t	through Septembe	er	Octo	ber through December
Due	April 28th 20_		Due .	July 28th 20 / 8	7	Due C	October 28th 20		I	Due Jan 28th 20
No Dis	charge for Qua	rter 🔾	No Disc	harge for Quarte	r O	No Disc	charge for Quarter	0	No I	Discharge for Quarter (
Outfall # 001	Sample Collecte	d By:		Telephone: 573 346	3810	Analysis Performed B	y: TOTAL WATER	LABORATOR	Telephone:	
	SAMPLE		ONE	E (1)	7	TŴO (2)				
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 4-26-18 Time:	ANALYSIS DATE	Date:	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	AN	NALYTICAL METHOD
Flow	GPD	Design flow 1,501 - 50K	1783	DATE			ZIMON			24 hr. estimate
BOD	mg/L	20	2.25					Grab		5210 B
TSS	mg/L	20	4.0					Grab		2540 D
pН	Units	6.0 - 9.0	7.94					Grab		4500 H + B
E. coli	#100mL	126	41.0					Grab		9223 B
Ultra-Violet	n/a	n/a	Ultra-violet					Grab		4500 CL - G
Ammonia	mg/L	4.6	20.60					Grab		4500 NH - 3
Dissolved O2	mg/L	Monitor & Report	8.44					Grab		4500 OG
Signature & Title		paring Report:	eb Analys	A.	Date:	7-18	Telephone:	3-346-3810	E-mail: info@	totalenvironmental.com
Report Approved	by Owner:	Hout			Date:	9/2018	Telephone:		E-mail:	
> - Sign & Reti		[X]MDNR/		56 30	/-		R/NERO	[] MDNR		MR & Permit Expire_30Jun201

		odivision WW	<u>rf</u>			Owner: Lake	Area Wastewa	ter Association	on, Inc.	
Permit No: No. 1	MOGD00234 Quarterly - Gra	a b				Terminated I	Permit No: MC	0-0105481		
		/Extended Air/ S	Seasonal Ultra-V	/iolet/sludge dis	sposal by	County: Cam	nden			
contract hauler		2		1010001100000	pondi o j				(Last permit review: 31 March 201
THIS REPOR	RT COVERS	THE PERIOD:	Place an "X"	in the circle fo	r the Quar	ter being reported.				
	1st Quarter 🛇)	2n	d Quarter		31	rd Quarter			4th Quarter
Jan	uary through M	arch	Apr	ril through June		July 1	through Septembe	er	Oct	tober through December
Du	e April 28th 20_/	8	Due	July 28th 20	_	Due C	October 28th 20			Due Jan 28th 20
No Di	scharge for Quar	ter O	No Disc	harge for Quarter	0	No Disc	charge for Quarter	0	No	Discharge for Quarter (
Outfall # 001	Sample Collected	lby: Lassiter		Telephone: 573 346	3810	Analysis Performed B	By: TOTAL WATER	LABORATOR	ES, LLC.	Telephone: 573-346-3810
	SAMPLE			E (1)		TWO (2)			.,	
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 3-19-19 Time: 10:30	ANALYSIS DATE	Date:	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	A	NALYTICAL METHOD
Flow	GPD	Design flow 1,501 - 50K	1438				1			24 hr. estimate
BOD	mg/L	20	3.23-	C				Grab		5210 B
TSS	mg/L	20	4.9					Grab		2540 D
pH	Units	6.0 - 9.0	7,22			+		Grab		4500 H + B
E. coli	#100mL	126	_					Grab		9223 B
Ultra-Violet	n/a	n/a	Ultra-violet					Grab		4500 CL – G
Ammonia	mg/L	4.6	< 0.60					Grab	1	4500 NH - 3
Dissolved O2	mg/L	Monitor & Report	8,29					Grab		4500 OG
Signature & Title	of Individual Prep		Lich Ana	Ao Ao	Date: 4-0-	3-18	Telephone:	3-346-3810	E-mail: info	@totalenvironmental.com
Report Approved X	by Owner:	Ment		4432	Date: /	12018	Telephone:		E-mail:	4
Sign & Re	turn Form	[X]MDNR	2723 SWRO Woodland	[] MDNR		[] MDN	R/NERO Prospect Dr	[] MDNR		DMR & Permit Expire_30Jun20 [] MDNR/SLRO 7545 S Lindbergh Blvd



515 Old South 5, Camdenton, Missouri 35065 Phone:(573) 346-3810 Fax:(573) 346-4168

Data Qualifiers in the TWL Laboratory Quality Assurance System:

B	present in the method blank at
C	The batch control sample failed to meet the required acceptance criteria.
D	Result obtained through the analysis of a sample dilution.
E	Concentration exceeds the instrument calibration range.
F	Internal Standard area failed to meet the required acceptance criteria in repeat instrumental analyses. Results should be interpreted as estimated concentrations.
G	The Method of Standard Additions (MSA) was used to quantify the concentration.
Н	Test performed after maximum allowable hold time.
i	Increased imprecision in Laboratory Control Sample (LCS) Duplicate
J	Estimated value.
K	DW sample above 10 C and received more than two hours after collection.
М	Analyte failed to meet the required acceptance criteria for duplicate analysis.
N	Relative difference between the high and low replicates was greater than 30%.
P	Chemical preservation discrepancy noted at the time of analysis.
Q	Analyte failed to meet the required acceptance criteria for spike recovery in the matrix spike (MS) and matrix spike duplicate (MSD).
R	The TRC analysis could not be performed on the sample and no other information was available
T	Too Numerous to Count and/or Confluent; estimated value.
U	Parameter was analyzed for but not detected above the reporting limit.
N/	Not analyzed.
NE	Not requested.
Х	Miscellaneous; note comments section.
S	The batch control sample was within 10% of acceptance criteria

	ylvan Bay Su	Resources bdivision WW		ionitoring	Keport		Area Wastewa			ple – Monthly Report	
Table: A-4 C		ah				Terminated I	Permit No: MC	0-0105481			
		Extended Air/ S	Seasonal Illtra-V	iolet/sludge dis	posal by	County: Cam	den				
contract hauler		SI DATORIGO PRIVI	ocasonar Olda v	1010031ddgc dis	posar by				П	Last permit review: 31 March 2017	
THIS REPOR	RT COVERS	THE PERIOD:	Place an "X"	in the circle for	r the Quart	ter being reported.			,-		
	1 st Quarter)	2ne	d Quarter		3rd Quarter				4 th Quarter 🚫	
Janu	ary through M	arch	Apr	ril through June		July t	through Septembe	Oct	ober through December		
Due	e April 28th 20_			Due C	October 28th 20			Due Jan 28th 20_ / 2			
No Di	scharge for Quar	rter O	No Disc	harge for Quarter	0	No Disc	charge for Quarter	0	No I	Discharge for Quarter (
Outfall#	Sample Collecte	d By:		Telephone:	3011	Analysis Performed B	y: TOTAL WATER	LABORATORI	IES, LLC.	Telephone: 573-346-3810	
	SAMPLE	20321101	ONI	E (1)	the second secon	WO (2)					
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 10-17-17 Time: 8-35	ANALYSIS DATE	Date: Time:	- ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	AI	NALYTICAL METHOD	
Flow	GPD	Design flow 1,501 - 50K	1923							24 hr. estimate	
BOD	mg/L	20	42.0					Grab		5210 B	
TSS	mg/L	20	2.2 -	C				Grab		2540 D	
pH	Units	6.0 - 9.0	8.18					Grab		4500 H + B	
E. coli	#100mL	126	×10					Grab		9223 B	
- Ultra-Violet	n/a	n/a	Ultra-violet					Grab		4500 CL – G	
Ammonia	mg/L	4.6	40.60					Grab		4500 NH - 3	
Dissolved O2	mg/L	Monitor & Report	9.26			ď		Grab		4500 OG	
Signature & Title	of Individual Prep		a hi Anal	Ao	Date:	-17	Telephone:	3-346-3810	E-mail: info@	2)totalenvironmental.com	
Report Approved	by Owner:	- El	NTDR	3154	Date:	12017	Telephone:		E-mail:		
A .	N/WY_	19	13:7/19	3134	11/30/		1			OMR & Permit Expire_30Jun201	
Sign & Res		200000000000000000000000000000000000000	/SWRO Woodland ield, MO 65807		/SERO Westwood Bluff, MO 6	1709 H	R/NERO Prospect Dr n, MO 63552		/KCRO Colbern Rd Summit, MO 64	[] MDNR/SLRO 7545 S Lindbergh Blvd 086 St Louis, MO 63125	



515 Old South 5, Camdenton, Missouri 5065 Phone:(573) 346-3810 Fax:(573) 346-4168

Data Qualifiers in the TWL Laboratory Quality Assurance System:

В	present in the method blank at
С	The batch control sample failed to meet the required acceptance criteria.
D	Result obtained through the analysis of a sample dilution.
E	Concentration exceeds the instrument calibration range.
F	Internal Standard area failed to meet the required acceptance criteria in repeat instrumental analyses. Results should be interpreted as estimated concentrations.
G	The Method of Standard Additions (MSA) was used to quantify the concentration.
Н	Test performed after maximum allowable hold time.
1	Increased imprecision in Laboratory Control Sample (LCS) Duplicate
J	Estimated value.
K	DW sample above 10 C and received more than two hours after collection.
M	Analyte failed to meet the required acceptance criteria for duplicate analysis.
N	Relative difference between the high and low replicates was greater than 30%.
P	Chemical preservation discrepancy noted at the time of analysis.
Q	Analyte failed to meet the required acceptance criteria for spike recovery in the matrix spike (MS) and matrix spike duplicate (MSD).
R	The TRC analysis could not be performed on the sample and no other information was available
Т	Too Numerous to Count and/or Confluent; estimated value.
U	Parameter was analyzed for but not detected above the reporting limit.
NA	A Not analyzed.
NF	R Not requested.
X	Miscellaneous; note comments section.

S The batch control sample was within 10% of acceptance criteria

MO Dept	of Natura	al Resources	NPDES M	lonitoring	Report	for Wastewar	ter Dischar	ge Mo	nthly Samp	le - Monthly Report
Facility:	Sylvan Bay Si	ubdivision WW	<u>TF</u>				Area Wastew			VTERED
Permit No: 1	MOGD00234 Quarterly - G					Terminated 1	Permit No: M	O-0105481	A. M.	
		rab is/Extended Air/ !	Passanal VIII-a Vi	7:010+/01vd-0 d:-		County: Carr		3 4 3 4 3 4 3		AUG 2 3 2017 1-477
contract haule		is/Extended Air/	seasonar Onra-v	ioiensidage dis	posai by	county. can	<u>Idell</u>		σ.	
THIS REPOR	RT COVERS	THE PERIOD	Place an "X"	in the circle fo	r the Quar	ter being reported.			(La	st permit review: 31 March 2017)
	1 st Quarter	_		d Quarter			rd Quarter			4th Quarter
Jan	uary through M	Aarch	Apr	il through June			through Septemb	er		per through December
Du	e April 28th 20_			July 28th 20			October 28th 20 /			ue Jan 28th 20
No Di	ischarge for Qua	irter 🔘	No Disci	harge for Quarter	0		charge for Quarter			scharge for Quarter ()
Outfall#	Sample Collecte			Telephone:		Analysis Performed B			1.0 2.	Telephone:
001	CINON	Bob Lass		573 346				R LABORATOR	IES, LLC.	573-346-3810
	SAMPLE	Townson and	ONE	2 (1)	Date:	WO (2)				
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 7- 26-17 Time: 10:00	ANALYSIS DATE	Time:	- ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	ANA	ALYTICAL METHOD
Flow	GPD	Design flow 1,501 - 50K	7,413							24 hr. estimate
BOD	mg/L	20	3.67					Grab		5210 B
TSS	mg/L	20	3.9					Grab	M .	2540 D
рH	Units	6.0 - 9.0	7.88					Grab		4500 H + B
E. coli	#100mL	126	</td <td></td> <td></td> <td></td> <td></td> <td>Grab</td> <td></td> <td>9223 B</td>					Grab		9223 B
Ultra-Violet	n/a	n/a	Ultra-violet					Grab		4500 CL – G
Ammonia	mg/L	4.6	10.60					Grab		4500 NH - 3
Dissolved O2	mg/L	Monitor & Report	6.58			~		Grab		4500 OG
Signature & Title	of Individual Prep	paring Report:	Analyst	A۰	Date: 8-14	-17	Telephone:	3-346-3810	E-mail: info@to	otalenvironmental.com
Report Approved	by Owner:	$\overline{}$			Date:	12017	Telephone:		E-mail:	
> - Sign & Ret	urn Form	[X]MDNR/S		[] MDNR/		[] MDNI	R/NERO	[] MDNR		R & Permit Expire_30Jun2019] MDNR/SLRO
To Office I	ndicated:		Woodland eld, MO 65807		Vestwood luff, MO 63		rospect Dr n, MO 63552		Colbern Rd ummit, MO 6408	7545 S Lindbergh Blvd 6 St Louis, MO 63125

MO Dept	of Natura	l Resources	NPDES M	Ionitoring	Report	for Wastewat	er Discharg	ge Mo	nthly Samp	ole - Monthly Report
Facility: Some Permit No: Market A-4 Control	ylvan Bay St 10GD00234 Quarterly - G	ıbdivision WW	ΤF			Owner: Lake	Area Wastewa Permit No: MC	ter Associati		
contract hauler	-	S. Extended I hiv	Jeasonar Oraa	Total Staage at	Sposer by				(L	ast permit review: 31 March 2017)
THIS REPOR	T COVERS	THE PERIOD:	Place an "X"	in the circle fo	r the Quar	ter being reported.				
	1 st Quarter		2n	d Quarter 🛇		3r	d Quarter			4th Quarter
Janu	ary through M	Iarch	Ар	ril through June		July 1	through Septembe	er	Octo	ber through December
Due	April 28th 20_		Due	July 28th 20 17	_	Due C	October 28th 20		I I	Due Jan 28th 20
No Dis	No Discharge for Quarter O				r 🔾	No Disc	charge for Quarter	0	No D	Discharge for Quarter
Outfall # 001	Sample Collecte Bob La			Telephone: 573-34	8-3810	Analysis Performed B	by: TOTAL WATER	LABORATOR	ES, LLC.	Telephone: 573-346-3810
	SAMPLE	18	ON	E (1)		TWO (2)				
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 5.16-17 Time: 9:45	ANALYSIS DATE	Date:	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	AN	ALYTICAL METHOD
Flow	GPD	Design flow 1,501 - 50K	11,000	DATE			2 TAXLEY			24 hr. estimate
BOD	mg/L	20	2.06					Grab		5210 B
TSS	mg/L	20	1.8					Grab		2540 D
pН	Units	6.0 - 9.0	7.61					Grab		4500 H + B
E. coli	#100mL	126	21.0					Grab		9223 B
Ultra-Violet	n/a	n/a	Ultra-violet					Grab		4500 CL - G
Ammonia	mg/L	4.6	40.60		-			Grab		4500 NH - 3
Dissolved O2	mg/L	Monitor & Report	7.24					Grab		4500 OG
Signature & Title	of Individual Pres	paring Report:	rector	VF	Date:	7	Telephone:	3-346-3810	E-mail: info@	totalenvironmental.com
Report Approved		>	**************************************		Date:	2016	Telephone:		E-mail:	
Sign & Retro	urn Form ndicated:		SWRO Woodland eld, MO 65807		, ,	[] MDN 1709 F	R/NERO Prospect Dr n, MO 63552			MR & Permit Expire_30Jun2019 [] MDNR/SLRO 7545 S Lindbergh Blvd 86 St Louis, MO 63125

515 Old South Highway 5, Camdenton, MO 65020 573-346-3810

MO Dept of Natural Passaures NPDES Manitoring Papart for Wasterwater Discharge Quarterly Samula

Permit No: M Table: A-4 Qu Facility Type: disposal by con THIS REPOR'	uarterly - G : Extended a intract haule	rab					e Area Waster			Samples Received in Lab:
Facility Type: disposal by con THIS REPORT	: Extended a					Terminated	Permit No: N	40-0103047		4-18-19 14:35
disposal by cor THIS REPOR	ntract haule		4 30 12 64	2.00		County: Car	nden			
THIS REPORT			d chlorination	& Dechloring	ation / sludge					
1st Quarter -	TOURDS									
1st Quarter -	I COVER	THE PERIOD	: Place an "X"	in the box be	eneath the qua					
Due by April 28, 2019 Due by July 2					ough June 2019		r – July through by October 28,			October through December by January 20, 2020
				\boxtimes						
No Disch	narge For Quar	rter 🔲	No Disc	charge For Quar	ter 🔲	No Dis	charge For Quarte	er 🗆	No Disc	charge For Quarter
Outfall # 5				Telephone: 573-3	46-3810	Analysis Perform	ned By: Total Water Lal	poratories, LLC		Telephone: 573-346-3810
Parameter	Permitted Final Limits	Sample Type	Sample Date and Time	Final Results	Unit	Analysis Date	Analyst Initials	Data Qualifier	Comments	Analytical Method
Flow	1501-50000	24 Hour Estimate	4-18-19 14:00	2100	GPD				Completed at Sample Site	
BOD	20	Grab	4-18-19 14:00	6.16	mg/L	4-19-19 07:12 4-24-19 08:00	VF	N		SM 5210 B
TSS	20	Grab	4-18-19 14:00	3.4	mg/L	4-19-19	DG			SM 2540 D
E. Coli	126	Grab	4-18-19 14:00	1	#/100mL	4-18-19 14:37 4-19-19 14:38	VF			SM 9233 B
pH	6.0-9.0	Grab	4-18-19 14:00	7.62	Units				Completed at Sample Site	SM 4500 H + B
Ammonia	4.6	Grab	4-18-19 14:00	<0.60	mg/L	4-27-19	AO			Hach 10205*
CITRC	<130	Grab	4-18-19 14:00	<130	µg/L					SM 4500 CL - G
Dissolved Oxygen	Monitor & Report	Grab	4-18-19 14:00	5.54	mg/L				Completed at Sample Site	SM 4500 OG
Amy Osborn, 7	Technical L	5-15-1-1		9	Date:	9, 2019	Telephone: 573-34	6-3810	E-mail: info@to	otalenvironmental.com
Report Approved By Owner:				Date:		Telephone:		E-mail:		

ENTERED MAY

Submitted

Submitted

Submitted

FATERED MAY

SILO

Sign & Return Form to DNR Office:

MDNR/SWRO 2040 W Woodland Springfield, MO 65807

Total Water Laboratories, LLC. is accredited with the National Environmental Laboratory Accreditation Program (NELAP) through the New Hampshire Environmental Laboratory Accreditation Program (NH ELAP). Results reported for certified tests meet all requirements of NELAP. A list of certified test methods is available on request. NH ELAP certificate number 2055. Total Water Laboratories reserves the right to subcontract work to other NELAP certified laboratories when appropriate. This report shall not be reproduced except in full, without the written approval of Total Water Laboratories. These results pertain only to the samples indicated by the report.

*Method is not accredited through NH FLAP

Laboratory Report Number: 2019-0172

Attachments:

515 Old South Highway 5, Camdenton, MO 65020 573-346-3810

the state of the s		Condominiums	WWTF		Owner: Lake Area Wastewater Association, Inc. Samples Rec							
Permit No: MOGD00100							Permit No: N	MO-0103047		3-1-19 07:30		
Table: A-4 (Quarterly - G	<u>rab</u>				County: Car	그리아 등 강하네요요요요.					
Facility Typ	e: Extended a	eration / seasona	al chlorination	& Dechlorina	ation / sludge							
disposal by	contract haule	er										
THIS REPO	RT COVERS	THE PERIOD	: Place an "X"	" in the box be	neath the qua	rter being repor	rted.					
1st Quarter - January through March Due by April 28, 2019 Due by July 28,					ough June	3rd Quarte	r - July through by October 28.			October through December by January 20, 2020		
No Discharge For Quarter No Discharge For					ter 🗆		scharge For Quart	er 🗆	No Disc	No Discharge For Quarter		
Outfall # 001	Sample Collec	ted By: Kirk Davis		Telephone: 573-3	46-3810	Analysis Perform	med By: Total Water La	boratories, LLC		Telephone: 573-346-3810		
Parameter	Permitted Final Limits	Sample Type	Sample Date and Time	Final Results	Unit	Analysis Date	Analyst Initials	Data Qualifier	Comments	Analytical Method		
Flow	1501-50000	24 Hour Estimate	2-28-19 14:15	2000	GPD				Completed at Sample Site			
BOD	20	Grab	2-28-19 14:15	5.03	mg/L	3-1-19 07:10 3-6-19 07:52	VF	C, N		SM 5210 B		
TSS	20	Grab	2-28-19 14:15	8.5	mg/L	3-1-19	DG	C		SM 2540 D		
E. Coli	126	Grab	NA		#/100mL					SM 9233 B		
рН	6.0-9.0	Grab	2-28-19 14:15	7.50	Units				Completed at Sample Site	SM 4500 H + B		
Ammonia	4.6	Grab	2-28-19 14:15	<0.60	mg/L	3-13-19	AO			Hach 10205*		
CI TRC	<130	Grab	NA		ug/L					SM 4500 CL - G		
Dissolved Oxygen	Monitor & Report	Grab	2-28-19 14:15	7.21	mg/L				Completed at Sample Site	SM 4500 OG		
Signature & Title of Individual Preparing Report: My office Amy Osborn, Technical Lab Director					Date: March 20, 2019		Telephone: 573-346-3810		E-mail: info@totalenvironmental.com			
Report Approved By Owner:					Date:	Telephone:			E-mail:	E-mail:		

☑ Electronic Form Submitted

47029

☐ Sign & Return Form to DNR Office:

MDNR/SWRO 2040 W Woodland Springfield, MO 65807 Total Water Laboratories, LLC. is accredited with the National Environmental Laboratory Accreditation Program (NELAP) through the New Hampshire Environmental Laboratory Accreditation Program (NH ELAP). Results reported for certified tests meet all requirements of NELAP. A list of certified test methods is available on request. NH ELAP certificate number 2055. Total Water Laboratories reserves the right to subcontract work to other NELAP certified laboratories when appropriate. This report shall not be reproduced except in full, without the written approval of Total Water Laboratories. These results pertain only to the samples indicated by the report.

*Method is not accredited through NH ELAP

Laboratory Report Number: 2019-0060

Attachments:

Facility: The Permit No: 1 Table: A-4 (hree Seasons MOGD00100 Quarterly - Gree: Extended as	Condominiums	WWTF				Owner:	Lake Area Wated Permit N	astewater Asso lo: MO-010304	
THIS REPOR	RT COVERS	THE PERIOD	: Place an "X"	in the circle fo	or the Quarter	being reported				
1 1 1	1st Quarter			2nd Quarter) .		3rd Quarter)		4th Quarter
Jan	uary through M	Tarch	-	pril through Ju	ine	Jul	ly through Septem	iber	Octo	her through December
Du	e April 28th 20_		D	ue July 28th 20_		Due	e October 28th 20			ue Jan 28 th 20 <u>19</u>
No Di	scharge for Qua	arter (No D	ischarge for Qua	rter O				No Discharge for Quarter	
Outfall # 001	Sample Collecte	Kirk Davi	5	Telephone: 573 346	3810	Analysis Perform		TER LABORAT	· Telephone:	
	SAMPLE		ON	E (1)	TW	O (2)	4			373-340-3610
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 10-08-18 Time:	ANALYSIS DATE	Date:	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	ANA	ALYTICAL METHOD
Flow	GPD	Design flow 1,501 - 50K	7200					2		24 hr. estimate
BOD	mg/L	20	2.42-	C				Grab		5210 B
TSS	mg/L	20	4-1 -	c				Grab		2540 D
рН	Units	6.0 – 9.0	7.68					Grab		4500 H + B
E. coli	#100mL	126	<1.0					Grab		9223 B
CI TRC	μg/L	8.0	<130					Grab		4500 CL – G
Ammonia	mg/L	4.6	10-60	+				Grab		4500 NH - 3
Dissolved O2	mg/L	Monitor & Report	5.68					Grab		4500 OG
Signature & Title	a Flor	paring Report:	ab Arad	Ac UST	Date: 11-19-	18	Telephone:	3-346-3810	E-mail: info@te	otalenvironmental.com
Report Approved	By Owner:		R		Date: 11/20/2	2018	Telephone:		E-mail:	
Sign & Ret To Office I	ndicated:		Woodland		7 7	[] MDNI 1709 P	R/NERO Prospect Dr n, MO 63552		KCRO Colbern Rd ummit, MO 6408	DMR & Permit Expire_30Jun2019 [] MDNR/SLRO -7545 S Lindbergh Blvd 66 St Louis, MO 63125

MO Dept of Natural Resources NPDES Monitoring Report for Wastewater Discharge --- Monthly Sample - Monthly Report

THIS REPOR	RT COVERS	THE PERIOD:	Place an "X"	in the circle fo	r the Quarter	r being reported				
	1st Quarter)	1	and Quarter		-	3rd Quarter			4th Quarter
- Jan	uary through M	[arch	A	pril through Ju	ne	Jul	ly through Septem	iber	Octo	ber through December
Du	e April 28th 20_		Du	ne July 28th 20		Du	e October 28th 20_	18	D	oue Jan 28th 20
No Di	ischarge for Qua	rter 🔾	No Di	scharge for Quar	ter 🔾 .	No D	No Discharge for Quarter (ischarge for Quarter 🔘
Outfall # 001	Sample Collecte	dBy: rk Davis		Telephone: 573 346	3810	Analysis Perform		AL WATER LABORATORIES, LLC. Telephone: 573-3		
	SAMPLE		ONI	E (1)		WO (2)				
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 7-26-18 Time: 10:45	ANALYSIS DATE	Date:	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	AN.	ALYTICAL METHOD
Flow	GPD	Design flow 1,501 - 50K	177/2							24 hr. estimate
BOD	mg/L	20	4.18-6					Grab		5210 B
TSS	mg/L	20	11-6-M					Grab		2540 D
pН	Units	6.0 – 9.0	7.75					Grab		4500 H + B
E. coli	#100mL	126	41.0					Grab		9223 B
CITRC	μg/L	8.0	<130					Grab		4500 CL - G
Ammonia	mg/L	4.6	< 0.60	-Q				Grab		4500 NH - 3
Dissolved O2	mg/L	Monitor & Report	4.30					Grab		4500 OG
	of Individual Prep		h Anadest	A	Date: 8-15-1	8	Telephone:	3-346-3810	E-mail: info@	totalenvironmental.com
Report Approved		R	3-3870	7	Date: 0/16	1228	Telephone:		E-mail:	



515 Old South 5, Camdenton, Missouri 65065 Phone:(573) 346-3810 Fax:(573) 346-4168

Data Qualifiers in the TWL Laboratory Quality Assurance System:

B _____ present in the method blank at _____. C The batch control sample failed to meet the required acceptance criteria. D Result obtained through the analysis of a sample dilution. E Concentration exceeds the instrument calibration range. Internal Standard area failed to meet the required acceptance criteria in repeat instrumental analyses. Results should be interpreted as estimated concentrations. G The Method of Standard Additions (MSA) was used to quantify the concentration. H Test performed after maximum allowable hold time. Increased imprecision in Laboratory Control Sample (LCS) Duplicate J Estimated value. K DW sample above 10 C and received more than two hours after collection. M Analyte failed to meet the required acceptance criteria for duplicate analysis. N Relative difference between the high and low replicates was greater than 30%. Chemical preservation discrepancy noted at the time of analysis. O Analyte failed to meet the required acceptance criteria for spike recovery in the matrix spike (MS) and matrix spike duplicate (MSD). R The TRC analysis could not be performed on the sample and no other information was available T Too Numerous to Count and/or Confluent; estimated value. U Parameter was analyzed for but not detected above the reporting limit. NA Not analyzed. NR Not requested. X Miscellaneous; note comments section. S The batch control sample was within 10% of acceptance criteria

Facility: The Permit No: Market A-4 (Facility Types)	hree Seasons MOGD00100 Quarterly - G e: Extended a	Condominiums	WWTF				Owner: 1	Lake Area W ted Permit I	astewater Asso	
THIS PERON		THE PERIOD	Dlace on WY	in the simple fo	- 1 - 0					(Dasi pormit review. 07 April 2017
	1st Quarter			nd Quarter (X			3rd Quarter		T	4th Quarter
									-	
	uary through N	Aarch		pril through Jun			y through Septem	iber		oher through December
	e April 28th 20_			e July 28th 20/_			October 28th 20_	_	-	Due Jan 28th 20
	scharge for Qua		No Di	scharge for Quar	ter ()		ischarge for Quart	er ()	No	Discharge for Quarter
Outfall # 001	Sample Collecto	ck Davis		Telephone: 573 346	3810	Analysis Performe		TER LABORAT	TORIES, LLC.	Telephone: 573-346-3810
	SAMPLE		ONI		TW	O (2)				
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 4-17-19 Time: 4:11	ANALYSIS DATE	Date:	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	A	NALYTICAL METHOD
Flow	GPD	Design flow 1,501 - 50K	320						24 hr. estimate	
BOD	mg/L	20	4,44					Grab	5210 B	
TSS	mg/L	20	13.9					Grab		2540 D
pН	Units	6.0 - 9.0	7.02					Grab	4	4500 H + B
E. coli	#100mL	126	<1.0					Grab		9223 B
CITRC	μg/L	8.0	< 130					Grab		4500 CL – G
Ammonia	mg/L	4.6	10.60					Grab		4500 NH - 3
Dissolved O2	mg/L	Monitor & Report	7.30					Grab		4500 OG
Signature & Title	2000 K	Committee of the Commit	ab Analy	Ao Ao	Date: 5-7-19	.	Telephone:	3-346-3810	E-mail: info@	@totalenvironmental.com
Report Approved	By Owner:	2. Knot	PLIA	28840	Band: 5/09	12018	Telephone:		E-mail:	
Sign & Ret			SWRO Woodland eld, MO 65807	[] MDNR 2155 N	-	[] MDNF 1709 P	R/NERO Prospect Dr n, MO 63552		/KCRO Colbern Rd Summit, MO 640	DMR & Permit Expire_30Jun2019 [] MDNR/SLRO -7545 S Lindbergh Blvd 086 St Louis, MO 63125

Facility: The Permit No: Market A-4 (nree Seasons (MOGD00100 Quarterly - Gra e: Extended ac	Condominiums	WWTF				Owner:	Lake Area Wated Permit N	astewater Associ	
THIS REPO	RT COVERS	THE PERIOD	: Place an "X"	in the circle fo	r the Quarter	r being reported.				
	1st Quarter 🛭	5		2nd Quarter			3rd Quarter)		4 th Quarter
Jan	uary through M	arch	A	pril through Ju	ne	Jul	y through Septem	iber	Octob	er through December
Du	e April 28th 20_/	18	D	ue July 28th 20		Due	October 28th 20_		Dr	ue Jan 28 th 20
No D	scharge for Quar	ter 🔾	No Discharge for Quarter O			No D	ischarge for Quart	er O	No Discharge for Quarter (
Outfall # 001		iBy: -K Davis		Telephone:	3510	Analysis Perform		ORIES, LLC.	Telephone: 573-346-3810	
	SAMPLE			E (1)		VO (2)				
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 2-09-18 Time: 9-12	ANALYSIS DATE	Date:	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	ANA	LYTICAL METHOD
Flow	GPD	Design flow 1,501 - 50K	3,700					5.5		24 hr. estimate
BOD	mg/L	20	2.59 -	C				Grab		5210 B
TSS	mg/L	20	2.5					Grab		2540 D
pH	Units	6.0 - 9.0	7.18					Grab		4500 H + B
E. coli	#100mL	126	_					Grab		9223 B
CITRC	μg/L	8.0	_					Grab		4500 CL – G
Ammonia	mg/L	4.6	20.60					Grab	3	4500 NH - 3
Dissolved O2	mg/L	Monitor & Report	8.09					Grab		4500 OG
Mann			frayst	До	3-01-1	8	Telephone:	73-346-3810	E-mail: info@to	otalenvironmental.com
Report Approved	By Owner:			LED	Date: 3/02/	2018	Telephone:	J.	E-mail:	
Sign & Re To Office		[X]MDNR/ 2040 W	SWRO Woodland ield, MO 65807		1	[] MDN1 1709 F	R/NERO Prospect Dr n, MO 63552			DMR & Permit Expire_30Jun201 MDNR/SLRO 7545 S Lindbergh Blvd St Louis, MO 63125



515 Old South 5, Camdenton, Missouri 65065 Phone:(573) 346-3810 Fax:(573) 346-4168

Data Qualifiers in the TWL Laboratory Quality Assurance System:

present in the method blank at . C The batch control sample failed to meet the required acceptance criteria. D Result obtained through the analysis of a sample dilution. E Concentration exceeds the instrument calibration range. Internal Standard area failed to meet the required acceptance criteria in repeat instrumental analyses. Results should be interpreted as estimated concentrations. G The Method of Standard Additions (MSA) was used to quantify the concentration. H Test performed after maximum allowable hold time. Increased imprecision in Laboratory Control Sample (LCS) Duplicate J Estimated value. K DW sample above 10 C and received more than two hours after collection. M Analyte failed to meet the required acceptance criteria for duplicate analysis. N Relative difference between the high and low replicates was greater than 30%. P Chemical preservation discrepancy noted at the time of analysis. Q Analyte failed to meet the required acceptance criteria for spike recovery in the matrix spike (MS) and matrix spike duplicate (MSD). R The TRC analysis could not be performed on the sample and no other information was available T Too Numerous to Count and/or Confluent; estimated value. U Parameter was analyzed for but not detected above the reporting limit. NA Not analyzed. NR Not requested. X Miscellaneous; note comments section.

S The batch control sample was within 10% of acceptance criteria

MO Dept	of Natural	Resources	NPDES M	lonitoring	Report for	r Wastewat	ter Discharg	ge Mor	thly Samp	ole - Monthly Repor
Facility: The Permit No: Market A-4 (aree Seasons (MOGD00100 Quarterly - Gra e: Extended ae	Condominiums ab					Owner: I	Lake Area Wa ted Permit N	o: MO-01030	ociation, Inc.
		THE PERIOD	Place an "X"	in the circle fo	or the Quarter	haing reported	_4	+		
	1st Quarter)		nd Quarter			3rd Quarter			4th Quarter
Jan	uary through M	arch	A	pri! through Ju	ine	Jul	y through Septem	ber	Octo	ber through December
Du	e April 28th 20_		Du	e July 28th 20_		Due	e October 28th 20_		I	Due Jan 28 th 20_/8
No Di	scharge for Quar	ter 🔾	No Di	scharge for Quar	rter O	No D	ischarge for Quart	er O	No I	Discharge for Quarter (
Outfall # 001	Sample Collected	i By:)avis		Telephone: 573 346	3810	Analysis Perform		TER LABORATO	Telephone: 573-346-3810	
	SAMPLE		ONE		TW	O (2)				272 370 3010
PARAMETER	UNIT	PERMITTED FINAL LIMITS	Date: 10-10-17 Time: 1232	ANALYSIS DATE	Date: 12-6-17 Time: 845	ANALYSIS DATE	AVG OF SAMPLES IF 2 TAKEN	SAMPLE TYPE	AN	ALYTICAL METHOD
Flow	GPD	Design flow 1,501 - 50K	No Dischurge		2160			e 2	(V)	24 hr. estimate
BOD	mg/L	20			2.12			Grab		5210 B
TSS	mg/L	20			4.5 - 6			Grab		2540 D
pH	Units	6.0 - 9.0			7.82			Grab		4500 H + B
E. coli	#100mL	126	_		-			Grab		9223 B
CI TRC	µg/L	8.0	-		-			Grab		4500 CL – G
Ammonia	mg/L	4.6			20.60			Grab		4500 NH - 3
Dissolved O2	mg/L	Monitor & Report			5.77			Grab		4500 OG
dry of			KHTE	VF	Date: 12-13	-/7	Telephone:	3-346-3810	E-mail: info@	totalenvironmental.com
Report Approved	By Owner:			ich i	Date:		Telephone:	1	E-mail:	
Sign & Ref	turn Form	[X]MDNR/ 2040 W		2155 N	C/SERO Westwood Bluff, MO 6390	1709 I	R/NERO Prospect Dr n, MO 63552		KCRO Colbern Rd ummit, MO 640	DMR & Permit Expire_30Jun207 [] MDNR/SLRO ·7545 S Lindbergh Blvd 86 St Louis, MO 63125