New York State Department of Environmental Conservation
Division of Water

WASTEWATER FACILITY OPERATION REPORT FOR THE MONTH OF: October 2025

SPEDES PRMIT NO.	FACILITY NAME	FACILITY OWNER	FACILITY LOCATION
NY-0271420	**Village of Red Hook**	**same**	**Red Hook, NY**

			VOLUME OF SEWAGE TREATED			TEMPERATURE (°F)		pH (S.U.)				Settleable Solids (mg/l)		B.O.D.5. (mg/l)		Suspended Solids(mg/l)	
DAY	DATE	Daily Precip. in/day	Inst.Max. MGD	Dly Average. MGD	Inst.Min. MGD	Influent (2)	Effluent (2)	Influent Minimum	Influent Maximum	Effluent Minimum	Effluent Maximum	Influent Maximum	Effluent Maximum	Influent Type	Effluent Type	Influent Type	Effluent Type
	1	0.00		0.0309			71.8			7.6	7.6		<0.1				
	2	0.00		0.0366			69.7			7.0	7.0		<0.1	207	<2	73	2.7
	3	0.00		0.0318			72.9			7.7	7.7		<0.1				
	4	0.00		0.0236			71			7.4	7.4		<0.1				
	5	0.00		0.0318			71.8			7.4	7.4		<0.1				
	6	0.00		0.0305			72			7.4	7.4		<0.1				
	7	0.00		0.0299			74			7.7	7.7		<0.1				
	8	0.00		0.0297			73.6			7.7	7.7		<0.1				
	9	0.00		0.0353			69			7.1	7.1		<0.1				
	10	0.00		0.0359			68.7			7.6	7.6		<0.1				
	11	0.00		0.0372			69			7.6	7.6		<0.1				
	12	0.50		0.0279			69.8			7.4	7.4		<0.1				
	13	1.25		0.0356			68.9			7.4	7.4		<0.1				
	14	0.64		0.0240			69			7.7	7.7		<0.1				
	15	0.00		0.0314			69.3			7.7	7.7		<0.1				
	16	0.00		0.0303			67.5			7.2	7.2		<0.1				
	17	0.00		0.0389			67.6			7.1	7.1		<0.1				
	18	0.00		0.0304			68.2			7.1	7.1		<0.1				
	19	0.00		0.0111			68			7.4	7.4		<0.1				
	20	0.00		0.0287			71.1			7.3	7.3		<0.1				
	21	0.00		0.0427			66.5			7.4	7.4		<0.1				
	22	0.00		0.0369			69			7.5	7.5		<0.1				
	23	0.00		0.0171			67.1			7.3	7.3		<0.1	167	<2	62	1.2
	24	0.00		0.0387			65.5			7.5	7.5		<0.1				
	25	0.00		0.0302			67.5			7.2	7.2		<0.1				
	26	0.00		0.0330			65.8			7.0	7.0		<0.1				
	27	0.00		0.0343			64.6			7.1	7.1		<0.1				
	28	0.00		0.0308			61.5			7.1	7.1		<0.1				
	29	0.00		0.0347			64.9			7.1	7.1		<0.1				
	30	0.20		0.0366			65.1			7.4	7.4		<0.1				
	31	2.10		0.0327			66.2			7.3	7.3		<0.1				
		Total Precip.		Monthly Average		Monthly Maximum Influent	Monthly Maximum Effluent	Monthly Minimum	Monthly Maximum	Monthly Minimum	Monthly Maximum	Monthly Maximum	Monthly Maximum	30 day flow-weighted avg (1) inf.(mg/l)	30 day flow-weighted avg (1) eff.(mg/l)	30 day flow-weighted avg (1) inf.(mg/l)	30 day flow-weighted avg (1) eff.(mg/l)
		4.69		**0.032**			**74**			**7.0**	**7.7**		**0.0**	**207**	**2.0**	**73**	**2.7**
														%Rem.->	**99**	%Rem.->	**96**
			Max:	**0.0427**									30 Day Average Quantity Loading (1)	**0.61**	lbs/day	**0.82**	lbs/day

(1) Refer to January 1994 edition of *DMR Manual for completing the Discharge Monitoring Report for the national Pollutant Discharge Elimination System (NPDES)* for procedures to calculate loadings, arithmetic mean, geometric Mean, maximum, minimum, percent removal, etc

(2) If Tem

NOTE: Refer to current SPDES permit for specific monitoring requirements. Sample type for temperature, PH and settleable solids is grab

FACILITY MAILING ADDRESS (Street, City, Zip Code)	TELEPHONE NUMBER	CHIEF OPERTATOR'S NAME	CERTIFICATION GRADE
		Leslie A Coon Jr	3A

		TOTAL PHOSPHORUS(mg/l)		Ultraviolet		FECAL COLIFORM		
		Influent	Effluent	Contact	Effluent	Effluent		REMARKS
DAY	DATE	Type	Type	Minimum	Maximum	MF or MPN/100ml		Enter any other comments, observations, operating problems, equipment failures, etc.
	1			ON	ON			
	2			ON	ON		5.2	
	3			ON	ON			
	4			ON	ON			
	5			ON	ON			
	6			ON	ON			
	7			ON	ON			
	8			ON	ON			
	9			ON	ON			
	10			ON	ON			
	11			ON	ON			
	12			ON	ON			
	13			ON	ON			
	14			ON	ON			
	15			ON	ON			
	16			ON	ON			
	17			ON	ON			
	18			ON	ON			
	19			ON	ON			
	20			ON	ON			
	21			ON	ON			
	22			ON	ON			
	23			ON	ON		2419.6	
	24			ON	ON			
	25			ON	ON			
	26			ON	ON			
	27			ON	ON			
	28			ON	ON		142.5	7 day 1281
	29			ON	ON			
	30			ON	ON			
	31			ON	ON			

30 day flow-weighted avg mean(1)		Monthly		30 day geometric mean(1)
Influent mg/l	Effluent mg/l	Minimum(1)	Maximum(1)	
		ON	**ON**	**121.5**
	lbs/day			

(1) Refer to January 1994 edition of *DMR Manual for completing the Discharge Monitoring Report for the national Pollutant Discharge Elimination System (NPDES)* for procedures to calculate loadings, arithmetic mean, geometric Mean, maximum, minimum, percent removal, etc

NOTE: Refer to current SPDES permit for specific monitoring requirements. Sample type for temperature, PH and settleable solids is grab

										Fixed Media Process Control		Activated Sludge Process Control				
		NH3		DO						Recirculation Rate	Media effluent settleable solids	Mixed Liquor S.S. (MLSS)	Settleable Sludge Volume (SSV) ml/l		Return Act. Sludge (RAS)	Waste Act. Sludge (WAS)
Day	Date	Influent	Effluent	Influent	Effluent	Influent	Effluent	Influent	Effluent	M.G.D	ml/l	mg/l	5 Minutes	30 minutes	M.G.D.	lbs/day
	1				8.7											
	2		<0.05		8.6											
	3				8.9											
	4				8.7											
	5				8.3											
	6				8.3											
	7				8.3											
	8				8.4											
	9				8.6											
	10				8.4											
	11				8.2											
	12				8.9											
	13				8.6											
	14				8.3											
	15				8.2											
	16				8.8											
	17				8.7											
	18				8.4											
	19				8.2											
	20				8.0											
	21				8.1											
	22				7.2											
	23		0.072		8.6											
	24				8.8											
	25				8.3											
	26				8.0											
	27				8.3											
	28				8.6											
	29				8.5											
	30				8.3											
	31				8.5											
Min:					**7.2**											
30 Day Average Quantity		MAX:	**0.072**													
Loading (1)			lbs/day		lbs/day		lbs/day		lbs/day							

(1) Refer to January 1994 edition of *DMR Manual for completing the Discharge Monitoring Report for the national Pollutant Discharge Elimination System (NPDES)* for procedures to calculate loadings, arithmetic mean, geometric Mean, maximum, minimum, percent removal, etc

Effect on Receiving Stream

Name of Receiving Stream						
Shanty Hollow Creek						
Date		Station		Parameter	Result	

TRUCKED WASTE RECEIVED THIS MONTH

1- Septage, holding tank waste and portable toilet waste

Total Max day

Volume (Gal.)

2- All other wastes

Total Max day

3- Number of Part 364 haulers currently approved to transport wastes to this POTW

a.Septage,etc

b. All others

Name and amount of chemicals used in treatment process during month:

a.	gallons
b.	gallons
c.	Gallons
d.	lbs.
e.	Gallons
f.	Gallons

Amount of ecectrical power consumed:

a. Commercial	kilowatt hours
b. Stand-by	kilowatt hours

Amount of fuel consumed:

a. Natural Gas	cubic feet
b. Oil	gallons
c. Gasoline	gallons
d. Coal.	tons
e. Digester Gas	cubic feet
f. propane	gallons

Sludge removal from plant:

a. amount	
b. solid content	
c. Volitile Solids Content	
d. Disposal Site:	Superior Sanitation

Other Solid Wastes:

a. Screenings	
b. Grit	
c. Ashes	
d.	
e.	
f.	
g. Disposal Site	

Digester Gas Wasted

Labor expended:

POSITION NAME	NUMBER FULL TIME	NUMBER PART TIME	TOTAL HOURS
Operator		**124**	**124**

I hereby affirm under penalty of perjury that information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

Leslie A Coon Jr. 11/28/2025

Signature of Chief Operator or Designated Facility Representative Date

DMR Copy of Record

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

EPA may make all the information submitted through this form (including all attachments) available to the public without further notice to you. Do not use this online form to submit personal information (e.g., non-business cell phone number or non-business email address), confidential business information (CBI), or if you intend to assert a CBI claim on any of the submitted information. Pursuant to 40 CFR 2.203(a), EPA is providing you with notice that all CBI claims must be asserted at the time of submission. EPA cannot accommodate a late CBI claim to cover previously submitted information because efforts to protect the information are not administratively practicable since it may already be disclosed to the public. Although we do not foresee a need for persons to assert a claim of CBI based on the types of information requested in this form, if persons wish to assert a CBI claim we direct submitters to contact the NPDES eReporting Help Desk for further guidance. Please note that EPA may contact you after you submit this report for more information.

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Permit

Permit #:	**NY0271420**	**Permittee:**	VILLAGE OF RED HOOK	**Facility:**	VILLAGE OF REDHOOK WWTP
Major:	No	**Permittee Address:**	7467 SOUTH BROADWAY RED HOOK, NY 12571	**Facility Location:**	US ROUTE 9 RED HOOK, NY 12571
Permitted Feature:	01A Internal Outfall	**Discharge:**	**01A-M** INTERNAL OUTFALL		

Report Dates & Status

Monitoring Period:	**From 10/01/25 to 10/31/25**	**DMR Due Date:**	**11/28/25**	**Status:**	**NetDMR Validated**

Considerations for Form Completion

Principal Executive Officer

First Name:	Karen	**Title:**	Mayor	**Telephone:**	845-758-1081
Last Name:	Smythe				

No Data Indicator (NODI)

Form NODI: --

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration							# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
X 00011	**Temperature, water deg. fahrenheit**	1 - Effluent Gross	0	--	Sample										=	74.0	15 - deg F		01/01 - Daily	GR - Grab
					Permit Req.										<=	70.0 DAILY MX	15 - deg F	1	01/01 - Daily	GR - Grab
					Value NODI															
00300	**Oxygen, dissolved [DO]**	1 - Effluent Gross	0	--	Sample						=	7.2					19 - mg/L		01/01 - Daily	GR - Grab
					Permit Req.						>=	7.0 DAILY MN					19 - mg/L		01/01 - Daily	GR - Grab
					Value NODI															
00310	**BOD, 5-day, 20 deg. C**	1 - Effluent Gross	0	--	Sample										<	2.0	19 - mg/L		01/30 - Monthly	GR - Grab
					Permit Req.										<=	5.0 DAILY MX	19 - mg/L	1	01/30 - Monthly	GR - Grab
					Value NODI															
00400	**pH**	1 - Effluent Gross	0	--	Sample						=	7.0			=	7.7	12 - SU		01/01 - Daily	GR - Grab
					Permit Req.						>=	6.5 MINIMUM			<=	8.5 MAXIMUM	12 - SU		01/01 - Daily	GR - Grab
					Value NODI															
00530	**Solids, total suspended**	1 - Effluent Gross	0	--	Sample										=	2.7	19 - mg/L		01/30 - Monthly	GR - Grab
					Permit Req.										<=	10.0 DAILY MX	19 - mg/L		01/30 - Monthly	GR - Grab
					Value NODI															
00545	**Solids, settleable**	1 - Effluent Gross	0	--	Sample										=	0.1	25 - mL/L		01/01 - Daily	GR - Grab
					Permit Req.										<=	0.1 DAILY MX	25 - mL/L		01/01 - Daily	GR - Grab
					Value NODI															
00610	**Nitrogen, ammonia total [as N]**	1 - Effluent Gross	1	--	Sample										=	0.072	19 - mg/L		01/30 - Monthly	GR - Grab
					Permit Req.										<=	0.98 DAILY MX	19 - mg/L		01/30 - Monthly	GR - Grab
					Value NODI															
50050	**Flow, in conduit or thru treatment plant**	1 - Effluent Gross	0	--	Sample	=	0.032			03 - MGD									99/99 - Continuous	RC - Recorder (auto)
					Permit Req.	<=	0.05 MO AVG			03 - MGD									99/99 - Continuous	RC - Recorder (auto)
					Value NODI															
50060	**Chlorine, total residual**	1 - Effluent Gross	0	--	Sample															
					Permit Req.										<=	0.03 DAILY MX	19 - mg/L		01/01 - Daily	GR - Grab
					Value NODI											9 - Conditional Monitoring - Not Required This Period				
X 74055	**Coliform, fecal general**	1 - Effluent Gross	0	--	Sample								=	121.0	=	1281.0	13 - #/100mL		01/30 - Monthly	GR - Grab
					Permit Req.								<=	200.0 30DA GEO	<=	400.0 7 DA GEO	13 - #/100mL	1	01/30 - Monthly	GR - Grab

Value NODI

Submission Note

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

Edit Check Errors

Parameter		Monitoring Location	Field	Type	Description	Acknowledge
Code	Name					
74055	Coliform, fecal general	1 - Effluent Gross	Quality or Concentration Sample Value 3	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.	Yes
00011	Temperature, water deg. fahrenheit	1 - Effluent Gross	Quality or Concentration Sample Value 3	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.	Yes

Comments

Attachments

Name	Type	Size
102025VillageofRedHookWWFORsRoNE.xlsx	xlsx	408034.0

Report Last Saved By

VILLAGE OF RED HOOK

User:	COONJ1974
Name:	Leslie Coon
E-Mail:	lcoon@jcoinc.org
Date/Time:	2025-11-28 16:10 (Time Zone: -05:00)

Report Last Signed By

User:	COONJ1974
Name:	Leslie Coon
E-Mail:	lcoon@jcoinc.org
Date/Time:	2025-11-28 16:10 (Time Zone: -05:00)