Form Approved OMB No. 2040-0004 expires on 07/31/2026 **DMR Copy of Record**

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.

This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control No. 2040-0004). Responses to this collection of information are mandatory in accordance with this permit and EPA NPDES regulations 40 CFR 122.41(I)(4)(i). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The public reporting and recordkeeping burden for this collection of information are estimated to average 2 hours per outfall. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates and any suggested methods for minimizing respondent burden to the Regulatory Support Division Director, U.S. Environmental Protection Agency (2821T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

Permit

Major:

Permit #: IL0021547 Permittee: **Permittee Address:**

DMR Due Date:

GLENBARD WASTEWATER AUTHORITY

Facility:

GLENBARD WASTEWATER AUTHORITY - MAIN WWTP

945 BEMIS ROAD GLEN ELLYN, IL 60137 **Facility Location:** 945 BEMIS ROAD

GLEN ELLYN, IL 60137

Permitted Feature:

Streicher

Yes

Discharge: External Outfall

001-0

STP OUTFALL

Report Dates & Status

Monitoring Period: From 08/01/25 to 08/31/25 09/25/25

Status:

NetDMR Validated

Considerations for Form Completion

W0430600002; DMF LOAD LIMITS DISPLAYED.

Principal Executive Officer

First Name: Matt Title:

Executive Director

Telephone:

630-790-1901

No Data Indicator (NODI)

Last Name:

Form NODI:

	Parameter	Monitoring	Season	n Param. NODI	Quantity or Loading									Qua	# of	Frequency of Analysis	Sample Type			
Code	Name	Location	#			Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units	Ex.		
	Temperature, water deg. fahrenheit	1 - Effluent Gross	0		Sample										=	73.3	15 - deg F		01/30 - Monthly	GR - Grab
00011					Permit Req.											Req Mon MO MAX	15 - deg F	F 0	01/30 - Monthly	GR - Grab
					Value NODI															
	Oxygen, dissolved [DO]	1 - Effluent Gross	1		Sample						=	8.52	=	8.3	=	8.02	19 - mg/L		02/DA - 2 Days Every Week	GR - Grab
00300					Permit Req.						>=	5.5 MO AV MN	>=	4.0 MN WK AV	>=	3.5 DAILY MN	19 - mg/L	0	02/DA - 2 Days Every Week	GR - Grab
					Value NODI															
00400	рН	1 - Effluent Gross	0		Sample						=	6.11			=	7.06	12 - SU		02/DA - 2 Days Every Week	GR - Grab
					Permit Req.						>=	6.0 MINIMUM			<=	9.0 MAXIMUM	12 - SU	0	02/DA - 2 Days Every Week	GR - Grab
					Value NODI															
00410	Alkalinity, total [as CaCO3]	1 - Effluent Gross	0		Sample										=	96.0	19 - mg/L		01/30 - Monthly	GR - Grab
					Permit Req.											Req Mon DAILY MX	19 - mg/L		01/30 - Monthly	GR - Grab
					Value NODI															
00530	Solids, total suspended	1 - Effluent Gross	0		Sample	=	230.73	= ;	384.31	26 - lb/d			=	2.25	=	3.6	19 - mg/L		02/DA - 2 Days Every Week	CP - Composite
					Permit Req.	<=	4704.0 MO AVG	<= !	9408.0 DAILY MX	26 - lb/d			<=	12.0 MO AVG	<=	24.0 DAILY MX	19 - mg/L		02/DA - 2 Days Every Week	CP - Composite
					Value NODI															
00600	Nitrogen, total [as N]	1 - Effluent Gross	0		Sample										=	27.0	19 - mg/L	0	01/30 - Monthly	CP - Composite
					Permit Req.											Req Mon DAILY MX	19 - mg/L		01/30 - Monthly	CP - Composite
					Value NODI															
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	0		Sample	=	5.44	=	17.2	26 - lb/d			=	0.05	=	0.1	19 - mg/L		02/DA - 2 Days Every Week	CP - Composite
					Permit Req.	<=	588.0 MO AVG	<=	1176.0 DAILY MX	26 - Ib/d			<=	1.5 MO AVG	<=	3.0 DAILY MX	19 - mg/L		02/DA - 2 Days Every Week	CP - Composite
					Value															20
					Value NODI															

					Sample											
00625	Nitrogen, Kjeldahl, total [as N]	1 - Effluent	0		Permit Req.							Req Mon DAILY MX	19 - mg/L		01/30 - Monthly	CP - Composite
00020	ma egon, rijerdam, tetar [ae ri]	Gross			Value							B - Below Detection Limit/No				Composite
					NODI							Detection Detection				
					Sample						=	27.0	19 - mg/L		01/30 - Monthly	CP -
	Nitrite + Nitrate total [as N]	1 - Effluent Gross	0		Permit										-	Composite CP -
00630					Req.							Req Mon DAILY MX	19 - mg/L	0	01/30 - Monthly	Composite
					Value NODI											
	Phosphorus, total [as P]	1 - Effluent Gross	0		Sample				_	2.38		3.68	19 - mg/L		01/07 - Weekly	CP -
00665					Permit						Req Mon MO				-	Composite CP -
					Req.					AVG	WOT WE	Req Mon DAILY MX	19 - mg/L	0	01/07 - Weekly	Composite
					Value NODI											
					Sample							2.44	19 - mg/L		01/30 - Monthly	CP -
00666	Phosphorus, dissolved	1 - Effluent Gross	0		Permit										-	Composite CP -
					Req.							Req Mon DAILY MX	19 - mg/L	0	01/30 - Monthly	Composite
					Value NODI											
00940	Chloride [as CI]	1 - Effluent Gross	0		Sample						=	120.0	19 - mg/L		01/30 - Monthly	GR - Grab
					Permit Req.							Req Mon DAILY MX	19 - mg/L	0	01/30 - Monthly	GR - Grab
					Value											
					NODI								22 24		00/DA 0.D. F. W. I	00 0 1
30500	Coliform, fecal - % samples exceeding limit	1 - Effluent Gross	0		Sample Permit						=	0.0	23 - %		02/DA - 2 Days Every Week	GR - Grab
					Req.						<=	10.0 MAXIMUM	23 - %	0	02/DA - 2 Days Every Week	GR - Grab
					Value NODI											
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0		Sample =	11.07 =	30.48	03 -							99/99 - Continuous	
					Permit	Req Mon MO		MGD 03 -						+_		
					Req.	AVG	MX	MGD						0	99/99 - Continuous	
					Value NODI											
					Sample						=	0.0	19 - mg/L		CL/OC -	GR - Grab
50060	Chlorine, total residual	1 - Effluent Gross			Permit										Chlorination/Occurances CL/OC -	
			0		Req.						<=	0.038 DAILY MX	19 - mg/L (0	Chlorination/Occurances	GR - Grab
					Value NODI											
74055	Coliform, fecal general	1 - Effluent Gross	0		Sample				=	8.42	.42 = 244.0	244.0	13 - #/100mL		02/DA - 2 Days Every Week	GR - Grab
					Permit					<= 200.0 GEO ME	O O E O MEAN	Req Mon DAILY MX				OD O
					Req.				<=		200.0 GEO MEAN	Red Mon DAILY MX	13 - #/100mL		02/DA - 2 Days Every Week	GR - Grab
					Value NODI											
								00 11-7-1		2.70		0.4	40 "		02/DA 2 Davis Every Week	CP -
					Sample =	329.88 =	1049.02	26 - lb/d	_	2.78	=	6.1	19 - mg/L		02/DA - 2 Days Every Week	Composito
00000	DOD contrarectory (5 days 00 0)	1 - Effluent			Permit								19 - mg/L	_	02/DA - 2 Days Every Week	Composite CP -
80082	BOD, carbonaceous [5 day, 20 C]	1 - Effluent Gross	0		Sample = Permit <= Req. Value	329.88 = 3920.0 MO AVG <=	7840.0 DAILY MX		<=		MO AVG <=	20.0 DAILY MX	19 - mg/L	0	02/DA - 2 Days Every Week	Composite CP - Composite

Submission Note

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

Edit Check Errors

No errors.

Comments

Attachments

No attachments.

Report Last Saved By

GLENBARD WASTEWATER AUTHORITY

User: MAMCGRATH
Name: Micaela McGrath
E-Mail: mmcgrath@gbww.org

Date/Time: 2025-09-17 09:03 (Time Zone: -05:00)

Report Last Signed By

User: MAMCGRATH

 Name:
 Micaela McGrath

 E-Mail:
 mmcgrath@gbww.org

 Date/Time:
 2025-09-17 09:04 (Time Zone: -05:00)