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 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 <a href="https://www.npde.com/npack-new-npack-

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Permit Permit #: MA0000787 Permittee: MASSPORT AUTHORITY - LOGAN Facility: LOGAN INTERNATIONAL AIRPORT Major: No **Permittee Address:** ONE HARBORSIDE DV., SUITE 200S **Facility Location:** ONE HARBORSIDE DRIVE, SUITE 200S BOSTON, MA 02128-2909 BOSTON, MA 02128 08B **Permitted Feature:** Discharge: 08B-A **External Outfall** AIRFIELD A8 INDUSTRIAL STORMWATER PAVEMENT/RUNWAY DEICING Report Dates & Status **DMR Due Date: Monitoring Period:** From 02/01/25 to 02/28/25 03/15/25 Status: **NetDMR Validated Considerations for Form Completion** Principal Executive Officer First Name: Title: Telephone: **Last Name:** No Data Indicator (NODI) Form NODI:

	Parameter	Monitoring Location	Season #	Param. NODI			Quantity or Loadin	g			(Quality or Concentration		# of Ex.	. Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	/alue 1 Qualifier 2	Value 2 U	nits Qualifier 1 Value 1 Quali	ier 2 Value 2	Qualifier 3	Value 3	Units			
					Sample						=	15.58	19 - mg/L		03/SN - Three Per Season	GR - Grab
00300	Oxygen, dissolved [DO]	1 - Effluent Gross	0		Permit Req.							Req Mon DAILY MX	19 - mg/L		03/SN - Three Per Season	GR - Grab
	exygen, alecented [50]	. Lindoin Gross			Value NODI											
					Sample						<	2.0	19 - mg/L		03/SN - Three Per Season	GR - Grab
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0		Permit Req.							Req Mon DAILY MX	19 - mg/L		03/SN - Three Per Season	GR - Grab
333.0		. Lindoin Gross			Value NODI											
					Sample											
51568	Nonylphenol	1 - Effluent Gross	0		Permit Req.							Req Mon DAILY MX	28 - ug/L		01/SN - Once Per Season	GR - Grab
					Value NODI							9 - Conditional Monitoring - Not Required This Period				
					Sample						<	2.0	19 - mg/L		03/SN - Three Per Season	GR - Grab
61163	Propylene glycol, total	1 - Effluent Gross	0		Permit Req.							Req Mon DAILY MX	19 - mg/L		03/SN - Three Per Season	GR - Grab
	J. J				Value NODI											
					Sample						<	20.0	19 - mg/L		03/SN - Three Per Season	GR - Grab
81017	Chemical Oxygen Demand [COD]	1 - Effluent Gross	0		Permit Req.							Req Mon DAILY MX	19 - mg/L		03/SN - Three Per Season	GR - Grab
	,				Value NODI											
					Sample						<	1000.0	28 - ug/L		03/SN - Three Per Season	GR - Grab
85813	Tolytriazole	1 - Effluent Gross	0		Permit Req.							Req Mon DAILY MX	28 - ug/L		03/SN - Three Per Season	GR - Grab
	, , , , , , , ,				Value NODI											

Submission Note

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Edit Check Errors

No errors.

Comments

Please see the February 2025 monthly sampling report attached to 01A-A - NORTH OUTFALL 01A TO WINTHROP BAY.

Attachments

No attachments.

Report Last Saved By

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Permit #:	MA0000787			Permittee	:		MASSPORT	Γ AUTHORITY - LC	GAN			Facili	ity:	LOGA	N INTERNATIONA	AL AIRPO	ORT	
Major:	No			Permittee	Address:			ORSIDE DV., SUIT IA 02128-2909	TE 200S			Facil	ty Location:		IARBORSIDE DRI DN, MA 02128	IVE, SUI	TE 200S	
Permitted Feature:	01A External Outfall			Discharge	e :		01A-A NORTH OU	TFALL 01A TO WI	NTHROP I	BAY								
Report Dates & Status																		
Monitoring Period:	From 02/01/25 to 02/2	28/25		DMR Due	Date:		03/15/25					Statu	s:	NetDM	IR Validated			
Considerations for Form Compl	etion			·								·						
Principal Executive Officer																		
First Name:			Title:								Telep	hone:						
Last Name:	W (ALODI)											•						
No Data Indicator (NODI)				•														
Form NODI:																		
Parameter	Monitoring Location	Season #	Param. NODI			Q	uantity or Loa	ading				Qual	ity or Concentration			# of E	x. Frequency of Analysis	s Sample Type
Code Name					Qualifier 1	Value 1	Qualifier 2		Units		Value 1	Qualifier 2	Value 2 Qualifier 3	Value 3	Units			
	. ====			Sample Permit Reg.		.928 eq Mon MO AVG	=	3.876 Reg Mon DAILY MX	03 - MGD 03 - MGD								01/30 - Monthly 01/30 - Monthly	ES - Estimate ES - Estimate
00056 Flow rate	1 - Effluent Gross	0		Value NODI		oq mon mo / tv o		Troq Mon Brile 1 Mix	00 1000								o noo monany	20 Edimato
				Sample						=	7.52		=	7.52	12 - SU		01/30 - Monthly	GR - Grab
00400 pH	1 - Effluent Gross	0		Permit Req.						>=	6.0 MINIMUM		<=	8.5 MAXIMUM	12 - SU		01/30 - Monthly	GR - Grab
				Value NODI														
				Sample						=	33.0		=	33.0	19 - mg/L		01/30 - Monthly	GR - Grab
00530 Solids, total suspended	1 - Effluent Gross	0		Permit Req.							Req Mon MO AVG		<=	100.0 DAILY MX	19 - mg/L	_	01/30 - Monthly	GR - Grab
				Value NODI														
				Sample									<	4.0	19 - mg/L		01/30 - Monthly	GR - Grab
00556 Oil & Grease	1 - Effluent Gross	0		Permit Req.									<=	15.0 DAILY MX	19 - mg/L		01/30 - Monthly	GR - Grab

Req Mon MO AVG

Req Mon MOAV GEO

Req Mon MOAV GEO

110.0

80.0

01/30 - Monthly

28 - ug/L

3Z - CFU/100mL

3Z - CFU/100mL

Req Mon DAILY MX 28 - ug/L

Req Mon DAILY MX 3Z - CFU/100mL

Req Mon DAILY MX 3Z - CFU/100mL

110.0

80.0

GR - Grab

Submission Note

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Value NODI

Sample

Permit Req.

Value NODI

Sample

Permit Req.

Value NODI Sample

Permit Req.

Value NODI

Edit Check Errors

No errors.

34030

74055

Benzene

Coliform, fecal general

61211 Enterococci

1 - Effluent Gross

1 - Effluent Gross

1 - Effluent Gross

0

Permit

Comments

Attachments

DMR Copy of Record

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Facility:

9 - Conditional Monitoring - Not Required This Period

LOGAN INTERNATIONAL AIRPORT

MASSPORT AUTHORITY - LOGAN

Major:	No)		Pe	ermittee Ad	dress:		ORSIDE DV., SUIT IA 02128-2909	E 200S			Facility Location:	ONE HARBORS BOSTON, MA (/E, SUIT	E 200S	
Permit	ted Feature: 01	B ternal Outfall		Di	scharge:		01B-A DEICING EF	PISODES NORTH	OUTFALL	01B							
Report	t Dates & Status																
Monito	oring Period: Fr	om 02/01/25 to 02/28/25		DI	MR Due Dat	e:	03/15/25					Status:	NetDMR Valida	ited			
Consid	derations for Form Completio	n										1					
	pal Executive Officer																
First N	lame:			Ti	tle:							Telephone:					
Last N	ame:																
No Da	ta Indicator (NODI)																
Form I	NODI:																
	Parameter	Monitoring Location	Season	# Param. NOI	DI		Quantity or Loadir					Quality or Concentration			# of Ex.	Frequency of Analysis	Sample Type
Code	Name				0 1	Qualifier 1 Value 1				Value 1 Qualif	ier 2 Value 2 Qualifier 3	3 Value	3	Units		04/00 14	F0 F :: .
00050		4. 5#	0		Sample Permit Req		= 3.876 Reg Mor	03 - MGI DAILY MX 03 - MGI								01/30 - Monthly 01/30 - Monthly	ES - Estimate ES - Estimate
00056	Flow rate	1 - Effluent Gross	0		Value NOD		104										
					Sample						=	10.55		19 - mg/L		01/30 - Monthly	GR - Grab
00300	Oxygen, dissolved [DO]	1 - Effluent Gross	0		Permit Req							Req Mon DAILY MX		19 - mg/L		01/30 - Monthly	GR - Grab
00300	Oxygen, dissolved [DO]	1 - Lindelli Gioss	0		Value NOD	ı											
					Sample						=	1700.0		19 - mg/L	_	01/30 - Monthly	GR - Grab
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0		Permit Req							Req Mon DAILY MX		19 - mg/L	-	01/30 - Monthly	GR - Grab
					Value NOD	ı											
					Sample		= 54989.0									01/30 - Monthly	CA - Calculated
00310	BOD, 5-day, 20 deg. C	EG - Effluent Gross	0		Permit Req		Req Mor	DAILY MX 26 - lb/d								01/30 - Monthly	CA - Calculated
					Value NOD	I											
					Sample									"			22.0
51568	Nonylphenol	1 - Effluent Gross	0		Permit Req							Req Mon DAILY MX		28 - ug/L		01/SN - Once Per Season	GR - Grab
					Value NOD	I						9 - Conditional Monitoring - No	t Required This Period				
					Sample						=	1340.0		19 - mg/L		· · · · · · · · · · · · · · · · · · ·	GR - Grab
61163	Propylene glycol, total	1 - Effluent Gross	0		Permit Req							Req Mon DAILY MX		19 - mg/L	-	01/30 - Monthly	GR - Grab
					Value NOD												
					Sample Permit Req						=	6000.0 Reg Mon DAILY MX		19 - mg/L 19 - mg/L		01/30 - Monthly 01/30 - Monthly	GR - Grab GR - Grab
81017	Chemical Oxygen Demand [Co	1 - Effluent Gross	0		Value NOD							Red MOLL DAILT MIX		19 - 111g/L	-	01/30 - World lly	GK - Glab
						•	= 194080.0) 26 - lb/d								04/00 Marrible	CA - Calculated
04047	01	DDI	0		Sample Permit Req			D DAILY MX 26 - lb/d								01/30 - Monthly 01/30 - Monthly	CA - Calculated
81017	Chemical Oxygen Demand [Co	EG - Effluent Gross	U		Value NOD											,	, ,
					Sample												
85813	Tolytriazole	1 - Effluent Gross	0		Permit Req							Req Mon DAILY MX		28 - ug/L		03/SN - Three Per Season	GR - Grab

Submission Note

Permit #:

MA0000787

Permittee:

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Value NODI

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Permit Facility: Permit #: MA0000787 Permittee: MASSPORT AUTHORITY - LOGAN LOGAN INTERNATIONAL AIRPORT Major: No **Permittee Address:** ONE HARBORSIDE DV., SUITE 200S **Facility Location:** ONE HARBORSIDE DRIVE, SUITE 200S BOSTON, MA 02128-2909 BOSTON, MA 02128 **Permitted Feature:** 01D Discharge: 01D-A **External Outfall** STORMWATER ASSOCIATED WITH INDUSTRIAL ACTIVITY OUTFALL 01D Report Dates & Status **DMR Due Date: Monitoring Period:** From 02/01/25 to 02/28/25 03/15/25 Status: **NetDMR Validated Considerations for Form Completion Principal Executive Officer** Telephone: First Name: Title: **Last Name:** No Data Indicator (NODI) Form NODI:

	Parameter	Monitoring Location	Season #	Param. NODI			Qι	uantity or Lo	ading				Quality o	or Concer	itration			# 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		
					Sample	=	42.0	=	42.0	8D - gal/mo								01/30 - Monthly	ES - Estimate
00056	Flow rate	1 - Effluent Gross	0		Permit Req.		Req Mon MO TOTAL		Req Mon DAILY MX	8D - gal/mo								01/30 - Monthly	ES - Estimate
00000	1 low rate	1 Zilidolik Gross			Value NODI														
					Sample						=	5.45			=	5.45	12 - SU	01/30 - Monthly	GR - Grab
00400	рН	1 - Effluent Gross	0		Permit Req.							Req Mon MO TOTAL				Req Mon DAILY MX	12 - SU	01/30 - Monthly	GR - Grab
00400	pi.	1 Emacin Gross			Value NODI														
					Sample						<	0.001			=	5.0	19 - mg/L	01/30 - Monthly	GR - Grab
00530	Solids, total suspended	1 - Effluent Gross	0		Permit Req.							Req Mon MO TOTAL			<=	100.0 DAILY MX	19 - mg/L	01/30 - Monthly	GR - Grab
00000	condo, total odopondod	1 Zilidolik Gross			Value NODI														
					Sample										<	0.001	19 - mg/L	01/30 - Monthly	GR - Grab
00556	Oil & Grease	1 - Effluent Gross	0		Permit Req.										<=	15.0 DAILY MX	19 - mg/L	01/30 - Monthly	GR - Grab
00000	on a croaco	. Emdon Grood	Ŭ		Value NODI														
					Sample						<	0.001			<	0.001	19 - mg/L	01/30 - Monthly	GR - Grab
34030	Benzene	1 - Effluent Gross	0		Permit Req.							Req Mon MO TOTAL				Req Mon DAILY MX	19 - mg/L	01/30 - Monthly	GR - Grab
J-1030	Bonzono	i Emacin 01033			Value NODI														

Submission Note

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Edit Check Errors

No errors.

Comments

Attachments

Name	Туре	Size
FSM_February_DMR.pdf	pdf	349730.0

Report Last Saved By

MASSPORT AUTHORITY - LOGAN

User: SARAHRAY

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Permit Permit #: MA0000787 Permittee: MASSPORT AUTHORITY - LOGAN Facility: LOGAN INTERNATIONAL AIRPORT Major: No **Permittee Address:** ONE HARBORSIDE DV., SUITE 200S **Facility Location:** ONE HARBORSIDE DRIVE, SUITE 200S BOSTON, MA 02128-2909 BOSTON, MA 02128 **Permitted Feature:** 01E Discharge: 01E-A **External Outfall** STORMWATER ASSOCIATED WITH INDUSTRIAL ACTIVITY OUTFALL 01E Report Dates & Status DMR Due Date: **Monitoring Period:** From 02/01/25 to 02/28/25 03/15/25 Status: **NetDMR Validated Considerations for Form Completion Principal Executive Officer First Name:** Title: Telephone: **Last Name:** No Data Indicator (NODI) Form NODI:

	Parameter	Monitoring Location	Season #	Param. NODI			Qı	uantity or Lo	ading				Quality or	Concen	tration			# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	/alue 2	Qualifier 3	Value 3	Units			
					Sample	=	42.0	=	42.0	8D - gal/mo								(01/30 - Monthly	ES - Estimate
00056	Flow rate	1 - Effluent Gross	0		Permit Req.		Req Mon MO TOTAL		Req Mon DAILY MX	8D - gal/mo								(01/30 - Monthly	ES - Estimate
					Value NODI															
					Sample						=	5.18			= 5.1	8	12 - SU	(01/30 - Monthly	GR - Grab
00400	pH	1 - Effluent Gross	0		Permit Req.							Req Mon MO TOTAL			Re	q Mon DAILY MX	12 - SU	(01/30 - Monthly	GR - Grab
	P				Value NODI															
					Sample						=	10.0			= 10.	.0	19 - mg/L	(01/30 - Monthly	GR - Grab
00530	Solids, total suspended	1 - Effluent Gross	0		Permit Req.							Req Mon MO TOTAL			<= 100	0.0 DAILY MX	19 - mg/L	(01/30 - Monthly	GR - Grab
	,,				Value NODI															
					Sample										< 0.0	001	19 - mg/L	(01/30 - Monthly	GR - Grab
00556	Oil & Grease	1 - Effluent Gross	0		Permit Req.										<= 15.	.0 DAILY MX	19 - mg/L	(01/30 - Monthly	GR - Grab
00000	on a oroaco	1 Emaoni Gross			Value NODI															
					Sample						<	0.001			< 0.0	001	19 - mg/L	(01/30 - Monthly	GR - Grab
34030	Benzene	1 - Effluent Gross	0		Permit Req.							Req Mon MO TOTAL			Re	q Mon DAILY MX	19 - mg/L	(01/30 - Monthly	GR - Grab
					Value NODI															

Submission Note

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Edit Check Errors

No errors.

Comments

Attachments

NameTypeSizeFSM_February_DMR.pdf349730.0

Report Last Saved By

MASSPORT AUTHORITY - LOGAN

User: SARAHRAY

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Permit #:	MA0000787	Permittee:	MASSPORT AUTHORITY - LOGAN	Facility:	LOGAN INTERNATIONAL AIRPORT
Major:	No	Permittee Address:	ONE HARBORSIDE DV., SUITE 200S BOSTON, MA 02128-2909	Facility Location:	ONE HARBORSIDE DRIVE, SUITE 200S BOSTON, MA 02128
Permitted Feature:	02A External Outfall	Discharge:	02A-A WEST OUTFALL 02A		
Report Dates & Status					
Monitoring Period:	From 02/01/25 to 02/28/25	DMR Due Date:	03/15/25	Status:	NetDMR Validated
Considerations for Form Comple	etion				
Principal Executive Officer					
First Name:		Title:		Telephone:	
Last Name:					
No Data Indicator (NODI)					

	Parameter	Monitoring Location	Season #	Param. NODI			Q	uantity or Loa	ding				Quality or Cor	ncentration			# 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			
					Sample	= 1.	434	=	18.659	03 - MGD								01/30 - Monthly	ES - Estimate
00056	Flow rate	1 - Effluent Gross	0		Permit Req.	R	eq Mon MO AVG		Req Mon DAILY MX	03 - MGD								01/30 - Monthly	ES - Estimate
					Value NODI														
					Sample						=	7.43		=	7.43	12 - SU		01/30 - Monthly	GR - Grab
00400	pH	1 - Effluent Gross	0		Permit Req.						>=	6.0 MINIMUM		<=	8.5 MAXIMUM	12 - SU		01/30 - Monthly	GR - Grab
	P**				Value NODI														
					Sample						=	18.0		=	18.0	19 - mg/L		01/30 - Monthly	GR - Grab
00530	Solids, total suspended	1 - Effluent Gross	0		Permit Req.							Req Mon MO AVG		<=	100.0 DAILY MX	19 - mg/L		01/30 - Monthly	GR - Grab
00000	conac, total cacponaca	. Emdon Grood			Value NODI														
					Sample									<	4.0	19 - mg/L		01/30 - Monthly	GR - Grab
00556	Oil & Grease	1 - Effluent Gross	0		Permit Req.									<=	15.0 DAILY MX	19 - mg/L		01/30 - Monthly	GR - Grab
00000	on a ordass	1 Zimacini Greec			Value NODI														
					Sample						=	130.0		=	130.0	3Z - CFU/100mL		01/30 - Monthly	GR - Grab
61211	Enterococci	1 - Effluent Gross	0		Permit Req.							Req Mon MOAV GEO			Req Mon DAILY MX	3Z - CFU/100mL		01/30 - Monthly	GR - Grab
0.2					Value NODI														
					Sample						=	3500.0		=	3500.0	30 - MPN/100mL		01/30 - Monthly	GR - Grab
74055	Coliform, fecal general	1 - Effluent Gross	0		Permit Req.							Req Mon MOAV GEO			Req Mon DAILY MX	30 - MPN/100mL		01/30 - Monthly	GR - Grab
556					Value NODI														

Submission Note

Form NODI:

Edit Check Errors

No errors.

Comments

Please see the February 2025 monthly sampling report attached to 01A-A - NORTH OUTFALL 01A TO WINTHROP BAY.

Attachments

No attachments.

Report Last Saved By

MASSPORT AUTHORITY - LOGAN

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.

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 non-business email address), confidential business information (e.g., non-business cell phone number or non

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MASSPORT AUTHORITY - LOGAN

Facility:

Req Mon DAILY MX

9 - Conditional Monitoring - Not Required This Period

LOGAN INTERNATIONAL AIRPORT

03/SN - Three Per Season GR - Grab

28 - ug/L

Major:	٨	0			Perr	mittee Ac	ldress:		IE HARBORSIDE STON, MA 02128		TE 200S	3			HARBORSIDE DRIVI ON, MA 02128	E, SUITI	E 200S	
Permit		2B xternal Outfall			Disc	charge:		02 E	B-A CICING EPISODES	S WEST C	OUTFALI	L 02B						
Report	t Dates & Status			,														
Monito	oring Period:	rom 02/01/25 to 02/28/25			DMF	R Due Da	ite:	03/	15/25					Status: NetDM	/IR Validated			
	derations for Form Completic	on			ļ													
Princip	pal Executive Officer																	
First N					Title	e:								Telephone:				
Last Na																		
	ta Indicator (NODI)																	
Form N																		
FOITH	Parameter	Monitoring Location	Seaso	n # Param. N	IODI			Quantity	or Loading					Quality or Concentration		# of Ex.	Frequency of Analysis	Sample Type
Code	Name	monitoring Location	Couco	ni ni ci circini i v			Qualifier 1 Value 1			Units	Qualifie	er 1 Value 1 Qualifie	r 2 Value 2 Qualifier 3		Units	" OI EX	requestey of ranalysis	Campio Typo
						Sample		=	18.659	03 - MGD							01/30 - Monthly	ES - Estimate
00056	Flow rate	1 - Effluent Gross	0		F	Permit Req			Req Mon DAILY MX	03 - MGD							01/30 - Monthly	ES - Estimate
					١	Value NOD	1											
						Sample							=	3.46	19 - mg/L		01/30 - Monthly	GR - Grab
00300	Oxygen, dissolved [DO]	1 - Effluent Gross	0			Permit Req								Req Mon DAILY MX	19 - mg/L		01/30 - Monthly	GR - Grab
					١	Value NOD	1											
						Sample							=	2200.0	19 - mg/L		01/30 - Monthly	GR - Grab
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0			Permit Req								Req Mon DAILY MX	19 - mg/L		01/30 - Monthly	GR - Grab
					١	Value NOD	1											
						Sample		=	342577.0	26 - lb/d							01/30 - Monthly	CA - Calculated
00310	BOD, 5-day, 20 deg. C	EG - Effluent Gross	0			Permit Req			Req Mon DAILY MX	26 - lb/d							01/30 - Monthly	CA - Calculated
					١	Value NOD	1											
					_	Sample								Day May DAH VANV	00//		04/0N	OD Orah
51568	Nonylphenol	1 - Effluent Gross	0			Permit Req								Req Mon DAILY MX	28 - ug/L		01/SN - Once Per Season	GR - Grab
					\	Value NOD	1							9 - Conditional Monitoring - Not Required This				
						Sample							=	1750.0	19 - mg/L		01/30 - Monthly	GR - Grab
61163	Propylene glycol, total	1 - Effluent Gross	0			Permit Req								Req Mon DAILY MX	19 - mg/L		01/30 - Monthly	GR - Grab
					١	Value NOD	1											
						Sample							=	3400.0	19 - mg/L		01/30 - Monthly	GR - Grab
81017	Chemical Oxygen Demand [C	OD] 1 - Effluent Gross	0			Permit Req								Req Mon DAILY MX	19 - mg/L		01/30 - Monthly	GR - Grab
					\	Value NOD	1											
						Sample		=	529437.0	26 - lb/d							01/30 - Monthly	CA - Calculated
81017	Chemical Oxygen Demand [C	OD] EG - Effluent Gross	0			Permit Req			Req Mon DAILY MX	26 - Ib/d							01/30 - Monthly	CA - Calculated
					\	Value NOD												

Submission Note

85813 Tolytriazole

Permit

Permit #:

MA0000787

Permittee:

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.

Permit Req.

Value NODI

1 - Effluent Gross

0

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remin					
Permit #:	MA0000787	Permittee:	MASSPORT AUTHORITY - LOGAN	Facility:	LOGAN INTERNATIONAL AIRPORT
Major:	No	Permittee Address:	ONE HARBORSIDE DV., SUITE 200S BOSTON, MA 02128-2909	Facility Location:	ONE HARBORSIDE DRIVE, SUITE 200S BOSTON, MA 02128
	03A External Outfall	Discharge:	03A-A OUTFALL 03A PORTER ST TO BOSTON INNER HARBOR		
Report Dates & Status					
Monitoring Period:	From 02/01/25 to 02/28/25	DMR Due Date:	03/15/25	Status:	NetDMR Validated
Considerations for Form Comp	pletion				
Principal Executive Officer					
First Name:		Title:		Telephone:	
Last Name:					

	Parameter	Monitoring Location	Season #	Param. NODI			Q	uantity or Loa	ading				Quality or Cor	ncentration			# 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			
					Sample	= 0	.222	=	2.406	03 - MGD								01/30 - Monthly	ES - Estimate
00056	Flow rate	1 - Effluent Gross	0		Permit Req.	R	Req Mon MO AVG		Req Mon DAILY MX	03 - MGD								01/30 - Monthly	ES - Estimate
					Value NODI														
					Sample						=	8.05		=	8.05	12 - SU		01/30 - Monthly	GR - Grab
00400	pH	1 - Effluent Gross	0		Permit Req.						>=	6.0 MINIMUM		<=	8.5 MAXIMUM	12 - SU		01/30 - Monthly	GR - Grab
	P**				Value NODI														
					Sample						-	57.0		=	57.0	19 - mg/L		01/30 - Monthly	GR - Grab
00530	Solids, total suspended	1 - Effluent Gross	0		Permit Req.							Req Mon MO AVG		<=	100.0 DAILY MX	19 - mg/L		01/30 - Monthly	GR - Grab
00000	conac, total cacponaca	. Lindon Grood			Value NODI														
					Sample									<	4.0	19 - mg/L		01/30 - Monthly	GR - Grab
00556	Oil & Grease	1 - Effluent Gross	0		Permit Req.									<=	15.0 DAILY MX	19 - mg/L		01/30 - Monthly	GR - Grab
00000	on a ordass	1 Emacin Cross			Value NODI														
					Sample						=	230.0		=	230.0	3Z - CFU/100mL		01/30 - Monthly	GR - Grab
61211	Enterococci	1 - Effluent Gross	0		Permit Req.							Req Mon MOAV GEO			Req Mon DAILY MX	3Z - CFU/100mL		01/30 - Monthly	GR - Grab
0.2					Value NODI														
					Sample						=	1100.0		=	1100.0	30 - MPN/100mL		01/30 - Monthly	GR - Grab
74055	Coliform, fecal general	1 - Effluent Gross	0		Permit Req.							Req Mon MOAV GEO			Req Mon DAILY MX	30 - MPN/100mL		01/30 - Monthly	GR - Grab
555					Value NODI														

Submission Note

No Data Indicator (NODI)

Form NODI:

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Edit Check Errors

No errors.

Comments

Please see the February 2025 monthly sampling report attached to 01A-A - NORTH OUTFALL 01A TO WINTHROP BAY.

Attachments

No attachments.

Report Last Saved By

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Permit								
Permit #:	MA0000787	Permittee:	MASSPORT AUTHORITY - LOGAN		Facility:	LOGAN INTERNATIONA	L AIRPORT	
Major:	No	Permittee Address:	ONE HARBORSIDE DV., SUITE 200S BOSTON, MA 02128-2909		Facility Location:	ONE HARBORSIDE DRI' BOSTON, MA 02128	VE, SUITE 200S	
Permitted Feature:	03B External Outfall	Discharge:	03B-A INDUSTRIAL STORMWATER PAVEMENT/RUNWAY DEICING OUTFALL 03B					
Report Dates & Status	s	•						
Monitoring Period:	From 02/01/25 to 02/28/25	DMR Due Date:	03/15/25		Status:	NetDMR Validated		
Considerations for Fo	orm Completion							
Principal Executive O	Officer							
First Name:		Title:			Telephone:			
Last Name:				·				
No Data Indicator (NC	וסס)	•						
Form NODI:								
Para	ameter Monitoring Locat	on Season # Param. NODI	Quantity or Loading	Quality or Concentration		# of Ex.	Frequency of Analysis	Sample Typ

	Parameter Monitoring Location		Season #	Param. NODI		Quantity or Loading					(Quality or Concentration			. 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			
	Oxygen, dissolved [DO]		0		Sample					_	=	21.51	19 - mg/L		03/SN - Three Per Season	GR - Grab
00300		1 - Effluent Gross			Permit Req.							Req Mon DAILY MX	19 - mg/L		03/SN - Three Per Season	GR - Grab
					Value NODI											
					Sample					-	=	1700.0	19 - mg/L		03/SN - Three Per Season	GR - Grab
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0		Permit Req.							Req Mon DAILY MX	19 - mg/L		03/SN - Three Per Season	GR - Grab
000.0		. Imagin cross			Value NODI											
	Nonylphenol	1 - Effluent Gross			Sample											
51568			0		Permit Req.							Req Mon DAILY MX	28 - ug/L		01/SN - Once Per Season	GR - Grab
0.000					Value NODI							9 - Conditional Monitoring - Not Required This Period				
		1 - Effluent Gross	0		Sample					-	=	4490.0	19 - mg/L		03/SN - Three Per Season	GR - Grab
61163	Propylene glycol, total				Permit Req.							Req Mon DAILY MX	19 - mg/L		03/SN - Three Per Season	GR - Grab
000	. replicite gifted, colum				Value NODI											
					Sample					-	=	6000.0	19 - mg/L		03/SN - Three Per Season	GR - Grab
81017	Chemical Oxygen Demand [COD]	1 - Effluent Gross	0		Permit Req.							Req Mon DAILY MX	19 - mg/L		03/SN - Three Per Season	GR - Grab
0.0					Value NODI											
					Sample					<	<	1000.0	28 - ug/L		03/SN - Three Per Season	GR - Grab
85813	Tolytriazole	1 - Effluent Gross	0		Permit Req.							Req Mon DAILY MX	28 - ug/L		03/SN - Three Per Season	GR - Grab
555.15	1 Olyti iazoic	Lindent Gross			Value NODI											

Submission Note

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Edit Check Errors

No errors.

Comments

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Attachments

No attachments.

Report Last Saved By

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· Orrinc					
Permit #:	MA0000787	Permittee:	MASSPORT AUTHORITY - LOGAN	Facility:	LOGAN INTERNATIONAL AIRPORT
Major:	No	Permittee Address:	ONE HARBORSIDE DV., SUITE 200S BOSTON, MA 02128-2909	Facility Location:	ONE HARBORSIDE DRIVE, SUITE 200S BOSTON, MA 02128
Permitted Feature:	04A External Outfall	Discharge:	04A-A MAVERICK ST TO BOSTON INNER HARBOR OUTFALL 04A		
Report Dates & Status					
Monitoring Period:	From 02/01/25 to 02/28/25	DMR Due Date:	03/15/25	Status:	NetDMR Validated
Considerations for Form Con	npletion				
Principal Executive Officer					
First Name:		Title:		Telephone:	
Last Name:					
No Data Indicator (NODI)					

	Parameter	Monitoring Location	Season #	Param. NODI			Q	uantity or Loa	ding				Quality or Cor		# of Ex.	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			
					Sample	= 0	.07	=	0.917	03 - MGD								01/30 - Monthly	ES - Estimate
00056	Flow rate	1 - Effluent Gross	0		Permit Req.	R	Req Mon MO AVG		Req Mon DAILY MX	03 - MGD								01/30 - Monthly	ES - Estimate
			_		Value NODI														
	рН	1 - Effluent Gross	0		Sample						=	7.5		=	7.5	12 - SU		01/30 - Monthly	GR - Grab
00400					Permit Req.						>=	6.0 MINIMUM		<=	8.5 MAXIMUM	12 - SU		01/30 - Monthly	GR - Grab
					Value NODI														
	Solids, total suspended	1 - Effluent Gross	0		Sample						-	71.0		-	71.0	19 - mg/L		01/30 - Monthly	GR - Grab
00530					Permit Req.							Req Mon MO AVG		<=	100.0 DAILY MX	19 - mg/L		01/30 - Monthly	GR - Grab
00000					Value NODI														
		1 - Effluent Gross	0		Sample									<	4.0	19 - mg/L		01/30 - Monthly	GR - Grab
00556	Oil & Grease				Permit Req.									<=	15.0 DAILY MX	19 - mg/L		01/30 - Monthly	GR - Grab
00000	on a ordass				Value NODI														
					Sample						=	140.0		=	140.0	3Z - CFU/100mL		01/30 - Monthly	GR - Grab
61211	Enterococci	1 - Effluent Gross	0		Permit Req.							Req Mon MOAV GEO			Req Mon DAILY MX	3Z - CFU/100mL		01/30 - Monthly	GR - Grab
0.2		. Imagin Grees			Value NODI														
					Sample						=	660.0		=	660.0	30 - MPN/100mL		01/30 - Monthly	GR - Grab
74055	Coliform, fecal general	1 - Effluent Gross	0		Permit Req.							Req Mon MOAV GEO			Req Mon DAILY MX	30 - MPN/100mL		01/30 - Monthly	GR - Grab
556	Comorni, recar general	i - Liliuent Gloss			Value NODI														

Submission Note

Form NODI:

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Edit Check Errors

No errors.

Comments

Please see the February 2025 monthly sampling report attached to 01A-A - NORTH OUTFALL 01A TO WINTHROP BAY.

Attachments

No attachments.

Report Last Saved By

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Permit							
Permit #:	MA0000787	Permittee:	MASSPORT AUTHORITY - LOGAN	Facility:	LOGAN INTERN	IATIONAL AIRPORT	
Major:	No	Permittee Address:	ONE HARBORSIDE DV., SUITE 200S BOSTON, MA 02128-2909	Facility Location:	ONE HARBORS BOSTON, MA 02	IDE DRIVE, SUITE 200S 2128	
Permitted Feature:	06B External Outfall	Discharge:	06B-A AIRFIELD A21 INDUSTRIAL STORMWATER PAVEMENT/RUNWAY DEICING				
Report Dates & Statu	us						
Monitoring Period:	From 02/01/25 to 02/28/25	DMR Due Date:	03/15/25	Status:	NetDMR Validat	ed	
Considerations for F	Form Completion						
Principal Executive	Officer						
First Name:		Title:		Telephone:			
Last Name:				·			
No Data Indicator (N	ODI)	•					
Form NODI:							
Par	rameter Monitoring Locati	on Season # Param. NODI	Quantity or Loading Qu	ality or Concentration	# (of Ex. Frequency of Analysis	Sample Typ
Code	Name		Qualifier 1 Value 1 Qualifier 2 Value 2 Units Qualifier 1 Value 1 Qualifier 2 Value 2 Qualifier 3	Value 3	Units		

	Parameter Monitoring Location			Param. NODI		Quantity or Loading			I	Quality or Concentration					# of Ex	. Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2 Units Qual	lifier 1 Value 1	Qualifier 2 Value 2	Qualifier 3	Value 3	Units			
					Sample							=	14.25	19 - mg/L		03/SN - Three Per Season	GR - Grab
00300	Oxygen, dissolved [DO]	1 - Effluent Gross	0		Permit Req.								Req Mon DAILY MX	19 - mg/L		03/SN - Three Per Season	GR - Grab
00000	oxygen, dissolved [50]	1 Lindoin Grood			Value NODI												
					Sample							=	22.0	19 - mg/L		03/SN - Three Per Season	GR - Grab
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0		Permit Req.								Req Mon DAILY MX	19 - mg/L		03/SN - Three Per Season	GR - Grab
00010	BOD, 3-day, 20 deg. C	1 Lindoit Grood			Value NODI												
	Nonylphenol 1	1 - Effluent Gross	0		Sample												
51568					Permit Req.								Req Mon DAILY MX	28 - ug/L		01/SN - Once Per Season	GR - Grab
0.000					Value NODI								9 - Conditional Monitoring - Not Required This Period				
		1 - Effluent Gross	0		Sample							<	2.0	19 - mg/L		03/SN - Three Per Season	GR - Grab
61163	Propylene glycol, total				Permit Req.								Req Mon DAILY MX	19 - mg/L		03/SN - Three Per Season	GR - Grab
01100	r ropytono gryoot, total				Value NODI												
					Sample							=	180.0	19 - mg/L		03/SN - Three Per Season	GR - Grab
81017	Chemical Oxygen Demand [COD]	1 - Effluent Gross	0		Permit Req.								Req Mon DAILY MX	19 - mg/L		03/SN - Three Per Season	GR - Grab
01011	onomical oxygen beniana [665]	1 Emdoni Gross			Value NODI												
					Sample							<	1000.0	28 - ug/L		03/SN - Three Per Season	GR - Grab
85813	Tolytriazole	1 - Effluent Gross	0		Permit Req.								Req Mon DAILY MX	28 - ug/L		03/SN - Three Per Season	GR - Grab
	101911102010	i Lindon Oloss			Value NODI												

Submission Note

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Edit Check Errors

No errors.

Comments

Please see the February 2025 monthly sampling report attached to 01A-A - NORTH OUTFALL 01A TO WINTHROP BAY.

Attachments

No attachments.

Report Last Saved By

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Permit					
Permit #:	MA0000787	Permittee:	MASSPORT AUTHORITY - LOGAN	Facility:	LOGAN INTERNATIONAL AIRPORT
Major:	No	Permittee Address:	ONE HARBORSIDE DV., SUITE 200S BOSTON, MA 02128-2909	Facility Location:	ONE HARBORSIDE DRIVE, SUITE 200S BOSTON, MA 02128
Permitted Feature:	07B External Outfall	Discharge:	07B-A AIRFIELD A33 INDUSTRIAL STORMWATER PAVEMENT/RUNWAY DEICING		
Report Dates & Status					
Monitoring Period:	From 02/01/25 to 02/28/25	DMR Due Date:	03/15/25	Status:	NetDMR Validated
Considerations for Form	Completion				
Principal Executive Office	er				
First Name:		Title:		Telephone:	
Last Name:					
No Data Indicator (NODI)					
Form NODI:					
Form NODI:					

	Parameter Monitoring Locati		Season #	Param. NODI	Quantity or Loading Q								Quality or Concentration			Ex. Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units Qualifier 1	Value 1 Qualifier 2 Value	e 2 Qualifier 3	Value 3	Units			
			0		Sample							=	25.14	19 - mg/L		03/SN - Three Per Season	GR - Grab
00300	Oxygen, dissolved [DO]	1 - Effluent Gross			Permit Req.								Req Mon DAILY MX	19 - mg/L		03/SN - Three Per Season	GR - Grab
00000	exygon, anotonica [2-6]				Value NODI												
					Sample							=	390.0	19 - mg/L		03/SN - Three Per Season	GR - Grab
00310	BOD, 5-day, 20 deg. C	1 - Effluent Gross	0		Permit Req.								Req Mon DAILY MX	19 - mg/L		03/SN - Three Per Season	GR - Grab
00010	BOD, 5-day, 20 deg. C	1 Emacin Gross			Value NODI												
	Nonylphenol	1 - Effluent Gross	0		Sample												
51568					Permit Req.								Req Mon DAILY MX	28 - ug/L		01/SN - Once Per Season	GR - Grab
					Value NODI								9 - Conditional Monitoring - Not Required This Period				
		1 - Effluent Gross	0		Sample							=	191.0	19 - mg/L		03/SN - Three Per Season	GR - Grab
61163	Propylene glycol, total				Permit Req.								Req Mon DAILY MX	19 - mg/L		03/SN - Three Per Season	GR - Grab
000	r repyreme glycon, renni				Value NODI												
					Sample							=	520.0	19 - mg/L		03/SN - Three Per Season	GR - Grab
81017	Chemical Oxygen Demand [COD]	1 - Effluent Gross	0		Permit Req.								Req Mon DAILY MX	19 - mg/L		03/SN - Three Per Season	GR - Grab
01011	onomical exygen bemana [ees]	T Emacin Gross		_	Value NODI												
					Sample							<	1000.0	28 - ug/L		03/SN - Three Per Season	GR - Grab
85813	Tolytriazole	1 - Effluent Gross	0		Permit Req.								Req Mon DAILY MX	28 - ug/L		03/SN - Three Per Season	GR - Grab
230.0	101ythuzolo	Lindent Gloss	-		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

No errors.

Comments

Please see the February 2025 monthly sampling report attached to 01A-A - NORTH OUTFALL 01A TO WINTHROP BAY.

Attachments

No attachments.

Report Last Saved By