



October 11, 2021

Project No. 1913523721

Canadian Pacific Plaza  
Attn: Karlene French  
120 South 6th Street  
Suite 700  
Minneapolis, MN 55402

**RE: SHOREHAM YARD – CEDAR SERVICE PUMP & TREAT SYSTEM  
MCES SPECIAL DISCHARGE PERMIT 2286  
SELF-MONITORING REPORT ELECTRONIC SUBMITTAL FOR  
AUGUST 2021 SAMPLE RESULTS INFORMATION**

Dear Karlene,

Enclosed is a copy of the Metropolitan Council Environmental Services (MCES) Self-Monitoring Report(s) (SMRs) submitted electronically to the MCES on September 23, 2021 for the Cedar Service Pump & Treat System. The following documents are enclosed:

- *Sampling Results SMR – August 2021*

If you have any questions regarding these submittals, please contact the undersigned at 651-697-9737.

Sincerely,

**Golder Associates Inc.**

Neha Dainle  
Staff Engineer

Ryan Birkenholz, P.E.  
Associate and Senior Consultant

ND/RCB/nd

CC: Mr. Bryan Weldon, Golder

[https://golderassociates.sharepoint.com/sites/101843/technical work/cedar service/cedar service pt/mces special discharge reporting/2021/08-august/cs cover letter august 2021.docx](https://golderassociates.sharepoint.com/sites/101843/technical%20work/cedar%20service/cedar%20service%20pt/mces%20special%20discharge%20reporting/2021/08-august/cs%20cover%20letter%20august%202021.docx)

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Metropolitan Council Environmental Services  
 Industrial Waste & Pollution Prevention Section  
 390 North Robert Street  
 St. Paul, Minnesota 55101-1805

Submittal ID: 21792  
 Submittal Date: 09/23/2021  
 Permit No: 2286  
 Monitoring Point: SP-01

### Sampling Results SMR

MCES Industrial Discharge Permit holders must complete this form for each monitoring point specified in their permit.

1. **Permittee:** Canadian Pacific Railway Permit No: 2286  
 2. **Site Address:** 6th St NE & 27th Ave NE , MINNEAPOLIS, MN 55418-

3. **Reporting Period:**  No Discharge/No Sampling  
 Quarterly Reporters:  Jan-Mar, 2021  Apr-Jun, 2021  Jul-Sep, 2021  Oct-Dec, 2021  
 Semi-Annual Reporters:  Jan-Jun, 2021  Jul-Dec, 2021  
 Annual Reporters:  Jan-Dec, 2021

4. **Proper Sampling:** Were all samples collected and composited according to permit requirements?  Yes  No

5. **Proper Analysis:** Were analyses conducted per permit requirements?  Yes  No

6. **Representative Discharge:** Are the analytical results representative of the wastewater discharged during this monitoring event?  Yes  No

7. **Compliance Status:** Compare the analytical results with the corresponding discharge limits in your Permit. Do any analytical results exceed the corresponding discharge limit(s) in your Permit?  Yes  No

8. **General comments regarding submission:**

Water was not discharged to the sanitary sewer in the reporting period. Therefore a lab analysis report is not attached with this report.

9. **Certification Statement:**

*"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties under law for submitting false information, including the possibility of fine and imprisonment for knowing violations."*

Name (print): Ryan Birkenholz  
 Email: rbirkenholz@golder.com

Title: \_\_\_\_\_  
 Phone: 651-697-9737

**Sample Results:** Submit one result sheet for each sampling day per monitoring point. Enter daily values for each sampling event from one monitoring point, in accordance with requirements in the Industrial Discharge Permit (Section B). Daily and long-term values shall be compared to Discharge Limitations in Permit Section A.1 for compliance determinations. Attach all laboratory data sheets and supporting calculations.

**Flow Reading**

Start Date	End Date	Discharge Volume	Units	Comments
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Sample Start Date & Time: \_\_\_\_\_

Sample End Date & Time: \_\_\_\_\_

**Daily Data Form**

Substance	Analytical Result	Result Unit	Reporting Limits(mg/L)	Analysis Method	Sample Method	Bottle Container	Laboratory Name
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Substance	Sample Col. Method	Sample Col. Method Reason	Sample(s) Collected By	Sample(s) Composited By	Compositing Method	Compositing Method Reason
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