

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

Form Approved  
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: MASSPORT AUTHORITY - LOGAN  
ADDRESS: ONE HARBORSIDE DV., SUITE 200S  
BOSTON, MA 02128-2909

MA0009787  
PERMIT NUMBER

001-Q  
DISCHARGE NUMBER

DMR Mailing ZIP CODE: 021282909  
MINOR  
(SUBR E)  
North quarterly  
External Outfall

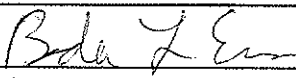
FACILITY: LOGAN INTERNATIONAL AIRPORT  
LOCATION: ONE HARBORSIDE DRIVE, SUITE 200S  
BOSTON, MA 02128

MONITORING PERIOD  
FROM MM/DD/YYYY TO MM/DD/YYYY  
01/01/2012 TO 03/31/2012

ATTN: KEITH L BEASLEY, ENF.PROJ.MGR.

No Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Polynuclear Aromatic Hydrocarbons (Method 810) 22456 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	ND				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. TOTAL	ug/L		Quarterly	GRAB
Benzo(b)fluoranthene 34230 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Benzo(k)fluoranthene 34242 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Benzo(a)pyrene 34247 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Chrysene 34320 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Indeno(1,2,3-cd)pyrene 34403 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<7.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Benzo(a)anthracene 34526 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Brenda L. Enos, CHMM, REM, Assistant Director, Capital Programs and Environmental Management TYPED OR PRINTED	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 assure 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 for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE		DATE
		617-568-5963		05/11/2012
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NAME: MASSPORT AUTHORITY - LOGAN  
ADDRESS: ONE HARBORSIDE DV., SUITE 200S  
BOSTON, MA 02128-2909

MA0000787  
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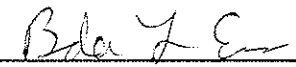
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MM/DD/YYYY MM/DD/YYYY  
FROM 01/01/2012 TO 03/31/2012

MINOR  
(SUBR E)  
North quarterly  
External Outfall

ATTN: KEITH L BEASLEY, ENF.PROJ.MGR.

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Dibenzo(a,h)anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
34556 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB

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Brenda L. Enos, CHMM, REM, Assistant Director, Capital Programs and Environmental Management			617-568-5963
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER
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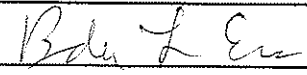
MA0000787	002-Q
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
FROM 01/01/2012	TO 03/31/2012

DMR Mailing ZIP CODE: 021282909  
MINOR (SUBR E)  
West quarterly  
External Outfall

No Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Polynuclear Aromatic Hydrocarbons (Method 610) 22456 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	ND				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. TOTAL	ug/L		Monthly	GRAB
Benzo(b)fluoranthene 34230 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Benzo(k)fluoranthene 34242 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Benzo(a)pyrene 34247 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Chrysene 34320 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Indeno(1,2,3-cd)pyrene 34403 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<7.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Benzo(a)anthracene 34526 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Monthly	GRAB

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BOSTON, MA 02128  
ATTN: KEITH L BEASLEY, ENF.PROJ.MGR.


MA0000787	002-Q
PERMIT NUMBER	DISCHARGE NUMBER

DMR Mailing ZIP CODE: 021282909  
MINOR  
(SUBR E)  
West quarterly  
External Outfall

MONITORING PERIOD			
MM/DD/YYYY		MM/DD/YYYY	
FROM	01/01/2012	TO	03/31/2012

No Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Dibenzo(a,h)anthracene 34556 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Naphthalene 34696 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Monthly	GRAB

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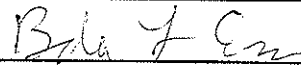
MA0000787	003-Q
PERMIT NUMBER	DISCHARGE NUMBER

DMR Mailing ZIP CODE: 021282909  
MINOR  
(SUBR E)  
Porter Street quarterly  
External Outfall

MONITORING PERIOD			
MM/DD/YYYY		MM/DD/YYYY	
FROM 01/01/2012	TO	03/31/2012	

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Benzo(b)fluoranthene 34230 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Benzo(k)fluoranthene 34242 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Benzo(a)pyrene 34247 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Chrysene 34320 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Indeno(1,2,3-cd)pyrene 34403 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<7.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Benzo(a)anthracene 34526 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB

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DMR Mailing ZIP CODE: 021282909

MINOR  
(SUBR E)  
Porter Street quarterly  
External Outfall

ATTN: KEITH L BEASLEY, ENF.PROJ.MGR.

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Dibenzo(a,h)anthracene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
34556 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Naphthalene	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0				
34696 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB

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			AREA Code	NUMBER
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>B. Enos</i>			

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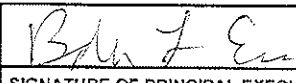
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MINOR  
(SUBR E)  
Northwest Quarterly  
External Outfall

MONITORING PERIOD			
MM/DD/YYYY		MM/DD/YYYY	
FROM 01/01/2012	TO	03/31/2012	

No Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH 00400 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	7.60	*****	7.60				
	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MINIMUM	*****	Req. Mon. MAXIMUM	SU		Quarterly	GRAB
Solids, total suspended 00530 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	31	*****	31				
	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AVG	*****	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB
Oil & Grease 00558 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	<4.0	*****	<4.0				
	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AVG	*****	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB
Benzene 34030 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	<1.0	*****	<1.0				
	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AVG	*****	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Flow, in conduit or thru treatment plant 50050 1 0 Effluent Gross	SAMPLE MEASUREMENT	0.06	0.83		*****	*****	*****	*****			
	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	Mgal/d	*****	*****	*****	*****		Quarterly	ESTIMA

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Brenda L. Enos, CHMM, REM, Assistant Director, Capital Programs and Environmental Management	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 assure 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 for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE	
			617-568-5963	05/11/2012	
TYPED OR PRINTED			AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

Form Approved  
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)


NAME: MASSPORT AUTHORITY - LOGAN  
ADDRESS: ONE HARBORSIDE DV., SUITE 200S  
BOSTON, MA 02128-2909  
FACILITY: LOGAN INTERNATIONAL AIRPORT  
LOCATION: ONE HARBORSIDE DRIVE, SUITE 200S  
BOSTON, MA 02128  
ATTN: KEITH L BEASLEY, ENF.PROJ.MGR.

MA0000787		006-Q	
PERMIT NUMBER		DISCHARGE NUMBER	
MONITORING PERIOD			
MM/DD/YYYY		MM/DD/YYYY	
FROM	01/01/2012	TO	03/31/2012

DMR Mailing ZIP CODE: 021282909  
MINOR  
(SUBR E)  
Runway Perimeter Quarterly  
Sum

No Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH 00400 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	6.58	*****	7.34				
	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MINIMUM	*****	Req. Mon. MAXIMUM	SU		Quarterly	GRAB
Solids, total suspended 00530 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	14	*****	89				
	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AVG	*****	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB
Oil & Grease 00556 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	0.0	*****	<4.4				
	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AVG	*****	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB
Benzene 34030 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	0.0	*****	<1.0				
	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MO AVG	*****	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Flow, in conduit or thru treatment plant 50050 1 0 Effluent Gross	SAMPLE MEASUREMENT	0.62	6.36		*****	*****	*****	*****			
	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	Mgal/d	*****	*****	*****	*****		Quarterly	ESTIMA

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Brenda L. Enos, CHMM, REM, Assistant Director, Capital Programs and Environmental Management TYPED OR PRINTED	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 assure 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 for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE	
			617-568-5963	05/11/2012	
			AREA Code	NUMBER	MM/DD/YYYY

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