



Tennessee Valley Authority, Post Office Box 2000, Soddy-Daisy, Tennessee 37384-2000

October 8, 2003

State of Tennessee
Department of Environment and Conservation
Division of Water Pollution Control
Enforcement & Compliance Section
6th Floor, L & C Annex
401 Church Street
Nashville, Tennessee 37243-1534

Attention: Mr. Chip Hannah

Dear Mr. Hannah:

**SEQUOYAH NUCLEAR PLANT - DISCHARGE MONITORING REPORT FOR
SEPTEMBER 2003**

Enclosed is the September 2003 Discharge Monitoring Report for Sequoyah Nuclear Plant. Please contact me at (423) 843-6700 if you have any questions or comments.

Sincerely,

A handwritten signature in cursive script that reads "Stephanie A. Howard".

Stephanie A. Howard
Acting Environmental Supervisor
Signatory Authority for
Richard T. Purcell
Site Vice President
Sequoyah Nuclear Plant

Enclosure

cc (Enclosure):

Chattanooga Environmental Assistance Center
Division of Water Pollution Control
State Office Building, Suite 550
540 McCallie Avenue
Chattanooga, Tennessee 37402-2013

U.S. Nuclear Regulatory Commission
ATTN: Document Control Desk
Washington, D.C. 20555

JE25

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

Name **TVA - SEQUOYAH NUCLEAR PLANT**
 Address **P.O. BOX 2000**
(INTEROFFICE SB-2A)
SODDY - DAISY TN 37384
 Facility **TVA - SEQUOYAH NUCLEAR PLANT**
 Location **HAMILTON COUNTY**

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

MAJOR
 (SUBR 01)
 F - FINAL
 DIFFUSER DISCHARGE
 EFFLUENT

Form Approved.
 OMB No. 2040-0004

TN0026450
 PERMIT NUMBER

101 G
 DISCHARGE NUMBER

MONITORING PERIOD
 From

YEAR	MO	DAY
03	09	01

 To

YEAR	MO	DAY
03	09	30

*** NO DISCHARGE ☐ ***

ATTN: Stephanie A. Howard

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	28.9	04	0	30 / 30	MODEL D
00010 Z 0 0 INSTREAM MONITORING	PERMIT REQUIREMENT	*****	*****	***	*****	*****	30.5 DAILY MX	DEG. C.		SEE PERMIT	CK REQ
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	42.7	04	0	30 / 30	RCORDR
00010 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	REPORT DAILY MX	DEG. C.		SEE PERMIT	CK REQ
PH	SAMPLE MEASUREMENT	*****	*****	**	7.2	*****	7.3	12	0	8 / 30	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	*****	5	6	19	0	4 / 30	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	30 MO AVG	100 DAILY MX	MG/L		WEEKLY	GRAB
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	**	*****	<5	<5	19	0	4 / 30	GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	15 MO AVG	20 DAILY MX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	*****	1585	03	*****	*****	*****	**	0	30 / 30	RCORDR
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	REPORT DAILY MX	MGD	*****	*****	*****	***		CONTINUOUS	RCORDR
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	**	*****	<0.009	0.015	19	0	30 / 30	GRAB
50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	0.036	0.058 INST MAX	MG/L		WEEK-DAYS	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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		
Richard T. Purcell Site Vice President		423 843-6700		03	10	09
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

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

No closed mode operation. The following injections occurred: 1. PCL-222 (max. calc. conc. was 0.064mg/L—limit 0.100mg/L) 2. CL-363 (max. calc. conc. was 0.010mg/L—limit 0.100mg/L) 3. PCL-222/PCL-401 (max. calc. conc. was 0.022mg/L—limit 0.100mg/L) 4. H-130M (max. calc. conc. was 0.024mg/L—limit 0.050mg/L) 5. H-130M (low detection level analytical method was 0.030mg/L—limit 0.050mg/L))

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

MAJOR
 (SUBR 01)

Form Approved.
 OMB No. 2040-0004

TN0026450 101 G
 PERMIT NUMBER DISCHARGE NUMBER

F - FINAL
 DIFFUSER DISCHARGE
 EFFLUENT


MONITORING PERIOD
 From 03 09 01 To 03 09 30

*** NO DISCHARGE ☐ ***

ATTN: Stephanie A. Howard

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE - C, RATE OF CHANGE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	0.2	62	0	30 / 30	CALCTD
82234 1 0 0	PERMIT REQUIREMENT	*****	*****	***	*****	*****	2.0	DEG C /HR		CONTINUOUS	CALCTD
EFFLUENT GROSS VALUE											
TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG.C	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	2.2	04	0	30 / 30	CALCTD
00016 1 S 0	PERMIT REQUIREMENT	*****	*****	***	*****	*****	3.0	DEG. C.		CONTINUOUS	CALCTD
EFFLUENT GROSS VALUE											
BORON, TOTAL	SAMPLE MEASUREMENT	*****	*****	**	<0.2	<0.2	<0.2	19	0	2 / 30	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****	***	REPORT	REPORT	REPORT	MG/L		ONCE/MONTH	GRAB
EFFLUENT GROSS VALUE											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Richard T. Purcell Site Vice President 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.	 Acting Environmental Supervisor SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			423	843-6700	03	10	09
			AREA CODE	NUMBER	YEAR	MO	DAY

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

CCW data for September 2003 is attached. Quarterly veliger monitoring information is attached.

CCW CHANNEL

Date/Time Collected	Extractable Petroleum Hydrocarbons	Analysis Date/Time	Analyst	Method
09/24/2003 0730	< 0.5 mg/L	09/29/2003 1118	JBR	EPA 8015B

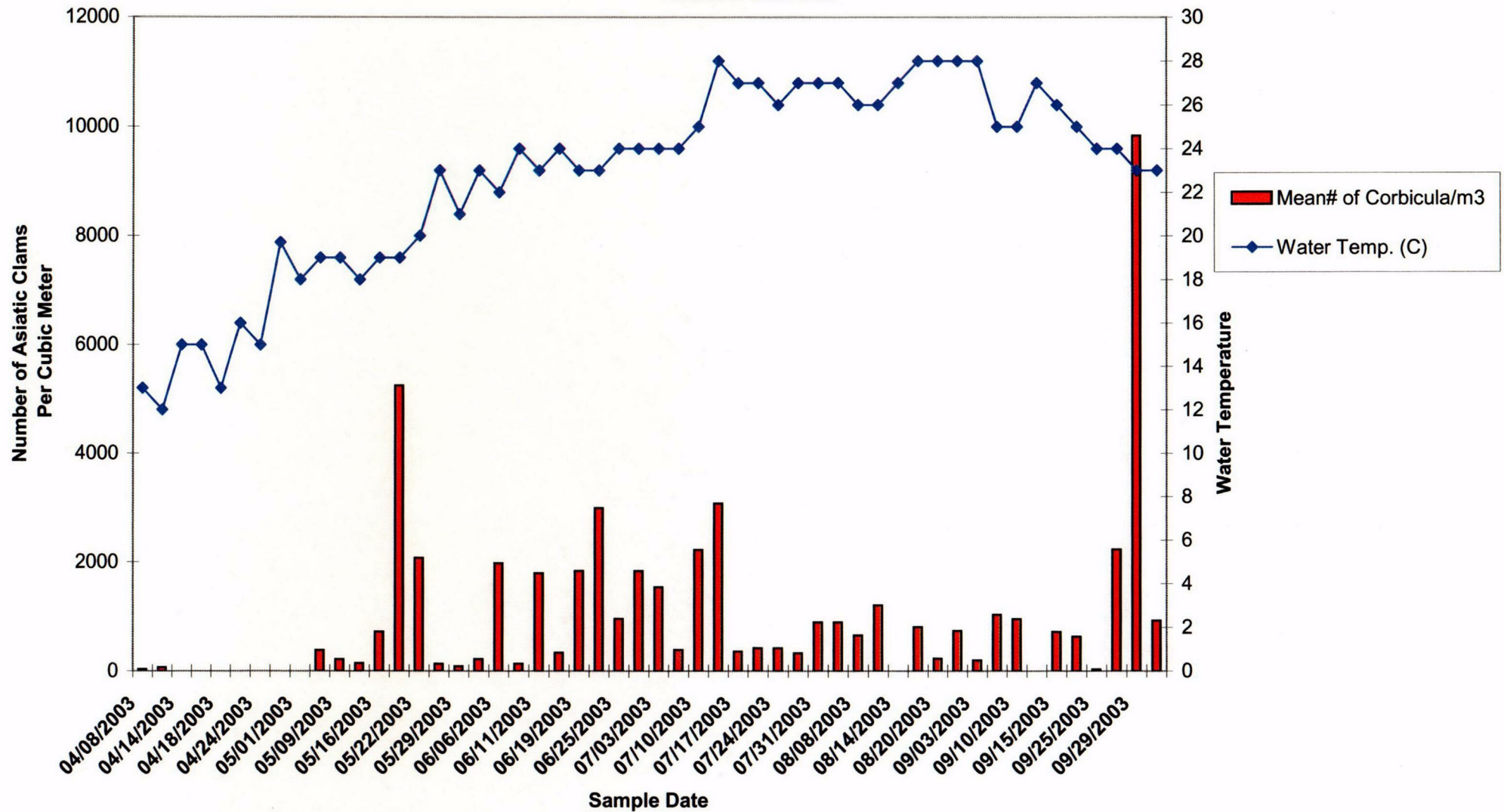
CCW TRENCH

Date/Time Collected	Extractable Petroleum Hydrocarbons	Analysis Date/Time	Analyst	Method
09/24/2003 0735	< 0.5 mg/L	09/29/2003 1156	JBR	EPA 8015B

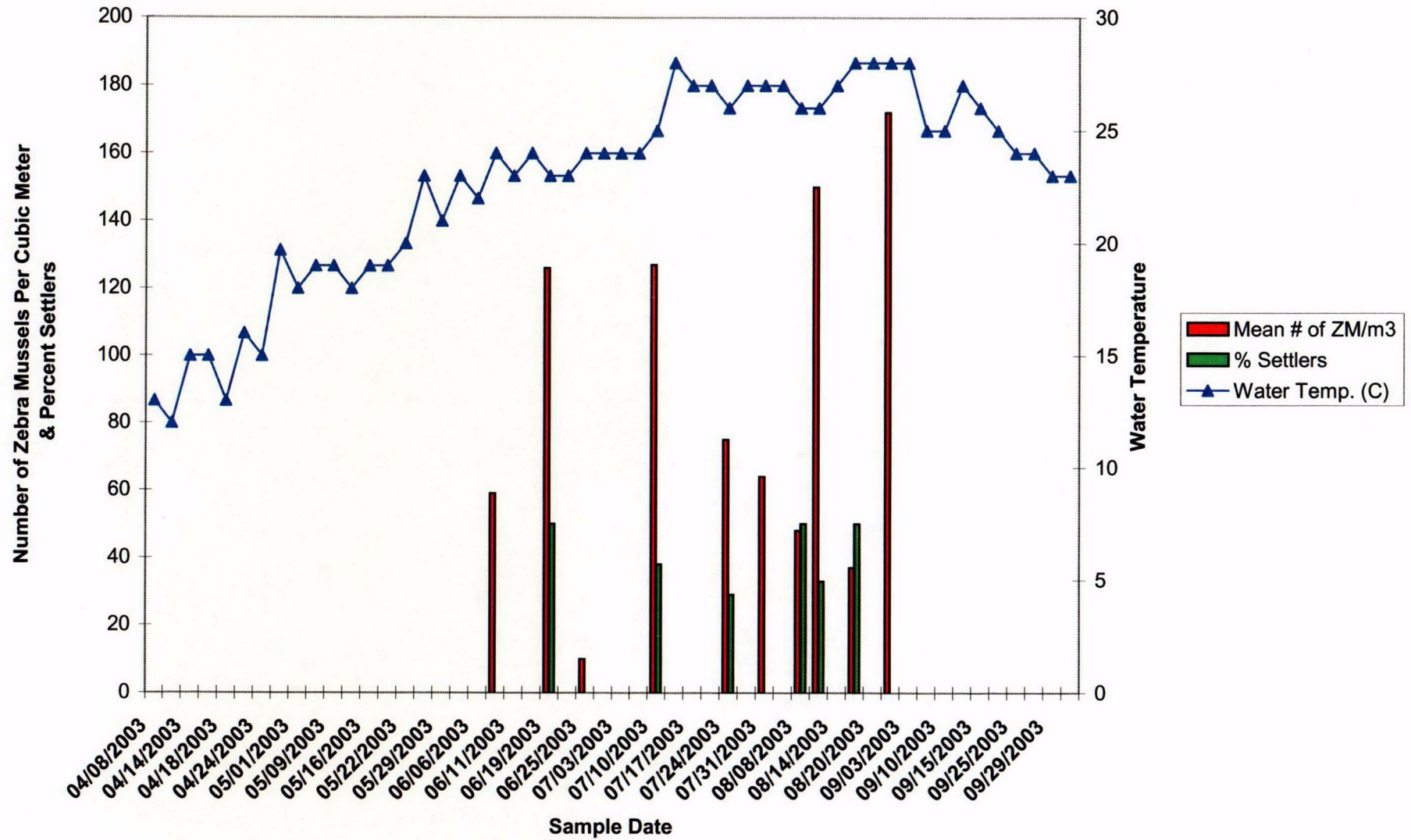
Sequoyah Forebay

Sample Date	Mean # of ZM/m ²	% Settlers	Water Temp. (C)	Sample Date	Mean# of Corbicula/m ²	Water Temp. (C)	NOTES: % Gravid Asiatic Clam	LOCATION	SUB LOCATION	SAMPLE TYPE	COLLECTED BY
04/08/2003	0	0	13	04/08/2003	31	13	0%	Intake	Intake Forebay	QUANT	Jones-Brier/Lehman
04/10/2003	0	0	12	04/10/2003	68	12		Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
04/14/2003	0	0	15	04/14/2003	0	15	10%	Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
04/17/2003	0	0	15	04/17/2003	0	15		Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
04/18/2003	0	0	13	04/18/2003	0	13		Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery/Jones-Brier
04/21/2003	0	0	16	04/21/2003	0	16		Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
04/24/2003	0	0	15	04/24/2003	0	15	40%	Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
04/28/2003	0	0	19.7	04/28/2003	0	19.7	0%	Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
05/01/2003	0	0	18	05/01/2003	0	18	0%	Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
05/05/2003	0	0	19	05/05/2003	379	19	63%	Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
05/09/2003	0	0	19	05/09/2003	213	19	0%	Intake	Intake Forebay	QUANT	Ron Lowery/M.G. Beavers
05/12/2003	0	0	18	05/12/2003	144	18		Intake	Intake Forebay	QUANT	Ron Lowery/R.D. Nunley
05/16/2003	0	0	19	05/16/2003	720	19	10%	Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
05/19/2003	0	0	19	05/19/2003	5,248	19		Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
05/22/2003	0	0	20	05/22/2003	2,074	20		Intake	Intake Forebay	QUANT	Ron Lowery/M.G. Beavers
05/28/2003	0	0	23	05/28/2003	129	23	40%	Intake	Intake Forebay	QUANT	Ron Lowery/D. Angel
05/29/2003	0	0	21	05/29/2003	83	21		Intake	Intake Forebay	QUANT	Ron Lowery/D. Adcock
06/05/2003	0	0	23	06/05/2003	220	23		Intake	Intake Forebay	QUANT	Ron Lowery/Irvin Childers
06/06/2003	0	0	22	06/06/2003	1,976	22		Intake	Intake Forebay	QUANT	Ron Lowery/Irvin Childers
06/09/2003	59	0	24	06/09/2003	132	24		Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
06/11/2003	0	0	23	06/11/2003	1,792	23	63%	Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
06/16/2003	0	0	24	06/16/2003	333	24		Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
06/19/2003	126	50	23	06/19/2003	1833	23		Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
06/23/2003	0	0	23	06/23/2003	2,991	23		Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
06/25/2003	10	0	24	06/25/2003	955	24	47%	Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
06/30/2003	0	0	24	06/30/2003	1832	24		Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
07/03/2003	0	0	24	07/03/2003	1535	24		Intake	Intake Forebay	QUANT	Ron Lowery/Irvin Childers
07/07/2003	0	0	24	07/07/2003	383	24		Intake	Intake Forebay	QUANT	Ron Lowery/Irvin Childers
07/10/2003	127	38	25	07/10/2003	2222	25		Intake	Intake Forebay	QUANT	Ron Lowery/Irvin Childers
07/16/2003	0	0	28	07/16/2003	3075	28	47%	Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
07/17/2003	0	0	27	07/17/2003	356	27		Intake	Intake Forebay	QUANT	R. Lowery / K. Nunley
07/23/2003	0	0	27	07/23/2003	418	27		Intake	Intake Forebay	QUANT	Wanda Allen/Ron Lowery
07/24/2003	75	29	26	07/24/2003	419	26		Intake	Intake Forebay	QUANT	Wanda Allen/R Hankins

Sequoyah Nuclear Plant Forebay Clam Densities



Sequoyah Nuclear Forbay Zebra Mussel Densities



07/28/2003	0	0	27	07/28/2003	324	27
07/31/2003	64	0	27	07/31/2003	892	27
08/07/2003	0	0	27	08/07/2003	893	27
08/08/2003	48	50	26	08/08/2003	651	26
08/11/2003	150	33	26	08/11/2003	1203	26
08/14/2003	0	0	27	08/14/2003	0	27
08/18/2003	37	50	28	08/18/2003	804	28
08/20/2003	0	0	28	08/20/2003	227	28
08/25/2003	172	0	28	08/25/2003	738	28
09/03/2003	0	0	28	09/03/2003	197	28
09/05/2003	0	0	25	09/05/2003	1,033	25
09/10/2003	0	0	25	09/10/2003	949	25
09/11/2003	0	0	27	09/11/2003	0	27
09/15/2003	0	0	26	09/15/2003	713	26
09/18/2003	0	0	25	09/18/2003	627	25
09/25/2003	0	0	24	09/25/2003	31	24
09/26/2003	0	0	24	09/26/2003	2231	24
09/29/2003	0	0	23	09/29/2003	9840	23
09/30/2003	0	0	23	09/30/2003	924	23

Intake	Intake Forebay	QUANT	Wanda Allen/R Hankins
Intake	Intake Forebay	QUANT	Wanda Allen/R Hankins
Intake	Intake Forebay	QUANT	Wanda Allen/R Hankins
Intake	Intake Forebay	QUANT	Wanda Allen/R Hankins
Intake	Intake Forebay	QUANT	Wanda Allen/R Hankins
Intake	Intake Forebay	QUANT	Wanda Allen/R Hankins
Intake	Intake Forebay	QUANT	Wanda Allen/R Hankins
Intake	Intake Forebay	QUANT	Wanda Allen/Irvin Childers
Intake	Intake Forebay	QUANT	Wanda Allen/R Hankins
Intake	Intake Forebay	QUANT	Wanda Allen/R Hankins
Intake	Intake Forebay	QUANT	Wanda Allen/R Hankins
Intake	Intake Forebay	QUANT	Wanda Allen/A. Hurt
Intake	Intake Forebay	QUANT	Wanda Allen/G. Walker
Intake	Intake Forebay	QUANT	Wanda Allen/G. Walker
Intake	Intake Forebay	QUANT	Wanda Allen/G. Walker
Intake	Intake Forebay	QUANT	Wanda Allen/R. Hankins
Intake	Intake Forebay	QUANT	Wanda Allen/R. Hankins
Intake	Intake Forebay	QUANT	Wanda Allen/R. Hankins
Intake	Intake Forebay	QUANT	Wanda Allen/R. Hankins

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

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 Address P.O. BOX 2000
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SODDY - DAISY TN 37384
 Facility TVA - SEQUOYAH NUCLEAR PLANT
 Location HAMILTON COUNTY

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

MAJOR
 (SUBR 01)

Form Approved.
 OMB No. 2040-0004

TN0026450 101 T
 PERMIT NUMBER DISCHARGE NUMBER

F - FINAL
 BIOMONITORING FOR OUTFALL 101

MONITORING PERIOD
 YEAR MO DAY
 From 03 09 01 To 03 09 30

EFFLUENT

*** NO DISCHARGE ☐ ***

ATTN: Stephanie A. Howard

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
IC25 STATRE 7DAY CHR CERIODAPHNIA	SAMPLE MEASUREMENT	*****	*****	**	Monitoring Not Required	*****	*****	23			
TRP3B 1 0 0	PERMIT REQUIREMENT	*****	*****	***	43.9 MINIMUM	*****	*****	PERCENT		QUART-ERLY	COMPOS
IC25 STATRE 7DAY CHR PIMEPHALES	SAMPLE MEASUREMENT	*****	*****	**	Monitoring Not Required	*****	*****	23			
TRP6C 1 0 0	PERMIT REQUIREMENT	*****	*****	***	43.9 MINIMUM	*****	*****	PERCENT		QUART-ERLY	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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				
Richard T. Purcell		423	843-6700	03	10	09		
Site Vice President								
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO	DAY

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

Toxicity was not sampled in September 2003.

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

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 Location **HAMILTON COUNTY**

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

MAJOR
 (SUBR 01)

Form Approved.
 OMB No. 2040-0004

TN0026450 **103 G**
 PERMIT NUMBER DISCHARGE NUMBER

F - FINAL
 LOW VOL. WASTE TREATMENT POND
 EFFLUENT

MONITORING PERIOD
 From **03 09 01** To **03 09 30**

*** NO DISCHARGE ☐ ***

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ATTN: Stephanie A. Howard

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	**	7.3	*****	8.8	12	0	13 / 30	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		THREE/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	145	179	26	*****	15	18	19	0	4 / 30	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	380 MO AVG	1250 DAILY MX	LBS/DY	*****	30 MO AVG	100 DAILY MX	MG/L		WEEKLY	GRAB
OIL AND GREASE	SAMPLE MEASUREMENT	<49	<54	26	*****	<5	<5	19	0	4 / 30	GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	190 MO AVG	250 DAILY MX	LBS/DY	*****	15 MO AVG	20 DAILY MX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	1.070	1.517	03	*****	*****	*****	**	0	30 / 30	TOTAL
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	**		DAILY	TOTAL
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

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Richard T. Purcell Site Vice President		423 843-6700		03	10	09	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO

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

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 Location **HAMILTON COUNTY**

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

MAJOR
 (SUBR 01)

Form Approved.
 OMB No. 2040-0004

TN0026450 **107 G**
 PERMIT NUMBER DISCHARGE NUMBER

F - FINAL
 METAL CLEANING WASTE POND
 EFFLUENT

MONITORING PERIOD
 From **03 09 01** To **03 09 30**

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form.

ATTN: Stephanie A. Howard

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	**		*****		12			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY	GRAB
PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
00665 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	1.0 DAILY MX	MG/L		DAILY	COMPOS
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	30 DAILY MX	MG/L		DAILY	COMPOS
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	15 DAILY MX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	1.0 DAILY MX	MG/L		DAILY	COMPOS
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	1.0 DAILY MX	MG/L		DAILY	COMPOS
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			03	*****	*****	*****	**			
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	***		DAILY	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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		
		AREA CODE	NUMBER	YEAR	MO	DAY
Richard T. Purcell Site Vice President TYPED OR PRINTED						

Stephanie A. Howard
 Acting Environmental Supervisor

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

423 843-6700

03 10 09

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

No phosphorous bearing cleaning solutions were used. No Discharge this Period

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

Name **TVA - SEQUOYAH NUCLEAR PLANT**
 Address **P.O. BOX 2000**
(INTEROFFICE SB-2A)
SODDY - DAISY TN 37384
 Facility **TVA - SEQUOYAH NUCLEAR PLANT**
 Location **HAMILTON COUNTY**

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

MAJOR

(SUBR 01)

F - FINAL

RECYCLED COOLING WATER

EFFLUENT

Form Approved.

OMB No. 2040-0004

TN0026450
 PERMIT NUMBER

110 G
 DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY	YEAR	MO	DAY
03	09	01	03	09	30

From

To

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	**		*****		12			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	30 DAILY MX	MG/L		DAILY	COMPOS
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	15 DAILY MX	MG/L		DAILY	COMPOS
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	1.0 DAILY MX	MG/L		DAILY	COMPOS
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	1.0 DAILY MX	MG/L		DAILY	COMPOS
PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
00665 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	1.0 DAILY MX	MG/L		DAILY	COMPOS
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			03	*****	*****	*****	**			
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	***		DAILY	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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		
Richard T. Purcell		423	843-6700	03	10	09
Site Vice President						
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

Stephanie A. Howard
 Acting Environmental Supervisor
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

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

No Discharge this Period

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

Name TVA - SEQUOYAH NUCLEAR PLANT
 Address P.O. BOX 2000
(INTEROFFICE SB-2A)
SODDY - DAISY TN 37384
 Facility TVA - SEQUOYAH NUCLEAR PLANT
 Location HAMILTON COUNTY

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

MAJOR
 (SUBR 01)

Form Approved.
 OMB No. 2040-0004

TN0026450 116 G
 PERMIT NUMBER DISCHARGE NUMBER

F - FINAL
 BACKWASH
 EFFLUENT

MONITORING PERIOD
 From

YEAR	MO	DAY
03	09	01

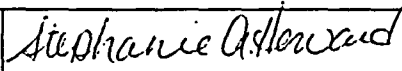
 To

YEAR	MO	DAY
03	09	30

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
DEBRIS, FLOATING (SEVERITY)	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	0	9A	0	1 / 30	VISUAL
01345 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	REPORT MO TOTAL	PASS=0 FAIL=1		SEE PERMIT	VISUAL
OIL AND GREASE VISUAL	SAMPLE MEASUREMENT	*****	0	94	*****	*****	*****	**	0	1 / 30	VISUAL
84066 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	REPORT MO TOTAL	YES=1 NO=0	*****	*****	*****	****		SEE PERMIT	VISUAL
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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			
Richard T. Purcell		 Acting Environmental Supervisor	423	843-6700	03	10	09
Site Vice President							
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 Operations performs visual inspections for floating debris and oil and grease during all backwashes.

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

Name **TVA - SEQUOYAH NUCLEAR PLANT**
 Address **P.O. BOX 2000**
(INTEROFFICE SB-2A)
SODDY - DAISY TN 37384
 Facility **TVA - SEQUOYAH NUCLEAR PLANT**
 Location **HAMILTON COUNTY**

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

MAJOR

(SUBR 01)

F - FINAL

BACKWASH

EFFLUENT

Form Approved.
 OMB No. 2040-0004

TN0026450 **117 G**
 PERMIT NUMBER DISCHARGE NUMBER

MONITORING PERIOD
 From

YEAR	MO	DAY
03	09	01

 To


YEAR	MO	DAY
03	09	30

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form.

ATTN: Stephanie A. Howard

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
DEBRIS, FLOATING (SEVERITY)	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	0	9A	0	1 / 30	VISUAL
01345 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	REPORT MO TOTAL	PASS=0 FAIL=1		SEE PERMIT	VISUAL
OIL AND GREASE VISUAL	SAMPLE MEASUREMENT	*****	0	94	*****	*****	*****	**	0	1 / 30	VISUAL
84066 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	REPORT MO TOTAL	YES=1 NO=0	*****	*****	*****	***		SEE PERMIT	VISUAL
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Richard T. Purcell Site Vice President 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.	 Acting Environmental Supervisor SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			423	843-6700	03	10	09
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 Operations performs visual inspections for floating debris and oil and grease during all backwashes.

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

Name TVA - SEQUOYAH NUCLEAR PLANT
 Address P.O. BOX 2000
(INTEROFFICE SB-2A)
SODDY - DAISY TN 37384
 Facility TVA - SEQUOYAH NUCLEAR PLANT
 Location HAMILTON COUNTY

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

MAJOR

(SUBR 01)

F - FINAL

WASTEWATER & STORM WATER

EFFLUENT

Form Approved.
 OMB No. 2040-0004

TN0026450			118 G		
PERMIT NUMBER			DISCHARGE NUMBER		
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
03	09	01	03	09	30

ATTN: Stephanie A. Howard

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*****	*****	**		*****	*****	19			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	2.0 DAILY MN	*****	*****	MG/L		TWICE/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	100 DAILY MX	MG/L		TWICE/ WEEK	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		25			
00545 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	1.0 DAILY MX	ML/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			03	*****	*****	*****	**			
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	*		ONCE/ BATCH	ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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		
Richard T. Purcell Site Vice President		423	843-6700	03	10	09
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

Stephanie A. Howard
 Acting Environmental Supervisor

SIGNATURE OF PRINCIPAL EXECUTIVE
 OFFICER OR AUTHORIZED AGENT

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

During this reporting period, there has been no flow from the Dredge Pond other than that resulting from rainfall.