



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

October 14, 2005

State of Tennessee  
Department of Environment and Conservation  
Division of Water Pollution Control  
Enforcement & Compliance Section  
6<sup>th</sup> 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 2005

Enclosed is the September 2005 Discharge Monitoring Report for Sequoyah Nuclear Plant. The preprinted DMR forms for Outfall 110 G need to be corrected; Phosphorus, Copper, and Iron were included on the form but are not a parameter for this outfall per the NPDES Permit TN0026450 or the Biocide/Corrosion Treatment Plan. However, Chlorine is a parameter for this outfall per the NPDES permit and was not included on the preprinted DMR forms. Please contact me at (423) 843-6700 if you have any questions or comments.

Sincerely,

Stephanie A. Howard  
Principal Environmental Engineer  
Signatory Authority for  
J. Randy Douet  
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

IE25

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 101 G  
 PERMIT NUMBER DISCHARGE NUMBER

F - FINAL  
 DIFFUSER DISCHARGE  
 EFFLUENT

MONITORING PERIOD  
 YEAR MO DAY YEAR MO DAY  
 From 05 09 01 To 05 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	*****	*****	..	*****	*****	29.0	04	0	30 / 30	MODEL D
00010 Z 0 0	PERMIT REQUIREMENT	*****	*****	***	*****	*****	30.5 DAILY MX	DEG.C.		SEE PERMIT	CK REQ
INSTREAM MONITORING											
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	..	*****	*****	42.3	04	0	30 / 30	RCORDR
00010 1 0 0	PERMIT REQUIREMENT	*****	*****	***	*****	*****	REPORT DAILY MX	DEG.C.		SEE PERMIT	CK REQ
EFFLUENT GROSS VALUE											
TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG.C	SAMPLE MEASUREMENT	*****	*****	..	*****	*****	2.3	04	0	30 / 30	CALCTD
00016 1 S 0	PERMIT REQUIREMENT	*****	*****	***	*****	*****	3.0 DAILY MX	DEG.C.		CONTINUOUS	CALCTD
EFFLUENT GROSS VALUE											
PH	SAMPLE MEASUREMENT	*****	*****	..	7.2	*****	7.3	12	0	5 / 30	GRAB
00400 1 0 0	PERMIT REQUIREMENT	*****	*****	***	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	..	*****	8	8	19	0	1 / 30	GRAB
00530 1 0 0	PERMIT REQUIREMENT	*****	*****	***	*****	30 MO AVG	100 DAILY MX	MG/L		MONTHLY	GRAB
EFFLUENT GROSS VALUE											
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	..	*****	<5	<5	19	0	1 / 30	GRAB
00556 1 0 0	PERMIT REQUIREMENT	*****	*****	***	*****	15 MO AVG	20 DAILY MX	MG/L		MONTHLY	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	*****	1579	03	*****	*****	*****	..	0	30 / 30	RCORDR
50050 1 0 0	PERMIT REQUIREMENT	*****	REPORT DAILY MX	MGD	*****	*****	*****	***		CONTINUOUS	RCORDR
EFFLUENT GROSS VALUE											

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		
J. Randy Douet		423	843-6700	05	10	14
Site Vice President						
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

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

No closed mode operation. CCW data for September 2005 is attached. Veliger monitoring information is attached.

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**CCW TRENCH**

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Date/Time Collected	Extractable Petroleum Hydrocarbons	Analysis Date/Time	Analyst	Method
09/01/2005 @ 0905	0.5 mg/L	09/07/2005 @ 2002	CVS	EPA 8015B

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**CCW CHANNEL**

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Date/Time Collected	Extractable Petroleum Hydrocarbons	Analysis Date/Time	Analyst	Method
09/01/2005 @ 0900	< 0.5 mg/L	09/07/2005 @ 1925	CVS	EPA 8015B

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# Sequoia Forebay

Sample Date	Mean # of ZM/m <sup>3</sup>	% Settlers	Water Temp. (°C)	Sample Date	Mean# of Asiatic Clams/m <sup>3</sup>	Water Temp. (°C)	NOTES: % Gravid Asiatic Clam	LOCATION	SUB LOCATION	SAMPLE TYPE	COLLECTED BY
02/16/2005	0	0	7.9	02/16/2005	0	7.9	0	Outside Plar	Forebay	Quant	S Jones-Brier, J Justice
02/23/2005	0	0	8	02/23/2005	0	8	0	Outside Plar	Forebay	Quant	S Jones-Brier, J Justice
02/28/2005	0	0	7	02/28/2005	54	7	0	Outside Plar	Forebay	Quant	S Jones-Brier, Chris Coe
03/07/2005	0	0	7	03/07/2005	82	7	0	Outside Plar	Forebay	Quant	S Jones-Brier, Chris Coe
03/15/2005	0	0	10	03/15/2005	122	10	0	Outside Plar	Forebay	Quant	S Jones-Brier, Chris Coe
03/21/2005	0	0	10	03/21/2005	105	10	0	Outside Plar	Forebay	Quant	S Jones-Brier, Chris Coe
03/29/2005	0	0	12	03/29/2005	101	12	0	Outside Plar	Forebay	Quant	nes-Brier, Chris Coe, JRig
04/05/2005	0	0	13	04/05/2005	525	13	0	Outside Plar	Forebay	Quant	S Jones-Brier, J Rigsby
04/07/2005	0	0	14	04/07/2005	252	14	0	Outside Plar	Forebay	Quant	S Jones-Brier, J Rigsby
05/04/2005	0	0	17	05/04/2005	0	17	0	Outside Plar	Forebay	Quant	S Jones-Brier, J Rigsby
05/09/2005	0	0	18	05/09/2005	632	18	60%	Outside Plar	Forebay	Quant	S Jones-Brier, J Rigsby
05/12/2005	0	0	18	05/12/2005	549	18	0	Outside Plar	Forebay	Quant	S Jones-Brier, J Rigsby
05/17/2005	43	50	23	05/17/2005	106	23	0	Outside Plar	Forebay	Quant	J Rigsby, M MacCarroll
05/19/2005	31	50	21	05/19/2005	299	21	33%	Outside Plar	Forebay	Quant	ies-Brier, J Rigsby, MacC
05/23/2005	579	50	20	05/23/2005	22	20	0%	Outside Plar	Forebay	Quant	S Jones-Brier, J Rigsby
05/26/2005	242	50	20	05/26/2005	61	20	0	Outside Plar	Forebay	Quant	ies-Brier, J Rigsby, MacC
05/30/2005	1530	26	22	05/30/2005	1831	22	66%	Outside Plar	Forebay	Quant	S Jones-Brier, J Rigsby
06/02/2005	1344	30	22	06/02/2005	1989	22	0	Outside Plar	Forebay	Quant	S Jones-Brier, J Rigsby
06/07/2005	240	40	23	06/07/2005	613	23	0	Outside Plar	Forebay	Quant	S Jones-Brier, J Rigsby
06/09/2005	192	40	24	06/09/2005	425	24	0	Outside Plar	Forebay	Quant	3rier, J Rigsby, MacCarro
06/13/2005	236	42	24	06/13/2005	928	24	0	Outside Plar	Forebay	Quant	J Rigsby, M MacCarroll
06/15/2005	78	33	24.5	06/15/2005	2491	24.5	0	Outside Plar	Forebay	Quant	S Jones-Brier, J Rigsby
06/23/2005	0	0	24	06/23/2005	171	24	0	Outside Plar	Forebay	Quant	W. Allen
06/24/2005	0	0	24	06/24/2005	784	24	0	Outside Plar	Forebay	Quant	W. Allen
06/27/2005	0	0	24	06/27/2005	305	24	0	Outside Plar	Forebay	Quant	W. Allen
06/30/2005	0	0	24	06/30/2005	0	24	0	Outside Plar	Forebay	Quant	W. Allen
07/25/2005	24	100	27	07/25/2005	1205	27	0	Outside Plar	Forebay	Quant	S Jones-Brier, J Rigsby
07/28/2005	0	0	27	07/28/2005	0	27	0	Outside Plar	Forebay	Quant	S Jones-Brier, J Rigsby,
08/01/2005	28	100	28	08/01/2005	1505	28	0	Outside Plar	Forebay	Quant	S Jones-Brier, J Rigsby

Sample Date	Mean # of ZM/m <sup>3</sup>	% Settlers	Water Temp. (°C)	Sample Date	Mean# of Asiatic Clams/m <sup>3</sup>	Water Temp. (°C)	LOCATION	SUB LOCATION	SAMPLE TYPE	COLLECTED BY
04/01/2005	0	0	14	04/01/2005	29	14	INPLANT	lant Raw Wz	QUANT	Dick Adcock
04/06/2005	0	0	13	04/06/2005	81	13	INPLANT	lant Raw Wz	QUANT	Dick Adcock
04/08/2005	0	0	14	04/08/2005	54	14	INPLANT	lant Raw Wz	QUANT	Dick Adcock
04/13/2005	0	0	16	04/13/2005	106	16	INPLANT	lant Raw Wz	QUANT	Dick Adcock
04/15/2005	0	0	16	04/15/2005	0	16	INPLANT	lant Raw Wz	QUANT	Dick Adcock
06/23/2005	432	50	25	06/23/2005	154	25	INPLANT	lant Raw Wz	QUANT	Dick Adcock
06/24/2005	162	80	25	06/24/2005	30	25	INPLANT	lant Raw Wz	QUANT	Dick Adcock
06/29/2005	290	80	26	06/29/2005	168	26	INPLANT	lant Raw Wz	QUANT	Dick Adcock
07/01/2005	318	100	27	07/01/2005	127	27	INPLANT	lant Raw Wz	QUANT	Dick Adcock
07/06/2005	0	0	26	07/06/2005	677	26	INPLANT	lant Raw Wz	QUANT	Dick Adcock
07/08/2005	122	29	26	07/08/2005	1132	26	INPLANT	lant Raw Wz	QUANT	Dick Adcock
07/13/2005	51	33	26	07/13/2005	998	26	INPLANT	lant Raw Wz	QUANT	Dick Adcock
07/15/2005	0	0	26	07/15/2005	186	26	INPLANT	lant Raw Wz	QUANT	Dick Adcock
07/20/2005	38	50	26	07/20/2005	303	26	INPLANT	lant Raw Wz	QUANT	Dick Adcock
07/22/2005	0	0	27	07/22/2005	100	27	INPLANT	lant Raw Wz	QUANT	Dick Adcock
07/27/2005	143	100	27	07/27/2005	341	27	INPLANT	lant Raw Wz	QUANT	Dick Adcock
07/28/2005	488	100	27	07/28/2005	627	27	INPLANT	lant Raw Wz	QUANT	Dick Adcock
07/29/2005	90	20	27	07/29/2005	663	27	INPLANT	lant Raw Wz	QUANT	Dick Adcock
08/03/2005	0	0	27	08/03/2005	500	27	INPLANT	lant Raw Wz	QUANT	Dick Adcock
08/05/2005	0	0	27	08/05/2005	250	27	INPLANT	lant Raw Wz	QUANT	Dick Adcock
08/09/2005	383	35	27.5	08/09/2005	1067	27.5	INPLANT	lant Raw Wz	QUANT	CFT
08/11/2005	0	0	27	08/11/2005	0	27	INPLANT	lant Raw Wz	QUANT	CFT
08/16/2005	34	0	28	08/16/2005	464	28	INPLANT	lant Raw Wz	QUANT	CFT
08/19/2005	100	100	27.5	08/19/2005	367	27.5	INPLANT	lant Raw Wz	QUANT	Dick Adcock
08/24/2005	51	100	28	08/24/2005	237	28	INPLANT	lant Raw Wz	QUANT	CFT
08/26/2005	133	25	27	08/26/2005	467	27	INPLANT	lant Raw Wz	QUANT	CFC
08/30/2005	150	100	27.5	08/30/2005	267	27.5	INPLANT	lant Raw Wz	QUANT	CFT
09/02/2005	17	100	27.5	09/02/2005	85	27.5	INPLANT	lant Raw Wz	QUANT	CFT
09/06/2005	66	100	27.5	09/06/2005	115	27.5	INPLANT	lant Raw Wz	QUANT	CFT
09/08/2005	100	100	27	09/08/2005	483	27	INPLANT	lant Raw Wz	QUANT	CFT
09/12/2005	87	100	27	09/12/2005	105	27	INPLANT	lant Raw Wz	QUANT	CFT
09/16/2005	100	100	27	09/20/2005	117	27	INPLANT	lant Raw Wz	QUANT	CKC
09/22/2005	67	100	27	09/22/2005	250	27	INPLANT	lant Raw Wz	QUANT	CKC
09/23/2005	83	80	27	09/23/2005	317	27	INPLANT	lant Raw Wz	QUANT	CFT
09/26/2005	67	75	26.5	09/26/2005	917	26.5	INPLANT	lant Raw Wz	QUANT	CFT
09/31/2005	239	89	25	09/31/2005	80	25	INPLANT	lant Raw Wz	QUANT	Dick Adcock
10/04/2005	294	100	26	10/04/2005	214	26	INPLANT	lant Raw Wz	QUANT	Dick Adcock

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** **101 G**  
**PERMIT NUMBER** **DISCHARGE NUMBER**

F - FINAL  
 DIFFUSER DISCHARGE  
 EFFLUENT

MONITORING PERIOD  
 From 

YEAR	MO	DAY
05	09	01

 To 

YEAR	MO	DAY
05	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			
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	..	*****	0.020	0.038	19	0	30 / 30	GRAB
50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	0.10 MO AVG	0.10 INST MAX	MG/L		WEEK-DAYS	CALCTD
TEMPERATURE - C, RATE OF CHANGE	SAMPLE MEASUREMENT	*****	0.2	62	*****	*****		..	0	30 / 30	CALCTD
82234 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	2.0 DAILY MX	DEG C/HR	*****	*****	*****	***		CONTINUOUS	CALCTD
	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		
J. Randy Douet Site Vice President		423	843-6700	05	10	14
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

*Stephanie A. Howard*  
 Principal Environmental Engineer  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

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

The following injections occurred: 1. PCL-222 Copolymer (max. calc. conc. was 0.021mg/L--limit 0.2mg/L) 2. PCL-222 Phosphate (max. calc. conc. was 0.061mg/L--limit 0.2mg/L) 3. Biode detergent 73551 (max. calc. conc. was 0.014mg/L--limit 2.0mg/L) 4. H-150M (max. calc. conc. was 0.0332mg/L--limit 0.050mg/L) 5. H-150M (low detection level analytical method was <0.020mg/L--limit 0.050mg/L)

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 101 Q  
 PERMIT NUMBER DISCHARGE NUMBER

MONITORING PERIOD  
 From YEAR 05 MO 07 DAY 01 To YEAR 05 MO 09 DAY 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			
BORON, TOTAL	SAMPLE MEASUREMENT	*****	*****	**		<0.20		19	0	3 / 92	
01022 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	*****	MG/L		QTRLY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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				
J. Randy Douet		423 843-6700	05	10	14			
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)

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 101 T  
 PERMIT NUMBER DISCHARGE NUMBER

F - FINAL  
 BIOMONITORING FOR OUTFALL 101  
 EFFLUENT

MONITORING PERIOD  
 YEAR MO DAY YEAR MO DAY  
 From 05 09 01 To 05 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			
IC25 STATRE 7DAY CHR CERIODAPHNIA	SAMPLE MEASUREMENT	*****	*****	..	Monitoring Not Required	*****	*****	23			
TRP3B 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	45.2 MINIMUM	*****	*****	PERCENT		SEE PERMIT	COMPOS
IC25 STATRE 7DAY CHR PIMEPHALES	SAMPLE MEASUREMENT	*****	*****	..	Monitoring Not Required	*****	*****	23			
TRP6C 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	45.2 MINIMUM	*****	*****	PERCENT		SEE PERMIT	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  J. Randy Douet  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.	TELEPHONE		DATE		
		423	843-6700	05	10	14
		AREA CODE	NUMBER	YEAR	MO	DAY

*Stephanie A. Howard*  
 Principal Environmental Engineer  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 Toxicity was not sampled in September 2005.



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 103 G  
 PERMIT NUMBER DISCHARGE NUMBER

F - FINAL  
 LOW VOL. WASTE TREATMENT POND

MONITORING PERIOD  
 YEAR MO DAY  
 From 05 09 01 To 05 09 30

EFFLUENT

\*\*\* 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	*****	*****	**	6.5	*****	9.0	12	0	14 / 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	150	216	26	*****	16	24	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	<66	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	1.049	1.594	03	*****	*****	*****	**	0	30 / 30	TOTALZ
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	**		SEE PERMIT	TOTALZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  J. Randy Douet  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.	TELEPHONE		DATE		
		423	843-6700	05	10	14
		AREA CODE	NUMBER	YEAR	MO	DAY

Stephanie A. Howard  
 Principal Environmental Engineer  
 SIGNATURE OF PRINCIPAL EXECUTIVE  
 OFFICER OR AUTHORIZED AGENT

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

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)

TN0026450 107 G  
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR  
 (SUBR 01)  
 F - FINAL  
 METAL CLEANING WASTE POND  
 EFFLUENT

Form Approved.  
 OMB No. 2040-0004

MONITORING PERIOD  
 YEAR MO DAY YEAR MO DAY  
 From 05 09 01 To 05 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			
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	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
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		
J. Randy Douet Site Vice President		423	843-6700	05	10	14
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

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)

TN0026450 110 G  
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR  
 (SUBR 01)  
 F - FINAL  
 RECYCLED COOLING WATER  
 EFFLUENT

Form Approved.  
 OMB No. 2040-0004

MONITORING PERIOD  
 YEAR MO DAY  
 From 05 09 01 To 05 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			
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	04	*****	*****		04			
00010 Z 0 0	PERMIT REQUIREMENT	*****	*****	DEG C	*****	*****	38.3	DEG C		DAILY	GRAB-4
INSTREAM MONITORING							DAILY MX				
PH	SAMPLE MEASUREMENT	*****	*****	**		*****		12			
00400 1 0 0	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	SU		DAILY	GRAB
EFFLUENT GROSS VALUE					MINIMUM		MAXIMUM				
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
00530 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	30	MG/L		DAILY	COMPOS
EFFLUENT GROSS VALUE							DAILY MX				
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
00556 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	15	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE							DAILY MX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			03	*****	*****	*****	**			
50050 1 0 0	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	***		DAILY	CALCTD
EFFLUENT GROSS VALUE											
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
50060 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.10	MG/L		WEEKLY	GRAB-4
EFFLUENT GROSS VALUE							DAILY MX				
	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				
J. Randy Douet								
Site Vice President		423 843-6700		05	10	14		
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)

No Discharge this Period. Phosphorus, Copper, & Iron were included on the preprinted DMR forms but need to be removed since they are not parameters for this outfall. However, chlorine needs to be added to the preprinted DMR forms since it is a parameter for this outfall.

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

Form Approved.  
 OMB No. 2040-0004

TN0026450 110 T  
 PERMIT NUMBER DISCHARGE NUMBER

MONITORING PERIOD  
 YEAR MO DAY YEAR MO DAY  
 From 05 09 01 To 05 09 30

RECYCLED COOLING WATER  
 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	*****	*****	**		*****	*****	23			
TRP3B 1 0 0	PERMIT REQUIREMENT	*****	*****	****	45.2 MINIMUM	*****	*****	PERCENT		SEMI ANNUAL	COMPOS
IC25 STATRE 7DAY CHR PIMEPHALES	SAMPLE MEASUREMENT	*****	*****	**		*****	*****	23			
TRP6C 1 0 0	PERMIT REQUIREMENT	*****	*****	****	45.2 MINIMUM	*****	*****	PERCENT		SEMI ANNUAL	COMPOS
EFFLUENT GROSS VALUE											
	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				
J. Randy Douet		423	843-6700	05	10	14		
Site Vice President		Principal Environmental Engineer						
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)  
 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)

TN0026450 116 G  
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR  
 (SUBR 01)  
 F - FINAL  
 BACKWASH  
 EFFLUENT

Form Approved.  
 OMB No. 2040-0004

MONITORING PERIOD  
 YEAR MO DAY YEAR MO DAY  
 From 05 09 01 To 05 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										
	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		
J. Randy Douet Site Vice President		423	843-6700	05	10	14
TYPED OR PRINTED		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  
 YEAR MO DAY YEAR MO DAY  
 From 05 09 01 To 05 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	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		
J. Randy Douet Site Vice President		423	843-6700	05	10	14
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

Stephanie A. Howard  
 Principal Environmental Engineer  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

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

Form Approved.  
 OMB No. 2040-0004

TN0026450 118 G  
 PERMIT NUMBER DISCHARGE NUMBER

MONITORING PERIOD  
 YEAR MO DAY YEAR MO DAY  
 From 05 09 01 To 05 09 30

WASTEWATER & STORM WATER  
 EFFLUENT

\*\*\* 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			
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*****	*****	**		*****	*****	19			
00300 1 0 0	PERMIT REQUIREMENT	*****	*****	****	2.0 DAILY MN	*****	*****	MG/L		TWICE/ WEEK	GRAB
EFFLUENT GROSS VALUE											
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
00530 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	100 DAILY MX	MG/L		TWICE/ WEEK	GRAB
EFFLUENT GROSS VALUE											
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		25			
00545 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1.0 DAILY MX	ML/L		ONCE/ MONTH	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			03	*****	*****	*****	**			
50050 1 0 0	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	*		ONCE/ BATCH	ESTIMA
EFFLUENT GROSS VALUE											
	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				
J. Randy Douet		423 843-6700	05	10	14			
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)  
 During this reporting period, there has been no flow from the Dredge Pond other than that resulting from rainfall.