



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

March 13, 2006

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 FEBRUARY 2006

Enclosed is the February 2006 Discharge Monitoring Report for Sequoyah Nuclear Plant. 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

MONITORING PERIOD
 YEAR MO DAY YEAR MO DAY
 From 06 02 01 To 06 02 28

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			
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	11.7	04	0	28 / 28	MODEL
00010 Z 0 0 INSTREAM MONITORING	PERMIT REQUIREMENT	*****	*****	****	*****	*****	30.5 DAILY MX	DEG. C.		SEE PERMIT	CK REQ
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	24.1	04	0	28 / 28	RCORDR
00010 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	REPORT DAILY MX	DEG. C.		SEE PERMIT	CK REQ
TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG.C	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	2.9	04	0	28 / 28	CALCTD
00016 1 W 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	5.0 DAILY MX	DEG. C.		CONTINUOUS	CALCTD
PH	SAMPLE MEASUREMENT	*****	*****	**	7.5	*****	7.7	12	0	4 / 28	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	*****	4	4	19	0	1 / 28	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 MO AVG	100 DAILY MX	MG/L		MONTHLY	GRAB
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	**	*****	<5	<5	19	0	1 / 28	GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	15 MO AVG	20 DAILY MX	MG/L		MONTHLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	*****	1557	03	*****	*****	*****	**	0	28 / 28	RCORDR
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	REPORT DAILY MX	MGD	*****	*****	*****	****		CONTINUOUS	RCORDR

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	06	03	13
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)

No closed mode operation. CCW data for February is attached. Veliger monitoring information is attached. The flow rate characteristics through the diffusers were last calibrated for the previous permit cycle on 4/23/2003; and then again for the current permit cycle on 3/07/2006 (report attached).

CCW TRENCH

Date/Time Collected	Extractable Petroleum Hydrocarbons	Analysis Date/Time	Analyst	Method
02/01/2006 @ 0740	< 0.5	02/08/2006 @ 2008	CVS	EPA 8015B

CCW CHANNEL

Date/Time Collected	Extractable Petroleum Hydrocarbons	Analysis Date/Time	Analyst	Method
02/01/2006 @ 0745	< 0.5	02/08/2006 @ 1930	CVS	EPA 8015B

Sample Date	Mean # of ZM/m ³	% Settlers	Water Temp. (°C)	Sample Date	Mean# of Asiatic Clams/m ³	Water Temp. (°C)	LOCATION	SUB LOCATION	NOTES: % Gravid Asiatic Clam	COLLECTED BY
01/06/2006	0	0	7.5	01/06/2006	0	7.5	Inplant			Dickie Adcock
01/12/2006	0	0	8	01/12/2006	0	8	Inplant			Dickie Adcock
01/20/2006	19	100	8	01/20/2006	19	8	Inplant			CFT
01/26/2006	17	100	8	01/26/2006	0	8	Inplant			Dickie Adcock
02/01/2006	17	100	8	02/01/2006	0	8	Inplant			Dickie Adcock
02/07/2006	0	0	9	02/07/2006	0	9	Inplant			Dickie Adcock
02/14/2006	0	0	8	02/14/2006	167	8	Inplant			Dickie Adcock
02/22/2006	0	0	9	02/22/2006	32	9	Inplant			Dickie Adcock
03/03/2006	32	50	9	03/03/2006	16	9	Inplant			Dickie Adcock

S58 060310 800 – NPDES Correspondence

March 10, 2006

Stephanie Howard, SB 2A-SQN

SEQUOYAH NUCLEAR PLANT DIFFUSER DISCHARGE CALIBRATION

As required by NPDES Permit TN0026450, we have performed another calibration of the diffuser discharge for Outfall 101. The test was conducted on March 7, 2006. A summary of all tests from 1986 through 2006 is given in Attachment 1. A plot of the rating curve currently used to compute the flow through the diffusers to the Tennessee River is given in Attachment 2. Data for the 2006 test is highlighted. As shown, the 2006 results fall within the maximum "error" limits of ± 10 percent. This demonstrates that the hydraulic characteristics of the diffusers continue to remain stable and provide a good method of measuring the discharge from the plant. There is no need to update the rating curve at this time.

If you have any questions regarding this work, please call me at 423-632-2881.

Original signed by Paul N. Hopping

Paul N. Hopping
Technical Specialist
River Scheduling
WT 10B-K

PNH:CEG
Attachments
cc (Attachments):

Charles L. Bach, WT 10B-K
Ann Hurt, SB 2A-SQN

EDMS, WT 10C-K

Attachment 1

Calibration Data for SQN Diffuser Discharge, 1986 – 2006

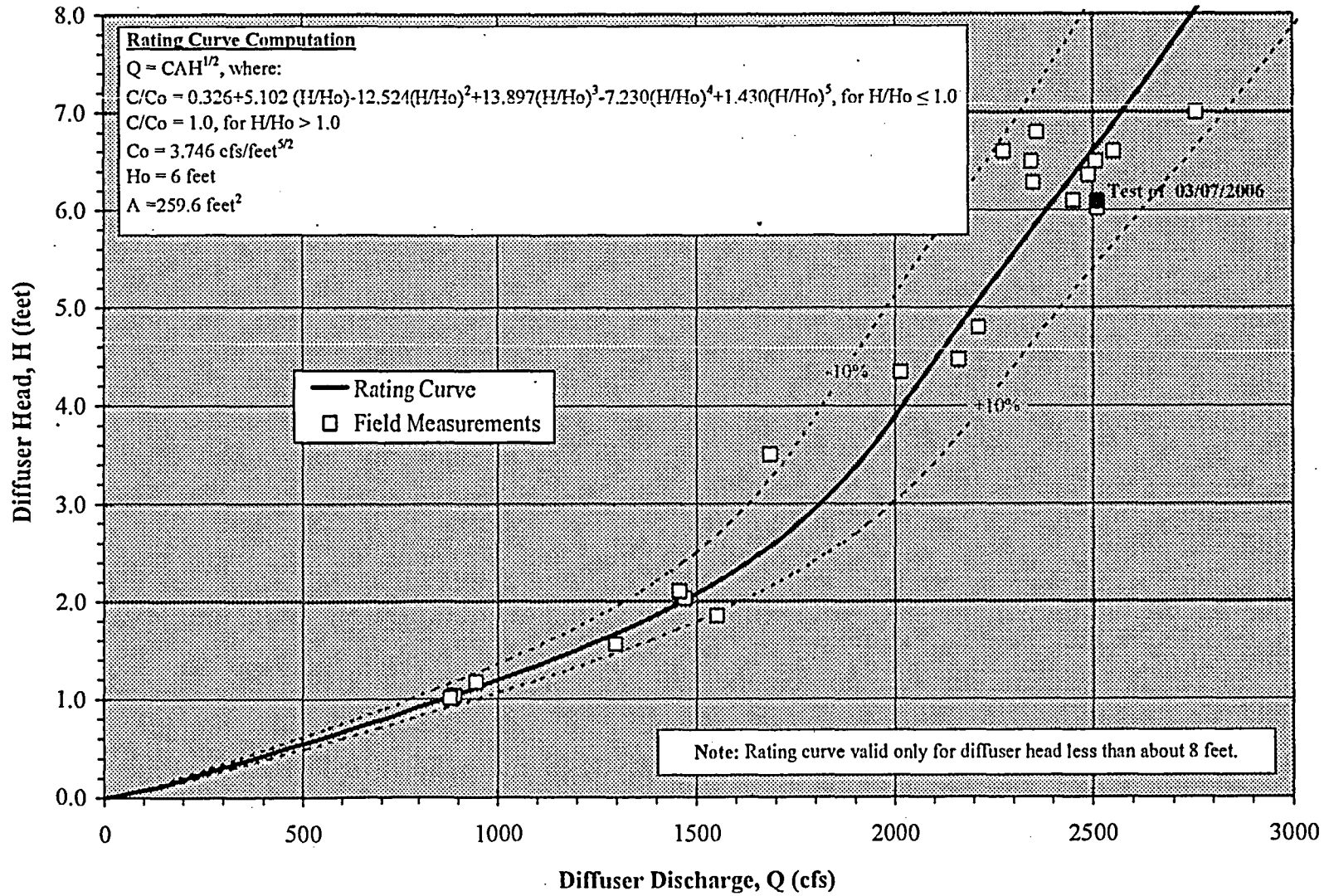
Test Date	Number Of Pumps		Discharge Measurement Method ^(A)	Field Measurements			
				Water Surface Elevation ^(B)		Diffuser Head H	Diffuser Discharge Q
	CCW	ERCW		Diffuser Pond	River		
				(feet MSL)	(feet MSL)	(feet)	(cfs)
12/18/1986	2	4	MM	678.03	677.00	1.03	889
12/17/1986	3	4	MM	678.46	676.90	1.56	1,297
12/18/1986	4	4	MM	680.41	676.90	3.51	1,686
12/19/1986	6	4	MM	683.53	677.17	6.36	2,490
03/28/1989	5	4	MM	680.80	676.46	4.34	2,015
03/29/1989	5	4	MM	680.82	676.35	4.47	2,161
03/22/1990	2	3	MM	678.44	677.27	1.17	943
04/05/1990	3	4	MM	680.57	678.54	2.03	1,470
10/05/1990	3	4	MM	682.30	680.20	2.10	1,457
12/19/1990	6	4	MM	682.54	676.26	6.28	2,350
04/03/1991	6	4	MM	684.20	678.18	6.02	2,511
05/22/1991	6	4	MM	688.70	682.60	6.10	2,451
12/10/1991	5	4	MM	682.70	677.90	4.80	2,213
04/10/1992	2	3	MM	680.13	679.12	1.01	879
02/18/1994 ^(C)	2	3	MM	679.42	678.13	1.29	871
06/14/1994	6	4	MM	688.50	682.00	6.50	2,507
04/03/1997 ^(D)	3	3	MM	679.50	677.30	2.20	1,223
05/23/1997	6	3	MM	688.40	681.80	6.60	2,551
05/06/1998	6	3	ADCP	688.20	681.70	6.50	2,345
05/11/1999	6	3	ADCP	689.20	682.60	6.60	2,274
10/10/2001	6	3	ADCP	687.10	680.30	6.80	2,359
07/27/2002	6	4	ADCP	689.40	682.40	7.00	2,759
04/23/2003	3	4	ADCP	684.05	682.20	1.85	1,552
03/07/2006	6	3	ADCP	682.06	675.97	6.09	2,511

Notes:

- (A) MM=Marsh-McBirney instrumentation. ADCP=Acoustic Doppler Current Profiler instrumentation.
- (B) The diffuser pond and river water surface elevations were recorded by instrumentation of the SQN Environmental Data Station. MSL=Mean Sea Level.
- (C) The test for 02/18/94 was performed after high rainfall and under very windy conditions. Due to the potential bias of these conditions, the resulting measurements are not used to determine the head-discharge rating curve for the diffuser discharge.
- (D) The test of 04/03/97 included a malfunction of the Marsh-McBirney compass, which prohibited the collection of data for flow direction. The diffuser discharge is based on an assumed flow direction. Due to the potential bias of this assumption, the resulting measurements are not used to determine the head-discharge rating curve for the diffuser discharge.

Attachment 2

Rating Curve for SQN Diffuser Discharge



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 To YEAR MO DAY
 06 02 01 06 02 28

*** 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	*****	*****	**	*****	<0.019	0.040	19	0	34 / 28	GRAB
50060 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	0.10 MO AVG	0.10 INST MAX	MG/L		WEEK-DAYS	CALCTD.
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	0.4	62	*****	*****		**	0	28 / 28	CALCTD
TEMPERATURE - C, RATE OF CHANGE	PERMIT REQUIREMENT	*****	2.0 DAILY MX	DEG C/HR	*****	*****	*****	****		CONTINUOUS	CALCTD
82234 1 0 0	SAMPLE MEASUREMENT										
EFFLUENT GROSS VALUE	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 TYPED OR PRINTED		423	843-6700	06	03	13
		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 0.005mg/L--limit 0.2mg/L) 2. PCL-222 Phosphate (max. calc. conc. was 0.013mg/L--limit 0.2mg/L) 3. Biode detergent 73551 (max. calc. conc. was 0.012mg/L--limit 2.0mg/L) 4. PCL-401 (max. calc. conc. was 0.008mg/L--limit 0.2mg/L)

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 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 06 02 01 To 06 02 28

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 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										

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J. Randy Douet Site Vice President		423	843-6700	06	03	13
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

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

Toxicity was not sampled in February 2006.

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 103 G
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR
 (SUBR 01)
 F - FINAL

Form Approved.
 OMB No. 2040-0004

LOW VOL. WASTE TREATMENT POND
 EFFLUENT

MONITORING PERIOD
 YEAR MO DAY YEAR MO DAY
 From 06 02 01 To 06 02 28

*** 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	*****	*****	**	7.0	*****	8.5	12	0	11 / 28	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	71	94	26	*****	8	10	19	0	4 / 28	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	<42	<47	26	*****	<5	<5	19	0	4 / 28	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	0.976	1.408	03	*****	*****	*****	**	0	28 / 28	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	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
J. Randy Douet Site Vice President TYPED OR PRINTED		423	843-6700	06	03	13
	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 LWWTP was isolated from 2/9/06 @ 1331 to 2/13/06 @ 1307.

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	107 G
PERMIT NUMBER	DISCHARGE NUMBER

 F - FINAL
 METAL CLEANING WASTE POND
 EFFLUENT

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
From 06	02	01	To 06	02	28

*** 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
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

 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.

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

TELEPHONE

423 843-6700

AREA CODE

NUMBER

DATE

06 03 13

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)
SODOY - 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 **110 G**
 PERMIT NUMBER DISCHARGE NUMBER

F - FINAL
 RECYCLED COOLING WATER
 EFFLUENT

MONITORING PERIOD

From **06 02 01** To **06 02 28**

*** 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			
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		WEEKLY	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	REPORT	MGD	*****	*****	*****	****		DAILY	CALCTD
EFFLUENT GROSS VALUE		MO AVG	DAILY MX								
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	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	06	03	13
			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)

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 T
 DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY	YEAR	MO	DAY
06	02	01	06	02	28

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			
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
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

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J. Randy Douet Site Vice President		423	843-6700	06	03	13
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)

No Discharge this Period

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

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 Address P.O. BOX 2000
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 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

ATTN: Stephanie A. Howard

MONITORING PERIOD
 From YEAR 06 MO 02 DAY 01 To YEAR 06 MO 02 DAY 28

*** 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 / 28	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 / 28	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										

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J. Randy Douet Site Vice President		423	843-6700	06	03	13
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)

TN0026450 **117 G**
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR
 (SUBR 01)
 F - FINAL
 BACKWASH
 EFFLUENT

Form Approved.
 OMB No. 2040-0004

ATTN: Stephanie A. Howard

MONITORING PERIOD
 From **06 02 01** To **06 02 28**

*** 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 / 28	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 / 28	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										

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J. Randy Douet Site Vice President		423 843-6700		06	03	13
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)

Form Approved.
 OMB No. 2040-0004

TN0026450	118 G
PERMIT NUMBER	DISCHARGE NUMBER

F - FINAL
 WASTEWATER & STORM WATER
 EFFLUENT

MONITORING PERIOD						
YEAR	MO	DAY	YEAR	MO	DAY	
06	02	01	To	06	02	28

*** 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	*****	*****	MG/L		TWICE/ WEEK	GRAB
EFFLUENT GROSS VALUE					DAILY MN						
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
00530 1 0 0	PERMIT REQUIREMENT	*****	*****	***	*****	*****	100	MG/L		TWICE/ WEEK	GRAB
EFFLUENT GROSS VALUE							DAILY MX				
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		25			
00545 1 0 0	PERMIT REQUIREMENT	*****	*****	***	*****	*****	1.0	ML/L		ONCE/ MONTH	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	*****	*****	*****	*		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 Site Vice President		423	843-6700	06	03	13
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)
 During this reporting period, there has been no flow from the Dredge Pond other than that resulting from rainfall.