



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

July 12, 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 JUNE 2006

Enclosed is the June 2006 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
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

ATTN: Stephanie A. Howard

| MONITORING PERIOD | | | | | |
|-------------------|-----------|-----------|--------------|-----------|-----------|
| YEAR | MO | DAY | YEAR | MO | DAY |
| From 06 | 06 | 01 | To 06 | 06 | 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 | ***** | ***** | ** | ***** | ***** | 29.4 | 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 | ***** | ***** | ** | ***** | ***** | 41.6 | 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 | ***** | ***** | ** | ***** | ***** | 2.8 | 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 | ***** | ***** | ** | 7.0 | ***** | 7.6 | 12 | 0 | 4 / 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 | ***** | ***** | ** | ***** | 22 | 22 | 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 | ***** | 1572 | 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 | | |
|---|---|-----------|----------|------|----|-----|
| | | AREA CODE | NUMBER | YEAR | MO | DAY |
| J. Randy Douet Site Vice President TYPED OR PRINTED | | 423 | 843-6700 | 06 | 07 | 12 |
| | | | | | | |

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. The following information is included in an attachment: 1. thermal compliance information 2. CCW data 3. veliger monitoring data. The following injections occurred: 1. PCL-222 Copolymer (max. calc. conc. was 0.014mg/L--limit 0.2mg/L) 2. PCL-222 Phosphate (max. calc. conc. was 0.041mg/L--limit 0.2mg/L)

June 2006 DMR Attachment

June 2006 Thermal Compliance Information

June 1-30: The downstream temperature and temperature rate-of-change are based on measurements from Station 8, the "backup temperature monitor" located at the end of the mixing zone (TRM 483.4). The temperature rise is based on the increase in temperature from measurements at Station 14, located upstream of the plant (TRM 490.5), and measurements at Station 8 (TRM 483.4). Consistent with the permit, measurements reported for the downstream temperature and the temperature rise represent daily maximum 24-hour rolling averages; and, measurements reported of the temperature rate-of-change represent 1-hour averages. Measurements were used rather than the numerical modeling system because of relatively low river flows. TVA has learned as a result of the continuing studies performed under Part III.G. of the permit that under low flow conditions, adjustments may be needed in the formulation of numerical model to improve its accuracy. Until river flows increase or appropriate model adjustments can be made, the modeling system is considered "out of service".

June 2006 CCW Data

| CCW TRENCH | | | | |
|---------------------|------------------------------------|--------------------|---------|-----------|
| Date/Time Collected | Extractable Petroleum Hydrocarbons | Analysis Date/Time | Analyst | Method |
| 06/13/2006 @ 1330 | 0.7 mg/L | 06/20/2006 @ 0146 | KAL | EPA 8015B |
| CCW CHANNEL | | | | |
| Date/Time Collected | Extractable Petroleum Hydrocarbons | Analysis Date/Time | Analyst | Method |
| 06/13/2006 @ 1335 | <0.5 mg/L | 06/20/2006 @ 0224 | KAL | EPA 8015B |

June 2006 Veliger Monitoring Information

| 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 |
|-------------|-----------------------------|------------|------------------|-------------|---------------------------------------|------------------|----------|--------------|------------------------------|---------------|
| 06/02/2006 | 0 | 0 | 23 | 06/02/2006 | 986 | 23 | Inplant | | | Dickie Adcock |
| 06/06/2006 | 65 | 50 | 24 | 06/06/2006 | 889 | 24 | Inplant | | | Dickie Adcock |
| 06/08/2006 | 0 | 0 | 23 | 06/08/2006 | 97 | 23 | Inplant | | | Dickie Adcock |
| 06/14/2006 | 0 | 0 | 25 | 06/14/2006 | 48 | 25 | Inplant | | | Dickie Adcock |
| 06/16/2006 | 48 | 33 | 25 | 06/16/2006 | 129 | 25 | Inplant | | | Dickie Adcock |
| 06/20/2006 | 32 | 0 | 26 | 06/20/2006 | 162 | 26 | Inplant | | | Dickie Adcock |
| 06/23/2006 | 97 | 33 | 27 | 06/23/2006 | 113 | 27 | Inplant | | | Dickie Adcock |
| 06/27/2006 | 0 | 0 | 27 | 06/27/2006 | 97 | 27 | Inplant | | | Dickie Adcock |
| 06/29/2006 | 291 | 55 | 26 | 06/29/2006 | 113 | 26 | Inplant | | | Dickie Adcock |

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

Name TVA - SEQUOYAH NUCLEAR PLANTAddress P.O. BOX 2000(INTEROFFICE SB-2A)SODDY - DAISY TN 37384Facility TVA - SEQUOYAH NUCLEAR PLANTLocation HAMILTON COUNTYNATIONAL 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 G

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

From
YEAR MO DAY
06 06 01To
YEAR MO DAY
06 06 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 | | | |
| CHLORINE, TOTAL RESIDUAL | SAMPLE MEASUREMENT | ***** | ***** | ** | ***** | 0.020 | 0.030 | 19 | 0 | 26 / 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 | ***** | 1.9 | 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 | | | | | | | | | | |
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| | 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 | 07 | 12 |
| TYPED OR PRINTED | | AREA CODE | NUMBER | YEAR | MO | DAY |

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

The following injections occurred: 3. Biodetergent 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) 5. H-150M (max. calc. conc. was 0.036mg/L--limit 0.050mg/L) 6. 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)

Form Approved.
 OMB No. 2040-0004

| | |
|---------------|------------------|
| TN0026450 | 101 Q |
| PERMIT NUMBER | DISCHARGE NUMBER |

| MONITORING PERIOD | | | | | |
|-------------------|----|-----|------|----|-----|
| YEAR | MO | DAY | YEAR | MO | DAY |
| 06 | 04 | 01 | 06 | 06 | 30 |

From

To

F - FINAL
 DIFFUSER DISCHARGE
 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 | | | |
| BORON, TOTAL | SAMPLE MEASUREMENT | ***** | ***** | ** | | <0.20 | | 19 | 0 | 1 / 91 | |
| 01022 1 0 0 | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | REPORT | ***** | MG/L | | QTRLY | GRAB |
| EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
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| | PERMIT REQUIREMENT | | | | | | | | | | |

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|--|---|--|--|-----------|--------|------|----|-----|
| 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 | | 06 | 07 | 12 | | |
| 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)

Boron was sampled on 04/05/2006 @ 0805.

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

MONITORING PERIOD

From

| | | |
|------|----|-----|
| YEAR | MO | DAY |
| 06 | 06 | 01 |

 To

| | | |
|------|----|-----|
| YEAR | MO | DAY |
| 06 | 06 | 30 |

F - FINAL

BIOMONITORING FOR OUTFALL 101

EFFLUENT

*** 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 | | | | | | | | | | |
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| | 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 | 07 | 12 |
| TYPED OR PRINTED | | AREA CODE | NUMBER | YEAR | MO | DAY |

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

Toxicity was not sampled in June 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)

MAJOR
 (SUBR 01)

Form Approved.
 OMB No. 2040-0004

TN0026450 **101 Y**
PERMIT NUMBER **DISCHARGE NUMBER**

F - FINAL
 ANNUAL MONITORING (PCBS)
 EFFLUENT

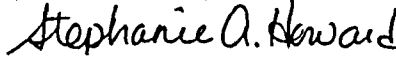
ATTN: Stephanie A. Howard

MONITORING PERIOD
 From **05 07 01** To **06 06 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 | | | |
| POLYCHLORINATED BIPHENYLS 39521 1 0 0 EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | ***** | ***** | ** | ***** | ***** | <0.0 | 19 | 0 | 1 / 365 | GRAB |
| | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | ***** | 0.0 | MG/L | | ANNUAL | GRAB |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
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| | 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. |  Stephanie A. Howard Principal Environmental Engineer | TELEPHONE | | DATE | | |
| | | | 423 | 843-6700 | 06 | 07 | 12 |
| | | SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | AREA CODE | NUMBER | YEAR | MO | DAY |

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

PCBs were sampled on 06/23/2006 @ 0845.

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 37384Facility **TVA - SEQUOYAH NUCLEAR PLANT**Location **HAMILTON COUNTY**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

MAJOR

(SUBR 01)

F - FINAL

LOW VOL. WASTE TREATMENT POND

EFFLUENT

Form Approved.

OMB No. 2040-0004

TN0026450

103 G

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

YEAR MO DAY

YEAR MO DAY

From

06 06 01

To

06 06 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 | | | |
| PH | SAMPLE MEASUREMENT | ***** | ***** | ** | 6.9 | ***** | 9.0 | 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 | 123 | 170 | 26 | ***** | 14 | 19 | 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 | <44 | <49 | 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 | 1.170 | 1.361 | 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 | 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 | 07 | 12 |
| TYPED OR PRINTED | | 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 37384Facility **TVA - SEQUOYAH NUCLEAR PLANT**Location **HAMILTON COUNTY**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

MAJOR

(SUBR 01)

F - FINAL

METAL CLEANING WASTE POND

EFFLUENT

Form Approved.

OMB No. 2040-0004

TN0026450

107 G

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

| YEAR | MO | DAY | YEAR | MO | DAY |
|------|----|-----|------|----|-----|
| 06 | 06 | 01 | 06 | 06 | 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 | | | |
| 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 | | 423 843-6700 | | 06 | 07 | 12 |
| Site Vice President | | AREA CODE NUMBER | | YEAR | MO | DAY |
| TYPED OR PRINTED | | SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | | | | |

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

No Discharge this Period

Name **TVA - SEQUOYAH NUCLEAR PLANT**

DISCHARGE MONITORING REPORT (DMR)

(SUBR 01)

OMB No. 2040-0004

 Address **P.O. BOX 2000**

(INTEROFFICE SB-2A)

SODDY - DAISY TN 37384

 Facility **TVA - SEQUOYAH NUCLEAR PLANT**

 Location **HAMILTON COUNTY**
TN0026450
110 G

PERMIT NUMBER

DISCHARGE NUMBER

F - FINAL

RECYCLED COOLING WATER

EFFLUENT

 *** NO DISCHARGE ☒ ***

ATTN: Stephanie A. Howard

 From **06 06 01** To **06 06 30**

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 | | 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 | 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 | 06 | 07 | 12 |
| Site Vice President | | | | | | |
| 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)

MAJOR

(SUBR 01)

F - FINAL

RECYCLED COOLING WATER

EFFLUENT

Form Approved.

OMB No. 2040-0004

TN0026450 **110 T**
PERMIT NUMBER **DISCHARGE NUMBER**

MONITORING PERIOD
 From **06 06 01** To **06 06 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 | ***** | ***** | ** | | ***** | ***** | 23 | | | |
| TRP3B 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | 45.2 MINIMUM | ***** | ***** | PERCENT | | SEMI ANNUAL | COMPOS |
| IC25 STATRE 7DAY CHR PIMEPHALES | SAMPLE MEASUREMENT | ***** | ***** | ** | | ***** | ***** | 23 | | | |
| TRP6C 1 0 0 EFFLUENT GROSS VALUE | 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 | | | | | | | | | | |

| | | | | | | |
|--|---|--------------|--------|------|----|-----|
| 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 | 07 | 12 | |
| 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)

MAJOR

(SUBR 01)

F - FINAL

BACKWASH

EFFLUENT

Form Approved.

OMB No. 2040-0004

TN0026450

116 G

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

From **06 06 01** To **06 06 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 | | | | | | | | | | |

| | | | | | | |
|--|---|-----------|----------|------|----|-----|
| 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 | 07 | 12 |
| 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 06 06 01 To 06 06 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 | | | | | | | | | | |
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| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |

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|---|---|-----------|----------|------|----|-----|
| J. Randy Douet Site Vice President TYPED OR PRINTED | | 423 | 843-6700 | 06 | 07 | 12 |
| | | 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)

 Form Approved.
 OMB No. 2040-0004

| | |
|---------------|------------------|
| TN0026450 | 118 G |
| PERMIT NUMBER | DISCHARGE NUMBER |

 F - FINAL
 WASTEWATER & STORM WATER
 EFFLUENT

ATTN: Stephanie A. Howard

| MONITORING PERIOD | | | | | |
|-------------------|----|-----|------|----|-----|
| YEAR | MO | DAY | YEAR | MO | DAY |
| 06 | 06 | 01 | 06 | 06 | 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 | | | |
| 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 | | | | | | | | | | |

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|--|---|-----------|----------|------|----|-----|
| J. Randy Douet Site Vice President | | 423 | 843-6700 | 06 | 07 | 12 |
| 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.