



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

February 9, 2012

Ms. Dana Waits  
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

Dear Ms. Waits:

**SEQUOYAH NUCLEAR PLANT - DISCHARGE MONITORING REPORT FOR JANUARY 2012**

Enclosed is the January 2012 Discharge Monitoring Report for Sequoyah Nuclear Plant. If you have any questions or need additional information, please contact Brad Love at (423) 843-6714 of Sequoyah's Environmental staff.

*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.*

Sincerely,

John F. Carlin  
Site Vice President  
Sequoyah Nuclear Plant

Enclosures

cc (Enclosures):

Chattanooga Environmental Field Office  
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, DC 20555

IE25  
NRR

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

Name **TVA - SEQUOYAH NUCLEAR PLANT**  
 Address **P.O. BOX 2000**  
**(INTEROFFICE OPS-5N-SQN)**  
**SODDY - DAISY, TN 37384**  
 Facility **TVA - SEQUOYAH NUCLEAR PLANT**  
 Location **HAMILTON COUNTY**

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

MAJOR  
 (SUBR 01)  
 F - FINAL  
 DIFFUSER DISCHARGE  
 EFFLUENT

Form Approved.  
 OMB No. 2040-0004

**TN0026450**  
**PERMIT NUMBER**

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

**MONITORING PERIOD**

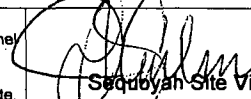
| YEAR | MO | DAY | YEAR | MO | DAY |
|------|----|-----|------|----|-----|
| 12   | 01 | 01  | 12   | 01 | 31  |

From To

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER                                | <div></div>        | 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 | *****               | *****               | **       | *****                    | *****      | 26.0                | 04      | 0      | 31 / 31               | RCORDR      |
| 00010 1 0<br>EFFLUENT GROSS              | PERMIT REQUIREMENT | *****               | *****               | ****     | *****                    | *****      | Req. Mon. DAILY MAX | DEG. C. |        | CONTINUOUS            | CALCTD      |
| TEMPERATURE, WATER DEG. CENTIGRADE       | SAMPLE MEASUREMENT | *****               | *****               | **       | *****                    | *****      | 10.6                | 04      | 0      | 31 / 31               | MODEL       |
| 00010 Z 0<br>INSTREAM MONITORING         | PERMIT REQUIREMENT | *****               | *****               | ****     | *****                    | *****      | 30.5 DAILY MX       | DEG. C. |        | CONTINUOUS            | CALCTD      |
| TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG.C | SAMPLE MEASUREMENT | *****               | *****               | **       | *****                    | *****      | 2                   | 04      | 0      | 31 / 31               | CALCTD      |
| 00016 1 1<br>EFFLUENT GROSS              | PERMIT REQUIREMENT | *****               | *****               | ****     | *****                    | *****      | 5 DAILY MX          | DEG. C. |        | CONTINUOUS            | CALCTD      |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT | SAMPLE MEASUREMENT | *****               | 1668                | 03       | *****                    | *****      | *****               | **      | 0      | 31 / 31               | RCORDR      |
| 50050 1 0<br>EFFLUENT GROSS              | PERMIT REQUIREMENT | *****               | Req. Mon. DAILY MAX | MGD      | *****                    | *****      | *****               | ****    |        | CONTINUOUS            | RCORDR      |
| CHLORINE, TOTAL RESIDUAL                 | SAMPLE MEASUREMENT | *****               | *****               | **       | *****                    | 0.029      | 0.045               | 19      | 0      | 10 / 31               | GRAB        |
| 50060 1 0<br>EFFLUENT GROSS              | PERMIT REQUIREMENT | *****               | *****               | ****     | *****                    | 0.1 MO AVG | 0.1 DAILY MAX       | MG/L    |        | FIVE PER WEEK         | CALCTD      |
| TEMPERATURE - C, RATE OF CHANGE          | SAMPLE MEASUREMENT | *****               | 0                   | 62       | *****                    | *****      |                     | **      | 0      | 31 / 31               | CALCTD      |
| 82234 1 0<br>EFFLUENT GROSS              | PERMIT REQUIREMENT | *****               | 2 DAILY MX          | DEG C/HR | *****                    | *****      | *****               | ****    |        | CONTINUOUS            | CALCTD      |
|  | SAMPLE MEASUREMENT |                     |                     |          |                          |            |                     |         |        |                       |             |
|  | PERMIT REQUIREMENT |                     |                     |          |                          |            |                     |         |        |                       |             |

|  |   |   |           |          |      |    |     |
|--|---|---|-----------|----------|------|----|-----|
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER<br><br>John T. Carlin<br><br>Sequoyah Site Vice President<br><br>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. | <br>Sequoyah Site Vice President<br>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | TELEPHONE |          | DATE |    |     |
|  |   |   | 423       | 843-7001 | 12   | 02 | 08  |
|  |   |   | AREA CODE | NUMBER   | YEAR | MO | DAY |

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 No closed mode operation. Veliger monitoring data is included as an attachment.

| Sample Date | Mean # of<br>ZM/m3 | % Settlers | Water<br>Temp. (°C) | Sample Date | Mean# of<br>Asiatic<br>Clams/m3 | Water<br>Temp. (°C) | LOCATION | SUB LOCATION  | NOTES: %<br>Gravid Asiatic<br>Clam | COLLECTED BY |
|-------------|--------------------|------------|---------------------|-------------|---------------------------------|---------------------|----------|---------------|------------------------------------|--------------|
| 01/03/2012  | 14                 | 100        | 26                  | 01/03/2012  | 0                               | 26                  |          | 1-25-545      |                                    | PKS          |
| 01/10/2012  | 0                  | 0          | 9                   | 01/10/2011  | 0                               | 9                   | RCW      |               |                                    | WBE          |
| 01/17/2011  | 0                  | 0          | 10                  | 01/17/2011  | 0                               | 10                  |          | 1-ISV-24-1234 |                                    | PB           |
| 01/24/2012  | 0                  | 0          | 13                  | 01/24/2012  | 0                               | 13                  |          | 1-25-545      |                                    | WPT          |
| 01/31/2012  | 0                  | 0          | 17.6                | 01/31/2012  | 0                               | 17.6                |          | 1-25-545      |                                    | CR           |

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

Name **TVA - SEQUOYAH NUCLEAR PLANT**  
 Address **P.O. BOX 2000**  
**(INTEROFFICE OPS-5N-SQN)**  
**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**  
**PERMIT NUMBER**

**101 T**  
**DISCHARGE NUMBER**

F - FINAL  
 BIOMONITORING FOR OUTFALL 101

**MONITORING PERIOD**

| YEAR | MO | DAY |
|------|----|-----|
| 12   | 01 | 01  |

From

| YEAR | MO | DAY |
|------|----|-----|
| 12   | 01 | 31  |

To

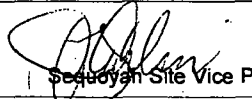
EFFLUENT

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form.

ATTN: Brad Love

| 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<br>EFFLUENT GROSS       | PERMIT REQUIREMENT | *****               | *****   | ****  | 43.2<br>MINIMUM          | *****   | *****   | PERCENT |        | SEMI ANNUAL           | COMPOS      |
| IC25 STATRE 7DAY CHR PIMEPHALES   | SAMPLE MEASUREMENT | *****               | *****   | **    | Monitoring Not Required  | *****   | *****   | 23      |        |                       |             |
| TRP6C 1 0<br>EFFLUENT GROSS       | PERMIT REQUIREMENT | *****               | *****   | ****  | 43.2<br>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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| 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. | <br>Sequoyah Site Vice President<br>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | TELEPHONE |          | DATE |    |     |
| John T. Carlin                         |   |   | 423       | 843-7001 | 12   | 02 | 08  |
| Sequoyah Site Vice President           |   |   | AREA CODE | NUMBER   | YEAR | MO | DAY |
| TYPED OR PRINTED                       |   |   |           |          |      |    |     |

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

Toxicity was not sampled in January 2012.

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

Name **TVA - SEQUOYAH NUCLEAR PLANT**  
 Address **P.O. BOX 2000**  
**(INTEROFFICE OPS-5N-SQN)**  
**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  
 EFFLUENT

| MONITORING PERIOD |    |     |      |    |     |
|-------------------|----|-----|------|----|-----|
| YEAR              | MO | DAY | YEAR | MO | DAY |
| 12                | 01 | 01  | 12   | 01 | 31  |


From

To

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER                                   |                    | QUANTITY OR LOADING |                      |       | QUALITY OR CONCENTRATION |              |                 |       | NO. EX | FREQUENCY OF ANALYSIS | SAMPLE TYPE |
|---|--------------------|---------------------|----------------------|-------|--------------------------|--------------|-----------------|-------|--------|-----------------------|-------------|
|   |                    | AVERAGE             | MAXIMUM              | UNITS | MINIMUM                  | AVERAGE      | MAXIMUM         | UNITS |        |                       |             |
| PH  | SAMPLE MEASUREMENT | *****               | *****                | **    | 7                        | *****        | 8               | 12    | 0      | 15 / 31               | GRAB        |
| 00400 1 0<br>EFFLUENT GROSS                 | PERMIT REQUIREMENT | *****               | *****                | **    | 6<br>MINIMUM             | *****        | 9<br>MAXIMUM    | SU    |        | THREE/<br>WEEK        | GRAB        |
| SOLIDS, TOTAL SUSPENDED                     | SAMPLE MEASUREMENT | *****               | *****                | **    | *****                    | 6            | 6               | 19    | 0      | 2 / 31                | GRAB        |
| 00530 1 0<br>EFFLUENT GROSS                 | PERMIT REQUIREMENT | *****               | *****                | **    | *****                    | 30<br>MO AVG | 100<br>DAILY MX | MG/L  |        | TWICE/<br>MONTH       | GRAB        |
| OIL AND GREASE                              | SAMPLE MEASUREMENT | *****               | *****                | **    | *****                    | <6           | <6              | 19    | 0      | 2 / 31                | GRAB        |
| 00556 1 0<br>EFFLUENT GROSS                 | PERMIT REQUIREMENT | *****               | *****                | **    | *****                    | 15<br>MO AVG | 20<br>DAILY MX  | MG/L  |        | TWICE/<br>MONTH       | GRAB        |
| FLOW, IN CONDUIT OR THRU<br>TREATMENT PLANT | SAMPLE MEASUREMENT | 1.077               | 1.187                | 03    | *****                    | *****        | *****           | **    | 0      | 31 / 31               | RCORDR      |
| 50050 1 0<br>EFFLUENT GROSS                 | PERMIT REQUIREMENT | Req. Mon.<br>MO AVG | Req. Mon<br>DAILY MX | MGD   | *****                    | *****        | *****           | **    |        | SEE<br>PERMIT         | RCORDR      |
|   | SAMPLE MEASUREMENT |                     |                      |       |                          |              |                 |       |        |                       |             |
|   | PERMIT REQUIREMENT |                     |                      |       |                          |              |                 |       |        |                       |             |
|   | SAMPLE MEASUREMENT |                     |                      |       |                          |              |                 |       |        |                       |             |
|   | PERMIT REQUIREMENT |                     |                      |       |                          |              |                 |       |        |                       |             |
|   | SAMPLE MEASUREMENT |                     |                      |       |                          |              |                 |       |        |                       |             |
|   | PERMIT REQUIREMENT |                     |                      |       |                          |              |                 |       |        |                       |             |

|  |   |   |           |          |      |    |     |  |
|--|---|---|-----------|----------|------|----|-----|--|
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| John T. Carlin                         |   |   | 423       | 843-7001 | 12   | 02 | 08  |  |
| Sequoyah 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)

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

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

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

MAJOR  
 (SUBR 01)

Form Approved.  
 OMB No. 2040-0004

**TN0026450** **110 G**  
**PERMIT NUMBER** **DISCHARGE NUMBER**

F - FINAL  
 RECYCLED COOLING WATER  
 EFFLUENT

**MONITORING PERIOD**  

| YEAR | MO | DAY | YEAR | MO | DAY |
|------|----|-----|------|----|-----|
| 12   | 01 | 01  | 12   | 01 | 31  |

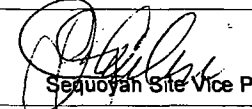
From

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 |        |                       |             |
| TEMPERATURE, WATER DEG. CENTIGRADE       | SAMPLE MEASUREMENT | *****               | *****              | **    | *****                    | *****      |                 | 04    |        |                       |             |
| 00010 1 0                                | PERMIT REQUIREMENT | *****               | *****              | **    | *****                    | *****      | REPORT DAILY MX | DEG C |        | CONTINUOUS            | CALC'D      |
| EFFLUENT GROSS VALUE                     |                    |                     |                    |       |                          |            |                 |       |        |                       |             |
| TEMPERATURE, WATER DEG. CENTIGRADE       | SAMPLE MEASUREMENT | *****               | *****              | **    | *****                    | *****      |                 | 04    |        |                       |             |
| 00010 Z 0                                | PERMIT REQUIREMENT | *****               | *****              | **    | *****                    | *****      | 30.5 DAILY MX   | DEG C |        | CONTINUOUS            | CALC'D      |
| INSTREAM MONITORING                      |                    |                     |                    |       |                          |            |                 |       |        |                       |             |
| TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG.C | SAMPLE MEASUREMENT | *****               | *****              | **    | *****                    | *****      |                 | 04    |        |                       |             |
| 00016 1 0                                | PERMIT REQUIREMENT | *****               | *****              | **    | *****                    | *****      | 5 DAILY MX      | DEG C |        | CONTINUOUS            | CALC'D      |
| EFFLUENT GROSS VALUE                     |                    |                     |                    |       |                          |            |                 |       |        |                       |             |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT | SAMPLE MEASUREMENT | *****               |                    | 03    | *****                    | *****      | *****           | **    |        |                       |             |
| 50050 1 0                                | PERMIT REQUIREMENT | *****               | Req. Mon. DAILY MX | MGD   | *****                    | *****      | *****           | **    |        | CONTINUOUS            | RCOR'D      |
| EFFLUENT GROSS VALUE                     |                    |                     |                    |       |                          |            |                 |       |        |                       |             |
| CHLORINE, TOTAL RESIDUAL                 | SAMPLE MEASUREMENT | *****               | *****              | **    | *****                    |            |                 | 19    |        |                       |             |
| 50060 1 0                                | PERMIT REQUIREMENT | *****               | *****              | **    | *****                    | 0.1 MO AVG | 0.1 DAILY MX    | MG/L  |        | Five per Week         | CALC'D      |
| EFFLUENT GROSS VALUE                     |                    |                     |                    |       |                          |            |                 |       |        |                       |             |
| TEMPERATURE - C, RATE OF CHANGE          | SAMPLE MEASUREMENT | *****               |                    | 04    | *****                    | *****      | *****           | **    |        |                       |             |
| 82234 1 0                                | PERMIT REQUIREMENT | *****               | 2 DAILY MX         | DEG C | *****                    | *****      | *****           | **    |        | CONTINUOUS            | CALC'D      |
| EFFLUENT GROSS VALUE                     |                    |                     |                    |       |                          |            |                 |       |        |                       |             |
|  | SAMPLE MEASUREMENT |                     |                    |       |                          |            |                 |       |        |                       |             |
|  | PERMIT REQUIREMENT |                     |                    |       |                          |            |                 |       |        |                       |             |

|  |   |   |              |        |      |    |     |
|--|---|---|--------------|--------|------|----|-----|
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER<br><br>John T. Carlin<br><br>Sequoyah Site Vice President<br><br>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. | <br>Sequoyah Site Vice President<br>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | TELEPHONE    |        | DATE |    |     |
|  |   |   | 423 843-7001 | 12     | 02   | 08 |     |
|  |   |   | 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 OPS-5N-SQN)**  
**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** **110 T**  
**PERMIT NUMBER** **DISCHARGE NUMBER**

F - FINAL  
 RECYCLED COOLING WATER  
 EFFLUENT

MONITORING PERIOD  

| YEAR | MO | DAY | YEAR | MO | DAY |
|------|----|-----|------|----|-----|
| 12   | 01 | 01  | 12   | 01 | 31  |

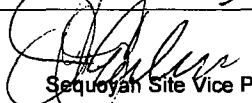
From

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 | *****               | *****   | ****  | 43.2                     | *****   | *****   | PERCENT |        | SEMI                  | COMPOS      |
| EFFLUENT GROSS VALUE              |                    |                     |         |       | MINIMUM                  |         |         |         |        | ANNUAL                |             |
| IC25 STATRE 7DAY CHR PIMEPHALES   | SAMPLE MEASUREMENT | *****               | *****   | **    |                          | *****   | *****   | 23      |        |                       |             |
| TRP6C 1 0 0                       | PERMIT REQUIREMENT | *****               | *****   | ****  | 43.2                     | *****   | *****   | PERCENT |        | SEMI                  | COMPOS      |
| EFFLUENT GROSS VALUE              |                    |                     |         |       | MINIMUM                  |         |         |         |        | ANNUAL                |             |
|                                   | 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<br><br>John T. Carlin<br><br>Sequoyah Site Vice President<br><br>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. | <br>Sequoyah Site Vice President<br>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | TELEPHONE |          | DATE |    |     |
|  |   |   | 423       | 843-7001 | 12   | 02 | 08  |
|  |   |   | 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 OPS-5N-SQN)  
**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 |
|------|----|-----|------|----|-----|
| 12   | 01 | 01  | 12   | 01 | 31  |


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 |        |                       |             |
| OXYGEN, DISSOLVED (DO)<br>00300 1 0<br>EFFLUENT GROSS                      | SAMPLE MEASUREMENT | *****               | *****                 | **    |                          | *****   | *****           | 19    |        |                       |             |
|  | PERMIT REQUIREMENT | *****               | *****                 | ****  | 2<br>MINIMUM             | *****   | *****           | MG/L  |        | TWICE/<br>WEEK        | GRAB        |
| SOLIDS, TOTAL SUSPENDED<br>00530 1 0<br>EFFLUENT GROSS                     | SAMPLE MEASUREMENT | *****               | *****                 | **    | *****                    | *****   |                 | 19    |        |                       |             |
|  | PERMIT REQUIREMENT | *****               | *****                 | ****  | *****                    | *****   | 100<br>DAILY MX | MG/L  |        | TWICE/<br>WEEK        | GRAB        |
| SOLIDS, SETTLEABLE<br>00545 1 0<br>EFFLUENT GROSS                          | SAMPLE MEASUREMENT | *****               | *****                 | **    | *****                    | *****   |                 | 25    |        |                       |             |
|  | PERMIT REQUIREMENT | *****               | *****                 | ****  | *****                    | *****   | 1<br>DAILY MX   | ML/L  |        | ONCE/<br>MONTH        | GRAB        |
| FLOW, IN CONDUIT OR THRU<br>TREATMENT PLANT<br>50050 1 0<br>EFFLUENT GROSS | SAMPLE MEASUREMENT |                     |                       | 03    | *****                    | *****   | *****           | **    |        |                       |             |
|  | PERMIT REQUIREMENT | Req. Mon.<br>MO AVG | Req. Mon.<br>DAILY MX | MGD   | *****                    | *****   | *****           | *     |        | ONCE/<br>BATCH        | ESTIMA      |
|  | SAMPLE MEASUREMENT |                     |                       |       |                          |         |                 |       |        |                       |             |
|  | PERMIT REQUIREMENT |                     |                       |       |                          |         |                 |       |        |                       |             |
|  | SAMPLE MEASUREMENT |                     |                       |       |                          |         |                 |       |        |                       |             |
|  | PERMIT REQUIREMENT |                     |                       |       |                          |         |                 |       |        |                       |             |
|  | SAMPLE MEASUREMENT |                     |                       |       |                          |         |                 |       |        |                       |             |
|  | PERMIT REQUIREMENT |                     |                       |       |                          |         |                 |       |        |                       |             |

|  |   |   |           |          |      |    |     |
|--|---|---|-----------|----------|------|----|-----|
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER<br><br>John T. Carlin<br><br>Sequoyah Site Vice President<br><br>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. | <br>Sequoyah Site Vice President<br>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | TELEPHONE |          | DATE |    |     |
|  |   |   | 423       | 843-7001 | 12   | 02 | 08  |
|  |   |   | 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.