NUCLEAR FUEL SERVICES, INC.
a BWX Technologies, Inc. company

1205 banner hill road ■ erwin, tn 37650 ■ phone 423.743.9141
www.nuclearfuelservices.com

ELECTRONIC SUBMITTAL

21G-16-0171
GOV-05-01-01
ACF-16-0250

September 8, 2016

Ms. Dana Waits
Enforcement and Compliance Section
Tennessee Department of Environment and Conservation
Division of Water Pollution Control
William R. Snodgrass Tennessee Tower, 11th Floor
312 Rosa L. Parks Avenue
Nashville, TN 37243

References: Nuclear Fuel Services, Inc. (NFS) NPDES Permit No. TN0002038

Dear Ms. Waits:

As required by Part I, D.1, of NPDES Permit #TN0002038, we hereby electronically submit the original Monthly Discharge Monitoring Report (DMR), EPA Form 3320-1, for August 2016, as an Attachment.

Laboratory analyses for required permit parameters were performed on thirteen (13) Waste Water Treatment Facility (WWTF) batches discharged during this reporting period. All values were indicated by these analyses to be within their respective permit conditions.

If you or your staff have any questions, require additional information, or wish to discuss this, please contact me, or Ms. Joyce Griffith, Environmental Scientist, at (423) 735-5584. Please reference our unique document identification number (21G-16-0171) in any correspondence concerning this letter.

Sincerely,

NUCLEAR FUEL SERVICES, INC.

B M Moore

B. Marie Moore, Manager
Environmental Protection & Industrial Safety

CAH/pdj

Attachment: August 2016 DMR

Copy:

U.S. Nuclear Regulatory Commission
Region II
245 Peachtree Center Ave., NE
Suite 1200
Atlanta, GA 30303-1257

Attachment

August 2016 DMR

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

NAME Nuclear Fuel Services
ADDRESS 1205 Banner Hill Road
Erwin, TN 37650
FACILITY Nuclear Fuel Services
LOCATION 1205 Banner Hill Road
Erwin, TN 37650
Attn: B. Marie Moore EP&S MGR

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

TN0002038	001-G
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD			
	MM/DD/YYYY		MM/DD/YYYY
FROM	08/01/2016	TO	08/31/2016

No Discharge ☐

PARAMETER		QUANTITY OR LOADING VALUE	QUANTITY OR LOADING VALUE	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION VALUE	QUALITY OR CONCENTRATION VALUE	QUALITY OR CONCENTRATION VALUE	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 0 EFFLUENT GROSS	SAMPLE MEASUREMENT	******	******	******	******	******	163	mg/L	0	13/13	GRAB
	PERMIT REQUIREMENT	******	******	******	******	******	370 DAILY MX	mg/L		Monthly	GRAB
pH 00400 1 0 EFFLUENT GROSS	SAMPLE MEASUREMENT	******	******	******	6.98	******	8.68	SU	0	13/13	GRAB
	PERMIT REQUIREMENT	******	******	******	6 MINIMUM	******	9 MAXIMUM	SU		Once Per Batch	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS	SAMPLE MEASUREMENT	******	******	******	******	8.15	10	mg/L	0	13/13	GRAB
	PERMIT REQUIREMENT	******	******	******	******	30 MO AVG	40 DAILY MX	mg/L		Once Per Batch	GRAB
SOLIDS, SETTLEABLE 00545 1 0 EFFLUENT GROSS	SAMPLE MEASUREMENT	******	******	******	******	******	BDL< 0.1	mL/L	0	13/13	GRAB
	PERMIT REQUIREMENT	******	******	******	******	******	.5 DAILY MX	mL/L		Once Per Batch	GRAB
NITROGEN, AMMONIA TOTAL (as N) 00610 1 0 EFFLUENT GROSS	SAMPLE MEASUREMENT	******	******	******	******	4.31	14	mg/L	0	13/13	GRAB
	PERMIT REQUIREMENT	******	******	******	******	20 MO AVG	30 DAILY MX	mg/L		Once Per Batch	GRAB
NITRITE PLUS NITRATE TOTAL 1 DET. (as N) 00630 1 0 EFFLUENT GROSS	SAMPLE MEASUREMENT	******	24.57	lb/d	******	******	******	******	0	13/13	GRAB
	PERMIT REQUIREMENT	******	420 DAILY MX	lb/d	******	******	******	******		Once Per Batch	GRAB
FLUORIDE, TOTAL (as F) 00951 1 0 EFFLUENT GROSS	SAMPLE MEASUREMENT	******	******	******	******	BDL < 2.2	BDL< 5.0	mg/L	0	13/13	GRAB
	PERMIT REQUIREMENT	******	******	******	******	15 MO AVG	20 DAILY MX	mg/L		Once Per Batch	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
B. Marie Moore, Manager Environmental Protection & Industrial Safety	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.	BM Moore	423-743-9141	09/08/2016
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE / NUMBER	MM/DD/YYYY

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

THE MERCURY (Hg) LMT APPLIES ONLY IF DISCHARGES CONTAINING Hg OCCUR 4+ CONSECUTIVE DAYS/WK DURING THE MON. PERIOD. OTHERWISE, ONLY THE DAILY MAX LMT APPLIES. IF ANY TEST RESULT FOR Hg IS < THE MIN. QUANT. LEVEL (0.0002 MG/L), THEN ZERO MAY BE USED FOR DMR CALCS AND REPORT. RQRMNTS.

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

NAME Nuclear Fuel Services
ADDRESS 1205 Banner Hill Road
Erwin, TN 37650
FACILITY Nuclear Fuel Services
1205 Banner Hill Road
LOCATION Erwin, TN 37650
Attn: B. Marie Moore EP&S MGR

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

TN0002038	001-G
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD			
	MM/DD/YYYY		MM/DD/YYYY
FROM	08/01/2016	TO	08/31/2016

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
CADMIUM, TOTAL (as Cd)	SAMPLE MEASUREMENT	******	******	******	******	******	BDL< 0.00011	mg/L	0	01/30	GRAB
01027 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	******	******	******	******	******	.01 DAILY MX	mg/L		Monthly	GRAB
COPPER, TOTAL (as Cu)	SAMPLE MEASUREMENT	******	******	******	******	******	0.00871	mg/L	0	01/30	GRAB
01042 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	******	******	******	******	******	1 DAILY MX	mg/L		Monthly	GRAB
LEAD, TOTAL (as Pb)	SAMPLE MEASUREMENT	******	******	******	******	******	BDL < 0.0025	mg/L	0	01/30	GRAB
01051 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	******	******	******	******	******	.1 DAILY MX	mg/L		Monthly	GRAB
SILVER, TOTAL (as Ag)	SAMPLE MEASUREMENT	******	******	******	******	******	BDL < 0.0002	mg/L	0	01/30	GRAB
01077 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	******	******	******	******	******	.05 DAILY MX	mg/L		Monthly	GRAB
URANIUM, NATURAL, TOTAL	SAMPLE MEASUREMENT	******	******	******	******	BDL < 0.90	BDL < 0.90	mg/L	0	13/13	GRAB
22708 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	******	******	******	******	2 MO AVG	4 DAILY MX	mg/L		Once Per Batch	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.014153	0.014769	MGD	******	******	******	******	0	13/13	ESTIMA
50050 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	MGD	******	******	******	******		Once Per Batch	ESTIMA
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	******	******	******	******	MNR	mg/L	0	0/0	GRAB
50060 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	******	******	******	******	******	2 DAILY MX	mg/L		Once Per Batch	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
B. Marie Moore, Manager Environmental Protection & Industrial Safety	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.	BMMoore	423-743-9141	09/08/2016
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE NUMBER	MM/DD/YYYY

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

THE MERCURY (Hg) LMT APPLIES ONLY IF DISCHARGES CONTAINING Hg OCCUR 4+ CONSECUTIVE DAYS/WK DURING THE MON. PERIOD. OTHERWISE, ONLY THE DAILY MAX LMT APPLIES. IF ANY TEST RESULT FOR Hg IS < THE MIN. QUANT. LEVEL (0.0002 MG/L), THEN ZERO MAY BE USED FOR DMR CALCS AND REPORT. RQRMNTS

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

NAME Nuclear Fuel Services
ADDRESS 1205 Banner Hill Road
Erwin, TN 37650
FACILITY Nuclear Fuel Services
LOCATION 1205 Banner Hill Road
Erwin, TN 37650
Attn: B. Marie Moore EP&S MGR

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

TN0002038	001-G
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD			
	MM/DD/YYYY		MM/DD/YYYY
FROM	08/01/2016	TO	08/31/2016

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
SOLIDS, TOTAL DISSOLVED	SAMPLE MEASUREMENT	******	******	******	******	******	5356	mg/L	0	13 / 13	GRAB
70295 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	******	******	******	******	******	Req. Mon. VALUE	mg/L	0	Once Per Batch	GRAB
MERCURY, TOTAL (as Hg)	SAMPLE MEASUREMENT	******	******	******	MNR	******	0.00014	mg/L	0	13 / 13	GRAB
71900 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	******	******	******	.00037 MO AVG	******	.05 DAILY MX	mg/L	0	Once Per Batch	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
B. Marie Moore, Manager Environmental Protection & Industrial Safety	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.	BM Moore	423-743-9141	09/08/2016
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

THE MERCURY (Hg) LMT APPLIES ONLY IF DISCHARGES CONTAINING Hg OCCUR 4+ CONSECUTIVE DAYS/WK DURING THE MON. PERIOD. OTHERWISE, ONLY THE DAILY MAX LMT APPLIES. IF ANY TEST RESULT FOR Hg IS < THE MIN. QUANT. LEVEL (0.0002 MG/L), THEN ZERO MAY BE USED FOR DMR CALCS AND REPORT. RQRMNTS. **AUGUST 2016 DID NOT HAVE MORE THAN 4 CONSECUTIVE DAYS OF DISCHARGE.**

Edit DMR

Collapse Header

Permit

Permit ID:	TN0002038	**Major:**	☑
Permittee:	NUCLEAR FUEL SERVICES, INC.	**Permittee Address:**	1205 BANNER HILL ROAD ERWIN, TN 37650
Facility:	NUCLEAR FUEL SERVICES	**Facility Location:**	1205 BANNER HILL ROAD ERWIN, TN 37650
Permitted Feature:	001 - External Outfall	**Discharge:**	G - TREATED PROCESS WASTEWATER

Report Dates & Status

Monitoring Period:	From 08/01/16 to 08/31/16	**DMR Due Date:**	09/15/16
Status:	**NetDMR Validated**		

Principal Executive Officer

First Name:		**Last Name:**	
Title:		**Telephone:**	

No Data Indicator (NODI)

Form NODI:

Showing Parameters 1 - 10 of 16 ◀◀ ◀1 2 ▶ ▶▶

Parameter		NODI	Quantity or Loading			Quality or Concentration				# of Ex.	Freq. of Analysis	Smpl. Type
Code	Name		Value 1	Value 2	Units	Value 1	Value 2	Value 3	Units			

Parameter Code	Parameter Name	NODI	Quantity or Loading Value 1	Quantity or Loading Value 2	Quantity or Loading Units	Quality or Concentration Value 1	Quality or Concentration Value 2	Quality or Concentration Value 3	Quality or Concentration Units	# of Ex.	Freq. of Analysis	Smpl. Type
00340	Oxygen demand, chem. [high level] [COD]	Smpl.						= 163	mg/L	0	01/BA	GR
1 - Effluent Gross												
Season: 0		Req.						<= 370 Daily Maximum	Milligrams per Liter		Monthly	GRAB
NODI:		NODI										
00400	pH	Smpl.				= 6.98		= 8.68	SU	0	01/BA	GR
1 - Effluent Gross												
Season: 0		Req.				>= 6 Minimum		<= 9 Maximum	Standard Units		Once Per Batch	GRAB
NODI:		NODI										
00530	Solids, total suspended	Smpl.					= 8.15	= 10	mg/L	0	01/BA	GR
1 - Effluent Gross												
Season: 0		Req.					<= 30 Monthly Average	<= 40 Daily Maximum	Milligrams per Liter		Once Per Batch	GRAB
NODI:		NODI										
00545	Solids, settleable	Smpl.						< 0.1	mL/L	0	01/BA	GR
1 - Effluent Gross												
Season: 0		Req.						<= .5 Daily Maximum	Milliliters per Liter		Once Per Batch	GRAB
NODI:		NODI										

Parameter Code	Parameter Name	NODI	Quantity or Loading Value 1	Quantity or Loading Value 2	Quantity or Loading Units	Quality or Concentration Value 1	Quality or Concentration Value 2	Quality or Concentration Value 3	Quality or Concentration Units	# of Ex.	Freq. of Analysis	Smpl. Type
00610	Nitrogen, ammonia total [as N]	Smpl.					= 4.31	= 14	mg/L	0	01/BA	GR
1 - Effluent Gross												
Season: 0		Req.					<= 20 Monthly Average	<= 30 Daily Maximum	Milligrams per Liter		Once Per Batch	GRAB
NODI:		NODI										
00630	Nitrite + Nitrate total [as N]	Smpl.		= 24.57	lb/d					0	01/BA	GR
1 - Effluent Gross												
Season: 0		Req.		<= 420 Daily Maximum	Pounds per Day						Once Per Batch	GRAB
NODI:		NODI										
00951	Fluoride, total [as F]	Smpl.					< 2.2	< 5	mg/L	0	01/BA	GR
1 - Effluent Gross												
Season: 0		Req.					<= 15 Monthly Average	<= 20 Daily Maximum	Milligrams per Liter		Once Per Batch	GRAB
NODI:		NODI										
01027	Cadmium, total [as Cd]	Smpl.						< 0.00011	mg/L	0	01/30	GR
1 - Effluent Gross												
Season: 0		Req.						<= .01 Daily Maximum	Milligrams per Liter		Monthly	GRAB
NODI:		NODI										

Parameter Code	Parameter Name	NODI	Quantity or Loading Value 1	Quantity or Loading Value 2	Quantity or Loading Units	Quality or Concentration Value 1	Quality or Concentration Value 2	Quality or Concentration Value 3	Quality or Concentration Units	# of Ex.	Freq. of Analysis	Smpl. Type
01042	Copper, total [as Cu]	Smpl.						= 0.00871	mg/L	0	01/30	GR
1 - Effluent Gross												
Season: 0		Req.						<= 1 Daily Maximum	Milligrams per Liter		Monthly	GRAB
NODI:		NODI										
01051	Lead, total [as Pb]	Smpl.						< 0.0025	mg/L	0	01/30	GR
1 - Effluent Gross												
Season: 0		Req.						<= .1 Daily Maximum	Milligrams per Liter		Monthly	GRAB
NODI:		NODI										

Edit Check Errors

No results.

DMR Comments

-THE MERCURY (Hg) LMT APPLIES ONLY IF DISCHARGES CONTAINING Hg OCCUR 4+ CONSECUTIVE DAYS/WK DURING THE MON. PERIOD. OTHERWISE, ONLY THE DAILY MAX LMT APPLIES. IF ANY TEST RESULT FOR Hg IS < THE MIN. QUANT. LEVEL (0.0002 MG/L), THEN ZERO MAY BE USED FOR DMR CALCS AND REPORT. RQRMNTS.

Comments

Hg- August 2016 did not have more than 4 consecutive days of discharge.

Attachments

No results.

Report Last Saved By

User:

Name:

E-Mail:

Date/Time: 09/02/16 9:04 CDT

Edit DMR

Collapse Header

Permit

Permit ID:	TN0002038	**Major:**	☑
Permittee:	NUCLEAR FUEL SERVICES, INC.	**Permittee Address:**	1205 BANNER HILL ROAD ERWIN, TN 37650
Facility:	NUCLEAR FUEL SERVICES	**Facility Location:**	1205 BANNER HILL ROAD ERWIN, TN 37650
Permitted Feature:	001 - External Outfall	**Discharge:**	G - TREATED PROCESS WASTEWATER

Report Dates & Status

Monitoring Period:	From 08/01/16 to 08/31/16	**DMR Due Date:**	09/15/16
Status:	**NetDMR Validated**		

Principal Executive Officer

First Name:		**Last Name:**	
Title:		**Telephone:**	

No Data Indicator (NODI)

Form NODI:

Showing Parameters 11 - 16 of 16 ◀◀ ◀ 1 **2** ▶ ▶▶

Parameter		NODI	Quantity or Loading			Quality or Concentration				# of Ex.	Freq. of Analysis	Smpl. Type
Code	Name		Value 1	Value 2	Units	Value 1	Value 2	Value 3	Units			
01077	Silver, total [as Ag]	Smpl.						< 0.0002	mg/L	0	01/30	GR
1 - Effluent Gross												
Season: 0		Req.						<= .05 Daily Maximum	Milligrams per Liter		Monthly	GRAB
NODI:		NODI										

Parameter Code	Parameter Name	NODI	Quantity or Loading Value 1	Quantity or Loading Value 2	Quantity or Loading Units	Quality or Concentration Value 1	Quality or Concentration Value 2	Quality or Concentration Value 3	Quality or Concentration Units	# of Ex.	Freq. of Analysis	Smpl. Type
22708	Uranium, natural, total	Smpl.					< 0.9	< 0.9	mg/L	0	01/BA	GR
1 - Effluent Gross												
Season: 0		Req.					<= 2 Monthly Average	<= 4 Daily Maximum	Milligrams per Liter		Once Per Batch	GRAB
NODI:		NODI										
50050	Flow, in conduit or thru treatment plant	Smpl.	= 0.014153	= 0.014769	MGD					0	01/BA	ES
1 - Effluent Gross												
Season: 0		Req.	Req Mon Monthly Average	Req Mon Daily Maximum	Million Gallons per Day						Once Per Batch	ESTIMA
NODI:		NODI										
50060	Chlorine, total residual	Smpl.							mg/L			
1 - Effluent Gross												
Season: 0		Req.						<= 2 Daily Maximum	Milligrams per Liter		Once Per Batch	GRAB
NODI: 9		NODI						9				
70295	Solids, total dissolved	Smpl.						= 5,356	mg/L	0	01/BA	GR
1 - Effluent Gross												
Season: 0		Req.						Req Mon Value	Milligrams per Liter		Once Per Batch	GRAB
NODI:		NODI										

Parameter Code	Parameter Name	NODI	Quantity or Loading Value 1	Quantity or Loading Value 2	Quantity or Loading Units	Quality or Concentration Value 1	Quality or Concentration Value 2	Quality or Concentration Value 3	Quality or Concentration Units	# of Ex.	Freq. of Analysis	Smpl. Type
71900	Mercury, total [as Hg]	Smpl.						= 0.00014	mg/L	0	01/BA	GR
1 - Effluent Gross												
Season: 0		Req.					<= .00037 Monthly Average	<= .05 Daily Maximum	Milligrams per Liter		Once Per Batch	GRAB
NODI:		NODI					8					

Edit Check Errors

No results.

DMR Comments

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Comments

Hg- August 2016 did not have more than 4 consecutive days of discharge.

Attachments

No results.

Report Last Saved By

User:

Name:

E-Mail:

Date/Time: 09/02/16 9:04 CDT

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