

# ACCELERATED DOCUMENT DISTRIBUTION SYSTEM

REGULATORY INFORMATION DISTRIBUTION SYSTEM (RIDS)

ACCESSION NBR: 9308230147 DOC. DATE: 93/08/16 NOTARIZED: NO DOCKET #  
 FACIL: 50-387 Susquehanna Steam Electric Station, Unit 1, Pennsylv 05000387  
 50-388 Susquehanna Steam Electric Station, Unit 2, Pennsylv 05000388  
 AUTH. NAME AUTHOR AFFILIATION  
 FIELDS, J.S. Pennsylvania Power & Light Co.  
 RECIP. NAME RECIPIENT AFFILIATION  
 CROWLEY, K. Pennsylvania, Commonwealth of

SUBJECT: Forwards "NPDES Discharge Monitoring Rept for Jul 1993...."  
 & PA Dept of Environ Resources monthly facility rept. Informs  
 that during month of Jul, sewage treatment plant Outfall 079  
 total suspended solid sample exceeded monthly average.

DISTRIBUTION CODE: IE23D COPIES RECEIVED: LTR 1 ENCL 1 SIZE: 2+10  
 TITLE: Environmental Event Report (per Tech Specs)

## NOTES:

	RECIPIENT		COPIES			RECIPIENT		COPIES		
	ID CODE/NAME		LTTR	ENCL		ID CODE/NAME		LTTR	ENCL	
	PD1-2 LA		3	3		PD1-2 PD		1	1	
	CLARK, R		1	1						
INTERNAL:	ACRS		5	5		NRR/DRSS/PEPB		1	1	
	NRR/PMAS/ILRB		1	1		OGC/HDS2		1	1	
	<u>REG-FILE</u> 01		1	1		RGN1		1	1	
EXTERNAL:	NRC PDR		1	1		NSIC		1	1	

NOTE TO ALL "RIDS" RECIPIENTS:

PLEASE HELP US TO REDUCE WASTE! CONTACT THE DOCUMENT CONTROL DESK,  
 ROOM P1-37 (EXT. 504-2065) TO ELIMINATE YOUR NAME FROM DISTRIBUTION  
 LISTS FOR DOCUMENTS YOU DON'T NEED!

TOTAL NUMBER OF COPIES REQUIRED: LTTR 17 ENCL 17

ER-1





# Pennsylvania Power & Light Company

Two North Ninth Street • Allentown, PA 18101-1179 • 215/774-5151

August 16, 1993

Ms. Kate Crowley  
Water Quality Regional Manager  
Bureau of Water Quality Management  
Pennsylvania Department of Environmental Resources  
90 East Union Street, 2nd Floor  
Wilkes-Barre, PA 18701-3296

SUSQUEHANNA STEAM ELECTRIC STATION  
DISCHARGE MONITORING REPORT - JULY 1993  
NPDES PERMIT NO. PA 0047325  
CCN 741326 FILE R9-8A  
PLE- 17125

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Dear Ms. Crowley:

Pursuant to Part A, 3.b.(1) of NPDES Permit No. PA 0047325, enclosed is the Susquehanna Steam Electric Station discharge monitoring report for July 1993. Also enclosed is Pennsylvania Department of Environmental Resources' Monthly Facility Report Form (01-112).

There was one noncompliance in July. During July, the Sewage Treatment Plant (Outfall 079) total suspended solid (TSS) sample exceeded the TSS monthly average of 30 mg/l. This TSS sample was recorded at 38 mg/l. Normally, additional samples for TSS are taken in order to meet the monthly average. To ensure compliance procedures are being developed to ensure collection of additional samples when necessary to meet the monthly average TSS limit of 30 mg/l.

If you have any questions, please call me at (215) 774-7887.

Respectfully yours,

Jerome S. Fields  
Senior Environmental Scientist - Nuclear

Enclosures

Copies to:  
EPA Region III  
~~NRC Document Control Desk~~  
NRC Region I  
Mr. R. J. Clark, NRC Sr. Project Manager

jsd/lu3216o(26)

9308230147 930816  
PDR ADOCK 05000387  
R PDR

230026

JE23 11

01-112

PA DEPARTMENT OF ENVIRONMENTAL RESOURCES

Month July 1993

## MONTHLY FACILITY REPORT

Date Prepared 8/17/93Facility Name Susquehanna Steam Electric Station PWS ID NO. 2400994

P.O. Box 467

Facility Address Berwick, PA 18603NPDES Permit No. PA 0047325Municipality Salem TownshipIncinerator Permit Number(s) N/ACounty LuzerneTelephone Number (215) 774-7889Person Completing Form Jerome S. FieldsSignature Jerome S. Fields (Print Name)Title Sr. Environmental Scientist1. Total Hours Incinerator Operated N/A2. Type of Fuel N/A3. Total Fuel Usage N/A4. Supplier of Fuel N/A5. Estimated Amount of Sludge Incinerated N/A6. Incinerator Ash Disposal N/A7. Sludge Disposal Water Treatment(a) How Much (Tons)                     (b) Where                                     (c) When (Last Occurrence)                     (d) Hauler                                     (e) Receipts: Yes        No       (a) How Much (Tons) 21.25(b) Where \*Republic Environmental(c) When (Last Occurrence) 7/15/93(d) Hauler                                     (e) Receipts: Yes        No       

8. Other Wastes (Grits, Barscreening, etc.)

\*Republic Environmental Systems  
Hatfield, PA(a) How Much (Tons)                     (b) Where                                     (c) When (Last Occurrence)                     (d) Hauler                                     (e) Receipts: Yes        No       9. Septic Tank Waste Accepted: Yes        No       

10. If yes:

(a) Volume                                     (b) Hauler(s)                                      Percent (%) Hauled                     

11. Analysis Performed to ensure tank waste contains no industrial waste

(a) Yes        No       (b) If yes, frequency                                     12. Additional Comments: 2,000 gallons of septic tank waste taken offsite and  
treated at the Hazleton Sewer Authority (Permit #PA0026921)

PERMITTEE NAME/ADDRESS (Include  
Facility Name/Location (if different))  
NAME PENNSYLVANIA P & L - SUSQUEHUNNA  
ADDRESS TWO NORTH NINTH STREET  
ALLENTOWN PA 18101

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

PA0047325

PERMIT NUMBER

072 A

DISCHARGE NUMBER

MAJOR  
(SUBR 02)  
F - FINAL  
SERV AND ADMIN BUILDING SUMP

Form Approved.  
OMB No. 2040-0004.  
Approval expires 6-30-91.

FACILITY  
LOCATION

ATTN: R. L. DOFF, SUPV OPER TECHNOL

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
93 07 01 93 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DATA ☐ \*\*\*  
NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****		7.20	*****	7.20	( 12)	0	1/31	GRAB
00400 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	4.6	4.6	( 19)	0	1/31	GRAB
00530 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	*****	30.0 MO AVG	100.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV MET	SAMPLE MEASUREMENT	*****	*****		*****	3.0	3.0	( 19)	0	1/31	GRAB
00556 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	*****	15.0 MO AVG	20.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLAN	SAMPLE MEASUREMENT	6.0210	6.0210	( 03)	*****	*****	*****		*	1/31	ESTIMA
50050 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		DAILY	ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

R.G. BYRAM SR. VP  
NUCLEAR OPERATIONS

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED  
AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED  
ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR  
OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS  
TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIG-  
NIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING  
THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND  
33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000  
and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE  
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

717 542-3220

93 8 11

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

FLOW AND PH SHALL BE MEASURED DAILY WHEN DISCHARGING.

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

NAME PENNSYLVANIA P & L - SUSQUEHNA  
ADDRESS TWO NORTH NINTH STREET  
ALLENTOWN PA 18101

FACILITY

LOCATION

ATTN: R. L. DOTY, SUPV OPER TECHNOL

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

(2-16)

(17-19)

PA0047325

071 A

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	93	07	01		93	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MAJOR  
(SUBR 02)  
F - FINAL  
COOLING TOWER BLOWDOWN

Form Approved.  
OMB No. 2040-0004.  
Approval expires 8-30-91.

\*\*\* NO DATA [ ] \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (45-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****		8.15	*****	8.80	( 12)		GRAB
00400 1 0 0	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0			GRAB
EFFLUENT GROSS VALU				****	MINIMUM		MAXIMUM	SU		
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.08	( 19)		Comp
01092 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1.0			WEEKLY
EFFLUENT GROSS VALU				****			DAILY MX	MG/L		COMP
FLOW, IN CONDUIT OR THRU TREATMENT PLAN	SAMPLE MEASUREMENT	12.78	19.11	( 03)	*****	*****	*****		*	31/31 RECORD
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****	****		DAILY RECORD
EFFLUENT GROSS VALU		NO AVG	DAILY MX	MGD				****		
CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****		*****	*****	—	( 19)	*	FOOTNOTE (1)
50064 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	20			SEE GRAB
EFFLUENT GROSS VALU				****			DAILY MX	MG/L		PERMIT
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

R.G. BYRAM SR. V.P.  
NUCLEAR OPERATIONS

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE  
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

717/542-3220

93 8 11

AREA  
CODE

NUMBER

YEAR

MO

DAY

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

(1) USE OF CHLORINE DISCONTINUED

FREE AVAILABLE CHLORINE SHALL BE TAKEN DAILY BY GRAB DURING CHLORINATION.

9308230161 930816  
PDR ADOCK 05000387  
R PDR

PAGE

1 OF

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

NAME PENNSYLVANIA P & L SUSQUEHNA  
ADDRESS TWO NORTH NINTH STREET  
ALLENTOWN PA 18101

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

(2-16)

(17-19)

PA0047325

074 A

PERMIT NUMBER

DISCHARGE NUMBER

MAJOR (SUBR 02)

Form Approved. OMB No. 2040-0004.  
Approval expires 6-30-91.

F - FINAL #2 TURBINE BLDG WASTE SUMP

FACILITY

LOCATION

ATTN: R. L. DOTY, SUPV OPER TECHNOL

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	93	09	01		93	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

\*\*\* NO DATA ☒ \*\*\*  
NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****			*****		( 12 )		
00400 1 0 0	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0		DAILY	GRAB
EFFLUENT GROSS VALUE				****	MINIMUM		MAXIMUM	SU		
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****			( 19 )		
00530 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	30.0	100.0		ONCE/MONTH	GRAB
EFFLUENT GROSS VALUE				****		NO AVG	DAILY MX	MG/L		
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****		*****			( 19 )		
FREON EXTR-GRAV MET	PERMIT REQUIREMENT	*****	*****	****	*****	15.0	20.0		ONCE/MONTH	GRAB
00556 1 0 0				****		NO AVG	DAILY MX	MG/L		
EFFLUENT GROSS VALUE										
FLOW, IN CONDUIT OR THRU TREATMENT PLAN	SAMPLE MEASUREMENT			( 03 )	*****	*****	*****			
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****	****	DAILY	ESTIMA
EFFLUENT GROSS VALUE		NO AVG	DAILY MX	MGD				****		
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

R. G. BYRAM SR VP  
NUCLEAR OPERATIONS

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

717 542-3220

93 8 11

AREA CODE

NUMBER

YEAR

MO

DAY

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

FLOW AND PH SHALL BE MEASURED DAILY WHEN DISCHARGING.

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

NAME PENNSYLVANIA P & L - SUSQUEHNA  
ADDRESS TWO NORTH NINTH STREET  
ALLENTOWN PA 18101

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

(2-16)

(17-19)

PAG047325

073 A

PERMIT NUMBER

DISCHARGE NUMBER

MAJOR (SUBR 02)  
F - FINAL  
#1 TURBINE BLDG WASTE SUMP

Form Approved.  
OMB No. 2040-0004.  
Approval expires 6-30-91.

FACILITY

LOCATION

ATTN: R. L. DOTY, SUPV OPER TECHNOL

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	93	07	01		93	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

\*\*\* NO DATA ☒ \*\*\*  
NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****			*****		( 12)		
00400 1 0 0	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0		DAILY	GRAB
EFFLUENT GROSS VALU				****	MINIMUM		MAXIMUM	SU		
SOLIDS, TOTAL	SAMPLE MEASUREMENT	*****	*****		*****			( 19)		
SUSPENDED	PERMIT REQUIREMENT	*****	*****	****	*****	30.0	100.0		ONCE/	GRAB
00530 1 0 0				****		MO AVG	DAILY MX	MG/L	MONTH	
EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****		*****			( 19)		
OIL AND GREASE	PERMIT REQUIREMENT	*****	*****	****	*****	15.0	20.0		ONCE/	GRAB
FREON EXTR-GRAV MET				****		MO AVG	DAILY MX	MG/L	MONTH	
00556 1 0 0	SAMPLE MEASUREMENT			( 03)	*****	*****	*****			
EFFLUENT GROSS VALU	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****	****	DAILY	ESTIMA
FLOW, IN CONDUIT OR		MO AVG	DAILY MX	MGD				****		
THRU TREATMENT PLAN	SAMPLE MEASUREMENT									
50050 1 0 0	PERMIT REQUIREMENT									
EFFLUENT GROSS VALU	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

R. G. BYRAM SR VP  
NUCLEAR OPERATIONS

TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE  
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

717  
AREA  
CODE

542-3220  
NUMBER

93 8 11  
YEAR MO DAY

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

FLOW AND PH SHALL BE MEASURED DAILY WHEN DISCHARGING.



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

NAME PENNSYLVANIA P & L - SUSQUEHUNNA  
 ADDRESS TWO NORTH NINTH STREET  
ALLENTOWN PA 18101

FACILITY  
 LOCATION

ATTN: R. L. DOFF, SUPV OPER TECHNOL

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

(2-16)

(17-19)

PA0047325

079 A

PERMIT NUMBER

DISCHARGE NUMBER

MAJOR  
 (SUBR 02)  
 F - FINAL  
 SEWAGE TREATMENT EFFLUENT

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 6-30-91.

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
93 09 01 TO 93 09 30  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DATA ☐ \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****		7.40	*****	7.65	( 12)	G	31/31	GRAB
00400 A 0 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	5.52	*****	( 26)	*****	38	*****	( 19)	*	1/31	Comp-8
00530 A 0 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	20.00 MO AVG	*****	LBS/DY	*****	30.00 MO AVG	*****	MG/L		ONCE/ MONTH	COMP-8
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	6 0192	0.0252	( 03)	*****	*****	*****		*	31/31	FLOIND
50050 A 0 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	0.08 MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		DAILY	FLOIND
CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****		0.15	0.35	0.75	( 19)	*	31/31	GRAB
50064 A 0 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	REPORT ART MEAN	REPORT MAXIMUM	MG/L		DAILY	GRAB
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****		*****	1	*****	( 13)	*	1/31	GRAB
74055 A 1 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	*****	*****	****	*****	200 30DA GEO	*****	#/ 100ML		ONCE/ MONTH	GRAB
BOD, CARBONACEOUS 05 DAY, 20C	SAMPLE MEASUREMENT	1.50	*****	( 26)	*****	10.3	*****	( 19)	*	1/31	Comp
80082 A 0 0 DISINFECT, PRCS CMPLT	PERMIT REQUIREMENT	16.70 MO AVG	*****	LBS/DY	*****	25.0 MO AVG	*****	MG/L		ONCE/ MONTH	COMP-8
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

R. G. BYRAM SR VP  
 NUCLEAR OPERATIONS

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE  
 OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

717 542-3220

93 8 11

AREA  
CODE

NUMBER

YEAR

MO

DAY

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

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

NAME PENNSYLVANIA P & L - SUSQUEHNA  
ADDRESS TWO NORTH NINTH STREET  
ALLENTOWN PA 18101

FACILITY

LOCATION

ATTN: R. L. DOTY, SUPV OPER TECHNOL

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0047325

PERMIT NUMBER

171 A

DISCHARGE NUMBER

MAJOR

(SUBR 02):

F - FINAL

Form Approved.

OMB No. 2040-0004.

Approval expires 6-30-91.

RADWASTE TREATMENT EFFLUENT

MONITORING PERIOD

FROM YEAR 93 MO 08 DAY 01 TO YEAR 93 MO 08 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DATA \*\*\*  
NOTE: Read instructions before completing this form.

PARAMETER (32-37)	<div></div>	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****	****	*****	0.2	0.2	( 19)	0	1/31	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLAN	PERMIT REQUIREMENT	*****	*****		*****	30.0	100.0		ONCE/		
50050 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	0.0229	0.0627	( 03)	*****	*****	*****	HG/L	*	20/31	ESTIM
	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	****		DAILY	ESTIMA
		HO AVG	DAILY MX					****			
	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  
R.G. BYRAM SR VP  
NUCLEAR OPERATIONS  
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

717

542-3220

93

8

11

AREA CODE

NUMBER

YEAR

MO

DAY

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

FLOW SHALL BE MEASURED DAILY WHEN DISCHARGING.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)  
NAME PENNSYLVANIA P & L - SUSQUEHUNNA  
ADDRESS TWO NORTH NINTH STREET  
ALLENTOWN PA 18101

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

PA0047325  
PERMIT NUMBER

271 A  
DISCHARGE NUMBER

MAJOR  
(SOBR 02)  
F - FINAL  
WASTE FILTER BYPASS

Form Approved.  
OMB No. 2040-0004.  
Approval expires 6-30-91.

FACILITY  
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	93	07	01		93	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

\*\*\* NO DATA ☒ \*\*\*  
NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****		*****			( 19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	30.0 MO AVG	100.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV MET 00556 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****		*****			( 19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	15.0 MO AVG	20.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLAN 50050 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT			( 03)	*****	*****	*****				
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		DAILY	FLOIND
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER R. G. BYRAM Sr VP NUCLEAR OPERATIONS TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>R. G. Byram</i>	TELEPHONE 717 542-3220	DATE 93 8 11
---	--	--	---------------------------	-----------------

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

FLOW SHALL BE MEASURED DAILY WHEN DISCHARGING.

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

NAME PENNSYLVANIA P & I - SUSQUEHNA  
ADDRESS TWO NORTH NINTH STREET  
ALLENTOWN PA 18101

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

(2-16)  
PA0047325  
PERMIT NUMBER

(17-19)  
371 A  
DISCHARGE NUMBER

MAJOR  
(SUBR 02)  
F FINAL  
NEUTRALIZATION BASIN DISCHARGE

Form Approved.  
OMB No. 2040-0004.  
Approval expires 6-30-91.

FACILITY  
LOCATION  
ATTN: R. L. DOTY, SUPV OPER TECHNOL

MONITORING PERIOD  
FROM YEAR MO DAY TO YEAR MO DAY  
93 09 01 TO 93 09 30  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DATA ☐ \*\*\*  
NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	12.8	12.8	( 19)	0	1/31	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	30.0 MO AVG	100.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	1.5	1.5	( 19)	0	1/31	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	15.0 MO AVG	20.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.015	0.018	( 03)	*****	*****	*****		*	7/31	ESTIMA
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		DAILY	ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
R. G. BYRAM SR VP  
NUCLEAR OPERATIONS  
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED  
AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED  
ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR  
OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION  
IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIG-  
NIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING  
THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC 1001 AND  
33 USC 1319. (Penalties under these statutes may include fines up to \$10,000  
and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE  
OFFICER OR AUTHORIZED AGENT

TELEPHONE  
717 542-3220  
DATE  
93 8 11  
AREA  
CODE NUMBER YEAR MO DAY

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

FLOW SHALL BE MEASURED DAILY WHEN DISCHARGING.  
\*WHEN DISCHARGING. THERE SHALL BE NO DISCHARGE OF POLYCHLORINATED BIPHENYL COMPOUNDS. SEE PERMIT FOR OTHER  
\*EM. FLOW SHALL BE MEASURED DAILY

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)  
NAME PENNSYLVANIA P & L - SUSQUEHNA  
ADDRESS TWO NORTH NINTH STREET  
ALLENTOWN PA 18101

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

(2-16)

(17-19)

PA0047325

PERMIT NUMBER

471 A

DISCHARGE NUMBER

MAJOR  
(SUBR 02)  
F - FINAL  
WASTE FILTER EFFLUENT

Form Approved.  
OMB No. 2040-0004.  
Approval expires 6-30-91.

FACILITY  
LOCATION

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
93 08 01 93 08 31  
(20-21) (22-23) (24-23) (26-27) (28-29) (30-31)

\*\*\* NO DATA ☒ \*\*\*  
NOTE: Read Instructions before completing this form.

ATTN: R. L. DOTY, SUPV OPER TECHNOL

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****			( 19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	30.0 MO AVG	100.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****			( 19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	15.0 MO AVG	20.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			( 03)	*****	*****	*****				
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		DAILY	FLO/IND
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

R. G. BYRAM SR VP

Nuclear Operations

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE  
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

717 542-3220

93 8 11

AREA  
CODE

NUMBER

YEAR MO DAY

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

FLOW SHALL BE MEASURED DAILY WHEN DISCHARGING.

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

NAME PENNSYLVANIA P & L - SUSQUEHNA  
 ADDRESS TWO NORTH NINTH STREET  
ALLENTOWN PA 18101

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

(2-16)

(17-19)

PA0047325

571 A

PERMIT NUMBER

DISCHARGE NUMBER

MAJOR  
 (SUBR 02)  
 F. FINAL  
 571 CIRC WWATER PUMPHOUSE SUMP

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 8-30-91.

FACILITY

LOCATION

ATTN: R. L. DOTY, SUPV OPER TECHNOL

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	93	09	01		93	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

\*\*\* NO DATA \*\*\*  
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	<div></div>	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-43) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	1.7	1.7	( 19)	G	1/31	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30.0 NO AVG	100.0 DAILY MX		MG/L	ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR+GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	1.44	1.44	( .19)	O	1/31	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	15.0 NO AVG	20.0 DAILY MX		MG/L	ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLAN 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.048	0.048	( 03)	*****	*****	*****		✓	31/31	FLOW'D
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX		MGD	*****	*****		*****	****	DAILY
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

R. G. BYRAM SR VP  
 NUCLEAR OPERATIONS

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC 1001 AND 33 USC 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE  
 OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

717 542-3220 93 8 11  
 AREA CODE NUMBER YEAR MO DAY

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

FLOW SHALL BE MEASURED DAILY WHEN DISCHARGING.