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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 SSES NPDES discharge monitoring rept (DMR) rept for
Aug 1994, PA Dept of Environ Resources monthly facility form
(01-112) & revised DMR form of Outfall 571, circulating water
pumphouse sump for Jul 1994.

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NOTES: 05000387

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Pennsylvania Power & Light Company

Two North Ninth Street • Allentown, PA 18101-1179 • 610/774-5151

September 26, 1994

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 - AUGUST 1994
NPDES PERMIT NO. PA 0047325
CCN 741326 FILE R9-8A
PLE- 18035

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 (DMR) for August 1994. Also enclosed is Pennsylvania Department of Environmental Resources' Monthly Facility Report Form (01-112). In addition, a revised DMR form for Outfall 571, Circulating Water Pumphouse (CWP) sump, for July '94 is enclosed. In the revised DMR, the sampling results for oil and grease (O&G) were changed to include results from surface samples.

In August, there was one potential excursion noted for O&G on the DMR for Outfall 571. Two O&G samples were collected on the same day (August 1, 1994). Using the results of both samples, the monthly average and the daily maximum for August are the same: 95.9 mg/l. One sample, collected from the surface, had an O&G concentration of 191.7 mg/l, and a sample collected approximately one foot below the surface was 0.0 mg/l. The O&G permit limits are 15 mg/l for monthly average and 20 mg/l for daily maximum.

Of the seven samples collected in July, four were surface samples, one was a sample collected at the pressure indicator gage, and two samples were collected approximately one foot below the water's surface in the sump. These data are as follows:

20000
9410030080 940926
PDR ADDCK 05000387
R PDR

1103

September 26, 1994

2

CCN 741326 FILE R9-8A

PLE- 18035

To: Ms. Kate Crowley

<u>DATE</u>	<u>SAMPLE CONC. (mg/l)</u>	<u>SAMPLE LOCATION</u>
7/1/94	0.9	Surface
7/2/94	109.9	Surface
7/3/94	199.7	Surface
7/4/94	446*	Surface
7/4/94	0.96*	pressure indicator gage
7/6/94	3.75	one foot below surface
7/7/94	2.7	one foot below surface

*Daily determination of concentration is 223.5 mg/l.

Using the results of all seven samples, the July monthly average and daily maximum concentrations are respectively 90.1 and 223.5 mg/l.

Sample collection on the surface maintains an air space in the top of the bottle, as indicated in EPA-approved procedures (EPA 413.1 and Standard Methods 18th edition, No 5520B) and a similar procedure (ASTM D4281) used at the Susquehanna SES. Surface samples have been taken at this sump, since the only available discharge sample point is off the pressure indicator gage. Because of the high pressure and use of a glass bottle to collect O&G samples, samples have not been collected at this point because of safety concerns. A modification to the sump would be required to make this sampling location safe. We have requested that this sump be removed from the permit in the recent NPDES renewal application since discharge goes into the plant's Circulating Water System and not Cooling Tower blowdown. A modification to the sump does not seem prudent since this discharge may be eliminated from the NPDES permit.

When this sump is discharged, the surface layer remains in the sump. Therefore, four July and one August surface samples are not representative of the discharge. They do not meet the "representative sampling requirement" as listed by the PaDER's NPDES Sampling and Analytical Testing Instructions. If these samples are discounted because they are not representative, then we believe that there were no O&G excursions in either month.

The source of surface oil leaking into this sump was a circulating water pump bearing. This leak was repaired in mid-August. A reduction in station electrical generation was necessary prior to repairing the pump.

Telephone conversations have been held with Mr. George Fetchko and Mr. James Holmes of your office to review this O&G sampling issue. Mr. Holmes indicated after discussions with PaDER analytical lab personnel that a sub-surface sample would be

<u>DATE</u>	<u>SAMPLE CONC. (mg/l)</u>	<u>SAMPLE LOCATION</u>
7/1/94	0.9	Surface
7/2/94	109.9	Surface
7/3/94	199.7	Surface
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September 26, 1994

3

CCN 741326 FILE R9-8A

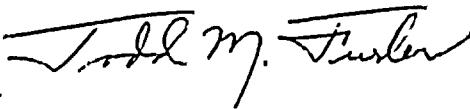
PLE-18035

To: Ms. Kate Crowley

acceptable if a discharge line sample location was not available. PP&L concurs with these recommendations and is reviewing discharge line sampling and is now collecting samples below the surface. Sample bottles may overflow when collected below the surface, but the impact on sample results would be minimal. Finally, the ASTM O&G analytical procedure which is currently in use, will be replaced with an EPA-approved procedure.

If you have any questions, please call me at (215) 774-7889.

Respectfully yours,



Jerome S. Fields
Senior Environmental Scientist - Nuclear

Enclosures

Copies to:

Ms. I. Worrell, EPA Region III

~~NRC Document Control Desk~~

NRC Region I

Mr. C. Poslusny, NRC Project Manager

Mr. G. Fetchko, PaDER

jsf/tf3216o(26)

01-112

PA DEPARTMENT OF ENVIRONMENTAL RESOURCES

Month August

MONTHLY FACILITY REPORT

Date Prepared 9/20/94Facility Name Susquehanna Steam Electric Station PWS ID NO. 2400994Facility Address P.O. Box 467
Berwick, PA 18603 NPDES Permit No. PA 0047325Municipality Salem Township Incinerator Permit Number(s) N/ACounty Luzerne Telephone Number (717) 542-1879Person Completing Form Curtis H. SaxtonSignature *Curtis H. Saxton* (Print Name)Title 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/A 7. Sludge Disposal Water Treatment(a) How Much (Tons) N/A (a) How Much (Tons) N/A(b) Where N/A (b) Where N/A(c) When (Last Occurrence) N/A (c) When (Last Occurrence) N/A(d) Hauler N/A (d) Hauler N/A(e) Receipts: Yes N/A No N/A (e) Receipts: Yes N/A No N/A

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

(a) How Much (Tons) N/A(b) Where N/A(c) When (Last Occurrence) N/A(d) Hauler N/A(e) Receipts: Yes N/A No N/A9. Septic Tank Waste Accepted: Yes N/A No N/A

10. If yes:

(a) Volume N/A(b) Hauler(s) N/A Percent (%) Hauled N/A

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

(a) Yes N/A No N/A(b) If yes, frequency N/A12. Additional Comments: Total Septic Tank waste for August was1000 taken offsite and treated at Hazleton Sewage Authority Permit #PA-002691

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

NAME _____
ADDRESS _____
FACILITY _____
LOCATION _____

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

(2-16)

(17-19)

PERMIT NUMBER

DISCHARGE NUMBER

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

MONITORING PERIOD

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

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(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			
	SAMPLE MEASUREMENT					21.9	56.1		0	6/31	GRAB
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT					90.1*	223.5*		3	6/31	GRAB
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT	0.0431	0.0431						X	31/31	FLOID
	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. 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 94 9 20

*Oil and grease sample results revised for July 1994.
See cover letter.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PENNSYLVANIA P & L - SUSQUEHANA
ADDRESS 60 NORTH NINTH STREET
ALLENTOWN PA 18101

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

(2-16) PA0047325
PERMIT NUMBER
(17-19) 071 A
DISCHARGE NUMBER

MAJOR (SUBR 02) Form Approved OMB No. 2040-0004
F - FINAL
COOLING TOWER BLOWDOWN

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


MONITORING PERIOD
FROM YEAR 94 MO 08 DAY 01 TO YEAR 94 MO 08 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ☐ ***
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	*****	*****		8.40	*****	8.70	(12)	0	3/31	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY	GRAB
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.30	(19)	0	5/31	Comp
01092 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1.0 DAILY MX	HG/L		WEEKLY	COMP-8
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	15.17	17.55	(03)	*****	*****	*****		*	3/31	RCORR
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		DAILY	RCORR
CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****		*****	*****		(19)	11)	footnote	
50064 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	.20 DAILY MX	HG/L		SEE GRAB 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
717 542-3220
AREA CODE NUMBER
DATE
94 9 20
YEAR MO DAY

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

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

(1) use of chlorine has been discontinued.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PERKINS SILVERMAN T & L - SUE JORDANA
ADDRESS 100 BULLA WIRTH STREET
ELLENBORO PA 18191

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

(2-16) **PA0047325**
PERMIT NUMBER
 (17-19) **071 A**
DISCHARGE NUMBER

MAJOR (SU9R 02) **Form Approved**
F - FINAL **OMB No. 2040-0004**
COOLING TOWER BLOWDOWN

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

MONITORING PERIOD
FROM **YEAR** 94 **MO** 08 **DAY** 31 **TO** **YEAR** 94 **MO** 08 **DAY** 31
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

***** NO DISCHARGE ☒ *****
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			
2H	SAMPLE MEASUREMENT	*****	*****		8.40	*****	8.70	(12)	0	31/31	Grab
CHLORINE 1 C C	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	SU		DAILY GRAB	
EFFLUENT GROSS VALUE					MINIMUM		MAXIMUM				
ZINC, TOTAL	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.30	(19)	0	5/31	Comp
(AS %) 01092 1 C C	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1.0	DAILY MX		WEEKLY COMP	48
EFFLUENT GROSS VALUE								MG/L			
FLOW, IN CONDUIT OR	SAMPLE MEASUREMENT	15.17	17.55	(03)	*****	*****	*****		*	31/31	RCORR
THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****	****		DAILY RCORR	
50050 1 C C		NO AVG	DAILY MX	MGD							
EFFLUENT GROSS VALUE											
CHLORINE, FREE	SAMPLE MEASUREMENT	*****	*****		*****	*****		(19)	10	footnote	
AVAILABLE 50064 1 C C	PERMIT REQUIREMENT	*****	*****	****	*****	*****	20	DAILY MX		SEE GRAB	
EFFLUENT GROSS VALUE								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]
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 717 542-3220
DATE 94 9 20
AREA CODE **NUMBER** **YEAR** **MO** **DAY**

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
(1) use of chlorine has been discontinued.
FREE AVAILABLE CHLORINE SHALL BE TAKEN DAILY BY GRAB DURING CHLORINATION.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PENNSYLVANIA P & L - SUSQUEHNA
ADDRESS 200 NORTH MICH STREET
ALLIEN PA 18101

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

(2-16) (17-19)
PA0047325 072 A
PERMIT NUMBER DISCHARGE NUMBER

MAJOR (SUBR 02) Form Approved OMB No. 2040-0004
F - FINAL
SERV AND ADMIN BUILDING SUMP

FACILITY
LOCATION

MONITORING PERIOD
FROM YEAR MO DAY TO YEAR MO DAY
94 06 01 94 06 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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

ATTN: R. L. DOTY, SUPER OPER TECHNOL

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (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	*****	*****		6.90	*****	8.00	(12)	0	8/31	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	3.9	3.9	(19)	0	1/31	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30.0 MO AVG	100.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE FROM EXTR GRAY WTL	SAMPLE MEASUREMENT	*****	*****		*****	13.2	13.2	(19)	0	1/31	Grab
90556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	15.0 MO AVG	20.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.021	0.018	(03)	*****	*****	*****		*	8/31	ESTIMA
50050 1 0 0 EFFLUENT GROSS VALUE	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	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		
R.G. Byram, Sr. V.P. Nuclear Operations TYPED OR PRINTED			717 542-3220	94	9	20

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

FLOW AND PH SHALL BE MEASURED DAILY WHEN DISCHARGING.

9410030089 940926
PDR ADDOCK 05000387
R PDR

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

073 A

PERMIT NUMBER

DISCHARGE NUMBER

MAJOR

Form Approved

(SUBR 02)

OMB No. 2040-0004

P - FINAL

#1 TURBINE BLDG WASTE SUMP

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	94	03	01		94	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ☒ ***

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			
PH	SAMPLE MEASUREMENT	*****	*****		7.70	*****	8.05	(12)	0	3/31	Grab
00400 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU			DAILY GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	0.7	0.7	(19)	0	1/31	Grab
00530 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	*****	30.0 NO AVG	100.0 DAILY MX	MG/L			ONCE/ GRAB MONTH
OIL AND GREASE FROM EXPR GRAV METH	SAMPLE MEASUREMENT	*****	*****		*****	0.0	0.0	(19)	0	1/31	Grab
00556 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	*****	15.0 NO AVG	20.0 DAILY MX	MG/L			ONCE/ GRAB MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0087	0.0087	(03)	*****	*****	*****		*	3/31	Estima
50050 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	REPORT NO 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. 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

717-541-3220

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 - SUSQUEHanna
 ADDRESS 200 NORTH 11TH STREET
ALLENTOWN PA 18101

FACILITY

LOCATION

ATTN: R. L. DUTY, SUPV OPER TECHNOL

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

PA0047325

PERMIT NUMBER

073 A

DISCHARGE NUMBER

MAJOR
 (SUBR 02)
 P - FINAL

Form Approved
 OMB No. 2040-0004

#1 TURBINE BLDG WASTE SUMP

MONITORING PERIOD

FROM YEAR 94 MO 03 DAY 01 TO YEAR 94 MO 06 DAY 31
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(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			
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		7.70	*****	8.05	(12)	0	3/31	Grab
	PERMIT REQUIREMENT	*****	*****	***	6.0 MINIMUM	*****	9.0 MAXIMUM	SU			DAILY GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	0.7	0.7	(19)	0	1/31	Grab
	PERMIT REQUIREMENT	*****	*****	***	*****	30.0 NO AVG	100.0 DAILY MX	MG/L			ONCE/ GRAB MONTH
00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	0.0	0.0	(19)	0	1/31	Grab
	PERMIT REQUIREMENT	*****	*****	***	*****	15.0 NO AVG	20.0 DAILY MX	MG/L			ONCE/ GRAB MONTH
00956 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.0087	0.0087	(03)	*****	*****	*****		*	3/31	Estima
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	HGD	*****	*****	*****	***			DAILY ESTIMA
	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 3 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

[Signature]

TELEPHONE

717/547-3220

DATE

94 9 20

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 PO BOX 11111 STREET
ALLISON PA 14101

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

PAG047325
PERMIT NUMBER

074 A
DISCHARGE NUMBER


MAJOR (SUBR 02) Form Approved
F - FINAL OMB No. 2040-0004
#2 TURBINE BLDG WASTE SUMP

FACILITY
LOCATION

MONITORING PERIOD
FROM YEAR 94 MO 08 DAY 01 TO YEAR 94 MO 08 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (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	*****	*****		7.70	*****	8.20	(12)	0	3/31	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	1.0	1.0	(19)	0	3/31	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30.0 MO AVG	100.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR. GRAV METH	SAMPLE MEASUREMENT	*****	*****		*****	0.0	0.0	(19)	0	1/31	Grab
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	15.0 MO AVG	20.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0087	0.0087	(03)	*****	*****	*****		*	3/31	ESTIMA
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	NGD	*****	*****	*****	****		DAILY	ESTIMA
	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 717/542-3220	DATE 94 9 20
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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 80 JOHN NINTH STREET
ALLTOWN PA 18101

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19)
PA0047325 079 A
PERMIT NUMBER DISCHARGE NUMBER

HAJOR (SUOR 02) Form Approved
F - FINAL OMB No. 2040-0004
SEWAGE TREATMENT EFFLUENT

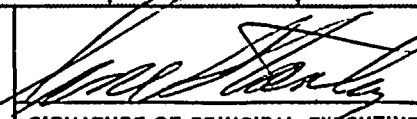
FACILITY
LOCATION

MONITORING PERIOD
FROM YEAR MO DAY TO YEAR MO DAY
94 06 31 TO 94 08 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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

ATTN: R. L. DOLL, SUPER 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			
PH	SAMPLE MEASUREMENT	*****	*****		7.30	*****	7.60	(12)	0	3/31	Grab
00400 A C C DISINFECT, PRCS CMPL	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	1.01	*****	(26)	*****	6.0	*****	(19)	*	1/31	COMP-8
00530 A C C DISINFECT, PRCS CMPL	PERMIT REQUIREMENT	20.00 NO AVG	*****	LBS/DY	*****	30.00 NO AVG	*****	MG/L		ONCE/ MONTH	COMP-8
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.022	0.029	(03)	*****	*****	*****		*	3/31	Floind
00050 A C C DISINFECT, PRCS CMPL	PERMIT REQUIREMENT	0.08 NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		DAILY	FLOIND
CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****		<0.05	0.24	0.45	(19)	*	3/31	Grab
00064 A C C DISINFECT, PRCS CMPL	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	REPORT ARI MEAN	REPORT MAXIMUM	MG/L		DAILY	GRAB
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****		*****	0.0	*****	(13)	*	1/31	Grab
74055 A 1 C DISINFECT, PRCS CMPL	PERMIT REQUIREMENT	*****	*****	****	*****	200 300A GRO	*****	1/ 100NL		ONCE/ MONTH	GRAB
BOD, CARBONACEOUS 05 DAY, 20C	SAMPLE MEASUREMENT	1.75	*****	(26)	*****	10.4	*****	(19)	*	1/31	COMP-8
00002 A C C DISINFECT, PRCS CMPL	PERMIT REQUIREMENT	16.70 NO AVG	*****	LBS/DY	*****	25.0 NO AVG	*****	MG/L		ONCE/ MONTH	COMP-8
	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 717 547-3210 AREA CODE NUMBER	DATE 94 9 20 YEAR MO DAY
--	--	---	---	--------------------------------

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

PERMITTEE NAME/ADDRESS (Include
Facility Name/Location if different)
NAME PROGRESSIVE P L L - SUBURBAN
ADDRESS 30 JOLLA APTS STREET
ALBANY, CA 91801

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

PA0047325

PERMIT NUMBER

079 A

DISCHARGE NUMBER

MAJOR

(SUFR 02)

F - FINAL

Form Approved

OMB No. 2040-0004

SEWAGE TREATMENT EFFLUENT

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	94	08	31		94	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(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			
PH	SAMPLE MEASUREMENT	*****	*****		7.30	*****	7.60	(12)		3/31	Grab
00400 A C U DISINFECT, PRCS CHPLT	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	SU		DAILY GRAB	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	1.01	*****	(20)	*****	6.0	*****	(19)	*	1/31	Comp-
00530 A C U DISINFECT, PRCS CHPLT	PERMIT REQUIREMENT	20.00 NO AVG	*****	LBS/DY	*****	30.00 NO AVG	*****	HG/L		ONCE/ MONTH	COMP-8
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.022	0.029	(03)	*****	*****	*****		*	3/31	Floind
00650 A C U DISINFECT, PRCS CHPLT	PERMIT REQUIREMENT	0.08 NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		DAILY FLOIND	
COLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****		0.05	0.24	0.45	(19)	*	3/31	Grab
00664 A C U DISINFECT, PRCS CHPLT	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	REPORT ARI MEAN	REPORT MAXIMUM	HG/L		DAILY GRAB	
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****		*****	0.0	*****	(13)	*	1/31	Grab
74055 A 1 9 DISINFECT, PRCS CHPLT	PERMIT REQUIREMENT	*****	*****	****	*****	200 300A GEO	*****	/ 100ML		ONCE/ GRAB MONTH	
BOD, CARBONACEOUS 5 DAY, 20C	SAMPLE MEASUREMENT	1.75	*****	(26)	*****	10.4	*****	(19)	*	1/31	Comp-
00002 A C U DISINFECT, PRCS CHPLT	PERMIT REQUIREMENT	15.70 NO AVG	*****	LBS/DY	*****	25.0 NO AVG	*****	HG/L		ONCE/ MONTH	COMP-8
	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

717 542-3210

DATE

94 9 20

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PENNSYLVANIA P & L - SUSQUEHANNA
ADDRESS ENC HARBOR FIFTH STREET
ELLSWORTH PA 18101

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

(2-16) (17-19)
PR0047325 171 A
PERMIT NUMBER DISCHARGE NUMBER


MAJOR (SUBR 02) Form Approved
F - FINAL OMB No. 2040-0004
RADWASTE TREATMENT EFFLUENT

FACILITY
LOCATION

MONITORING PERIOD
FROM YEAR MO DAY TO YEAR MO DAY
94 00 01 94 00 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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

NAME: R. L. DUFF, SUPERVISOR

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) 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	*****	*****		*****	0.0	00	(19)	0	1/31	Grab	
	PERMIT REQUIREMENT	*****	*****	***	*****	30.0 NO AVG	100.0 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	0.092	(03)	*****	*****	*****		*	18/31	ESTIMA	
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		DAILY	ESTIMA	
	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 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			
R.G. Byram, Sr. V.P. Nuclear Operations								717 542-3220	94	9	20	
TYPED OR PRINTED								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 740 N. 1st Street
ALLIQUA PA 18101

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

PA0047325

PERMIT NUMBER

271 A

DISCHARGE NUMBER

HAJOR

(SUBR C2)

F - FINAL

WASTE FILTER BYPASS

Form Approved

OMB No. 2040-0004

FACILITY
LOCATION

ATTN: R. L. DOTY, SUPV OPER TECHNOL

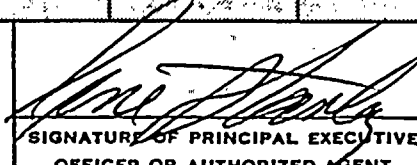
MONITORING PERIOD

FROM YEAR 94 MO 01 DAY 01 TO YEAR 94 MO 08 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE 12 ***

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	*****	*****		*****			(19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	30.0 NO AVG	100.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTRA GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****			(19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	15.0 NO AVG	20.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50750 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	*****	*****	*****				
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		DAILY FLOWING	
	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. 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 717-542-3220	DATE 94 9 20
--	--	---	---------------------------	-----------------

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 PAIDSYLLIA F G L - SUSQUEHNA
 ADDRESS 330 ALMA AVE SE
ALLIANCE FA 18101

FACILITY
 LOCATION

ATTN: H. L. DOTY, SUPER OPER TECHNOL

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

(2-16)
PA0047325
 PERMIT NUMBER

(17-19)
271 A
 DISCHARGE NUMBER

HAJOR
 (SUBR (2)
 F - FINAL
 WASTE FILTER BYPASS

Form Approved
 OMB No. 2040-0004

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
94	06	01		94	06	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE 12 ***
 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			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****			(19)		
	PERMIT REQUIREMENT	*****	*****	****	*****	30.0 NO AVG	100.0 DAILY MX	MG/L	ONCE/	GRAB
OIL AND GREASE FROM EXTRA GRAV MESH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****			(19)		
	PERMIT REQUIREMENT	*****	*****	****	*****	15.0 NO AVG	20.0 DAILY MX	MG/L	ONCE/	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 00150 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	*****	*****	*****			
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****	DAILY	FLOI/D
	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. 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]
 SIGNATURE OF PRINCIPAL EXECUTIVE
 OFFICER OR AUTHORIZED AGENT

TELEPHONE
717 542-3270
 AREA CODE NUMBER
 DATE
94 9 20
 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 - SUSQUEHANNA
ADDRESS 120 NORTH RIVER STREET
ALLENTOWN PA 18101

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

(2-16) PAC047325 (17-19) 471 A
PERMIT NUMBER DISCHARGE NUMBER


MAJOR (SUBR 02) Form Approved
F - FINAL OMB No. 2040-0004
WASTE FILTER EFFLUENT

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

MONITORING PERIOD
FROM YEAR 94 MO 06 DAY 01 TO YEAR 94 MO 08 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53)				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 NO AVG	100.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE FROM EXTR-GRAV NET 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****			(19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	15.0 NO 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 NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		DAILY	FLOI/D
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <u>R. G. Byram, Sr. V.P.</u> <u>Nuclear Operations</u> 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 <u>717-542-3120</u>	DATE 94 9 20 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
ALLENDALE PA 18101

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

Pa0047325

PERMIT NUMBER

371 A

DISCHARGE NUMBER

MAJOR
(SUBR 02)
F - FINAL

Form Approved
OMB No. 2040-0004

NEUTRALIZATION BASIN DISCHARGE

FACILITY
LOCATION

ATTN: R. L. DOW, SUPV OPER TECHNOL

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
94	06	01		94	06	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

PARAMETER (32-37)		(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 VALUE	SAMPLE MEASUREMENT	*****	*****		*****	6.1	6.1	(19)	0	1/31	Grab
	PERMIT REQUIREMENT	*****	*****	****	*****	30.0 MO AVG	100.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE FROM EXTRA-GRAV MESH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	1.4	1.4	(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	0.16	0.18	(03)	*****	*****	*****		*	3/31	Estimate
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		DAILY	ESTIMATE
	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. 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

717 542-3220

AREA
CODE

NUMBER

DATE

94 9 20

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 CONDITIONS.

*EN. FLOW SHALL BE MEASURED DAILY

PERMITTEE NAME/ADDRESS (Include
Facility Name/Location if different)
NAME PENNSYLVANIA P & L - SUSQUEHANA
ADDRESS 140 NORTH NINTH STREET
ALLENTOWN PA 18101

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

(2-16)
PAC047325

PERMIT NUMBER

(17-19)
471 A

DISCHARGE NUMBER

MAJOR
(SUBR 02)
F - FINAL

Form Approved
OMB No. 2040-0004

WASTE FILTER EFFLUENT

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	94	00	31		94	00	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (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	*****	*****		*****			(19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	30.0 NO AVG	100.0 DAILY MX	MG/L		ONCE/ GRAB MONTH	
OIL AND GREASE PHEON EXPR-GRAV DETN 00536 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****			(19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	15.0 NO AVG	20.0 DAILY MX	MG/L		ONCE/ GRAB MONTH	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 00538 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	*****	*****	*****				
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		DAILY FLOWND	
	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. 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 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
AREA NUMBER

94 9 20
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 _____
 ADDRESS _____
 FACILITY _____
 LOCATION _____

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

(2-16)

(17-19)

PERMIT NUMBER

DISCHARGE NUMBER

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

MONITORING PERIOD								
FROM			TO					
YEAR	MO	DAY	YEAR	MO	DAY			
(20-21)	8	14	(26-27)	9	14			

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(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			
						1.8	1.8		0	1/31	Grab
						95.9*	95.9*		1	1/31	Grab
		0.048	0.048						*	31/31	FLOUND
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		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.)				TELEPHONE		DATE			
R G Byram Jr. V.P. Nuclear Operations						717 312-3221		94 9 20			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

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

100% SHALL BE RECOVERED FROM THE DISCHARGER.

*See cover letter for explanation of oil and grease sampling results.