



Tennessee Valley Authority, Sequoyah Nuclear Plant, P.O. Box 2000, Soddy Daisy, TN 37384

January 8, 2020

ATTN: Document Control Desk
U.S. Nuclear Regulatory Commission
Washington, D.C. 20555-0001

Subject: **Sequoyah Nuclear Plant, Discharge Monitoring Report (DMR), December 2019**

Attached is the December 2019 DMR for Sequoyah Nuclear Plant.

Respectfully,

A handwritten signature in blue ink that reads "Millicent Garland". The signature is fluid and cursive, with the first name "Millicent" and last name "Garland" clearly distinguishable.

Millicent Garland
Environmental Scientist

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

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

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

MAJOR

(SUBR 01)

F - FINAL

DIFFUSER DISCHARGE

EFFLUENT

Form Approved.

OMB No. 2040-0004

TN0026450

101 G

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

From YEAR **19** MO **12** DAY **01** To YEAR **19** MO **12** DAY **31**

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

ATTN:Millicent Garland

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	27.1	04	0	31 / 31	RCORDR
00010 1 0	PERMIT REQUIREMENT	*****	*****	***	*****	*****	Req. Mon. DAILY MAX	DEG. C.		CONTI NUOUS	CALCTD
EFFLUENT GROSS											
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	13.5	04	0	31 / 31	MODEL
00010 Z 0	PERMIT REQUIREMENT	*****	*****	***	*****	*****	30.5 DAILY MX	DEG. C.		CONTI NUOUS	CALCTD
INSTREAM MONITORING											
TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG.C	SAMPLE MEASUREMENT	*****	*****	**	*****	*****	1.6	04	0	31 / 31	CALCTD
00016 1 1	PERMIT REQUIREMENT	*****	*****	***	*****	*****	5.0 DAILY MX	DEG. C.		CONTI NUOUS	CALCTD
EFFLUENT GROSS											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	*****	1913	03	*****	*****	*****	**	0	31 / 31	RCORDR
50050 1 0	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MAX	MGD	*****	*****	*****	***		CONTI NUOUS	RCORDR
EFFLUENT GROSS											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	1760	*****	03	*****	*****	*****	03	0	31 / 31	CALCTD
50050 1 0	PERMIT REQUIREMENT	Req. Mon. MO AVG	*****	MGD	*****	*****	*****	MGD		CONTI NUOUS	CALCTD
EFFLUENT GROSS VALUE											
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	**	*****	0.015	0.029	19	0	11 / 31	GRAB
50060 1 0	PERMIT REQUIREMENT	*****	*****	***	*****	0.1 MO AVG	0.1 DAILY MAX	MG/L		FIVE PER WEEK	CALCTD
EFFLUENT GROSS VALUE											
TEMPERATURE - C, RATE OF CHANGE	SAMPLE MEASUREMENT	*****	0.1	62	*****	*****		**	0	31 / 31	CALCTD
82234 1 0	PERMIT REQUIREMENT	*****	2.0 DAILY MX	DEG C/HR	*****	*****	*****	***		CONTI NUOUS	CALCTD
EFFLUENT GROSS											

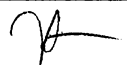
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Matthew Rasmussen

Site Vice President

TYPED OR PRINTED

I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.


 Site Vice President
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

423 843-7001

AREA CODE

NUMBER

DATE

20 01 06

YEAR MO DAY

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

No closed mode operation. The following injections occurred: Flogard MS6236 (max calc. was 0.02962 mg/L, limit is 0.20 mg/L), Spectrus BD1500 (max calc. was 0.049, limit is 2.0 mg/L), and Spectrus CT1300 (max calc. was 0.0343 mg/L, limit is 0.05 mg/L).

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 Location **HAMILTON COUNTY**

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

MAJOR
 (SUBR 01)

Form Approved.
 OMB No. 2040-0004

TN0026450 101 T
 PERMIT NUMBER DISCHARGE NUMBER

F - FINAL
 BIOMONITORING FOR OUTFALL 101
 EFFLUENT

MONITORING PERIOD
 From YEAR 19 MO 12 DAY 01 To YEAR 19 MO 12 DAY 31

*** NO DISCHARGE ***

ATTN:Millicent Garland

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
IC25 STATRE 7DAY CHR CERIODAPHNIA	SAMPLE MEASUREMENT	*****	*****	**	Monitoring Not Required	*****	*****	23			
TRP3B 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	*****	*****	****	42.8 MINIMUM	*****	*****	PERCENT		SEMI ANNUAL	COMPOS
IC25 STATRE 7DAY CHR PIMEPHALES	SAMPLE MEASUREMENT	*****	*****	**	Monitoring Not Required	*****	*****	23			
TRP6C 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	*****	*****	****	42.8 MINIMUM	*****	*****	PERCENT		SEMI ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Matthew Rasmussen Site Vice President TYPED OR PRINTED	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE		DATE		
		423	843-7001	20	01	06
	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 Toxicity was not sampled in December 2019.

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

MAJOR
 (SUBR 01)

Form Approved.
 OMB No. 2040-0004

TN0026450

103 G

PERMIT NUMBER

DISCHARGE NUMBER

F - FINAL

LOW VOL. WASTE TREATMENT POND

EFFLUENT

ATTN:Millicent Garland

MONITORING PERIOD
 From YEAR 19 MO 12 DAY 01 To YEAR 19 MO 12 DAY 31

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	**	6.9	*****	7.8	12	0	6 / 31	GRAB
00400 1 0	PERMIT REQUIREMENT	*****	*****	**	6.0	*****	9.0	SU		ONCE/ WEEK	GRAB
EFFLUENT GROSS					MINIMUM		MAXIMUM				
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	*****	5.0	5.0	19	0	1 / 31	GRAB
00530 1 0	PERMIT REQUIREMENT	*****	*****	**	*****	30.0	100.0	MG/L		ONCE/ MONTH	GRAB
EFFLUENT GROSS						MO AVG	DAILY MX				
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	**	*****	<4.8	<4.8	19	0	1 / 31	GRAB
00556 1 0	PERMIT REQUIREMENT	*****	*****	**	*****	15.0	20.0	MG/L		ONCE/ MONTH	GRAB
EFFLUENT GROSS						MO AVG	DAILY MX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	1.523	1.660	03	*****	*****	*****	**	0	5 / 31	INSTAN
50050 1 0	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon DAILY MX	MGD	*****	*****	*****	**		ONCE/ WEEK	INSTAN
EFFLUENT GROSS											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

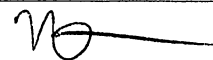
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Matthew Rasmussen

Site Vice President

TYPED OR PRINTED

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Site Vice President

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

423 843-7001

AREA CODE

NUMBER

DATE

20 01 06

YEAR MO DAY

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

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

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

MAJOR
 (SUBR 01)

Form Approved.
 OMB No. 2040-0004

TN0026450 110 G
 PERMIT NUMBER DISCHARGE NUMBER

F - FINAL
 RECYCLED COOLING WATER
 EFFLUENT

MONITORING PERIOD
 From YEAR MO DAY To YEAR MO DAY
19 12 01 To 19 12 31

*** NO DISCHARGE XX ***

ATTN:Millicent Garland

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		04			
00010 1 0	PERMIT REQUIREMENT	*****	*****	**	*****	*****	REPORT DAILY MX	DEG C		CONTIN UOUS	CALCTD
EFFLUENT GROSS VALUE											
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		04			
00010 Z 0	PERMIT REQUIREMENT	*****	*****	**	*****	*****	30.5 DAILY MX	DEG C		CONTIN UOUS	CALCTD
INSTREAM MONITORING											
TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG.C	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		04			
00016 1 0	PERMIT REQUIREMENT	*****	*****	**	*****	*****	5 DAILY MX	DEG C		CONTIN UOUS	CALCTD
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	*****		03	*****	*****	*****	**			
50050 1 0	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	MGD	*****	*****	*****	**		CONTIN UOUS	RCORDR
EFFLUENT GROSS VALUE											
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	**	*****			19			
50060 1 0	PERMIT REQUIREMENT	*****	*****	**	*****	0.1 MO AVG	0.1 DAILY MX	MG/L		Five per Week	CALCTD
EFFLUENT GROSS VALUE											
TEMPERATURE - C, RATE OF CHANGE	SAMPLE MEASUREMENT	*****		04	*****	*****	*****	**			
82234 1 0	PERMIT REQUIREMENT	*****	2 DAILY MX	DEG C	*****	*****	*****	**		CONTIN UOUS	CALCTD
EFFLUENT GROSS VALUE											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

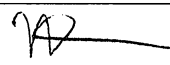
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 Site Vice President
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

423 843-7001

AREA CODE

NUMBER

DATE

20 01 06

YEAR MO DAY

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

No Discharge this Period

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

Name **TVA - SEQUOYAH NUCLEAR PLANT**
 Address **P.O. BOX 2000**
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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)

MAJOR
 (SUBR 01)

Form Approved.
 OMB No. 2040-0004

TN0026450 110 T
 PERMIT NUMBER DISCHARGE NUMBER

F - FINAL
 RECYCLED COOLING WATER
 EFFLUENT

MONITORING PERIOD
 From YEAR 19 MO 12 DAY 01 To YEAR 19 MO 12 DAY 31

*** NO DISCHARGE XX ***

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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
IC25 STATRE 7DAY CHR CERIODAPHNIA	SAMPLE MEASUREMENT	*****	*****	**		*****	*****	23			
TRP3B 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	42.8 MINIMUM	*****	*****	PERCENT		SEMI ANNUAL	COMPOS
IC25 STATRE 7DAY CHR PIMEPHALES	SAMPLE MEASUREMENT	*****	*****	**		*****	*****	23			
TRP6C 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	42.8 MINIMUM	*****	*****	PERCENT		SEMI ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

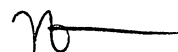
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TELEPHONE

423 843-7001

AREA CODE

NUMBER

DATE

20 01 06

YEAR MO DAY

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

No Discharge this Period

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

Name **TVA - SEQUOYAH NUCLEAR PLANT**
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 Location **HAMILTON COUNTY**

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

TN0026450 **118 G**
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR
 (SUBR 01)
 F - FINAL
 WASTEWATER & STORM WATER
 EFFLUENT

Form Approved.
 OMB No. 2040-0004

ATTN:Millicent Garland

MONITORING PERIOD
 From **19 12 01** To **19 12 31**

*** NO DISCHARGE XX ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*****	*****	**		*****	*****	19			
00300 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	*****	*****	****	2 MINIMUM	*****	*****	MG/L		TWICE/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		19			
00530 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	*****	*****	****	*****	*****	100 DAILY MX	MG/L		TWICE/ WEEK	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		25			
00545 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1 DAILY MX	ML/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			03	*****	*****	*****	**			
50050 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	MGD	*****	*****	*****	*		ONCE/ BATCH	ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Matthew Rasmussen

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TELEPHONE

423 843-7001

AREA CODE

NUMBER

DATE

20 01 06

YEAR MO DAY

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

During this reporting period, there has been no flow from the Dredge Pond other than that resulting from rainfall. No Discharge this Period