



BOSTON EDISON

25 Braintree Hill Office Park
Braintree, Massachusetts 02184

E. J. Wagner
Vice President
Nuclear Engineering

BEC0 90- 013
April 23 1990

NPDES Program Operations Section (WCP-2109)
Environmental Protection Agency
P. O. Box 8127
Boston, MA 02214

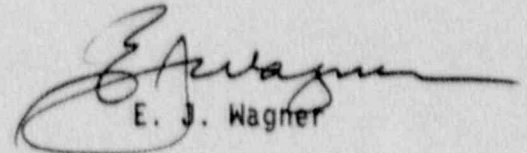
Massachusetts Division of Water Pollution Control
Lakeville Hospital
Lakeville, MA 02347

DISCHARGE MONITORING REPORT

Dear Sirs:

Enclosed is the Discharge Monitoring Report for Pilgrim Nuclear Power Station (PNPS), NPDES Permit Number MA0003557 (Federal) and Number 359 (State).

The period covered by this report is January 1, 1990 through March 31, 1990.



E. J. Wagner

RDA/jcp/4233

Attachments: 1. Summary
2. Discharge Monitoring Report

cc: U. S. Nuclear Regulatory Commission
Document Control Desk
Washington, DC 02555

U. S. Nuclear Regulatory Commission
Region I
475 Allendale Road
King of Prussia, PA 19406

Senior NRC Resident Inspector
Pilgrim Nuclear Power Station

9004300238 900331
PDR ADCK 05000293
R PDC

IEA8
11

ATTACHMENT 1 TO BECO LETTER 90-013

SUMMARY

PILGRIM I DISCHARGE MONITORING REPORT

In accordance with the Federal Clean Water Act, as amended (33USC 1251 et seq.: the "CWA"), and the Massachusetts Clean Water Act, as amended (M.G.L.; Chap. 21, 26-53), regarding effluent limitations, monitoring requirements and other conditions set forth in the Pilgrim NPDES Permit (Federal Permit Number MA0003557, and State Permit Number 359), parts I and II, the following information is submitted for the period January 1, 1990 through March 31, 1990.

I. Discharge Points Covered in this Report

<u>Discharge Point</u>	<u>Discharge Identification</u>
001	Condenser Cooling Water
002	Thermal Backwash for Biofouling Control
003	Intake Screen Wash
010	Service Cooling Water
011	Makeup Water and Demineralizer Waste Discharge

II. Summary and Notes of Discharge Report

- A. The flow at points 001 and 010 are calculated from system pump capacity and are equal to the total for all pumps in each system running at full capacity for a 24-hour period. The flow at point 011 is measured by noting sump levels before and after discharge. Flow at point 002 is a conservative figure obtained by calculating flow if backwashing took place for 24 hours. Flow at point 003 is calculated from system pump capacity and mean operating time.
- B. The temperatures at points 001 and 002 are measured by resistance temperature detectors (RTD's).
- C. Periodically, total residual chlorine (TRC) concentration in the service cooling water (010) exceeds Permit requirements (0.25 ppm daily average TRC and 0.50 ppm daily maximum TRC) prior to mixing with any other stream, primarily because of the number of service water pumps in operation. Chlorine injection levels are lowered as a corrective measure. The dilution provided by the PNPS circulating water flow keeps total residual chlorine concentrations discharged to Cape Cod Bay below the NPDES Permit limit of 0.1 ppm.
- D. Via USEPA letter to Boston Company dated December 1, 1983, Pilgrim Station has been given permission to increase its Service Cooling Water (010) flow rate from 11.7 million gallons/day (MGD) to 19.4 MGD.

- E. Thirty day average, intake screen wash (003) flow periodically exceeds Permit levels (0.336 MGD) because of continuous screen washing required for removal of heavy debris loads, caused by coastal storms. A letter requesting an increase in this Permit limit from 0.336 MGD to 2.02 MGD was sent to T. E. Landry of the USEPA Compliance Branch (BECO Letter 5.84.048) on December 13, 1984. The increase was verbally approved by the USEPA and will be incorporated in the next renewal issuance of the NPDES permit.
- F. Intake traveling water screens were operated without dechlorination pumps operating on January 21, 2, 29, 31 (2); February 2, 3, 4-5, 5 (2), 7 (3), 8, 13 (3), 14, 25, 27; March 3, 4-5, 7 (2), 8. There was one occurrence on each date unless otherwise noted.
- G. On March 9, 1990 a telephone call (BECO Telecon 4.90.006) was made to the USEPA, as required by the PNPS NPDES Permit, to inform them of a discharge ΔT violation on March 8, 1990 at 1600. The ΔT limit of 32°F was exceeded for 15-20 minutes with a maximum of 32.21°F being recorded.
- H. A March 28, 1990 telephone call (BECO Telecon 4.90.008) was made to the USEPA to obtain approval to discharge 7,000 gallons of effluent containing sodium pentaborate at a diluted concentration of 1.1 ppm. The effluent discharge flow rate was approximately 100 gpm with dilution provided by the operation of one circulating seawater pump.

ATTACHMENT 2 TO BECO LETTER 90- 013

DISCHARGE MONITORING REPORT

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Permit Approved
 Dated 04/01/99
 Approved by 04/01/99

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

NAME **BOSTON ED #1 PILGRIM PLANT**
 ADDRESS **ROCKY HILL ROAD**
RFD #1
PLYMOUTH
MA 02360

HA0003557
 PERMIT NUMBER

F - FINAL
 COOLING WATERS

MONITORING PERIOD
 YEAR MO DAY YEAR MO DAY
 FROM 90 01 01 TO 90 01 31

MAJOR (SUBR 3)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	QUANTITY OR LOADING (36-37) (32-33) (24-25)			QUALITY OR CONCENTRATION (34-35)			NO. EX	FREQUENCY OF ANALYSIS (34-35)	SAMPLE TYPE (32-33)
	AVERAGE (36-37)	MAXIMUM (34-35)	UNITS (32-33)	MINIMUM (34-35)	AVERAGE (36-37)	MAXIMUM (34-35)			
TEMPERATURE, WATER	*****	*****	*****	*****	*****	*****	0	99/99	CN
DEG. FAHRENHEIT	*****	*****	*****	*****	*****	*****	0	99/99	CN
00011 1 0 0	*****	*****	*****	*****	*****	*****	0	99/99	CN
EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	0	99/99	CN
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	*****	*****	*****	*****	*****	*****	0	99/99	CN
50050 1 0 0	*****	*****	*****	*****	*****	*****	0	99/99	CN
EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	0	99/99	CN
CHLORINE, TOTAL RESIDUAL	*****	*****	*****	*****	*****	*****	0	99/99	CN
50060 1 0 0	*****	*****	*****	*****	*****	*****	0	99/99	CN
EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	0	99/99	CN

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
P. A. FINESEON
PLANT MANAGER

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER
P. A. Fineseon

TELEPHONE
 508 746-7900

PH SHALL NOT VARY MORE THAN 0.5 PH STANDARD UNITS FROM INTAKE WATER. TEMP. SHALL AT NO TIME EXCEED A 32 DEGREE RISE OVER TEMP OF INTAKE WATER.

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

NAME **BOSTON ED #1 PILGRIM PLANT**

ADDRESS **ROCKY HILL ROAD**

RFD #1

PLYMOUTH

MA 02360

FACILITY

LOCATION

ATTN: **ROY ANDERSON, PLANT MANAGER**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(27-19)

MA0003557

PERMIT NUMBER

001 1

DISCHARGE NUMBER

**F - FINAL
COOLING WATERS**

Revised 10/80
OMB No. 2050-0004
Approval required 9-30-80

MONITORING PERIOD

FROM **90 02 01** TO **90 02 28**
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR 5)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (58-63)			NO EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0	SAMPLE MEASUREMENT	*****	*****		61.5	63.6	66.6		0 99/99	CN
EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0	PERMIT REQUIREMENT	*****	*****	****						
EFFLUENT GROSS VALUE CHLORINE, TOTAL RESIDUAL 50060 1 0 0	SAMPLE MEASUREMENT	444.7	446.4		*****	*****	*****		0 99/99	CN
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	447.0	500.0							
		30DA AVG	DAILY MX	MGD						
	SAMPLE MEASUREMENT	*****	*****		0.05	0.05	0.05		0 01/05	B2
	PERMIT REQUIREMENT	*****	*****	****						
	SAMPLE MEASUREMENT									
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	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.)

ES Kraft, f
SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

508 746-7700

90 04 11

AREA
CODE

NUMBER

YEAR

MO

DAY

TYPED OR PRINTED

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

PH SHALL NOT VARY MORE THAN 0.5 PH STANDARD UNITS FROM INTAKE WATER.
TEMP. SHALL AT NO TIME EXCEED A 32 DEGREE RISE OVER TEMP OF INTAKE WATER.

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

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

Form Approved
OMB No. 2040-0084
Approved expires 9-30-85

NAME **BOSTON ED #1 PILGRIM PLANT**
ADDRESS **ROCKY HILL ROAD**
RFD #1
PLYMOUTH **MA 02360**

(12-16) **MA0003557**
PERMIT NUMBER
(17-19) **001 1**
DISCHARGE NUMBER

F - FINAL
COOLING WATERS

FACILITY
LOCATION

MONITORING PERIOD
FROM **90 03 01** TO **90 03 31**
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR S)
NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (67-68)	FREQUENCY OF ANALYSIS (69-70)	SAMPLE TYPE (80-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0	SAMPLE MEASUREMENT	*****	*****		44.6	46.6	48.9		0	99/99	CN
EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0	PERMIT REQUIREMENT	*****	*****	****				DEG.F			
EFFLUENT GROSS VALUE CHLORINE, TOTAL RESIDUAL 50060 1 0 0	SAMPLE MEASUREMENT	278.4	446.4		*****	*****	*****		0	99/99	CN
	PERMIT REQUIREMENT	447.0	500.0	MGD				****			CONTINUOUS
		30DA AVG	DAILY MX					****			
	SAMPLE MEASUREMENT	*****	*****		0.05	0.05	0.05		0	01/05	G2
	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY OR	REPORT	.1 DAILY MX	MG/L			SCE/3RAB-2 OISCH
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER R. A. ANDERSON PLANT MANAGER 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 18 USC § 1343. 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>Ed Kraft</i>	TELEPHONE 508 746-7900 AREA CODE NUMBER	DATE 90 04 11 YEAR MO DAY
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PH SHALL NOT VARY MORE THAN 0.5 PH STANDARD UNITS FROM INTAKE WATER.
TEMP. SHALL AT NO TIME EXCEED A 32 DEGREE RISE OVER TEMP OF INTAKE WATER.

NAME BOSTON ED #1 PILGRIM PLANT
ADDRESS ROCKY HILL ROAD
RFD #1
PLYMOUTH MA

**F - FINAL
CONDENSER BACKWASH**

MA0003557	002 1
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
FROM	TO
YEAR MO DAY	YEAR MO DAY
90 01 01	90 01 31

ATTN: ROY ANDERSON, PLANT MANAGER

MAJOR (SUB S)
NOTE: Read instructions before

PARAMETER (32-37)		QUANTITY OR LOADING (46-53)		QUANTITY OR CONCENTRATION (54-61)		FREQUENCY OF ANALYSIS (62-65)		SAMPLE TYPE (69-70)	
AVERAGE		MAXIMUM		MINIMUM		AVERAGE		MAXIMUM	
UNITS		UNITS		UNITS		UNITS		UNITS	
TEMPERATURE, WATER	SAMPLE MEASUREMENT	*****	*****						
DEG. FAHRENHEIT	PERMIT REQUIREMENT	*****	*****						
00011 1 0 0	SAMPLE MEASUREMENT	*****	*****						
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****						
FLOW, IN CONDUIT OR	SAMPLE MEASUREMENT	*****	*****						
THRU TREATMENT PLANT	PERMIT REQUIREMENT	*****	*****						
60050 1 0 0	SAMPLE MEASUREMENT	*****	*****						
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****						
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	SAMPLE MEASUREMENT								

THE PH SHALL NOT VARY MORE THAN 0.5 STANDARD UNITS FROM THAT OF THE INTAKE WATER. FLOW RATE IS TO BE ESTIMATED AS IF BACKFLUSHING TOOK PLACE FOR 24 CONTINUOUS HOURS. SEE PERMIT PAGE 7 FOR CONDITIONS REGARDING THE FREQUENCY OF DISCHARGE.

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

000777900309-1024

PAGE 1 OF 1

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(17-19)

Permit Approval
CDD No. 2000-0004
Approval expires 9-30-08

F - FINAL
CONDENSER BACKWASH

PERMITTEE NAME/ADDRESS (Include
Facility Name/Location if different)
NAME BOSTON ED #1 PILGRIM PLANT
ADDRESS ROCKY HILL ROAD
RFD #1
PLYMOUTH
FACILITY
LOCATION
MA 02360

HA0003557
PERMIT NUMBER

002.1
DISCHARGE NUMBER

MONITORING PERIOD
YEAR MO DAY YEAR MO DAY
FROM 90 02 01 TO 90 02 28

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (65-73)			NO EX (74-75)	FREQUENCY OF ANALYSIS (84-85)	SAMPLE TYPE (89-90)
	AVERAGE (66-67)	MAXIMUM (68-69)	UNITS (70-71)	MINIMUM (72-73)	AVERAGE (74-75)	MAXIMUM (76-77)			
TEMPERATURE, WATER	*****	*****						0 99/99	CN
DEG. FAHRENHEIT	*****	*****							
00011 1 0 0	*****	*****							
EFFLUENT GROSS VALUE	*****	*****							
FLOW, IN CONDUIT OR	23.3	27.9		*****	*****			0 01/DS	ES
THRU TREATMENT PLANT	REPORT	355.0		*****	*****				ESTIMA
50050 1 0 0		DAILY OR MGD							
EFFLUENT GROSS VALUE									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
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SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
R. A. ANDERSON
PLANT MANAGER

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER
ED. Kraft, Jr.

TELEPHONE
508 746-7900

DATE
90 04 11

OFFICER OR AUTHORIZED AGENT
AREA CODE NUMBER

TYPED OR PRINTED

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

THE PH SHALL NOT VARY MORE THAN 0.5 STANDARD UNITS FROM THAT OF THE INTAKE WATER. FLOW RATE IS TO BE ESTI
MATED AS IF BACKFLUSHING TOOK PLACE FOR 24 CONTINUOUS HOURS. SEE PERMIT PAGE 7 FOR CONDITIONS REGARDING YH
E FREQUENCY OF DISCHARGE.

NAME BOSTON ED #1 PILGRIM PLANT

ADDRESS ROCKY HILL ROAD

RFD #1

PLYMOUTH

MA 02360

AQILITY

LOCATION

ATTN: ROY ANDERSON, PLANT MANAGER

PARAMETER (32-37)

TEMPERATURE, WATER

REG. FAHRENHEIT

10011 1 0 0

EFFLUENT GROSS VALUE

FLOW, IN CONDUIT OR

THRU TREATMENT PLANT

10050 1 0 0

EFFLUENT GROSS VALUE

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

(17-19)

MA0003557

PERMIT NUMBER

MONITORING PERIOD

FROM YEAR 90 MO 07 DAY 01 TO YEAR 90 MO 03 DAY 31

(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR 5)

NOTE: Read instructions before completing this form.

F - FINAL
CONDENSER BACKWASH

PARAMETER (32-37)	QUANTITY OR LOADING (34-41)				QUALITY OR CONCENTRATION (42-49)				NO. OF ANALYSES (50-53)	FREQUENCY OF ANALYSES (54-58)	SAMPLE TYPE (59-70)
	AVERAGE (46-51)	MAXIMUM (52-53)	MINIMUM (54-55)	UNITS (56-57)	AVERAGE (46-51)	MAXIMUM (52-53)	MINIMUM (54-55)	UNITS (56-57)			
SAMPLE MEASUREMENT	*****	*****	*****	*****	nonthermal backwash				0	99/99	CN
PERMIT REQUIREMENT	*****	*****	*****	*****							
SAMPLE MEASUREMENT	51.2	51.2	51.2	*****					0	3/1/95	ES
PERMIT REQUIREMENT	REPORT	259.0	DAILY MX MGD	*****							ESTIMA
SAMPLE MEASUREMENT											
PERMIT REQUIREMENT											
SAMPLE MEASUREMENT											
PERMIT REQUIREMENT											
SAMPLE MEASUREMENT											
PERMIT REQUIREMENT											
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SAMPLE MEASUREMENT											
PERMIT REQUIREMENT											
SAMPLE MEASUREMENT											
PERMIT REQUIREMENT											
SAMPLE MEASUREMENT											
PERMIT REQUIREMENT											

I CERTIFY, UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INSPECTION OF THESE INDIVIDUALS' IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE NO VIOLATIONS OF THE NPDES ACT OR REGULATIONS. I AM AWARE THAT THERE ARE NO VIOLATIONS OF THE NPDES ACT OR REGULATIONS. I AM AWARE THAT THERE ARE NO VIOLATIONS OF THE NPDES ACT OR REGULATIONS.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
R.A. ANDERSON
PLANT MANAGER

TYPED OR PRINTED

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER

OFFICER OR AUTHORIZED AGENT

DATE

MO

YEAR

NUMBER

AREA CODE

TELEPHONE

508 746-7749

90

04

11

THE PH SHALL NOT VARY MORE THAN 0.5 STANDARD UNITS FROM THAT OF THE INTAKE WATER. FLOW RATE IS TO BE ESTIMATED AS IF BACKFLUSHING TOOK PLACE FOR 24 CONTINUOUS HOURS. SEE PERMIT PAGE 7 FOR CONDITIONS REGARDING THE FREQUENCY OF DISCHARGE.

MA0003557
PERMIT NUMBER

003 A
DISCHARGE NUMBER

MONITORING PERIOD
YEAR MO DAY YEAR MO DAY
FROM 90 02 01 TO 90 02 28

MAJOR (SUBR S)
NOTE: Read instructions before completing this form.

PARAMETER (32-37)	QUANTITY OR LOADING (34-35)			QUALITY OR CONCENTRATION (36-37) (38-39) (40-41)			NO. EE	FREQUENCY OF ANALYSIS (54-55)	SAMPLE TYPE (60-79)
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	0.484	1.512		*****	*****	*****	1	99/99	ES
0050 1 0 0	0.336								
EFFLUENT GROSS VALUE	300A AVE		MGO						
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
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PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
R.A. ANDERSON
PLANT MANAGER

DATE
90 04 11

TELEPHONE
508 746-7800

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER
OFFICER OR AUTHORIZED AGENT

AREA CODE
508

NUMBER
746-7800

DATE
90 04 11

SEE SUMMARY NOTES #II.E.

THE TEMPERATURE OF THIS DISCHARGE SHALL AT NO TIME EXCEED THE TEMPERATURE OF THE INTAKE WATER.
ALL FISH SHELLFISH AND OTHER ORGANISMS COLLECTED OR TRAPPED ON INTAKE SCREEN SHOULD BE RETURNED TO WATER
IF AMBIENT TEMP. SUFFICIENTLY DISINCLINE STRUCTURES TO PREVENT REIMPINGEMENT.

FORM 3320-1 (Rev. 10-79) PREVIOUS EDITION TO BE USED
UNTIL SUPPLY IS EXHAUSTED

00090/900309-1024

PAGE 1 OF

NAME BOSTON ED #1 PILGRIM PLANT

ADDRESS ~~ROCKY~~ HILL ROAD

RFD #1

PLYMOUTH

MA 02360

(17-19)

003 A	DISCHARGE NUMBER
-------	------------------

F - FINAL
INTAKE SCREEN WASH

FACILITY

LOCATION

ATTN: ROY ANDERSON, PLANT MANAGER

PARAMETER
(92-37)

FLOW, IN CONDUIT OR
THRU TREATMENT PLANT

50050 1 0 0

EFFLUENT GROSS VALUE

SAMPLE
MEASUREMENT

PERMIT

REQUIREMENT

SAMPLE MEASUREMENT	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	

PERMIT
REQUIREMENT

SAMPLE

PERMIT

REQUIREMENT

SAMPLE
MEASUREMENT

PERMIT
REQUIREMENT

SAMPLE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	

MEASUREMENT

PREREQUISITE

SAMPLE MEASUREMENT

PERMIT

REQUIREMENT	1. CER
OFFICER	

D. A. ANDERSON

PLANT MANAGER

TYPED ON PRINTED

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

CONVICTED UNDER PENALTY OF LAW THAT HAVE PERSONALLY EXAMINED AND ARE FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS SUBMITTED 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 U.S.C. § 1001 AND 18 U.S.C. § 1011. (Indicate whether you are a "Felon" or "Non-Felon" and "Felon" must sign this statement.)

TELEPHONE

DATE

1

E. Kraft, Jr.
SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

508746-7900	AREA	NUMBER
-------------	------	--------

04	11
----	----

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all other comments here)

THE TEMPERATURE OF THIS DISCHARGE SHALL AT NO TIME EXCEED THE TEMPERATURE OF THE INTAKE WATER.

ALL FISH SHELLFISH AND OTHER ORGANISMS COLLECTED OR TRAPPED ON INTAKE SCREEN SHOULD BE RETURNED TO WATER AT AMBIENT TEMP. SUFFICIENTLY DISTANT FROM INTAKE STRUCTURES TO PREVENT REIMPINGEMENT.

A Form 3320-1 (Rev. 10-79) PREVIOUS EDITION TO BE USED
UNTIL SUPPLY IS EXHAUSTED

000917900309-1026

PAGE 1 OF 1

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

NAME **BOSTON-ED #1 PILGRIM PLANT**
ADDRESS **ROCKY HILL ROAD**
RFD #1
PLYMOUTH **MA 02360**

ACTIVITY
LOCATION

ATTN: **ROY ANDERSON, PLANT MANAGER**

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

(2-16)
MA0003557
PERMIT NUMBER

(7-19)
010 A
DISCHARGE NUMBER

F - FINAL
SERVICE COOLING WATER

Form Approved
(NSF No. 2040-0004)
Approval expires 9-30-85

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	90	01	01		90	01	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MAJOR (SUBS)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. 51 (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	6.9	7.6		*****	*****	*****		0 99/99	DA
00050 1 0 0	PERMIT REQUIREMENT	11.7	REPORT	MGD	*****	*****	*****	****		CONTINUOUS
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		0.06	0.24	0.36		12 79/99	DA
CHLORINE, TOTAL	PERMIT REQUIREMENT	*****	*****	****	REPORT	0.25	0.5	****		CONTINUOUS
RESIDUAL	SAMPLE MEASUREMENT									
00060 1 0 0	PERMIT REQUIREMENT									
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
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	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

R. A. ANDERSON
PLANT MANAGER

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
18 USC § 1011. 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

ED. Kraft

TELEPHONE

508 746-7000

DATE

90 04 11

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

CONTINUOUS CHLORINATION OF SERVICE WATER SYSTEM MAY BE USED FOR MACROINVERTEBRATE CONTROL. FLOW RATE SHALL
BE ESTIMATED FROM PUMP CAPACITY CURVES AND OPERATIONAL HOURS. *SEE SUMMARY NOTES *II.C.

NAME **BOSTON ED #1 PILGRIM PLANT**
ADDRESS **ROCKY HILL ROAD**
RFD #1
PLYMOUTH **MA 02360**

MA0003557

PERMIT NUMBER

010 A

DISCHARGE NUMBER

F - FINAL
SERVICE COOLING WATER

FACILITY
LOCATION

MONITORING PERIOD						
FROM			TO			
YEAR	MO	DAY	YEAR	MO	DAY	
90	02	01	90	02	28	
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)	

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EC (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	6.9	10.8		*****	*****	*****		99/99	DA
	PERMIT REQUIREMENT	11.7	REPORT	MGD						
CHLORINE, TOTAL RESIDUAL 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		0.06	0.12	0.18		99/99	DA
	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

R. A. ANDERSON
PLANT MANAGER

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 U.S.C. § 1001 AND 23 U.S.C. § 319. Penalties under these statutes may include fines up to \$1000 and a maximum imprisonment of between 6 months and 5 years.

ED. Kraft
SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

508 746-7900
AREA
CODE NUMBER

90 04 11
YEAR MO DAY

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

CONTINUOUS CHLORINATION OF SERVICE WATER SYSTEM MAY BE USED FOR MACROINVERTEBRATE CONTROL. FLOW RATE SHALL BE ESTIMATED FROM PUMP CAPACITY CURVES AND OPERATIONAL HOURS. *SEE SUMMARY NOTES* II. C.

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

Facility Name/Address (Include City Name/Location if different)
BOSTON ED #1 PILGRIM PLANT
ROCKY HILL ROAD
RF# 01
PLYMOUTH
MA 02360

F - FINAL
SERVICE COOLING WATER

MA0003557
010 A
DISCHARGE NUMBER

MONITORING PERIOD
YEAR MO DAY YEAR MO DAY
FROM 90 03 01 TO 90 03 31
(30.23) (22.23) (24.23) (26.27) (28.29) (30.31)

MAJOR (SUBR S)
NOTE: Read instructions before completing this form.

PARAMETER (22.27)	QUANTITY OR LOADING (54.61)			QUALITY OR CONCENTRATION (54.61)			NO. OF ANALYSES (64.63)	FREQUENCY OF ANALYSES (65.70)	SAMPLE TYPE (65.70)
	AVERAGE (46.53)	MAXIMUM (54.61)	UNITS (54.61)	MINIMUM (46.53)	AVERAGE (46.53)	MAXIMUM (54.61)			
LOW, IN CONDUIT OR THRU TREATMENT PLANT	4.4	7.5	MGD	0.01	0.03	0.04	0	99/99	DA
0050 1 0 0	11.7	REPORT	MGD	0.01	0.03	0.04	0	99/99	DA
EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	*****	*****	*****
CHLORINE, TOTAL	*****	*****	*****	*****	*****	*****	*****	*****	*****
ESIOUAL	*****	*****	*****	*****	*****	*****	*****	*****	*****
0060 1 0 0	*****	*****	*****	*****	*****	*****	*****	*****	*****
EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	*****	*****	*****
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
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SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									

Signature of Principal Executive Officer: *E. Kroft*
508 746-7800
508 746-7800
508 746-7800

Signature of Principal Executive Officer: *E. Kroft*
508 746-7800
508 746-7800
508 746-7800

Signature of Principal Executive Officer: *E. Kroft*
508 746-7800
508 746-7800
508 746-7800

STATEMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all data sheets here)
CONTINUOUS CHLORINATION OF SERVICE WATER SYSTEM MAY BE USED FOR MACROINVERTEBRATE CONTROL. FLOW RATE SHALL BE ESTIMATED FROM PUMP CAPACITY CURVES AND OPERATIONAL HOURS.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (17-19)

F - FINAL
 MAKE UP WATER AND DEMINERALIZE

MA0003557
 PERMIT NUMBER

011 A
 DISCHARGE NUMBER

MONITORING PERIOD
 YEAR MO DAY YEAR MO DAY
 FROM 90 01 01 TO 90 04 31

MA 02360

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	QUALITY OR CONCENTRATION (46-53)				QUANTITY OR LOADING (54-61)				QUALITY OR CONCENTRATION (62-69)				QUANTITY OR LOADING (70-77)				FREQUENCY OF ANALYSIS (69-70)	SAMPLE TYPE (69-70)
	AVERAGE (46-47)	MAXIMUM (48-49)	MINIMUM (50-51)	UNITS (52-53)	AVERAGE (54-55)	MAXIMUM (56-57)	MINIMUM (58-59)	UNITS (60-61)	AVERAGE (62-63)	MAXIMUM (64-65)	MINIMUM (66-67)	UNITS (68-69)	AVERAGE (70-71)	MAXIMUM (72-73)	MINIMUM (74-75)	UNITS (76-77)		
PH																		
00400 1 0 0																		
EFFLUENT GROSS VALUE																		
SOLIDS, TOTAL																		
SUSPENDED																		
00530 1 0 0																		
EFFLUENT GROSS VALUE																		
FLOW, IN CONDUIT OR																		
THRU TREATMENT PLANT																		
50050 1 0 0																		
EFFLUENT GROSS VALUE																		

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER		OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
R. A. ANDERSON PLANT MANAGER		E. D. Kroft, Jr.		508 746-7920		90 04 11		YEAR MO DAY	

1. 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 U.S.C. § 1001 AND 18 U.S.C. § 1339. (Penalties under these statutes may include fines up to \$10,000 and/or maximum of between 6 months and 5 years.)

TYPED OR PRINTED

NAME **BOSTON ED #1 PILGRIM PLANT**
ADDRESS **ROCKY HILL ROAD**
RFD #1
PLYMOUTH MA 02360

MA0003557
PERMIT NUMBER

011 A
DISCHARGE NUMBER

F - FINAL
MAKE UP WATER AND DEMINERALIZE

FACILITY
LOCATION

MONITORING PERIOD
FROM YEAR 90 MO 02 DAY 01 TO YEAR 90 MO 02 DAY 28
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR S)
NOTE: Read instructions before completing this form.

ATTN: ROY ANDERSON, PLANT MANAGER

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (58-63)			UNITS	NO. EX	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
PH	SAMPLE MEASUREMENT	*****	*****		6.7	*****	6.7			0 01/DS	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.1	*****	*****	SU			GRAD
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	0.04	1.2			0 01/DS	GR
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	300	100	MG/L			GRAD
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0004	0.0110		*****	*****	*****			0 01/DS	GR
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.015 30DA AVG	0.06 DAILY MX	MGD	*****	*****	*****	****			ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER R. A. ANDERSON PLANT MANAGER	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 Ed. Kraft, Jr.	TELEPHONE 508 746-7900	DATE 90 04 11
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR MO DAY

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

FORMERLY DESIGNATED DISCHARGE 0018. SAMPLES TAKEN IN COMPLIANCE WITH THE MONITORING REQUIREMENTS SPECIFIED ABOVE SHALL BE TAKEN AT A POINT PRIOR TO MIXING WITH ANY OTHER STREAM. SEE PG 11 OF PERMIT FOR BIOLOGICAL MONITORING REQUIREMENTS.

NAME **BOSTON ED #1 PILGRIM PLANT**
ADDRESS **ROCKY HILL ROAD**
RFD #1
PLYMOUTH MA 02360

MA0003557
PERMIT NUMBER

011 A
DISCHARGE NUMBER

F - FINAL
MAKE UP WATER AND DEMINERALIZE

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	90	03	01		90	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MAJOR (SUBR S)
NOTE: Read instructions before completing this form.

ATTN: ROY ANDERSON, PLANT MANAGER

PARAMETER (32-37)		QUANTITY OR LOADING (46-51)			QUALITY OR CONCENTRATION (54-61)			NO. EX	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****		7.1	*****	8.4		0 01/05	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.1 MINIMUM	*****	8.4 MAXIMUM	SU		GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	1.38	23.0		0 01/05	GR
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 30DA AVG	100 DAILY MX	HG/L		GRAB
FLOW, IN CONDUIT OF THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0008	0.0100		*****	*****	*****		0 01/05	GR
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.015 30DA AVG	0.06 DAILY MX	MGD	*****	*****	*****	****		ESTIMA
	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 44 USC § 1339. 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. A. ANDERSON
PLANT MANAGER

E. Kraft

508 746-7300
AREA CODE NUMBER

90 04 11
YEAR MO DAY

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

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