



Nuclear Group
P.O. Box 4
Shippingport, PA 15077-0004

Telephone (412) 393-6000

February 19, 1993

Document Control Desk
U.S. Nuclear Regulatory Commission
Washington, DC 20555

NPDES Monthly Reports, EPA Permit No. PA0025615 & PA001589

SUBJECT: Beaver Valley Power Station, Unit No. 1 and No. 2
BV-1 Docket No. 50-334, License No. DPR-66
BV-2 Docket No. 50-412, License No. NPF-73

Dear Sir:

Enclosed is a copy of the NPDES Monthly Report as submitted to the Pennsylvania Department of Environmental Resources.

Sincerely,

Dale E. Spoerry
Division Vice President
Nuclear Operations

DNH/ijj

030075

9303030428 930131
PDR ADOCK 05000334
R PDR

CMT # P262434032

IFAB
JE23



Nuclear Group
P.O. Box 4
Shippingport, PA 15077-0004

Telephone (412) 393-6000

February 19, 1993

United States Environmental Protection Agency
Region III, Pennsylvania (3WM53)
Water Permits Branch
Water Management Division
841 Chestnut Street
Philadelphia, PA 19107

NPDES Monthly Reports, EPA Permit No. PA0025615 & PA001589

Dear Sir:

This letter forwards copies of our NPDES Monthly Reports as submitted to the Pennsylvania Department of Environmental Resources, Bureau of Water Quality Management.

Sincerely,

Dale E. Spoerry
Division Vice President
Nuclear Operations

DNH/ijj



Nuclear Group
P.O. Box 4
Shippingport, PA 15077-0004

Telephone (412) 393-6000

February 19, 1993

Department of Environmental Resources
Bureau of Water Quality Management
400 Waterfront Drive
Pittsburgh, PA 15222

NPDES Monthly Reports, EPA Permit No. PA0025615 & PA001589

Dear Sir:

NPDES Monthly Reports for Duquesne Light Company, Beaver Valley Power Station and Shippingport Atomic Power Plant for January 1993 are submitted for your consideration.

Please be advised that required techniques, even if performed properly, do not measure actual conditions with 100 percent accuracy 100 percent of the time, and therefore, some reported values in the attached DMRs may not represent actual conditions with absolute accuracy.

Sincerely,

Dale E. Spoerry
Division Vice President
Nuclear Operations

DNH/ijj

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

NAME BEAR VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPENSBURG PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

001 A

PERMIT NUMBER

DISCHARGE NUMBER

MAJOR

(SUBR 03)

2 - FINAL

UNITS 192 COOLS. POWER BLNDR.

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR 93 MO 01 DAY 01 TO YEAR 93 MO 01 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 (38-43)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	()	7.44	*****	8.13	(12)	0	1/week	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0 MINIMUM	*****	9.0 MAXIMUM	50		WEEKLYGRAB	
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	*****	*****	()	*****			(19)			
00610 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	REPORT NO AVG	REPORT DAILY MX	MG/L		WEEKLYGRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	36.423	47.736	(03)	*****	*****	*****	()	0	D	Cont
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	***		DAILY CONTIN	
CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****	()	*****	0.09	0.14	(19)	0	2/day	G
50064 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	0.2 DAILY MX	0.5 INST MAX	MG/L		CONTINUOUS	
HYDRAZINE	SAMPLE MEASUREMENT	*****	*****	()	*****	*****		(19)			
01313 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	0 DAILY MX	MG/L		WEEKLYGRAB	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

ANDREW DULICK
CHEMISTRY 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 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

412 393-5113 93 02 19

AREA CODE NUMBER YEAR MO DAY

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

REPAIRS FOR ANNUAL MAINTENANCE TO APPLY DURING PERIODS OF WET LAYUP. QUARTERLY SAMPLING TO BE CONDUCTED IN DRY LAYUP PERIODS. No periods of wet layup existed.

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

NAME DEAFER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

PA0025615

PERMIT NUMBER

(17-19)

002 A

DISCHARGE NUMBER

MAJOR

(SUBR 05)

F - FINAL

INTAKE SCREEN JACKWASH

Form Approved

OMB No. 2040-0004


MONITORING PERIOD

FROM YEAR 93 MO 01 DAY 01 TO YEAR 93 MO 01 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 (58-65)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT SCUSE 1 & 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.001	0.046	(03)	*****	*****	*****	()	0	1/week	EST
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		WEEKLY	ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	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		
			AREA CODE	NUMBER	YEAR	MO	DAY
Andrew Dulick Chemistry Manager			412	393-5113	93	02	19
TYPED OR PRINTED							

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

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

NAME SEVEN VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

003 A

PERMIT NUMBER

DISCHARGE NUMBER

MAJOR

Form Approved

(SUBR 05)

OMB No. 2040-0004

F - FINAL

003 UNCONTAMINATED STORM WATER


MONITORING PERIOD

FROM YEAR 93 MO 01 DAY 01 TO YEAR 93 MO 01 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)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-43)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	0.032	0.085	(03)	*****	*****	*****	()	0	2/m	EST	
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		TWICE/ESTIMA MONTH	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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 Andrew Dulick Chemistry 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 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		
		412	939-5113	93	02	19
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		AREA CODE	NUMBER	YEAR	MO	DAY

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

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

NAME DEVER VALLEY POWER PLANT

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPLETSBURG

PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

004 A

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

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

MAJOR

Form Approved

(5066-05)

OMB No. 2040-0004


F - FINAL

UNIT ONE COOLING TOWER OVERFLOW

NO NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (46-53)			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		*****	*****	()		*****		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0 MINIMUM	*****	9.0 MAXIMUM	30		WEEKLY GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	NO FLOW			(03)	*****	*****	*****	()	0 1/wk MEAS	
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	***	***	WEEKLY SEASRD	
CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****	()	*****				(19)		
50064 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	0.2 DAILY MX	0.5 INST MAX	MG/L		CONTINUOUS	
	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 a maximum imprisonment of between 6 months and 3 years.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
Andrew Dulick Chemistry Manager			412 939-5113	93	02	19	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

NO DISCHARGE

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

NAME PAUL J. WILSON
 ADDRESS 10000
ALBANY, ANDREW DULICK
SHIPPINGPORT PA 15077
 FACILITY
 LOCATION
 ACTA: ANDREW DULICK

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

(2-16) PA0025615 (17-19) 007 A
 PERMIT NUMBER DISCHARGE NUMBER


Form Approved
 OMB No. 2040-0004
 F - FINAL
 AUX. 101KAS SYSTEM

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

*** TO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	NO FLOW			(03)	*****	*****	*****	()	0	1/yr est
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	100	*****	*****	*****	****	****	WEEKLY	ESTIMA
CHLORINE, FREE AVAILABLE 50004 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	()	*****			(19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	0.2 DAILY MX	0.5 INST MAX	MG/L		WEEKLY	GRAB
	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 \$100,000 and/or maximum imprisonment of between 6 months and 5 years.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE			
Andrew Dulick Chemistry Manager TYPED OR PRINTED			412 393-5113	93	02	19	
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)			AREA CODE	NUMBER	YEAR	MO	DAY

Instructions for Flow and Free Available Chlorine are required only during those periods of discharge from the treatment plant into the river water system. **NO DISCHARGE**

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

NAME ANDREW DULICK

ADDRESS 1000 10th St

CITY ANDREW DULICK

STATE MISSISSIPPI

FACILITY

LOCATION

ATTN: ANDREW DULICK

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

(2-16)

240023015

PERMIT NUMBER

(17-19)

240023015

DISCHARGE NUMBER

Form Approved

OMB No. 2040-0004

UNIT 1 COOLING TOWER PUMPHOUSE

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	93	01	01		93	01	31

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (58-63)			NO. EX (67-69)	FREQUENCY OF ANALYSIS (64-66)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	()	7.29	*****	7.33	(12)	0 2/m	G
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0			
SOLIDS, TOTAL	SAMPLE MEASUREMENT	*****	*****	()	MINIMUM	*****	MAXIMUM	30	TWICE/GRAB	MONTH
SUSPENDED	PERMIT REQUIREMENT	*****	*****	****	*****	7.25	10.51	(19)	0 2/m	G
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	()	*****	30	100	MO AVG	DAILY MX	MO/L
OIL AND GREASE	PERMIT REQUIREMENT	*****	*****	****	*****	5.00	5.00	(19)	0 2/m	G
FROM EXISTING	SAMPLE MEASUREMENT	*****	*****	()	15	30DA AVG	DAILY MX	30	INST MAX	MO/L
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	*****	*****	*****
FLOW, IN CONDUIT OR	SAMPLE MEASUREMENT	0.001	0.001	(3)	*****	*****	*****	*****	*****	*****
THIS TREATMENT PLANT	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****	*****	*****	*****
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	NO AVG	DAILY MX	100	*****	*****	*****	*****	*****	*****
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Andrew Dulick
Chemistry 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 33 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

Andrew Dulick

TELEPHONE

412 | 393-5113

DATE

93 | 02 | 19

AREA CODE | NUMBER | YEAR | MO | DAY


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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME CLAYTON VALLEY PAPER MILL
 ADDRESS P.O. BOX 4
RT 1, ANDOVER, OHIO
SHIPLEYPORT PA 15177
 FACILITY _____
 LOCATION _____
 ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) PA0025615 (17-19) 012 6
 PERMIT NUMBER _____ DISCHARGE NUMBER _____
 MONITORING PERIOD
 FROM YEAR 93 MO 01 DAY 01 TO YEAR 93 MO 01 DAY 31
 (12-23) (22-23) (24-25) (26-27) (28-29) (30-31)

1A10A Form Approved
 (3008 05) OMB No. 2040-0004
 P - FINAL
 CLOWDOWN FROM THE HVAC C. TOWER
 *** TO DISCHARGE ***
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(1 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (38-43)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH		*****	*****	()	8.12	*****	8.12	(12)		0 1/M	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	6.0	MINIMUM	*****	9.0	30		ONCE/	30 DAY
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.001	0.001	(03)	*****	*****	*****	()		0 1/M	EST
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****	*****		ONCE/	ESTIMA
		NO AVG	DAILY MAX	300						MONTHS	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	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		
Andrew Dulick Chemistry Manager TYPED OR PRINTED			412	393-5113	93	02	19
			AREA CODE	NUMBER	YEAR	MO	DAY

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

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

NAME DELAWARE VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATLANTA, GEORGIA

SHALLOO ROAD CA 15077

FACILITY

LOCATION

ATLANTA, GEORGIA

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PAGE 25615

PERMIT NUMBER

013 A

DISCHARGE NUMBER

MAJOR (SUBR US)

F - FINAL

UNCONTAMINATED STORMWATER

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	93	01	01		93	01	01
	(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 (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CUBIC FT. THRU TREATMENT PLANT DURING 1 HOURS EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.019	0.022	(03)	*****	*****	*****	()			
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MAX	MGD	*****	*****	*****	****		1/wk est	WEEKLY ESTIMATE
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Andrew Dulick
Chemistry 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 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.

Andrew Dulick

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

412 | 393-5113

93 | 02 | 19

AREA
CODE

NUMBER

YEAR

MO

DAY

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

NO DISCHARGE OF POLLUTANTS, OILS OR VISIBLE FOAM IN OTHER THAN PERMITTED AMOUNTS.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME 3411 Valley Road, Dayton, OH 45424
 ADDRESS 3411 Valley Road
Attn: Andrew Dulick
Shipping Dept PA 15177
 FACILITY
 LOCATION
Attn: Andrew Dulick

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

140025615

101 A

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

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

CAJON
 (JUNE 05)
 P - FINAL
 101 CHEMICAL WASTE TREATMENT

Form Approved
 OMB No. 2040-0004

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT (38-43)	QUANTITY OR LOADING (46-53)			QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (66-70)
		AVERAGE (46-53)	MAXIMUM (54-57)	UNITS (58-61)	MINIMUM (54-57)	AVERAGE (58-61)	MAXIMUM (62-65)			
PH	SAMPLE MEASUREMENT	6.70	6.94	(12)	6.0	9.0	50	0	1/wk	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	MINIMUM	MAXIMUM							WEEKLY GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	9.85	15.70	(19)	30	100	MG/L	0	1/w	2HC
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	NO AVG	DAILY MX							WEEKLY COMP-2
OIL AND GREASE	SAMPLE MEASUREMENT	5.00	5.00	(19)	15	20	MG/L	0	1/wk	G
00550 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	NO AVG	DAILY MX							WEEKLY GRAB
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT			(19)						
00610 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX							WEEKLY GRAB
FLOW, IN CONDUIT OR POND TREATMENT PLANT	SAMPLE MEASUREMENT	0.008	0.018	(03)				0	D	CONT
00950 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX							DAILY CONTIN
HYDRAZINE	SAMPLE MEASUREMENT			(19)						
01310 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX							WEEKLY GRAB
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Andrew Dulick Chemistry 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.	TELEPHONE 412 393-5113	DATE 93 02 19		
			AREA CODE	NUMBER	YEAR

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

NO VIOLATIONS OR VIOLATIONS TO ARISE DURING PERIODS OF WET LAYUP.

No wet layup conditions existed.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME WATER VALLEY POWER STATION
ADDRESS P.O. BOX 4
ATLANTA, GEORGIA 30303
FACILITY ATLANTA, GEORGIA
LOCATION ATLANTA, GEORGIA

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

(2-16) PA0020015
PERMIT NUMBER
 (17-19) 102 A
DISCHARGE NUMBER


Form Approved
 OMB No. 2040-0004
 102 INTRK BURNHOUSE

MONITORING PERIOD
 FROM YEAR 93 MO 01 DAY 11 TO YEAR 93 MO 01 DAY 11
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NO DISCHARGE

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (38-43)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	()	6.91	*****	7.05	(12)	0	2/m	G
00400 1 0 0	PERMIT REQUIREMENT	*****	*****	****	5.0	*****	9.0	CU		TWICE/GRAB	
EFFLUENT GROSS VALUE					MINIMUM		MAXIMUM			MONTH	
SOLIDS, TOTAL	SAMPLE MEASUREMENT	*****	*****	()	*****	4.00	4.00	(19)	0	2/m	G
SUSPENDED	PERMIT REQUIREMENT	*****	*****	****	*****	30	100	NO AVG DAILY MX MG/L		TWICE/GRAB	
00530 1 0 0										MONTH	
APFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	()	*****	5.00	5.00	(19)	0	2/m	G
OIL AND GREASE	PERMIT REQUIREMENT	*****	*****	****	*****	15	20	NO AVG DAILY MX MG/L		TWICE/GRAB	
PERSON EXTRACTABLE OIL										MONTH	
00550 1 0 0	SAMPLE MEASUREMENT	0.001	0.001	(03)	*****	*****	*****	()	0	2/m	EST
APFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****	****		TWICE/ESTIMA	
FLOW, IN CONDUIT OR		NO AVG	DAILY MX	MGD						MONTH	
THRU TREATMENT PLANT											
00650 1 0 0	SAMPLE MEASUREMENT										
APFLUENT GROSS VALUE	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Andrew Dulick Chemistry 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 13 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			
			412	393-5113	93	02	19	
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO	DAY

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME SAVON VALLEY PAPER MILL
 ADDRESS P.O. BOX 4
ATKINS, ARIZONA 85626
PHONE (602) 438-1577
 FACILITY SAVON VALLEY PAPER MILL
 LOCATION ATKINS, ARIZONA

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) PA0025615 (17-19) 103 A
 PERMIT NUMBER DISCHARGE NUMBER
 MONITORING PERIOD
 FROM YEAR 93 MO 01 DAY 01 TO YEAR 93 MO 01 DAY 01
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

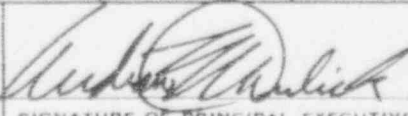
SAJON Form Approved
 (5082-93) OMB No. 2040-0004
 F - FISCAL
 BUDGET CATEGORY 0000

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

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	()	6.83	*****	7.15	(12)	0	2/m	G
00400 1 2 3 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	20		TWICE/GRAB	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****	4.00	4.00	(19)	0	2/m	24H
00530 1 2 3 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30	100	MO AVG DAILY MAX	60/L	TWICE/COMP 24	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.001	0.001	(03)	*****	*****	*****	()	0	2/m	Est
03050 1 2 3 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MAX	4GL	*****	*****	*****	****		TWICE/ESTIMA	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 Andrew Dulick
 Chemistry 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 23 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
 412 393-5113
 AREA CODE NUMBER

DATE
 93 02 19
 YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME DRAGON VALLEY POWER STATION
ADDRESS P.O. Box 4
ATTN: ANDREW DULICK
SHIRLEYPORT LA 70777
FACILITY
LOCATION
ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-10)

(17-19)

PA0023515
PERMIT NUMBER

117 A
DISCHARGE NUMBER

18308
 (SUBS 05)
 FINAL
 UNIT 2 SERVICE WATER BACKWASH

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR 93 MO 01 DAY 02 TO YEAR 93 MO 01 DAY 31
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGES [X] ***

NOTE: Read instructions before completing this form.


PARAMETER (32-37)	X	(1 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				
FLOW, IN CONDUIT OR THAT TREATMENT PLANT 50050 1 0 0 EFFLUENT CROSS VALVE	SAMPLE MEASUREMENT	No Flow			(03)	*****	*****	*****	()			
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MAX	NO		*****	*****	*****	****			WEEKLY ESTIMA
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
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	PERMIT REQUIREMENT											
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	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Andrew Dulick
Chemistry 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 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

TELEPHONE

412 393-5113

AREA CODE **NUMBER**

DATE

93 02 19

YEAR **MO** **DAY**

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

No Discharge

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

NAME PERVON & SONS, INC.
 ADDRESS P.O. BOX 8
ATTN: ANDREW DULICK
CHICAGO, ILL 60617

FACILITY
 LOCATION
ATTN: ANDREW DULICK

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

(218) PA0025015 (1719) 111 A
 PERMIT NUMBER DISCHARGE NUMBER


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

Form Approved
 OMB No. 2040-0004
111 DISEASE CONTROL CLINIC

*** 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 (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	()	7.16	*****	7.36	(12)	0	1/w	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0 MINIMUM	*****	9.0 MAXIMUM	30		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****	4.00	4.00	(19)	0	1/w	G
00330 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	30 MO AVG	100 DAILY MX	10/L		WEEKLY	GRAB
OIL AND GREASE FACON EXH-GRAV MTH	SAMPLE MEASUREMENT	*****	*****	()	5.00	5.00	5.00	(19)	0	1/w	G
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	15 30DA AVG	20 DAILY MX	30 INST MAX	10/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR TANK TREATMENT PLANT	SAMPLE MEASUREMENT	0.001	0.001	(03)	*****	*****	*****	()	0	1/w	Est.
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	***		WEEKLY	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			
Andrew Dulick Chemistry Manager TYPED OR PRINTED			412 393-5113	93	02	19	
			AREA CODE	NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME WATER VALLEY POWER SERVICE
ADDRESS P.O. BOX 4
APRIL 24 DULICK
VA 15077
FACILITY
LOCATION
APRIL 24 DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
 (2-16) PAD025615 (17-19) 111 A
PERMIT NUMBER **DISCHARGE NUMBER**
MONITORING PERIOD
 FROM YEAR 93 MO 01 DAY 01 TO YEAR 93 MO 01 DAY 31
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

WATER VALLEY POWER SERVICE
 (BODA 05)
 1 - FISCAL
 UNIT 2 SEWAGE INT PLANT

Form Approved
 OMB No. 2040-0004

*** 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			
PH	SAMPLE MEASUREMENT	*****	*****	()	6.54	*****	6.69	(12)	0	2/m	G
00400 1 0 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0	*****	9.0	30		TWICE/GRAB	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****	5.26	5.50	(19)	0	2/m	BHC
00330 1 0 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	30	60	45/L		TWICE/COMP-8	
FLOR, IN CONDUIT OR TRENCH TREATMENT PLANT	SAMPLE MEASUREMENT	0.020	0.020	(03)	*****	*****	*****	()	0	1/WK	MEAS
00050 1 0 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.043	REPORT	630	*****	*****	*****	***		WEEKLY/MEASRD	
CODIFORM, FISCAL	SAMPLE MEASUREMENT	*****	*****	()	*****	108.00	*****	(13)	0	2/m	G
74355 1 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	2000	*****	100ML		TWICE/GRAB	
BOD, CARBONACEOUS	SAMPLE MEASUREMENT	*****	*****	()	*****	18.50	33.00	(19)	0	2/m	BHC
05 DAY, 20C	PERMIT REQUIREMENT	*****	*****	***	*****	25	50	45/L		TWICE/COMP-8	
00002 1 0 0 0 EFFLUENT GROSS VALUE						MO AVG	DAILY MX			MONTH	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 Andrew Dulick
 Chemistry 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 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
 412 393-5113

DATE
 93 02 19

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

ATTN: ANTHONY POLICIS

DISCHARGE NUMBER

OMB No. 2040-0004

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	9	01	01		93	11	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)


FOR NO DISCHARGE ☐ FOR

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(1 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (58-65)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-51)	MAXIMUM (52-53)	UNITS (54-57)	MINIMUM (58-59)	AVERAGE (60-61)	MAXIMUM (62-63)	UNITS (64-68)			
PH		*****	*****	()	7.65	*****	7.76	(12)	0	2/M	G
00400 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	6.0	*****	9.0	BU		TWICE/GRAB	
SOLIDS, TOTAL SUSPENDED		*****	*****	()	MINIMUM	*****	MAXIMUM	30		TWICE/GRAB	
00530 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	4.00	4.00	(19)	0	2/M	G
OIL AND GREASE		*****	*****	()	*****	30	100	MO AVG		TWICE/GRAB	
00556 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	5.00	5.00	(19)	0	2/M	G
PHOSPHORUS EXTRA-GRAV METH		*****	*****	()	*****	15	20	MO AVG		TWICE/GRAB	
00558 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	*****	*****	()	0	2/M	EST
FLOW, IN CONDUIT OR		*****	*****	(03)	*****	*****	*****	*****		TWICE/ESTIMA	
THRU TREATMENT PLANT		0.002	0.019		*****	*****	*****	*****		TWICE/ESTIMA	
00559 1 0 0 EFFLUENT GROSS VALUE		REPORT	REPORT	MO AVG	*****	*****	*****	*****		TWICE/ESTIMA	
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT									
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT									
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT									
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Andrew Dulick
Chemistry 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 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


TELEPHONE
412 393-5113
AREA CODE NUMBER

DATE
93 02 19
YEAR MO DAY

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

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

NAME GOVERNMENT VALLEY POWER PLANT

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SALFINGERDRI PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

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

(2-16)

(17-19)

PA0025615

203 A

PERMIT NUMBER

DISCHARGE NUMBER

00300
(5000-05)
F - FINAL

Form Approved

OMB No. 2040-0004

RAIN SEWAGE TREAT PLANT


MONITORING PERIOD

FROM YEAR 93 MO 01 DAY 01 TO YEAR 93 MO 01 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	(1 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	*****	*****	()	6.86	*****	7.15	(12)	0	2/M	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0 MINIMUM	*****	9.0 MAXIMUM	30		TWICE/3RAB MONTH	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****	19.50	24.90	(19)	0	2/MO	8HC
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	30 MO AVG	60 DAILY MX	45/L		TWICE/COMP-8 MONTH	
FLOW, IN CONDUIT OF TREATMENT PLANT	SAMPLE MEASUREMENT	0.011	0.023	(23)	*****	*****	*****	()	0	1/WK	MEAS
00750 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.023 MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	***		WEEKLY MEASRD	
CODIFORM, FICAL GENERAL	SAMPLE MEASUREMENT	*****	*****	()	*****	6.00	*****	(13)	0	2/MO	G
74055 1 1 2 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	2000 30DA GED	*****	1 100ML		TWICE/3RAB MONTH	
BOD, CARBONACEOUS 5 DAY, 20C	SAMPLE MEASUREMENT	*****	*****	()	*****	10.00	14.00	(19)	0	2/M	8HC
00902 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	25 MO AVG	50 DAILY MX	30/L		TWICE/COMP-8 MONTH	
	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		
Andrew Dulick Chemistry Manager			412 393-5113	93	02	19	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME DEVER VALLEY POWER PLANT
ADDRESS P.O. BOX 4
 ALEXANDRIA, VIRGINIA 22304
PHONE 703/683-1577

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
 (2-16) 220025615 (17-19) 211 A
PERMIT NUMBER **DISCHARGE NUMBER**

LAJOL
 (308A 05)
 2 - FINAL
 211 TURNING BLDG

Form Approved
 OMB No. 2040-0004

FACILITY
LOCATION
 ALEX: ANDREW DULICK

MONITORING PERIOD
 FROM YEAR 93 MO 01 DAY 01 TO YEAR 93 MO 31 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)	SAMPLE MEASUREMENT	(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	UNITS			
PH		*****	*****	()	7.02	*****	7.69	(12)	0	1/WK	G
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	30		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****	4.32	5.30	(19)	0	1/WK	G
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30	100	40/L		WEEKLY	GRAB
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	()	5.00	5.00	5.00	(19)	0	1/WK	G
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	15	20	30	40/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR TREATMENT PLANT	SAMPLE MEASUREMENT	0.001	0.001	(03)	30DA AVG	DAILY MX	INST MAX	40/L	0	1/WK	EST
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	NO AVG	DAILY MX	NO	*****	*****	*****	****		WEEKLY	ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Andrew Dulick
Chemistry 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 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$100,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

Andrew Dulick

TELEPHONE

412 393-5113

AREA CODE NUMBER

DATE

93 02 19

YEAR MO DAY

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

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

NAME SHARON VALLEY FORTH STATION

ADDRESS P.O. BOX 1

CITY ANDER DULICK

ZIP 01507

FACILITY

LOCATION

ATTN: ANDER DULICK

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

(2-16)

PERMIT NUMBER PA0025615

(17-19)

DISCHARGE NUMBER 113

Form Approved

OMB No. 2040-0004

(3-18-89)

UNIT 2 COOL TOWER PUMPHOUSE

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	93	11	01		93	11	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PARAMETER (32-37)	SAMPLE MEASUREMENT (38-41)	QUANTITY OR LOADING (42-45)			QUALITY OR CONCENTRATION (46-51)				NO. EX (52-53)	FREQUENCY OF ANALYSIS (54-55)	SAMPLE TYPE (56-57)
		AVERAGE (42-43)	MAXIMUM (44-45)	UNITS (46-47)	MINIMUM (48-49)	AVERAGE (50-51)	MAXIMUM (52-53)	UNITS (54-55)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	()	7.60	*****	7.96	(12)	0	2/M	G
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	MINIMUM	*****	MAXIMUM	50		TWICE/GRAB MONTH	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30	100	(19)	0	2/M	G
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	()	*****	NO AVG	DAILY MX	MG/L		TWICE/GRAB MONTH	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	5.00	5.00	(19)	0	2/M	G
FLOW, IN CONDUIT OR TROUGH TREATMENT PLANT	SAMPLE MEASUREMENT	0.001	0.001	(3)	*****	*****	*****	()		TWICE/GRAB MONTH	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****	0	1/WK EST	WEEKLY ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Andrew Dulick
Chemistry 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 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
Andrew Dulick

TELEPHONE
412 393-5113
DATE
93 02 19

PERMITTEE NAME/ADDRESS (Include

Facility Name/Location if different)

NAME CLAYTON VALLEY EARTH DRILLING

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPLEY, OHIO 44130-1507

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

110025515

301 A

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

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

14JUN

Form Approved

(5085-10)

OMB No. 2040-0004

P - FINAL

UNIT 2 BOX BOILER BLOWDOWN

*** NO DISCHARGE ***

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 (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0	SAMPLE MEASUREMENT	*****	*****	()	*****	4.00	4.00	(19)	0	2/m G
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 MO AVG	100 DAILY MX	40/L		TWICE/GRAB MONTH
OIL AND GREASE FROM EXTRA-GRAV MTH 00556 1 0 0	SAMPLE MEASUREMENT	*****	*****	()	*****	5.00	5.00	(19)	0	2/m G
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	15 MO AVG	20 DAILY MX	40/L		TWICE/GRAB MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 00050 1 0 0	SAMPLE MEASUREMENT	0.001	0.001	(G3)	*****	*****	*****	()	0	1/w EST
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		WEEKLY 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

Andrew Dulick
Chemistry 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 33 U.S.C. § 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

412 | 393-5113 | 93 | 02 | 19
AREA CODE | NUMBER | YEAR | MO | DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SLAYTON VALLEY POWER STATION
ADDRESS 100 BOX 4
ATtn: ANDREW DULICK
SHIPPINGPORT PA 15077

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

(2-16)
PA0025615
PERMIT NUMBER

(17-19)
303 A
DISCHARGE NUMBER

PAG 001
(SUBB 05)
P - FINAL

Form Approved
OMB No. 2040-0004

FACILITY
LOCATION
ATTN: ANDREW DULICK

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

UNIT 1 OIL WATER SEPARATION


*** 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			
PH		*****	*****	()	6.80	*****	7.65	(12)		
00400 1 3 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	()	6.0 MINIMUM	*****	9.0 MAXIMUM	50	0	1/WK G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 MO AVG	100 DAILY MX	MG/L		WEEKLYGRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****	5.25	7.91	(19)	0	1/WK G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	15 MO AVG	20 DAILY MX	MG/L		WEEKLYGRAB
OIL AND GREASE FROM EXTRA-GRAV METER	SAMPLE MEASUREMENT	*****	*****	()	*****	5.00	5.00	(19)	0	1/WK G
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	****		WEEKLYGRAB
FLOW, IN CONDUIT OR TROUGH TREATMENT PLANT	SAMPLE MEASUREMENT	0.019	0.056	(03)	*****	*****	*****	()	0	1/WK EST
00150 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		WEEKLYESTIMA
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Andrew Dulick
Chemistry 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 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
412 393-5113
AREA CODE NUMBER
DATE
93 02 19
YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS 100 BOX 4
 ATTN: ANDREW DULICK
 SHIPPINGPORT PA 15077
 FACILITY
 LOCATION
 ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PA0025815
 (17-19) 313 A
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR (SUBR -5)
 F - FINAL
 313 TURBINE BLDG DRAIN
 Form Approved
 OMB No. 2040-0004

MONITORING PERIOD
 FROM YEAR 93 MO 01 DAY 01 TO YEAR 93 MO 01 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)	SAMPLE MEASUREMENT (38-43)	QUANTITY OR LOADING (46-53)			QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH		*****	*****	()	7.28	*****	8.07	(12)	0	1/wk G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	5.0 MINIMUM	*****	9.0 MAXIMUM	30		WEEKLY GRAB
SOLIDS, TOTAL SUSPENDED		*****	*****	()	*****	4.57	6.30	(19)	0	1/wk G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	30 MO AVG	100 DAILY MX	MG/L		WEEKLY GRAB
OIL AND GREASE FACON EXTRA-GRAV METH		*****	*****	()	*****	5.00	5.00	(19)	0	1/wk G
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	15 MO AVG	20 DAILY MX	MG/L		WEEKLY GRAB
FLOW, IN CONDUIT OF THRU TREATMENT PLANT		0.001	0.001	(03)	*****	*****	*****	()	0	1/wk EST
00050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	***		WEEKLY ESTIMA
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Andrew Dulick
Chemistry 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 33 USC § 1312 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

TELEPHONE

412 393-5113

DATE

93 02 19

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

412 393-5113

AREA CODE NUMBER YEAR NO DAY

Facility Name/Location (Include)

NAME BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT

PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

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

PA0025615

PERMIT NUMBER

401 A

DISCHARGE NUMBER

MAJOR

(308A 05)

C - FINAL

CHEM. FIELD AREA OF AUX BOILERS

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR 93 MO 01 DAY 01 TO YEAR 93 MO 01 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			
PH		*****	*****	()		*****					
00400 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	***	6.0	*****	REPORT	(12)			
SOLIDS, TOTAL	PERMIT REQUIREMENT	*****	*****	***	MINIMUM	*****	MAXIMUM	50			TWICE/GRAB MONTH
SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****			(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	30	100				TWICE/GRAB MONTH
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	()	*****	MO AVG	DAILY MX	MG/L			
PREON EXTR-GRAV METH	PERMIT REQUIREMENT	*****	*****	***	*****			(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	***	*****	15	20				TWICE/GRAB MONTH
FLOW, IN CONDUIT OR	PERMIT REQUIREMENT	*****	*****	***	*****	MO AVG	DAILY MX	MG/L			
THRU TREATMENT PLANT	SAMPLE MEASUREMENT	NO FLOW		(03)	*****	*****	*****	()			
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****	***			0 1/wk Est
	SAMPLE MEASUREMENT	MO AVG	DAILY MX	MGD	*****	*****	*****	***			WEEKLY ESTIMATE
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Andrew Dulick
Chemistry 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 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

412 393-5113 93 02 19
AREA CODE NUMBER YEAR MO DAY

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


NO DISCHARGE

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME BEAVER VALLEY POWER STATION
ADDRESS P.O. BOX 4
 ATTN: ANDREW DULICK
 SHIPPINGPORT VA 15077
FACILITY
LOCATION
 ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
 (2-16) PAC025515 (17-19) 403 A
PERMIT NUMBER **DISCHARGE NUMBER**
MONITORING PERIOD
 FROM YEAR 93 MO 01 DAY 01 TO YEAR 93 MO 01 DAY 01
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

REGION 6 (SUBR 05) Form Approved
 F - FINAL OMB No. 2040-0004
 CONDENSATE BLOWDOWN & RIVER WAT
 *** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (38-43)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	()	6.75	*****	7.85	(12)	0	1/wk	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0 MINIMUM	*****	9.0 MAXIMUM	03		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****	7.75	11.10	(19)	0	1/w	G
00430 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	30 NO AVG	100 DAILY MX	MG/L		WEEKLY	GRAB
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	()	*****	5.00	5.00	(19)	0	1/w	G
FREON EXTH-GRAY METH	PERMIT REQUIREMENT	*****	*****	***	*****	15 NO AVG	20 DAILY MX	MG/L		WEEKLY	GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	()	*****	*****	*****	()	0	1/wk	Est
NITROGEN, AMMONIA TOTAL (AS N)	PERMIT REQUIREMENT	*****	*****	***	*****	REPORT NO AVG	REPORT DAILY MX	MG/L		WEEKLY	GRAB
00610 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.001	0.005	(03)	*****	*****	*****	()	0	1/wk	Est
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	***		WEEKLY	ESTIMA
50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	()	*****	*****	*****	(19)			
HYDRAZINE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	0	DAILY MX	MG/L	WEEKLY	GRAB
01313 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Andrew Dulick Chemistry 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 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 412 393-5113	DATE 93 02 19			
	SIGNATURE OF PRINCIPAL EXECUTIVE 	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 HYDRAZINE AND AMMONIA MONITORING TO APPLY DURING PERIODS OF WET LAYUP.
 No wet layup conditions existed.

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

NAME BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHREVEPORT LA 70577

FACILITY

LOCATION

ATTN: ANDREW DULICK

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

PA0025615

PERMIT NUMBER

413 A

DISCHARGE NUMBER

MAJON
(508R US)
F - FINAL
BULK FUEL STORAGE DRAIN

Form Approved
OMB No. 2040-0004

MONITORING PERIOD

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

*** NO DISCHARGE [X] ***

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 (62-64)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	()		*****			(12)	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*** ****	6.0 MINIMUM	*****	9.0 MAXIMUM	50		WEEKLY GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****				(19)	
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*** ****	*****	30 NO AVG	100 DAILY MX	MG/L		WEEKLY GRAB
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	()	*****				(19)	
FREON EXTN-GRAV METER	PERMIT REQUIREMENT	*****	*****	*** ****	*****	15 NO AVG	20 DAILY MX	MG/L		WEEKLY GRAB
00550 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	()	*****	*****	*****		()	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	*****	*****	*** ****	*****	*****	*****	***		WEEKLY ESTIMATE
00050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	(03)	*****	*****	*****	***		
	PERMIT REQUIREMENT	*****	*****	*** ****	*****	*****	*****	***		
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Andrew Dulick
Chemistry 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 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

412 393-5113

DATE

93 02 19

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

NO DISCHARGE

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME HEAVEN VALLEY FURNACE STATION
ADDRESS P.O. BOX 4
ATTN: ANDREW DULICK
SHIPPINGPORT PA 15077
FACILITY _____
LOCATION _____
ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PA0025615 (17-19) 501 A
PERMIT NUMBER **DISCHARGE NUMBER**

MAJOR (SUBB US) Form Approved
 F - FINAL OMB No. 2040-0004
 UNIT 1 GRAFT BLWOWN FILT BW

MONITORING PERIOD
 FROM YEAR 93 MO 01 DAY 01 TO YEAR 93 MO 01 DAY 01
 (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 (58-65)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS (56-57)	MINIMUM (58-65)	AVERAGE (46-53)	MAXIMUM (54-61)			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0	SAMPLE MEASUREMENT	*****	*****	()	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	30 MO AVG	100 DAILY MX	16/L		WEEKLY GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0	SAMPLE MEASUREMENT	NO FLOW			*****	*****	*****	()		0 1/0K EST
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	***		WEEKLY ESTIMA
	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

Andrew Dulick
 Chemistry 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 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.)

Andrew Dulick
 SIGNATURE OF PRINCIPAL EXECUTIVE
 OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113
 AREA CODE NUMBER

DATE

93 02 19
 YEAR MO DAY

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

NO DISCHARGE

DISCHARGE NO.	101
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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Pittsburgh, PA 15219

LOCALITY Ship report Atomic Power Station
LOCALITY Ship report Borough, Beaver Count

MONITORING PERIOD			
Year	Month	Day	Year
93	01	01	93

DISCHARGE HOME "OK" (N) REPORT (DMR)

NOTE: Read instructions before completing this form.

PARAMETER	QUANTITY OR LOADING				QUALITY OR CONCENTRATION				NO. OF ANALYSIS	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MINIMUM	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Flow	Sample Measure.	No Flow							0	2/MO	ESC
	Permit Require.			MGD						2/MO	EST
Suspended Solids	Sample Measure.										
	Permit Require.					30	110	MG/L		2/MO	GRAB
Oil & Grease	Sample Measure.										
	Permit Require.					15	20	MG/L		2/MO	GRAB
	Sample Measure.						9.0	S.U.		2/MO	GRAB
	Permit Require.					6.0					
	Sample Measure.										
	Permit Require.										
	Sample Measure.										
	Permit Require.										
	Sample Measure.										
	Permit Require.										
	Sample Measure.										
	Permit Require.										

NAME/TITLE: PRINCIPAL EXECUTIVE OFFICER

ADDY DULICK

Andy Dulick

PRINCIPAL EXECUTIVE OFFICER

TELEPHONE: 412 373-5113

DATE: 93 02 19

ATTACHMENTS HERE

NO DISCHARGE

NAME Duquesne Light Company
ADDRESS One Jafford Centre
391 Grant Street
Pittsburgh, PA 15279

FACILITY Shippingport Atomic Power Station
LOCATION Shippingport Borough, Beaver County

PA001589
PERMIT NUMBER

201
DISCHARGE NO.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
(NPDES)


MONITORING PERIOD
Year Month Day FROM 93 01 01 TO 93 01 31

DISCHARGE MONITORING REPORT (DMR)

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			
Flow	Sample Measure.	No Flow		MGD					0	2/mo	ESC
	Permit Require.										
Suspended Solids	Sample Measure.							MG/L		2/MO	GRAB
	Permit Require.					30	100				
pH	Sample Measure.							S.U.		2/MO	GRAB
	Permit Require.				6.0		9.0				
	Sample Measure.										
	Permit Require.										
	Sample Measure.										
	Permit Require.										
	Sample Measure.										
	Permit Require.										
	Sample Measure.										
	Permit Require.										
	Sample Measure.										
	Permit Require.										
	Sample Measure.										
	Permit Require.										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
ADDY DULICK
CHEMISTRY MANAGER
(TYPED OR PRINTED)


STANDARDS OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 412 393 5713

DATE
 93 02 19

EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NO DISCHARGE

2862
NUMBER YEAR MONTH DAY

NAME: Duquesne Light Company
 ADDRESS: One Oxford Centre
 301 Grant Street
 Pittsburgh, PA 15219

FACILITY: Stripplaport Atomic Power Station
 LOCATION: Shipplaport Borough, Beaver County

PA001589
 PERMIT NUMBER

001
 DISCHARGE NO.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
 (NPDES)

MONITORING PERIOD

Year Month Day
 93 01 31

FROM

Year Month Day
 93 01 01

DISCHARGE MONITORING REPORT (DMR)

NOTE: Read instructions before completing this form.

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			UNITS	NO. OF ANALYSIS	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
Flow	No Flow		MGD					0	2/mo	EST
Sample Measure.										
Permit Require.									CONT	EST
Sample Measure.										
Permit Require.										
Sample Measure.										
Permit Require.										
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Sample Measure.										
Permit Require.										
Sample Measure.										
Permit Require.										

NAME/TITLE: PRINCIPAL EXECUTIVE OFFICER
 ANDY DUECK
 CHEMISTRY MANAGER
 TYPED OR PRINTED

412 393 5113
 TELEPHONE NUMBER
 0880

DATE
 02 19 93
 YEAR MONTH DAY

STATE OF PENNSYLVANIA (Reference all attachments here)

NO DISCHARGE