

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

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

Form Approved
OMB No. 2000-0015

NAME **IVA - SEQUOYAH NUCLEAR**
ADDRESS **240 - 401 BLDG**
CHATTANOOGA TN 37401

IN0026450
PERMIT NUMBER

001 1
DISCHARGE NUMBER

F - FINAL LIMITS
001 STP TO DIFFUSER POND

FACILITY
LOCATION

MONITORING PERIOD
FROM YEAR 82 MO 01 DAY 01 TO YEAR 82 MO 01 DAY 28
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

ATTN: CHARLIE MCINTIRE

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			
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*****	*****	*****	3.0	3.5	*****	0	20/30	GR
00300 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	1.0	*****	*****		DAILY	GRAB
BOD, 5- DAY (20 DEG. C)	SAMPLE MEASUREMENT	1.86	3.30		*****	14	22	0	4/30	GR
00310 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	DAILY 7.5 HI 7D AV	DAILY 11 INST MX	LBS/DY	*****	DAILY 30 HI 7D AV	DAILY 45 INST MX		TWICE MONTH	GRAB
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.1	*****	7.9	0	4/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	2.77	4.05		*****	18	27	0	2/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	DAILY 7.5 HI 7D AV	DAILY 11 INST MX	LBS/DY	*****	DAILY 30 HI 7D AV	DAILY 45 INST MX		TWICE MONTH	GRAB
SOLIDS, SETTLABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 0.1	< 0.1	0	20/30	GR
00545 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	DAILY 1.0 INST MX		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.005	0.008		*****	*****	*****	0	20/30	WEIR
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	DAILY .03 HI 7D AV	DAILY ***** INST MX	MGD	*****	*****	*****		DAILY	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	0.5	1.1	2.0	0	20/30	GR
50060 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
M.T. El-Ashry, Asst. Mgr.
OF NATURAL RESOURCES
(ENVIRONMENT)

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
M.T. El-Ashry

TELEPHONE
DATE
82 05 28

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

8206070369 820528
PDR ADDCK 05000327
DR

JEAS
2/1

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

NAME TVA - SEQUOYAH NUCLEAR
 ADDRESS 248 - 401 BLDG
CHATTANOOGA TN 37401

FACILITY _____
 LOCATION _____

ATTN: CHARLIE MCINTIRE

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

(2-16) TN0026450
 PERMIT NUMBER
 (17-19) 001 1
 DISCHARGE NUMBER

F - FINAL LIMITS
001 STP TO DIFFUSER POND

Form Approved
 OMB No. 2000-0015

MONITORING PERIOD
 YEAR MO DAY YEAR MO DAY
 FROM 82 05 01 TO 82 05 31 28
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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			
COLIFORM, FECAL GENERAL 74055 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	48	230	#1	0	4/30 GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	100ML		TWICE/GRAB 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									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
M.T. El-Ashry, Asst. MGR.
OF NATURAL RESOURCES
(ENVIRONMENT)
 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 FTS 858-7314 82 05 28
 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)

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

Form Approved
OMB No. 2000-0015

NAME IVA - SEQUOYAH NUCLEAR
ADDRESS 248 - 401 BDDG
CHATTANOOGA TN 37401

(2-16) T00026450
PERMIT NUMBER
(17-19) 002 1
DISCHARGE NUMBER

F - FINAL LIMITS
002 STP TO TENNESSEE RIVER

FACILITY
LOCATION

MONITORING PERIOD
FROM YEAR 82 MO 08 DAY 01 TO YEAR 82 MO 08 DAY 28
(12-21) (12-23) (12-25) (12-27) (12-29) (12-31)

NOTE: Read instructions before completing this form.

ATTN: CHARLIE MCINTIRE

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			
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*****	*****	*****	2.0	3.5	*****	0	20/30	GR
00300 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	1.0 INST MN	*****	*****		DAILY	GRAB
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	0.27	0.42		*****	6.2	10	0	2/30	GR
00310 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.8 DAILY HI 7D AV	5.0 DAILY INST MX	LBS/DY	*****	30 DAILY HI 7D AV	40 DAILY INST MX		TWICE MONTH	GRAB
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.4	*****	7.6	0	4/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	0.41	0.62		*****	9.5	15	0	2/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.8 DAILY HI 7D AV	5.0 DAILY INST MX	LBS/DY	*****	30 DAILY HI 7D AV	40 DAILY INST MX		TWICE MONTH	GRAB
SOLIDS, SETTLABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.1	<0.1	0	20/30	GR
00545 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	DAILY 1.0 INST MX		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.007	0.012		*****	*****	*****	0	20/30	WEIR
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.05 DAILY HI 7D AV	***** DAILY INST MX	MGD	*****	*****	*****		DAILY	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	0.5	0.6	2.0	0	20/30	GR
50060 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	***** 2.0		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
M.T. El-Ashry, Asst. MGR.
OF NATURAL RESOURCES
(ENVIRONMENT)
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
FTS 858-7314 82 05 28
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)

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

Form Approved
OMB No. 2000-0015

NAME **TVA - SEQUOYAH NUCLEAR**
ADDRESS **248 - 401 BLDG**
CHATTANOOGA **TN 37401**

PERMIT NUMBER
TN0026450

DISCHARGE NUMBER
002 1

F - FINAL LIMITS
002 STP TO TENNESSEE RIVER

FACILITY

LOCATION

ATTN: CHARLIE MCINTIRE

MONITORING PERIOD
FROM **82 05 01** TO **82 05 28**
(20-21) (22-24) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(5 Card Only) QUANTITY OR LOADING (46-51)			(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			
COLIFORM, FECAL GENERAL 74055 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	505	880	#1	0	2/30 GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	100ML		TWICE 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									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

M. T. El-Ashry, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)

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 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

FTS
AREA
CODE

858-7314
NUMBER

82 05 28
YEAR MO DAY

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

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

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

Form Approved
OMB No. 2000-0015

NAME **TVA - SEQUOYAH NUCLEAR**
ADDRESS **248 - 401 BLDG**
CHATTANOUGA TN 37401

PERMIT NUMBER
TN0026450

DISCHARGE NUMBER
003 1

F - FINAL LIMITS
003 STP TO YARD DRAINAGE POND

FACILITY
LOCATION
ATTN: CHARLIE MCINTIRE

MONITORING PERIOD
FROM **82 05 01** TO **82 05 28**
(12-21) (12-21) (12-21) (12-21) (12-21) (12-21)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	0.76 *	1.40 *		*****	< 6.5	12		0	2/30	GR
00310 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	9.0 5.0 DAILY HI 7D AV	13.5 5.6 DAILY INST MX	LBS/DY	*****	30 40 DAILY HI 7D AV	45 DAILY INST MX	MG/L		TWICE MONTH	GRAB
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.8	*****	7.2		0	4/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	0.58 *	0.93 *		*****	5.0	8.0		0	2/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	9.0 5.0 DAILY HI 7D AV	13.5 5.6 DAILY INST MX	LBS/DY	*****	30 40 DAILY HI 7D AV	45 DAILY INST MX	MG/L		TWICE MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 0.1	< 0.1		0	28/30	GR
00545 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	DAILY 1.0 INST MX	ML/L		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.014 *	0.014 *		*****	*****	*****	*****	0	28/30	WEIR
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.036 DAILY HI 7D AV	***** DAILY INST MX	MGD	*****	*****	*****	*****		DAILY	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	0.1	1.3	2.3		0	28/30	GR
50060 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	MG/L		DAILY	GRAB
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 39	150	#1	0	2/30	GR
74055 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	100ML		TWICE MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
**M. T. El-Ashry, Asst. MGR.
OF NATURAL RESOURCES
(ENVIRONMENT)**
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

FTS
AREA
CODE

858-73 A
NUMBER

82 05 28
YEAR MO DAY

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

* Flow values were estimated this reporting period due to inoperable flowmeter, Flowmeter parts have been ordered.

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

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

Form Approved
OMB No. 2000-0015

NAME TENNESSEE VALLEY AUTHORITY
ADDRESS 803 LOCUST STREET BUILDING
KNOXVILLE, TN 37902
FACILITY SEQUOYAH NUCLEAR PLANT
LOCATION SODDY, TN 37379

(2-16) TN0026450
PERMIT NUMBER
(17-19) 004
DISCHARGE NUMBER

CONSTRUCTION RUNOFF

MONITORING PERIOD
FROM YEAR 82 MO 02 DAY 01 TO YEAR 82 MO 03 DAY 01
(12-21) (12-24) (12-25) (12-27) (12-29) (13-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (52-63)	FREQUENCY OF ANALYSIS (54-68)	AMPLE TYPE (59-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	*	0.0043*	MGD				0	4/30*	GR
	PERMIT REQUIREMENT	NA	NA						1/7	GR
SUSPENDED SOLIDS	SAMPLE MEASUREMENT				5.6	6.0	6.5	0	2/30	GR
	PERMIT REQUIREMENT				NA	NA	NA		1/7	GR
SETTLABLE SOLIDS	SAMPLE MEASUREMENT				0.10	0.10	0.10	0	2/30	GR
	PERMIT REQUIREMENT				NA	NA	NA		1/7	GR
TURBIDITY	SAMPLE MEASUREMENT				8.0	14	20	0	2/30	GR
	PERMIT REQUIREMENT				NA	NA	NA		1/7	GR
pH	SAMPLE MEASUREMENT				7.1		8.5	0	2/30	GR
	PERMIT REQUIREMENT				6.0		9.0		1/7	GR
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
M. T. EL-ASHRY, ASST. MGR.
OF NATURAL RESOURCES
(ENVIRONMENT)
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

FTS 858-7314 82 05 28
AREA CODE NUMBER YEAR MO DAY

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

*FLOW MONITORING WAS UNREPRESENTATIVE ONE WEEK AND WAS ZERO TWO WEEKS DURING THIS REPORTING PERIOD.

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

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

Form Approved
OMB No. 2000-0015

NAME TENNESSEE VALLEY AUTHORITY
ADDRESS 803 LOCUST STREET BUILDING
KNOXVILLE, TN 37902

(2-16)
TN0026450
PERMIT NUMBER

(17-19)
005
DISCHARGE NUMBER

CONSTRUCTION RUNOFF

FACILITY SEQUOYAH NUCLEAR PLANT
LOCATION SODDY, TN 37379

MONITORING PERIOD
FROM YEAR MO DAY TO YEAR MO DAY
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)
82 02 01 TO 82 03 01

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (45-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SUSPENDED SOLIDS	SAMPLE MEASUREMENT	NO DISCHARGE								
	PERMIT REQUIREMENT				NA	NA	NA		1/7	GR
SETTLABLE SOLIDS	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT				NA	NA	NA		1/7	GR
TURBIDITY	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT				NA	NA	NA		1/7	GR
pH	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT				6.0		9.0		1/7	GR
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
M. T. EL-ASHRY, ASST. MGR.
OF NATURAL RESOURCES
(ENVIRONMENT)
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
858-7314
DATE
82 05 28
FTS
AREA CODE NUMBER YEAR MO DAY

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

AS DISCUSSED IN A JANUARY 7, 1982, LETTER FROM DR. EL-ASHRY TO MR. PAUL TRAINA, THE MONITORING LOCATION FOR THIS DISCHARGE WAS CHANGED ON NOVEMBER 11, 1981.

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

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

Form Approved
OMB No. 2000-0015

NAME TENNESSEE VALLEY AUTHORITY
ADDRESS 803 LOCUST STREET BUILDING
KNOXVILLE, TN 37902

(2-16)
TN0026450
PERMIT NUMBER

(17-19)
006
DISCHARGE NUMBER

CONSTRUCTION RUNOFF

FACILITY SEQUOYAH NUCLEAR PLANT
LOCATION SODDY, TN 37579

MONITORING PERIOD
FROM YEAR MO DAY TO YEAR MO DAY
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)
82 02 01 TO 82 03 01

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			
SUSPENDED SOLIDS	SAMPLE MEASUREMENT	NO DISCHARGE								
	PERMIT REQUIREMENT				NA	NA	NA		1/7	GR
SETTLEABLE SOLIDS	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT				NA	NA	NA		1/7	GR
TURBIDITY	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT				NA	NA	NA		1/7	GR
pH	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT				6.0		9.0		1/7	GR
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

M. T. EL-ASHRY, ASST. MGR.
OF NATURAL RESOURCES
(ENVIRONMENT)

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

FTS 858-7314 32 05 28

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 **IVA - SEQUOYAH NUCLEAR**
 ADDRESS **248 - 401 BLDG**
CHATTAHOOGA TN 37401

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

PERMIT NUMBER **TN0026450**

DISCHARGE NUMBER **007 1**

F - FINAL LIMITS
007 YARD DRAINAGE POND

Form Approved
 OMB No. 2000-0015

FACILITY

LOCATION

ATTN: CHARLIE MCINTIRE

MONITORING PERIOD

FROM YEAR **82** MO **05** DAY **01** TO YEAR **82** MO **05** DAY **28**

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53)			(4 Card Only) (38-45)			QUALITY OR CONCENTRATION (46-53) (54-61)			EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS					
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.2	*****	8.6		0	28/30	GR		
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEK- DAYS	GRAB		
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****	15	73		0	28/30	GR		
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100 DAILY MX	MG/L		WEEK- DAYS	GRAB		
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 5.9	8.7		0	4/30	GR		
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	15 DAILY AV	20 DAILY MX	MG/L		WEEKLY	GRAB		
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	2.56	7.60		*****	*****	*****	*****	0	28/30	REC		
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		CONTIN UOUS	RECORD		
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	0.01	0.03	0.10		0	4/30	GR		
50060 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	MG/L		WEEKLY	GRAB		
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

**M.T. El-Ashry, Asst. MGR,
OF NATURAL RESOURCES
(ENVIRONMENT)**

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.)

TELEPHONE

FTS 858-7314

AREA CODE NUMBER

DATE

82 05 28

YEAR MO DAY

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

[Signature]

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

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

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

Form Approved
OMB No. 2000-0015

NAME **IVA - SEQUOYAH NUCLEAR**
ADDRESS **248 - 401 BLDG**
CHATTANOOGA TN 37401

PERMIT NUMBER
TN0026450

DISCHARGE NUMBER
008 1

F - FINAL LIMITS
008 CONCRETE BATCH PLANT

FACILITY
LOCATION

MONITORING PERIOD
FROM **82 05 01** TO **82 05 31**
(12-21) (12-21) (12-21) (12-27) (12-29) (12-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (58-65) QUALITY OR CONCENTRATION (66-73)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.9	*****	8.9		0	4/30 GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEKLY GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****	80	275		1	4/30 GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30.0 DAILY AV	100.0 DAILY MX	MG/L		WEEKLY GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0		0	1/30 GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	20 DAILY MX	MG/L		ONCE / GRAB MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.16	0.22	MGD	*****	*****	*****	*****	0	4/30 GR
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		WEEKLY GRAB
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
**A.T. El-Ashry, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)**
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.)

TELEPHONE
FTS 858-7314

DATE
82 05 28

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

AREA CODE
FTS

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

A notification of noncompliance was submitted on April 23, 1982.

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

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

Form Approved
OMB No. 2000-0015

NAME **IWA - SEQUOYAH NUCLEAR**
ADDRESS **248 - 401 BLDG**
CHATTANOOGA TN 37401

TN0026450
PERMIT NUMBER

009 1
DISCHARGE NUMBER

F - FINAL LIMITS
009 METAL CLEANING WASTES

FACILITY
LOCATION

MONITORING PERIOD
FROM **82 05 01** TO **82 05 31**
(20-21) (22-24) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

ATTN: CHARLIE MCINTIRE

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			
CHEM. OXYGEN DEMAND (HIGH LEVEL) (COD) 00340 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100	MG/L	WEEKLY	COMP-B
SOLIDS, TOTAL SUSPENDED 00530 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30	100	MG/L	WEEKLY	COMP-B
OIL AND GREASE (SOXHLET EXTR.) TOT. 00550 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	15	20	MG/L	WEEKLY	GRAB
PHOSPHORUS, TOTAL (AS P) 00665 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	1.0	1.0	MG/L	WEEKLY	COMP-B
COPPER, TOTAL (AS CU) 01042 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	1.0	1.0	MG/L	WEEKLY	COMP-B
IRON, TOTAL (AS FE) 01045 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	1.0	1.0	MG/L	WEEKLY	COMP-B
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0	SAMPLE MEASUREMENT				*****	*****	*****	*****		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	DAILY	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
M.T. El-Ashry, Asst. Dir.
OF NATURAL RESOURCES
(ENVIRONMENT)
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 \$ 5,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
cut

TELEPHONE
FTS 858-734
DATE
82 05 28

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

No metal cleaning wastes were discharged. Special monitoring was done as part of the PCB incident reported in a May 18, 1982, letter from Mohamed T. El-Ashry to Paul J. Traina.

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

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

Form Approved
OMB No. 2000-0015

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 248 - 401 BLDG
CHATTANOOGA TN 37401

(2-16) IN0026450
PERMIT NUMBER
(17-19) 010 1
DISCHARGE NUMBER

F - FINAL LIMITS
010 SUMP STATION TO POND

FACILITY _____
LOCATION _____

MONITORING PERIOD
FROM YEAR 82 MO 05 DAY 01 TO YEAR 82 MO 05 DAY 28
(12-21) (12-25) (12-25) (12-27) (12-29) (12-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX	FREQUENCY OF ANALYSIS (54-58)	SAMPLE TYPE (59-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SOLIDS, TOTAL SUSPENDED 00530 1 0	SAMPLE MEASUREMENT	99.9	268.2	KG	*****	33	92		0	5/30 GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	352 52.6	1173 175	600/DY	*****	30	100			TWICE/GRAB WEEK
OIL AND GREASE (SOXHLET EXTR.) TOT. 00550 1 0	SAMPLE MEASUREMENT	437.4	2130	KG	*****	150	730		2	5/30 GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	176 26.3	235 35.0	600/DY	*****	15	20			TWICE/GRAB WEEK
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0	SAMPLE MEASUREMENT	0.71	1.04		*****	*****	*****	*****	0	8/30 CAL
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		CONTINUOUS RECORD
	SAMPLE MEASUREMENT	3.1								
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
A.T. El-Ashry, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)
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 \$20,000 and/or maximum imprisonment of between 6 months and 5 years.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
FTS 858-7314 82 05 28
AREA CODE NUMBER YEAR MO DAY

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

Special monitoring was done as part of the PCB incident reported in a May 18, 1982, letter from Mohamed T. El-Ashry to Paul J. Traina. A notification of noncompliance was submitted for the oil and grease excursions on May 27, 1982.

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

NAME **IWA - SEQUOYA NUCLEAR**

ADDRESS **248 - 401 BLDG**

CHATTANOOGA

TN 37401

FACILITY

LOCATION

ATTN: CHARLIE MCINTIRE

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

TN0026450

PERMIT NUMBER

012 1

DISCHARGE NUMBER

F - FINAL LIMITS

012 COOLING WATER TO POND

Form Approved
OMB No. 2000-0015

MONITORING PERIOD

FROM YEAR **82** MO **08** DAY **01** TO YEAR **82** MO **08** DAY **28**

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	NO. EX. (52-53)	FREQUENCY OF ANALYSIS (54-55)	SAMPLE TYPE (59-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.1	*****	8.1		0	4/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	37.2	49.0		*****	*****	*****		0	4/30	REC
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****			CONTINUOUS	RECORD
Boron	SAMPLE MEASUREMENT						*				
	PERMIT REQUIREMENT						14.0			1/1	GR
	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

**M.T. El-Ashry, Asst. Mgr
OF NATURAL RESOURCES**

(ENVIRONMENT)

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

FTS
AREA
CODE

858-7314

NUMBER

82 05 28

YEAR MO DAY

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

***No discharge of boron wastes.**

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

NAME IVA - SEQUOYA NUCLEAR
ADDRESS 248 - 401 BLDG
CHATTANOOGA TN 37401

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

(2-16) IN0026450
PERMIT NUMBER
(17-19) 013 1
DISCHARGE NUMBER

F - FINAL LIMITS
013 RECYCLED COOLING WATER

Form Approved
OMB No. 2000-0015

FACILITY
LOCATION

ATTN: CHARLIE MCINTIRE

MONITORING PERIOD
YEAR MO DAY YEAR MO DAY
FROM 82 08 01 TO 82 08 31 28
(20-21) (22-24) (24-24) (24-25) (26-28) (29-31)

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 (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****			*		*	
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	101.0 INST MX		DEG.F	DAILY GRAB
PH 00400 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****			*		*	
	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM		SU	WEEKLY GRAB
CHLORINE, TOTAL RESIDUAL 50060 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	NOT CHLORINATING					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.1 INST MX		MG/L	WEEKLY GRAB
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

MT. El-Astry, Asst. Mgr
OF NATURAL RESOURCES
(ENVIRONMENT)

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

FTS
AREA
CODE

858-7314
NUMBER

82 08 28
YEAR MO DAY

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

* The plant operated in open mode all month.

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

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

Form Approved
OMB No. 2000-0015

NAME **TVA - SEQUOYAH NUCLEAR**
ADDRESS **248 - 401 BLDG**
CHATTANOOGA TN 37401

IN0026450
PERMIT NUMBER

014 1
DISCHARGE NUMBER

F - FINAL LIMITS
14 HIGH CONDUCTIVITY LOW CRUD

FACILITY
LOCATION

MONITORING PERIOD
YEAR MO DAY YEAR MO DAY
FROM 82 05 01 TO 82 05 28

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.2	*****	8.9	0	22/30	COMP
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SJ	DAILY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	3.3	13	KG	*****	39	190	2	22/30	COMP
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.3 7.2 DAILY AV	11.0 24.0 DAILY MX	LBS/DY	*****	30 DAILY AV	100 DAILY MX	MG/L	DAILY	GRAB
OIL AND GREASE (SOLUBLE EXPR., TOT.)	SAMPLE MEASUREMENT	<0.84	7.5	KG	*****	<11	110	2	22/30	COMP
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	1.6 3.0 DAILY AV	2.2 4.0 DAILY MX	LBS/DY	*****	15 DAILY AV	20 DAILY MX	MG/L	DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.022	0.072		*****	*****	*****	*****	22/30	CAL
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	DAILY	CALCTD
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
M.T. El-Ashry, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)
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
FTS 858-7314 82 05 28
AREA CODE NUMBER YEAR MO DAY

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

Per the March 1, 1982 letter from Douglas K. LaRufford, EPA, to Mohamed T. El-Ashry, TVA, no 5-day notifications of noncompliance will be submitted for this discharge until the new treatment system is completed.

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

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 248 - 401 BLDG
CHAFFANOOGA TN 37401

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

Form Approved
OMB No. 2000-0015

(2-16) T-0026450
PERMIT NUMBER
(17-19) 015 1
DISCHARGE NUMBER

F - FINAL LIMITS
15 LOW CONDUCTIVITY HIGH CRUD

FACILITY
LOCATION

MONITORING PERIOD
YEAR MO DAY YEAR MO DAY
FROM 82 05 01 TO 82 05 31 28
(12-21) (12-21) (12-25) (12-27) (12-29) (12-31)

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 (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.1	*****	9.0	0	28/30	COMP
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM		ONCE/GRAB	DISCHG COMP 24
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	7.8	113	KG	*****	24	88	1	28/30	COMP
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	6.8 15.0 DAILY AV	23.0 50.0 DAILY MX	LBG/DY	*****	30 DAILY AV	100 DAILY MX		ONCE/GRAB	DISCHG COMP 24
OIL AND GREASE (SOLUBLE EXTR.) TOT.	SAMPLE MEASUREMENT	<1.4	<13.4	KG	*****	<5.2	<9.3	1	28/30	COMP
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.4 7.5 DAILY AV	4.5 10.0 DAILY MX	LBG/DY	*****	15 DAILY AV	20 DAILY MX		ONCE/GRAB	DISCHG COMP 24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.088	0.710		*****	*****	*****	0	28/30	CAL
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****		ONCE/GRAB	CALCTD DISCHG
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

M. TEL-Astry, Asst MGR
OF NATURAL RESOURCES
(ENVIRONMENT)

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

ETS 858-734 82 05 28
AREA CODE NUMBER YEAR MO DAY

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

Per the March 1, 1982 letter from Douglas K. Lankford, EPA, to Mohamed T. El-Astry, TVA, no 5-day notifications of noncompliance will be submitted for this discharge until the new treatment system is completed.

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

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

Form Approved
OMB No. 2000-0015

NAME **IVA - SEQUOYAH NUCLEAR**
ADDRESS **248 - 401 BLDG**
CHATTANOOGA **TN 37401**

(2-16) **IN0026450**
PERMIT NUMBER
(17-19) **016 1**
DISCHARGE NUMBER

F - FINAL LIMITS
016 LIQUID RADWASTE SYSTEM

FACILITY
LOCATION

MONITORING PERIOD
YEAR MO DAY YEAR MO DAY
FROM **92 05 01** TO **92 05 31**
(20-21) (22-24) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (54-61)			UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
Pd	SAMPLE MEASUREMENT	*****	*****	*****	5.4	*****	9.0		0	28	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	SU		ONCE/	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	---	---	---	*****	<6.7	<15		0	28	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	LBS/DY	*****	*****	*****	MG/L		ONCE/	GRAB
OIL AND GREASE (SOXHLET EXTH.) TGT.	SAMPLE MEASUREMENT	---	---	---	*****	<6.0	11		0	28	GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	LBS/DY	*****	*****	*****	MG/L		ONCE/	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.031	0.056		*****	*****	*****	*****	0	28	WEIR
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		ONCE/	DISCHG
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
**M.T. El-Ashry, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)**
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
858-7314
DATE
92 05 28

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
[Signature]

FTS AREA CODE
858-7314

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

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

NAME TVA - SEQUOYAH NUCLEAR

ADDRESS 248 - 401 BLDG

CHATTANOOGA

TN 37401

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

TN0026450

PERMIT NUMBER

017 1

DISCHARGE NUMBER

F - FINAL LIMITS

Office Building Samp - 1

Form Approved

OMB No. 2000-0015

FACILITY

LOCATION

ATTN: CHARLIE SCINTIRE

MONITORING PERIOD

FROM YEAR 82 MO 05 DAY 01 TO YEAR 82 MO 05 DAY 31 28

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SOLIDS, TOTAL SUSPENDED 00530 1 0	SAMPLE MEASUREMENT				*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX	LB6/DY	*****	30 DAILY AV	100 DAILY MX	MG/L	TWICE/GRAB WEEK	
OIL AND GREASE (SOXHLET EXTR.) TOT. 00550 1 0	SAMPLE MEASUREMENT				*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX	LB7/DY	*****	15 DAILY AV	20 DAILY MX	MG/L	TWICE/GRAB WEEK	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0	SAMPLE MEASUREMENT	NO DISCHARGE			*****	*****	*****	*****		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	TWICE/GRAB WEEK	
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

M.T. El-Ashry, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)

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 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.)

CME

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

FT3
AREA
CODE

858-7314

NUMBER

82 05 28

YEAR MO DAY

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

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

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

Form Approved
OMB No. 2000-0015

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 248 - 401 BLDG
CHATTANOOGA TN 37401

IN0026450

PERMIT NUMBER

018 1

DISCHARGE NUMBER

F - FINAL LIMITS

Office Building Samp - 2

FACILITY
LOCATION

MONITORING PERIOD
FROM YEAR 82 MO 05 DAY 01 TO YEAR 82 MO 05 DAY 31
(12-21) (12-21) (12-21) (12-21) (12-21) (12-21)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (45-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****					
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 15 DAILY AV	100 20 DAILY MAX	MG/L	TWICE WEEK	GRAB
Oil & Grease	SAMPLE MEASUREMENT	NO DISCHARGE			*****	*****	*****	*****		
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	TWICE WEEK	GRAB
	SAMPLE MEASUREMENT	---	---	---	---					
	PERMIT REQUIREMENT	---	---	---	---	15	20	MG/L	TWICE WEEK	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

M.T. El-Asary, Asst Mgr
OF NATURAL RESOURCES
(ENVIRONMENT)

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.)

CUT

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

FTS
AREA
CODE

858-7314

82 05 28

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

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

NAME TVA - SEVUOYAH NUCLEAR

ADDRESS 248 - 401 BLDG

CHATTANOUGA TN 37401

FACILITY

LOCATION

ATTN: CHARLIE MCINTIRE

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

(2-16)

(17-19)

TW0026450

019 1

PERMIT NUMBER

DISCHARGE NUMBER

F - FINAL LIMITS

Service Building Sump

Form Approved
OMB No. 2000-0015

MONITORING PERIOD

FROM YEAR 82 MO 08 DAY 01 TO YEAR 82 MO 08 DAY 28
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SOLIDS, TOTAL SUSPENDED 0053 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	54	85	0	8/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100 -50 DAILY MX	MG/L	TWICE/ WEEK	GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT. 00550 2 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<5.0	<5.0	0	8/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	DAILY AV 15 10A GEE	20 DAILY MX	MG/L	TWICE/ WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.0003	0.0004	MGD	*****	*****	*****	0	8/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****	TWICE/ WEEK	GRAB
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

M. T. El-Ashry, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)

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.

CLM

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

ETS
AREA
CODE

858-7314
NUMBER

82 05 28
YEAR MO DAY

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

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

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

Form Approved
OMB No. 2000-0015

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 248 - 401 BLDG
CHATTANOOGA TN 37401

TN0026450

PERMIT NUMBER

020 1

DISCHARGE NUMBER

F - FINAL LIMITS

*Diesel Gen Bldg. C4G
Interceptor*

FACILITY _____
LOCATION _____

MONITORING PERIOD
FROM YEAR 82 MO 05 DAY 01 TO YEAR 82 MO 05 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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)			NCL EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		
SOLIDS, TOTAL SUSPENDED 00530 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100 DAILY MX	MG/L	TWICE/ WEEK	GRAB
OIL AND GREASE (SOXHLET EX R.) TOT. 00550 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	15 DAILY AV	20 DAILY MX	MG/L	TWICE/ WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0	SAMPLE MEASUREMENT	NO DISCHARGE			*****	*****	*****	*****		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	TWICE/ WEEK	GRAB
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

*M.T. El-Ashry, Asst. Mgr
OF NATURAL RESOURCES
(ENVIRONMENT)*

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

FTS
AREA
CODE

858-7314

82 05 28

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

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

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

Form Approved
OMB No. 2000-0015

NAME TVA - SEQUOYA NUCLEAR
ADDRESS 24R - 401 BLDG
CHATTANOOGA TN 37401

12-16
TV0026450

PERMIT NUMBER

17-19
021 1

DISCHARGE NUMBER

F - FINAL LIMITS

*Sodium Hypochlorite
Bldg. Drains*

FACILITY _____
LOCATION _____

MONITORING PERIOD
FROM YEAR 82 MO 05 DAY 01 TO YEAR 82 MO 05 DAY 31 28
(12-21) (12-21) (12-21) (12-27) (12-29) (12-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (45-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	13	20		0 8/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100 DAILY MX	MG/L	TWICE/ WEEK	GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT. 00550 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<6.2	15		0 8/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	15 DAILY AV	20 DAILY MX	MG/L	TWICE/ WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.18	0.23		*****	*****	*****	*****	0 8/30	GR
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	TWICE/ WEEK	GRAB
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

*M.T. El-Azary, Asst MGR
OF NATURAL RESOURCES
(ENVIRONMENT)*

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

DATE

FTS 858-7314 82 05 28
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)

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

Form Approved
OMB No. 2000-0015

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 248 - 401 BLDG
CHATTANOOGA TN 37401

IN0026450
PERMIT NUMBER

023 1
DISCHARGE NUMBER

F - FINAL LIMITS
023 STEAM GENERATOR BLOWDOWN

FACILITY
LOCATION

ATTN: CHARLIE MCINTIRE

MONITORING PERIOD
FROM YEAR 82 MO 05 DAY 01 TO YEAR 82 MO 05 DAY 28
(20-21) (22-24) (24-25) (26-27) (28-29) (30-31)

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 (54-58)	SAMPLE TYPE (59-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.2	*****	8.9		0 4/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<1.0		0 1/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	LBS/DY	*****	30 DAILY AV	100 DAILY MX	MG/L	ONCE/ MONTH	GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<5.0		0 1/30	GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	LBS/DY	*****	15 DAILY AV	20 DAILY MX	MG/L	ONCE/ MONTH	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.02		0 1/30	GR
01042 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	LBS/DY	*****	1.0 DAILY AV	1.0 DAILY MX	MG/L	ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.02		0 1/30	GR
01045 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	LBS/DY	*****	1.0 DAILY AV	1.0 DAILY MX	MG/L	ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.24	0.74	*****	*****	*****	*****	*****	0 4/30	INST
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	WEEKLY	INSTAN
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
M.T. El-Asary, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)
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
AREA CODE NUMBER YEAR MO DAY
JTS 858-7314 82 05 28

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

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

NAME **TVA - SEQUOYA NUCLEAR**

ADDRESS **248 - 401 BLDG**

CHATTANOOGA

TN 37401

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

(12-16)

(17-19)

TN0026450

PERMIT NUMBER

024 1

DISCHARGE NUMBER

F - FINAL LIMITS

024 DIFFUSER GATE

Form Approved
OMB No. 2000-0015

FACILITY

LOCATION

ATTN: CHARLIE MCINTIRE

MONITORING PERIOD

FROM YEAR **82** MO **08** DAY **01** TO YEAR **82** MO **08** DAY **31** 28

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TEMPERATURE, WATER DEG. FAHREHEIT 00011 1 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	43.0*	50.7*	62.0*	0	27/30	REC
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	112.5 INST MX			CONTINRCORDR UOUS
TEMPERATURE, WATER DEG. FAHREHEIT 00011 2 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****			*			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	97.0 INST MX			CONTINRCORDR UOUS
TEMPERATURE, WATER DEG. FAHREHEIT 00011 3 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****			*			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	101.0 INST MX			CONTINRCORDR UOUS
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.0	*****	8.3	0	27/30	GR
00400 1 0 EFFLUENT GROSS VALUE SOLIDS, TOTAL	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM			DAILY GRAB
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	94	0	1/30	GR
00500 1 0 EFFLUENT GROSS VALUE SOLIDS, TOTAL	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****			ONCE/ GRAB MONTH
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	9.0	0	1/30	GR
00530 1 0 EFFLUENT GROSS VALUE SOLIDS, SETTLEABLE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****			ONCE/ GRAB MONTH
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.10	0	1/30	GR
00545 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****			ONCE/ GRAB MONTH

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

**M.T. El-Ashry, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)**

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

AREA CODE

NUMBER

YEAR

MO

DAY

LOCATION **OPEN, P - HENDERSON - CLOSED. SEE PERMIT FOR RECEIVING WATER TEMP REQS AND FOR CHLORINATION ANALYSIS & REQS.**

*** PLANT OPERATED IN OPEN MODE ALL MONTH.**

Special monitoring was done as part of the PCB incident reported in a May 18, 1982, letter from Mohamed T. El-Ashry to Paul J. Traina.

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

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

Form Approved
OMB No. 2000-0015

NAME **TVA - SEQUOYA NUCLEAR**
ADDRESS **245 - 401 BLVD**
CHATTANOOGA **TN 37401**

(12-16) **T40026450**
PERMIT NUMBER
(17-19) **007 1**
DISCHARGE NUMBER

F - FINAL LIMITS
007 YARD DRAINAGE POND

FACILITY
LOCATION

MONITORING PERIOD
YEAR MO DAY YEAR MO DAY
FROM **82 06 01** TO **82 06 30**
(12-21) (12-21) (12-21) (12-27) (12-29) (12-31)

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)			UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.2	*****	8.6		0	3/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEK-DAYS	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****	<9.1	88		0	3/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100 DAILY MX	MG/L		WEEK-DAYS	GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	*****	*****	*****	*****	<5.0	<5.0		0	5/30	GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	15 DAILY AV	20 DAILY MX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	2.84	7.80		*****	*****	*****	*****	0	3/30	REC
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		CONTINUOUS	RECORD
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	0.01	0.02	0.02		0	5/30	GR
50060 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	MG/L		WEEKLY	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

M.T. El-Ashry, Asst. MGR.
OF NATURAL RESOURCES
(ENVIRONMENT)

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.)

CLM

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

FTS 858-7314 82 05 28
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)

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

Form Approved
OMB No. 2000-0015

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 248 - 401 BLDG
CHATTANOUGA TN 37401

(2-16) TN0026450
PERMIT NUMBER
(17-19) 008 1
DISCHARGE NUMBER

F - FINAL LIMITS
008 CONCRETE BATCH PLANT

FACILITY
LOCATION

MONITORING PERIOD
FROM YEAR 82 MO 06 DAY 01 TO YEAR 82 MO 06 DAY 30
(12-21) (12-21) (12-21) (12-21) (12-21) (12-21)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.7	*****	8.5		0 5/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM			WEEKLY GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****	25	53		0 5/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100 50 DAILY MX			WEEKLY GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	*****	*****	*****	*****	<5.0	5.0		0 2/30	GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	20 DAILY AV DAILY MX			ONCE/ GRAB MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.045	0.230	*****	*****	*****	*****		0 5/30	GR
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****			WEEKLY GRAB
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

M. T. El-Ashry, Asst. Mgr.,
OF NATURAL RESOURCES
(ENVIRONMENT)

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

FTS 858-7314 82 05 28
AREA CODE NUMBER YEAR MO DAY

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

* A notification of noncompliance was erroneously submitted on April 29, 1982, because the data was initially compared to the old limitation instead of to the modified limitation granted by the February 4, 1981, letter from Howard D. Zeiber, EPA, to Mohamed T. El-Ashry, TVA.

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

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

Form Approved
OMB No. 2000-0015

NAME **TVA - SEQUOYAH NUCLEAR**
ADDRESS **248 - 401 BLDG**
CHATTANOOGA TN 37401

IN0026450
PERMIT NUMBER

009 1
DISCHARGE NUMBER

F - FI.LAL LIMITS
009 METAL CLEANING WASTES

FACILITY
LOCATION

MONITORING PERIOD
FROM YEAR **82** MO **05** DAY **01** TO YEAR **82** MO **05** DAY **31**
(12-21) (12-21) (12-25) (12-27) (12-29) (12-31)

NOTE: Read instructions before completing this form.

ATTN: CHARLIE MCINTIRE

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			
CHEM. OXYGEN DEMAND (HIGH LEVEL) (COD) 00340 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100	MG/L	WEEKLY	COMP-B
SOLIDS, TOTAL SUSPENDED 00530 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30	100	MG/L	WEEKLY	COMP-B
OIL AND GREASE (SOXHLGT EXTR.) TOT. 00550 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	15	20	MG/L	WEEKLY	GRAB
PHOSPHORUS, TOTAL (AS P) 00665 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	1.0	1.0	MG/L	WEEKLY	COMP-B
COPPER, TOTAL (AS CU) 01042 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	1.0	1.0	MG/L	WEEKLY	COMP-B
IRON, TOTAL (AS FE) 01045 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	1.0	1.0	MG/L	WEEKLY	COMP-B
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0	SAMPLE MEASUREMENT				*****	*****	*****	*****		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	DAILY	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
M. T. El-Ashry, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)
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 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

FFS 858-73,4 82 05 28
AREA CODE NUMBER YEAR MO DAY

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

No metal cleaning wastes were discharged. Special monitoring was done as part of the PCB incident reported in a May 18, 1982 letter from Mohamed T. El-Ashry to Phil J. Traina.

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

NAME IVA - SEQUOYAH NUCLEAR

ADDRESS 248 - 401 BLDG

CHATTANOOGA TN 37401

FACILITY

LOCATION

ATTN: CHARLIE MCINTIRE

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

IN0026450

PERMIT NUMBER

010 1

DISCHARGE NUMBER

F - FINAL LIMITS

010 SUMP STATION TO POND

Form Approved

OMB No. 2000-0015

MONITORING PERIOD

FROM YEAR 82 MO 06 DAY 01 TO YEAR 82 MO 06 DAY 30

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SOLIDS, TOTAL SUSPENDED 00530 1 0	SAMPLE MEASUREMENT	31.4	681	KG	*****	12	25	0	9/30	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	352 52.6 DAILY AV	1173 175 DAILY MX	LB6/DY	*****	30 DAILY AV	100 DAILY MX		TWICE/GRAB WEEK	
OIL AND GREASE (SOXHLET EXTR.) TOT. 00550 1 0	SAMPLE MEASUREMENT	<13.5	<19.7	KG	*****	<5.0	<5.0	0	9/30	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	176 26.3 DAILY AV	235 35.0 DAILY MX	LB6/DY	*****	15 DAILY AV	20 DAILY MX		TWICE/GRAB WEEK	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0	SAMPLE MEASUREMENT	0.72	1.04		*****	*****	*****	0	9/30	PLOG
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** 3.1	*****	MGD	*****	*****	*****	*****	CONTINUOUS	RECORD
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

M.T. El-Ashry, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)

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

858-73 A 82 05 28
AREA CODE NUMBER YEAR MO DAY

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

Special monitoring was done as part of the PCB incident reported in a May 18, 1982, letter from Mohamed T. El-Ashry to Paul J. Traina.

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

NAME TVA - SEVUUYAH NUCLEAR
 ADDRESS 248 - 401 BLDG
CHATTANOOGA TN 37401

FACILITY _____
 LOCATION _____

ATTN: CHARLIE MCINTIRE

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

(2-16) T0026450
 PERMIT NUMBER
 (17-19) 012 1
 DISCHARGE NUMBER

F - FINAL LIMITS
012 COOLING WATER TO POND

Form Approved
 OMB No. 2000-0015

MONITORING PERIOD
 FROM YEAR 82 MO 06 DAY 01 TO YEAR 82 MO 06 DAY 30
 (20-21) (22-24) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.1	*****	8.2		0 5/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEKLY GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	31	37		*****	*****	*****	*****	0 5/30	REC
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		CONTINUOUS RECORD
BORON	SAMPLE MEASUREMENT						*			
	PERMIT REQUIREMENT						14.0		1/1	GR
	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 <u>M.T. EL-Ashry, Asst. MGR OF NATURAL RESOURCES (ENVIRONMENT)</u> TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <u>CUM</u>	TELEPHONE		DATE		
			AREA CODE	NUMBER	YEAR	MO	DAY
			FTS	858-7314	82	05	28

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

* No discharge of Boron Wastes.

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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Form Approved
OMB No. 2000-0015

NAME **TVA - SEQUOYAH NUCLEAR**
ADDRESS **248 - 401 BLDG**
CHATTANOOGA **TN 37401**

DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

TN0026450

013 1

PERMIT NUMBER

DISCHARGE NUMBER

F - FINAL LIMITS
013 RECYCLED COOLING WATER

FACILITY
LOCATION

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	06	01	82	06	30
(12-21)	(12-21)	(12-21)	(12-21)	(12-21)	(12-21)

ATTN: CHARLIE MCINTIRE

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			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****					*	
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	101.0 INST MX		DAILY	GRAB
PH 00400 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****		*****	*		*	
	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM		WEEKLY	GRAB
CHLORINE, TOTAL RESIDUAL 50060 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	NOT CHLORINATING					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.1 INST MX		WEEKLY	GRAB
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

M.T. El-Ashry, Asst. MGR

**OF NATURAL RESOURCES
(ENVIRONMENT)**

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.)

CME

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

FJS
AREA
CODE

858-73,4
NUMBER

82 05 28
YEAR MO DAY

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

* THE PLANT OPERATED IN OPEN MODE ALL MONTH.

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

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

Form Approved
OMB No. 2000-0015

NAME **IVA - SEQUOYAH NUCLEAR**
ADDRESS **244 - 401 BLDG**
CHATTANOUGA TN 37401

TN0026450
PERMIT NUMBER

014 1
DISCHARGE NUMBER

F - FINAL LIMITS
14 HIGH CONDUCTIVITY LOW CRUD

FACILITY
LOCATION

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	08	01	82	08	31
(12-21)	(12-22)	(12-23)	(12-27)	(12-28)	(12-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.7	*****	9.0	0	16/30	COMP
00400 1 0	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0		DAILY	ONCE/GRAB
EFFLUENT GROSS VALUE					MINIMUM		MAXIMUM			DISCHG COMP 24
SOLIDS, TOTAL	SAMPLE MEASUREMENT	2.5	5.5	KG	*****	31	49	0	16/30	COMP
SUSPENDED	PERMIT REQUIREMENT	3.3 7.2	11.0 24.0	LBS/DY	*****	30	100		DAILY	ONCE/GRAB
00530 1 0		DAILY AV	DAILY MX			DAILY AV	DAILY MX			DISCHG COMP 24
EFFLUENT GROSS VALUE										
OIL AND GREASE	SAMPLE MEASUREMENT	<0.45	1.02	KG	*****	<6.5	15	0	16/30	COMP
(SOXHLET EXTR.) TOT.	PERMIT REQUIREMENT	1.6 3.6	2.2 4.0	LBS/DY	*****	15	20		DAILY	ONCE/GRAB
00550 1 0		DAILY AV	DAILY MX			DAILY AV	DAILY MX			DISCHG COMP 24
EFFLUENT GROSS VALUE										
FLOW, IN CONDUIT OR	SAMPLE MEASUREMENT	0.018	0.035		*****	*****	*****	0	16/30	CAL
THRU TREATMENT PLANT	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****		DAILY	ONCE/ CALCD
50050 1 0										DISCHG
EFFLUENT GROSS VALUE										
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
M.T. El-Ashry, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)
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

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 **IYA - SEQUOYAH NUCLEAR**
 ADDRESS **248 - 401 BLDG**
CHATTANOUGA TN 37401

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

DISCHARGE MONITORING REPORT (DMR)
 DISCHARGE NUMBER **015 1**
 PERMIT NUMBER **TN0026450**

Form Approved
 OMB No. 2000-0015
F - FINAL LIMITS
15 LOW CONDUCTIVITY HIGH CRUD

FACILITY
 LOCATION

MONITORING PERIOD
 FROM **82 06 01** TO **82 06 30**
 (12-21) (12-23) (12-25) (12-27) (12-29) (12-31)

ATTN: CHARLIE MCINTIRE

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.0	*****	9.0	0	28/30	Comp
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	ONCE/GRAB	DISCHG COMP 24
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	5.3	2.2	KG	*****	24	78	0	28/30	Comp
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	6.8 15.0 DAILY AV	23.0 50.0 DAILY MX	LBS/DY	*****	30 DAILY AV	100 DAILY MX	MG/L	ONCE/GRAB	DISCHG COMP 24
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	1.1	2.3	KG	*****	< 5.5	14	0	28/30	Comp
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.4 7.5 DAILY AV	4.5 10.0 DAILY MX	LBS/DY	*****	15 DAILY AV	20 DAILY MX	MG/L	ONCE/GRAB	DISCHG COMP 24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.058	0.120		*****	*****	*****	0	28/30	CAL
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	ONCE/GRAB	DISCHG
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

**M.T. El-Ashry, Asst. Mgr.
 OF NATURAL RESOURCES
 (ENVIRONMENT)**

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

FTS 858-7314 **82 05 28**
 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)

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

Form Approved
OMB No. 2000-0015

NAME **TVA - SEQUOYAH NUCLEAR**
ADDRESS **248 - 401 BLDG**
CHATTANOOGA TN 37401

TN0026450
PERMIT NUMBER

017 1
DISCHARGE NUMBER

F - FINAL LIMITS

Office Building Samp - 1

FACILITY
LOCATION

MONITORING PERIOD
FROM YEAR **82** MO **06** DAY **01** TO YEAR **82** MO **06** DAY **30**
(12-21) (12-21) (12-25) (12-27) (12-29) (12-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				*****					
	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX	LBS/DY	*****	30 DAILY AV	100 DAILY MX			TWICE/GRAB WEEK
OIL AND GREASE (SOLUBLE EXTR.) TOT. 00550 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				*****					
	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX	LBS/DY	*****	15 DAILY AV	20 DAILY MX			TWICE/GRAB WEEK
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	NO DISCHARGE			*****	*****	*****	*****		
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		TWICE/GRAB WEEK
	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
M.T. El-Ashry, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)
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.)

CME

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

FTS 828-7314 **82 05 28**
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 TVA - SEQUOYAH NUCLEAR

ADDRESS 248 - 401 BLDG

CHATTANOOGA

TN 37401

FACILITY

LOCATION

ATTN: CHARLIE MCINIRE

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

PERMIT NUMBER TN0026450

DISCHARGE NUMBER 018 1

F - FINAL LIMITS

Office Building Sump 2

Form Approved
OMB No. 2000-0015

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	06	01	82	06	30
(120-21)	(122-23)	(124-25)	(126-27)	(128-29)	(130-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		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			
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****					
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 45 DAILY AV	100 20 DAILY MX	MG/L	TWICE/ WEEK	GRAB
	SAMPLE MEASUREMENT	NO DISCHARGE			*****	*****	*****	*****		
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	TWICE/ WEEK	GRAB
Oil & Grease	SAMPLE MEASUREMENT	---	---	---	---					
	PERMIT REQUIREMENT	---	---	---	---	15	20	MG/L	TWICE/ WEEK	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

M. F. El-Ashry, Asst. MGR,
OF NATURAL RESOURCES
(ENVIRONMENT)

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

FTS 858-73,4 82 05 28
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 **TVA - SEQUOYAH NUCLEAR**

ADDRESS **248 - 401 BLDG**

CHATTANOUGA

TN 37401

FACILITY

LOCATION

ATTN: CHARLIE MCINTIRE

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

(2-16)

(17-19)

TN0026450

PERMIT NUMBER

019 1

DISCHARGE NUMBER

F - FINAL LIMITS

Service Building Samp

Form Approved
OMB No. 2000-0015

MONITORING PERIOD

FROM YEAR **82** MO **03** DAY **01** TO YEAR **82** MO **03** DAY **31**
(12-21) (12-21) (12-21) (12-21) (12-21) (12-21)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (46-51)			NO. EX	FREQUENCY OF ANALYSIS (54-58)	SAMPLE TYPE (59-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	50	92	0	9/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100-50 DAILY MX	MG/L	TWICE/	GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT. 00550 2 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<10	31	2	9/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	Daily Av 15 100-600	20 DAILY MX	MG/L	TWICE/	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.008	0.067	MGD	*****	*****	*****	*****	9/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****	TWICE/GRAB	WEEK
	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

**M.T. El-Ashry, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)**

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.

clm

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

FTS
AREA
CODE

858-73A

82 05 28

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

Notifications of noncompliance were submitted on March 30 and April 1, 1982.

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

NAME TVA - SEQUOYAH NUCLEAR

ADDRESS 24c - 401 BLDG

CHATTANOOGA

TN 37401

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

PERMIT NUMBER TN0026450

DISCHARGE NUMBER 020 1

F - FINAL LIMITS

Form Approved
OMB No. 2000-0015

Diesel Gen. Bldg. V&G
Interceptor

FACILITY

LOCATION

ATTN: CHARLIE MCINTIRE

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	06	01	82	06	30
(28-29)	(12-23)	(24-25)	(28-29)	(12-24)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (54-58)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SOLIDS, TOTAL SUSPENDED 00530 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100 DAILY MX	MG/L	TWICE/	GRAB
OIL AND GREASE (SOLUBLE EXTR.) TOT. 00550 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	15 DAILY AV	20 DAILY MX	MG/L	TWICE/	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0	SAMPLE MEASUREMENT	NO DISCHARGE			*****	*****	*****	*****		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	TWICE/	GRAB
	SAMPLE MEASUREMENT								WEEK	
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

M.T. El-Ashry, Asst. MGR.
OF NATURAL RESOURCES
(ENVIRONMENT)

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

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)

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

Form Approved
OMB No. 2000-0015

NAME **TVA - SEQUOYAH NUCLEAR**
ADDRESS **245 - 401 BLDG**
CHATTANOOGA TN 37401

IN0026450
PERMIT NUMBER

024 1
DISCHARGE NUMBER

F - FINAL LIMITS
024 DIFFUSER GATE

FACILITY
LOCATION

MONITORING PERIOD
FROM YEAR 82 MO 05 DAY 01 TO YEAR 82 MO 05 DAY 28
(12-21) (12-21) (12-21) (12-21) (12-21) (12-21)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (46-53)			QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
MANGANESE, TOTAL (AS MN) 01055 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	0	1/30	GR
ZINC, TOTAL (AS ZN) 01092 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	0	1/30	GR
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	0	27/30	REC
CHLORINE, TOTAL RESIDUAL 50060 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	0	1/30	GR
SOLIDS, TOTAL DISSOLVED 70295 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	0	1/30	GR
Temperature, Downstream Reservoir	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	0	27/30	REC
Temperature, Reservoir Temp. Rise	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	0	27/30	REC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
M.T. El-Ashry, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)

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
CLM

TELEPHONE
FTS 858-7314
AREA CODE NUMBER

DATE
82 05 28
YEAR MO DAY

LOCATION OF EXPLANATION OF AND VIOLATION OF PERMIT CONDITIONS
ANALYSIS & REQS.

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

NAME Tennessee Valley Authority
ADDRESS 803 Locust Street Bldg.
Knoxville, TN 37902

FACILITY Sequoyah Nuclear Plant
LOCATION Soddy, TN 37379

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

PERMIT NUMBER TN0026450
DISCHARGE NUMBER 024

Diffuser Gate

Form Approved
OMB No. 2000-0015

MONITORING PERIOD
FROM 82 02 01 TO 82 02 28
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-52)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (54-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
Temperature, Reservoir Rate of Change	SAMPLE MEASUREMENT	—	—	—	0.0	0.0	0.0	Deg F	0	27/30	REC
	PERMIT REQUIREMENT	—	—	—	—	—	3.6	per Hour		CONTIN UOUS	RECORD
Boron	SAMPLE MEASUREMENT						*				
	PERMIT REQUIREMENT						1.1			1/1	GR
Total Chlorine Residual	SAMPLE MEASUREMENT						**				
	PERMIT REQUIREMENT						0.1	mg/L		cont	Rec
	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

A.T. El-Asary, Asst. MGR,
OF NATURAL RESOURCES
(ENVIRONMENT)

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.)

CME

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

FTS 858-7314 82 05 28
AREA CODE NUMBER YEAR MO DAY

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

* No discharge of boron wastes.
** monitor not operational, parts on order.

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

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

Form Approved
OMB No. 2000-0015

NAME **TVA - SEQUOIAH NUCLEAR**
ADDRESS **248 - 401 BLDG**
CHATTANOOGA TN 37401

IN0026450

PERMIT NUMBER

025 1

DISCHARGE NUMBER

F - FINAL LIMITS
025 - CLOSED-CYCLE INTAKES

Plant and ERCW

FACILITY
LOCATION

MONITORING PERIOD
FROM 82 05 01 TO 82 05 28
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (54-58)	SAMPLE TYPE (59-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TEMPERATURE, WATER DEG. FAHRENHEIT Plant 00011-1-0 Intake	SAMPLE MEASUREMENT	*****	*****	*****	41.0	42.4	48.0	0	1/HR	REC
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		SEE PERMIT	RECORD
SOLIDS, TOTAL ERCW	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	55	0	1/30	B-HR COMP
00500-1-0 INTAKE EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		ONCE/ MONTH	COMP-B
SOLIDS, TOTAL SUSPENDED ERCW	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	17	0	1/30	B-HR COMP
00530-1-0 Intake EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		ONCE/ MONTH	COMP-B
SOLIDS, SETTLEABLE ERCW	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.10	0	1/30	B-HR COMP
00545-1-0 Intake EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		ONCE/ MONTH	COMP-B
NITROGEN, AMMONIA TOTAL (AS N) ERCW	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.75	0	1/30	B-HR COND
00610-1-0 Intake EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		ONCE/ MONTH	GRAB COMP-B
SODIUM, TOTAL (AS Na) ERCW	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	8.0	0	1/30	B-HR COMP
00929-1-0 Intake EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		ONCE/ MONTH	COMP-B
CHLORIDE (AS CL) ERCW	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.5	0	1/30	B-HR COMP
00940-1-0 Intake EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		ONCE/ MONTH	COMP-B

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
M. T. El-Araby, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)

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
FTS 858-7314 82 05 28
AREA CODE NUMBER YEAR MO DAY

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

PLANT INTAKE AMBIENT TEMPERATURE DATA: (1) ARE REPORTED AS THE MAXIMUM OF THE HOURLY CALCULATED VALUES FOR THE SAMPLING PERIOD, AND (2) WILL BE BOTH TEMPORALLY AND SPACIALLY AVERAGED UPON COMPLETION OF THE PERMANENT MONITOR.

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

NAME **IVA - SEQUOYAH NUCLEAR**
 ADDRESS **24H - 401 BLDG**
CHATTANOUGA TN 37401

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

IN0026450
 PERMIT NUMBER

025 1
 DISCHARGE NUMBER

Form Approved
 OMB No. 2000-0015

F - FINAL LIMITS ✓
 025 ~~CLOSED-CYCLE~~ INTAKES
 Plant and ERCW

FACILITY
 LOCATION

ATTN: CHARLIE MCINTIRE

MONITORING PERIOD
 FROM YEAR 82 MO 08 DAY 01 TO YEAR 82 MO 08 DAY 28
 (12-21) (12-23) (12-25) (12-27) (12-29) (12-31)

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			
SULFATE, TOTAL ERCW (AS SO4) Intake 00945 1 4 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****		9.9	0	1/30	8-HR COMP
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		ONCE/ MONTH	COMP-B
COPPER, TOTAL (AS CU) ERCW 01042 1 4 Intake EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****		0.10	0	1/30	8-HR COMP
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		ONCE/ MONTH	COMP-B
IRON, TOTAL (AS FE) ERCW 01045 1 0 Intake EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****		0.78	0	1/30	8-HR COMP
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		ONCE/ MONTH	COMP-B
MANGANESE, TOTAL (AS MN) ERCW 01055 1 0 Intake EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****		0.08	0	1/30	8-HR COMP
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		ONCE/ MONTH	COMP-B
ZINC, TOTAL (AS ZN) ERCW 01092 1 0 Intake EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****		0.01	0	1/30	8-HR COMP
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		ONCE/ MONTH	COMP-B
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 2 Plant Intake EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	710	1000		*****	*****	*****	0	CONT	1 LOG
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	CONTINUOUS	RECORD
CHLORINE, TOTAL RESIDUAL Plant 50060 1 0 Intake EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	NOT CALORINATING					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		WEEKLY	GRAB

NAME, TITLE, PRINCIPAL EXECUTIVE OFFICER
M.T. Ashby, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)
 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 a maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
 DATE
 82 05 28

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

PLANT INTAKE/ERCW FLOW QUANTITY IS MAXIMUM VALUE DURING SAMPLING PERIOD. * NA SINCE DID NOT OPERATE IN CLOSED MODE.

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

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

Form Approved
OMB No. 2000-0015

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 248 - 401 BLDG
CHATTANOOGA TN 37403

PERMIT NUMBER TN0026450
DISCHARGE NUMBER 025

F - FINAL LIMITS
025 - CLOSED-CYCLE INTAKES

Plant and LNCU

FACILITY
LOCATION

MONITORING PERIOD
FROM YEAR 82 MO 08 DAY 01 TO YEAR 82 MO 08 DAY 28

NOTE: Read instructions before completing this form.

ATTN: CHARLIE MCINTIRE

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 (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SOLIDS, TOTAL	SAMPLE MEASUREMENT	*****	*****	*****	*****		38		0	1/30
DISSOLVED	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	4G/L		ONCE/MONTH
Flow	SAMPLE MEASUREMENT	52	52						0	CONT
ERCW Intake	PERMIT REQUIREMENT			MGD						CONTINUOUS
EFFLUENT GROSS VALUE	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
M.T. Eadsby, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)
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
CLM

TELEPHONE
FTS 858-7314
DATE
82 05 28

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
PLANT INTAKE/ERCW FLOW QUANTITY IS MAXIMUM VALUE DURING SAMPLING PERIOD.

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

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

Form Approved
OMB No. 2000-0015

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 248 - 401 BLDG
CHATTANOOGA TN 37401

PERMIT NUMBER TN0026450
DISCHARGE NUMBER 001 1

F - FINAL LIMITS
001 STP TO DIFFUSER POND

FACILITY
LOCATION

MONITORING PERIOD
FROM YEAR 82 MO 08 DAY 01 TO YEAR 82 MO 08 DAY 31
(12-21) (12-24) (12-25) (12-27) (12-29) (12-31)

NOTE: Read instructions before completing this form.

ATTN: CHARLIE CINTIRE

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			
OXYGEN, DISSOLVED (00)	SAMPLE MEASUREMENT	*****	*****	*****	2.0	3.0	*****	0	23/30	GR
00300 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	1.0 INST MN	*****	*****		DAILY	GRAB
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	1.16	1.65		*****	13	16	0	2/30	GR
00310 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	7.5 Daily HI 70 AV	Daily Mx 11 INST MX	LBS/DY	*****	Daily 30-40 HI 70 AV	Daily 45 INST MX		TWICE/MONTH	GRAB
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.9	*****	7.8	0	7/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	2.01	2.85		*****	23	28	0	2/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	Daily 7.5-10 HI 70 AV	Daily 11 INST MX	LBS/DY	*****	Daily 30-40 HI 70 AV	Daily 45 INST MX		TWICE/MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.1	<0.1	0	23/30	GR
00545 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Daily 1.0 INST MX		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.005	0.010		*****	*****	*****	0	23/30	WEIR
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	Daily .03 HI 70 AV	Daily ***** INST MX	MGD	*****	*****	*****		DAILY	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	0.50	0.70	1.3	0	23/30	GR
50060 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
M. T. El-Ashry, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)
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
FTS 858-7314 82 05 28
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 TVA - SEQUOYAH NUCLEAR
 ADDRESS 248 - 401 BLDG
CHATTANOOGA TN 37401

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

(2-16) TN0026450
 PERMIT NUMBER
 (17-19) 001 1
 DISCHARGE NUMBER

F - FINAL LIMITS
001 STP TO DIFFUSER POND

Form Approved
 OMB No. 2000-0015

FACILITY _____
 LOCATION _____

ATTN: CHARLIE MCINTIRE

MONITORING PERIOD
 YEAR MO DAY YEAR MO DAY
 FROM 82 08 01 TO 82 08 31
 (28-29) (22-23) (24-25) (26-27) (28-29) (30-31)

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			
COLIFORM, FECAL GENERAL 74055 1 U EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 84	700	#1	0	4/30 GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	100ML		TWICE/GRAB 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
M. T. El-Asary, Asst. MGR
OF NATURAL RESOURCES
ENVIRONMENT
 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
cm

TELEPHONE _____ DATE _____
 AREA CODE NUMBER YEAR MO DAY
FTS 858-7314 82 05 28

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

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

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

Form Approved
OMB No. 2000-0015

NAME IVA - SEQUOYAH NUCLEAR
ADDRESS 248 - 401 BLDG
CHATTANOOGA TN 37401

TN0026450

PERMIT NUMBER

002 1

DISCHARGE NUMBER

F - FINAL LIMITS
002 STR TO TENNESSEE RIVER

FACILITY
LOCATION

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	08	01	82	08	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
OXYGEN, DISSOLVED (001)	SAMPLE MEASUREMENT	*****	*****	*****	1.2	2.9	*****		0 2 ³ /30	GR	
00300 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	1.0 INST MN	*****	*****	MG/L		DAILY GRAB	
BOD, 5-DAY (20 NEG. C)	SAMPLE MEASUREMENT	1.70	2.69		*****	17	17		0 2 ³ /30	GR	
00310 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	Daily 3.85-0 HI 7D AV	Daily 5.6 INST MX	LBS/DY	*****	Daily 30-40 HI 7D AV	Daily 45 INST MX	MG/L		TWICE/GRAB MONTH	
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.8	*****	7.7		0 2 ³ /30	GR	
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEKLY GRAB	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	1.69	2.85		*****	15	18		0 2 ³ /30	GR	
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	Daily 3.85-0 HI 7D AV	Daily 5.6 INST MX	LBS/DY	*****	Daily 30-40 HI 7D AV	Daily 45 INST MX	MG/L		TWICE/GRAB MONTH	
SOLIDS, SETLEABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 0.1	< 0.1		0 2 ³ /30	GR	
00545 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Daily 1.0 INST MX	ML/L		DAILY GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.006	0.019		*****	*****	*****	*****	0 2 ³ /30	WEIR	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	Daily 0.05 HI 7D AV	Daily INST MX	MGD	*****	*****	*****	*****		DAILY	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	0.50	0.71	1.8		0 2 ³ /30	GR	
50060 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	***** 2.0	MG/L		DAILY GRAB	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)						TELEPHONE		DATE	
M. T. EL-ASARY, ASST. MGR. OF NATURAL RESOURCES (ENVIRONMENT)								SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		FTS AREA CODE	88-734
TYPED OR PRINTED											

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

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

NAME TVA - SEQUOYAH NUCLEAR

ADDRESS 243 - 401 BLDG

CHATTANOOGA

TN 37401

FACILITY

LOCATION

ATTN: CHARLIE MCINTIRE

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

TN0026450

PERMIT NUMBER

002 1

DISCHARGE NUMBER

F - FINAL LIMITS

002 STP TO TENNESEE RIVER

Form Approved
OMB No. 2000-0015

MONITORING PERIOD

FROM YEAR 82 MO 06 DAY 01 TO YEAR 82 MO 06 DAY 30
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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			
COLIFORM, FECAL GENERAL 74055 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	21549	> 2000	1	0 2/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	100ML	TWICE/GRAB 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									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

M.T. El-Ashry, Asst. M&R,
OF NATURAL RESOURCES
(ENVIRONMENT)

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

ETS
AREA
CODE

858-7314

82

05

28

YEAR

MO

DAY

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

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

NAME TVA - SEQUOYAH NUCLEAR

ADDRESS 248 - 401 BLDG

CHATTANOOGA

IN 37401

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

IN0026450

PERMIT NUMBER

003 1

DISCHARGE NUMBER

Form Approved

OMB No. 2000-0015

F - FINAL LIMITS

003 STP TO YARD DRAINAGE POND

FACILITY

LOCATION

ATTN: CHARLIE MCINTIRE

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	08	01	82	08	31
(20-21)	(12-21)	(24-25)	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
BOD, 5-DAY (20 LEG. C)	SAMPLE MEASUREMENT	1.24 *	1.52 *		*****	11	13	0	2/30	GR
00310 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	Daily 9.05-0 HI 70 AV	Daily 13.55-6 INST IX	LBS/DY	*****	Daily 30-40 HI 70 AV	Daily 45 INST MX		TWICE/MONTH	GRAB
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.6	*****	7.3	0	5/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	0.88 *	1.28 *		*****	7.5	11	0	2/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	Daily 9.05-0 HI 70 AV	Daily 13.55-6 INST MX	LBS/DY	*****	Daily 30-40 HI 70 AV	Daily 45 INST MX		TWICE/MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	2/30	GR
00545 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Daily 1.0 INST MX		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.014 *	0.014 *		*****	*****	*****	0	31/30	EST *
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	Daily 8.036 HI 70 AV	Daily ***** INST MX	MGD	*****	*****	*****	*****	DAILY	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	0.60	1.3	2.1	0	31/30	GR
50060 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		DAILY	GRAB
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 10	10	1	2/30	GR
74055 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	100ML	TWICE/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

M.T. ElAshry, Asst. MGR.
OF NATURAL RESOURCES
(ENVIRONMENT)

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

FTS
AREA
CODE

858-7314 82 05 28
NUMBER YEAR MO DAY

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

* FLOW VALUES WERE ESTIMATED THIS REPORTING PERIOD DUE TO INCOPERABLE FLOWMETER. FLOWMETER PART HAVE BEEN ORDERED.

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

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

Form Approved
OMB No. 2000-0015

NAME TENNESSEE VALLEY AUTHORITY
ADDRESS 803 LOCUST STREET BUILDING
KNOXVILLE, TN 37902

(2-16) TN0026450
PERMIT NUMBER
(17-19) 004
DISCHARGE NUMBER

CONSTRUCTION RUNOFF

FACILITY SEQUOYAH NUCLEAR PLANT
LOCATION SODDY, TN 37379

MONITORING PERIOD
FROM YEAR MO DAY TO YEAR MO DAY
(128-21) 82 (122-21) 03 (124-21) 01 (128-27) 82 (128-29) 04 (130-31) 01

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT		*	MGD						
	PERMIT REQUIREMENT	NA	NA						1/7	GR
SUSPENDED SOLIDS	SAMPLE MEASUREMENT				<1.0	<13	25	0	4/30	GR
	PERMIT REQUIREMENT				NA	NA	NA		1/7	GR
SETTLEABLE SOLIDS	SAMPLE MEASUREMENT				<0.10	<0.10	<0.10	0	4/30	GR
	PERMIT REQUIREMENT				NA	NA	NA		1/7	GR
TURBIDITY	SAMPLE MEASUREMENT				1.6	16	38	0	4/30	GR
	PERMIT REQUIREMENT				NA	NA	NA		1/7	GR
pH	SAMPLE MEASUREMENT				8.1		8.5	0	4/30	GR
	PERMIT REQUIREMENT				6.0		9.0		1/7	GR
	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 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			
M. T. EL-ASHRY, ASST. MGR. OF NATURAL RESOURCES (ENVIRONMENT)			858-7314	82	05	28	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

*NO REPRESENTATIVE FLOW MONITORING.
THERE WAS NO DISCHARGE ONE WEEK THIS REPORTING PERIOD.

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

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

Form Approved
OMB No. 2000-0015

NAME TENNESSEE VALLEY AUTHORITY
ADDRESS 803 LOCUST STREET BUILDING
KNOXVILLE, TN 37902

(2-16)
TN0026450
PERMIT NUMBER

(17-19)
005
DISCHARGE NUMBER

CONSTRUCTION RUNOFF

FACILITY SEQUOYAH NUCLEAR PLANT
LOCATION SODDY, TN 37379

MONITORING PERIOD
FROM YEAR MO DAY TO YEAR MO DAY
(10-21) 82 (12-21) 03 (12-25) 01 (12-27) 82 (12-29) 04 (12-31) 01

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 (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SUSPENDED SOLIDS	SAMPLE MEASUREMENT	NO DISCHARGE						MG/L		
	PERMIT REQUIREMENT				NA	NA	NA		1/7	GR
SETTLABLE SOLIDS	SAMPLE MEASUREMENT							ML/L		
	PERMIT REQUIREMENT				NA	NA	NA		1/7	GR
TURBIDITY	SAMPLE MEASUREMENT							JTU		
	PERMIT REQUIREMENT				NA	NA	NA		1/7	GR
pH	SAMPLE MEASUREMENT							UNITS		
	PERMIT REQUIREMENT				6.0		9.0		1/7	GR
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
M. T. EL-ASHRY, ASST. MGR.
OF NATURAL RESOURCES
(ENVIRONMENT)
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
FTS 858-7314 82 05 28
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)

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

Form Approved
OMB No. 2000-0015

NAME TENNESSEE VALLEY AUTHORITY
ADDRESS 803 LOCUST STREET BUILDING
KNOXVILLE, TN 37902
FACILITY SEQUOYAH NUCLEAR PLANT
LOCATION SODDY, TN 37379

(12-16) IN0026450
PERMIT NUMBER
(17-19) 006
DISCHARGE NUMBER

CONSTRUCTION RUNOFF

MONITORING PERIOD
FROM YEAR 82 MO 03 DAY 01 TO YEAR 82 MO 04 DAY 01
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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 (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SUSPENDED SOLIDS	SAMPLE MEASUREMENT	NO DISCHARGE								
	PERMIT REQUIREMENT				NA	NA	NA		1/7	GR
SETTLABLE SOLIDS	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT				NA	NA	NA		1/7	GR
TURBIDITY	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT				NA	NA	NA		1/7	GR
pH	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT				6.0		9.0		1/7	GR
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
M. T. EL-ASHRY, ASST. MGR.
OF NATURAL RESOURCES
(ENVIRONMENT)
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
FTS 858-7314 82 05 28
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)

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

Form Approved
OMB No. 2000-0015

NAME **TVA - SEQUOYAH NUCLEAR**
ADDRESS **248 - 401 BLDG**
CHATTANOOGA TN 37401

IN0026450
PERMIT NUMBER

024 1
DISCHARGE NUMBER

F - FINAL LIMITS
024 DIFFUSER GATE

FACILITY
LOCATION

MONITORING PERIOD
FROM YEAR 82 MO 05 DAY 01 TO YEAR 82 MO 05 DAY 28
(12-21) (12-21) (12-21) (12-21) (12-21) (12-21)

NOTE: Read instructions before completing this form.

ATTN: CHARLIE MCINTIRE

PARAMETER (32-37)		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			
OIL AND GREASE (SOXHLET EXTR.) TOT. 00550 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****		<5.0	0	1/30	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	MG/L	ONCE/ MONTH	GRAB
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****		0.51	0	1/30	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	MG/L	ONCE/ MONTH	GRAB
SODIUM, TOTAL (AS NA) 00929 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****		7.9	0	1/30	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	MG/L	ONCE/ MONTH	GRAB
CHLORIDE (AS CL) 00940 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****		1.5	0	1/30	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	MG/L	ONCE/ MONTH	GRAB
SULFATE, TOTAL (AS SO4) 00945 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****		10	0	1/30	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	MG/L	ONCE/ MONTH	GRAB
COPPER, TOTAL (AS CU) 01042 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****		0.02	0	1/30	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	MG/L	ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE) 01045 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****		0.50	0	1/30	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	MG/L	ONCE/ MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

M. T. El-Ashry, Asst. MGR
OF NATURAL RESOURCES
(ENVIRONMENT)

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

FTS 858-7314 82 05 28
AREA CODE NUMBER YEAR MO DAY

DO NOT EXPLAIN OPEN, P, HEDPER & V - CLOSED. SEE PERMIT FOR RECEIVING WATER TEMP REQS AND FOR CHLORINATION ANALYSIS & REQS.