



March 19, 1984

Mr. Peter T. McGarry, Chief
Florida/Mississippi Unit
Facilities Performance Branch
Water Management Division
Environmental Protection Agency
345 Courtland Street
Atlanta, Ga 30365

Re: Notice of Violation
NPDES Permit No. FL0000159

Dear Mr. McGarry:

Please be advised that our failure to report heavy metals concentrations for discharge 009 (south ash pond) for October 1983 was the result of inadequate sampling procedures. In addition, we have discovered that a sample was not taken for the north ash pond which discharged one day in January 1984. As you are aware the south ash pond had just been placed in operation and October was the first month of discharge. Our sampling procedures called for a monthly metals sample which is normally taken during the first week of each month. However, on October 5, 1983, when the sample was taken only the north ash pond was discharging. No subsequent sample from the south pond was taken since the procedure did not include a note to get a sample from both ponds if each discharges during the month. For the January incident the sample was taken after the single day of discharge from the north pond on January 1, 1984.

To prevent such incidents in the future we have modified our sampling instructions. We are adding a note in our environmental procedures manual which will direct the technician to take separate samples for heavy metals during any month in which we experience dual ash pond operation.

Should you have any questions concerning this matter, please advise.

A handwritten signature in dark ink, appearing to read "J. A. Hancock".

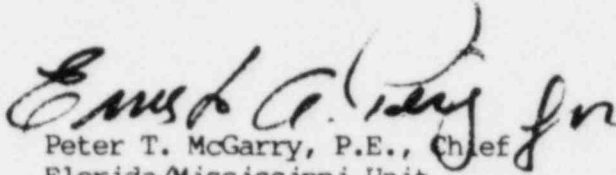
J. A. Hancock
Vice President, Fossil Operations

Hancock (F01)C5-1

cc: Mrs. V. J. Tschinkel, DER
Dr. Richard D. Garrity, DER

If you have specific questions as to the requirements of your permit,
please contact Mr. Tom Grubbs at 404/881-7428.

Sincerely yours,



Peter T. McGarry, P.E., Chief
Florida/Mississippi Unit
Industrial Operations Section
Facilities Performance Branch

cc: Mrs. Victoria J. Tschinkel, FDER



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

NAME

ADDRESS

FACILITY

LOCATION

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

(2-16)

(17-19)

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

YEAR MO DAY

YEAR MO DAY

FROM

TO

(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) (46-53) (54-61)				NO. EX (52-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Consecutive hours that condenser cooling water exceeds 39.4°C (103°F)	SAMPLE MEASUREMENT	* * *		hrs							
	PERMIT REQUIREMENT	* * *	3								
Consecutive hours that temperature rise (ΔT) across Unit 3 condenser exceeds 9.7°C (17.5°F)	SAMPLE MEASUREMENT	* * *		hrs							
	PERMIT REQUIREMENT	* * *	3								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE	DATE			
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

Form Approved
OMB No. 2040-0004
Expires 2-29-84