

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

NAME QUAKES LIGHT COMPANY
ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2441 NEW BEAVER AVENUE
PITTSBURGH PA 15203
FACILITY _____
LOCATION _____

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)	(17-19)
PA0025613	001 A
PERMIT NUMBER	DISCHARGE NUMBER

F - FINAL LIMITS

001 A COOLING TOWER BLOWDOWN

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

5207

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
FROM 84	02	01	TO 84	02	29
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (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 CROSS VALU	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	81		CONTIN- UOUS RECORD
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	DEG.F		CONTIN- UOUS RECORD
PH 00400 1 0 EFFLUENT CROSS VALU	SAMPLE MEASUREMENT	*****	*****	*****	7.49	7.81		0	CONTIN- UOUS RECORD	
	PERMIT REQUIREMENT	*****	*****	*****	MINIMUM	MAXIMUM		SU		CONTIN- UOUS RECORD
OIL AND GREASE FACON EXTRA-GRAV MET 00056 1 0 EFFLUENT CROSS VALU	SAMPLE MEASUREMENT	*****	*****	*****	*****	<1	<1	0	ONCS/ MONTH GRAB	
	PERMIT REQUIREMENT	*****	*****	*****	*****	10	MG/L		ONCS/ MONTH GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 00050 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	22.59	29.67	MGD	*****	*****	*****	*****	CONTIN- UOUS RECORD	
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****	CONTIN- UOUS RECORD	
CHLORINE, FREE AVAILABLE 00064 1 0 EFFLUENT CROSS VALU	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.10	0.48	0	CONTIN- UOUS RECORD	
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.2	0.5	MG/L		CONTIN- UOUS RECORD
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

8404020066 840229
PDR ADDCK 05000334
R PDR

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		
C. Feitknecht, Gen. Supt. Fossil Power Generation		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO
TYPED OR PRINTED		412	393-4343	84	03	23

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

SEE PAGE 2 OF PERMIT FOR INFORMATION REGARDING TEMPERATURE. LOCATION 0 IS THE COOLING TOWER BASIN.

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

NAME DUPONT LIGHT COMPANY
ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2861 NEW BEAVER AVENUE
PITTSBURGH PA 15233
FACILITY _____
LOCATION _____

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)	(17-19)
PA0025815	101 A
PERMIT NUMBER	DISCHARGE NUMBER

F - FINAL LIMITS
101 A CHEMICAL WASTE SUMP

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

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
FROM 84	02	01	TO 84	02	29
(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			
PH 00400 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	6.33	*****	8.36	0	4/ MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	5.0 MINIMUM	*****	9.0 MAXIMUM	50	TWICE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	1.10	*****	*****	6	7	0	TWICE/ MONTH	GRAB
	PERMIT REQUIREMENT	3.8 DAILY AV	43 DAILY MX	LBS/DY	*****	***** DAILY AV	***** DAILY MX	MG/L	TWICE/ MONTH	COMPS 4
OIL AND GREASE FREDN EXTR-GRAV MET 00556 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	0.27	0.38	*****	*****	3	4	0	TWICE/ MONTH	GRAB
	PERMIT REQUIREMENT	1.9 DAILY AV	9.0 DAILY MX	LBS/DY	*****	***** DAILY AV	***** DAILY MX	MG/L	TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLAN 00090 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	0.009	0.020	*****	*****	*****	*****	*****	TWICE/ MONTH	CALC
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	TWICE/ MONTH	CALC 10
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. Feitknecht, Gen. Supt.
Fossil Power Generation

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

412 393-4343

84 03 23

AREA CODE

NUMBER

YEAR

MO

DAY

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

SAMPLES TAKEN AT LOCATION OF CHEM WASTE SUMP PRIOR TO COMBINATION WITH OTHER EFFLUENT.
SEE P 23 AND 24, SPECIAL CONDITIONS.

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

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

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

NAME DUQUESNE LIGHT COMPANY
ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 VAN BEAVER AVENUE
PITTSBURGH PA 15233

PERMIT NUMBER

PERMIT NUMBER

DISCHARGE NUMBER

DISCHARGE NUMBER

I - INITIAL LIMITS
102 A AUX BOILER BLOWDOWN

FACILITY
LOCATION

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

No Discharge 102

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			
COPPER, TOTAL (AS CU) 01042 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	1	MG/L	TWICE/GRAB MONTH
IRON, TOTAL (AS FE) 01045 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	1	MG/L	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

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

C. Feitknecht, Gen. Supt.
Fossil Power Generation

TYPED OR PRINTED

412 393-4343

AREA
CODE

NUMBER

84 03 23

YEAR

MO

DAY

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

SAMPLES TAKEN AT CUL OF BOILER BLOWDOWN PRIOR TO COMBINATION WITH OTHER EFFLUENT.
SEE P. 23 AND 24, SPECIAL CONDITIONS.

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

NAME BEAVER VALLEY ATOMIC POWER ST.
ADDRESS 2441 BEAVER AVENUE
PITTSBURGH PA 15222

FACILITY BEAVER VALLEY ATOMIC POWER ST.

LOCATION BEAVER VALLEY ATOMIC POWER ST.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PERMIT NUMBER
PA0025615

DISCHARGE NUMBER
103 A

I - INITIAL LIMITS
103 A SOFTENER REGENERATES

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

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
84	02	01	84	02	29
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

FROM TO

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			
SOLIDS, TOTAL SUSPENDED 00530 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.40	0.50		0	TWICE/ MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100 DAILY MX	MG/L		TWICE/ MONTH	GRAB
OIL AND GREASE FRESH EXTRA-GRAV MET 00556 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****	2	2		0	TWICE/ MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	15 DAILY AV	20 DAILY MX	MG/L		TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	0.020	0.020		*****	*****	*****	*****		TWICE/ MONTH	ESTIM
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		TWICE/ MONTH	ESTIM
	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.)

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

C. Feirknecht, Gen. Supt.
Fossil Power Generation

TYPED OR PRINTED

412 393-4343 84 03 23

AREA CODE NUMBER YEAR MO DAY

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

SAMPLES TAKEN AT LOC. 1, SOFTENER REGENERATES PRIOR TO COMBINATION WITH OTHER EFFLUENT.
SEE P 23 AND 24, SPECIAL CONDITIONS.

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

NAME QUAKERTOWN LIGHT COMPANY
ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2451 NEW BEAVER AVENUE
PITTSBURGH PA 15203
FACILITY _____
LOCATION _____

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

(2-16)	(17-19)
PA0025615	002 A
PERMIT NUMBER	DISCHARGE NUMBER

F - FINAL LIMITS
002 A SCREEN BACKWASH, ETC

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

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
84	02	01	TO	84	02	29
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)				FREQUENCY OF ANALYSIS (62-63) (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.86	*****	6.86		ONCE/ MONTH	GRAB
00490 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	SU	ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	<0.09	0.09		*****	*****	*****	*****	ONCE/ MONTH	CALC
00050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGC	*****	*****	*****	*****	ONCE/ MONTH	CALC
	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		
<u>C. Feitknecht, Gen. Supt.</u> <u>Fossil Power Generation</u>					
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	412 393-4343	84	03	23
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)	AREA CODE	NUMBER	YEAR	MO	DAY

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

NAME QUAKERTON LIGHT COMPANY
ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15203

FACILITY _____

LOCATION _____

ATTN: C. FAITKNECHT, GEN. SUPT

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

(2-16)
PA0005613
PERMIT NUMBER

(17-19)
201 A
DISCHARGE NUMBER

I - INITIAL LIMITS
201 A LOW VOLUME WASTE STREAM

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

No Discharge 201

MONITORING PERIOD
FROM YEAR MO DAY TO YEAR MO DAY
(10-21) (12-21) (12-25) (12-27) (12-29) (10-31)
84 02 01 TO 84 02 29

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			(46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS					
PH	SAMPLE MEASUREMENT	*****	*****	*****		*****							
00400 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	5.0 MINIMUM	*****	9.0 MAXIMUM	SU			ONCE	GRAB	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****								
00930 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100 DAILY MX	MG/L			ONCE	GRAB	
OIL AND GREASE FREON EXT-P-GRAY MET	SAMPLE MEASUREMENT	*****	*****	*****	*****								
00856 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	15 DAILY AV	20 DAILY MX	MG/L			ONCE	GRAB	
FLOW, IN CONDUIT OF THRU TREATMENT PLANT	SAMPLE MEASUREMENT				*****	*****	*****	*****					
50050 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****			ONCE	ESTIMA	
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE	DATE	
C. Faitknecht, Gen. Supt. Fossil Power Generation TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	412 393-4343	84 03 23

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
SAMPLES TAKEN AT 100 GPM LOW VOLUME WASTE STREAMS PRIOR TO COMBINATION WITH OTHER EFFLUENT.
SEE P 23 AND 24, SPECIAL CONDITIONS.

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

NAME DUCURIE LIGHT COMPANY
ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2641 BEAVER AVENUE
PITTSBURGH, PA 15233

FACILITY _____
LOCATION _____

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PAD025615

003 A

PERMIT NUMBER

DISCHARGE NUMBER

F - FINAL LIMITS

003 A SANITARY WASTE

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

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)
84 02 01 TO 84 02 29

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(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			
PM 00400 1 0 EFFLUENT CROSS VALU	SAMPLE MEASUREMENT	*****	*****	*****	7.40	*****	7.40		ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	SU	ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLAN 50050 1 0 EFFLUENT CROSS VALU	SAMPLE MEASUREMENT	0.04	0.08		*****	*****	*****		ONCE/ MONTH	CALC
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****		ONCE/ MONTH	CALC
	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 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 3 months and 5 years.)	TELEPHONE	DATE		
C. Feitknecht, Gen. Supt. Fossil Power Generation TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER

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

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

NAME DUOLINE LIGHT COMPANY
ADDRESS RAVEY VALLEY ATOMIC POWER ST.
1861 W. RAVEY AVENUE
PITTSBURGH PA 15213
FACILITY _____
LOCATION _____
ATOMIC C. PITTANECHT, GEN. SUPT

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

(2-16) PA0025815
PERMIT NUMBER
(17-19) 301 4
DISCHARGE NUMBER

F - FINAL LIMITS
301 4 CLARIFIER BLOWDOWN

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

MONITORING PERIOD
FROM 84 02 01 TO 84 02 29
(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 (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.67	*****	8.90	0	TWICE/MONTH	GRAB
00400 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	MINIMUM	*****	MAXIMUM		TWICE/GRAB MONTH	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	3.3	8.1		*****	72	80	0	8EE/MONTH	COMP.
00530 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	2.8 DAILY AV	14.3 DAILY MX	LBS/DY	*****	*****	*****	MG/L	TWICE/COMPL 4 MONTH	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.018	0.035		*****	*****	*****	*****	28/MONTH	MEAS.
00050 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	TWICE/MEAS 4 MONTH	
	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	
<u>C. Feitknecht, Gen. Supt.</u> <u>Fossil Power Generation</u> TYPED OR PRINTED		<u>412 393-4343</u>		<u>84 03 23</u>	
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO DAY

SEE P 23 AND 24, SPECIAL CONDITIONS.

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

NAME DUQUESNE LIGHT COMPANY
 ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2801 NEW BEAVER AVENUE
PITTSBURGH PA 15233

FACILITY _____
 LOCATION _____

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

(2-16) PA0025615
 PERMIT NUMBER
 (17-19) 302 4
 DISCHARGE NUMBER

F - FINAL LIMITS
 302 A SEWAGE TREATMENT SYSTEM

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

MONITORING PERIOD
 YEAR MO DAY YEAR MO DAY
 FROM 84 02 01 TO 84 03 29
 (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 (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
BOD, 5-DAY (20-25, C) 00310 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****	5	24	0	FIVE/ MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	300A AV	70A AV		TWICE/COMP-8	MONTH
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.00	6.90		0	28/ MONTH	GRAB
00400 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	MINIMUM	MAXIMUM			TWICE/GRAB	MONTH
SOLIDS, TOTAL SUSPENDED 00530 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****	3	44	0	28/ MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	300A AV	70A AV		TWICE/COMP-9	MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 00650 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	0.013	MGD	*****	*****	*****		ONCE/ MONTH	EST.
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		TWICE/MEASRD	MONTH
COLIFORM, FECAL GENERAL 74055 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****	29	129	0	FIVE/ MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	200	400		TWICE/GRAB	MONTH
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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

SIGNATURE OF PRINCIPAL EXECUTIVE
 OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

C. Peitknecht, Gen. Supt.
 Fossil Power Generation

TYPED OR PRINTED

AREA CODE

NUMBER

YEAR

MO

DAY

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

SAMPLES TAKEN AT LUC 0, SEWAGE TREATMENT SYSTEM PRIOR TO COMBINATION WITH OTHER EFFLUENT.
 SEE P 23 AND 24, SPECIAL CONDITIONS.

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

NAME QUAKAKE LIGHT COMPANY
ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2461 NEW BEAVER AVENUE
PITTSBURGH PA 15203
FACILITY _____
LOCATION _____

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

(2-16) PA0025619
PERMIT NUMBER
(17-19) 303 A
DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004
Expires 2-29-84
INITIAL LIMITS
303 A NONRAD SYSTEM LEAKAGE

MONITORING PERIOD
FROM YEAR 84 MO 03 DAY 01 TO YEAR 84 MO 03 DAY 29
(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			
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.17	*****	7.17		0	ONCE/ MONTH	GRAB
00400 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	MINIMUM	*****	MAXIMUM	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****	01	31		0	TWICE/ MONTH	GRAB
00530 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	300A AV	100	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE REDUCED GRAV MET	SAMPLE MEASUREMENT	*****	*****	*****	*****	6	6		0	ONCE/ MONTH	GRAB
00556 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	15	20	MG/L		ONCE/ MONTH	GRAB
FLOW IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.07	0.034		*****	*****	*****	*****		ONCE/ MONTH	EST.
00650 3 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		ONCE/ MONTH	ESTIMATE
	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	
C. Feitknecht, Gen. Supt. Fossil Power Generation		412 393-4343		8 4 03 23	
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)
SEE P 23 AND 24, SPECIAL CONDITIONS.

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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

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

NAME DUQUESNE LIGHT COMPANY
ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2641 BEAVER AVENUE
PITTSBURGH PA 15203
FACILITY _____
LOCATION _____

PA0025619
PERMIT NUMBER

004 A
DISCHARGE NUMBER

P - FINAL LIMITS
004 A COOLING TOWER OVERFLOW

MONITORING PERIOD
FROM YEAR 84 MO 02 DAY 01 TO YEAR 84 MO 03 DAY 29
(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 (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.85	*****	7.85		ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	50	ONCE/MONTH	GRAB
EFFLUENT GROSS VALUE FLOW IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	<0.001	<0.001		*****	*****	*****	*****	ONCE/MONTH	EST.
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	ONCE/MONTH	EST.
	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 O. Faltknecht, Gen. Supt. Fossil Power Generation 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 Leon L. Stahl	TELEPHONE 612 393-4343		DATE 84 03 23		
			AREA CODE	NUMBER	YEAR	MO	DAY

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

* SEE P 23 AND 24, SPECIAL CONDITIONS.

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

NAME QUICKEN LIGHT COMPANY
 ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15222
 FACILITY _____
 LOCATION _____

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

(2-16) PA0023615 (17-19) 401 A
 PERMIT NUMBER DISCHARGE NUMBER

I - INITIAL LIMITS
 401 A COOLING TOWER PUMPHOUSE

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

No Discharge 401

MONITORING PERIOD
 YEAR MO DAY YEAR MO DAY
 FROM 84 02 01 TO 84 02 29
 (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 (46-52)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	MINIMUM	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****		*****	*****						
	PERMIT REQUIREMENT	*****	*****	*****	MINIMUM	*****	*****	9.0 SU				ONCE A MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****						
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	30 100 MG/L				ONCE A MONTH	GRAB
OIL AND GREASE FREDN EXTR-GRAV MET	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****						
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	15 20 MG/L				ONCE A MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****						
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****					ONCE A MONTH	ESTIMATE
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER C. Feitknecht, Gen. Supt. Fossil Power Generation 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 <i>Leonard Steel</i>	TELEPHONE		DATE		
			412	393-4343	84	03	23

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

COOLING TOWER PUMPHOUSE LOW VOLUME, PRIOR TO COME WITH OTHER EFFLUENT.
 SEE P 23 AND 24, SPECIAL CONDITIONS.

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

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

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

NAME DISCOURS LIGHT COMPANY
ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2241 HWY BEAVER AVENUE
PITTSBURGH PA 15233

PA0029615
PERMIT NUMBER

013 8
DISCHARGE NUMBER

F - FINAL LIMITS

OUTFALL 013-001. TO APRIL

FACILITY
LOCATION

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
84	02	01	84	03	29
(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 (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
800, 3-DAY (20 DEC. 83)	SAMPLE MEASUREMENT	7.9	7.9		*****	26	26	0	1/ MONTH	GRAB
00310 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	10.8 300A AVG	21.5 DAILY MX	LBS/DY	*****	30 300A AVG	60 DAILY MX		ONCE A MONTH	GRAB
PM	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.50	0	1/ MONTH	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	5.0 MINIMUM	*****	9.0 MAXIMUM		ONCE A MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	14.2	14.2		*****	46	46	0	1/ MONTH	GRAB
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	10.8 300A AVG	21.5 DAILY MX	LBS/DY	*****	30 300A AVG	60 DAILY MX		ONCE A MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.037	0.037		*****	*****	*****	0	1/ MONTH	MEAS.
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.043 AVERAGE	*****	MGD	*****	*****	*****		ONCE A MONTH	MEAS.
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	<1	*****	0	1/ MONTH	GRAB
74035 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	300A GAO	70A GFO		ONCE A MONTH	GRAB
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
G. Feitknecht, Gen. Supt.
Fossil Power Generation
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE
412 393-4343
DATE
84 03 23

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

THERE SHALL BE NO DISCHARGE OF FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.



One Oxford Centre
301 Grant Street
Pittsburgh, PA 15279

(412) 393-6000

March 23, 1984

Department of Environmental Resources
Bureau of Water Quality Management
600 Highland Building
121 S. Highland Avenue
Pittsburgh, PA 15206-3938

NPDES Monthly Reports

Gentlemen:

The subject reports for Duquesne Light Company for February, 1984, are submitted for your consideration. A list of the permit numbers follows:

PA 0001571	Elrama Power Station
PA 0001589	Shippingport Atomic Power Station
PA 0001619	Phillips Power Station
PA 0001627	Cheswick Power Station
PA 0025615	Beaver Valley Atomic Power Station
PA 0031933	Brunot Island Power Station

Yearly capacity factors for certain facilities, as required by Special Condition No. 3, are submitted for the year 1983.

PA 0001571	Elrama Power Station	35.82%
PA 0001589	Shippingport Atomic Power Station	N/A
PA 0001619	Phillips Power Station	15.55%
PA 0001627	Cheswick Power Station	65.75%
PA 0025615	Beaver Valley Atomic Power Station	65.91%
PA 0031933	Brunot Island Power Station	-0.67%

Very truly yours,

C. Feitknecht
General Superintendent
Fossil Power Generation

Attachments



One Oxford Centre
301 Grant Street
Pittsburgh, PA 15279

(412) 393-6000

March 23, 1984

Director Of Nuclear Reactor Regulations
Attention: Mr. Robert W. Reid, Chief
Operating Reactor Branch, No. 4
U. S. Nuclear Regulatory Commission
Washington, D. C. 20555

NPDES Monthly Reports

Subject: BVPS No. 1
Docket No. 50-334
License DPR-66

Dear Mr. Reid:

Enclosed is a copy of the subject report as submitted to the
Pennsylvania Department of Environmental Resources.

Very truly yours,

C. Poitknecht
General Superintendent
Fossil Power Generation

Enclosure

IE25
1/1