



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

Telephone (412) 393-6000

June 25, 1992

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

NPDES Monthly Reports, EPA Permit No. PA0025315 & PA001589

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

Dear Sir:

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

Very truly yours,

T. P. Noonan
General Manager
Nuclear Operations Unit

DNH/ijj

020068

9207020185 920531
PDR ADOCK 05000334
R PDR

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P728696519
LEAS
111*



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

Telephone (412) 393-6000

June 25, 1992

U.S. Environmental Protection Agency
Region III, Pennsylvania Section (3WM52)
Water Permits Branch
Water Management Division
841 Chestnut Street
Philadelphia, PA 19107

NPDES Monthly Reports, EPA Permit Number PA0025615 & PA0001589

Gentlemen:

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

Very truly yours,

T. P. Noonan
General Manager
Nuclear Operations Unit

DNH/ijj



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

Telephone (412) 393-6000

June 25, 1992

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

Gentlemen:

NPDES Monthly Reports for Duquesne Light Company, Beaver Valley Power Station and Shippingport Atomic Power Plant for May 1992 are submitted for your consideration.

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

Very truly yours,

T. P. Noonan
General Manager
Nuclear Operations

DNH/ijj

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

NAME BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT

PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

PERMIT NUMBER

101 A

DISCHARGE NUMBER

MAJOR

(SUBR 05)

F - FINAL

101 CHEMICAL WASTE TREATMENT

Form Approved

OMB No. 2040-0004

Approval expires 6-30-91.

MONITORING PERIOD

| FROM | YEAR | MO | DAY | TO | YEAR | MO | DAY |
|------|---------|---------|---------|----|---------|---------|---------|
| | 92 | 05 | 01 | | 92 | 05 | 31 |
| | (20-21) | (22-23) | (24-25) | | (26-27) | (28-29) | (30-31) |

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | X | QUANTITY OR LOADING (46-53) | | | QUALITY OR CONCENTRATION (54-61) | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-65) | SAMPLE TYPE (69-70) |
|--|--------------------|--------------------------------|--------------------|------------------|-------------------------------------|--------------------|--------------------|-------------------|----------------------------------|------------------------|
| | | AVERAGE (46-53) | MAXIMUM (54-55) | UNITS (56-57) | MINIMUM (58-59) | AVERAGE (60-61) | MAXIMUM (62-63) | | | |
| PH | SAMPLE MEASUREMENT | ***** | ***** | () | 6.31 | ***** | 7.86 | (12) | 0 | 1/w G |
| 00400 1 0 0 | PERMIT REQUIREMENT | ***** | ***** | ***** | 6.0 | ***** | 9.0 | | | WEEKLYGRAB |
| EFFLUENT GROSS VALUE | | | | | MINIMUM | | MAXIMUM | SU | | |
| SOLIDS, TOTAL SUSPENDED | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 10.00 | 23.50 | (19) | 0 | 1/w 2HC |
| 00530 1 0 0 | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | 30 | 100 | | | WEEKLYCOMP-2 |
| EFFLUENT GROSS VALUE | | | | | | MNTH AVG | DLY MAX | MG/L | | |
| OIL AND GREASE | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 5.85 | 8.41 | (19) | 0 | 1/w G |
| FREON EXTP-GRAY METH | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | 15 | 20 | | | WEEKLYGRAB |
| 00556 1 0 0 | | | | | | MNTH AVG | DLY MAX | MG/L | | |
| EFFLUENT GROSS VALUE | | | | | | | | | | |
| NITROGEN, AMMONIA TOTAL (AS N) | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | | | (19) | | |
| 00610 1 0 1 | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | REPORT | REPORT | | | WEEKLYGRAB |
| EFFLUENT GROSS VALUE | | | | | | MNTH AVG | DLY MAX | MG/L | | |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT | SAMPLE MEASUREMENT | 0.008 | 0.022 | (03) | ***** | ***** | ***** | () | 0 | DAILY CONT |
| 50050 1 0 0 | PERMIT REQUIREMENT | REPORT | REPORT | | ***** | ***** | ***** | ***** | | DAILY CONTIN |
| EFFLUENT GROSS VALUE | | MNTH AVG | DLY MAX | MGD | | | | | | |
| HYDRAZINE | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | | | (19) | | |
| 81313 1 0 1 | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | REPORT | REPORT | | | WEEKLYGRAB |
| EFFLUENT GROSS VALUE | | | | | | MNTH AVG | DLY MAX | MG/L | | |
| | 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 1101 AND 1111-1113. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years. | TELEPHONE | DATE | | | |
| A. M. Dulick Chemistry Manager | | 412-393-5113 | 92 | 06 | 25 | |
| 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)

HYDRAZINE AND AMMONIA MONITORING TO APPLY DURING PERIODS OF WET LAYUP.

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

NAME BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT

PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

201 A

PERMIT NUMBER

DISCHARGE NUMBER

MAJOR

(SUBP 05)

F - FINAL

201 SOFTENER REGENERANTS

Form Approved.

OMB No. 2040-0004.

Approval expires 6-30-91.

MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | | (3 Card Only) QUANTITY OR LOADING (46-53) | | | (4 Card Only) QUALITY OR CONCENTRATION (54-61) | | | UNITS | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-68) | SAMPLE TYPE (69-70) |
|---|--------------------|---|-------------------|-------|--|-----------------|----------------|-------|----------------------|--|---------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | | | | |
| PH | SAMPLE MEASUREMENT | ***** | ***** | () | 7.16 | ***** | 7.16 | (12) | 0 | 1/m | G |
| 00400 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | 6.0 MINIMUM | ***** | 9.0 MAXIMUM | SU | | TWICE/GRAB MONTH | |
| SOLIDS, TOTAL SUSPENDED | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 4.00 | 4.00 | (19) | 0 | 1/m | G |
| 00530 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 30 MONTH AVG | 100 DLY MAX | MG/L | | TWICE/GRAB MONTH | |
| OIL AND GREASE FREON EXTR-GRAV METH | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 5.00 | 5.00 | (19) | 0 | 1/m | G |
| 00556 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 15 MONTH AVG | 20 DLY MAX | MG/L | | TWICE/GRAB MONTH | |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT | SAMPLE MEASUREMENT | 00010 0.020 | 0.020 | (03) | ***** | ***** | ***** | () | 0 | 1/m | Est |
| 50050 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | REPORT MONTH AVG | REPORT DLY MAX | MGD | ***** | ***** | ***** | **** | | TWICE/ESTIMA MONTH | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
Chemistry Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1332. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 3 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

412 393-5113 92 06 25
AREA CODE NUMBER YEAR MO DAY

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

Only one softener regeneration was performed in May 1992.

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

NAME BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT

PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

301 A

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

| FROM | YEAR | MO | DAY | TO | YEAR | MO | DAY |
|------|---------|---------|---------|----|---------|---------|---------|
| | 92 | 05 | 01 | | 92 | 05 | 31 |
| | (20-21) | (22-23) | (24-25) | | (26-27) | (28-29) | (30-31) |

MAJOR
(SUBP 05)
F - FINAL
UNIT 2 AUX BOILER BLOWDOWN

Form Approved.
OMB No. 2040-0004.
Approval expires 6-30-91.

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | | (1 Card Only) QUANTITY OR LOADING (46-51) | | | (4 Card Only) QUALITY OR CONCENTRATION (54-61) | | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-65) | SAMPLE TYPE (69-70) |
|--|-----------------------|---|-------------------|-------|--|---------------|----------------|-------|----------------------|--|---------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | UNITS | | | |
| SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 4.00 | 4.00 | (19) | 0 | 2/m | G |
| | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 30 MTH AVG | 100 DLY MAX | MG/L | | TWICE/GRAB MONTH | |
| OIL AND GREASE FROM EXT-GRV METH 00556 1 0 0 EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 5.00 | 5.00 | (19) | 0 | 2/m | G |
| | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 15 MTH AVG | 20 DLY MAX | MG/L | | TWICE/GRAB MONTH | |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | 0.001 | 0.001 | (03) | ***** | ***** | ***** | () | 0 | 1/w | Est |
| | PERMIT REQUIREMENT | REPORT MTH AVG | REPORT DLY MAX | MGD | ***** | ***** | ***** | **** | | WEEKLY ESTIMA | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
Chemistry Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 16 U.S.C. § 1361 AND 33 U.S.C. § 1319. Penalties under these statutes may include fines up to \$100,000 and/or maximum imprisonment of between 6 months and 5 years.

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

412
AREA
CODE

393-5113
NUMBER

92 06 25
YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME BEAVER VALLEY POWER STATION
ADDRESS P.O. BOX 1
 ATTN: ANDREW DULICK
 SHIPPINGPORT PA 15077
FACILITY
LOCATION
 ATTN: ANDREW DULICK

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

PA0025615
 PERMIT NUMBER

401 A
 DISCHARGE NUMBER

MAJOR
 (SUBR 05)
 F - FINAL
 CHEM. FEED AREA OF AUX BOILERS

Form Approved.
 OMB No. 2040-0004.
 Approval expires 6-30-91.

MONITORING PERIOD
 FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31
 (12/19) (17/19) (20/21) (22/23) (24/25) (26/27) (28/29) (30/31)

*** NO DISCHARGE [] ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | | (1 Card Only) QUANTITY OR LOADING (45-53) | | | (4 Card Only) QUALITY OR CONCENTRATION (54-61) | | | NO. EX (62-67) | FREQUENCY OF ANALYSIS (64-68) | SAMPLE TYPE (69-70) |
|---|--------------------|---|-------------------|-------|--|-----------------|-------------------|----------------------|--|---------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | | | |
| PH | SAMPLE MEASUREMENT | ***** | ***** | () | | ***** | | (12) | | |
| 00400 1 0 1 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | 6.0 MINIMUM | ***** | REPORT MAXIMUM | 50 | TWICE/GRAB MONTH | |
| SOLIDS, TOTAL SUSPENDED | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | | | (19) | | |
| 00530 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 30 MONTH AVG | 100 DLY MAX | 65/L | TWICE/GRAB MONTH | |
| OIL AND GREASE FREQ EXTR-GRAV METH | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | | | (19) | | |
| 00556 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 15 MONTH AVG | 20 DLY MAX | MG/L | TWICE/GRAB MONTH | |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT | SAMPLE MEASUREMENT | No Flow | | (03) | ***** | ***** | ***** | () | 0 / 10 EST | |
| 50050 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | REPORT MONTH AVG | REPORT DLY MAX | MGD | ***** | ***** | ***** | **** | WEEKLY ESTIMA | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
 Chemistry Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 42 U.S.C. § 1329. Penalties under these statutes may include fines up to \$50,000 and/or maximum imprisonment of between 6 months and 5 years.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113

AREA CODE

NUMBER

DATE

92 06 25

YEAR MO DAY

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

No Discharge

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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

PERMIT NUMBER

501 A

DISCHARGE NUMBER

MAJOR

(SUBR 05)

F - FINAL

UNIT 1 GENRTH BLWDWN FILT HW

Form Approved.

OMB No. 2040-0004.

Approval expires 6-30-91.


MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY
 92 05 01 92 05 31
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE [] ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | | (3 Card Only) QUANTITY OR LOADING (34-41) | | | (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 0 | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | | | | | |
| EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 30 | 100 | | | WEEKLY GRAB |
| FLOW, IN CONDUIT OR TREATMENT PLANT 000 1 0 0 | SAMPLE MEASUREMENT | No Flow | | (03) | ***** | ***** | ***** | | | 0 1/2 Est |
| EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | REPORT MONTH AVG | REPORT DLY MAX | MGD | ***** | ***** | ***** | **** | | WEEKLY ESTIMA |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |

| | | | | | | | |
|---|--|--|--------------|--------|------|----|-----|
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER | 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 1335. A FINE (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 3 years.) |  SIGNATURE _____ OFFICE _____ | TELEPHONE | DATE | | | |
| A. M. Dulick Chemistry Manager TYPED OR PRINTED | | | 412 393-5113 | 92 | 06 | 25 | |
| | | | AREA CODE | NUMBER | YEAR | MO | DAY |

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

No Discharge

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

NAME BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT

PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

PERMIT NUMBER

001 A

DISCHARGE NUMBER

MAJOR

(SUBE 05)

F - FINAL

UNITS 152 COOLG. TOWER BLWON.

Form Approved

OMB No. 2040-0004

Approval expires 6-30-91

MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31
(12-21) (12-23) (12-25) (12-27) (12-29) (12-31)

*** NO DISCHARGE [] ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | | (1 Card Only) QUANTITY OR LOADING (46-51) | | | (4 Card Only) QUALITY OR CONCENTRATION (54-61) | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-68) | SAMPLE TYPE (69-70) |
|---|--------------------|---|-------------------|--------|--|---------------------|-------------------|----------------------|--|---------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | | | |
| PH | SAMPLE MEASUREMENT | ***** | ***** | () | 7.22 | ***** | 8.10 | (12) | 0 4w | G |
| 00400 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | 6.0 MINIMUM | ***** | 9.0 MAXIMUM | SU | | WEEKLY GRAB |
| NITROGEN, AMMONIA TOTAL (AS N) | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | | | (19) | | |
| 00610 1 0 1 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | REPORT MONTH AVG | REPORT DLY MAX | MG/L | | WEEKLY GRAB |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT | SAMPLE MEASUREMENT | 38.880 | 46.800 | (03) | ***** | ***** | ***** | () | 0 DAILY | CONT |
| 50050 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | REPORT MONTH AVG | REPORT DLY MAX | MGD | ***** | ***** | ***** | **** | | DAILY CONTIN |
| CHLORINE, FREE AVAILABLE | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 0.11 | 0.13 | (19) | 0 2/d | G |
| 50064 1 0 1 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 0.2 DAILY MX | 0.5 INST MX | MG/L | | CON'T RECORDR DOUS |
| HYDRAZINE | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | ***** | | (19) | | |
| 61313 1 0 1 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | ***** | 0 DLY MAX | MG/L | | WEEKLY GRAB |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
Chemistry Manager

TYPED OR PRINTED

I CERTIFY (UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC 1001 AND 1331. Penalties under these statutes may include fines up to \$100,000 and maximum imprisonment of between 6 months and 5 years.

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

412 393-5113 92 06 25
AREA CODE NUMBER YEAR MO DAY

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

HYDRAZINE AND AMMONIA MONITORING TO APPLY DURING PERIODS OF WET LAYUP. QUARTERLY SAMPLING TO BE CONDUCTED IN SAME MONTH.

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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (12/16) (17/19)
 PA0025615
 PERMIT NUMBER
 102 A
 DISCHARGE NUMBER
 MONITORING PERIOD
 FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUPP 05)
 F - FINAL
 102 INTAKE SCREENHOUSE
 Form Approved
 OMB No. 2040-0004
 Approval expires 6-30-91
 *** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.


| PARAMETER (32-37) | SAMPLE MEASUREMENT | (3 Card Only) QUANTITY OR LOADING (46-53) | | | (4 Card Only) QUALITY OR CONCENTRATION (38-45) | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-65) | SAMPLE TYPE (66-70) |
|--|--------------------|---|-------------------|-------|--|----------------|----------------|-------------------|----------------------------------|------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | | | |
| PH | | ***** | ***** | () | 7.23 | ***** | 7.47 | (12) | 0 2/m | G |
| 00400 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | ***** | 6.0 MINIMUM | ***** | 9.0 MAXIMUM | SU | TWICE/GRAB MONTH | |
| SOLIDS, TOTAL SUSPENDED | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 4.28 | 4.4 | (19) | 0 2/m | G |
| 00530 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | 30 Mnth Avg | 100 DLY MAX | MG/L | TWICE/GRAB MONTH | |
| OIL AND GREASE | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 5.00 | 5.00 | (19) | 0 2/m | G |
| FREON EXTR-GRAV METH | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | 15 Mnth Avg | 20 DLY MAX | MG/L | TWICE/GRAB MONTH | |
| 00556 1 0 0 EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | 0.001 | 0.001 | (03) | ***** | ***** | ***** | () | 0 2/m | Est |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT | PERMIT REQUIREMENT | REPORT Mnth Avg | REPORT DLY MAX | MGD | ***** | ***** | ***** | ***** | TWICE/ESTIMA MONTH | |
| 50050 1 0 0 EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
Chemistry Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1314. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)



SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113

AREA CODE NUMBER

DATE

92 06 25

YEAR MO DAY

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

ATTN: ANDREW DULICK

(2-16)

*E MIT NUMER

[17 19]

◎ 1884 年 12 月 1 日 星期五

INTAKE SCREEN BACKWASH

Form Approved.
OMB No. 2040-0004.
Approval expires 6-30-91.

| | | | | | | | |
|------|----------|----------|----------|----|----------|----------|----------|
| FROM | YEAR | MO | DAY | TO | YEAR | MO | DAY |
| | 92 | 05 | 01 | | 92 | 05 | 31 |
| | (120-21) | (122-23) | (124-25) | | (126-27) | (128-29) | (130-31) |


*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | X | (1 Card Only) QUANTITY OR LOADING (46-53) | | | (4 Card Only) QUALITY OR CONCENTRATION (38-45) | | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-68) | SAMPLE TYPE (69-70) |
|--|-----------------------|---|-------------------|--------|--|---------|---------|-------|----------------------|--|---------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | UNITS | | | |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | 0.006 | 0.046 | (03) | ***** | ***** | ***** | () | 0 | 1/w | Est |
| | PERMIT REQUIREMENT | REPORT MTH AVG | REPORT DLY MAX | MGD | ***** | ***** | ***** | **** | | WEEKLY ESTIMA | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
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| | SAMPLE MEASUREMENT | | | | | | | | | | |
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| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
A. M. Dulick
Chemistry Manager
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC 41001 AND 41004. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)


SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE
412 393-5113
AREA CODE NUMBER

DATE
92 06 25
YEAR MO DAY

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

NAME BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT

PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

PERMIT NUMBER

103 A

DISCHARGE NUMBER

MAJOR

(SUBR 05)

F - FINAL

SLUDGE SETTLING BASIN

Form Approved.

OMB No. 2040-0004.

Approval expires 6-30-91.

MONITORING PERIOD

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | | (1 Card Only) QUANTITY OR LOADING (46-51) | | | (4 Card Only) QUALITY OR CONCENTRATION (54-61) | | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-68) | SAMPLE TYPE (69-73) |
|---|--------------------|--|-------------------|-------|---|-----------------|----------------|-------|-------------------|----------------------------------|------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | UNITS | | | |
| PH | SAMPLE MEASUREMENT | ***** | ***** | () | 7.04 | ***** | 7.18 | (12) | 0 | 2/M | G |
| 00400 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | 6.0 MINIMUM | ***** | 9.0 MAXIMUM | SD | | TWICE/GRAB MONTH | |
| SOLIDS, TOTAL SUSPENDED | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 4.00 | 4.00 | (19) | 0 | 2/M | 24HC |
| 00530 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 30 MONTH AVG | 100 DLY MAX | MG/L | | TWICE/COMP24 MONTH | |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT | SAMPLE MEASUREMENT | 0.001 | 0.001 | (03) | ***** | ***** | ***** | () | 0 | 2/M | EST |
| 50050 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | REPORT MONTH AVG | REPORT DLY MAX | MGD | ***** | ***** | ***** | **** | | TWICE/ESTIMA MONTH | |
| | 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. M. Dulick
Chemistry Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 18 U.S.C. § 1011. (Penalties under these statutes may include fines up to \$100,000 and/or maximum imprisonment of between 5 months and 5 years.)

Andrew Dulick
SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113

AREA CODE

NUMBER

DATE

92 06 25

YEAR MO DAY

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

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

NAME BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

PA0025615

PERMIT NUMBER

203 A

DISCHARGE NUMBER

MAJOR

(SUBP 05)

F - FINAL

MAIN SEWAGE TMT PLANT

rm Approved.

OMB No. 2040-0004.

Approval expires 6-30-91.

MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31
(12-21) (12-23) (12-25) (12-27) (12-29) (12-31)

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | | QUANTITY OR LOADING (46-53) | | | 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 | | | | |
| PH | SAMPLE MEASUREMENT | ***** | ***** | () | 7.04 | ***** | 7.11 | (12) | 0 | 2/m | G |
| 00400 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | 6.0 MINIMUM | ***** | 9.0 MAXIMUM | SU | | TWICE/GRAB MONTH | |
| SOLIDS, TOTAL SUSPENDED | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 25.10 | 28.15 | (19) | 0 | 2/m | BHC |
| 00530 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 30 METH AVG | 60 DLY MAX | MG/L | | TWICE/COMP-8 MONTH | |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT | SAMPLE MEASUREMENT | 0.004 | 0.007 | (03) | ***** | ***** | ***** | () | 0 | weekly MEAS. | |
| 50050 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | 0.023 METH AVG | REPORT DLY MAX | MGD | ***** | ***** | ***** | **** | | WEEKLY MEASRD | |
| COLIFORM, FECAL GENERAL | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 0.00 | ***** | (13) | 0 | 2/m | G |
| 74055 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 200 30DA GEO | ***** | / 100ML | | TWICE/GRAB MONTH | |
| BOD, CARBONACEOUS 05 DAY, 20C | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 3.50 | 5.00 | (19) | 0 | 2/m | BHC |
| 80082 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 25 METH AVG | 50 DLY MAX | MG/L | | TWICE/COMP-8 MONTH | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
Chemistry Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

Andrew M. Dulick

TELEPHONE

412 393-5113

AREA CODE NUMBER

DATE

92 06 25

YEAR MO DAY

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

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

NAME WEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT

PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

PA0025615

PERMIT NUMBER

303 A

DISCHARGE NUMBER

MAJOR

(SUBR 05)

F - FINAL

UNIT 1 OIL WATER SEPARATOR

Form Approved

OMB No. 2040-0004

Approval expires 6-30-91


MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | | (1 Card Only) QUANTITY OR LOADING (46-51) | | | (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 | ***** | ***** | () | 6.87 | ***** | 7.50 | (12) | 0 1/w | G |
| 00400 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | 6.0 MINIMUM | ***** | 9.0 MAXIMUM | SU | | WEEKLYGRAB |
| SOLIDS, TOTAL SUSPENDED | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 4.96 | 6.22 | (19) | 0 1/w | G |
| 00530 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 30 MTH AVG | 100 DLY MAX | MG/L | | WEEKLYGRAB |
| OIL AND GREASE | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 5.00 | 5.00 | (19) | 0 1/w | G |
| FREON EXTR-GRAV METH | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 15 MTH AVG | 20 DLY MAX | MG/L | | WEEKLYGRAB |
| 00556 1 0 0 EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | 0.019 | 0.056 | (03) | ***** | ***** | ***** | () | 0 1/w | Est |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT | PERMIT REQUIREMENT | REPORT | REPORT | MGD | ***** | ***** | ***** | **** | | WEEKLYESTIMA |
| 50050 1 0 0 EFFLUENT GROSS VALUE | 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 18 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 | | | |
| A. M. Dulick Chemistry Manager TYPED OR PRINTED | | | 412 393-5113 | 92 | 06 | 25 | |
| | | | 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 BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT

PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

403 A

PERMIT NUMBER

DISCHARGE NUMBER

MAJOR

(SUHR 05)

F - FINAL

CONDENSATE BLOWDOWN & RIVH WAT

Form Approved

OMB No. 2040-0004

Approval expires 6-30-91

MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form.


| PARAMETER (32-37) | SAMPLE MEASUREMENT | (1 Card Only) QUANTITY OR LOADING (46-51) | | | (4 Card Only) QUALITY OR CONCENTRATION (46-51) | | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-65) | SAMPLE TYPE (69-70) |
|---|--------------------|---|-------------------|-------|--|--------------------|-------------------|-------|-------------------|----------------------------------|------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | UNITS | | | |
| PH | | ***** | ***** | () | 7.57 | ***** | 7.88 | (12) | 0 | weekly | G |
| 00400 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | 6.0 MINIMUM | ***** | 9.0 MAXIMUM | SU | | WEEKLY | GRAB |
| SOLIDS, TOTAL SUSPENDED | | ***** | ***** | () | ***** | 4.67 | 4.78 | (19) | 0 | weekly | G |
| 00530 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 30 MNTH AVG | 100 DLY MAX | MG/L | | WEEKLY | GRAB |
| OIL AND GREASE | | ***** | ***** | () | ***** | 5.00 | 5.00 | (19) | 0 | 1/w | G |
| PERON EXTR-GRAV METH | | ***** | ***** | **** | ***** | 25 MNTH AVG | 20 DLY MAX | MG/L | | WEEKLY | GRAB |
| 00556 1 0 J EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | ***** | ***** | (19) | | | |
| NITROGEN, AMMONIA TOTAL (AS N) | | ***** | ***** | () | ***** | REPORT MNTH AVG | REPORT DLY MAX | MG/L | | WEEKLY | GRAB |
| 00610 1 0 1 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | ***** | ***** | () | 0 | 1/w | EST |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT | | 0.001 | 0.005 | (03) | ***** | ***** | ***** | **** | | WEEKLY | ESTIMA |
| 50050 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | REPORT MNTH AVG | REPORT DLY MAX | MGD | ***** | ***** | ***** | **** | | | |
| HYDRAZINE | | ***** | ***** | () | ***** | ***** | ***** | (19) | | | |
| 01313 1 0 1 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | ***** | 0 DLY MAX | MG/L | | WEEKLY | GRAB |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
Chemistry Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 18 USC § 1333. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 3 years.)



SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113

AREA CODE NUMBER

DATE

92 06 25

YEAR MO DAY

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

HYDRAZINE AND AMMONIA MONITORING TO APPLY DURING PERIODS OF WET LAYUP.

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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(16) **PA0025615** (17) **003 A**
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR
 (SUBP 05)
 F - FINAL
 003 UNCONTAMINATED STORM WATER


Form Approved
 OMB No. 2040-0004
 Approval expires 6-30-91.

MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
 92 05 01 92 05 31
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | | (3 Card Only) QUANTITY OR LOADING (46-53) | | | (4 Card Only) QUALITY OR CONCENTRATION (38-45) | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (54-58) | SAMPLE TYPE (69-70) |
|--|-----------------------|--|-------------------|-------|---|---------|---------|----------------------|--|---------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | | | |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | 0.025 | 0.069 | (03) | ***** | ***** | ***** | () | 0 2/M | EST |
| | PERMIT REQUIREMENT | REPORT Mnth AVG | REPORT DLY MAX | MGD | ***** | ***** | ***** | **** | TWICE/ESTIMA | MONTH |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
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| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |

| | | | | | | | |
|---|---|--|--------------|----------|------|----|-----|
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER A. M. Dulick Chemistry Manager TYPED OR PRINTED | I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT (SEE 18 USC, § 1001 AND 33 USC § 1332). Penalties under these statutes may include fines up to \$100K and/or maximum imprisonment of between 6 months and 5 years. |  SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | TELEPHONE | | DATE | | |
| | | | 412 | 393-5113 | 92 | 06 | 25 |
| | | | 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 BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT

PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

PERMIT NUMBER

004 A

DISCHARGE NUMBER

MAJOR

(SUBR CS)

F - FINAL

UNIT ONE COOLG TOWER OVERFLOW

Form Approved

OMB No. 2040-0004

Approval expires 6-30-91

MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | SAMPLE MEASUREMENT | QUANTITY OR LOADING (54-61) | | | 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 | ***** | ***** | () | | ***** | | (12) | | |
| 00400 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | 6.0 MINIMUM | ***** | 9.0 MAXIMUM | SU | | WEEKLY GRAB |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT | SAMPLE MEASUREMENT | NO FLOW | | | (03) | ***** | ***** | ***** | () | 0 1/w Mon |
| 50050 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | REPORT MONTH AVG | REPORT DLY MAX | MGD | ***** | ***** | ***** | **** | | WEEKLY BEASRD |
| CHLORINE, FREE AVAILABLE | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | | | | (19) | |
| 50064 1 0 1 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 0.2 DAILY MX | 0.5 INST MX | MG/L | | CONTINUOUS |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
Chemistry Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1312. Penalties under these statutes may include fines up to \$100,000 and/or maximum imprisonment of between 6 months and 3 years.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

[Signature]

TELEPHONE

412 393-5113

DATE

92 06 25

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

NO DISCHARGE

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

NAME HEAVER VALLEY POWER STATION

ADDRESS 200 BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT

PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

PERMIT NUMBER

006 A

DISCHARGE NUMBER

MAJOR

(SUBR 05)

F - FINAL

AUX. INTAKE SCREEN BACKWASH

Form Approved.

OMB No. 2040-0004.

Approval expires 6-30-91.


MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31
(26-31) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | X | (4 Card Only) QUANTITY OR LOADING (46-51) | | | (4 Card Only) QUALITY OR CONCENTRATION (54-57) | | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-65) | SAMPLE TYPE (66-67) |
|---|--------------------|---|----------------|-------|--|---------|---------|-------|-------------------|----------------------------------|------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | UNITS | | | |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | No Flow | | | (03) | ***** | ***** | ***** | () | 0 1/10 | EST |
| | PERMIT REQUIREMENT | REPORT MNTH AVG | REPORT DLY MAX | MGD | ***** | ***** | ***** | **** | | WEEKLY ESTIMA | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
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| | 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 3 years. |  SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT | TELEPHONE | DATE | |
| A. M. Dulick Chemistry Manager TYPED OR PRINTED | | | 412 393-5113 | 92 06 25 | |

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

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

NAME BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2.16)

(17.19)

PA0025615

PERMIT NUMBER

007 A

DISCHARGE NUMBER

37J01

(506P 05)

F - FINAL

AUX. INTAKE SYSTEM

Form Approved

OMB No. 2040-0004

Approval expires 6-30-91

MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31
(20.21) (22.23) (24.25) (26.27) (28.29) (30.31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

| PARAMETER (32.37) | SAMPLE MEASUREMENT (34.61) | QUANTITY OR LOADING (34.61) | | | QUALITY OR CONCENTRATION (34.61) | | | NO. EX (52.63) | FREQUENCY OF ANALYSIS (54.65) | SAMPLE TYPE (59.70) |
|---|-------------------------------|--------------------------------|----------------|--------|-------------------------------------|--------------|-------------|-------------------|----------------------------------|------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | | | |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 | NO FLOW | | | (03) | ***** | ***** | ***** | | 0 /WK | EST |
| EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | REPORT MTH AVG | REPORT DLY MAX | MGD | ***** | ***** | ***** | *** | WEEKLY | ESTIMA |
| CHLORINE, FREE AVAILABLE 50064 1 0 1 | NO FLOW | | | () | ***** | | | | (19) | |
| EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | *** | ***** | 0.2 DAILY BY | 0.5 INST BY | MG/L | WEEKLY | CRAB |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
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| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
Chemistry Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE \$1000 FINE OR FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 18 USC § 1362. Penalties under these statutes may include fines up to \$1000 and/or maximum imprisonment of 6 months and 3 years.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113

AREA CODE NUMBER

DATE

92 06 25

YEAR MO DAY

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

MONITORING FOR FLOW AND FREE AVAILABLE CHLORINE ARE REQUIRED ONLY DURING THOSE PERIODS OF DISCHARGE FROM THE ALTERNATE FLOW PATH OF THE REACTOR PLANT RIVER WATER SYSTEM.

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

NAME BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

PERMIT NUMBER

010 A

DISCHARGE NUMBER

MAJOR

(SUBR 05)

F - FINAL

UNIT 2 COOLING WATER

Form Approved

OMB No. 2040-0004

Approval expires 6-30-91.

MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | | (1 Card Only) QUANTITY OR LOADING (46-53) | | | (4 Card Only) QUALITY OR CONCENTRATION (46-53) | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-65) | SAMPLE TYPE (66-70) |
|----------------------|--------------------|---|---------|--------|--|----------|---------|----------------------|--|---------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | | | |
| PH | SAMPLE MEASUREMENT | ***** | ***** | () | 7.24 | ***** | 7.78 | (12) | 0 /wk G | |
| 00400 1 0 0 | PERMIT REQUIREMENT | ***** | ***** | **** | 6.0 | ***** | 9.0 | | WEEKLY GRAB | |
| EFFLUENT GROSS VALUE | | | | **** | MINIMUM | | MAXIMUM | SU | | |
| FLOW, IN CONDUIT OR | SAMPLE MEASUREMENT | 5.000 | 5.000 | (03) | ***** | ***** | ***** | () | 0 /wk Meas. | |
| THRU TREATMENT PLANT | PERMIT REQUIREMENT | REPORT | REPORT | | ***** | ***** | ***** | **** | WEEKLY MEASRD | |
| 50050 1 0 0 | | MONTH AVG | DLY MAX | MGD | | | | **** | | |
| EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 0.000 | 0.00 | (19) | 0 /wk G | |
| CHLORINE, FREE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 0.2 | 0.5 | | DAILY GRAB | |
| AVAILABLE | | | | **** | | DAILY MX | INST MX | MG/L | | |
| 50064 1 0 1 | | | | | | | | | | |
| EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
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| | SAMPLE MEASUREMENT | | | | | | | | | |
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| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
Chemistry Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 18 USC § 1011. (Violations under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

412 393-5113

92 06 25

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 BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

PERMIT NUMBER

111 A

DISCHARGE NUMBER

MAJOR

(SUBR 05)

F - FINAL

111 DIESEL GENERATOR BLDG

Form Approved.

OMB No. 2040-0004

Approval expires 6-30-91.

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY
92 05 01 92 05 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | | (1 Card Only) QUANTITY OR LOADING (46-51) | | | (4 Card Only) QUALITY OR CONCENTRATION (56-61) | | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-65) | SAMPLE TYPE (66-70) |
|-----------------------|--------------------|--|---------|-------|---|-----------|----------|-------|----------------------|--|---------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | UNITS | | | |
| PH | SAMPLE MEASUREMENT | ***** | ***** | () | 7.14 | ***** | 8.21 | (12) | | 0 1/w G | |
| 00400 1 0 0 | PERMIT REQUIREMENT | ***** | ***** | *** | 6.0 | ***** | 9.0 | | | WEEKLY GRAB | |
| EFFLUENT GROSS VALUE | | | | **** | MINIMUM | | MAXIMUM | | | | |
| SOLIDS, TOTAL | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 17.53 | 39.88 | (19) | | 0 1/w G | |
| SUSPENDED | PERMIT REQUIREMENT | ***** | ***** | *** | ***** | 30 | 100 | | | WEEKLY GRAB | |
| 00530 1 0 0 | | | | **** | | MONTH AVG | DLY MAX | MG/L | | | |
| EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | ***** | ***** | () | 5.13 | 6.40 | 6.40 | (19) | | 0 1/w G | |
| OIL AND GREASE | PERMIT REQUIREMENT | ***** | ***** | *** | 15 | 20 | 30 | | | WEEKLY GRAB | |
| FREON EXTRA-GRAV METH | | | | **** | 30 DA AV | DAILY MAX | INST MAX | MG/L | | | |
| 00556 1 0 0 | SAMPLE MEASUREMENT | 0.001 | 0.001 | (03) | ***** | ***** | ***** | () | | 0 1/w E.T | |
| EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | REPORT | REPORT | | ***** | ***** | ***** | **** | | WEEKLY ESTIMA | |
| FLOW, IN CONDUIT OR | | MONTH AVG | DLY MAX | MGD | | | | **** | | | |
| THRU TREATMENT PLANT | SAMPLE MEASUREMENT | | | | | | | | | | |
| 50050 1 0 0 | PERMIT REQUIREMENT | | | | | | | | | | |
| EFFLUENT GROSS VALUE | | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick

Chemistry Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT (SEE 18 USC § 1001 AND 18 USC § 1361). (Penalties under these statutes may include fines up to \$100,000 and/or maximum imprisonment of between 5 months and 1 year.)

SIGNATURE OF PRINCIPAL EXECUTIVE

OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

412

393-5113

92

06

25

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 BEAVER VALLEY POWER STATION
ADDRESS P.O. BOX 4
 ATTN: ANDREW DULICK
 SHIPPINGPORT PA 15077
FACILITY
LOCATION
 ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
 (2.16) (17.19)
PA0025615 **211 A**
PERMIT NUMBER **DISCHARGE NUMBER**
MONITORING PERIOD
 FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31
 (26.21) (22.23) (24.25) (26.27) (28.29) (30.31)

MAJOR (SUBB 05)
 F - FINAL
 211 TURBINE BLDG
 Form Approved.
 OMB No. 2040-0004.
 Approval expires 6-30-91.

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

| PARAMETER (32-37) | | (3 Card Only) QUANTITY OR LOADING (46-48) | | | (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 | ***** | ***** | () | 7.15 | ***** | 7.87 | (12) | 0 1/w | G |
| 00400 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | 6.0 MINIMUM | ***** | 9.0 MAXIMUM | SU | WEEKLY | GRAB |
| SOLIDS, TOTAL SUSPENDED | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 12.33 | 45.65 | (19) | 0 1/w | G |
| 00530 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 30 MONTH AVG | 100 DLY MAX | MG/L | WEEKLY | GRAB |
| OIL AND GREASE | SAMPLE MEASUREMENT | ***** | ***** | () | 5.35 | 6.79 | 6.79 | (19) | 0 1/w | G |
| FREON XTR-GRAV METH | PERMIT REQUIREMENT | ***** | ***** | **** | 15 30 DA AV | 20 DAILY MX | 30 INST MX | MG/L | WEEKLY | GRAB |
| 00556 1 0 0 EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | 0.001 | 0.001 | (03) | ***** | ***** | ***** | () | 0 1/w | Est |
| FLOW IN CONDUIT OR THRU TREATMENT PLANT | PERMIT REQUIREMENT | REPORT MONTH AVG | REPORT DLY MAX | MGD | ***** | ***** | ***** | **** | WEEKLY | ESTIMA |
| 50050 1 0 0 EFFLUENT GROSS VALUE | 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 33 USC § 1361 AND 40 USC § 13119. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 1 year. | TELEPHONE | DATE | | |
| A. M. Dulick Chemistry Manager TYPED OR PRINTED | | 412 393-5113 AREA CODE NUMBER | 92 YEAR | 06 MO | 25 DAY |

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

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

NAME BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT

PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

PERMIT NUMBER

011 A

DISCHARGE NUMBER

MAJOR

(SUBR 05)

F - FINAL

DIESEL GEN & TURBINE DRAINS

Form Approved.

OMB No. 2040-0004.

Approval expires 6-30-91.

MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | | (1 Card Only) QUANTITY OR LOADING (46-53) | | | (4 Card Only) QUALITY OR CONCENTRATION (54-61) | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-65) | SAMPLE TYPE (69-70) |
|--|-----------------------|--|-------------------|---------------|---|---------|---------|----------------------|--|---------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | | | |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT SC050 1 0 ? EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | <u>0.002</u> | <u>0.002</u> | (03) MGD | ***** | ***** | ***** | () | 0 /w Est | WEEKLY ESTIMA |
| | PERMIT REQUIREMENT | REPORT MNTH AVG | REPORT DLY MAX | | ***** | ***** | ***** | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
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| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
Chemistry Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED
AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND PLEDGED
ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR
OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION
IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIG-
NIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING
THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND
18 USC § 1333. (Penalties under these statutes may include fines up to \$20,000
and/or maximum imprisonment of between 5 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113

AREA
CODE

NUMBER

DATE

92 06 25

YEAR MO DAY

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

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

NAME PEAVLEE VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

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

(12-18)

PA0025615

PERMIT NUMBER

(17-19)

012 A

DISCHARGE NUMBER

MAJOR

(SUBR 05)

F - FINAL

BLOWDOWN FROM THE HVAC C. TOWER

Form Approved.

OMB No. 2040-0004.

Approval expires 6-30-91.

MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31
(12-21) (12-23) (12-25) (12-27) (12-29) (12-31)

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | | (1 Card Only) QUANTITY OR LOADING (46-51) | | | (4 Card Only) QUALITY OR CONCENTRATION (54-61) | | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-65) | SAMPLE TYPE (66-70) |
|----------------------|--------------------|---|---------|-------|--|---------|---------|-------|----------------------|--|---------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | UNITS | | | |
| PH | SAMPLE MEASUREMENT | ***** | ***** | () | 7.62 | ***** | 7.62 | (12) | 0 | 1/m | G |
| 00400 1 0 0 | PERMIT REQUIREMENT | ***** | ***** | *** | 6.0 | ***** | 9.0 | SU | | ONCE/ | GRAB |
| EFFLUENT GROSS VALUE | | | | *** | MINIMUM | | MAXIMUM | | | MONTH | |
| FLOW, IN CONDUIT OR | SAMPLE MEASUREMENT | 0.001 | 0.001 | (03) | ***** | ***** | ***** | () | 0 | 1/m | Est |
| THRU TREATMENT PLANT | PERMIT REQUIREMENT | REPORT | REPORT | MGD | ***** | ***** | ***** | *** | | ONCE/ | ESTIMA |
| 50050 1 0 0 | | MONTH AVG | DAY MAX | | | | | **** | | MONTH | |
| EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
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| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
Chemistry Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT (SEE 18 U.S.C. § 1001 AND 18 U.S.C. § 1333). Penalties under these statutes may include fines up to \$100,000 and imprisonment of between 6 months and 5 years.

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113

AREA
CODE

NUMBER

DATE

92 06 25

YEAR MO DAY

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

NAME LEAVEL VALLEY POWER STATION
ADDRESS P.O. BOX 4

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPING COAT

PA 15077

FACILITY:TV

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION ACT (NPDES)

DISCHARGE MONITORING REPORT (DMR)

NOLAN

(50 BARS)

[illegible]

UNIT 2 SERVICE WATER PACKWASH

Form Approved.

OMB No. 2040-0004

Approval expires 6-30-91.

NO DISCHARGE

NOTE: Read instructions before completing this form.

[illegible]

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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-19)

(17-19)

PA0025615

PERMIT NUMBER

113 A

DISCHARGE NUMBER

MAJOR

(SUPER C5)

F - FINAL

UNIT 2 SEWAGE TMT PLANT

Form Approved.
 OMB No. 2040-0004.
 Approval expires 6-30-91.

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY
 92 05 01 92 05 31
 (2021) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | X | (3 Card Only) QUANTITY OR LOADING (46-51) | | | (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 | ***** | ***** | () | 7.08 | ***** | 7.30 | (12) | 0 | 2/m | G |
| 00400 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | 6.0 MINIMUM | ***** | 9.0 MAXIMUM | SJ | | TWICE/GRAB MONTH | |
| SOLIDS, TOTAL SUSPENDED | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 10.64 | 11.80 | (19) | 0 | 2/m | 8HC |
| 00530 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 30 MONTH AVG | 60 DLY MAX | MG/L | | TWICE/COMP-8 MONTH | |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT | SAMPLE MEASUREMENT | 0.024 | 0.045 | (03) | ***** | ***** | ***** | () | 0 | 1/w | MWOS |
| 50050 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | 0.043 MONTH AVG | REPORT DLY MAX | MGD | ***** | ***** | ***** | **** | | WEEKLY/BEASRD | |
| COLIFORM, FECAL GENERAL | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 0.00 | ***** | (13) | 0 | 2/m | G |
| 74055 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 200 30DA GEO | ***** | / 100ML | | TWICE/GRAB MONTH | |
| BOD, CARBONACEOUS 05 DAY, 20C | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 0.35 | 5.00 | (19) | 0 | 2/m | 8HC |
| 80082 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 25 MONTH AVG | 50 DLY MAX | MG/L | | TWICE/COMP-8 MONTH | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
Chemistry Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 3 years.

Andrew Dulick
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

412/393-5113

AREA CODE NUMBER

DATE

92 06 25

YEAR MO DAY

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

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

NAME BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT

FA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

PERMIT NUMBER

213 A

DISCHARGE NUMBER

MAJOR

(SUBR 05)

F - FINAL

UNIT 2 COOL TOWER FUMPHOUSE

Form Approved.

OMB No. 2040-0004.

Approval expires 6-30-91.

MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31
(120-21) (122-23) (124-25) (126-27) (128-29) (130-31)

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | | QUANTITY OR LOADING (4 Card Only) (46-48) | | | QUALITY OR CONCENTRATION (4 Card Only) (46-53) | | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-65) | SAMPLE TYPE (69-70) |
|----------------------|--------------------|---|---------|-------|--|-----------|---------|-------|----------------------|--|---------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | UNITS | | | |
| PH | SAMPLE MEASUREMENT | ***** | ***** | () | 6.62 | ***** | 7.35 | (12) | | 0 2/m | G |
| 00400 1 0 0 | PERMIT REQUIREMENT | ***** | ***** | *** | 6.0 | ***** | 9.0 | SU | | TWICE/GRAB | |
| EFFLUENT GROSS VALUE | | | | **** | MINIMUM | | MAXIMUM | | | MONTH | |
| SOLIDS, TOTAL | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 5.09 | 6.18 | (19) | | 0 2/m | G |
| SUSPENDED | PERMIT REQUIREMENT | ***** | ***** | *** | ***** | 30 | 100 | | | TWICE/GRAB | |
| 00530 1 0 0 | | | | **** | | MONTH AVG | DLY MAX | MG/L | | MONTH | |
| EFFLUENT GROSS VALUE | | | | | | | | | | | |
| OIL AND GREASE | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 6.01 | 7.02 | (19) | | 0 2/m | G |
| FREON EXTR-GRAV METH | PERMIT REQUIREMENT | ***** | ***** | *** | ***** | 15 | 20 | | | TWICE/GRAB | |
| 00556 1 0 0 | | | | **** | | MONTH AVG | DLY MAX | MG/L | | MONTH | |
| EFFLUENT GROSS VALUE | | | | | | | | | | | |
| FLOW, IN CONDUIT OR | SAMPLE MEASUREMENT | 0.001 | 0.001 | (03) | ***** | ***** | ***** | () | | 0 1/w | Est |
| THRU TREATMENT PLANT | PERMIT REQUIREMENT | REPORT | REPORT | | ***** | ***** | ***** | *** | | WEEKLY ESTIMA | |
| 50050 1 0 0 | | MONTH AVG | DLY MAX | MGD | | | | **** | | | |
| EFFLUENT GROSS VALUE | | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
Chemistry Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 18 USC § 1343. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 3 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

412 393-5113

AREA CODE NUMBER

92 06 25

YEAR MO DAY

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

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

NAME BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT

PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

PERMIT NUMBER

313 A

DISCHARGE NUMBER

MAJOR

(SUBR 05)

F - FINAL

313 TURBINE BLDG DRAIN

Form Approved.

OMB No. 2040-0004.

Approval expires 6-30-91.

MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | | (1 Card Only) QUANTITY OR LOADING (45-51) | | | (4 Card Only) QUALITY OR CONCENTRATION (46-51) | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-65) | SAMPLE TYPE (69-70) |
|----------------------|--------------------|---|---------|-------|--|-----------|---------|----------------------|--|---------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | | | |
| PH | SAMPLE MEASUREMENT | ***** | ***** | () | 7.29 | ***** | 8.95 | (12) | O/W | G |
| 00400 1 0 0 | PERMIT REQUIREMENT | ***** | ***** | **** | 6.0 | ***** | 9.0 | | WEEKLY | GRAB |
| EFFLUENT GROSS VALUE | | | | **** | MINIMUM | | MAXIMUM | SU | | |
| SOLIDS, TOTAL | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 7.60 | 19.1 | (19) | O/W | G |
| SUSPENDED | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 30 | 100 | | WEEKLY | GRAB |
| 00530 1 0 0 | | | | **** | | MONTH AVG | DLY MAX | MG/L | | |
| EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | 5.52 | 7.07 | (19) | O/W | G |
| OIL AND GREASE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 15 | 20 | | WEEKLY | GRAB |
| FROM EXTB-GRAV METH | | | | **** | | MONTH AVG | DLY MAX | MG/L | | |
| 00556 1 0 0 | SAMPLE MEASUREMENT | ***** | ***** | (03) | ***** | ***** | ***** | () | O/W | Est |
| EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | REPORT | REPORT | | ***** | ***** | ***** | **** | WEEKLY | ESTIMA |
| FLOW, IN CONDUIT OR | | MONTH AVG | DLY MAX | MGD | | | | | | |
| THRU TREATMENT PLANT | SAMPLE MEASUREMENT | | | | | | | | | |
| 50050 1 0 0 | PERMIT REQUIREMENT | | | | | | | | | |
| EFFLUENT GROSS VALUE | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |

NAME, TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
Chemistry Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC 1001 AND 1331(a). A FINE or Imprisonment under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 1 year.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

412 393-5113

92 06 25

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 BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

PERMIT NUMBER

413 A

DISCHARGE NUMBER

MAJOR

(SUBP US)

F - FINAL

BULK FUEL STORAGE DRAIN

Form Approved.

OMB No. 2040-0004.

Approval expires 6-30-91.

MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | | (3 Card Only) QUANTITY OR LOADING (46-53) | | | (4 Card Only) QUALITY OR CONCENTRATION (58-65) | | | UNIT (54-57) | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-68) | SAMPLE TYPE (69-70) |
|----------------------|--------------------|--|---------|-------|---|-----------|---------|-----------------|----------------------|--|---------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | | | | |
| PH | SAMPLE MEASUREMENT | ***** | ***** | () | | ***** | | (12) | | | |
| 00400 1 0 0 | PERMIT REQUIREMENT | ***** | ***** | **** | 6.0 | ***** | 9.0 | SU | | WEEKLY | GRAB |
| EFFLUENT GROSS VALUE | | | | **** | MINIMUM | | MAXIMUM | | | | |
| SOLIDS, TOTAL | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | | | (19) | | | |
| SUSPENDED | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 30 | 100 | MG/L | | WEEKLY | GRAB |
| 00530 1 0 0 | | | | **** | | MONTH AVG | DLY MAX | | | | |
| EFFLUENT GROSS VALUE | | | | | | | | | | | |
| OIL AND GREASE | SAMPLE MEASUREMENT | ***** | ***** | () | ***** | | | (19) | | | |
| FREON EXTR-GRAV METH | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 15 | 20 | MG/L | | WEEKLY | GRAB |
| 00556 1 0 0 | | | | **** | | MONTH AVG | DLY MAX | | | | |
| EFFLUENT GROSS VALUE | | | | | | | | | | | |
| FLOW, IN CONDUIT OR | SAMPLE MEASUREMENT | No Flow | | (03) | ***** | ***** | ***** | () | | 1/WK | EST |
| THRU TREATMENT PLANT | PERMIT REQUIREMENT | REPORT | REPORT | | ***** | ***** | ***** | **** | | WEEKLY | ESTIMA |
| 50050 1 0 0 | | MONTH AVG | DLY MAX | MGD | | | | **** | | | |
| EFFLUENT GROSS VALUE | | | | | | | | | | | |
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| | PERMIT REQUIREMENT | | | | | | | | | | |
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| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
Chemistry Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY KNOWLEDGE 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 40 USC 5105 AND 33 USC 5131. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 1 year.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

412 393-5113 92 06 25
AREA CODE NUMBER YEAR MO DAY

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

No Discharge

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

NAME BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

PERMIT NUMBER

013 A

DISCHARGE NUMBER

MAJOR

(SUBR 05)

F - FINAL

UNCONTAMINATED STORMWATER

Form Approved.

OMB No. 2040-0004.

Approval expires 6-30-91.

MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31

(12-21) (12-24) (12-25) (12-27) (12-29) (12-31)

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form.

| PARAMETER (32-37) | | QUANTITY OR LOADING (46-51) | | | QUALITY OR CONCENTRATION (54-61) | | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-65) | SAMPLE TYPE (66-70) |
|--|-----------------------|--------------------------------|-------------------|--------|-------------------------------------|---------|---------|-------|----------------------|--|---------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | UNITS | | | |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | 0.026 | 0.047 | (03) | ***** | ***** | ***** | () | | | |
| | PERMIT REQUIREMENT | REPORT NNTH AVG | REPORT DLY MAX | MGD | ***** | ***** | ***** | ***** | | | WEEKLY ESTIMA |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
Chemistry Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113

AREA
CODE

NUMBER

DATE

92 06 25

YEAR MO DAY

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.

NAME: Duquesne Light Company
 ADDRESS: One Oxford Centre
 301 Grant Street
 Pittsburgh, PA 15279
 FACILITY: Stripplington Atomic Power Station
 LOCATION: Shippingport Borough, Beaver County

PERMIT NO. PAS001589
 PERMIT NUMBER

DISCHARGE NO. 1-1

MONITORING PERIOD
 Year Month Day
 92 05 01 TO 92 05 31

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
 (NPDES)

DISCHARGE MONITORING REPORT (DMR)

NOTE: Read instructions before completing this form.

| PARAMETER | QUANTITY OR LOADING | | | | QUALITY OR CONCENTRATION | | | | UNITS | NO. OF ANALYSIS | SAMPLE TYPE |
|-----------|---------------------|---------|-------|---------|--------------------------|---------|---------|--|-------|-----------------|-------------|
| | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | MINIMUM | | | | |
| Flow | Sample Measure. | NO flow | | | | | | | | 0.240 | EST |
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NAME: Duquesne Light Company
 ADDRESS: One Inland Centre
 291 Grant Street

Pittsburgh, PA 15279

Facility: Shippingport Atomic Power Station
 Location: Shippingport Borough, Beaver County

PA 061589
 PERMIT NUMBER

201
 DISCHARGE NO.

MONITORING PERIOD

| Year | Month | Day |
|------|-------|-----|
| 92 | 05 | 01 |
| Year | Month | Day |
| 92 | 05 | 31 |

FROM

NATIONAL POLLUTION DISCHARGE ELIMINATION SYSTEM
 (NPDES)

DISCHARGE MONITORING REPORT (DMR)

NOTE: Read instructions before completing this form.

| PARAMETER | QUANTITY OR LOADING | | | QUALITY OR CONCENTRATION | | | NO. OF ANALYSIS | FREQUENCY OF ANALYSIS | SAMPLE TYPE |
|------------------|---------------------|---------|-------|--------------------------|---------|---------|-----------------|-----------------------|-------------|
| | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | | | |
| Flow | Sample Measure. | No flow | MGD | | | | | 2/mo | EST |
| | Permit Require. | | | | | | | | |
| Suspended Solids | Sample Measure. | | | | | | MG/L | 2/mo | GRAB |
| | Permit Require. | | | | | | | | |
| pH | Sample Measure. | | | | | | U.O. | 2/mo | GRAB |
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I hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am duly qualified to make such a statement.

Andrew M. Dulick
 Signature of Principal Executive Officer

NAME/TITLE: PRINCIPAL EXECUTIVE OFFICER
 Andrew M. Dulick
 Chemistry Manager

TELEPHONE
 412-393-5113

DATE
 92 06 24

FOR THE NATIONAL POLLUTION DISCHARGE ELIMINATION SYSTEM (NPDES)

Month: MAY
Year: 1992

1. Complete monthly and submit with each DMR. Attach additional sheets and comments as needed for completeness and clarity.
2. Sludge production information will be used to evaluate plant performance. Report only sludge which has been removed from digesters and other solids which have been permanently removed from the treatment process. Do not include sludge from boiler plants which is processed at your facility.
3. In the disposal site section, report all sludge leaving your facility for disposal. If another plant processes and disposes of your sludge, just provide the name of that plant. If you dispose of sludge from other plants, include their tonnage in the disposal site section and provide their names and individual dry tonnage on the back of this form.
4. If no sludge was removed, note on form.

Permittee: Duquesne Light Company
Plant: Barnes Valley Power Station Unit 1
NPDES: PA 0025615
Municipality: Shippingport PA
County: DeKalb

Pre-incineration weight = _____ dry tons
Post-incineration weight = _____ dry tons

| HAULED AS LIQUID SLUDGE | | | | HAULED AS DEWATERED SLUDGE | | | | | |
|-------------------------|---|------------|-----------------------|----------------------------|----------|----------------------------|--------------|-----------|----------|
| (Gallons) | X | (% Solids) | X (Conversion Factor) | = | Dry Tons | (Tons of Dewatered Sludge) | X (% Solids) | X (.01) = | Dry Tons |
| 0 | | 22 | .0000417 | | 0 | | | .01 | |
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| TOTAL | | | | = | 0 | TOTAL = | | | |

| | Site 1 | Site 2 | Site 3 | Site 4 |
|--------------------|-----------------|--------|--------|--------|
| Name: | Monaca Base STP | | | |
| Permit No.: | PA 0020125 | | | |
| Dry Tons Disposed: | 0 | | | |
| Type: (check one) | | | | |
| Landfill | | | | |
| Agr. Utilization | | | | |
| Other (specify) | | | | |
| County: | Beaver | | | |

Signature _____

Chem. Name: _____
Title: _____

Date 6/24/92

393-S113
Telephone

Month: MAY

Year: 1992

Instructions:

1. Complete monthly and submit with each DMR. Attach additional sheets and comments as needed for completeness and clarity.
2. Sludge production information will be used to evaluate plant performance. Report only sludge which has been removed from digesters and other solids which have been permanently removed from the treatment process. Do not include sludge from other plants which is processed at your facility.
3. In the disposal site section, report all sludge leaving your facility for disposal. If another plant processes and disposes of your sludge, just provide the name of that plant. If you dispose of sludge from other plants, include their tonnage in the disposal site section and provide their names and individual dry tonnage on the back of this form.
4. If no sludge was removed, note on form.

Permittee: Duquesne Light Co
Plant: Beaver Valley Power Station unit 2
NPDES: PA 0025615
Municipality: Shippingport PA
County: BEAVER

For sludge that is incinerated:

Pre-incineration weight * dry tons
Post-incineration weight * dry tons

SLUDGE PRODUCTION INFORMATION (prior to incineration)

| HAULED AS LIQUID SLUDGE | | | | HAULED AS DEWATERED SLUDGE | | | |
|-------------------------|---|------------|-----------------------|----------------------------|----------------------------|--------------|--------------------|
| (Gallons) | X | (% Solids) | X (Conversion Factor) | = Dry Tons | (Tons of Dewatered Sludge) | X (% Solids) | X (.01) = Dry Tons |
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DISPOSAL SITE INFORMATION: List all sites, even if not used this month

| | Site 1 | Site 2 | Site 3 | Site 4 |
|--------------------|-----------------|--------|--------|--------|
| Name: | Monaca Boro STP | | | |
| Permit No.: | PA 00-0125 | | | |
| Dry Tons Disposed: | 0.834 | | | |
| Type: (check one) | | | | |
| Landfill | | | | |
| Agr. Utilization | | | | |
| Other (specify) | | | | |
| County: | Beaver | | | |