

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

Telephone (412) 393-6000

September 22, 1992

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

NPDES Monthly Reports, EPA Permit No. PA0025615 & PA001589

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

Dear Sir:

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

Very truly yours,

T. P. Noonan  
General Manager  
Nuclear Operations Unit

DNH/ijj

cert #  
P 728 696 505

9210020328 920831  
PDR ADOCK 05000334  
R PDR

725 1/1



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

Telephone (412) 393-6000

September 22, 1992

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

September 22, 1992

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

NPDES Monthly Reports, EPA Permit Number PA0025615 & PA0001589

Gentlemen:

NPDES Monthly Reports for Duquesne Light Company, Beaver Valley Power Station and Shippingport Atomic Power Plant for August 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)

(2-15)

(17-19)

PA0025615

101 A

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
92 08 01 92 08 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

8830R

Form Approved

(508R US)

OMB No. 2040-0004

F - FINAL

101 CHEMICAL WASTE TREATMENT

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37)                        | SAMPLE MEASUREMENT | (3 Card Only)<br>QUANTITY OR LOADING<br>(46-53) |                   |        | (4 Card Only)<br>QUALITY OR CONCENTRATION<br>(54-61) |                    |                   |        | NO. EX<br>(62-63) | FREQUENCY OF ANALYSIS<br>(64-65) | SAMPLE TYPE<br>(66-70) |
|---|--------------------|---|-------------------|--------|--|--------------------|-------------------|--------|-------------------|----------------------------------|------------------------|
|   |                    | AVERAGE   | MAXIMUM           | UNITS  | MINIMUM  | AVERAGE            | MAXIMUM           | UNITS  |                   |                                  |                        |
| PH  |                    | *****   | *****             | ( )    | 7.51   | *****              | 7.61              | ( 12 ) | 0                 | 1/wk                             | G                      |
| 00400 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****   | *****             | ****   | 6.0<br>MINIMUM                                       | *****              | 9.0<br>MAXIMUM    | 30     |                   | WEEKLYGRAB                       |                        |
| SOLIDS, TOTAL<br>SUSPENDED                  | SAMPLE MEASUREMENT | *****   | *****             | ( )    | *****  | 6.90               | 13.00             | ( 19 ) | 0                 | 1/wk                             | 24C                    |
| 00530 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****   | *****             | ****   | *****  | 30<br>MNTH AVG     | 100<br>DLY MAX    | 76/L   |                   | WEEKLYCOMP-2                     |                        |
| OIL AND GREASE<br>FREON EXTR-GRAV METH      | SAMPLE MEASUREMENT | *****   | *****             | ( )    | *****  | 5.00               | 5.00              | ( 19 ) | 0                 | 1/wk                             | G                      |
| 00556 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****   | *****             | ****   | *****  | 15<br>MNTH AVG     | 20<br>DLY MAX     | 76/L   |                   | WEEKLYGRAB                       |                        |
| NITROGEN, AMMONIA<br>TOTAL (AS N)           | SAMPLE MEASUREMENT | *****   | *****             | ( )    | *****  |                    |                   | ( 19 ) |                   |                                  |                        |
| 00610 1 0 1<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****   | *****             | ****   | *****  | REPORT<br>MNTH AVG | REPORT<br>DLY MAX | 76/L   |                   | WEEKLYGRAB                       |                        |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT | SAMPLE MEASUREMENT | 0.006   | 0.015             | ( 03 ) | *****  | *****              | *****             | ( )    | 0                 | D                                | C                      |
| 50050 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | REPORT<br>MNTH AVG                              | REPORT<br>DLY MAX | MGD    | *****  | *****              | *****             | ****   |                   | DAILY CONTIN                     |                        |
| HYDRAZINE                                   | SAMPLE MEASUREMENT | *****   | *****             | ( )    | *****  |                    |                   | ( 19 ) |                   |                                  |                        |
| 81313 1 0 1<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****   | *****             | ****   | *****  | REPORT<br>MNTH AVG | REPORT<br>DLY MAX | 76/L   |                   | WEEKLYGRAB                       |                        |
|   | 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 THESE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.

*Andrew M. Dulick*  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113

AREA CODE NUMBER

DATE

92 09 22

YEAR MO DAY

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

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

*No periods of wet layup existed.*



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

NAME BEAVER VALLEY POWER STATION

ADDRESS PAQA 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

201 A

DISCHARGE NUMBER

NAJOW

(3000 00)

1 - FISCAL

201 COTTONER REGENERANTS

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR 92 MO 08 DAY 01 TO YEAR 92 MO 08 DAY 11  
(120-21) (123-23) (124-25) (126-27) (128-29) (130-31)

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37)                        | SAMPLE MEASUREMENT | QUANTITY OR LOADING<br>(34-41) |                    |                  | QUALITY OR CONCENTRATION<br>(46-53) |                    |                    | UNITS  | NO. EX<br>(62-63) | FREQUENCY OF ANALYSIS<br>(64-65) | SAMPLE TYPE<br>(69-70) |
|---|--------------------|--------------------------------|--------------------|------------------|-------------------------------------|--------------------|--------------------|--------|-------------------|----------------------------------|------------------------|
|   |                    | AVERAGE<br>(46-53)             | MAXIMUM<br>(54-61) | UNITS<br>(54-61) | MINIMUM<br>(54-61)                  | AVERAGE<br>(46-53) | MAXIMUM<br>(54-61) |        |                   |                                  |                        |
| PH  |                    | *****                          | *****              | ( )              | 7.40                                | *****              | 7.80               | ( 12 ) | 0                 | 2/m                              | G                      |
| 00400 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****                          | *****              | ****             | 6.0<br>MINIMUM                      | *****              | 9.0<br>MAXIMUM     | 50     |                   | TWICE/GRAB<br>MONTH              |                        |
| SOLIDS, TOTAL<br>SUSPENDED                  |                    | *****                          | *****              | ( )              | *****                               | 4.00               | 4.00               | ( 19 ) | 0                 | 2/m                              | G                      |
| 00530 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****                          | *****              | ****             | *****                               | 30<br>Mnth AVG     | 100<br>DLY MAX     | MG/L   |                   | TWICE/GRAB<br>MONTH              |                        |
| OIL AND GREASE                              |                    | *****                          | *****              | ( )              | *****                               | 5.00               | 5.00               | ( 19 ) | 0                 | 2/m                              | G                      |
| FREON EXTH-GRAY METH                        |                    | *****                          | *****              | ****             | *****                               | 15<br>Mnth AVG     | 20<br>DLY MAX      | MG/L   |                   | TWICE/GRAB<br>MONTH              |                        |
| 00556 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****                          | *****              | ****             | *****                               | *****              | *****              | ( )    | 0                 | 2/m                              | EST                    |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT |                    | 0.001                          | 0.019              | ( 03 )           | *****                               | *****              | *****              | ****   |                   | TWICE/ESTIMA<br>MONTH            |                        |
| 50050 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | REPORT<br>Mnth AVG             | REPORT<br>DLY MAX  | MGD              | *****                               | *****              | *****              | ****   |                   |                                  |                        |
|   | 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 § 1319. (Penalties under these statutes may include fines up to \$20,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

412 393-5113

TELEPHONE

412 393-5113

DATE

92 09 22

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)

(12-16)

PA0025615

PERMIT NUMBER

(17-19)

301 A

DISCHARGE NUMBER

SAJ01

(SUBS US)

F - FINAL

Form Approved

OMB No. 2040-0004

UNIT 2 AUA BOILER FLOWDOWN

MONITORING PERIOD

FROM YEAR 92 MO 08 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<br>(32-37)   |                       | (3 Card Only) QUANTITY OR LOADING<br>(46-53) |                   |       | (4 Card Only) QUALITY OR CONCENTRATION<br>(54-61) |               |                | NO.<br>EX<br>(62-63) | FREQUENCY<br>OF<br>ANALYSIS<br>(64-65) | SAMPLE<br>TYPE<br>(66-70) |
|--|-----------------------|--|-------------------|-------|---|---------------|----------------|----------------------|--|---------------------------|
|  |                       | AVERAGE                                      | MAXIMUM           | UNITS | MINIMUM   | AVERAGE       | MAXIMUM        |                      |  |                           |
| SOLIDS, TOTAL<br>SUSPENDED<br>00530 1 0 0<br>EFFLUENT GROSS VALUE                  | SAMPLE<br>MEASUREMENT | *****  | *****             | ( )   | *****   | 4.00          | 4.00           | (19)                 | 0                                      | 2/m G                     |
|  | PERMIT<br>REQUIREMENT | *****  | *****             | ****  | *****   | 30<br>MTH AVG | 100<br>DLY MAX | MG/L                 |  | TWICE/GRAB<br>MONTH       |
| OIL AND GREASE<br>FREON EXTR-GRAV METH<br>00556 1 0 0<br>EFFLUENT GROSS VALUE      | SAMPLE<br>MEASUREMENT | *****  | *****             | ( )   | *****   | 5.00          | 5.00           | (19)                 | 0                                      | 2/m G                     |
|  | PERMIT<br>REQUIREMENT | *****  | *****             | ****  | *****   | 15<br>MTH AVG | 20<br>DLY MAX  | MG/L                 |  | TWICE/GRAB<br>MONTH       |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT<br>50050 1 0 0<br>EFFLUENT GROSS VALUE | SAMPLE<br>MEASUREMENT | 0.001  | 0.001             | (03)  | *****   | *****         | *****          | ( )                  | 0                                      | 1/w est                   |
|  | PERMIT<br>REQUIREMENT | REPORT<br>MTH AVG                            | REPORT<br>DLY MAX | MGD   | *****   | *****         | *****          | ****                 |  | WEEKLY ESTIMA             |
|  | SAMPLE<br>MEASUREMENT |  |                   |       |   |               |                |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |  |                   |       |   |               |                |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |  |                   |       |   |               |                |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |  |                   |       |   |               |                |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |  |                   |       |   |               |                |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |  |                   |       |   |               |                |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |  |                   |       |   |               |                |                      |  |                           |
|  | PERMIT<br>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.)

SIGNATURE OF PRINCIPAL EXECUTIVE

OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

412  
AREA  
CODE

393-5113  
NUMBER

92 09 22  
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) PA0025615 (17-19) 401 A  
 PERMIT NUMBER DISCHARGE NUMBER

HAJ00 Form Approved  
 (SUBS 05) OMB No. 2040-0004  
 P - FINAL  
 CHEN. FEED AREA OF AUX BOILERS

MONITORING PERIOD  
 FROM YEAR 92 MO 08 DAY 01 TO YEAR 92 MO 09 DAY 31  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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

| PARAMETER<br>(32-37)                        | SAMPLE MEASUREMENT | (3 Card Only) QUANTITY OR LOADING<br>(46-53) |                   |       | (4 Card Only) QUALITY OR CONCENTRATION<br>(38-45) |               |                   | NO. EX. (62-63) | FREQUENCY OF ANALYSIS<br>(64-65) | SAMPLE TYPE<br>(66-70) |
|---|--------------------|--|-------------------|-------|---|---------------|-------------------|-----------------|----------------------------------|------------------------|
|   |                    | AVERAGE                                      | MAXIMUM           | UNITS | MINIMUM   | AVERAGE       | MAXIMUM           |                 |                                  |                        |
| PH  | SAMPLE MEASUREMENT | *****  | *****             | ( )   |   | *****         |                   | ( 12 )          |                                  |                        |
| 00400 1 0 1<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ****  | 6.0<br>MINIMUM                                    | *****         | REPORT<br>MAXIMUM | 50              | TWICE/GRAB<br>MONTH              |                        |
| SOLIDS, TOTAL<br>SUSPENDED                  | SAMPLE MEASUREMENT | *****  | *****             | ( )   | *****   |               |                   | ( 19 )          |                                  |                        |
| 00530 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ****  | *****   | 30<br>MTH AVG | 100<br>DLY MAX    | 30/L            | TWICE/GRAB<br>MONTH              |                        |
| OIL AND GREASE<br>FREON EXTR-GRAV METH      | SAMPLE MEASUREMENT | *****  | *****             | ( )   | *****   |               |                   | ( 19 )          |                                  |                        |
| 00556 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ****  | *****   | 15<br>MTH AVG | 20<br>DLY MAX     | 10/L            | TWICE/GRAB<br>MONTH              |                        |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT | SAMPLE MEASUREMENT | NO FLOW ( 03 )                               |                   |       | *****   | *****         | *****             | ( )             |                                  |                        |
| 50050 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | REPORT<br>MTH AVG                            | REPORT<br>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 USC § 1001 AND 33 USC § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.

*Andrew M. Dulick*  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113

AREA CODE NUMBER

DATE

92 09 22

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** DEWEY 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** **501 A**  
**PERMIT NUMBER** **DISCHARGE NUMBER**

Form Approved  
 OMB No. 2040-0004  
 (SUAR 05)  
 F - FINAL  
 UNIT 1 GEARTH BLWDRN FILT 3W

**MONITORING PERIOD**  
 FROM YEAR MO DAY TO YEAR MO DAY  
 92 06 01 92 06 31  
 (20/21) (22/23) (24/25) (26/27) (28/29) (30/31)

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37)                                    | X                  | (3 Card Only) QUANTITY OR LOADING<br>(46-53) |         |       | (4 Card Only) QUALITY OR CONCENTRATION<br>(38-45) |         |         | (46-53)    |       |  | NO. EX<br>(52-53) | FREQUENCY OF ANALYSIS<br>(54-55) | SAMPLE TYPE<br>(59-70) |
|---|--------------------|--|---------|-------|---|---------|---------|------------|-------|--|-------------------|----------------------------------|------------------------|
|   |                    | AVERAGE                                      | MAXIMUM | UNITS | MINIMUM   | AVERAGE | MAXIMUM | UNITS      |       |  |                   |                                  |                        |
| SOLIDS, TOTAL SUSPENDED<br>00530 1 0 0                  | SAMPLE MEASUREMENT | *****  | *****   | ( )   | *****   |         |         | ( 19)      |       |  |                   |                                  |                        |
| EFFLUENT GROSS VALUE                                    | PERMIT REQUIREMENT | *****  | *****   | ****  | *****   | 30      | 100     | WEEKLYGRAB |       |  |                   |                                  |                        |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT<br>50050 1 0 0 | SAMPLE MEASUREMENT | NO FLOW                                      |         |       | ( 03)   | *****   | *****   | *****      | ( )   |  |                   |                                  |                        |
| EFFLUENT GROSS VALUE                                    | PERMIT REQUIREMENT | REPORT                                       | REPORT  | EGD   | *****   | *****   | *****   | ****       | ***** |  |                   |                                  | WEEKLYESTIMA           |
|   | 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 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

*Andrew Dulick*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113

AREA CODE NUMBER

DATE

92 09 22

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)

PA0025615

PERMIT NUMBER

(17-19)

001 A

DISCHARGE NUMBER

PAJGA

(SUBR US)

F - FINAL

UNITS 152 COOLG. TOWER BLWDN.

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

| FROM | YEAR    | MO      | DAY     | TO | YEAR    | MO      | DAY     |
|------|---------|---------|---------|----|---------|---------|---------|
|      | 92      | 08      | 01      |    | 92      | 08      | 31      |
|      | (20-21) | (22-23) | (24-25) |    | (26-27) | (28-29) | (30-31) |

\*\*\* NO DISCHARGE [ ] \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37) |                    | (1 Card Only)<br>QUANTITY OR LOADING<br>(46-53) |         |       | (4 Card Only)<br>QUALITY OR CONCENTRATION<br>(54-61) |           |          | NO.<br>EX<br>(62-63) | FREQUENCY<br>OF<br>ANALYSIS<br>(64-65) | SAMPLE<br>TYPE<br>(66-70) |
|----------------------|--------------------|---|---------|-------|--|-----------|----------|----------------------|--|---------------------------|
|                      |                    | AVERAGE   | MAXIMUM | UNITS | MINIMUM  | AVERAGE   | MAXIMUM  |                      |  |                           |
| PH                   | SAMPLE MEASUREMENT | *****   | *****   | ( )   | 7.85   | *****     | 8.19     | (12)                 | 0                                      | W G                       |
| 00400 1 0 0          | PERMIT REQUIREMENT | *****   | *****   | ****  | 6.0  | *****     | 9.0      | SD                   |  | WEEKLYGRAB                |
| EFFLUENT GROSS VALUE |                    |   |         |       | MINIMUM  |           | MAXIMUM  |                      |  |                           |
| NITROGEN, AMMONIA    | SAMPLE MEASUREMENT | *****   | *****   | ( )   | *****  |           |          | (19)                 |  |                           |
| TOTAL (AS N)         |                    |   |         |       |  |           |          |                      |  |                           |
| 00610 1 0 1          | PERMIT REQUIREMENT | *****   | *****   | ****  | *****  | REPORT    | REPORT   | MG/L                 |  | WEEKLYGRAB                |
| EFFLUENT GROSS VALUE |                    |   |         |       |  | MONTH AVG | DLY MAX  |                      |  |                           |
| FLOW, IN CONDUIT OR  | SAMPLE MEASUREMENT | 45.230  | 52.416  | (03)  | *****  | *****     | *****    | ( )                  | 0                                      | D C                       |
| THRU TREATMENT PLANT |                    |   |         |       |  |           |          |                      |  |                           |
| 50050 1 0 0          | PERMIT REQUIREMENT | REPORT  | REPORT  |       | *****  | *****     | *****    | ****                 |  | DAILY CONTIN              |
| EFFLUENT GROSS VALUE |                    | MONTH AVG                                       | DLY MAX | MGD   |  |           |          |                      |  |                           |
| CHLORINE, FREE       | SAMPLE MEASUREMENT | *****   | *****   | ( )   | *****  | 0.18      | 0.25     | (19)                 | 0                                      | 2/b G                     |
| AVAILABLE            |                    |   |         |       |  |           |          |                      |  |                           |
| 50064 1 0 1          | PERMIT REQUIREMENT | *****   | *****   | ****  | *****  | 0.2       | 0.5      | 40/L                 |  | CONTINUOUS                |
| EFFLUENT GROSS VALUE |                    |   |         |       |  | DAILY MAX | INST MAX |                      |  |                           |
| HYDRAZINE            | SAMPLE MEASUREMENT | *****   | *****   | ( )   | *****  | *****     |          | (19)                 |  |                           |
|                      |                    |   |         |       |  |           |          |                      |  |                           |
| 81313 1 0 1          | PERMIT REQUIREMENT | *****   | *****   | ****  | *****  | *****     | 0        | MG/L                 |  | WEEKLYGRAB                |
| EFFLUENT GROSS VALUE |                    |   |         |       |  |           | DLY MAX  |                      |  |                           |
|                      | 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 \$100,000 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 09 22

YEAR MO DAY

COMMENTS 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. No wet layup conditions existed.



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

NAME BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-18)

(37-19)

PA0025615

102 A

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

| FROM | YEAR    | MO      | DAY     | TO | YEAR    | MO      | DAY     |
|------|---------|---------|---------|----|---------|---------|---------|
|      | 92      | 06      | 01      |    | 92      | 09      | 31      |
|      | (20-21) | (22-23) | (24-25) |    | (26-27) | (28-29) | (30-31) |

MAJOR

Form Approved

(301.05)

OMB No. 2040-0094

1 - FINAL

102 INTAKE SCREENHOUSE

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37) |                    | (3 Card Only)<br>QUANTITY OR LOADING<br>(46-53) |         |        | (4 Card Only)<br>QUALITY OR CONCENTRATION<br>(45-53) |           |         |        | NO.<br>EX<br>(62-63) | FREQUENCY<br>OF<br>ANALYSIS<br>(64-65) | SAMPLE<br>TYPE<br>(66-70) |
|----------------------|--------------------|---|---------|--------|--|-----------|---------|--------|----------------------|--|---------------------------|
|                      |                    | AVERAGE   | MAXIMUM | UNITS  | MINIMUM  | AVERAGE   | MAXIMUM | UNITS  |                      |  |                           |
| PH                   | SAMPLE MEASUREMENT | *****   | *****   | ( )    | 7.58   | *****     | 7.67    | ( 12 ) |                      | 0 2/m                                  | G                         |
| 00400 1 0 0          | PERMIT REQUIREMENT | *****   | *****   | ***    | 6.0  | *****     | 9.0     | 30     |                      | TWICE/GRAB                             |                           |
| EFFLUENT GROSS VALUE |                    |   |         | ****   | MINIMUM  |           | MAXIMUM |        |                      | MONTH                                  |                           |
| SOLIDS, TOTAL        | SAMPLE MEASUREMENT | *****   | *****   | ( )    | *****  | 26.12     | 48.25   | ( 19 ) |                      | 0 2/m                                  | G                         |
| SUSPENDED            | PERMIT REQUIREMENT | *****   | *****   | ***    | *****  | 30        | 100     | MG/L   |                      | TWICE/GRAB                             |                           |
| 00530 1 0 0          |                    |   |         | ****   |  | MONTH AVG | DLY MAX |        |                      | MONTH                                  |                           |
| EFFLUENT GROSS VALUE |                    |   |         |        |  |           |         |        |                      |  |                           |
| OIL AND GREASE       | SAMPLE MEASUREMENT | *****   | *****   | ( )    | *****  | 5.07      | 5.14    | ( 19 ) |                      | 0 2/m                                  | G                         |
| FREON EXTH-GRAY METH | PERMIT REQUIREMENT | *****   | *****   | ***    | *****  | 15        | 20      | MG/L   |                      | TWICE/GRAB                             |                           |
| 00550 1 0 0          |                    |   |         | ****   |  | MONTH AVG | DLY MAX |        |                      | MONTH                                  |                           |
| EFFLUENT GROSS VALUE |                    |   |         |        |  |           |         |        |                      |  |                           |
| FLOW, IN CONDUIT OR  | SAMPLE MEASUREMENT | 0.001   | 0.001   | ( 03 ) | *****  | *****     | *****   | ( )    |                      | 0 2/m                                  | Est                       |
| THRU TREATMENT PLANT | PERMIT REQUIREMENT | REPORT  | REPORT  |        | *****  | *****     | *****   | ***    |                      | TWICE/ESTIMA                           |                           |
| 50050 1 0 0          |                    | MONTH AVG                                       | DLY MAX | MGD    |  |           |         | ****   |                      | MONTH                                  |                           |
| 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. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

*Andrew M. Dulick*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

412  
AREA CODE

393-5113  
NUMBER

92 09 22  
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)

(12-16)

(17-19)

PA0025615

PERMIT NUMBER

002 A

DISCHARGE NUMBER

BAJUH

Form Approved

OMB No. 2040-0004

(SUNR 05)

F - FINAL

INTAKE SCRUBB BACKWASH

MONITORING PERIOD

| FROM | YEAR    | MO      | DAY     | TO | YEAR    | MO      | DAY     |
|------|---------|---------|---------|----|---------|---------|---------|
|      | 92      | 08      | 01      |    | 92      | 08      | 31      |
|      | (20-23) | (12-23) | (24-25) |    | (26-27) | (28-29) | (30-31) |

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37)   |                    | (3 Card Only)<br>QUANTITY OR LOADING<br>(46-53) |                   |       | (4 Card Only)<br>QUANTITY OR CONCENTRATION<br>(54-61) |         |         | NO.<br>EX<br>(52-60) | FREQUENCY<br>OF<br>ANALYSIS<br>(64-68) | SAMPLE<br>TYPE<br>(69-70) |
|--|--------------------|---|-------------------|-------|---|---------|---------|----------------------|--|---------------------------|
|  |                    | AVERAGE   | MAXIMUM           | UNITS | MINIMUM   | AVERAGE | MAXIMUM | UNITS                |  |                           |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT<br>50050 1 0 0<br>EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | 0.002   | 0.046             | ( 03) | *****   | *****   | *****   | ( )                  | 0                                      | 1/w Est                   |
|  | PERMIT REQUIREMENT | REPORT<br>Mnth Avg                              | REPORT<br>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 |   |                   |       |   |         |         |                      |  |                           |
|  | 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 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE  
OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113

AREA  
CODE

NUMBER

DATE

92 09 22

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)

PA002-615

PERMIT NUMBER

(3-19)

103 A

DISCHARGE NUMBER

12301

(SUBR 05)

F - FINAL

30056 SETTLING BASIN

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
92 08 01 92 08 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37)                        | SAMPLE MEASUREMENT | (3 Card Only) QUANTITY OR LOADING<br>(46-53) |                   |        | (4 Card Only) QUALITY OR CONCENTRATION<br>(54-61) |                |                |        | NO. EX<br>(62-63) | FREQUENCY OF ANALYSIS<br>(64-65) | SAMPLE TYPE<br>(66-70) |
|---|--------------------|--|-------------------|--------|---|----------------|----------------|--------|-------------------|----------------------------------|------------------------|
|   |                    | AVERAGE                                      | MAXIMUM           | UNITS  | MINIMUM   | AVERAGE        | MAXIMUM        | UNITS  |                   |                                  |                        |
| PH  |                    | *****  | *****             | ( )    | 7.50  | *****          | 7.51           | ( 12 ) |                   | 0 2/m                            | G                      |
| 00400 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ****   | 6.0<br>MINIMUM                                    | *****          | 9.0<br>MAXIMUM | 50     |                   | TWICE/GRAB<br>MONTH              |                        |
| SOLIDS, TOTAL<br>SUSPENDED                  |                    | *****  | *****             | ( )    | *****   | 7.22           | 10.44          | ( 19 ) |                   | 0 2/m                            | 24K                    |
| 00530 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ****   | *****   | 30<br>Mnth AVG | 100<br>DLY MAX | MG/L   |                   | TWICE/COMP 24<br>MONTH           |                        |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT |                    | *****  | *****             | ( 03 ) | *****   | *****          | *****          | ( )    |                   | 0 2/m                            | Est                    |
| 50050 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | REPORT<br>Mnth AVG                           | REPORT<br>DLY MAX | MGD    | *****   | *****          | *****          | ****   |                   | TWICE/ESTIMA<br>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

TYPE'D 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 § 1339. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 3 years.)

TELEPHONE

412 393-5113

DATE

92 09 22

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

*Andrew Dulick*

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) **PA0025615** (17-19) **203 A**  
**PERMIT NUMBER** **DISCHARGE NUMBER**

**MAJOR**  
**(CJBA US)**  
**F - FINAL**  
**MAIN SEWAGE TMT PLANT**


Form Approved  
 OMB No. 2040-0004

**MONITORING PERIOD**  
 FROM YEAR 92 MO 08 DAY 01 TO YEAR 92 MO 08 DAY 31  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE [ ] \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37)                        |                    | (3 Card Only) QUANTITY OR LOADING<br>(46-51) |                   |        | (4 Card Only) QUALITY OR CONCENTRATION<br>(54-61) |                 |                |        | NO.<br>EX<br>(62-63) | FREQUENCY<br>OF<br>ANALYSIS<br>(64-65) | SAMPLE<br>TYPE<br>(66-70) |
|---|--------------------|--|-------------------|--------|---|-----------------|----------------|--------|----------------------|--|---------------------------|
|   |                    | AVERAGE                                      | MAXIMUM           | UNITS  | MINIMUM   | AVERAGE         | MAXIMUM        | UNITS  |                      |  |                           |
| PH  | SAMPLE MEASUREMENT | *****  | *****             | ( )    | 6.23  | *****           | 6.81           | ( 12 ) | 0                    | 2/m                                    | G                         |
| 00400 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ****   | 6.0<br>MINIMUM                                    | *****           | 9.0<br>MAXIMUM | 50     |                      | TWICE/GRAB<br>MONTH                    |                           |
| SOLIDS, TOTAL<br>SUSPENDED                  | SAMPLE MEASUREMENT | *****  | *****             | ( )    | *****   | 10.50           | 11.90          | ( 19 ) | 0                    | 2/m                                    | 8HC                       |
| 00530 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ****   | *****   | 30<br>Mnth AVG  | 60<br>DLY MAX  | MG/L   |                      | TWICE/COMP-8<br>MONTH                  |                           |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT | SAMPLE MEASUREMENT | 0.016  | 0.029             | ( 03 ) | *****   | *****           | *****          | ( )    | 0                    | 1/wk                                   | WAS.                      |
| 50050 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | 0.023<br>Mnth AVG                            | REPORT<br>DLY MAX | MGD    | *****   | *****           | *****          | 200    |                      | WEEKLY MEASRD                          |                           |
| COLIFORM, FECAL<br>GENERAL                  | SAMPLE MEASUREMENT | *****  | *****             | ( )    | *****   | 0.00            | *****          | ( 13 ) | 0                    | 2/m                                    | G                         |
| 74055 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ****   | *****   | 200<br>30DA GEO | *****          | 100ML  |                      | TWICE/GRAB<br>MONTH                    |                           |
| BOD, CARBONACEOUS<br>05 DAY, 20C            | SAMPLE MEASUREMENT | *****  | *****             | ( )    | *****   | 3.00            | 4.00           | ( 19 ) | 0                    | 2/m                                    | 8HC                       |
| 80082 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ****   | *****   | 25<br>Mnth AVG  | 50<br>DLY MAX  | MG/L   |                      | TWICE/COMP-8<br>MONTH                  |                           |
|   | SAMPLE MEASUREMENT |  |                   |        |   |                 |                |        |                      |  |                           |
|   | PERMIT REQUIREMENT |  |                   |        |   |                 |                |        |                      |  |                           |
|   | SAMPLE MEASUREMENT |  |                   |        |   |                 |                |        |                      |  |                           |
|   | PERMIT REQUIREMENT |  |                   |        |   |                 |                |        |                      |  |                           |

|   |  |  |           |          |      |    |    |              |        |
|---|--|--|-----------|----------|------|----|----|--------------|--------|
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER<br><br>A. M. Dulick<br>Chemistry Manager<br><br>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 19 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.) | <br>SIGNATURE OF PRINCIPAL EXECUTIVE<br>OFFICER OR AUTHORIZED AGENT | TELEPHONE |          | DATE |    |    |              |        |
|   |  |  | 412       | 393-5113 | 92   | 09 | 22 | AREA<br>CODE | NUMBER |

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** 910 BOX 4  
ATTN: ANDREW DULICK  
SHIPPENSBURG PA 15077  
**FACILITY**  
**LOCATION**  
**ATTN: ANDREW DULICK**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
**DISCHARGE MONITORING REPORT (DMR)**  
 (218) **PA0025515** (219) **303 A**  
**PERMIT NUMBER** **DISCHARGE NUMBER**

03J08 Form Approved  
 (5088 US) OMB No. 2040-0004  
**F - FINAL**  
**UNIT 1 OIL WATER SEPARATOR**

**MONITORING PERIOD**  
 FROM YEAR 92 MO 08 DAY 01 TO YEAR 92 MO 08 DAY 31  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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

| PARAMETER<br>(32-37)                        | SAMPLE MEASUREMENT | (1 Card Only) QUANTITY OR LOADING<br>(46-51) |                   |        | (4 Card Only) QUALITY OR CONCENTRATION<br>(54-61) |                |                |        | NO. EX<br>(62-63) | FREQUENCY OF ANALYSIS<br>(64-65) | SAMPLE TYPE<br>(66-70) |
|---|--------------------|--|-------------------|--------|---|----------------|----------------|--------|-------------------|----------------------------------|------------------------|
|   |                    | AVERAGE                                      | MAXIMUM           | UNITS  | MINIMUM   | AVERAGE        | MAXIMUM        | UNITS  |                   |                                  |                        |
| PH  |                    | *****  | *****             | ( )    | 6.93  | *****          | 8.46           | ( 12 ) |                   | 1/wk                             | G                      |
| 00400 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ***    | 6.0<br>MINIMUM                                    | *****          | 9.0<br>MAXIMUM | 50     |                   | WEEKLY                           | GRAB                   |
| SOLIDS, TOTAL<br>SUSPENDED                  |                    | *****  | *****             | ( )    | *****   | 8.16           | 13.09          | ( 19 ) |                   | 1/wk                             | G                      |
| 00530 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ***    | *****   | 30<br>METH AVG | 100<br>DLY MAX | 70/L   |                   | WEEKLY                           | GRAB                   |
| OIL AND GREASE<br>FREON EXTH-GRAY METH      |                    | *****  | *****             | ( )    | *****   | 5.00           | 5.00           | ( 19 ) |                   | 1/wk                             | G                      |
| 00556 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ***    | *****   | 15<br>METH AVG | 20<br>DLY MAX  | MG/L   |                   | WEEKLY                           | GRAB                   |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT |                    | 0.09   | 0.056             | ( 03 ) | *****   | *****          | *****          | ( )    |                   | 1/wk                             | EST                    |
| 50050 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | REPORT<br>METH AVG                           | REPORT<br>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 33 U.S.C. § 1919. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

*Andrew Dulick*

TELEPHONE

412 393-5113

DATE

92 09 22

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)

PA0025615

PERMIT NUMBER

(17-19)

403 A

DISCHARGE NUMBER

08338

(5008 US)

F - FINAL

CONDENSATE BLOWDOWN & RIVER NAT

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR 92 MO 08 DAY 01 TO YEAR 92 MO 03 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE ☒ \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37) |                    | (3 Card Only) QUANTITY OR LOADING<br>(46-53) |         |       | (4 Card Only) QUALITY OR CONCENTRATION<br>(54-61) |          |         |       | NO.<br>EX<br>(62-63) | FREQUENCY<br>OF<br>ANALYSIS<br>(64-65) | SAMPLE<br>TYPE<br>(66-70) |
|----------------------|--------------------|--|---------|-------|---|----------|---------|-------|----------------------|--|---------------------------|
|                      |                    | AVERAGE                                      | MAXIMUM | UNITS | MINIMUM   | AVERAGE  | MAXIMUM | UNITS |                      |  |                           |
| PH                   | SAMPLE MEASUREMENT | *****  | *****   | ( )   |   | *****    |         | ( 12) |                      |  |                           |
| 00400 1 0 0          | PERMIT REQUIREMENT | *****  | *****   | ***   | 6.0   | *****    | 9.0     |       |                      |  | WEEKLYGRAB                |
| EFFLUENT GROSS VALUE |                    |  |         | ****  | MINIMUM   |          | MAXIMUM | 50    |                      |  |                           |
| SOLIDS, TOTAL        | SAMPLE MEASUREMENT | *****  | *****   | ( )   | *****   |          |         | ( 19) |                      |  |                           |
| SUSPENDED            |                    |  |         |       |   |          |         |       |                      |  |                           |
| 00530 1 0 0          | PERMIT REQUIREMENT | *****  | *****   | ***   | *****   | 30       | 100     |       |                      |  | WEEKLYGRAB                |
| EFFLUENT GROSS VALUE |                    |  |         | ****  |   | ENTH AVG | DLY MAX | MG/L  |                      |  |                           |
| OIL AND GREASE       | SAMPLE MEASUREMENT | *****  | *****   | ( )   | *****   |          |         | ( 19) |                      |  |                           |
| PREON EXTH-GRAY METH |                    |  |         |       |   |          |         |       |                      |  |                           |
| 00556 1 0 0          | PERMIT REQUIREMENT | *****  | *****   | ***   | *****   | 15       | 20      |       |                      |  | WEEKLYGRAB                |
| EFFLUENT GROSS VALUE |                    |  |         | ****  |   | ENTH AVG | DLY MAX | MG/L  |                      |  |                           |
| NITROGEN, AMMONIA    | SAMPLE MEASUREMENT | *****  | *****   | ( )   | *****   |          |         | ( 19) |                      |  |                           |
| TOTAL (AS N)         |                    |  |         |       |   |          |         |       |                      |  |                           |
| 00610 1 0 1          | PERMIT REQUIREMENT | *****  | *****   | ***   | *****   | REPORT   | REPORT  |       |                      |  | WEEKLYGRAB                |
| EFFLUENT GROSS VALUE |                    |  |         | ****  |   | ENTH AVG | DLY MAX | MG/L  |                      |  |                           |
| FLOW, IN CONDUIT OR  | SAMPLE MEASUREMENT | No Flow                                      |         | ( 03) | *****   | *****    | *****   | ( )   |                      |  |                           |
| THRU TREATMENT PLANT |                    |  |         |       |   |          |         |       |                      |  |                           |
| 50050 1 0 0          | PERMIT REQUIREMENT | REPORT                                       | REPORT  |       | *****   | *****    | *****   | ***   |                      |  | WEEKLYESTIMA              |
| EFFLUENT GROSS VALUE |                    | ENTH AVG                                     | DLY MAX | MGD   |   |          |         | ****  |                      |  |                           |
| HYDRAZINE            | SAMPLE MEASUREMENT | *****  | *****   | ( )   | *****   | *****    |         | ( 19) |                      |  |                           |
|                      |                    |  |         |       |   |          |         |       |                      |  |                           |
| 81313 1 0 1          | PERMIT REQUIREMENT | *****  | *****   | ***   | *****   | *****    | 0       |       |                      |  | WEEKLYGRAB                |
| EFFLUENT GROSS VALUE |                    |  |         | ****  |   |          | DLY MAX | MG/L  |                      |  |                           |
|                      | 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 3 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

412 | 393-5113 | 92 | 09 | 22  
AREA CODE | NUMBER | YEAR | MO | DAY

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

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

No 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)

(12-16)  
PA002561L  
PERMIT NUMBER

(17-19)  
003 A  
DISCHARGE NUMBER

SAJCA  
(5888 05)  
F - FINAL

Form Approved  
OMB No. 2040-0004

003 UNCONTAMINATED STORM WATER

MONITORING PERIOD

FROM YEAR 92 MO 03 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<br>(32-37)   |                       | (3 Card Only)<br>QUANTITY OR LOADING<br>(46-53) |                   |        | (4 Card Only)<br>QUALITY OR CONCENTRATION<br>(54-61) |         |         |       | NO.<br>EX<br>(62-63) | FREQUENCY<br>OF<br>ANALYSIS<br>(64-65) | SAMPLE<br>TYPE<br>(69-70) |
|--|-----------------------|---|-------------------|--------|--|---------|---------|-------|----------------------|--|---------------------------|
|  |                       | AVERAGE   | MAXIMUM           | UNITS  | MINIMUM  | AVERAGE | MAXIMUM | UNITS |                      |  |                           |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT<br>50050 1 0 0<br>EFFLUENT GROSS VALUE | SAMPLE<br>MEASUREMENT | 0.036   | 0.056             | ( 03 ) | *****  | *****   | *****   | ( )   |                      | 0 2/m                                  | EST                       |
|  | PERMIT<br>REQUIREMENT | REPORT<br>MTH AVG                               | REPORT<br>DLY MAX | MGD    | *****  | *****   | *****   | ****  |                      | TWICE/ESTIMA<br>MONTH                  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |        |  |         |         |       |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |        |  |         |         |       |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |        |  |         |         |       |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |        |  |         |         |       |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |        |  |         |         |       |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |        |  |         |         |       |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |        |  |         |         |       |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |        |  |         |         |       |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |        |  |         |         |       |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |        |  |         |         |       |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |        |  |         |         |       |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |        |  |         |         |       |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |        |  |         |         |       |                      |  |                           |
|  | PERMIT<br>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 5 years.

  
SIGNATURE OF PRINCIPAL EXECUTIVE  
OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113

AREA  
CODE

NUMBER

DATE

92 09 22

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 (506A 05) Form Approved  
OMB No. 2040-0004  
F - FINAL  
UNIT ONE COOLING TOWER OVERFLOW  
\*\*\* NO DISCHARGE \*\*\*  
NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37)                        | X                  | (1 Card Only) QUANTITY OR LOADING<br>(46-53) |                   |       | (4 Card Only) QUALITY OR CONCENTRATION<br>(54-61) |                 |                |        | NO. EX<br>(62-63) | FREQUENCY OF ANALYSIS<br>(64-68) | SAMPLE TYPE<br>(69-70) |
|---|--------------------|--|-------------------|-------|---|-----------------|----------------|--------|-------------------|----------------------------------|------------------------|
|   |                    | AVERAGE                                      | MAXIMUM           | UNITS | MINIMUM   | AVERAGE         | MAXIMUM        | UNITS  |                   |                                  |                        |
| PH  | SAMPLE MEASUREMENT | *****  | *****             | ( )   |   | *****           |                | ( 12 ) |                   |                                  |                        |
| 00400 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ***   | 6.0<br>MINIMUM                                    | *****           | 9.0<br>MAXIMUM | 50     |                   | WEEKLY GRAB                      |                        |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT | SAMPLE MEASUREMENT | NO FLOW                                      |                   |       | ( 03 )  | *****           | *****          | ( )    |                   |                                  |                        |
| 50050 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | REPORT<br>Mnth Avg                           | REPORT<br>Dly Max | SGD   | *****   | *****           | *****          | ***    |                   | WEEKLY SEASRD                    |                        |
| CHLORINE, FREE<br>AVAILABLE                 | SAMPLE MEASUREMENT | *****  | *****             | ( )   | *****   |                 |                | ( 19 ) |                   |                                  |                        |
| 50064 1 0 1<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ***   | *****   | 0.2<br>DAILY MX | 0.5<br>INST MX | SG/L   |                   | CONTINUOUS                       |                        |
|   | SAMPLE MEASUREMENT |  |                   |       |   |                 |                |        |                   |                                  |                        |
|   | PERMIT REQUIREMENT |  |                   |       |   |                 |                |        |                   |                                  |                        |
|   | SAMPLE MEASUREMENT |  |                   |       |   |                 |                |        |                   |                                  |                        |
|   | PERMIT REQUIREMENT |  |                   |       |   |                 |                |        |                   |                                  |                        |
|   | SAMPLE MEASUREMENT |  |                   |       |   |                 |                |        |                   |                                  |                        |
|   | PERMIT REQUIREMENT |  |                   |       |   |                 |                |        |                   |                                  |                        |
|   | SAMPLE MEASUREMENT |  |                   |       |   |                 |                |        |                   |                                  |                        |
|   | PERMIT REQUIREMENT |  |                   |       |   |                 |                |        |                   |                                  |                        |

|   |  |   |                           |                  |
|---|--|---|---------------------------|------------------|
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER<br>A. M. Dulick<br>Chemistry Manager<br>TYPED OR PRINTED | I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.) | SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT<br> | TELEPHONE<br>412 393-5113 | DATE<br>92 09 22 |
|---|--|---|---------------------------|------------------|

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

006 A

DISCHARGE NUMBER

MAJOR

(5000 05)

2 - FINAL

AUA-INTAKE SCREEN BACKWASH

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

| FROM | YEAR    | MO      | DAY     | TO | YEAR    | MO      | DAY     |
|------|---------|---------|---------|----|---------|---------|---------|
|      | 92      | 08      | 01      |    | 92      | 08      | 31      |
|      | (20-21) | (22-23) | (24-25) |    | (26-27) | (28-29) | (30-31) |

\*\*\* NO DISCHARGE [X] \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37)  | SAMPLE MEASUREMENT | (1 Card Only) QUANTITY OR LOADING<br>(46-53) |                |        | (4 Card Only) QUALITY OR CONCENTRATION<br>(46-53) |         |         | NO. EX<br>(62-63) | FREQUENCY OF ANALYSIS<br>(64-65) | SAMPLE TYPE<br>(69-70) |
|---|--------------------|--|----------------|--------|---|---------|---------|-------------------|----------------------------------|------------------------|
|   |                    | AVERAGE                                      | MAXIMUM        | UNITS  | MINIMUM   | AVERAGE | MAXIMUM |                   |                                  |                        |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT<br>50050 1 0 0<br>EFFLUENT GROSS VALUE | <i>No Flow</i>     |  |                | ( 03 ) | *****   | *****   | *****   | ( )               |                                  |                        |
|   | PERMIT REQUIREMENT | REPORT MONTH AVG                             | REPORT DLY MAX | NGD    | *****   | *****   | *****   | ****              |                                  | WEEKLY ESTIMATE        |
|   | SAMPLE MEASUREMENT |  |                |        |   |         |         |                   |                                  |                        |
|   | PERMIT REQUIREMENT |  |                |        |   |         |         |                   |                                  |                        |
|   | SAMPLE MEASUREMENT |  |                |        |   |         |         |                   |                                  |                        |
|   | PERMIT REQUIREMENT |  |                |        |   |         |         |                   |                                  |                        |
|   | SAMPLE MEASUREMENT |  |                |        |   |         |         |                   |                                  |                        |
|   | PERMIT REQUIREMENT |  |                |        |   |         |         |                   |                                  |                        |
|   | SAMPLE MEASUREMENT |  |                |        |   |         |         |                   |                                  |                        |
|   | PERMIT REQUIREMENT |  |                |        |   |         |         |                   |                                  |                        |
|   | SAMPLE MEASUREMENT |  |                |        |   |         |         |                   |                                  |                        |
|   | PERMIT REQUIREMENT |  |                |        |   |         |         |                   |                                  |                        |
|   | SAMPLE MEASUREMENT |  |                |        |   |         |         |                   |                                  |                        |
|   | PERMIT REQUIREMENT |  |                |        |   |         |         |                   |                                  |                        |
|   | SAMPLE MEASUREMENT |  |                |        |   |         |         |                   |                                  |                        |
|   | PERMIT REQUIREMENT |  |                |        |   |         |         |                   |                                  |                        |

|  |   |              |        |      |        |
|--|---|--------------|--------|------|--------|
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER | I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$100,000 and/or maximum imprisonment of between 6 months and 3 years.) | TELEPHONE    | DATE   |      |        |
| A. M. Dulick<br>Chemistry Manager      |   | 412 393-5113 | 92     | 09   | 22     |
| 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)

NO DISCHARGE



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

NAME LEAVEL 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

HAJ01

Form Approved

OMB No. 2040-0004

(506X 05)

F - FINAL

AUX. INTAKE SYSTEM

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
92 08 01 92 08 31

(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE [X] \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37)                     |                    | (1 Card Only) QUANTITY OR LOADING<br>(46-53) |         |       | (4 Card Only) QUALITY OR CONCENTRATION<br>(54-61) |          |         | NO. EX<br>(62-63) | FREQUENCY OF ANALYSIS<br>(64-68) | SAMPLE TYPE<br>(69-70) |
|--|--------------------|--|---------|-------|---|----------|---------|-------------------|----------------------------------|------------------------|
|  |                    | AVERAGE                                      | MAXIMUM | UNITS | MINIMUM   | AVERAGE  | MAXIMUM |                   |                                  |                        |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT | SAMPLE MEASUREMENT | NO DISCHARGE                                 |         |       | ( 03 )  | *****    | *****   | *****             | ( )                              |                        |
| 50050 1 0 0                              | PERMIT REQUIREMENT | REPORT                                       | REPORT  |       |   |          |         |                   |                                  |                        |
| EFFLUENT GROSS VALUE                     |                    | MONTH AVG                                    | DLY MAX | MGD   |   |          |         |                   |                                  | WEEKLY ESTIMATE        |
| CHLORINE, FREE AVAILABLE                 | SAMPLE MEASUREMENT | *****  | *****   | ( )   | *****   |          |         |                   | ( 19 )                           |                        |
| 50064 1 0 1                              | PERMIT REQUIREMENT | *****  | *****   | ****  | *****   | 0.2      | 0.5     |                   |                                  | WEEKLY GRAB            |
| EFFLUENT GROSS VALUE                     |                    |  |         | ****  |   | DAILY MX | INST MX | MG/L              |                                  |                        |
|  | SAMPLE MEASUREMENT |  |         |       |   |          |         |                   |                                  |                        |
|  | PERMIT REQUIREMENT |  |         |       |   |          |         |                   |                                  |                        |
|  | SAMPLE MEASUREMENT |  |         |       |   |          |         |                   |                                  |                        |
|  | PERMIT REQUIREMENT |  |         |       |   |          |         |                   |                                  |                        |
|  | SAMPLE MEASUREMENT |  |         |       |   |          |         |                   |                                  |                        |
|  | PERMIT REQUIREMENT |  |         |       |   |          |         |                   |                                  |                        |
|  | SAMPLE MEASUREMENT |  |         |       |   |          |         |                   |                                  |                        |
|  | PERMIT REQUIREMENT |  |         |       |   |          |         |                   |                                  |                        |
|  | SAMPLE MEASUREMENT |  |         |       |   |          |         |                   |                                  |                        |
|  | PERMIT REQUIREMENT |  |         |       |   |          |         |                   |                                  |                        |
|  | SAMPLE MEASUREMENT |  |         |       |   |          |         |                   |                                  |                        |
|  | PERMIT REQUIREMENT |  |         |       |   |          |         |                   |                                  |                        |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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.)

  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113

AREA CODE

NUMBER

DATE

92 09 22

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. NO FLOW



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)  
NAME BEAVER 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)  
PA0025615  
PERMIT NUMBER

(2-19)  
003 A  
DISCHARGE NUMBER

MAJOR

Form Approved

(505a-05)

OMB No. 2040-0004

2 - FINAL

UNIT 1 COOLING TOWER TUMPHOUSE

MONITORING PERIOD  
FROM YEAR MO DAY TO YEAR MO DAY  
92 08 01 92 08 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE [ ] \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37)                        |                    | (3 Card Only)<br>QUANTITY OR LOADING<br>(46-53) |                   |       | (4 Card Only)<br>QUALITY OR CONCENTRATION<br>(54-61) |                |                | NO.<br>EX<br>(62-63) | FREQUENCY<br>OF<br>ANALYSIS<br>(64-65) | SAMPLE<br>TYPE<br>(66-70) |
|---|--------------------|---|-------------------|-------|--|----------------|----------------|----------------------|--|---------------------------|
|   |                    | AVERAGE   | MAXIMUM           | UNITS | MINIMUM  | AVERAGE        | MAXIMUM        |                      |  |                           |
| PH  | SAMPLE MEASUREMENT | *****   | *****             | ( )   | 7.61   | *****          | 8.01           | ( 12)                | 0 2/m                                  | G                         |
| 00400 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****   | *****             | ****  | 6.0<br>MINIMUM                                       | *****          | 9.0<br>MAXIMUM | 50                   | TWICE/GRAB<br>MONTH                    |                           |
| SOLIDS, TOTAL<br>SUSPENDED                  | SAMPLE MEASUREMENT | *****   | *****             | ( )   | *****  | 5.49           | 6.98           | ( 19)                | 0 2/m                                  | G                         |
| 00530 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****   | *****             | ****  | *****  | 30<br>Mnth Avg | 100<br>DLY MAX | 50/L                 | TWICE/GRAB<br>MONTH                    |                           |
| OIL AND GREASE<br>FREON EXTH-GRAY METH      | SAMPLE MEASUREMENT | *****   | *****             | ( )   | 5.00   | 5.00           | 5.00           | ( 19)                | 0 2/m                                  | G                         |
| 00556 1 0 1<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****   | *****             | ****  | 15<br>30 DA AV                                       | 20<br>DAILY MX | 30<br>INST MX  | 50/L                 | TWICE/GRAB<br>MONTH                    |                           |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT | SAMPLE MEASUREMENT | 0.001   | 0.001             | ( 03) | *****  | *****          | *****          | ( )                  | 0 1/wk EST                             |                           |
| 50050 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | REPORT<br>Mnth Avg                              | REPORT<br>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

TYPE 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 § 1339. (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  
CODE393-5113  
NUMBER92 09 22  
YEAR MO DAY

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

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

NAME HEAVEN 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

HAJON

Form Approved

(508: 05)

OMB No. 2040-0004

F - FINAL

UNIT 2 COOLING WATER

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
92 08 01 92 08 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37) |                    | (3 Card Only) QUANTITY OR LOADING<br>(46-53) |         |       | (4 Card Only) QUALITY OR CONCENTRATION<br>(54-61) |          |         |       | NO.<br>EX<br>(62-63) | FREQUENCY<br>OF<br>ANALYSIS<br>(64-68) | SAMPLE<br>TYPE<br>(69-70) |
|----------------------|--------------------|--|---------|-------|---|----------|---------|-------|----------------------|--|---------------------------|
|                      |                    | AVERAGE                                      | MAXIMUM | UNITS | MINIMUM   | AVERAGE  | MAXIMUM | UNITS |                      |  |                           |
| Pa                   | SAMPLE MEASUREMENT | *****  | *****   | ( )   | 7.56  | *****    | 8.06    | ( 12) | 0                    | 1/wk                                   | G                         |
| 00400 1 0 0          | PERMIT REQUIREMENT | *****  | *****   | ****  | 6.0   | *****    | 9.0     | 50    |                      | WEEKLY                                 | GRAB                      |
| EFFLUENT GROSS VALUE |                    |  |         |       | MINIMUM   |          | MAXIMUM |       |                      |  |                           |
| FLOW, IN CONDUIT OR  | SAMPLE MEASUREMENT | 5,000  | 5,000   | ( 03) | *****   | *****    | *****   | ( )   | 0                    | 1/wk                                   | Meas.                     |
| THRU TREATMENT PLANT | PERMIT REQUIREMENT | REPORT                                       | REPORT  |       | *****   | *****    | *****   | ****  |                      | WEEKLY                                 | MEASRD                    |
| 50050 1 0 0          |                    | MONTH AVG                                    | DLY MAX | MGD   |   |          |         |       |                      |  |                           |
| EFFLUENT GROSS VALUE |                    |  |         |       |   |          |         |       |                      |  |                           |
| CHLORINE, FREE       | SAMPLE MEASUREMENT | *****  | *****   | ( )   | *****   | 0.00     | 0.00    | ( 19) | 0                    | 1/wk                                   | G                         |
| AVAILABLE            | PERMIT REQUIREMENT | *****  | *****   | ****  | *****   | 0.2      | 0.5     | MG/L  |                      | WEEKLY                                 | GRAB                      |
| 50064 1 0 1          |                    |  |         |       |   | DAILY MX | INST MX |       |                      |  |                           |
| EFFLUENT GROSS VALUE |                    |  |         |       |   |          |         |       |                      |  |                           |
|                      | 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 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.

*Andrew Dulick*  
SIGNATURE OF PRINCIPAL EXECUTIVE  
OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113

AREA  
CODE

NUMBER

DATE

92 09 22

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)

PERMIT NUMBER  
PA0025615

DISCHARGE NUMBER  
011 A

TABLE

(SUBA 05)

F - FINAL

DIESEL GEN & TURBINE DRAINS

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR 92 MO 03 DAY 01 TO YEAR 92 MO 06 DAY 31

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37)   |                       | (3 Card Only)<br>QUANTITY OR LOADING<br>(46-51) |                   |        | (4 Card Only)<br>QUALITY OR CONCENTRATION<br>(54-61) |         |         | NO.<br>EX<br>(62-63) | FREQUENCY<br>OF<br>ANALYSIS<br>(64-65) | SAMPLE<br>TYPE<br>(69-70) |
|--|-----------------------|---|-------------------|--------|--|---------|---------|----------------------|--|---------------------------|
|  |                       | AVERAGE   | MAXIMUM           | UNITS  | MINIMUM  | AVERAGE | MAXIMUM |                      |  |                           |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT<br>50050 1 0 0<br>EFFLUENT GROSS VALUE | SAMPLE<br>MEASUREMENT | 0.002   | 0.002             | ( 03 ) | *****  | *****   | *****   | ( )                  | 0                                      | 1/2 est                   |
|  | PERMIT<br>REQUIREMENT | REPORT<br>MTH AVG                               | REPORT<br>DLY MAX | NGD    | *****  | *****   | *****   | ****                 |  | WEEKLY ESTIMA             |
|  | SAMPLE<br>MEASUREMENT |   |                   |        |  |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |        |  |         |         |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |        |  |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |        |  |         |         |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |        |  |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |        |  |         |         |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |        |  |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |        |  |         |         |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |        |  |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |        |  |         |         |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |        |  |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |        |  |         |         |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |        |  |         |         |                      |  |                           |
|  | PERMIT<br>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

TELEPHONE

412 393-5113

AREA  
CODE

NUMBER

DATE

92 09 22

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

211 A

DISCHARGE NUMBER

MAJOR

(3084 03)

P - FINAL

211 TURBINE ALDG

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
92 08 01 92 08 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37)                        |                    | (3 Card Only) QUANTITY OR LOADING<br>(46-53) |                   |        | (4 Card Only) QUALITY OR CONCENTRATION<br>(54-61) |                |                |        | NO.<br>EX<br>(62-63) | FREQUENCY<br>OF<br>ANALYSIS<br>(64-68) | SAMPLE<br>TYPE<br>(69-70) |
|---|--------------------|--|-------------------|--------|---|----------------|----------------|--------|----------------------|--|---------------------------|
|   |                    | AVERAGE                                      | MAXIMUM           | UNITS  | MINIMUM   | AVERAGE        | MAXIMUM        | UNITS  |                      |  |                           |
| PH  | SAMPLE MEASUREMENT | *****  | *****             | ( )    | 7.19  | *****          | 7.56           | ( 12 ) | 0                    | 1/wk                                   | G                         |
| 00400 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ****   | 6.0<br>MINIMUM                                    | *****          | 9.0<br>MAXIMUM | 30     |                      |  | WEEKLYGRAB                |
| SOLIDS, TOTAL<br>SUSPENDED                  | SAMPLE MEASUREMENT | *****  | *****             | ( )    | *****   | 4.12           | 4.50           | ( 19 ) | 0                    | 1/wk                                   | G                         |
| 00530 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ****   | *****   | 30<br>Mnth AVG | 100<br>DLY MAX | MG/L   |                      |  | WEEKLYGRAB                |
| OIL AND GREASE                              | SAMPLE MEASUREMENT | *****  | *****             | ( )    | 5.00  | 5.00           | 5.00           | ( 19 ) | 0                    | 1/wk                                   | G                         |
| FREON EXTRA-GRAV METH                       | PERMIT REQUIREMENT | *****  | *****             | ****   | 15<br>30 DA AY                                    | 20<br>DAILY MX | 30<br>INST MX  | MG/L   |                      |  | WEEKLYGRAB                |
| 00556 1 0 0<br>EFFLUENT GROSS VALUE         | SAMPLE MEASUREMENT | 0.001  | 0.001             | ( 03 ) | *****   | *****          | *****          | ( )    | 0                    | 1/wk                                   | Est                       |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT | PERMIT REQUIREMENT | REPORT<br>Mnth AVG                           | REPORT<br>DLY MAX | MGD    | *****   | *****          | *****          | ****   |                      |  | WEEKLYESTIMA              |
| 50050 1 0 0<br>EFFLUENT GROSS VALUE         | 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. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE  
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

412 393-5113 92 09 22  
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 100 BOX 4  
ATTN: ANDREW DULICK  
SHIPPINGPORT PA 15077  
FACILITY  
LOCATION  
ATTN: ANDREW DULICK

## NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

## DISCHARGE MONITORING REPORT (DMR)

(12-16)  
PA0025615  
PERMIT NUMBER

(17-19)  
111 A  
DISCHARGE NUMBER

CAJ03  
(SUBR 05)  
2 - FINAL  
111 DIESEL GENERATOR BLDG

Form Approved  
OMB No. 2040-0004

MONITORING PERIOD  
FROM YEAR 92 MO 08 DAY 01 TO YEAR 92 MO 08 DAY 31  
(12-21) (12-23) (12-25) (12-27) (12-29) (12-31)

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

| PARAMETER<br>(32-37)                        | SAMPLE MEASUREMENT | (1 Card Only) QUANTITY OR LOADING<br>(46-53) |                   |        | (4 Card Only) QUALITY OR CONCENTRATION<br>(18-45) (54-67) |                |                |        | NO. EX<br>(62-63) | FREQUENCY OF ANALYSIS<br>(64-68) | SAMPLE TYPE<br>(69-70) |
|---|--------------------|--|-------------------|--------|---|----------------|----------------|--------|-------------------|----------------------------------|------------------------|
|   |                    | AVERAGE                                      | MAXIMUM           | UNITS  | MINIMUM   | AVERAGE        | MAXIMUM        | UNITS  |                   |                                  |                        |
| PH  |                    | *****  | *****             | ( )    | 7.78  | *****          | 8.04           | ( 12 ) | 0                 | 1/wk                             | G                      |
| 00400 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ****   | 6.0<br>MINIMUM  | *****          | 9.0<br>MAXIMUM | 30     |                   | WEEKLY                           | GRAB                   |
| SOLIDS, TOTAL<br>SUSPENDED                  |                    | *****  | *****             | ( )    | *****   | 9.56           | 17.79          | ( 19 ) | 0                 | 1/wk                             | G                      |
| 00530 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ****   | *****   | 30<br>MNTH AVG | 100<br>DLY MAX | MG/L   |                   | WEEKLY                           | GRAB                   |
| OIL AND GREASE<br>FREON EXTR-GRAV METH      |                    | *****  | *****             | ( )    | 5.00  | 5.00           | 5.00           | ( 19 ) | 0                 | 1/wk                             | G                      |
| 00556 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ****   | 15<br>30 DA AV  | 20<br>DAILY MX | 30<br>INST MX  | MG/L   |                   | WEEKLY                           | GRAB                   |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT |                    | 0.001  | 0.001             | ( 03 ) | *****   | *****          | *****          | ( )    | 0                 | 1/wk                             | EST                    |
| 50050 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | REPORT<br>MNTH AVG                           | REPORT<br>DLY MAX | MGD    | *****   | *****          | *****          | ****   |                   | WEEKLY                           | ESTIMA                 |
|   | SAMPLE MEASUREMENT |  |                   |        |   |                |                |        |                   |                                  |                        |
|   | PERMIT REQUIREMENT |  |                   |        |   |                |                |        |                   |                                  |                        |
|   | SAMPLE MEASUREMENT |  |                   |        |   |                |                |        |                   |                                  |                        |
|   | PERMIT REQUIREMENT |  |                   |        |   |                |                |        |                   |                                  |                        |
|   | SAMPLE MEASUREMENT |  |                   |        |   |                |                |        |                   |                                  |                        |
|   | PERMIT REQUIREMENT |  |                   |        |   |                |                |        |                   |                                  |                        |

|  |   |              |             |
|--|---|--------------|-------------|
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER                                     | I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.) | TELEPHONE    | GATE        |
| A. M. Dulick<br>Chemistry Manager<br>TYPED OR PRINTED                      |   |              |             |
| COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) | SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  | 412 393-5113 | 92 09 22    |
|  | AREA CODE   | NUMBER       | 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

TTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025515

110 A

PERMIT NUMBER

DISCHARGE NUMBER

MAJOR

(SUB: 05)

F - FINAL

Form Approved

OMB No. 2040-0004

UNIT 2 SERVICE WATER BACKWASH

MONITORING PERIOD

FROM YEAR 92 MO 09 DAY 01 TO YEAR 92 MO 08 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37)   |                       | (3 Card Only) QUANTITY OR LOADING<br>(46-53) |                   |       | (4 Card Only) QUALITY OR CONCENTRATION<br>(54-61) |         |         | NO.<br>EX<br>(62-67) | FREQUENCY<br>OF<br>ANALYSIS<br>(64-65) | SAMPLE<br>TYPE<br>(69-70) |
|--|-----------------------|--|-------------------|-------|---|---------|---------|----------------------|--|---------------------------|
|  |                       | AVERAGE                                      | MAXIMUM           | UNITS | MINIMUM   | AVERAGE | MAXIMUM |                      |  |                           |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT<br>50050 1 0 0<br>EFFLUENT GROSS VALUE | SAMPLE<br>MEASUREMENT | No Flow                                      |                   |       | ( 03 )  | *****   | *****   | *****                | ( )                                    |                           |
|  | PERMIT<br>REQUIREMENT | REPORT<br>MONTH AVG                          | REPORT<br>DLY MAX | nGD   |   | *****   | *****   | *****                | ****                                   | WEEKLY/STINA              |
|  | SAMPLE<br>MEASUREMENT |  |                   |       |   |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |  |                   |       |   |         |         |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |  |                   |       |   |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |  |                   |       |   |         |         |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |  |                   |       |   |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |  |                   |       |   |         |         |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |  |                   |       |   |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |  |                   |       |   |         |         |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |  |                   |       |   |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |  |                   |       |   |         |         |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |  |                   |       |   |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |  |                   |       |   |         |         |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |  |                   |       |   |         |         |                      |  |                           |
|  | PERMIT<br>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.)

SIGNATURE OF PRINCIPAL EXECUTIVE  
OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113

AREA  
CODE

NUMBER

DATE

92 09 22

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 CLAYTON 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)  
Form Approved  
OMB No. 2040-0004  
EPA Form 3320-1 (Rev. 9-88) Previous editions may be used.

DATE 11/19/92  
DISCHARGE NUMBER 113 A  
PERMIT NUMBER PA0025615  
MONITORING PERIOD  
FROM 92 00 01 TO 92 08 31  
NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37)                        | SAMPLE MEASUREMENT<br>PERMIT REQUIREMENT | (3 Card Only) QUANTITY OR LOADING (34-35) |         |       | (4 Card Only) QUALITY OR CONCENTRATION (46-51) |         |         | NO. EX. ANALYSIS (62-63) | FREQUENCY OF ANALYSIS (64-65) | SAMPLE TYPE (69-70) |
|---|--|---|---------|-------|--|---------|---------|--------------------------|-------------------------------|---------------------|
|   |  | AVERAGE                                   | MAXIMUM | UNITS | MINIMUM  | AVERAGE | MAXIMUM |                          |                               |                     |
| PH  |  | 6.96                                      |         | ( )   | 6.0  | 6.96    | 7.01    | ( 12 )                   | 0 2/m                         | G                   |
| 00400 1 0 0<br>EFFLUENT GROSS VALUE         |  |   |         |       |  |         |         |                          |                               |                     |
| SOLIDS, TOTAL<br>SUSPENDED                  |  |   |         |       |  |         |         |                          |                               |                     |
| 00530 1 0 0<br>EFFLUENT GROSS VALUE         |  |   |         |       |  |         |         |                          |                               |                     |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT |  |   |         |       |  |         |         |                          |                               |                     |
| 50050 1 0 0<br>EFFLUENT GROSS VALUE         |  |   |         |       |  |         |         |                          |                               |                     |
| COLIFORM, FECAL<br>GENERAL                  |  |   |         |       |  |         |         |                          |                               |                     |
| 74055 1 0 0<br>EFFLUENT GROSS VALUE         |  |   |         |       |  |         |         |                          |                               |                     |
| BOD, CARBONACEOUS<br>05 DAY, 20C            |  |   |         |       |  |         |         |                          |                               |                     |
| 80082 1 0 0<br>EFFLUENT GROSS VALUE         |  |   |         |       |  |         |         |                          |                               |                     |

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

DATE 11/19/92

TELEPHONE 412 393-5113

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

AREA CODE 412

NUMBER 393-5113

YEAR 92

MO 09

DAY 22

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

TYPED OR PRINTED

REPLACES EPA FORM 3320-1 (Rev. 9-88) Previous editions may be used.

PAGE 1 OF 1

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

213 A

DISCHARGE NUMBER

88308

(CDDH 05)

F - FINAL

UNIT 2 COOL TOWER PUMPHOUSE

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR 92 MO 09 DAY 01 TO YEAR 92 MO 09 DAY 30

(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37)                        |                    | (3 Card Only)<br>QUANTITY OR LOADING<br>(46-51) |                   |        | (4 Card Only)<br>QUALITY OR CONCENTRATION<br>(54-61) |                |                |        | NO.<br>EX<br>(62-63) | FREQUENCY<br>OF<br>ANALYSIS<br>(64-68) | SAMPLE<br>TYPE<br>(69-70) |
|---|--------------------|---|-------------------|--------|--|----------------|----------------|--------|----------------------|--|---------------------------|
|   |                    | AVERAGE   | MAXIMUM           | UNITS  | MINIMUM  | AVERAGE        | MAXIMUM        | UNITS  |                      |  |                           |
| PH  | SAMPLE MEASUREMENT | *****   | *****             | ( )    | 8.03   | *****          | 8.26           | ( 12 ) |                      | 0 2/m                                  | G                         |
| 00400 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****   | *****             | ****   | 6.0<br>MINIMUM                                       | *****          | 9.0<br>MAXIMUM | 30     |                      | TWICE/GRAB<br>MONTH                    |                           |
| SOLIDS, TOTAL<br>SUSPENDED                  | SAMPLE MEASUREMENT | *****   | *****             | ( )    | *****  | 17.03<br>15.03 | 30.06          | ( 19 ) |                      | 0 2/m                                  | G                         |
| 00530 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****   | *****             | ****   | *****  | 30<br>Mnth     | 100<br>DLY MAX | ng/L   |                      | TWICE/GRAB<br>MONTH                    |                           |
| OIL AND GREASE                              | SAMPLE MEASUREMENT | *****   | *****             | ( )    | *****  | 5.00           | 5.00           | ( 1 )  |                      | 0 2/m                                  | G                         |
| FREON EXTR-GRAV METH                        | PERMIT REQUIREMENT | *****   | *****             | ****   | *****  | 15<br>Mnth AVG | 20<br>DLY MAX  | ng/L   |                      | TWICE/GRAB<br>MONTH                    |                           |
| 00556 1 0 0<br>EFFLUENT GROSS VALUE         | SAMPLE MEASUREMENT | 0.001   | 0.001             | ( 03 ) | *****  | *****          | *****          | ( )    |                      | 0 1/wk                                 | Est                       |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT | PERMIT REQUIREMENT | REPORT<br>Mnth AVG                              | REPORT<br>DLY MAX | MGD    | *****  | *****          | *****          | ****   |                      | WEEKLY ESTIMA                          |                           |
| 50050 1 0 0<br>EFFLUENT GROSS VALUE         | 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 USC § 1001 AND 33 USC § 1319. Penalties under these statutes may include fines up to \$70,000 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 09 22

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) 1A0025615 (2-19) 413 A  
**PERMIT NUMBER** **DISCHARGE NUMBER**

HAJ04 Form Approved  
 (5034 05) OMB No. 2040-0004  
 F - FINAL  
 BULK FUEL STORAGE DRILL

**MONITORING PERIOD**  
 FROM YEAR 92 MO 08 DAY 01 TO YEAR 92 MO 08 DAY 31  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* NO DISCHARGE ☒ \*\*\*

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37)                        |                    | (3 Card Only) QUANTITY OR LOADING<br>(46-53) |                   |       | (4 Card Only) QUALITY OR CONCENTRATION<br>(54-61) |                |                |        | NO.<br>EX | FREQUENCY<br>OF<br>ANALYSIS | SAMPLE<br>TYPE |
|---|--------------------|--|-------------------|-------|---|----------------|----------------|--------|-----------|-----------------------------|----------------|
|   |                    | AVERAGE                                      | MAXIMUM           | UNITS | MINIMUM   | AVERAGE        | MAXIMUM        | UNITS  |           |                             |                |
| PH  | SAMPLE MEASUREMENT | *****  | *****             | ( )   |   | *****          |                | ( 12 ) |           |                             |                |
| 00400 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ****  | 6.0<br>MINIMUM                                    | *****          | 9.0<br>MAXIMUM | 30     |           | WEEKLYGRAB                  |                |
| SOLIDS, TOTAL<br>SUSPENDED                  | SAMPLE MEASUREMENT | *****  | *****             | ( )   | *****   |                |                | ( 19 ) |           |                             |                |
| 00530 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ****  | *****   | 30<br>Mnth Avg | 100<br>DLY MAX | MG/L   |           | WEEKLYGRAB                  |                |
| OIL AND GREASE<br>FREON EXTH-GRAV METH      | SAMPLE MEASUREMENT | *****  | *****             | ( )   | *****   |                |                | ( 19 ) |           |                             |                |
| 00556 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | *****  | *****             | ****  | *****   | 15<br>Mnth Avg | 20<br>DLY MAX  | MG/L   |           | WEEKLYGRAB                  |                |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT | SAMPLE MEASUREMENT | NO FLOW                                      |                   |       | ( 03 )  | *****          | *****          | *****  | ( )       |                             |                |
| 50050 1 0 0<br>EFFLUENT GROSS VALUE         | PERMIT REQUIREMENT | REPORT<br>Mnth Avg                           | REPORT<br>DLY MAX | MGD   | *****   | *****          | *****          | ****   |           | WEEKLYESTIMA                |                |
|   | SAMPLE MEASUREMENT |  |                   |       |   |                |                |        |           |                             |                |
|   | PERMIT REQUIREMENT |  |                   |       |   |                |                |        |           |                             |                |
|   | SAMPLE MEASUREMENT |  |                   |       |   |                |                |        |           |                             |                |
|   | PERMIT REQUIREMENT |  |                   |       |   |                |                |        |           |                             |                |
|   | SAMPLE MEASUREMENT |  |                   |       |   |                |                |        |           |                             |                |
|   | PERMIT REQUIREMENT |  |                   |       |   |                |                |        |           |                             |                |

|   |  |           |          |      |    |     |
|---|--|-----------|----------|------|----|-----|
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER<br><br>A. M. Dulick<br>Chemistry Manager<br><br>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 \$100,000 and/or maximum imprisonment of between 6 months and 5 years.) | TELEPHONE |          | DATE |    |     |
|   |  | 412       | 393-5113 | 92   | 09 | 22  |
|   | SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT   | AREA CODE | NUMBER   | YEAR | MO | DAY |

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

NO FLOW

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

NAME DEAVED 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)

(2-18)

PAG025615

013 A

PERMIT NUMBER

DISCHARGE NUMBER

CAJ01

Form Approved

(Supp US)

OMB No. 2040-0004

r - FINAL

UNCONTAMINATED DISCHARGE

MONITORING PERIOD

FROM YEAR 92 MO 09 DAY 01 TO YEAR 92 MO 09 DAY 30

(20-31) (22-23) (24-25) (26-27) (28-29) (30-31)

000 NO DISCHARGE 000

NOTE: Read instructions before completing this form.

| PARAMETER<br>(32-37)   |                       | (3 Card Only)<br>QUANTITY OR LOADING<br>(46-53) |                   |       | (4 Card Only)<br>QUALITY OR CONCENTRATION<br>(54-61) |         |         | NO.<br>EX<br>(62-63) | FREQUENCY<br>OF<br>ANALYSIS<br>(64-65) | SAMPLE<br>TYPE<br>(66-70) |
|--|-----------------------|---|-------------------|-------|--|---------|---------|----------------------|--|---------------------------|
|  |                       | AVERAGE   | MAXIMUM           | UNITS | MINIMUM  | AVERAGE | MAXIMUM |                      |  |                           |
| FLOW, IN CONDUIT OR<br>THRU TREATMENT PLANT<br>50050 1 9 0<br>EFFLUENT GROSS VALUE | SAMPLE<br>MEASUREMENT | 0.028   | 0.037             | ( 03) | *****  | *****   | *****   | ( )                  | 0 1/wk                                 | Est                       |
|  | PERMIT<br>REQUIREMENT | REPORT<br>MTH AVG                               | REPORT<br>CLY MAX | MGD   | *****  | *****   | *****   | 0000                 | WEEKLY                                 | ESTIM                     |
|  | SAMPLE<br>MEASUREMENT |   |                   |       |  |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |       |  |         |         |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |       |  |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |       |  |         |         |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |       |  |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |       |  |         |         |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |       |  |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |       |  |         |         |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |       |  |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |       |  |         |         |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |       |  |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |       |  |         |         |                      |  |                           |
|  | SAMPLE<br>MEASUREMENT |   |                   |       |  |         |         |                      |  |                           |
|  | PERMIT<br>REQUIREMENT |   |                   |       |  |         |         |                      |  |                           |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick  
Chemistry Manager

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

*Andrew Dulick*

SIGNATURE OF PRINCIPAL EXECUTIVE  
OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113

DATE

92 09 22

TYPE OR PRINTED

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

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







NAME Duquesne Light Company  
 ADDRESS One Third Centre  
 301 Grant Street

Pittsburgh, PA 15279

FACILITY Shippopot Atomic Power Station  
 LOCATION Shippopot Borough, Beaver County

PERMIT NO. 78001589  
 PERMIT NUMBER

DISCHARGE NO. 301

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM

W.D.E.S.T.

DISCHARGE MONITORING REPORT (DMR)

| MONITORING PERIOD |       |     |      |
|-------------------|-------|-----|------|
| Year              | Month | Day | Hour |
| 97                | 08    | 01  | TO   |
| 97                | 08    | 31  |      |

NOTE: Read instructions before completing this form.

| PARAMETER        | QUANTITY OR LOADING |         |       | QUALITY OF CONCENTRATION |         |         | NO. OF ANALYSTS | FREQUENCY OF ANALYSIS | SAMPLE TYPE |
|------------------|---------------------|---------|-------|--------------------------|---------|---------|-----------------|-----------------------|-------------|
|                  | AVERAGE             | MAXIMUM | UNITS | MINIMUM                  | AVERAGE | MAXIMUM |                 |                       |             |
| Flow             | Sample Measure.     | NO FLOW | MGD   | 0                        | 0       | 0       |                 |                       |             |
|                  | Permit Require.     |         |       | 0                        | 0       | 0       | 0               | 2/MO                  | EST         |
| Suspended Solids | Sample Measure.     | 0       | 0     | 0                        | 30      | 110     | MBL             | 2/MO                  | GRAB        |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
| Oil & Grease     | Sample Measure.     | 0       | 0     | 0                        | 15      | 20      | MBL             | 2 MO                  | GRAB        |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | S.B.            | 2/MO                  | GRAB        |
|                  | Permit Require.     | 0       | 0     | 0                        | 6.0     | 9.0     | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Permit Require.     | 0       | 0     | 0                        | 0       | 0       | 0               | 0                     | 0           |
|                  | Sample Measure.     | 0       |       |                          |         |         |                 |                       |             |

NAME: Duesse Light Company  
ADDRESS: One Oxford Centre  
341 Grant Street  
Pittsburgh, PA 15279

FACILITY: Shippingport Atomic Power Station  
LOCATION: Shippingport Borough, Beaver County

PA0001589  
PERMIT NUMBER

VI  
DISCHARGE NO.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM  
NPDES

| MONITORING PERIOD |       |     |      |       |     |
|-------------------|-------|-----|------|-------|-----|
| Year              | Month | Day | Year | Month | Day |
| 92                | 08    | 01  | 92   | 08    | 31  |

DISCHARGE MONITORING REPORT (DMR)

NOTE: Read instructions before completing this form.

| PARAMETER | QUANTITY OR LOADING |         |         |       | QUALITY OR CONCENTRATION |         |         |       | NO. EX. | FREQUENCY OF ANALYSIS | SAMPLE TYPE |
|-----------|---------------------|---------|---------|-------|--------------------------|---------|---------|-------|---------|-----------------------|-------------|
|           |                     | AVERAGE | MAXIMUM | UNITS | MINIMUM                  | AVERAGE | MAXIMUM | UNITS |         |                       |             |
| Flow      | Sample Measure.     | NO FLOW |         | MGD   | 0                        | 0       | 0       | 0     |         | CONT                  | EST         |
|           | Permit Require.     | 0       | 0       |       | 0                        | 0       | 0       | 0     |         |                       |             |
|           | Sample Measure.     | 0       | 0       | 0     | 0                        | 0       | 0       | 0     |         | 0                     | 0           |
|           | Permit Require.     | 0       | 0       |       | 0                        | 0       | 0       | 0     |         | 0                     | 0           |
|           | Sample Measure.     | 0       | 0       | 0     | 0                        | 0       | 0       | 0     |         | 0                     | 0           |
|           | Permit Require.     | 0       | 0       |       | 0                        | 0       | 0       | 0     |         | 0                     | 0           |
|           | Sample Measure.     | 0       | 0       | 0     | 0                        | 0       | 0       | 0     |         | 0                     | 0           |
|           | Permit Require.     | 0       | 0       |       | 0                        | 0       | 0       | 0     |         | 0                     | 0           |
|           | Sample Measure.     | 0       | 0       | 0     | 0                        | 0       | 0       | 0     |         | 0                     | 0           |
|           | Permit Require.     | 0       | 0       |       | 0                        | 0       | 0       | 0     |         | 0                     | 0           |
|           | Sample Measure.     | 0       | 0       | 0     | 0                        | 0       | 0       | 0     |         | 0                     | 0           |
|           | Permit Require.     | 0       | 0       |       | 0                        | 0       | 0       | 0     |         | 0                     | 0           |
|           | Sample Measure.     | 0       | 0       | 0     | 0                        | 0       | 0       | 0     |         | 0                     | 0           |
|           | Permit Require.     | 0       | 0       |       | 0                        | 0       | 0       | 0     |         | 0                     | 0           |
|           | Sample Measure.     | 0       | 0       | 0     | 0                        | 0       | 0       | 0     |         | 0                     | 0           |
|           | Permit Require.     | 0       | 0       |       | 0                        | 0       | 0       | 0     |         | 0                     | 0           |

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

I certify under penalty of law that I have personally prepared or caused to be prepared this statement to the best of my knowledge and belief and that it is true and correct. I declare under penalty of perjury that the foregoing is true and correct. I understand that anyone who furnishes false or misleading information on this report or who omits material or information requested on the report may be guilty of a crime. I understand that anyone who furnishes false or misleading information on this report or who omits material or information requested on the report may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including multiple damages and civil penalties).

TELEPHONE: 412-393-5113  
NUMBER: 0880

DATE: 92 09 22  
YEAR MONTH DAY

STATE THE NATURE OF ANY VIOLATIONS (reference all attachments here)