

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

TM0026450
PERMIT NUMBER

101 1
DISCHARGE NUMBER

F - FINAL LIMITS
DIFFUSER GATE TO TENN RIVER

FACILITY
LOCATION

8506060537 850430
PDR ADOCK 05000327
R PDR

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
85	02	01	85	02	28
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NOTE: Read instructions before completing this form.

ATTN: JERRY E. LINER

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-43) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 P 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	38.6	41.2	46.9	0	27/30 ^a	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	DEG.F	SEE PERMIT	GRAB10
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	57.0	66.2	72.6	0	28/30	REC
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	112.5	DEG.F	CONTINUOUS	RECORD
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 R 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****			b			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	97.0	DEG.F	CONTINUOUS	RECORD
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 6 0 DOWNSTREAM MONITOR	SAMPLE MEASUREMENT	*****	*****	*****			b			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	101.0	DEG.F	DAILY	GRAB
TEMP DIFF. BETWEEN SAMPLE AND UPSTREAM 00018 0 0 UP- AND DOWN-STREAM	SAMPLE MEASUREMENT	*****	*****	*****	2.4	4.3	5.9	7	25/30 ^c	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	5.4	DEG.F	SEE PERMIT	GRAB10
PH	SAMPLE MEASUREMENT	*****	*****	*****		*****				
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0	SU	SEE PERMIT	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1590	1742		*****	*****	*****	*****	0	CONT ^d REC
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	CONTINUOUS	RECORD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF
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.

Original Signed by
Martin E. Rivers

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

FTS 856-6601 85 05 28
AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
CLOSED MODE. INDICATE WHICH IS APPROPRIATE. a. MONITOR INOPERABLE ONE DAY THIS MONTH. d. MONITOR INOPERABLE TWO
SEE PERMIT FOR FURTHER MONITORING REQUIREMENTS. b. PLANT OPERATED IN OPEN MODE ALL MONTH. DAYS THIS MONTH.
A NOTIFICATION OF NONCOMPLIANCE IS ATTACHED. c. MONITOR INOPERABLE THREE DAYS THIS MONTH.

NOTIFICATION OF NONCOMPLIANCE WITH EFFLUENT LIMITATIONS - NPDES PERMIT NO.
TN0026450 - SEQUOYAH NUCLEAR PLANT (SQN)

Description of the discharge--Discharge No. 101 - Diffuser discharge gate. The temperature rise limit (5.4°F or 3.0°C) was exceeded during February and March. Cooling towers were off to assess for icing damage.

Cause and period of the noncompliance--Severe environmental conditions caused significant icing damage to the cooling towers at SQN during the month of January. This was discussed in the last Discharge Monitoring Report. The noncompliances during February and March were a continuation of the noncompliance started on January 31, 1985, when the cooling towers were taken offline to assess structural damage. The cooling tower assessment was scheduled to include the period January 31 through March 15. Table 1 lists all occurrences of temperature rises above the limit. Figure 1 shows the computed temperature rises and river flows computed for the plant site. No noncompliances occurred after March 15.

Steps taken to reduce, eliminate, and prevent recurrence of the noncomplying discharge--Structural repairs on the cooling towers are expected to begin this summer.

Note--There are discrepancies between the thermal data reported in the Discharge Monitoring Report monthly summary tables of thermal compliance data and this written notification of noncompliance. Data conversion between metric and English units has caused roundoff errors in the data that is used for reporting. These errors are only .1 degree F, but do cause discrepancies in reported noncompliances. Therefore, the tabular data shows several noncompliances that do not appear in the permanent temperature record. As can be seen from Figure 1, the occurrences near the limit are short in duration. We are presently working on converting all temperatures recorded and evaluated to English units to provide future consistency between reported and permanently stored data.

WSDB 5/17/85

PO:LSS

Coordinated: J. R. Henson/SQN

Facility Name/Location if different)

NAME TVA - SEQUOYAH NUCLEAR
 ADDRESS 5411 E. BRAINERD RD.
CHATTANOOGA TN 37421

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

(2-16)

(17-19)

F - FINAL LIMITS
 DIFFUSER GATE TO TENN RIVER

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

TH0026450
 PERMIT NUMBER

101 1
 DISCHARGE NUMBER

FACILITY
 LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	02	01		85	02	28
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
CHLORINE, TOTAL RESIDUAL 50060 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****			*			
TEMPERATURE RATE OF CHANGE DEG. F/HOUR 74029 6 0 DOWNSTREAM MONITOR	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.10 INST MX	MG/L	WEEK- DAYS	CALCTD
	SAMPLE MEASUREMENT	0.4	1.6	DEG F/	*****	*****	*****	*****	0	25/30** CAL
	PERMIT REQUIREMENT	*****	3.6 INST MX	DEG F/	*****	*****	*****	*****	SEE PERMIT	CALCTD
DOWNSTREAM TEMPERATURE	SAMPLE MEASUREMENT	43.2	53.6	DEG F					0	28/30 REC
	PERMIT REQUIREMENT		86.9						CONT	REC
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

MARTIN E. RIVERS, DIRECTOR
 OF ENVIRONMENTAL QUALITY
 STAFF

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED
 AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED
 ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR
 OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION
 IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIG-
 NIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING
 THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND
 33 USC § 1312 (Penalties under these statutes may include fines up to \$10,000
 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
 OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

FTS
 AREA
 CODE

856-6601
 NUMBER

85
 YEAR

05
 MO

28
 DAY

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

COMMENT CORRESPONDS TO AMBIENT TEMPERATURE, 'Q' TO OPEN MODE, 'S' TO
 CLOSED CODE. INDICATE WHICH IS APPROPRIATE. *DID NOT CHLORINATE THIS PERIOD.
 SEE PERMIT FOR FURTHER MONITORING REQUIREMENTS. **MONITOR INOPERABLE THREE DAYS THIS REPORTING PERIOD.

NAME TVL - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16) TN0026450
PERMIT NUMBER
(17-19) 102 1
DISCHARGE NUMBER

F - FINAL LIMITS
YARD DRAINAGE POND EFFLUENT

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	02	01		85	02	28
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.3	*****	8.8		0	14/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		THREE/	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****	11	23		0	20/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100 DAILY MX	MG/L		WEEK=	GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	*****	*****	*****	*****	<5.0	<5.0		0	4/30	GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	5 DAILY AV	20 DAILY MX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT		*		*****	*****	*****	*****			
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	4GD	*****	*****	*****	*****		CONTIN	CORDR
		DAILY AV	DAILY MX							UOUS	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE			
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		FTS AREA CODE	856-6601 NUMBER	85 YEAR	05 MO
TYPED OR PRINTED							

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments)
PH MEASUREMENT FREQUENCY SHALL NOT BE LESS THAN 1/WEEK AFTER 1 YEAR,
UNLESS DETERMINED OTHERWISE.

*FLOWMETER MALFUNCTIONED THIS REPORTING PERIOD.

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(16-19)
TN0026450
PERMIT NUMBER

(17-19)
103 1
DISCHARGE NUMBER

F - FINAL LIMITS
LOW VOL WASTE TREAT POND EFFL

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	02	01		85	02	28
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.5	*****	8.5	0	14/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	THREE/ WEEK	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	29	35		*****	6.8	7.9	0	4/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	380 DAILY AV	1250 DAILY MX	LBS/DY	*****	30 DAILY AV	100 DAILY MX	MG/L	THREE/ WEEK	GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	<21	<24		*****	<5.0	<5.0	0	4/30	GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	190 DAILY AV	250 DAILY MX	LBS/DY	*****	15 DAILY AV	20 DAILY MX	MG/L	TWICE/ WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.50	0.66		*****	*****	*****	*****	0	28/30
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****	DAILY	TOTALZ
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE	DATE	
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	856-6601 AREA CODE NUMBER	85 05 28 YEAR MO DAY

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

IN THE EVENT OF DISCHARGE OF TURBINE BLDG SUMP TO COND COOL WATER CHANNEL OR DRAINAGE POND, TSS, OIL AND GREASE, AND PH SHALL BE MONITORED 5/WEEK.
FOUR SAMPLES WERE INADVERTENTLY NOT COLLECTED.

NAME TVA - SEQUOYAH NUCLEAR
 ADDRESS 6411 E. BRAINERD RD.
CHAITANOOGA TN 37421

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

TNO026450

PERMIT NUMBER

104 1

DISCHARGE NUMBER

 F - FINAL LIMITS
 RADWSTE SYST TO COOL TWR BLWDN

FACILITY

LOCATION

FROM

 YEAR MO DAY
 85 02 01

TO

 YEAR MO DAY
 85 02 28

(20-21) (22-23) (24-25)

(26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-43) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.0	*****	7.1		0	8/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		TWICE/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	0.7	1.5		*****	3.7	5.0		0	8/30	COMP
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	13 DAILY AV	42 DAILY MX	LBS/DY	*****	30 DAILY AV	100 DAILY MX	MG/L		TWICE/ WEEK	COMPOS
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	<0.93	<1.4		*****	<5.0	<5.0		0	8/30	GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	6.3 DAILY AV	8.3 DAILY MX	LBS/DY	*****	15 DAILY AV	20 DAILY MX	MG/L		TWICE/ WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.022	0.043		*****	*****	*****	*****	0	28/30	REC
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****		ONCE/ BATCH	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

 NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 MARTIN E. RIVERS, DIRECTOR
 OF ENVIRONMENTAL QUALITY
 STAFF
 TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		FTS	856-6601	85	05	28
		AREA CODE	NUMBER	YEAR	MO	DAY

 COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 DURING ABNORMAL FLOW CONDITIONS, EXCEEDING .05 MGD AS A 7 DAY AVERAGE, DAILY MAXIMUM QUANTITY LIMITS MAY BE EXCEEDED, BUT SHALL NOT EXCEED 4 TIMES LIMITATIONS LISTED.
 TSS SAMPLE TYPE = 1 GRAB/BATCH COMPOSITED FOR ANALYSIS OVER A 24 HOUR DAY.

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16) TN0026450
PERMIT NUMBER
(17-19) 105 1
DISCHARGE NUMBER

F - FINAL LIMITS
REGEN TO COOL TWR BLNDN LINE

FACILITY _____
LOCATION _____
ATTN: JERRY E. LINER

MONITORING PERIOD
FROM YEAR MO DAY TO YEAR MO DAY
85 02 01 TO 85 02 28
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.1	*****	9.0		33	
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	0 BATCHES	GR
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	4.5	10		*****	16	39		16	
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	25 DAILY AV	83 DAILY MX	LBS/DY	*****	30 DAILY AV	100 DAILY MX	MG/L	0 BATCHES	COMP
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	<1.4	<2.4		*****	<5.0	<5.0		16	
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	13 DAILY AV	17 DAILY MX	LBS/DY	*****	15 DAILY AV	20 DAILY MX	MG/L	0 BATCHES	GR
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.034	0.057		*****	*****	*****	*****	16	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****	0 BATCHES	GR
	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 23 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		FTS	856-6601	85 05 28
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

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

SHOULD ABNORMAL CONDITIONS NECESSITATE INCREASED WASTE FLOW ABOVE 0.10 MGD, AS A 7 DAY AVERAGE, DAILY MAXIMUM QUANTITY LIMITATIONS MAY BE EXCEEDED BUT SHALL NOT EXCEED 2 TIMES THE LIMITATIONS LISTED.

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 5411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16) TR0026450
PERMIT NUMBER
(17-19) 106 1
DISCHARGE NUMBER

F - FINAL LIMITS
STM GEN BLWDN TO COOL TWR BLDN

FACILITY _____
LOCATION _____

MONITORING PERIOD
FROM YEAR MO DAY TO YEAR MO DAY
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)
85 02 01 85 02 28

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****		*****				
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	***** MINIMUM	*****	***** MAXIMUM	SU	SEE PERMIT	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT				*****					
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	50 DAILY AV	170 DAILY MX	LBS/DY	*****	30 DAILY AV	100 DAILY MX	MG/L	ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	NO DISCHARGE			*****	*****	*****	*****		
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****	ONCE/ MONTH	INSTANT
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN. I AM AWARE THAT I AM RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTER HAS PROVIDED. 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 856-6601	DATE 85 05 28		
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
SHOULD INTERNAL PLANT CHEMISTRY REQUIREMENTS NECESSITATE INCREASED
BLowDOWN FLOW OVER .2 MGD AS A 7 DAY AVERAGE, DAILY MAXIMUM QUANTITY LIMITATIONS MAY BE EXCEEDED BUT
SHALL NOT EXCEED 4 TIMES THE LIMITATIONS LISTED.

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

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

F - FINAL LIMITS
METAL CLN WASTE PND TO COND CH

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

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

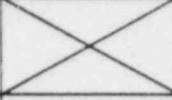
(2-16)
TH0026450
PERMIT NUMBER

(17-19)
107 1
DISCHARGE NUMBER

FACILITY _____
LOCATION _____

MONITORING PERIOD								
YEAR			MO			DAY		
FROM	85	02	01	TO	85	02	28	
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)	

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
CHEM. OXYGEN DEMAND (HIGH LEVEL) (COD) 00340 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT		*	LBS/DAY	*****		*			
	PERMIT REQUIREMENT		834		*****	***** DAILY AV	100 DAILY MX	MG/L		WEEKLYCOMP-8
PH 00400 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	7.6	*****	8.6		0 6/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEKLYGRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	28	65	LBS/DAY	*****	6.6	11		0 5/30	8-HR COMP
	PERMIT REQUIREMENT		250		*****	***** DAILY AV	30 DAILY MX	MG/L		WEEKLYCOMP-8
OIL AND GREASE (SOXHLET EXTR.) TOT. 00550 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	<22	<33	LBS/DAY	*****	<5.0	<5.0		0 5/30	GR
	PERMIT REQUIREMENT		125		*****	***** DAILY AV	15 DAILY MX	MG/L		WEEKLYGRAB
PHOSPHORUS, TOTAL (AS P) 00665 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT		*	LBS/DAY	*****		*			
	PERMIT REQUIREMENT		8.3		*****	***** DAILY AV	1.0 DAILY MX	MG/L		WEEKLYCOMP-8
COPPER, TOTAL (AS CU) 01042 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	<0.05	0.08	LBS/DAY	*****	<0.012	0.015		0 5/30	8-HR COMP
	PERMIT REQUIREMENT		8.3		*****	***** DAILY AV	1.0 DAILY MX	MG/L		WEEKLYCOMP-8
IRON, TOTAL (AS FE) 01045 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.1	2.1	LBS/DAY	*****	0.26	0.34		0 5/30	8-HR COMP
	PERMIT REQUIREMENT		8.3		*****	***** DAILY AV	1.0 DAILY MX	MG/L		WEEKLYCOMP-8

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		856-6601	85	05 28
		ETS AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
IN NO CASE SHALL THE QUANTITY DISCHARGED EXCEED THE QUANTITY DETERMINED BY MULTIPLYING THE VOLUME OF THE BATCH OF METAL CLEANING WASTE GENERATED BY THE CONCENTRATION. SEE PERMIT FOR ADDITIONAL SAMPLING REQUIREMENTS.

*NO PHOSPHORUS OR ORGANIC CHEMICAL BEARING COMPOUNDS WERE USED.

NAME IVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16) TN0026450
PERMIT NUMBER
(17-19) 107 1
DISCHARGE NUMBER

F - FINAL LIMITS
METAL CLN WASTE PND TO COND CH

FACILITY
LOCATION

MONITORING PERIOD
FROM
YEAR MO DAY TO YEAR MO DAY
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)
85 02 01 85 02 28

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.526	0.782	MGD	*****	*****	*****	*****	0	5/30	CAL
	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX		*****	*****	*****	*****		ONCE/ BATCH	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE	DATE		
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS AREA CODE	856-6601	85
TYPED OR PRINTED					

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
IN NO CASE SHALL THE QUANTITY DISCHARGED EXCEED THE QUANTITY
DETERMINED BY MULTIPLYING THE VOLUME OF THE BATCH OF METAL CLEANING WASTE GENERATED BY THE CONCENTRATION.
SEE PERMIT FOR ADDITIONAL SAMPLING REQUIREMENTS.

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

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

FACILITY _____
LOCATION _____

ATTN: JERRY E. LINER

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

(2-16)
TN0026450
PERMIT NUMBER

(17-19)
108 1
DISCHARGE NUMBER

F - FINAL LIMITS
CONCRETE PLT SETTLING POND

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

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	02	01		85	02	28
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Ph	SAMPLE MEASUREMENT	*****	*****	*****		*****				
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	***** MINIMUM	*****	***** MAXIMUM	SU	SEE PERMIT	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****					
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	***** DAILY AV	40 DAILY MX	MG/L	WEEKLY	GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	*****	*****	*****	*****					
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	***** DAILY AV	20 DAILY MX	MG/L	ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	NO DISCHARGE			*****	*****	*****	*****		
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	WEEKLY	FLO/IND
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

AREA CODE NUMBER YEAR MO DAY
856-6601 85 05 28

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

NAME TENNESSEE VALLEY AUTHORITY
ADDRESS 6411 EAST BRAINERD ROAD
CHATTANOOGA, TN 37421

FACILITY SEQUOYAH NUCLEAR PLANT
LOCATION SODDY, TN 37379

PERMIT NUMBER
TN0026450

DISCHARGE NUMBER
109

EMERGENCY DIESEL GENERATOR
NO. 5 COOLING WATER EFFLUENT

MONITORING PERIOD
FROM

YEAR	MO	DAY
85	02	01

 TO

YEAR	MO	DAY
85	02	28

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

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			(46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS					
FLOW	SAMPLE MEASUREMENT	NO DISCHARGE		MGD									
	PERMIT REQUIREMENT											1/14	P LOG
ERCW SYSTEM TOTAL CHLORINE RESIDUAL	SAMPLE MEASUREMENT								MG/L				
	PERMIT REQUIREMENT							0.8				1/14	GR
	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 MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE			
			FTS 856-6601	85	05	28	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

MONITORING REQUIRED ONLY DURING TESTING PERIODS. ALSO, LIMITATIONS AND MONITORING ARE NOT APPLICABLE DURING AN ACTUAL EMERGENCY SITUATION.

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

NAME TVA - SEQUOYAH NUCLEAR

ADDRESS 5411 E. BRAINERD RD.

CHATTANOOGA TN 37421

FACILITY

LOCATION

ATTN: JERRY E. LINER

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

(2-16)

(17-19)

TJ0026450

PERMIT NUMBER

110.1

DISCHARGE NUMBER

F - FINAL LIMITS
RECYCLED COOLING WATER FLOW

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

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY
85 02 01 85 02 28
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)				NO. EX	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0	SAMPLE MEASUREMENT	*****	*****	*****	NO DISCHARGE						
EFFLUENT GROSS VALUE PH	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	101.0	DEG.F		DAILY	GRAB10
00400 1 0	SAMPLE MEASUREMENT	*****	*****	*****		DAILY AV	DAILY MX				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0	SU		WEEKLY	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	MINIMUM		MAXIMUM				
50060 1 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.10	MG/L		WEEKLY	GRAB10
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT					DAILY AV	DAILY MX				
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS 856-6601 AREA CODE NUMBER	85 05 28 YEAR MO DAY	

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

ADDITIONAL MONITORING FROM TN DEPT OF PUBLIC HEALTH CERTIFICATION LETTER OF JAN 31, 1983.
SEE LETTER FOR REQUIREMENTS TO ESTABLISH RELATIONSHIP BETWEEN FISH DISTRESS/KILL AND CHLORINATION LEVEL.

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

NAME IVA - SEQUOYAH NUCLEAR

ADDRESS 6411 E. BRAINERD RD.

CHATTANOOGA TN 37421

FACILITY

LOCATION

ATTN: JERRY E. LINER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

F - FINAL LIMITS

STP DISCHARGE

Form Approved

OMB No. 2040-0004

Expires 2-29-84

TN0026450

PERMIT NUMBER

111 1

DISCHARGE NUMBER

MONITORING PERIOD

FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
85	02	01	85	02	28
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
BOD, 5-DAY (20 DEG. C) 00310 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.94	1.7	LBS/DY	*****	16	21	0	2/30	GR
	PERMIT REQUIREMENT	3.8 30DA AVG	5.0 DAILY MX		*****	30	45		TWICE/MONTH	GRAB
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		SEE PERMIT	
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.69	1.3	LBS/DY	*****	13	17	0	2/30	GR
	PERMIT REQUIREMENT	3.8 30DA AVG	5.0 DAILY MX		*****	30 30DA AVG	45 DAILY MX		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.009	0.037	MGD	*****	*****	*****	0	19/30	WEIR
	PERMIT REQUIREMENT	0.015 DAILY AV	***** DAILY MX		*****	*****	*****		WEEK-DAYS	FLOIND
CHLORINE, TOTAL RESIDUAL 50060 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	1.0	1.4	1.9	0	19/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	2.0 DAILY AV		WEEK-DAYS	GRAB
FECAL COLIFORM	SAMPLE MEASUREMENT				<10	<10	<10	0	2/30	GR
	PERMIT REQUIREMENT				NA	NA	1000		2/30	GR
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

FTS
AREA
CODE

856-6601
NUMBER

85
YEAR

05
MO

28
DAY

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

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

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

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

NAME TVA - SEQUOYAH NUCLEAR

ADDRESS 5411 E. BRAINERD RD.

CHATTANOOGA TN 37421

TN0026450

PERMIT NUMBER

112 1

DISCHARGE NUMBER

F - FINAL LIMITS
STP DISCHARGE

FACILITY

LOCATION

ATTN: JERRY E. LINER

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	02	01		85	02	28
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (58-65)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	0.024	0.084	MGD				0	15/30	WEIR
	PERMIT REQUIREMENT	0.025	NA						5/7	WEIR
BOD ₅	SAMPLE MEASUREMENT	3.5	7.6	LBS/DAY	17	38	76	2	3/30	GR
	PERMIT REQUIREMENT	6.3	8.3			30	45		2/7	GR
SUSPENDED SOLIDS	SAMPLE MEASUREMENT	0.9	1.7	LBS/DAY	6.0	12	17	0	2/30	GR
	PERMIT REQUIREMENT	6.3	8.3			30	45		2/30	GR
TOTAL CHLORINE RESIDUAL	SAMPLE MEASUREMENT				0.5	1.1	1.7	0	19/30	GR
	PERMIT REQUIREMENT						2.0		5/7	GR
FECAL COLIFORM	SAMPLE MEASUREMENT				<10	690	>2000	1	3/30	GR
	PERMIT REQUIREMENT				NA	NA	1,000		2/30	GR
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

FTS 856-6601

AREA
CODE

NUMBER

85 05 28

YEAR MO DAY

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

A NOTIFICATION OF NONCOMPLIANCE IS ATTACHED.
THERE WAS NO FLOW ONE SAMPLING DAY THIS REPORTING PERIOD.

NOTIFICATION OF NONCOMPLIANCE WITH EFFLUENT LIMITATIONS - NPDES PERMIT
NO. TN0026450 - SEQUOYAH NUCLEAR PLANT

Description of the discharge--Discharge No. 112 - Sewage treatment plant effluent. The following grab samples had biochemical oxygen demand (BOD) and fecal coliform (FC) concentrations in excess of the NPDES permit limitation of 45 mg/l and 1000/ml, respectively.

<u>Date</u>	<u>Parameter</u>	<u>Concentration</u>
02/21/85	FC	2000/ml
02/21/85	BOD	76 mg/l
03/07/85	BOD	71 mg/l

Cause and period of the noncompliance--On or about February 20, 1985, plant maintenance crews were sent to the plant to pull two of the four equalization basin pumps for repair. They used a portable, air-operated pulsating discharge pump to dewater the tank. Instead of placing the discharge hose into the first septic tank settling compartment, (the cover was bolted shut) they placed it into the second compartment (which was open). This stirred the previously settled sewage which was later pumped to the sand filter by the dosing pumps. The filter trapped most of the solid, but enough came through to cause the BOD and FC excursions. A sample recollected on February 27, 1985, had a BOD of 20 mg/l and FC 10. The maximum period of noncompliance for this excursion was six days.

The sample collected March 7, 1985, which had a BOD of 71 mg/l was clear, had a FC concentration of 0, total residual chlorine (TRC) of 1.2, and a total suspended solids (TSS) concentration of 16 mg/l. The flow during the past twenty-four hours was only 12,500 gal; about half of design capacity. A sample collected on March 15, 1985, had a BOD of 24 mg/l. No explanation is available for this excursion unless it could have been caused by a residual of the February 21, 1985 upset. The maximum period of this excursion was eight days.

Steps taken to reduce, eliminate, and prevent recurrence of the noncomplying discharge--The septic tanks were pumped out and the maintenance crews will be supervised more carefully in the future to be sure they do not stir up the septic tank contents.

JRH:ERM
4/30/85

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16) T10026450
PERMIT NUMBER
(17-19) 113 1
DISCHARGE NUMBER

F - FINAL LIMITS
STP TO COND COOLING WATER CHAN

FACILITY
LOCATION

MONITORING PERIOD
FROM
YEAR MO DAY TO YEAR MO DAY
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)
85 02 01 85 02 28

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	<div></div>	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53)			(54-61)	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
BOD, 5-DAY (20 DEG. C) 00310 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.14	0.14	LBS/DY	*****	14	15	MG/L	0	2/30	GR	
PH	PERMIT REQUIREMENT	7.5 30DA AVG	10 11.3 DAILY MX		*****	30 30DA AVG	45 DAILY MX		TWICE/MONTH	GRAB		
	SAMPLE MEASUREMENT	*****	*****	*****	*****							
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	SU		SEE PERMIT		
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.18	0.21	LBS/DY	*****	19	25	MG/L	0	2/30	GR	
SOLIDS, SETTLEABLE 00545 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	7.5 30DA AVG	10 11.3 DAILY MX		*****	30 30DA AVG	45 DAILY MX		TWICE/MONTH	GRAB		
	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.1	<0.1	ML/L	0	19/30	GR	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	DAILY AV	DAILY MX		WEEK-DAYS	GRAB		
	SAMPLE MEASUREMENT	0.001	0.007	MGD	*****	*****	*****	*****	0	19/30	WEIR	
CHLORINE, TOTAL RESIDUAL 50060 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.030 DAILY AV	NA***** DAILY MX		*****	*****	*****	*****	WEEK-DAYS	FLOIND		
	SAMPLE MEASUREMENT	*****	*****	*****	0.5	1.2	1.9	MG/L	0	16/30	GR	
FECAL COLIFORM	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	2.0 DAILY AV		DAILY MX	WEEK-DAYS	GRAB	
	SAMPLE MEASUREMENT				<10	<25	40	N/100	0	2/30	GR	
	PERMIT REQUIREMENT						1000	ML		2/30	GR	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
DATE
85 05 28
AREA CODE NUMBER YEAR MO DAY

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

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

NAME TVA - SEQUOYAH NUCLEAR
 ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

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

TH0026450
 PERMIT NUMBER

114 1
 DISCHARGE NUMBER

F - FINAL LIMITS
 STP DISCHARGE TO TENN RIVER

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

FACILITY
 LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	02	01		85	02	28
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
BOD, 5-DAY (20 DEG. C) 00310 1 0 EFFLUENT GROSS VALUE PH	SAMPLE MEASUREMENT	0.31	0.46		*****	3.3	5.0	0	2/30	GR
	PERMIT REQUIREMENT	3.8 30DA AVG	5.0 5.6 DAILY MX	LBS/DY	*****	30 30DA AVG	45 DAILY MX		TWICE/MONTH	GRAB
	SAMPLE MEASUREMENT	*****	*****	*****	6.5	*****	6.8	0	19/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM		TWICE/GRAB	WEEK
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	0.87	1.2		*****	9.5	13	0	2/30	GR
	PERMIT REQUIREMENT	3.8 30DA AVG	5.0 5.6 DAILY MX	LBS/DY	*****	30 30DA AVG	45 DAILY MX		TWICE/MONTH	GRAB
	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.1	<0.1	0	19/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1.0 30DA AVG DAILY MX		TWICE/GRAB	WEEK
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.011	0.014		*****	*****	*****	0	19/30	WEIR
	PERMIT REQUIREMENT	0.015, 0.010 DAILY AV	NA ***** DAILY MX	MGD	*****	*****	*****		WEEK-DAYS	FLOIN
COLIFORM, FECAL GENERAL 74055 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<45	80	0	2/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1000 30DA GEO DAILY MX		TWICE/MONTH	GRAB
TOTAL RESIDUAL CHLORINE	SAMPLE MEASUREMENT				0.5	1.3	1.9	0	19/30	GR
	PERMIT REQUIREMENT						2.0		WEEK-DAYS	GR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 MARTIN E. RIVERS, DIRECTOR
 OF ENVIRONMENTAL QUALITY
 STAFF

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

SIGNATURE OF PRINCIPAL EXECUTIVE
 OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

ETS
 AREA CODE

856-6601
 NUMBER

85 05 28
 YEAR MO DAY

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

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

PERMIT NUMBER
TN0026450

DISCHARGE NUMBER
114 2

F - FINAL LIMITS
STP DISCHARGE TO TENN RIVER

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	02	01		85	02	28
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT				*****					
00310 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.8	5.6	LBS/DY	*****	30	45		TWICE/GRAB	
PH	SAMPLE MEASUREMENT	*****	*****	*****	*****	30DA AVG	DAILY MX		MONTH	
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0		TWICE/GRAB	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT				MINIMUM		MAXIMUM		WEEK	
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.8	5.6	LBS/DY	*****	30	45		TWICE/GRAB	
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****	30DA AVG	DAILY MX		MONTH	
00545 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30DA AVG	DAILY MX		TWICE/GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT				*****	*****	*****		*****	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	.005	*****	MGD	*****	*****	*****		WEEK - FLOIND	
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	*****	*****				#/	
74055 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	1000	100ML		TWICE/GRAB	
DISSOLVED OXYGEN	SAMPLE MEASUREMENT				6.9	7.3	8.0		MG/L	0 19/30 GR
	PERMIT REQUIREMENT				1.0				5/7	GR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF

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

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

FTS 856-6601

85 05 28

AREA
CODE

NUMBER

YEAR MO DAY

TYPED OR PRINTED

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

NAME TYA - SEQUOIAH NUCLEAR
 ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

 T00026450
 PERMIT NUMBER

 115 1
 DISCHARGE NUMBER

 F - FINAL LIMITS
 VEHICLE WASH POND EFFLUENT

 FACILITY
 LOCATION

ATTN: JERRY E. LINER

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	02	01		85	02	28
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	<div></div>	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.8	*****	7.8		0	1/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****	9.5	18		0	4/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	40 DAILY MX	MG/L		WEEKLY	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.1	<0.1		0	4/30	GR
00545 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.5 DAILY MX	ML/L		WEEKLY	GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	*****	*****	*****	*****	<5.0	<5.0		0	4/30	GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	15 DAILY AV	20 DAILY MX	MG/L		WEEKLY	GRAB
FLOW, IN CONC T OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	<0.002	0.003		*****	*****	*****	*****	0	4/30	WEIR
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		WEEKLY	FLOIND
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE	
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	ETS AREA CODE	856-6601 NUMBER	85 05 28 YEAR MO DAY

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

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

TN0026450
PERMIT NUMBER

101 1
DISCHARGE NUMBER

F - FINAL LIMITS
DIFFUSER GATE TO TENN RIVER

FACILITY _____
LOCATION _____

MONITORING PERIOD						
FROM			TO			
YEAR	MO	DAY	YEAR	MO	DAY	
85	03	01	85	03	31	
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)	

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 P 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	45.8	51.4	57.5	0	31/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	DEG.F	SEE PERMIT	GRAB10
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 O 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	70.7	74.8	80.4	0	31/30	REC
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	112.5	DEG.F	CONTINUOUS	RECORDR
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 R 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****			*			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	97.0	DEG.F	CONTINUOUS	RECORDR
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 6 0 DOWNSTREAM MONITOR	SAMPLE MEASUREMENT	*****	*****	*****			*			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	101.0	DEG.F	DAILY	GRAB
TEMP DIFF. BETWEEN SAMPLE AND UPSTREAM 00018 M 0 UP- AND DOWN-STREAM	SAMPLE MEASUREMENT	*****	*****	*****	3.4	4.8	5.7	5	30/30**	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	5.4	DEG.F	SEE PERMIT	GRAB10
PH 00400 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****		*****				
	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	SEE PERMIT	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1634	1695		*****	*****	*****	*****	0	CONT REC
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	CONTINUOUS	RECORDR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF

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 32 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
DATE
AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
P CORRESPONDS TO AMBIENT TEMPERATURE, 'Q' TO OPEN MODE, 'S' TO CLOSED MODE. INDICATE WHICH IS APPROPRIATE. *PLANT OPERATED IN OPEN MODE ALL MONTH.
SEE PERMIT FOR FURTHER MONITORING REQUIREMENTS. **DATA NOT AVAILABLE ONE DAY THIS REPORTING PERIOD.
A NOTIFICATION OF NONCOMPLIANCE IS ATTACHED.

NOTIFICATION OF NONCOMPLIANCE WITH EFFLUENT LIMITATIONS - NPDES PERMIT NO.
TN0026450 - SEQUOYAH NUCLEAR PLANT (SQN)

Description of the discharge--Discharge No. 101 - Diffuser discharge gate. The temperature rise limit (5.4°F or 3.0°C) was exceeded during February and March. Cooling towers were off to assess for icing damage.

Cause and period of the noncompliance--Severe environmental conditions caused significant icing damage to the cooling towers at SQN during the month of January. This was discussed in the last Discharge Monitoring Report. The noncompliances during February and March were a continuation of the noncompliance started on January 31, 1985, when the cooling towers were taken offline to assess structural damage. The cooling tower assessment was scheduled to include the period January 31 through March 15. Table 1 lists all occurrences of temperature rises above the limit. Figure 1 shows the computed temperature rises and river flows computed for the plant site. No noncompliances occurred after March 15.

Steps taken to reduce, eliminate, and prevent recurrence of the noncomplying discharge--Structural repairs on the cooling towers are expected to begin this summer.

Note--There are discrepancies between the thermal data reported in the Discharge Monitoring Report monthly summary tables of thermal compliance data and this written notification of noncompliance. Data conversion between metric and English units has caused roundoff errors in the data that is used for reporting. These errors are only .1 degree F, but do cause discrepancies in reported noncompliances. Therefore, the tabular data shows several noncompliances that do not appear in the permanent temperature record. As can be seen from Figure 1, the occurrences near the limit are short in duration. We are presently working on converting all temperatures recorded and evaluated to English units to provide future consistency between reported and permanently stored data.

WSDB 5/17/85

PO:LSS

Coordinated: J. R. Henson/SQN

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

NAME TVA - SEQUOYAH NUCLEAR
 ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

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

(2-16)

(17-19)

TN0026450

PERMIT NUMBER

101 1

DISCHARGE NUMBER

F - FINAL LIMITS
 DIFFUSER GATE TO TENN RIVER

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

FACILITY
 LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	03	01		85	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
CHLORINE, TOTAL RESIDUAL 50060 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****					*	
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.10 INST MX	1G/L	WEEK- DAYS	CALCTD
TEMPERATURE RATE OF CHANGE DEG. F/HOUR 74029 6 0 DOWNSTREAM MONITOR	SAMPLE MEASUREMENT	0.7	1.9	DEG F/	*****	*****	*****	*****	0 30/30**	REC
	PERMIT REQUIREMENT	*****	3.6 INST MX	HOUR	*****	*****	*****	*****	SEE PERMIT	CALCTD
DOWNSTREAM TEMPERATURE	SAMPLE MEASUREMENT	56.6	62.4	DEG F					0 31/30	REC
	PERMIT REQUIREMENT		86.9						CONT	REC
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 MARTIN E. RIVERS, DIRECTOR
 OF ENVIRONMENTAL QUALITY
 STAFF

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

SIGNATURE OF PRINCIPAL EXECUTIVE
 OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

PTS 856-6601 85 05 28
 AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 CLOSED MODE. INDICATE WHICH IS APPROPRIATE.
 SEE PERMIT FOR FURTHER MONITORING REQUIREMENTS.

CORRESPONDS TO AMBIENT TEMPERATURE, 'Q' TO OPEN MODE, 'S' TO
 *DID NOT CHLORINATE THIS REPORTING PERIOD.
 **DATA NOT AVAILABLE ONE DAY THIS REPORTING PERIOD.

NAME TVA - SEQUOYAH NUCLEAR
 ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

TH0026450
 PERMIT NUMBER

102 1
 DISCHARGE NUMBER

F - FINAL LIMITS
 YARD DRAINAGE POND EFFLUENT

FACILITY
 LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	03	01		85	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	<div></div>	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.7	*****	8.9		0	13/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		THREE/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****	7.0	12		0	21/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100 DAILY MX	MG/L		WEEK- DAYS	GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	*****	*****	*****	*****	<5.0	<5.0		0	4/30	GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	5 DAILY AV	20 DAILY MX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT		*		*****	*****	*****	*****			
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****		CONTINUOUS	RECORD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE	DATE				
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY
TYPED OR PRINTED		856-6601	85	05	28		

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 PH MEASUREMENT FREQUENCY SHALL NOT BE LESS THAN 1/WEEK AFTER 1 YEAR,
 UNLESS DETERMINED OTHERWISE.
 *FLOWMETER OUT THIS REPORTING PERIOD.

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16) TN0026450
PERMIT NUMBER
(17-19) 103 1
DISCHARGE NUMBER

F - FINAL LIMITS
LOW VOL WASTE TREAT POND EFFL

FACILITY _____
LOCATION _____

MONITORING PERIOD
FROM
YEAR MO DAY TO YEAR MO DAY
85 03 01 85 03 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.7	*****	9.84		6	20/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		THREE/ WEEK	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	60	102		*****	14	26		0	5/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	380 DAILY AV	1250 DAILY MX	LBS/DY	*****	30 DAILY AV	100 DAILY MX	MG/L		THREE/ WEEK	GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	<23	<25		*****	<5.0	<5.0		0	4/30	GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	190 DAILY AV	250 DAILY MX	LBS/DY	*****	15 DAILY AV	20 DAILY MX	MG/L		TWICE/ WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.52	0.66		*****	*****	*****	*****	0	31/30	CAL
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****		DAILY TOTALZ	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE	DATE			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS AREA CODE	856-6601 NUMBER	85 YEAR	05 MO

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

IN THE EVENT OF DISCHARGE OF TURBINE BLDG SUMP TO COND COOL WATER CHANNEL OR DRAINAGE POND, TSS, OIL AND GREASE, AND PH SHALL BE MONITORED 5/WEEK.
A NOTIFICATION OF NONCOMPLIANCE IS ATTACHED.

NOTIFICATION OF NONCOMPLIANCE WITH EFFLUENT LIMITATIONS - NPDES PERMIT
NO. TN0026450 - SEQUOYAH NUCLEAR PLANT

Description of the Discharge--Discharge No. 103 - Low volume waste treatment pond effluent. Grab samples collected on the following days violated the NPDES permit limitation as follows:

<u>Date</u>	<u>Max pH Value</u>
3/7/85	9.06
3/12/85	9.43
3/14/85	9.84
4/11/85	9.76

Cause and Period of the Noncompliance--The only source of alkaline waste water to this pond is from the waste neutralization tanks for the condensate, makeup water treatment, and temporary water treatment demineralizers. Operation of these systems has been checked and no deviations from procedures were detected. The discharge was stopped after each noncompliance was detected and was not started back until samples indicated it was back within limits. The maximum times that the discharge was in noncompliance are as follows:

<u>Date</u>	<u>Time(hours)</u>
3/6-7	30
3/8-12	96
3/13-14	26
4/10-11	27

Steps Taken to Reduce, Eliminate, and Prevent Recurrence of the Noncomplying Discharge--Attention to details of the operating procedures was stressed to the operators. Also, the procedure for the temporary water treatment plant was changed to put some of the demineralizer rinse water into the neutralization tank that was previously sent to the pond. It is possible that the first few minutes of the rinse was out of limits without the operator knowing it.

JRH:JLD
4/30/85

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16) TN0026450
PERMIT NUMBER
(17-19) 104 1
DISCHARGE NUMBER

F - FINAL LIMITS
RADWSTE SYST TO COOL TWR BLWDN

FACILITY
LOCATION

MONITORING PERIOD
FROM
YEAR MO DAY TO YEAR MO DAY
85 03 01 85 03 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.0	*****	7.5		0	9/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		TWICE/GRAB WEEK	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	<0.71	2.4		*****	<4.2	17		0	8/30	COMP
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	13 DAILY AV	42 DAILY MX	LBS/DY	*****	30 DAILY AV	100 DAILY MX	MG/L		TWICE/COMPOS WEEK	
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	<0.78	<1.4		*****	<5.0	<5.0		0	8/30	GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	6.3 DAILY AV	8.3 DAILY MX	LBS/DY	*****	15 DAILY AV	20 DAILY MX	MG/L		TWICE/GRAB WEEK	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.018	0.035		*****	*****	*****	*****	0	30/30	REC
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****		ONCE/RCORDR BATCH	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE	
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	856-6601

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
DURING ABNORMAL FLOW CONDITIONS, EXCEEDING .05 MGD AS A 7 DAY AVERAGE,
DAILY MAXIMUM QUANTITY LIMITS MAY BE EXCEEDED, BUT SHALL NOT EXCEED 4 TIMES LIMITATIONS LISTED.
TSS SAMPLE TYPE = 1 GRAB/BATCH COMPOSITED FOR ANALYSIS OVER A 24 HOUR DAY.

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16)
TN0026450
PERMIT NUMBER

(17-19)
105 1
DISCHARGE NUMBER

F - FINAL LIMITS
REGEN TO COOL TWR BLWDN LINE

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	03	01		85	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.1	*****	9.0		16	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	ONCE/BATCH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	1.3	2.1		*****	15	86		11	COMP
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	25 DAILY AV	83 DAILY MX	LBS/DY	*****	30 DAILY AV	100 DAILY MX	MG/L	ONCE/BATCH	COMPOS
OIL AND GREASE (SOXHLET EXTH.) TOT.	SAMPLE MEASUREMENT	<0.98	<2.7		*****	<5.2	7.3		11	GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	13 DAILY AV	17 DAILY MX	LBS/DY	*****	15 DAILY AV	20 DAILY MX	MG/L	DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.022	0.065		*****	*****	*****	*****	11	CAL
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****	ONCE/BATCH	CALCTD
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
FTS AREA CODE	856-6601 NUMBER	85 YEAR	05 MO	28 DAY

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

SHOULD ABNORMAL CONDITIONS NECESSITATE INCREASED WASTE FLOW ABOVE 0.10 MGD, AS A 7 DAY AVERAGE, DAILY MAXIMUM QUANTITY LIMITATIONS MAY BE EXCEEDED BUT SHALL NOT EXCEED 2 TIMES THE LIMITATIONS LISTED.

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16)
TN0026450
PERMIT NUMBER

(17-19)
106 1
DISCHARGE NUMBER

F - FINAL LIMITS
STM GEN BLWDN TO COOL TWR BLDN

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	03	01		85	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****		*****				
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	***** MINIMUM	*****	***** MAXIMUM	50	SEE PERMIT	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT				*****					
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	50 DAILY AV	170 DAILY MX	LBS/DY	*****	30 DAILY AV	100 DAILY MX	MG/L	ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	NO DISCHARGE			*****	*****	*****	*****		
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****	ONCE/ MONTH	INSTANT
	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
MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF

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
856-6601
DATE
85 05 28

FTS
AREA CODE

NUMBER

YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
SHOULD INTERNAL PLANT CHEMISTRY REQUIREMENTS NECESSITATE INCREASED
BLowDOWN FLOW OVER .2 MGD AS A 7 DAY AVERAGE, DAILY MAXIMUM QUANTITY LIMITATIONS MAY BE EXCEEDED BUT
SHALL NOT EXCEED 4 TIMES THE LIMITATIONS LISTED.

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16)
TN0026450
PERMIT NUMBER

(17-19)
106 2
DISCHARGE NUMBER

F - FINAL LIMITS
STEAM GEN BLWDN (QUARTERLY)

FACILITY
LOCATION

MONITORING PERIOD							
YEAR			MO	DAY	YEAR		
FROM	85	01	01	TO	85	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
OIL AND GREASE (SOXHLET EXTR.) TOT. 00550 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				*****					
	PERMIT REQUIREMENT	25 DAILY AV	33 DAILY MX	LBS/DY	*****	15 DAILY AV	20 DAILY MX	MG/L	QTRLY	GRAB
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE	
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		FTS 856-6601	85 05 28
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):
SHOULD INTERNAL PLANT CHEMISTRY REQUIREMENTS NECESSITATE INCREASED
SDO... 2... 7 DAY AVERAGE, DAILY MAXIMUM QUANTITY LIMITATIONS MAY BE EXCEEDED BUT
SHALL NOT EXCEED THE LIMITATIONS LISTED.

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

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

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

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16)
TN0026450
PERMIT NUMBER

(17-19)
107 1
DISCHARGE NUMBER

F - FINAL LIMITS
METAL CLN WASTE PND TO COND CH

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	03	01		85	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
CHEM. OXYGEN DEMAND (HIGH LEVEL) (COD) 00340 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT		*	LBS/DAY	*****		*			
	PERMIT REQUIREMENT		834		*****	***** DAILY AV	100 DAILY MX		WEEKLY	COMP-8
PH	SAMPLE MEASUREMENT	*****	*****	*****	8.3	*****	8.9	0	6/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	21	30	LBS/DAY	*****	6.2	8.0	0	6/30	GR
	PERMIT REQUIREMENT		250		*****	***** DAILY AV	30 DAILY MX		WEEKLY	COMP-8
OIL AND GREASE (SOXHLET EXTR.) TOT. 00550 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	<17	<30	LBS/DAY	*****	<5.0	<5.0	0	6/30	GR
	PERMIT REQUIREMENT		125		*****	***** DAILY AV	15 DAILY MX		WEEKLY	GRAB
PHOSPHORUS, TOTAL (AS P) 00665 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT		*	LBS/DAY	*****		*			
	PERMIT REQUIREMENT		8.3		*****	***** DAILY AV	1.0 DAILY MX		WEEKLY	COMP-8
COPPER, TOTAL (AS CU) 01042 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	<0.10	0.38	LBS/DAY	*****	<0.029	0.064	0	6/30	8-HR COMP
	PERMIT REQUIREMENT		8.3		*****	***** DAILY AV	1.0 DAILY MX		WEEKLY	COMP-8
IRON, TOTAL (AS FE) 01045 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.2	2.8	LBS/DAY	*****	0.33	0.47	0	6/30	8-HR COMP
	PERMIT REQUIREMENT		8.3		*****	***** DAILY AV	1.0 DAILY MX		WEEKLY	COMP-8

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

AREA CODE 856-6601

85 05 28
YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
IN NO CASE SHALL THE QUANTITY DISCHARGED EXCEED THE QUANTITY DETERMINED BY MULTIPLYING THE VOLUME OF THE BATCH OF METAL CLEANING WASTE GENERATED BY THE CONCENTRATION. SEE PERMIT FOR ADDITIONAL SAMPLING REQUIREMENTS.
*NO PHOSPHORUS OR ORGANIC CHEMICAL BEARING COMPOUNDS WERE USED.

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421
FACILITY _____
LOCATION _____

(2-16) TN0026450
PERMIT NUMBER
(17-19) 107 1
DISCHARGE NUMBER

F - FINAL LIMITS
METAL CLN WASTE PND TO COND CH

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	03	01		85	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

ATTN: JERRY E. LINER

PARAMETER (32-37)	<div></div>	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE		UNITS			
						(46-53)					
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.41	0.72	MGD	*****	*****	*****	*****	0	6/30	CAL
	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX		*****	*****	*****	*****			
	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										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE	
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		FTS 856-6601 AREA CODE NUMBER	85 05 28 YEAR MO DAY
TYPED OR PRINTED					

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
IN NO CASE SHALL THE QUANTITY DISCHARGED EXCEED THE QUANTITY
DETERMINED BY MULTIPLYING THE VOLUME OF THE BATCH OF METAL CLEANING WASTE GENERATED BY THE CONCENTRATION.
SEE PERMIT FOR ADDITIONAL SAMPLING REQUIREMENTS.

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16)
TH0026450
PERMIT NUMBER

(17-19)
108 1
DISCHARGE NUMBER

F - FINAL LIMITS
CONCRETE PLT SETTLING POND

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	03	01		85	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	*****		*****					
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	***** MINIMUM	*****	*****	***** SJ		SEE PERMIT	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****		4.0		0	1/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	40	MG/L		WEEKLY	GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	*****	*****	*****	*****		<5.0		0	1/30	GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	20	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.012	0.063		*****	*****	*****	*****	0	5/30*	WEIR
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		WEEKLY	FLOI/D
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE			
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS	856-6601	85	05	28
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
THERE WAS NO DISCHARGE FOUR WEEKS THIS REPORTING PERIOD.
*DISCHARGE IS IN PROCESS OF BEING ELIMINATED.

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

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

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

NAME TENNESSEE VALLEY AUTHORITY
ADDRESS 6411 EAST BRAINERD ROAD
CHATTANOOGA, TN 37421
FACILITY SEQUOYAH NUCLEAR PLANT
LOCATION SODDY, TN 37379

TN0026450

PERMIT NUMBER

109

DISCHARGE NUMBER

EMERGENCY DIESEL GENERATOR
NO. 5 COOLING WATER EFFLUENT

MONITORING PERIOD								
YEAR	MO	DAY	YEAR	MO	DAY			
FROM 85	03	01	TO 85	03	31			
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)			

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	NO DISCHARGE		MGD						
	PERMIT REQUIREMENT								1/14	P LOG
ERCW SYSTEM TOTAL CHLORINE RESIDUAL	SAMPLE MEASUREMENT						MG/L			
	PERMIT REQUIREMENT					0.8			1/14	GR
	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 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE		
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF										
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				FTS.	856-6601	85	05	28
						AREA CODE	NUMBER	YEAR	MO	DAY

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

MONITORING REQUIRED ONLY DURING TESTING PERIODS. ALSO, LIMITATIONS AND MONITORING ARE NOT APPLICABLE DURING AN ACTUAL EMERGENCY SITUATION.

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16)
TN0026450
PERMIT NUMBER

(17-19)
110 1
DISCHARGE NUMBER

F - FINAL LIMITS
RECYCLED COOLING WATER FLOW

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	03	01		85	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0	SAMPLE MEASUREMENT	*****	*****	*****	NO DISCHARGE						
EFFLUENT GROSS VALUE PH	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	101.0	DEG.F		DAILY	GRAB10
	SAMPLE MEASUREMENT	*****	*****	*****		*****					
00400 1 0	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0	SU		WEEKLY	GRAB
EFFLUENT GROSS VALUE					MINIMUM		MAXIMUM				
CHLORINE, TOTAL RESIDUAL 50060 1 0	SAMPLE MEASUREMENT	*****	*****	*****							
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.10	MG/L		WEEKLY	GRAB10
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE	
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF		856-6601		85	05
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)

ADDITIONAL MONITORING FROM TN DEPT OF PUBLIC HEALTH CERTIFICATION LETTER OF JAN 31, 1983.
SEE LETTER FOR REQUIREMENTS TO ESTABLISH RELATIONSHIP BETWEEN FISH DISTRESS/KILL-AND-CHLORINATION LEVEL.

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

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

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

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 5411 E. BRAINERD RD.
CHATTANOOGA TN 37421

PERMIT NUMBER
TN0026450

DISCHARGE NUMBER
111 1

F - FINAL LIMITS
STP DISCHARGE

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	03	01		85	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

ATTN: JERRY E. LINER

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
BOD, 5-DAY (20 DEG. C) 00310 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.62	1.5		*****	***** 34	***** 55	*****	2	3/30 GR
	PERMIT REQUIREMENT	3.8 30DA AVG	5.0 9.3 DAILY MX	LBS/DY	*****	***** 30	***** 45	*****		TWICE/GRAB MONTH
PH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****		
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	***** MINIMUM	*****	***** MAXIMUM	***** SU		SEE PERMIT
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.58	1.1		*****	18	19		0	2/30 GR
	PERMIT REQUIREMENT	3.8 6.3 30DA AVG	5.0 5.6 DAILY MX	LBS/DY	*****	30 30DA AVG	45 DAILY MX	MG/L		TWICE/GRAB MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.005	0.022		*****	*****	*****	*****	0	21/30 WEIR
	PERMIT REQUIREMENT	0.015 DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****		WEEK- DAYS FLOIND
CHLORINE, TOTAL RESIDUAL 50060 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	1.0	1.2	1.8		0	21/30 WEIR
	PERMIT REQUIREMENT	*****	*****	*****	*****	***** DAILY AV	2.0 DAILY MX	MG/L		WEEK- DAYS GRAB
FECAL COLIFORM	SAMPLE MEASUREMENT				<10	<10	10	N/100 ML	0	2/30 GR
	PERMIT REQUIREMENT				NA	NA	1000			2/30 GR
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

AREA CODE 856-6601
NUMBER 85 05 28
YEAR MO DAY

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

A NOTIFICATION OF NONCOMPLIANCE IS ATTACHED.

NOTIFICATION OF NONCOMPLIANCE WITH EFFLUENT LIMITATIONS - NPDES PERMIT
NO. TN0026450 - SEQUOYAH NUCLEAR PLANT

Description of the Discharge--Discharge No. 111 - Sewage treatment plant effluent. The following grab samples had biochemical oxygen demand (BOD) and fecal coliform (FC) concentrations in excess of the NPDES permit limitations of 45 mg/l and 1,000/ml, respectively.

<u>Date</u>	<u>Parameter</u>	<u>Concentration</u>
3/20/85	BOD	55 mg/l
4/10/85	FC	>2,000/ml
4/11/85	FC	>2,000/ml
4/12/85	FC	>2,000/ml
4/16/85	FC	>2,000/ml

Cause and Period of the Noncompliance--The pumps that pump sewage from the septic tanks to the sand filters failed on March 18 resulting in no flow to the sand filters. The operator was not aware of the problem and turned the effluent pumps to manual to collect a sample. He pumped only 800 gallons out of the wetwell and it is suspected this unusual low level fluctuation in the wetwell caused the excess BOD. The pumps were repaired and a sample recollected on March 26 which had a BOD of 20 mg/l. Although very little sewage was actually discharged, the maximum period of non-compliance was six days.

The sand filter effluent pumps began to pump irratically on April 10. The problem was diagnosed as faulty water level controls which caused the pumps to fail to pump automatically, but they could still be pumped manually. The operator would turn one pump on manually and then collect his sample. This did not allow enough contact time to effectively disinfect the sewage before the sample was taken. This same procedure was used to collect all of the samples listed above. A sample collected on April 19 had a FC concentration of <10/ml. The maximum period of noncompliance was therefore 27 days. However, it could have been as little as nine days.

Steps Taken to Reduce, Eliminate, and Prevent Recurrence of the Noncomplying Discharge--The pumps were repaired and the effluent pumps are operated manually while the level controls are being repaired. Also, an analysis of the flow problem was made and a procedure developed to keep flows more steady and sampling more representative of the discharge.

JRH:JLD
4/30/85

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16)
TH0026450
PERMIT NUMBER

(17-19)
112 1
DISCHARGE NUMBER

F - FINAL LIMITS
STP DISCHARGE

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	03	01		85	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	<div></div>	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.015	0.025	MGD					0	21/30	GR
	PERMIT REQUIREMENT	0.025	NA							5/7	WEIR
BOD ₅	SAMPLE MEASUREMENT	4.8	10	LBS/DAY	1.6	32	71	MG/L	3	3/30	GR
	PERMIT REQUIREMENT	6.3	8.3			30	45			2/30	GR
SUSPENDED SOLIDS	SAMPLE MEASUREMENT	1.8	2.3	LBS/DAY	12	14	16	MG/L	0	2/30	GR
	PERMIT REQUIREMENT	6.3	8.3			30	45			2/30	GR
TOTAL CHLORINE RESIDUAL	SAMPLE MEASUREMENT				0.5	1.4	1.9	MG/L	0	21/30	GR
	PERMIT REQUIREMENT						2.0			5/7	GR
FECAL COLIFORM	SAMPLE MEASUREMENT				<10	<10	<10	N/100 ML	0	2/30	GR
	PERMIT REQUIREMENT				NA	NA	1,000			2/30	GR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
ETS AREA CODE	856-6601 NUMBER	85 YEAR	05 MO	28 DAY

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

A NOTIFICATION OF NONCOMPLIANCE IS ATTACHED.

NOTIFICATION OF NONCOMPLIANCE WITH EFFLUENT LIMITATIONS - NPDES PERMIT
NO. TN0026450 - SEQUOYAH NUCLEAR PLANT

Description of the discharge--Discharge No. 112 - Sewage treatment plant effluent. The following grab samples had biochemical oxygen demand (BOD) and fecal coliform (FC) concentrations in excess of the NPDES permit limitation of 45 mg/l and 1000/ml, respectively.

<u>Date</u>	<u>Parameter</u>	<u>Concentration</u>
02/21/85	FC	2000/ml
02/21/85	BOD	76 mg/l
03/07/85	BOD	71 mg/l

Cause and period of the noncompliance--On or about February 20, 1985, plant maintenance crews were sent to the plant to pull two of the four equalization basin pumps for repair. They used a portable, air-operated pulsating discharge pump to dewater the tank. Instead of placing the discharge hose into the first septic tank settling compartment, (the cover was bolted shut) they placed it into the second compartment (which was open). This stirred the previously settled sewage which was later pumped to the sand filter by the dosing pumps. The filter trapped most of the solid, but enough came through to cause the BOD and FC excursions. A sample recollected on February 27, 1985, had a BOD of 20 mg/l and FC 10. The maximum period of noncompliance for this excursion was six days.

The sample collected March 7, 1985, which had a BOD of 71 mg/l was clear, had a FC concentration of 0, total residual chlorine (TRC) of 1.2, and a total suspended solids (TSS) concentration of 16 mg/l. The flow during the past twenty-four hours was only 12,500 gal; about half of design capacity. A sample collected on March 15, 1985, had a BOD of 24 mg/l. No explanation is available for this excursion unless it could have been caused by a residual of the February 21, 1985 upset. The maximum period of this excursion was eight days.

Steps taken to reduce, eliminate, and prevent recurrence of the noncomplying discharge--The septic tanks were pumped out and the maintenance crews will be supervised more carefully in the future to be sure they do not stir up the septic tank contents.

JRH:ERM
4/30/85

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16)
TN0026450
PERMIT NUMBER

(17-19)
113 1
DISCHARGE NUMBER

F - FINAL LIMITS
STP TO COND COOLING WATER CHAN

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	03	01		85	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53)			QUANTITY OR LOADING (54-61)	(4 Card Only) (38-45)				QUALITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS		MINIMUM	AVERAGE	MAXIMUM	UNITS							
BOD, 5-DAY (20 DEG. C) 00310 1 0 EFFLUENT GROSS VALUE PH	SAMPLE MEASUREMENT	0.06	0.08			*****	9.8	10			0	2/30	GR			
	PERMIT REQUIREMENT	7.5 30DA AVG	10 DAILY MX	LBS/DY	*****	30	45	MG/L		TWICE/GRAB MONTH						
	SAMPLE MEASUREMENT	*****	*****	*****		*****										
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****	SU	SEE PERMIT						
00400 1 0 EFFLUENT GROSS VALUE SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	0.18	0.26			*****	34	36		1	2/30	GR				
	PERMIT REQUIREMENT	7.5 30DA AVG	10 DAILY MX	LBS/DY	*****	30	45	MG/L		TWICE/GRAB MONTH						
00530 1 0 EFFLUENT GROSS VALUE SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.1	<0.1			0	20/30	GR				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1.0 DAILY AV	1.0 DAILY MX	ML/L	WEEK- DAYS		GRAB				
00545 1 0 EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.001	0.002			*****	*****	*****	*****	0	20/30	WEIR				
	PERMIT REQUIREMENT	0.030 DAILY AV	NA DAILY MX	MGD	*****	*****	*****	*****	*****	WEEK- DAYS		FLOIND				
50050 1 0 EFFLUENT GROSS VALUE CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	1.0	1.3	1.9			0	20/30	GR				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	2.0 DAILY AV	2.0 DAILY MX	MG/L	WEEK- DAYS		GRAB				
50060 1 0 EFFLUENT GROSS VALUE FECAL COLIFORM	SAMPLE MEASUREMENT				<10	<10	<10	N/100 ML		0	2/30	GR				
	PERMIT REQUIREMENT				NA	NA	1000				2/30	GR				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.	TELEPHONE		DATE		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO
			856-6601	85	05	28

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

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 5411 E. BRAINERD RD.
CHATTANOOGA TN 37421

PERMIT NUMBER
TN0026450

DISCHARGE NUMBER
114 1

F - FINAL LIMITS
STP DISCHARGE TO TENN RIVER

FACILITY
LOCATION

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
85	03	01	85	03	31
FROM			TO		
(20-21)			(26-27)		
(22-23)			(28-29)		
(24-25)			(30-31)		

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	<div></div>	(3 Card Only) (46-53)			(4 Card Only) (38-45)				QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS						
BOD, 5-DAY (20 DEG. C) 00310 1 0	SAMPLE MEASUREMENT	0.35	0.57		*****	5.4	6.2			0	2/30	GR		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.8 30DA AVG	5.05-8 DAILY MX	LBS/DY	*****	30 30DA AVG	45 DAILY MX	MG/L			TWICE/GRAB MONTH			
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.5	*****	6.9			0	10/30	GR		
00400 1 0	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU			TWICE/GRAB WEEK			
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.46	0.83		*****	6.0	9.0			0	2/30	GR		
SOLIDS, TOTAL SUSPENDED 00530 1 0	PERMIT REQUIREMENT	3.8 30DA AVG	5.05-8 DAILY MX	LBS/DY	*****	30 30DA AVG	45 DAILY MX	MG/L			TWICE/GRAB MONTH			
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.1	<0.1			0	20/30	GR		
SOLIDS, SETTLEABLE 00545 1 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1.0 DAILY MX	ML/L			TWICE/GRAB WEEK			
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.007	0.018		*****	*****	*****	*****		0	20/30	WEIR		
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0	PERMIT REQUIREMENT	.010 DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****			WEEK- DAYS	FLOIND		
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<353	>1000	#/		1	3/30	GR		
COLIFORM, FECAL GENERAL 74055 1 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1000 DAILY MX	100ML			TWICE/GRAB MONTH			
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				0.5	1.6	1.9	MG/L		0	20/30	GR		
TOTAL RESIDUAL CHLORINE	PERMIT REQUIREMENT						2.0				WEEK- DAYS	GR		

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			856-6601		85	05	28

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

A NOTIFICATION OF NONCOMPLIANCE IS ATTACHED.

NOTIFICATION OF NONCOMPLIANCE WITH EFFLUENT LIMITATIONS - NPDES PERMIT
NO. TN0026450 - SEQUOYAH NUCLEAR PLANT

Description of the discharge--Discharge No. 114 - Sewage treatment plant effluent. A grab sample collected on March 20, 1985, had a fecal coliform (FC) concentration greater than the NPDES permit limit of 1000/ml.

Cause and period of the noncompliance--The chlorine solution in the chlorinator crock had just about run out and was refilled about one hour before the sample was taken. The contact time with the fresh chlorine solution was not adequate to provide complete disinfection before sampling. A repeat sample on March 22, 1985, had a FC concentration of <10/ml. Therefore, the maximum period of noncompliance was two days.

Steps taken to reduce, eliminate, and prevent recurrence of the noncomplying discharge--The decision was made to refill the chlorine crock before the level becomes too low with low-strength solution.

JRH:JLD
4/30/85

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

TN0026450
PERMIT NUMBER

114 2
DISCHARGE NUMBER

F - FINAL LIMITS
STP DISCHARGE TO TENN RIVER

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	03	01		85	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

ATTN: JERRY E. LINER

PARAMETER (32-37)		(3 Card Only) (46-53)			(4 Card Only) (38-43)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT				*****					
00310 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.8 30DA AVG	5.6 DAILY MX	LBS/DY	*****	30 30DA AVG	45 DAILY MX	MG/L	TWICE/GRAB	MONTH
PH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****			
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	50	TWICE/GRAB	WEEK
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT				*****					
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.8 30DA AVG	5.6 DAILY MX	LBS/DY	*****	30 30DA AVG	45 DAILY MX	MG/L	TWICE/GRAB	MONTH
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****					
00545 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1.0 DAILY MX	ML/L	TWICE/GRAB	WEEK
FLO3, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT				*****	*****	*****	*****		
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	.005 DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****	WEEK- FLOIND	DAYS
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	*****	*****			#/		
74055 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1000 30DA GEO	100ML	TWICE/GRAB	MONTH
DISSOLVED OXYGEN	SAMPLE MEASUREMENT				6.0	6.6	7.0	MG/L	0	20/30 GR
	PERMIT REQUIREMENT				1.0				5/7	GR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF
TYPED OR PRINTED

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

TELEPHONE
DATE
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
FTS 856-6601
85 05 28
AREA CODE NUMBER YEAR MO DAY

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

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 5411 E. BRAINERD RD.
CHATTANOOGA TN 37421

TH0026450
PERMIT NUMBER

115 1
DISCHARGE NUMBER

F - FINAL LIMITS
VEHICLE WASH POND EFFLUENT

FACILITY
LOCATION

MONITORING PERIOD							
YEAR			MO	DAY	YEAR		
FROM	85	03	01	TO	85	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****		*****				
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****					
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	40 DAILY MX	MG/L	WEEKLY	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****					
00545 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	***** DAILY AV	.5 DAILY MX	ML/L	WEEKLY	GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	*****	*****	*****	*****					
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	15 DAILY AV	20 DAILY MX	MG/L	WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	NO DISCHARGE*			*****	*****	*****	*****		
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	WEEKLY	FLOI
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE	
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF		856-6601		85	05
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS AREA CODE	NUMBER	YEAR	MO DAY

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

*DISCHARGE IS IN PROCESS OF BEING ELIMINATED.

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16) TN0026450
PERMIT NUMBER
(17-19) 101 1
DISCHARGE NUMBER

F - FINAL LIMITS
DIFFUSER GATE TO TENN RIVER

FACILITY
LOCATION

MONITORING PERIOD
FROM YEAR MO DAY TO YEAR MO DAY
85 04 01 85 04 30
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 P 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	57.3	64.5	73.7		0	27/30**	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	DEG.F		SEE PERMIT	GRAB10
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 O 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	71.2	75.4	79.5		0	27/30**	REC
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	112.5	DEG.F		CONTINUOUS	RCORDR
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 R 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****			*				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	97.0	DEG.F		CONTINUOUS	RCORDR
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 6 0 DOWNSREAM MONITOR	SAMPLE MEASUREMENT	*****	*****	*****			*				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	101.0	DEG.F		DAILY	GRAB
TEMP DIFF. BETWEEN SAMPLE AND UPSTREAM 00018 0 0 UP- AND DOWN-STREAM	SAMPLE MEASUREMENT	*****	*****	*****	-6.6	-0.3	4.2		0	30/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	5.4	DEG.F		SEE PERMIT	GRAB10
PH	SAMPLE MEASUREMENT	*****	*****	*****							
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0	SU		SEE PERMIT	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1578	1779		*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	4GD	*****	*****	*****	*****		CONTINUOUS	RCORDR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF
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 laws may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
DATE
FTS 856-6601 85 05 28
AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all applicable permits)
CORRESPONDS TO AMBIENT TEMPERATURE, 'Q' TO OPEN MODE, 'S' TO CLOSED MODE. INDICATE WHICH IS APPROPRIATE. *PLANT OPERATED IN OPEN MODE ALL MONTH.
SEE PERMIT FOR FURTHER MONITORING REQUIREMENTS.
**COMPUTER MALFUNCTIONED THREE DAYS THIS REPORTING PERIOD.

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16)
TH0026450
PERMIT NUMBER

(17-19)
101 1
DISCHARGE NUMBER

F - FINAL LIMITS
DIFFUSER GATE TO TENN RIVER

FACILITY
LOCATION

MONITORING PERIOD						
FROM			TO			
YEAR	MO	DAY		YEAR	MO	DAY
85	04	01		85	04	30
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
CHLORINE, TOTAL RESIDUAL 50060 1 0	SAMPLE MEASUREMENT	*****	*****	*****	<0.1	<0.1	<0.1	0	10/30	CALC
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.10 HG/L INST MX		WEEK - DAYS	CALCTD
TEMPERATURE RATE OF CHANGE DEG. F/HOUR 74029 6 0	SAMPLE MEASUREMENT	0.6	1.8	DEG F/	*****	*****	*****	0	30/30	CAL
DOWNSTREAM MONITOR	PERMIT REQUIREMENT	*****	3.6 INST MX	HOURL	*****	*****	*****		SEE PERMIT	CALCTD
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		FTS 856-6601	85	05
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
CLOSED MODE. INDICATE WHICH IS APPROPRIATE.
SEE PERMIT FOR FURTHER MONITORING REQUIREMENTS.

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 5411 E. BRAINERD RD.
CHATTANOOGA TN 37421

TN0026450
PERMIT NUMBER

102 1
DISCHARGE NUMBER

F = FINAL LIMITS
YARD DRAINAGE POND EFFLUENT

FACILITY _____
LOCATION _____

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	04	01		85	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	<div></div>	(3 Card Only) (46-53)			(4 Card Only) (38-45)			QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS					
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.0	*****	9.33	SU	4	19/30	GR		
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM		THREE/GRAB WEEK				
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****	7.6	65	MG/L	0	22/30	GR		
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100 DAILY MX		WEEK - GRAB DAYS				
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	*****	*****	*****	*****	<8.8	24	MG/L	1	5/30	GR		
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	5 DAILY AV	20 DAILY MX		WEEKLY GRAB				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT		*	MGD	*****	*****	*****	*****					
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX		*****	*****	*****	*****	CONTINUOUS				
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.	TELEPHONE		DATE		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS 856-6601	85	05	28
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
PH MEASUREMENT FREQUENCY SHALL NOT BE LESS THAN 1/WEEK AFTER 1 YEAR, UNLESS DETERMINED OTHERWISE.
*FLOWMETER OUT THIS REPORTING PERIOD.
A NOTIFICATION OF NONCOMPLIANCE IS BEING PREPARED FOR OIL AND GREASE VALUES AND WILL BE FORWARDED IN THE IMMEDIATE FUTURE.

NOTIFICATION OF NONCOMPLIANCE WITH EFFLUENT LIMITATIONS - NPDES PERMIT
NO. TN0026450 - SEQUOYAH NUCLEAR PLANT

Description of the discharge--Discharge No. 102 - Yard drainage pond effluent. The pH of the effluent exceeded the NPDES permit limitation of 9.0. The maximum pH recorded on April 25, 1985 was 9.29 and on April 26, 1985 was 9.32 standard units.

Cause and period of the noncompliance--This excursion was caused by the turbine building sump discharge being inadvertently diverted to this pond when the sump discharge pH was too high. The sump discharge should have been diverted to Discharge No. 103 where it could be retained and treated.

The pH of the pond effluent (Discharge No. 102) was 8.78 at 1653 hours on April 24 and was 8.78 at 1900 hours on April 26. Therefore, the maximum period of noncompliance was 50 hours.

Steps taken to reduce, eliminate, and prevent recurrence of the noncomplying discharge--Operators are required to contact the Engineering Section before opening the valve to divert this flow to the yard drainage pond. However, the sign instructing the operators had been knocked down from its highly visible position on the valve handle. It has been replaced. Also, one source of high pH water, the temporary demineralizer via the station sump discharge line, has been eliminated. The temporary demineralizer was permanently shut down on April 27, 1985.

JRH:JLD
5/8/85

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRainerd Rd.
CHATTANOOGA TN 37421

TR0026450
PERMIT NUMBER

103 1
DISCHARGE NUMBER

F - FINAL LIMITS
LOW VOL WASTE TREAT POND EFFL

FACILITY
LOCATION
ATTN: JERRY E. LIMER

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	04	01		85	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.2	*****	9.8	5	17/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	THREE/ WEEK	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	30	45		*****	5.6	9.5	0	5/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	380 DAILY AV	1250 DAILY MX	LBS/DY	*****	30 DAILY AV	100 DAILY MX	MG/L	THREE/ WEEK	GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	<28	<37		*****	<5.0	<5.0	0	4/30	GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	190 DAILY AV	250 DAILY MX	LBS/DY	*****	15 DAILY AV	20 DAILY MX	MG/L	TWICE/ WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.60	1.2		*****	*****	*****	*****	0	30/30
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****	DAILY	TOTALZ
PCB	SAMPLE MEASUREMENT						<0.1	MG/L	0	1/180
	PERMIT REQUIREMENT									1/180
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF		856-6601		85	05	28
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO

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

IN THE EVENT OF DISCHARGE OF TURBINE BLDG SUMP TO COND COOL WATER CHANNEL OR DRAINAGE POND, TSS, OIL AND GREASE, AND PH SHALL BE MONITORED 5/WEEK.
A NOTIFICATION OF NONCOMPLIANCE IS ATTACHED.

NOTIFICATION OF NONCOMPLIANCE WITH EFFLUENT LIMITATIONS - NPDES PERMIT
NO. TN0026450 - SEQUOYAH NUCLEAR PLANT

Description of the Discharge--Discharge No. 103 - Low volume waste treatment pond effluent. Grab samples collected on the following days violated the NPDES permit limitation as follows:

<u>Date</u>	<u>Max pH Value</u>
3/7/85	9.06
3/12/85	9.43
3/14/85	9.84
4/11/85	9.76

Cause and Period of the Noncompliance--The only source of alkaline waste water to this pond is from the waste neutralization tanks for the condensate, makeup water treatment, and temporary water treatment demineralizers. Operation of these systems has been checked and no deviations from procedures were detected. The discharge was stopped after each noncompliance was detected and was not started back until samples indicated it was back within limits. The maximum times that the discharge was in noncompliance are as follows:

<u>Date</u>	<u>Time(hours)</u>
3/6-7	30
3/8-12	96
3/13-14	26
4/10-11	27

Steps Taken to Reduce, Eliminate, and Prevent Recurrence of the Noncomplying Discharge--Attention to details of the operating procedures was stressed to the operators. Also, the procedure for the temporary water treatment plant was changed to put some of the demineralizer rinse water into the neutralization tank that was previously sent to the pond. It is possible that the first few minutes of the rinse was out of limits without the operator knowing it.

JRH:JLD
4/30/85

NOTIFICATION OF NONCOMPLIANCE WITH EFFLUENT LIMITATIONS - NPDES PERMIT
NO. TN0026450 - SEQUOYAH NUCLEAR PLANT

Description of the discharge--Discharge No. 103 - Low volume waste treatment pond effluent. The pH of the effluent exceeded the NPDES permit limitation of 9.0 on April 30, 1985 at the following times: 9.06 at 0835, 9.58 at 1009, and 9.33 at 1230.

Cause and period of the noncompliance--The exact cause of the high pH is unknown, but it is suspected to be caused by either leakages from the caustic storage tank or discharges from the waste neutralization tank in the makeup water treatment plant. The pH was 7.22 at 1000 on April 29, and the pond discharge was isolated at 1315 on April 30. Therefore, the maximum period of noncompliance was 27 hours.

Steps taken to reduce, eliminate, and prevent recurrence of the noncomplying discharge--Waste neutralization tank logs are being checked to try to discover any improper operations and the whole caustic system is being checked for leaks.

JRH:JLD
5/8/85

NAME TYA - SEQUOIAH NUCLEAR
ADDRESS 6411 E. BRAINEED RD.
CHATTANOOGA TN 37421

PERMIT NUMBER
TJ0026450

DISCHARGE NUMBER
104 1

F - FINAL LIMITS
RADNSTE SYST TO COOL TWR BLWDN

FACILITY
LOCATION

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
85	04	01	85	04	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	<div></div>	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.0	*****	8.9		0	9/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		TWICE/GRAB WEEK	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	1.3	2.6		*****	7.8	18		0	8/30	COMP
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	13 DAILY AV	42 DAILY MX	LBS/DY	*****	30 DAILY AV	100 DAILY MX	MG/L		TWICE/COMPOS WEEK	
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	<1.2	<4.1		*****	<5.8	<11		0	7/30	GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	6.3 DAILY AV	8.3 DAILY MX	LBS/DY	*****	15 DAILY AV	20 DAILY MX	MG/L		TWICE/GRAB WEEK	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.021	0.045		*****	*****	*****	*****	0	27/30	REC
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****		ONCE/ BATCH	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE	DATE			
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	856-6601	85	05	28
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):
DURING ABNORMAL FLOW CONDITIONS, EXCEEDING .05 MGD AS A 7 DAY AVERAGE, DAILY MAXIMUM QUANTITY LIMITS MAY BE EXCEEDED, BUT SHALL NOT EXCEED 4 TIMES LIMITATIONS LISTED.
TSS SAMPLE TYPE = 1 GRAB/BATCH COMPOSITED FOR ANALYSIS OVER A 24 HOUR DAY.
ONE SAMPLE WAS INADVERTENTLY NOT COLLECTED THIS REPORTING PERIOD.

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTAHOOGA TN 37421

TA0026450
PERMIT NUMBER

105 1
DISCHARGE NUMBER

F - FINAL LIMITS
REGEN TO COOL TWR BLADN LINE

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	04	01		85	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.1	*****	9.0	0	43	BATCHES GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		ONCE/ GRAB BATCH
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	5.8	65		*****	<15	123	1	18	BATCHES COMP
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	25 DAILY AV	83 DAILY MX	LBS/DY	*****	30 DAILY AV	100 DAILY MX	MG/L		ONCE/ COMPOS BATCH
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	<1.7	<4.6		*****	<5.1	7.0	0	18	BATCHES GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	13 DAILY AV	17 DAILY MX	LBS/DY	*****	15 DAILY AV	20 DAILY MX	MG/L		DAILY GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.040	0.109		*****	*****	*****	*****	18	BATCHES GR
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****		ONCE/ CALCTD BATCH
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE	
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		FTS 856-6601	85 05 28
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO DAY

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

SHOULD ABNORMAL CONDITIONS NECESSITATE INCREASED WASTE FLOW ABOVE 0.10 MGD, AS A 7-DAY AVERAGE, DAILY MAXIMUM QUANTITY LIMITATIONS MAY BE EXCEEDED BUT SHALL NOT EXCEED 2 TIMES THE LIMITATIONS LISTED.
A NOTIFICATION OF NONCOMPLIANCE IS ATTACHED.

NOTIFICATION OF NONCOMPLIANCE WITH EFFLUENT LIMITATIONS - NPDES PERMIT
NO. 1N0026450 - SEQUOYAH NUCLEAR PLANT

Description of the discharge--Discharge No. 105 - Condensate demineralizer regeneration waste to the cooling tower blowdown line. A composite sample of four batches released on April 27, 1985 had a total suspended solids (TSS) concentration of 123 mg/l, exceeding the NPDES permit limit of 100 mg/l.

Cause and period of the noncompliance--Tanks are normally released before TSS analyses are made and the operator relies on a turbidity meter for guidance on the level of TSS in the sample. However, the turbidity meter was out of service and the operator misjudged the level of solids and released the tanks. High solids in this waste is unusual. A sample collected on April 26 contained 3.0 mg/l TSS and the one collected on April 28 had 5.8 mg/l TSS. The period of noncompliance was 24 hours.

Steps taken to reduce, eliminate, and prevent recurrence of the noncomplying discharge--The turbidity meter was checked and found to be unrepairable. A replacement unit has been ordered.

JRH:JLD
5/8/85

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 411 E. BRAINERD RD.
CHATTANOOGA TN 37421

DISCHARGE MONITORING REPORT (DMR)

(2-16) TN0026450
PERMIT NUMBER
(17-19) 106 1
DISCHARGE NUMBER

F - FINAL LIMITS
STM GEN BLWDN TO COOL TWR BLDN

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	04	01		85	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

ATTN: JERRY E. LINER

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****		*****				
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	***** MINIMUM	*****	***** MAXIMUM	SU	SEE PERMIT	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT				*****					
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	50 DAILY AV	170 DAILY MX	LBS/DY	*****	30 DAILY AV	100 DAILY MX	MG/L	ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	NO DISCHARGE			*****	*****	*****	*****		
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	ONCE/ MONTH	INSTANT
	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 MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		FTS	856-6601	85 05 28
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
SHOULD INTERNAL PLANT CHEMISTRY REQUIREMENTS, NECESSITATE INCREASED BLOWDOWN FLOW OVER .2 MGD AS A 7 DAY AVERAGE, DAILY MAXIMUM QUANTITY LIMITATIONS MAY BE EXCEEDED BUT SHALL NOT EXCEED 4 TIMES THE LIMITATIONS LISTED.

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16) TH0026450
PERMIT NUMBER
(17-19) 106 2
DISCHARGE NUMBER

F - FINAL LIMITS
STEAM GEN BLWDN (QUARTERLY)

FACILITY
LOCATION

MONITORING PERIOD
FROM
YEAR MO DAY TO YEAR MO DAY
85 04 01 85 06 30
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
OIL AND GREASE (SOXHLET EXTR.) TOT. 00550 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				*****					
	PERMIT REQUIREMENT	25 DAILY AV	33 DAILY MX	LBS/DY	*****	15 DAILY AV	20 DAILY MX	MG/L	QTRLY	GRAB
	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
MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF

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

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE
DATE
FTS 856-6601 85 05 28
AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
SHOULD INTERNAL PLANT CHEMISTRY REQUIREMENTS NECESSITATE INCREASED
BLWDOWN FLOW OVER .2 MGD AS A 7 DAY AVERAGE, DAILY MAXIMUM QUANTITY LIMITATIONS MAY BE EXCEEDED BUT
SHALL NOT EXCEED 4 TIMES THE LIMITATIONS LISTED.

NAME TV4 - SEQUOYA NUCLEAR
ADDRESS 411 E. BRAINERD RD.
CHATTANOOGA TN 37421

 (2-16)
TN0026450
PERMIT NUMBER

 (17-19)
107 1
DISCHARGE NUMBER

 F - FINAL LIMITS
METAL CLN WASTE PND TO COND CH

 FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	04	01		85	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
CHEM. OXYGEN DEMAND (HIGH LEVEL) (COD) 00340 1 0 EFFLUENT GROSS VALUE PH	SAMPLE MEASUREMENT	*****	*****	*****	*****					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MG/L		WEEKLY	COMP-8
00400 1 0 EFFLUENT GROSS VALUE SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****						
	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 SU		WEEKLY	GRAB
00550 1 0 EFFLUENT GROSS VALUE OIL AND GREASE (SOXHLET EXTR.) TOT. 00665 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	30 MG/L		WEEKLY	COMP-8
01042 1 0 EFFLUENT GROSS VALUE IRON, TOTAL (AS FE) 01045 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1.0 MG/L		WEEKLY	COMP-8
	SAMPLE MEASUREMENT	*****	*****	*****	*****					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1.0 MG/L		WEEKLY	COMP-8
	SAMPLE MEASUREMENT	*****	*****	*****	*****					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1.0 MG/L		WEEKLY	COMP-8

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS AREA CODE	856-6601 NUMBER	85 YEAR	05 28 MO DAY

 COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 IN NO CASE SHALL THE QUANTITY DISCHARGED EXCEED THE QUANTITY
 DETERMINED BY MULTIPLYING THE VOLUME OF THE BATCH OF METAL CLEANING WASTE GENERATED BY THE CONCENTRATION.
 SEE PERMIT FOR ADDITIONAL SAMPLING REQUIREMENTS.

NAME IVA - SEQUOYAH NUCLEAR
ADDRESS 5411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16)
TN0026450
PERMIT NUMBER

(17-19)
107 1
DISCHARGE NUMBER

F - FINAL LIMITS
METAL CLW WASTE PND TO COND CH

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	04	01		85	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	NO DISCHARGE			*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	MCD	*****	*****	*****	*****		ONCE/ BATCH	CALCTD
	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 MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			FTS	356-6601	85	05	28
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
IN NO CASE SHALL THE QUANTITY DISCHARGED EXCEED THE QUANTITY
DETERMINED BY MULTIPLYING THE VOLUME OF THE BATCH OF METAL CLEANING WASTE GENERATED BY THE CONCENTRATION.
SEE PERMIT FOR ADDITIONAL SAMPLING REQUIREMENTS.

DISCHARGE MONITORING REPORT (DMR)

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

PERMIT NUMBER TN0026450
DISCHARGE NUMBER 108 1

F - FINAL LIMITS
CONCRETE PLT SETTLING POND

FACILITY _____
LOCATION _____
ATTN: JERRY E. LINER

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	04	01		85	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****		*****				
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	***** MINIMUM	*****	***** MAXIMUM	SU	SEE PERMIT	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****					
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	***** DAILY AV	40 DAILY MX	MG/L	WEEKLY	GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	*****	*****	*****	*****					
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	***** DAILY AV	20 DAILY MX	MG/L	ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	NO DISCHARGE*			*****	*****	*****	*****		
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	WEEKLY	FLOI ND
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE	
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF					
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS AREA CODE	856-6601 NUMBER	85 YEAR	05 MO
				28 DAY	

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
*DISCHARGE IS IN THE PROCESS OF BEING ELIMINATED.

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

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

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

NAME TENNESSEE VALLEY AUTHORITY
ADDRESS 6411 EAST BRAINERD ROAD
CHATTANOOGA, TN 37421
FACILITY SEQUOYAH NUCLEAR PLANT
LOCATION SODDY, TN 37379

TN0026450
PERMIT NUMBER

109
DISCHARGE NUMBER

EMERGENCY DIESEL GENERATOR
NO. 5 COOLING WATER EFFLUENT

MONITORING PERIOD								
YEAR	MO	DAY	YEAR	MO	DAY			
FROM 85	04	01	TO 85	04	30			
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)			

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	NO DISCHARGE		MGD						
	PERMIT REQUIREMENT								1/14	P LOG
ERCW SYSTEM TOTAL CHLORINE RESIDUAL	SAMPLE MEASUREMENT						MG/L			
	PERMIT REQUIREMENT						0.8		1/14	GR
	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

MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

FTS 856-6601

AREA
CODE

NUMBER

85

05

28

YEAR

MO

DAY

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

MONITORING REQUIRED ONLY DURING TESTING PERIOD. ALSO, LIMITATIONS AND MONITORING ARE NOT APPLICABLE DURING AN ACUTAL EMERGENCY SITUATION.

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16) TN0026450
PERMIT NUMBER
(17-19) 110 1
DISCHARGE NUMBER

F - FINAL LIMITS
RECYCLED COOLING WATER FLOW

FACILITY
LOCATION

MONITORING PERIOD
FROM
YEAR MO DAY TO YEAR MO DAY
85 04 01 85 04 30
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 EFFLUENT GROSS VALUE PH	SAMPLE MEASUREMENT	*****	*****	*****	NO DISCHARGE					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	101.0 DAILY AV DAILY MX		DAILY	GRAB10
00400 1 0 EFFLUENT GROSS VALUE CHLORINE, TOTAL RESIDUAL 50060 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****		*****				
	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM		WEEKLY	GRAB
	SAMPLE MEASUREMENT	*****	*****	*****						
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.10 DAILY AV DAILY MX		WEEKLY	GRAB10
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF

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

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE

FTS 856-6601 85 05 28
AREA CODE NUMBER YEAR MO DAY

TYPED OR PRINTED

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

ADDITIONAL MONITORING FROM TN DEPT OF PUBLIC HEALTH CERTIFICATION LETTER OF JAN 31, 1983.
SEE LETTER FOR REQUIREMENTS TO ESTABLISH RELATIONSHIP BETWEEN FISH DISTRESS/KILL AND CHLORINATION LEVEL.

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 5411 E. BRAINERD RD.
CHATTANOOGA TN 37421

PERMIT NUMBER
TN0026450

DISCHARGE NUMBER
111 1

F - FINAL LIMITS
STP DISCHARGE

FACILITY
LOCATION

MONITORING PERIOD						
FROM			TO			
YEAR	MO	DAY	YEAR	MO	DAY	
85	04	01	85	04	30	
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)	

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
BOD, 5-DAY (20 DEG. C) 00310 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.34	0.50	LBS/DY	*****	24	36	MG/L	0 2/30	GR
PH	PERMIT REQUIREMENT	3.8 30DA AVG	5.0 9.3 DAILY MX		*****	30	45			
00400 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	SU	SEE PERMIT	
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.46	0.83	LBS/DY	*****	19	20	MG/L	0 2/30	GR
CHLORINE, TOTAL RESIDUAL 50060 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.8 6.3 30DA AVG	5.0 5.6 DAILY MX		*****	30 30DA AVG	45 DAILY MX			
FECAL COLIFORM	SAMPLE MEASUREMENT	0.012	0.036	MGD	*****	*****	*****	*****	0 22/30	WEIR
	PERMIT REQUIREMENT	0.015 DAILY AV	***** DAILY MX		*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	1.0	1.6	1.9	MG/L	0 22/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	***** DAILY AV	2.0 DAILY MX			
	SAMPLE MEASUREMENT				<10	>1337	>2000	N/100 ML	4 6/30	GR
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE	
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS 856-6601 AREA CODE NUMBER	85 05 28 YEAR MO DAY	

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

A NOTIFICATION OF NONCOMPLIANCE IS ATTACHED.

NOTIFICATION OF NONCOMPLIANCE WITH EFFLUENT LIMITATIONS - NPDES PERMIT
NO. TN0026450 - SEQUOYAH NUCLEAR PLANT

Description of the Discharge--Discharge No. 111 - Sewage treatment plant effluent. The following grab samples had biochemical oxygen demand (BOD) and fecal coliform (FC) concentrations in excess of the NPDES permit limitations of 45 mg/l and 1,000/ml, respectively.

<u>Date</u>	<u>Parameter</u>	<u>Concentration</u>
3/20/85	BOD	55 mg/l
4/10/85	FC	>2,000/ml
4/11/85	FC	>2,000/ml
4/12/85	FC	>2,000/ml
4/16/85	FC	>2,000/ml

Cause and Period of the Noncompliance--The pumps that pump sewage from the septic tanks to the sand filters failed on March 18 resulting in no flow to the sand filters. The operator was not aware of the problem and turned the effluent pumps to manual to collect a sample. He pumped only 800 gallons out of the wetwell and it is suspected this unusual low level fluctuation in the wetwell caused the excess BOD. The pumps were repaired and a sample recollected on March 26 which had a BOD of 20 mg/l. Although very little sewage was actually discharged, the maximum period of non-compliance was six days.

The sand filter effluent pumps began to pump irratically on April 10. The problem was diagnosed as faulty water level controls which caused the pumps to fail to pump automatically, but they could still be pumped manually. The operator would turn one pump on manually and then collect his sample. This did not allow enough contact time to effectively disinfect the sewage before the sample was taken. This same procedure was used to collect all of the samples listed above. A sample collected on April 19 had a FC concentration of <10/ml. The maximum period of noncompliance was therefore 27 days. However, it could have been as little as nine days.

Steps Taken to Reduce, Eliminate, and Prevent Recurrence of the Noncomplying Discharge--The pumps were repaired and the effluent pumps are operated manually while the level controls are being repaired. Also, an analysis of the flow problem was made and a procedure developed to keep flows more steady and sampling more representative of the discharge.

JRH:JLD
4/30/85

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 5411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-16) TN0026450
PERMIT NUMBER
(17-19) 112 1
DISCHARGE NUMBER

F - FINAL LIMITS
STP DISCHARGE

FACILITY _____
LOCATION _____

MONITORING PERIOD
FROM
YEAR MO DAY TO YEAR MO DAY
85 04 01 85 04 30
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	<div></div>	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.008	0.020	MGD					0	22/30	GR
	PERMIT REQUIREMENT	0.0.025	NA								
BOD ₅	SAMPLE MEASUREMENT	0.85	1.0	LBS/DAY	12	16	20	MG/L	0	2/30	GR
	PERMIT REQUIREMENT	6.3	8.3			30	40			2/30	GR
SUSPENDED SOLIDS	SAMPLE MEASUREMENT	0.24	0.25	LBS/DAY	4.0	4.5	5.0	MG/L	0	2/30	GR
	PERMIT REQUIREMENT	6.3	8.3			30	40			2/30	GR
TOTAL CHLORINE RESIDUAL	SAMPLE MEASUREMENT				0.5	1.2	1.8	MG/L	0	22/30	GR
	PERMIT REQUIREMENT						2.0			5/7	GR
FECAL COLIFORM	SAMPLE MEASUREMENT				<10	<340	>1000	N/100 ML	1	3/30	GR
	PERMIT REQUIREMENT				NA	NA	1000			2/30	GR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.	TELEPHONE	DATE			
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS AREA CODE	856-6601	85	05
TYPED OR PRINTED						

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

A NOTIFICATION OF NONCOMPLIANCE IS ATTACHED.

NOTIFICATION OF NONCOMPLIANCE WITH EFFLUENT LIMITATIONS - NPDES PERMIT
NO. TN0026450 - SEQUOYAH NUCLEAR PLANT

Description of the discharge--Discharge No. 112 - Sewage treatment plant effluent. The effluent had a fecal coliform (FC) concentration of greater than 1,000/ml on April 25, 1985; exceeding the NPDES limitation of 1,000/ml.

Cause and period of the noncompliance--The chlorine feed pumps malfunctioned on April 23, 1985, resulting in insufficient disinfection.

Repeat samples collected on April 30, had a FC concentration of <10 /ml. A sample collected on April 10, also had a FC concentration of <10 /ml. Therefore, the maximum period of noncompliance was 20 days, but it probably was no more than six days.

Steps taken to reduce, eliminate, and prevent recurrence of the noncomplying discharge--The chlorinator pumps were repaired and returned to service on April 29, 1985.

JRH:JLD
5/8/85

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 5411 E. BRAIDERS RD.
CHATTANOOGA TN 37421

TH0026450
PERMIT NUMBER

113 1
DISCHARGE NUMBER

F - FINAL LIMITS
STP TO COND COOLING WATER CHAN

FACILITY
LOCATION
ATTN: JERRY E. LINER

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	04	01		85	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
BOD, 5-DAY (20 DEG. C) 00310 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.27	0.46		*****	35	42		1	2/30 GR
PH	PERMIT REQUIREMENT	7.5 30DA AVG	10 11.3 DAILY MX	LBS/DY	*****	30 30DA AVG	45 DAILY MX	MG/L		TWICE/GRAB MONTH
00400 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	SU		SEE PERMIT
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.31	0.50		*****	44	46		2	2/30 GR
SOLIDS, SETTLEABLE 00545 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	7.5 30DA AVG	10 11.3 DAILY MX	LBS/DY	*****	30 30DA AVG	45 DAILY MX	MG/L		TWICE/GRAB MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.1	<0.1		0	21/30 GR
CHLORINE, TOTAL RESIDUAL 50060 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1.0 DAILY AV	ML/L		WEEK- GRAB DAYS
	SAMPLE MEASUREMENT	0.0012	0.0076		*****	*****	*****	*****	0	21/30 WEIR
	PERMIT REQUIREMENT	0.030 DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****		WEEK- FLOIND DAYS
	SAMPLE MEASUREMENT	*****	*****	*****	0.5	0.9	1.5		0	21/30 GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	2.0 DAILY MX	MG/L		WEEK- GRAB DAYS
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE	
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE 856-6601	YEAR 85 MO 05 DAY 28

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
THERE WAS NO FLOW ONE DAY THIS REPORTING PERIOD.
A NOTIFICATION OF NONCOMPLIANCE IS ATTACHED.

NOTIFICATION OF NONCOMPLIANCE WITH EFFLUENT LIMITATIONS - NPDES PERMIT
NO. TN0026450 - SEQUOYAH NUCLEAR PLANT

Description of the discharge--Discharge No. 113 - Sewage treatment plant effluent. A grab sample of the effluent on April 25, 1985 had a total suspended solids (TSS) concentration of 46 mg/l, exceeding the NPDES permit maximum limitation of 45 mg/l.

Cause and period of noncompliance--The major cause of problems at this plant is lack of sewage flow. Personnel contributing flow to this system have been partially relocated and the flow has decreased to around 2,000 gpd. The plant is designed for 30,000 gpd, but has been baffled down to 15,000 gpd capacity. It is still grossly underloaded even at 15,000 gpd capacity. No repeat samples were collected in April. The last good sample was collected on April 10 and had 42 mg/l TSS. Therefore, the maximum period of noncompliance in April was 20 days.

Steps taken to reduce, eliminate, and prevent recurrence of the noncomplying discharge--The operator has tried to alter operations to cope with the inadequate feed. He has adjusted air rates and sludge wasting rates, but the plant still remains very near the compliance limits. The TVA Office of Engineering is evaluating the total site sewage systems with the objective of eliminating one or two of the four plants and consolidating all sewage flows into the remaining systems. A preliminary recommendation is due May 17, 1985.

JRH:JLD
5/8/85

DISCHARGE MONITORING REPORT (DMR)

 F - FINAL LIMITS
STP DISCHARGE TO TENN RIVER

 NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

 TN0026450
PERMIT NUMBER

 114 1
DISCHARGE NUMBER

 FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	04	01		85	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
BOD, 5-DAY (20 DEG. C) 00310 1 0 EFFLUENT GROSS VALUE PH	SAMPLE MEASUREMENT	0.53	1.0		*****	7.1	11		0 2/30	GR		
	PERMIT REQUIREMENT	3.8 30DA AVG	5.6 DAILY MX	LBS/DY	*****	30 30DA AVG	45 DAILY MX	MG/L		TWICE/GRAB MONTH		
	SAMPLE MEASUREMENT	*****	*****	*****	6.1	*****	6.8		0 10/30	GR		
	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		TWICE/GRAB WEEK		
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.0	2.0		*****	14	22		0 2/30	GR		
	PERMIT REQUIREMENT	3.8 30DA AVG	5.6 DAILY MX	LBS/DY	*****	30 30DA AVG	45 DAILY MX	MG/L		TWICE/GRAB MONTH		
SOLIDS, SETTLEABLE 00545 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.1	<0.1		0 22/30	GR		
	PERMIT REQUIREMENT	*****	*****	*****	*****	30DA AVG	1.0 DAILY MX	ML/L		TWICE/GRAB WEEK		
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.008	0.018		*****	*****	*****	*****	0 22/30	WEIR		
	PERMIT REQUIREMENT	.010 DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****		WEEK- DAYS FLOIND		
COLIFORM, FECAL GENERAL 74055 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<10	<10	#/	0 2/30	GR		
	PERMIT REQUIREMENT	*****	*****	*****	*****	30DA GEO	1000 DAILY MX	100ML		TWICE/GRAB MONTH		
CHLORINE RESIDUAL	SAMPLE MEASUREMENT				0.5	1.4	1.9	MG/L	0 22/30	GR		
	PERMIT REQUIREMENT						2.0			WEEK- DAYS GR		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)						TELEPHONE		DATE		
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF												
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT						FTS AREA CODE	856-6601	85	05	28
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)								NUMBER		YEAR	MO	DAY

NAME TVA - SEQUOYAH NUCLEAR
 ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

(2-15)
TN0026450
 PERMIT NUMBER

(17-19)
114 2
 DISCHARGE NUMBER

STP DISCHARGE TO TENN RIVER

FACILITY _____
 LOCATION _____

ATTN: JERRY E. LINER

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	04	01		85	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT				*****						
00310 1 0	PERMIT REQUIREMENT	3.8	5.6	LBS/DY	*****	30	45	MG/L		TWICE/GRAB	
EFFLUENT GROSS VALUE		30DA AVG	DAILY MX			30DA AVG	DAILY MX			MONTH	
PH	SAMPLE MEASUREMENT	*****	*****	*****		*****					
00400 1 0	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0	SU		TWICE/GRAB	
EFFLUENT GROSS VALUE					MINIMUM		MAXIMUM			WEEK	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT				*****						
00530 1 0	PERMIT REQUIREMENT	3.8	5.6	LBS/DY	*****	30	45	MG/L		TWICE/GRAB	
EFFLUENT GROSS VALUE		30DA AVG	DAILY MX			30DA AVG	DAILY MX			MONTH	
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****						
00545 1 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1.0	ML/L		TWICE/GRAB	
EFFLUENT GROSS VALUE						30DA AVG	DAILY MX			WEEK	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT				*****	*****	*****	*****			
50050 1 0	PERMIT REQUIREMENT	.005	*****	MGD	*****	*****	*****	*****		WEEK - FLOIN	
EFFLUENT GROSS VALUE		DAILY AV	DAILY MX							DAYS	
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	*****	*****			#/			
74055 1 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1000	100ML		TWICE/GRAB	
EFFLUENT GROSS						30DA GEO	DAILY MX			MONTH	
DISSOLVED OXYGEN	SAMPLE MEASUREMENT				6.5	7.0	7.5	MG/L	0	22/30	GR
	PERMIT REQUIREMENT				1.0					5/7	GR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS	856-6601	85	05
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

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

NAME TVA - SEQUOYAH NUCLEAR
 ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

 TN0026450
 PERMIT NUMBER

 115 1
 DISCHARGE NUMBER

 F - FINAL LIMITS
 VEHICLE WASH POND EFFLUENT

 FACILITY _____
 LOCATION _____
 ATTN: JERRY E. LINER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
85	04	01	85	04	30
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****		*****				
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****					
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	40 DAILY MX	MG/L	WEEKLY	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****					
00545 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.5 DAILY MX	ML/L	WEEKLY	GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	*****	*****	*****	*****					
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	15 DAILY AV	20 DAILY MX	MG/L	WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	NO DISCHARGE*			*****	*****	*****	*****		
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	WEEKLY	FLOIN
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF TYPED OR PRINTED			856-6601	85	05	28

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

*DISCHARGE IS IN THE PROCESS OF BEING ELIMINATED.

SEQUOYAH NUCLEAR PLANT - TN0026450
WATER TEMPERATURE DATA FOR DISCHARGE SERIAL NUMBER 101
DIFFUSER GATE TO TENNESSEE RIVER

<u>Date</u>	<u>Maximum Downstream Temperature (°F)</u>	<u>Maximum River ΔT (°F)</u>	<u>Maximum Ambient Temperature (°F)</u>
02/01/85	39.5	2.6	41.3
02/02/85	39.9	3.4	41.0
02/03/85	39.0	3.5	39.2
02/04/85	39.5	3.5	39.3
02/05/85	39.3	3.5	39.9
02/06/85	39.9	3.7	40.1
02/07/85	42.0	5.2	40.1
02/08/85	39.5	3.7	39.9
02/09/85	39.7	3.7	39.5
02/10/85	40.2	3.8	39.7
02/11/85	39.7	5.4	40.1
02/12/85	40.8	5.1	39.5
02/13/85	39.2	3.7	39.0
02/14/85	39.0	3.7	38.6
02/15/85	39.2	3.6	39.2
02/16/85	39.3	2.4	39.3
02/17/85	39.9	2.5	39.9
02/18/85	41.1	3.6	40.1
02/19/85	44.6	5.6	40.2
02/20/85	44.4	*	*
02/21/85	42.6	*	41.1
02/22/85	44.9	*	41.9
02/23/85	48.5	5.7	43.1
02/24/85	51.4	5.8	44.6
02/25/85	52.1	5.6	45.1
02/26/85	51.9	5.6	46.2
02/27/85	53.6	5.6	46.5
02/28/85	53.0	5.9	46.9

*Computer malfunction.

SEQUOYAH NUCLEAR PLANT - TN0026450
WATER TEMPERATURE DATA FOR DISCHARGE SERIAL NUMBER 101
DIFFUSER GATE TO TENNESSEE RIVER

<u>Date</u>	<u>Maximum Downstream Temperature (°F)</u>	<u>Maximum River ΔT (°F)</u>	<u>Maximum Ambient Temperature (°F)</u>
03/01/85	52.8	5.7	45.8
03/02/85	52.5	5.5	46.4
03/03/85	52.8	5.6	46.2
03/04/85	53.6	5.4	46.9
03/05/85	53.7	5.3	48.5
03/06/85	54.5	5.5	48.3
03/07/85	54.3	5.5	48.2
03/08/85	54.5	5.4	48.3
03/09/85	56.4	5.1	50.1
03/10/85	57.0	5.3	50.5
03/11/85	57.5	5.2	50.3
03/12/85	57.9	5.2	51.0
03/13/85	57.3	5.4	51.8
03/14/85	57.7	5.2	51.4
03/15/85	57.9	5.3	52.1
03/16/85	56.8	4.2	51.2
03/17/85	57.2	4.0	51.6
03/18/85	56.1	4.1	52.3
03/19/85	57.2	5.1	51.4
03/20/85	57.0	4.4	54.1
03/21/85	56.8	4.1	52.5
03/22/85	56.4	3.7	52.8
03/23/85	57.2	4.0	52.5
03/24/85	57.9	3.8	53.0
03/25/85	57.7	3.4	53.2
03/26/85	58.4	*	53.7
03/27/85	58.2	4.7	53.4
03/28/85	58.8	4.5	54.5
03/29/85	59.9	4.5	55.4
03/30/85	62.4	4.4	57.3
03/31/85	62.4	3.9	57.5

*Computer malfunction.

SEQUOYAH NUCLEAR PLANT - TN0026450
WATER TEMPERATURE DATA FOR DISCHARGE SERIAL NUMBER 101
DIFFUSER GATE TO TENNESSEE RIVER

<u>Date</u>	<u>Maximum Downstream Temperature (°F)</u>	<u>Maximum River ΔT (°F)</u>	<u>Maximum Ambient Temperature (°F)</u>
04/01/85	61.8	3.5	57.5
04/02/85	61.3	3.2	57.3
04/03/85	62.7	4.2	57.9
04/04/85	64.4	4.2	58.2
04/05/85	63.3	4.0	58.6
04/06/85	64.4	3.3	60.2
04/07/85	65.1	3.2	60.7
04/08/85	63.6	3.2	58.4
04/09/85	62.7	2.9	58.1
04/10/85	*	2.5	*
04/11/85	63.1	2.2	59.0
04/12/85	63.6	2.2	61.3
04/13/85	63.8	2.0	62.7
04/14/85	63.8	0.9	62.0
04/15/85	65.3	1.7	61.8
04/16/85	*	4.1	*
04/17/85	*	-3.2	*
04/18/85	69.4	-2.4	66.2
04/19/85	70.8	-3.7	66.5
04/20/85	69.2	-5.2	68.9
04/21/85	68.7	-6.6	70.5
04/22/85	68.9	-5.8	70.1
04/23/85	69.8	-2.6	67.6
04/24/85	69.2	-2.7	68.0
04/25/85	69.9	-3.6	70.1
04/26/85	69.9	-3.8	70.5
04/27/85	71.2	-3.6	69.9
04/28/85	71.2	-4.4	72.1
04/29/85	71.2	-5.4	73.7
04/30/85	72.5	-4.8	73.0