

Facility Name/Location (if different)

NAME N.E. UTILITIES (MILLSTONE)ADDRESS NORTHEAST UTILITIES SERVICE COROPE FERRY ROADWATERFORD CT 06385FACILITY N.E. UTILITIES (MILLSTONE)LOCATION WATERFORD CT 06141-0270ATTN: RONALD G. CHEVALIER, VP

## NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

## DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

CT0603263

PERMIT NUMBER

01C 5

DISCHARGE NUMBER

MAJOR

(SUBR 2)

F - FINAL

#3 HEAT EXCHANG (SERVICE WATER EFFLUENT

Form Approved

OMB No. 2040-0004

\*\*\* NO DATA \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****	40	( 15)	0	%/07 ES
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	100 MAXIMUM	DEG.F		WEEKLY INSTAN
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****	N/A	( 12)		
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	REPORT MAXIMUM	SU		WEEKLY GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****	N/A	( 19)		
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	REPORT INST MAX	MG/L		WEEKLY GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLAN 50050 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	43.2	( 03)	*****	*****	*****		0	%/07 ES
	PERMIT REQUIREMENT	*****	43.2 DAILY MX	MGD	*****	*****	*****	****	SEE PERMIT	INSTAN
CHLORINE, FREE AVAILABLE 50064 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.24	( 19)	0	%/07 GR
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.25 DAILY MX	MG/L		WEEKLY GRAB
	SAMPLE MEASUREMENT						1.5		1	25/30 GR
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  R.G. CHEVALIER VICE PRESIDENT  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  Q9C	TELEPHONE	DATE			
			203 666-5315	93	05	10	
			AREA CODE	NUMBER	YEAR	MO	DAY

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

9611140068 961030  
PDR ADOCK 05000336  
R PDR

PERMITTEE NAME (Include Facility Name/Location if different)

NAME N.E. UTILITIES (MILLSTONE)  
 ADDRESS NORTHEAST UTILITIES SERVICE CO  
ROPE FERRY ROAD  
WATERFORD CT 06385  
 FACILITY N.E. UTILITIES (MILLSTONE)  
 LOCATION WATERFORD CT 06141-0270

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

(2-16)

(17-19)

CT0003263

PERMIT NUMBER

005 1

DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY	TO	YEAR	MO	DAY
93	02	07		93	02	28

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

MAJOR  
 (SUBR 2)  
 F - FINAL  
 NON-CONTAMINATED FLOOR DRAINS  
 EFFLUENT

Form Approved  
 OMB No. 2040-0004

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

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (66-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW RATE	SAMPLE MEASUREMENT		*****	( 07 )	*****	*****	*****			
00056 1 0 1	PERMIT REQUIREMENT	REPORT	*****	GPD	*****	*****	*****			SEE INSTAN PERMIT
EFFLUENT GROSS VALUE		NO AVG								
SOLIDS, TOTAL	SAMPLE MEASUREMENT	*****	*****		*****	*****	*****			
SUSPENDED	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****			SEE GRAB PERMIT
00530 1 0 1				****			30.0 MAXIMUM			
EFFLUENT GROSS VALUE										
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****		*****	*****	*****			
FREON EXTR-GRAV METH	PERMIT REQUIREMENT	*****	*****	****	*****	*****	20.0 INST MAX			SEE GRAB PERMIT
00556 1 0 1				****						
EFFLUENT GROSS VALUE										
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

R.G. CHEVALIER  
 VICE PRESIDENT

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY KNOWLEDGE OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 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

203 665-5315

AREA CODE

NUMBER

DATE

93 05 10

YEAR MO DAY

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

DETAILED EXPLANATIONS OF ALL PERMIT VIOLATIONS & PROPOSED CORRECTIVE ACTIONS SHALL BE APPENDED.  
 MONITOR MONTHLY FOR OIL & GREASE WHEN OIL SEPARATOR DISCHARGE OCCURS. IF NO DISCHARGE OCCURS, WRITE "NO"  
 DISCHARGE. IN THE TOP RIGHT CORNER OF THE DMR AND LEAVE RUN, BLOCKS BLANK.

00151/070614-1122

PAGE 1 OF

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

NAME N.E. UTILITIES (MILLSTONE)  
ADDRESS NORTHEAST UTILITIES SERVICE CO  
ROPE FERRY ROAD  
WATERFORD CT 06185  
FACILITY N.E. UTILITIES (MILLSTONE)  
LOCATION WATERFORD CT 06141-0270

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)  
CT0003263  
PERMIT NUMBER

(17-19)  
008 1  
DISCHARGE NUMBER

MAJOR  
(SUBR 2)  
F - FINAL

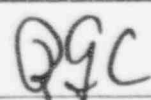
Form Approved  
OMB No. 2040-0004

NON-CONTAMINATED FLOOR DRAINS  
EFFLUENT

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

ATTN: RONALD G. CHEVALIER, VP

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (66-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW RATE	SAMPLE MEASUREMENT		*****	( 07 )	*****	*****	*****	*****			
00056 1 0 1	PERMIT REQUIREMENT	REPORT	*****	GPD	*****	*****	*****	*****		SEE INSTAI	
EFFLUENT GROSS VALUE		NO AVG								PERMIT	
SOLIDS, TOTAL	SAMPLE MEASUREMENT	*****	*****		*****	*****	*****	*****	( 19 )		
SUSPENDED	PERMIT REQUIREMENT	*****	*****	****	*****	*****	30.0	MG/L		SEE GRAB	
00530 1 0 1				****			MAXIMUM			PERMIT	
EFFLUENT GROSS VALUE											
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****		*****	*****			( 19 )		
FREON EXTR-GRAV METH	PERMIT REQUIREMENT	*****	*****	****	*****	*****	20.0	MG/L		SEE GRAB	
00556 1 0 1				****			INST MAX			PERMIT	
EFFLUENT GROSS VALUE											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 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			
R.G. CHEVALIER VICE PRESIDENT  TYPED OR PRINTED			203 665-5315	93 05 10	AREA CODE	NUMBER	YEAR

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

DETAILED EXPLANATIONS OF ALL PERMIT VIOLATIONS & PROPOSED CORRECTIVE ACTIONS SHALL BE APPENDED.  
MONITOR FOR OIL & GREASE ONLY WHEN OIL SEPARATOR DISCHARGE OCCURS.



Facility Name/Location (if different)

NAME N.E. UTILITIES (MILLSTONE)  
 ADDRESS NORTHEAST UTILITIES SERVICE CO  
20PF FERRY ROAD  
WATERFORD CT 06195  
 FACILITY N.E. UTILITIES (MILLSTONE)  
 LOCATION WATERFORD CT 06141-0270

## DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

CTC003263

009 1

PERMIT NUMBER

DISCHARGE NUMBER

MAJOR

(SUBR 2)

Form Approved

OMB No. 2040-0004

F - FINAL

NON-CONTAMINATED FLOOR DRAINS  
 EFFLUENT

\*\*\* NO DATA 121 \*\*\*

NOTE: Read instructions before completing this form.

ATTN: RONALD G. CHEVALIER, VP

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (34-41)			QUALITY OR CONCENTRATION (34-41)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS (54-61)	MINIMUM (38-43)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS (54-61)			
FLOW RATE	SAMPLE MEASUREMENT	*****	( 07 )		*****	*****	*****	*****			
00056 1 0 1	PERMIT REQUIREMENT	REPORT NO SVG	*****	GPD	*****	*****	*****	*****		SEE INSTAL PERMIT	
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****	*****	*****			
SOLIDS, TOTAL SUSPENDED	PERMIT REQUIREMENT	*****	*****	****	*****	*****	30.0	MG/L		SEE GRAB PERMIT	
00530 1 0 1	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	20.0	MG/L		SEE GRAB PERMIT	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	INST MAX	MG/L			
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****		*****	*****					
FREON EXTR-GRAV METH	PERMIT REQUIREMENT	*****	*****	****	*****	*****					
00556 1 0 1	SAMPLE MEASUREMENT	*****	*****		*****	*****					
EFFLUENT GROSS VALUE	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 203 685-5315	DATE 93 05 10			
R.G. CHEVALIER VICE PRESIDENT			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT DGC	AREA CODE	NUMBER	YEAR
TYPED OR PRINTED						

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

DETAILED EXPLANATION OF ALL PERMIT VIOLATIONS AND PROPOSED CORRECTIVE ACTIONS SHALL BE APPENDED.  
 MONITOR FOR OIL & GREASE WHEN OIL SEPARATOR DISCHARGE OCCURS.

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

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MONITOR FOR OIL & GREASE WHEN OIL SEPARATOR DISCHARGE OCCURS.

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. (REPLACES EPA FORM T-66 WHICH MAY NOT BE USED.) 00475/930414-1122 PAGE 1 OF