

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

NAME H.S. UTILITIES (MILLSTONE)  
 ADDRESS NORTHEAST UTILITIES SERVICE CO  
WORK FERRY ROAD  
WATERFORD CT 06385  
 FACILITY H.S. UTILITIES (MILLSTONE)  
 LOCATION WATERFORD CT 06141-027 FROM  
 ATTN: DONALD G. CHEVALIER, VP

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

CTC003263

CIC 5

PERMIT NUMBER

DISCHARGE NUMBER

MAJOR

Form Approved

(SUBR 2)

OMB No. 2040-0004

F - FINAL

83 HEAT EXCHANG (SERVICE WATER EFFLUENT)

\*\*\* 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 (58-65)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. FAHRENHEIT 00611 1 0 1 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****		*****	*****	75	( 15)		0 0/07	IN
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	100 MAXIMUM	DEG.F		WEEKLY	INSTA
FLOW, IN CONDUIT OR TREATMENT PLAS 50050 1 0 1 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	43.2	( 03)	*****	*****	*****			0 0/07	IN
	PERMIT REQUIREMENT	*****	43.2 DAILY MX	MGD	*****	*****	*****	****		SEE INSTA	PERMIT
CHLORINE, FREE AVAILABLE 50064 1 0 1 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.37	( 19)		1 0/07	GR
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.25 DAILY MX	MG/L		WEEKLY	GRAB
	SAMPLE MEASUREMENT						0.37		2	40/30	GR
	PERMIT REQUIREMENT										
	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 INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. Penalties under these statutes may include fines up to \$100,000 and/or maximum imprisonment of between 6 months and 5 years.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

203 885-5315

AREA CODE

NUMBER

DATE

93 10 28

YEAR MO DAY

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

9611140122 961030  
PDR ADOCK 05000336  
R PDR

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)  
NAME H.P. UTILITIES (MILLSTONE)  
ADDRESS NORTHEAST UTILITIES SERVICE CO  
1025 PERRY ROAD  
MARTINBORO CT 06385  
FACILITY H.P. UTILITIES (MILLSTONE)  
LOCATION MARTINBORO CT 06141-0277  
ATTN: DONALD G. CHEVALIER, VP

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)  
CTC003263  
PERMIT NUMBER  
1C6 3  
DISCHARGE NUMBER

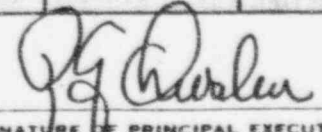
MAJOR (SUBR 2)  
F - FINAL  
#3 AUXILIARY BOILER BLOWDOWN  
EFFLUENT

Form Approved  
OMB No. 2040-0004

MONITORING PERIOD  
YEAR MO DAY TO YEAR MO DAY  
93 09 01 TO 93 09 30  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

\*\*\* 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 (46-53)	MAXIMUM (54-55)	UNITS (56-57)	MINIMUM (58-59)	AVERAGE (60-61)	MAXIMUM (62-63)	UNITS (64-65)			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****					
	PERMIT REQUIREMENT	*****	*****	***	*****	*****	210.0 MAXIMUM	DEG.F		WEEKLY	GRAB
FLOW RATE 00056 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****		( 07 )	*****	*****	*****				
	PERMIT REQUIREMENT	*****	72000 DAILY MX GPD		*****	*****	*****	***		WEEKLY	TOTAL
HYDRAZINE 01313 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****		( 19 )			
	PERMIT REQUIREMENT	*****	*****	***	*****	*****	75.0 INST MAX	MG/L		WEEKLY	COMPOS
	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 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 203 865-5315 AREA CODE NUMBER	DATE 93 10 28 YEAR MO DAY
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SAMPLING ONLY REQUIRED WHEN AUXILIARY BOILER IS IN OPERATION.

IF NO DISCHARGE OCCURS, WRITE "NO DISCHARGE" ON THE TOP RIGHT CORNER OF THE DMR & LEAVE NON. BLOCKS BLANK.

REPLACES EPA FORM 7-89 WHICH MAY NOT BE USED.  
EPA Form 3320-1 (Rev. 8-88) Previous editions may be used.

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

NAME N.E. UTILITIES (MILLSTONE)

ADDRESS NORTHEAST UTILITIES SERVICE CO

ROPE FERRY ROAD

WATERFORD CT 06395

FACILITY N.E. UTILITIES (MILLSTONE)

LOCATION WATERFORD CT 06141-0273 FROM

ATTN: RONALD G. CHEVALIER, VP

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

CT0003263

PERMIT NUMBER

005 1

DISCHARGE NUMBER

MAJOR

(SUBR 2)

F - FINAL

Form Approved

OMB No. 2040-0004

NON-CONTAMINATED FLOOR DRAINS  
EFFLUENT

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

NOTE: Read instructions before completing this form

MONITORING PERIOD

YEAR	MO	DAY	TO	YEAR	MO	DAY
93	09	01		93	09	30

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

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

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (58-65)			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW RATE	SAMPLE MEASUREMENT	*****	*****	( 07)	*****	*****	*****			
00056 1 0 1	PERMIT REQUIREMENT	REPORT	*****		*****	*****	*****			
EFFLUENT GROSS VALU		NO AVG		GPD						
SOLIDS, TOTAL	SAMPLE MEASUREMENT	*****	*****		*****	*****	*****			
SUSPENDED	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****			
00530 1 0 1										
EFFLUENT GROSS VALU										
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****		*****	*****	*****			
FANON EXTR-GRAV MET	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****			
00555 1 0 1										
EFFLUENT GROSS VALU										
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

**NO DISCHARGE**

*Not Sampled*

30.0  
MAXIMUM  
MG/L

20.0  
INST MAX  
MG/L

SEE INST  
PERMIT

SEE INST  
PERMIT

SEE INST  
PERMIT

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

TELEPHONE

203/685-5315

AREA  
CODE

NUMBER

DATE

93 10 28

YEAR MO DA

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

DETAILED EXPLANATIONS OF ALL PERMIT VIOLATIONS & PROPOSED CORRECTIVE ACTIONS SHALL BE APPENDED.

MONITOR CONTINUALLY FOR OIL & GREASE WHEN OIL SEPARATOR DISCHARGE OCCURS. IF NO DISCHARGE OCCURS, WRITE "NO

DISCHARGE" IN THE SPACE PROVIDED FOR THE OIL AND GREASE MONITORING RESULTS.



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

NAME W. J. UTILITIES (MILLSTONE)  
 ADDRESS NORTHEAST UTILITIES SERVICE CO  
1021 FERRY ROAD  
WATERFORD CT 06185  
 FACILITY W. J. UTILITIES (MILLSTONE)  
 LOCATION WATERFORD CT 06141-0270  
 ATTN: RONALD G. CHEVALIER, VP


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

PERMIT NUMBER CTG003263  
 DISCHARGE NUMBER 008 1

MONITORING PERIOD  
 YEAR MO DAY TO YEAR MO DAY  
93 03 01 TO 93 03 30  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR 2) Form Approved CMB No. 2040-0004  
 F - FINAL  
 NON-CONTAMINATED FLOOR DRAINS  
 EFFLUENT  
 \*\*\* NO DATA \*\*\*  
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	<div></div>	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (58-65)				NO. EX (64-68)	FREQUENCY OF ANALYSIS (69-70)	SAMPLE TYPE (71-72)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW RATE	SAMPLE MEASUREMENT		*****	( 07 )	*****	<del>*****</del> NO DISCHARGE					
00056 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	*****	GPD	*****	*****	*****	****		SEE INSTA PERMIT	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	Not Sampled			( 19 )		
00330 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	30.0 MAXIMUM	MG/L		SEE GRAB PERMIT	
OIL AND GREASE FAVON EXT-GRAV METH	SAMPLE MEASUREMENT	*****	*****		*****	*****		( 19 )			
00556 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	20.0 INST MAX	MG/L		SEE GRAB PERMIT	
	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 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		
			203 665-5315		93	10	28
			AREA CODE	NUMBER	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 FOR OIL & GREASE ONLY WHEN OIL SEPARATOR DISCHARGE OCCURS.

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

NAME E.E. UTILITIES (MILLSTONE)  
ADDRESS NORTHEAST UTILITIES SERVICE CO  
1024 PERRY ROAD  
WATERFORD CT 06395  
FACILITY E.E. UTILITIES (MILLSTONE)  
LOCATION WATERFORD CT 06141-0270

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

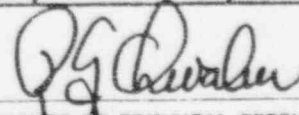
(2-16)  
CTC003263  
PERMIT NUMBER

(17-19)  
009 1  
DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
93	09	31	TO	93	09	30
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MAJOR (SUBR 2)  
F - FINAL  
NON-CONTAMINATED FLOOR DRAINS  
EFFLUENT  
\*\*\* 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	FREQUENCY OF ANALYSIS	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW RATE	SAMPLE MEASUREMENT		*****	( 07 )	*****	<del>NO DISCHARGE</del>				
00056 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	*****	GPD	*****	*****	*****	***	SEE INSTA PERMIT	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	Not Sampled			( 19 )	
00530 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	30.0 MAXIMUM	MG/L	SEE GRAB PERMIT	
OIL AND GREASE EXON EXTRA-GRAV MET	SAMPLE MEASUREMENT	*****	*****		*****	*****		( 19 )		
00530 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	20.0 INST MAX	MG/L	SEE GRAB PERMIT	
	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	10	28

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

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

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

NAME WILLIAMSON UTILITIES (WILLIAMSON)  
 ADDRESS WILLIAMSON UTILITIES SERVICE CO  
1000 PERRY ROAD  
WATERBURY CT 06705  
 FACILITY WILLIAMSON UTILITIES (WILLIAMSON)  
 LOCATION WATERBURY CT 06705-0275

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

(2-16)  
 CT00032b3  
 PERMIT NUMBER

(17-19)  
 016 1  
 DISCHARGE NUMBER

MAJOR (SUBA 2) Form Approved OMB No. 2040-0004  
 2 - FINAL

NONCONTAMINATED FLOOR DRAINS  
 EFFLUENT

\*\*\* NO DATA 1-1 \*\*\*  
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT (46-53)	QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (62-69)				NO. EX (70-71)	FREQUENCY OF ANALYSIS (72-73)	SAMP TYP (69-7)
		AVERAGE (54-55)	MAXIMUM (56-57)	UNITS (58-59)	MINIMUM (62-63)	AVERAGE (64-65)	MAXIMUM (66-67)	UNITS (68-69)			
FLOW RATE			*****	( 07 )	*****	*****	*****	*****			
00056 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	*****	6PD	*****	*****	*****	*****		SEE INST PERMIT	
SOLIDS, TOTAL SUSPENDED			*****	*****	*****	*****	*****	*****			
00530 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		SEE INST PERMIT	
OIL AND GREASE			*****	*****	*****	*****	*****	*****			
PAZON EXTRA-GRAV SET	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		SEE INST PERMIT	
00556 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		SEE INST PERMIT	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NO DISCHARGE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: **H.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 18 USC § 1332. Penalties under these statutes may include fines up to \$100,000 and/or maximum imprisonment of between 6 months and 5 years.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT: *H.G. Chevalier*

TELEPHONE: 865-5315  
 DATE: 10/10

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

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