

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)

(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

MONITORING PERIOD

FROM

YEAR

MO

DAY

TO

YEAR

MO

DAY

(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) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			(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	SAMPLE MEASUREMENT	*****	*****	*****	69.2	72.4	75.2		0	31/30	GR		
00011 P 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	DEG.F		SEE PERMIT	GRAB10		
SEE COMMENTS BELOW													
TEMPERATURE, WATER DEG. FAHRENHEIT	SAMPLE MEASUREMENT	*****	*****	*****	65.8	76.5	85.2		0	31/30	REC		
00011 Q 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	112.5	DEG.F		CONTINUOUS	CORDR		
SEE COMMENTS BELOW													
TEMPERATURE, WATER DEG. FAHRENHEIT	SAMPLE MEASUREMENT	*****	*****	*****			*						
00011 R 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	97.0	DEG.F		CONTINUOUS	CORDR		
SEE COMMENTS BELOW													
TEMPERATURE, WATER DEG. FAHRENHEIT	SAMPLE MEASUREMENT	*****	*****	*****			*						
00011 6 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	101.0	DEG.F		DAILY	GRAB		
DOWNSTREAM MONITOR													
TEMP DIFF. BETWEEN SAMPLE AND UPSTREAM	SAMPLE MEASUREMENT	*****	*****	*****	-4.2	-0.96	2.4		0	31/30	GR		
00018 4 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	5.4	DEG.F		SEE PERMIT	GRAB10		
UP- AND DOWN-STREAM							INST MX						
PH	SAMPLE MEASUREMENT	*****	*****	*****			*****						
00400 1 0	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0	SU		SEE PERMIT			
EFFLUENT GROSS VALUE					MINIMUM		MAXIMUM						
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	1467	1563		*****	*****	*****	*****	0	CONT	REC		
50050 1 0	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		CONTINUOUS	CORDR		
EFFLUENT GROSS VALUE													

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 08 28

AREA CODE

NUMBER

YEAR

MO

DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all applicable laws)

CORRESPONDS TO AMBIENT TEMPERATURE, 'O' TO OPEN MODE, 'S' TO CLOSED MODE. INDICATE WHICH IS APPROPRIATE.

SEE PERMIT FOR FURTHER MONITORING REQUIREMENTS.

*PLANT OPERATED IN OPEN MODE ALL MONTH.

8509030503 850531

PDR ADOCK 05000327

R PDR

050527/850117-1039/M

PAGE 1 OF 2

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

TH0026450
PERMIT NUMBER

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	05	01		85	05	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)			UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	<0.1	<0.1	<0.1		0	23/30	CALC
50060 1 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.10	MG/L		WEEK=	CALCTD
EFFLUENT GROSS VALUE							INST MX			DAYS	
TEMPERATURE RATE OF CHANGE DEG. F/HOUR	SAMPLE MEASUREMENT	0.14	2.1	DEG F/H	*****	*****	*****	*****	0	31/30	CAL
74029 0 0	PERMIT REQUIREMENT	*****	3.6	HOUR	*****	*****	*****	*****		SEE	CALCTD
DOWNSTEAM MONITOR			INST MX							PERMIT	
DOWNSTEAM TEMPERATURE	SAMPLE MEASUREMENT	70.4	76.8	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	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	08 28
TYPED OR PRINTED		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.
SEE PERMIT FOR FURTHER MONITORING REQUIREMENTS.

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

(2-16)

(17-19)

F - FINAL LIMITS
YARD DRAINAGE POND EFFLUENT

TN0026450
PERMIT NUMBER

102 1
DISCHARGE NUMBER

FACILITY
LOCATION

MONITORING PERIOD						
YEAR			MO	DAY	TO	
FROM			YEAR	MO	DAY	
85			05	01	85	05 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	*****	*****	*****	7.7	*****	9.0	0	14/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	THREE/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****	10	42	0	22/30	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	5/30	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	*****	*****	MGD	*****	*****	*****	*****	CONTINUOUS	RECORD
	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.)	TELEPHONE		DATE		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		FTS 856-6601	85	08 28
		AREA CODE	NUMBER	YEAR	MO	DAY

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

NAME TVA - SEQUOYA NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421
FACILITY _____
LOCATION _____
TTN: JERRY E. LINER

(2-16) TH0026450
PERMIT NUMBER

(17-19) 103 1
DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
85	05	01	85	05	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

F - FINAL LIMITS
LOW VOL WASTE TREAT POND EFFL

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	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	*****	8.0	*****	9.67		8	19/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		THREE/ WEEK	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	26	69		*****	5.1	13		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/GRAB WEEK	
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	<25	<29		*****	<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/GRAB WEEK	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.67	1.8		*****	*****	*****	*****	0	31/30	CAL
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****		DAILY TOTAL	2
	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 AREA NUMBER	85	08

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.

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>
5/16/85	9.33 9.31
5/21/85	9.67 9.65
5/28/85	9.64 9.61
5/30/85	9.59 9.58

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 and makeup 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>
5/15-16	36
5/17-21	101
5/23-28	117
5/29-30	23

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 turbine building sump pH is being checked routinely to detect rising pH conditions before the pH of the pond becomes critical. Acid can then be added to the sump through the waste neutralizer tank.

JRH:EAM
4/28/85

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
RADNSTE SYST TO COOL TWR BLWDN

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	05	01		85	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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PARAMETER (32-37)	<div></div>	(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				UNITS
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.2	*****	6.8	SU	0	8/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM				TWICE/GRAB WEEK
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	1.8	3.3	LBS/DY	*****	11	22	MG/L	0	8/30	COMP
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	13 DAILY AV	42 DAILY MX		*****	30 DAILY AV	100 DAILY MX				TWICE/COMPOS WEEK
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	<0.81	<1.4	LBS/DY	*****	<5.0	<5.0	MG/L	0	8/30	GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	6.3 DAILY AV	8.3 DAILY MX		*****	15 DAILY AV	20 DAILY MX				TWICE/GRAB WEEK
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.021	0.072	MGD	*****	*****	*****	*****	0	29/30	REC
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX		*****	*****	*****	*****			ONCE/RCORDR BATCH
	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.)	TELEPHONE		DATE		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		FTS 856-6601	85	08 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.

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) 105 1
DISCHARGE NUMBER

F - FINAL LIMITS
REGEN TO COOL TWR BLNDN LINE

FACILITY
LOCATION
TTL: JERRY E. LINER

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	05	01		85	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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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	*****	*****	*****	6.0	*****	9.0	0	48 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	2.9	9.4		*****	11	45	0	24 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	<1.4	<2.9		*****	<5.0	5.6	0	24 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	0.032	0.069		*****	*****	*****	*****	24 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
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
AREA CODE NUMBER
DATE
85 08 28
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)

(17-19)

F - FINAL LIMITS
STN GEN BLDN TO COOL TWR BLDN

TN0026450
PERMIT NUMBER

106 1
DISCHARGE NUMBER

FACILITY
LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	05	01		85	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

JERRY E. LINDER											
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	MAXIMUM				UNITS
PH	SAMPLE MEASUREMENT	*****	*****	*****		*****					
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	***** MINIMUM	*****	***** MAXIMUM	SU	SEE PERMIT		
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	<5.4	14		*****	<6.1	8.7		0	3/30 GRAB	
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	0.075	0.187		*****	*****	*****	*****	0	3/30 INST	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****		ONCE/ MONTH INSTAN	
OIL AND GREASE	SAMPLE MEASUREMENT	<3.1	<7.8	LBS/DAY	<5.0	<5.0	<5.0	MG/L	0	3/30 GRAB	
	PERMIT REQUIREMENT									1/90 GRAB	
	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		856-6601	85 08 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

TN0026450
PERMIT NUMBER

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	05	01		85	05	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			
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	WEEKLY	COMP-8
PH	SAMPLE MEASUREMENT	*****	*****	*****		*****				
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			LBS/DAY	*****					
	PERMIT REQUIREMENT		250		*****	***** DAILY AV	30 DAILY MX	MG/L	WEEKLY	COMP-8
OIL AND GREASE (SOXHLET EXTR.) TOT. 00550 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			LBS/DAY	*****					
	PERMIT REQUIREMENT		125		*****	***** DAILY AV	15 DAILY MX	MG/L	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	MG/L	WEEKLY	COMP-8
COPPER, TOTAL (AS CU) 01042 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			LBS/DAY	*****					
	PERMIT REQUIREMENT		8.3		*****	***** DAILY AV	1.0 DAILY MX	MG/L	WEEKLY	COMP-8
IRON, TOTAL (AS FE) 01045 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			LBS/DAY	*****					
	PERMIT REQUIREMENT		8.3		*****	***** DAILY AV	1.0 DAILY MX	MG/L	WEEKLY	COMP-8

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	08 28
TYPED OR PRINTED		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.

NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 5411 E. BRAINERD RD.
CHATTANOOGA TN 37421
FACILITY _____
LOCATION _____
TTN: JERRY E. LINER

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

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
85	05	01		85	05	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

F - FINAL LIMITS
METAL CLN WASTE PND TO COND CH

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(+ Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	NO DISCHARGE			*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		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										
	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	08	28
TYPED OR PRINTED		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.

MONITORING PERIOD
FROM
YEAR MO DAY
85 05 01
(20-21) (22-23) (24-25)
TO
YEAR MO DAY
85 05 31
(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	***** DAILY MX	40 MG/L	WEEKLY GRAB	
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	*****	*****	*****	*****					
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	***** DAILY AV	***** DAILY MX	20 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									
	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 3 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
856-6601
AREA CODE NUMBER

DATE
85 08 28
YEAR MO DAY

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

EPA Form 3320-1 (Rev. 10-79) PREVIOUS EDITION TO BE USED UNTIL SUPPLY IS EXHAUSTED (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED)

000581/850117-1039/M

PAGE 1 OF 1

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

EMERGENCY DIESEL GENERATOR
NO. 5 COOLING WATER EFFLUENT

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

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

(2-16)
TN0026450
PERMIT NUMBER

(17-19)
109
DISCHARGE NUMBER

MONITORING PERIOD								
YEAR			MO			DAY		
FROM	85	05	01	TO	85	05	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 (45-53)			(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	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										
	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 AREA CODE	856-6601 NUMBER	85 YEAR	08 MO

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
FACILITY _____
LOCATION _____
ATTN: JERRY E. LINER

TN0026450
PERMIT NUMBER

110 1
DISCHARGE NUMBER

F - FINAL LIMITS
RECYCLED COOLING WATER FLOW

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	05	01		85	05	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 1 0 EFFLUENT GROSS VALUE PH	SAMPLE MEASUREMENT	*****	*****	*****	NO DISCHARGE					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	101.0 DAILY AV DAILY MX	DEG.F	DAILY	GRAB10
00400 1 0 EFFLUENT GROSS VALUE CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****		*****				
	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	WEEKLY	GRAB
50060 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****		*****				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.10 DAILY AV DAILY MX	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 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	08	28
		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.

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

TH0026450
PERMIT NUMBER

111 1
DISCHARGE NUMBER

F = FINAL LIMITS
STP DISCHARGE

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	85	05	01		85	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

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 (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	1.1	1.2	LBS/DY	*****	***** 15	***** 17	*****	0	2/30	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.8 30DA AVG	5.0 9.5 DAILY MX		*****	***** 30	***** 45	*****	TWICE/GRAB MONTH		
PH	SAMPLE MEASUREMENT	*****	*****	*****		*****					
00400 1 0	PERMIT REQUIREMENT	*****	*****	*****	***** MINIMUM	*****	***** MAXIMUM	SU		SEE PERMIT	
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.73	0.76	LBS/DY	*****	10	13	MG/L	0	2/30	GR
00530 1 0	PERMIT REQUIREMENT	3.8 6.3 30DA AVG	5.0 5.5 DAILY MX		*****	30 30DA AVG	45 DAILY MX		TWICE/GRAB MONTH		
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.007	0.029	MGD	*****	*****	*****	*****	0	22/30	WEIR
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	0.015 DAILY AV	***** DAILY MX		*****	*****	*****	*****	WEEK- DAYS	FLOIND	
50050 1 0	SAMPLE MEASUREMENT	*****	*****	*****	0.3	1.6	1.9	MG/L	0	22/30	GR
EFFLUENT GROSS V LUE	PERMIT REQUIREMENT	*****	*****	*****	*****	***** DAILY AV	2.0 DAILY MX		WEEK- DAYS	GRAB	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT				<10	<10	<10	N/100 ML	0	2/30	GR
50060 1 0	PERMIT REQUIREMENT				NA	NA	1000		2/30	GR	
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
FECAL COLIFORM	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	08 28
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)		AREA CODE	NUMBER	YEAR	MO	DAY

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

(2-16)

(17-19)

F - FINAL LIMITS
STP DISCHARGE

TN0026450
PERMIT NUMBER

112 1
DISCHARGE NUMBER

FACILITY
LOCATION

MONITORING PERIOD								
YEAR			MO			DAY		
FROM	85	05	01	TO	85	05	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 (45-53)			(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	0.016	0.061	MGD				0	23/30	WEIR
	PERMIT REQUIREMENT	0.025	NA						5/7	WEIR
BOD ₅	SAMPLE MEASUREMENT	1.5	1.7	LBS/DAY	18	18	18	0	2/30	GR
	PERMIT REQUIREMENT	6.3	9.3			30	45		2/7	GR
SUSEPNDSD SOLIDS	SAMPLE MEASUREMENT	0.26	0.28	LBS/DAY	3.0	3.0	3.0	0	2/30	GR
	PERMIT REQUIREMENT	6.3	9.3			30	45		2/30	GR
TOTAL CHLORINE RESIDUAL	SAMPLE MEASUREMENT				0.8	1.4	1.9	0	23/30	GR
	PERMIT REQUIREMENT						2.0		5/7	GR
FECAL COLIFORM	SAMPLE MEASUREMENT				<10	<10	<10	0	2/30	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 TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS 856-6601	85	08	28
		AREA CODE	NUMBER	YEAR	MO	DAY

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

MONITORING PERIOD
YEAR MO DAY
FROM 85 05 01 TO 85 05 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

PERMIT NUMBER
TNOU26450
DISCHARGE NUMBER
113.1

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (34-61)			QUANTITY OR CONCENTRATION (34-63)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS (52-53)	MINIMUM (48-45)	AVERAGE (46-53)	MAXIMUM (54-61)			
BOD, 5-DAY (20 DEG. C)		1.2	3.6		*****	21	54	1	4/30	GR
00310 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	7.5 30DA AVG	11.3 DAILY MX	LBS/DY	*****	30DA AVG	45 DAILY MX		TWICE/ MONTH	GRAB
PH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****			
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		SEE PERMIT	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	1.9	4.1		*****	77	170	5	7/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	7.5 30DA AVG	11.3 DAILY MX	LBS/DY	*****	30DA AVG	45 DAILY MX		TWICE/ MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.1	<0.1	0	23/30	GR
00545 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	DAILY AV	1.0 DAILY MX		WEEK= DAYS	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.003	0.008		*****	*****	*****	0	23/30	WEIR
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.030 DAILY AV	***** DAILY MX	MGD	*****	*****	*****	0	WEEK= DAYS	FLOIND
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	1.1	1.8	0	23/30	GR
50060 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	DAILY AV	2.0 DAILY MX		WEEK= DAYS	GRAB
FECAL COLIFORM	SAMPLE MEASUREMENT	*****	*****	*****	*****	<10	<10	0	2/30	GR
	PERMIT REQUIREMENT						1000	0	2/30	GR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	DATE
TYPED OR PRINTED		85-6601		ETS	85	08 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. 113 - Sewage treatment plant effluent. This discharge was reported to be in noncompliance at the end of April 1985. Grab samples collected in May had the following concentrations of Biochemical Oxygen Demand (BOD) and Total Suspended Solids (TSS) which exceeded the NPDES permit limits.

<u>Date</u>	<u>Parameter</u>	<u>Concentration</u>
5/2/85	TSS	170 mg/l
5/3/85	TSS	140 mg/l
5/7/85	TSS	160 mg/l
5/10/85	TSS and BOD	54 mg/l

Cause and Period of the Noncompliance--As explained in the April notice, the main cause of the noncompliances was a decrease in sewage flow which temporarily upset the plant. The first sample in May to exhibit compliance was collected May 15, 1985. It contained a BOD value of 16 mg/l and a TSS value of 22 mg/l. Therefore, the maximum period of noncompliance in May was 15 days.

Steps Taken to Reduce, Eliminate, and Prevent Recurrence of the Noncomplying Discharge--Air flow and sludge wasting rates were adjusted. The excess old sludge was also pumped out. The plant has operated satisfactorily under the reduced load since these adjustments were made.

A preliminary decision has been made to relocate this plant to the DSN 112 plant site, eliminate DSN 114 and 111, and consolidate all sewage flows into the revised 112/113 system. Engineering details and schedules are being developed.

JRH:EAM
6/27/85

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(17-19)

PERMITTEE NAME/ADDRESS (Include
Facility Name/Location if different)
NAME - TVA - SEQUOYAH NUCLEAR
ADDRESS 411 E. BRAINERD RD.
CHATTANOOGA TN 37421

F - FINAL LIMITS
STP DISCHARGE TO TENN RIVER

TH0026450
PERMIT NUMBER

114-1
DISCHARGE NUMBER

MONITORING PERIOD			
YEAR	MO	DAY	PERIOD
85	05	01	TO 85 05 31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS (54-61)	MINIMUM (48-49)	AVERAGE (46-53)	MAXIMUM (54-61)			
BOD, 5-DAY (20 CGG, C)	0.45	0.90		*****	7.1	12	0	2/30	GR
00310 1 0	3.8	5.6	LBS/DY	*****	30DA AVG	45		TWICE/MONTH	GRAB
EFFLUENT GROSS VALUE	*****	*****		6.3	*****	6.7	0	12/30	GR
PH	*****	*****		*****	*****	*****		TWICE/GRAB	
00400 1 0	*****	*****		6.0	*****	9.0		TWICE/GRAB	
EFFLUENT GROSS VALUE	*****	*****		*****	*****	*****		WEEK	
SOLIDS, TOTAL SUSPENDED	1.0	2.0		*****	24	27	0	2/30	GR
00530 1 0	3.8	5.6	LBS/DY	*****	30DA AVG	45		TWICE/MONTH	GRAB
EFFLUENT GROSS VALUE	*****	*****		*****	*****	*****	0	22/30	GR
SOLIDS, SETTLABLE	*****	*****		*****	<0.1	<0.1		TWICE/GRAB	
00545 1 0	*****	*****		*****	30DA AVG	1.0		TWICE/GRAB	
EFFLUENT GROSS VALUE	*****	*****		*****	*****	*****		WEEK	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	0.005	0.009	MGD	*****	<10	<10		22/30	WEIR
50050 1 0	0.010	*****		*****	*****	*****		WEEK - DAYS	FLOIND
EFFLUENT GROSS VALUE	*****	*****		*****	*****	*****		2/30	GR
COLIFORM, FECAL GENERAL	*****	*****		*****	30DA GEO	1000		TWICE/MONTH	GRAB
74055 1 0	*****	*****		*****	1.1	1.9	0	22/30	GR
EFFLUENT GROSS VALUE	*****	*****		*****	2.0	2.0		WEEK - DAYS	GR
TOTAL RESIDUAL CHLORINE									
1. 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.									
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER				TELEPHONE	
MARTIN E. RIVERS, DIRECTOR				[Signature]				DATE	
OF ENVIRONMENTAL QUALITY				[Signature]				DATE	
STAFF				[Signature]				DATE	
TYPED OR PRINTED				OFFICER OR AUTHORIZED AGENT				DATE	
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)				AREA CODE				DATE	
				85 08 28				DATE	
				85 08 28				DATE	
				85 08 28				DATE	

F - FINAL LIMITS
STP DISCHARGE TO TEND. RIVER

TH0026450
PERMIT NUMBER

114 2
DISCHARGE NUMBER

NAME TWA - SEQUOYA NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

MONITORING PERIOD			
YEAR	MO	DAY	TO
85	05	01	85 05 31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (34-35)		(3 Card Only) QUANTITY OR CONCENTRATION (34-35)		AVERAGE		MINIMUM		MAXIMUM		UNITS		NO. EX		FREQUENCY OF ANALYSIS (54-55)		SAMPLE TYPE (59-70)	
BOD, 5-DAY (20 DEG. C)		3.8		5.6		30DA AVG		*****		30		30DA AVG		*****		*****		*****	
00310 1 0		*****		*****		*****		*****		*****		*****		*****		*****		*****	
EFFLUENT GROSS VALUE		*****		*****		*****		*****		*****		*****		*****		*****		*****	
PH		*****		*****		*****		*****		*****		*****		*****		*****		*****	
00400 1 0		*****		*****		*****		*****		*****		*****		*****		*****		*****	
EFFLUENT GROSS VALUE		*****		*****		*****		*****		*****		*****		*****		*****		*****	
SOLIDS, TOTAL		*****		*****		*****		*****		*****		*****		*****		*****		*****	
SUSPENDED		*****		*****		*****		*****		*****		*****		*****		*****		*****	
00530 1 0		*****		*****		*****		*****		*****		*****		*****		*****		*****	
EFFLUENT GROSS VALUE		*****		*****		*****		*****		*****		*****		*****		*****		*****	
SOLIDS, SETTLEABLE		*****		*****		*****		*****		*****		*****		*****		*****		*****	
00545 1 0		*****		*****		*****		*****		*****		*****		*****		*****		*****	
EFFLUENT GROSS VALUE		*****		*****		*****		*****		*****		*****		*****		*****		*****	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		*****		*****		*****		*****		*****		*****		*****		*****		*****	
50050 1 0		*****		*****		*****		*****		*****		*****		*****		*****		*****	
EFFLUENT GROSS VALUE		*****		*****		*****		*****		*****		*****		*****		*****		*****	
COLIFORM, FECAL GENERAL		*****		*****		*****		*****		*****		*****		*****		*****		*****	
74055 1 0		*****		*****		*****		*****		*****		*****		*****		*****		*****	
EFFLUENT GROSS VALUE		*****		*****		*****		*****		*****		*****		*****		*****		*****	
DISSOLVED OXYGEN		*****		*****		*****		*****		*****		*****		*****		*****		*****	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		SIGNATURE OF PRINCIPAL EXECUTIVE		OFFICE OR AUTHORIZED AGENT		TELEPHONE		DATE	
MARTIN E. RIVERS, DIRECTOR		[Signature]		[Signature]		[Phone]		[Date]	
OF ENVIRONMENTAL QUALITY		[Signature]		[Signature]		[Phone]		[Date]	
STAFF		[Signature]		[Signature]		[Phone]		[Date]	
TYPED OR PRINTED		[Signature]		[Signature]		[Phone]		[Date]	
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)									

Form Approved
OMB No. 2040-0
Expires 2-29-84
EFFLUENT

1000

	(# Card Only)	QUALITY OR
LOADING		

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 38 U.S.C. § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between months and 5 years.

OFFICER OR AUTHORIZED AGENT

AREA CODE	NUMBER	YEAR	MO	DAY
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*DISCHARGE IS IN THE PROCESS OF BEING ELIMINATED